

<https://www.welt.de/wissenschaft/plus194562065/Transsexualitaet-Geschichte-eines-gescheiterten-Geschlechtswechsels.html>

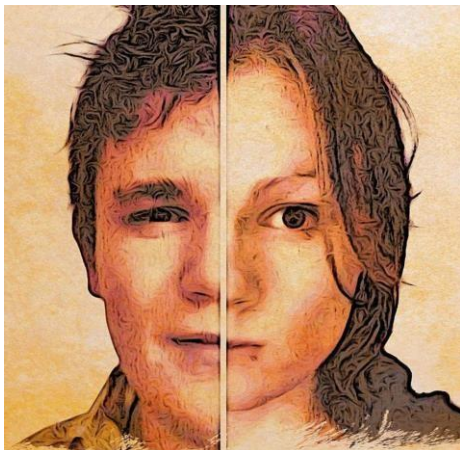
Transsexuality

## History of a failed sex change

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by [Heike Vowinkel](#)  
Chief Reporter



"Daddy, I think I'm a girl," Alex said. He became Alexa.  
Source: private

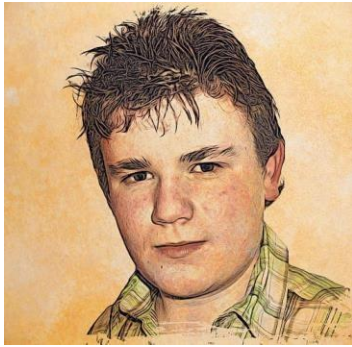
Worldwide, the number of young people who call themselves transgender is increasing. Some people want to change their sex. For some this means salvation, but it can also lead to despair, as the story of Alex and Lena shows.

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One evening, Alexander was 16, he watched television with his father, then talked about this and that, and suddenly he said: "Daddy, I think I'm a girl." The father didn't know what to say, wanted to sound understanding, not too shocked. Then said something like: "You'll figure that out in time." He doesn't remember it that well. Only Alex asked him not to tell his mother. He did it anyway. Alex was mad, the mother says today, because the father hadn't kept his mouth shut. They both actually didn't take it that serious back then.

They didn't talk about it again for a long time, neither the parents nor Alex. The father thought it had probably just been a crazy idea. The mother pushed it far away, so far away that she didn't even remember when Alex, he was 18 then and doing his A-levels, wrote a letter to her. He put it on her bed side table. On several pages he wrote why he thought he was living in the wrong body.

Five days passed before she finally spoke to him about the letter.



**At 16, Alex first told his father that he felt like a girl.** Source: Private archive

Thus began the transformation of the eldest son of Michael and Maria Huber into a daughter. Her boy, the strong 90-kilo lad who, like his father, loved to ride heavy motorcycles, who had chopped up wood with his grandfather's chainsaw, sat on the tractor while his neighbours were making hay, her boy now wanted to be a girl. A man who dresses like a woman, of course, they knew about that. But their son in the wrong body? How could that be?

Maria Huber remembers Alex telling about how he searched the Internet for answers that would explain his doubts. He told of people whose bodies looked like those of a man or woman, but who in reality felt the opposite. That this phenomenon is recognised by science and that medicine can be used to change sex. The name could be changed, too.

And he told of Lena, whom he had met on a platform on the Internet. Lena, whose name was Tom when she was a child and who first noticed at almost twelve years of age, that this boy's body did not fit her, who took hormones at 15, so that she did not even go through male puberty. He told how much he envied Lena for never growing facial hair.



**Alexander as a toddler** Source: Private archive

The Huber family actually has a different name. The parents want to tell Alex's story because he himself thought that his transformation from son to daughter had been a mistake. But they also want to protect themselves from hostility. They feel disturbed by the fact that in the public usually knows only one narrative how people can become happier: namely the one that leads to a change of sex. This narrative describes teenagers who suffer in their own existence, and transition turns them into self-confident adults. This path is the perfect solution for identity crises and knows no regrets. Only with Alex, it solved nothing. It led straight to despair.

## Alex' and Lena's path began immediately

It was Lena who explained to Alex what this path might look like. She took it herself. For her, it was the salvation, she says. In Lena's environment, only her family and old friends know her name used to be Tom. She wants it to stay that way because she now lives in a different town. She is 25, one year younger than Alex, she studies medicine, wants to be a surgeon in a few years to help others change their sex. The way she was helped by surgery. Nobody in her university environment suspects that she hasn't always been female. That's why she doesn't want her real name published.

Alex's path is easier to understand if you know Lena's, too. As different as the two paths ended, in the beginning there was the same question for both of them: Who am I? The boy I see in the mirror, or the girl I secretly feel like?

People who, like Alex and Lena, do not identify with the gender attributed to them by their bodies call themselves transgender, transidentified or transsexual. The terms themselves are controversial, because they testify to how someone defines gender - more physically (sex), socially (gender) or as an identity issue (ID). Unlike intersexuals, transpeople are assigned a clear gender at birth, but this does not fit their self-perception.

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### **Glossary of Gender Diversity**

**Agender:** Sexless, feeling unsexed or gender-neutral

**Bisexual:** Feeling sexually attracted to both men and women

**Cisgender:** (cis = Latin for this side, within) people who identify the sex that is given to them by/ assigned at birth

**Gender:** the social gender, including gender roles and expectations of them.

**Gender fluid:** frequent changes in gender perception

**Gender identity:** The deeply felt personal feeling of belonging to a particular gender.

**Intersexual:** born with both male and female physical characteristics

**LSBTIQ:** abbreviation for Lesbian, Gay, Bisexual, Trans\*, Inter\* and Queers

**Queer:** people who / a school of thought that question(s) bisexual and heterosexual norms

**Transgender:** People who cannot or do not want to live with their biological sex

**Transition:** transition from one gender/sex to another

**Transphobia:** Discrimination against Transpeople

**Transsexual:** The feeling of belonging to the opposite sex is so strong that it leads to psychological suffering if not treated / with sex-reassignment

**Transvestites:** People who wear "cross-gender" clothes without permanently wanting to change sex - also called 'cross dressers'

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They are boys and men who feel female, girls and women who feel male. This disagreement between physical and self-perceived gender is what medicine calls gender mismatch or incongruence. If they suffer psychologically from it, medicine calls it gender dysphoria. Transsexuality is seen in medicine as a distinct form of gender dysphoria, which can only be overcome by means of gender-changing measures.

The biological causes of this are still unclear. There is [evidence](#) that specific hormone levels, abnormalities in the functions of receptors for [sexualhormones](#) or certain neuronal developments during pregnancy may trigger prolonged sex dysphoria. But as yet, nobody knows exactly.

## Anpassung des Vornamens und Geschlechtseintrags, Verfahren nach dem Transsexuellengesetz



### Rise in case numbers to change first name and gender marker, according to German legislation (Transsexuellengesetz). Source: Info graphic WELT

Depending on which [study](#), 4.26 out of 100,000 people are said to be transgender, other studies assume a multiple number. Not everyone who feels they are in the wrong body finds this so stressful that they seek medical help to change it by hormones and surgery, so that it corresponds to their perceived gender. But the number of those who go down this path has risen continuously in recent years - [worldwide](#).

Above all, however, the number of adolescents who consider themselves transgender has grown rapidly. This is a consistent experience in all specialised centres in Germany, Great Britain or the US.

In Great Britain, for example, 94 minors turned to the experts of the "Gender Identity Development Service" of the London-based [Tavistock-Klinik](#), the only British centre for children and adolescents with gender dysphoria, in 2010. Last year it was 2519.

In Münster, one of the four largest specialist centres treating Trans minors, in Germany (alongside Hamburg, Frankfurt and Munich), the number of people seeking advice has more than doubled within four years from 70 to around 180 last year. The other German clinics report similar results.

## Geschlechtsangleichende Operationen in Kliniken

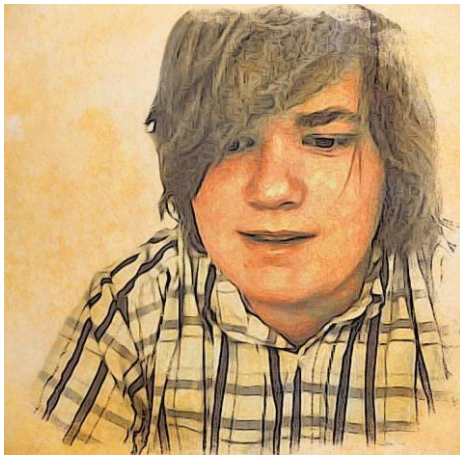


### Number of gender-reassignment surgeries in hospitals. red line: FTM, blue line: MTF Source: Info graphic WELT

Anyone who talks to doctors, parents and trans people and reads research studies quickly realises that the issues of what causes the increase and what is the right way to deal with the development are controversial, almost like a cultural struggle.

These questions touch on fundamental issues: How can it be established beyond doubt whether someone is transsexual, i.e. the transsexual development is right for them? And how should minors be treated? With extensive medical procedures? These are questions with no simple answers, but they decide on happiness and misfortune and for some people even on life and death. Nothing shows this better than the stories of Alex and Lena.

On a sunny morning, Maria and Michael Huber sit at the wooden table in the kitchen of their house. A red folder with blocks, articles, expert opinions is on the table. Alex's laptop is unfolded in front of Maria Huber, with photos of Alex in childhood, as a chubby ten-year-old, as a stocky teenager. And finally: Thousands of Selfies of Alexa - as a starved girl in underwear, in tight jeans, in the gym. These are self-portraits of a transformation.



**Alex let her hair grow as a sign of femininity.** Source: Private archive

Alex was a bright, smart child, says the mother. Later she will leaf through the photo album with the dark green cover in his room. All those pictures of Alex on the arm of the proud grandparents, with a wet sponge in his hand washing their car at four-years-old. Photos of an ordinary childhood in a Bavarian village. With a tree house behind their house, a home which the parents, she's a secretary, he's a truck driver, have worked hard for. A childhood with kids playing in the neighbourhood's street, with family parties.

Nothing indicated to Maria and Michael Huber that their eldest son could be anything other than a boy. A sensitive boy, that's what his mother says. Highly sensitive. Also quickly irritated. He always wanted to be right, the father says. Alex was smart, learning came easy to him. A child with few friends who, as he will write later in retrospect, often felt bullied, misunderstood, lonely. But none who ever said "I'd rather be a girl".

### **The long-term criterion**

When does it start to become apparent whether someone is transsexual? Researchers disagree about that. Some are convinced that one usually notices in childhood whether there is a persistent gender dysphoria indicating a transsexual development. The so-called life-time or long-term criterion is one of several important indications of this. The child rejects its genitals early and/or very vehemently, prefers to wear stereotypical clothes or attributes of the opposite sex or prefers to play with cars instead of dolls or vice versa.

Among the doctors who consider these early signs to be important are Hartmut Bosinski, a sexologist, physician, psychotherapist and paediatrician from Kiel, as well as Alexander Korte, a psychiatrist and therapist for children and adolescents, who works as a senior consultant at the

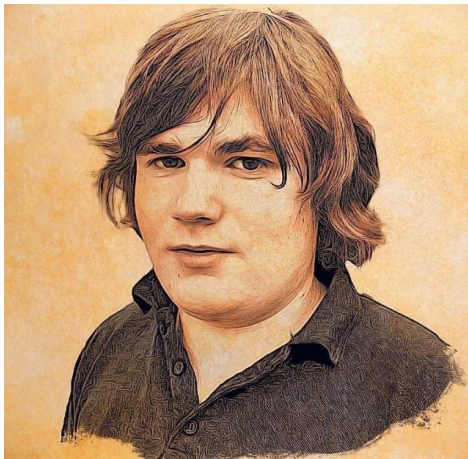


Munich Clinic, one of the four German specialist centres for the treatment of gender dysphoria in children and adolescents. However, more and more children who consider themselves to be transgender come to both of them only at the beginning of puberty or during puberty, without there having been any signs of this beforehand. A development that other centres are also observing. Korte and Bosinski think this is worrying.

Puberty is one of the most important phases of psychological and biological change in a person's life. For most, it also triggers great confusion in identity issues. Korte and Bosinski therefore believe that the gender dysphoria of many who now suddenly come to them is more the result of a pubertal maturation crisis than the sign of an actual transsexual development.

Many youths report "role models" in their social environment or in social media as triggers, so the doctors see "social contagion". They both see the grown acceptance of diversity, which they both welcome, as a factor. But also the, in their opinion, "trivializing public portrayal of gender reassignment."

For many young people, diversity is indeed normal. The media representation of transsexuals has contributed to this. They appear on "Germany's Next Top Model", are serialised heroes ("Pose", "Transparent") or appear in public like the former pole vaulter Yvonne [Buschbaum](#), who now calls herself Balian. On [YouTube](#), teenagers openly talk about their sex change, about the fact that they are [genderfluid](#), that is to say they sometimes feel masculine, sometimes feminine or even agender, i.e. beyond a binary gender classification of man and woman.



**And Alex started taking hormones.** Source: Private archive

What is striking is that more girls than boys are now convinced that they are transgender. In former times, there was one girl for every four boys. Today, there are three girls for every one boy. No one knows why that is.

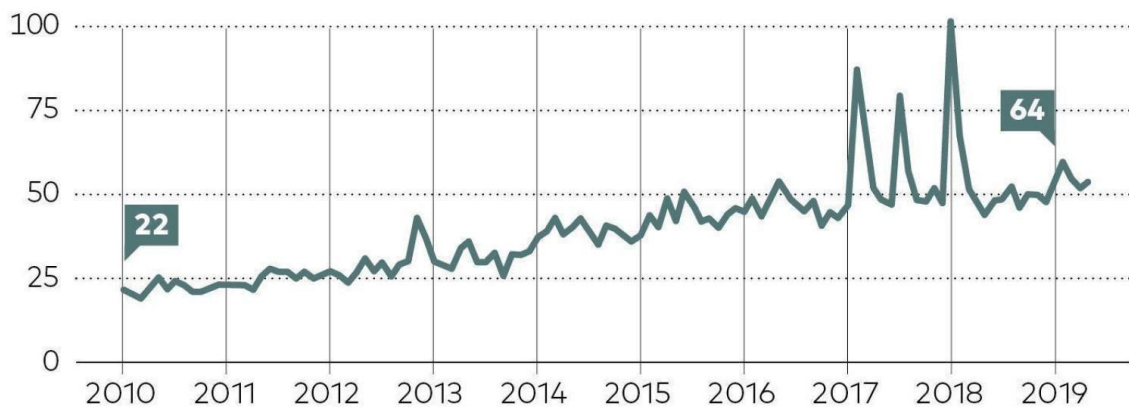
Korte thinks one reason is that girls often find puberty particularly unpleasant, they find periods painful or shameful. He and Bosinski say they have many young people with a multitude of other mental health problems on their case load. Identifying as transgender may be a coping strategy for some of them to deal with negative emotions during puberty, much like self-harming behaviour and drug abuse.

[Transgender-Activists](#) accuse Bosinski and Korte of using such statements to promote transphobic attitudes in society. Coming out as transgender, thus risking social exclusion, was not an easy option.

Korte or Bosinski have become a kind of enemy for many. Like Lisa Littman, who coined the term 'Rapid Onset Gender Dysphoria' for these unexpected, sudden coming-outs. The American doctor and researcher at the renowned Brown University in Rhode Island had observed that several children and adolescents announced their being that transgender in social media, simultaneously with classmates or friends. She then made a survey of parents who observed similar things in their

children, on their gender identity, their use of social media, their circle of friends and previous mental health issues.

## Die Suche nach Transgender-Themen hat im Netz stark zugenommen



Quelle: Google-Trends

**Sharp rise of transgender topics being put into search engines.** Source: Info graphic WELT

The results of her [research](#) caused a sensation: 82 percent of Trans-identified adolescents were biological females, with an average age of 16.4 years. More than 62 percent of them had been diagnosed with mental health issues prior to their Gender Dysphoria, e.g. [depression](#) or ASD. More than one third had a circle of friends who called themselves transgender.

Littman concluded that a kind of "social contagion" could be partly responsible for the growing number of young people who consider themselves to be transgender. But she also made it clear that further research, not least with young people themselves, was necessary. The storm of hostilities that subsequently befell her was enormous. She was [told](#) that her approach was one-sided because she had only surveyed parents and only those who were critical of their children's transgender development.

Brown University felt [compelled](#) to take the study off its website. The scientific journal in which the study was published had it reviewed again by experts. In fact, some of the wording in the [paper](#) were subsequently amended. But the results remained the same. The whole process eventually led to a [debate](#) on the freedom of science.

The case of Lisa Littman shows the heated climate in which transgender issues are debated. Their representatives have been fighting a just struggle against stigmatisation and discrimination for years. In many committees, they now have an important voice. Their demand that the individual alone should determine whether they are allowed to change sex medically now has the support of many [experts](#).

Some [people](#) demand this right for young people as well. But we are talking about far-reaching physical interventions. For many physicians, the question of how a gender dysphoria in need of medical treatment can be unequivocally determined is also of great importance for ethical reasons. This is related to the no less important question of the causes for the rise among young people. If social factors, such as a kind of trend, could play a part, it would be important to know.

The long-term criterion, say transgender activists, but also many experts, is not the crucial factor. People with sex dysphoria outed at any age. Many needed a long time until they understand why they felt so different, so they hesitate to confide in someone.

"Early puberty in particular is a phase in which gender dysphoria often emerges clearly with a transgender development," says Georg Romer, head of the Clinic for Child and Adolescent Psychiatry at Münster University Hospital and its special centre for gender dysphoria in childhood and adolescence.

Romer attributes the sharp increase in the number of trans youth to increased social acceptance and better access to counselling and treatment. There might be rare cases of young people who, caused by a trend, temporarily considered themselves to be transgender. However, according to him, these are exceptions among those who seriously desire treatment. This makes intensive child and youth psychiatric diagnostics all the more important in order to find out in dialogue with those seeking treatment, says the child and youth psychiatrist.

### **Lena doesn't want anyone to know about Tom.**

Neither Alex nor Lena fulfilled the long-term criterion. As a child, when she was Tom, Lena never expressed the wish to be a girl. No one who knew Tom ever got the idea that he didn't feel comfortable in his boy role. When Tom was with his grandparents in Berlin took him to airplane exhibitions, to the traffic garden.

It's not easy for Lena to put herself back into that position. It's like it's another person's past, not her own. She brought photos to our meeting in a Berlin café, where she sat down at a table in the far corner and talked for hours only in a muffled voice. She doesn't want anyone to know that she was once the boy in the photos.

Actually, they don't match: Lena, the young woman with the shoulder-length light-brown hair, the fine facial features, and Tom, the blonde boy in the pictures.

Lena wears trousers, small silver earrings, the face is discreetly made up. She looks very feminine in an unobtrusive way. No one would ever think she wasn't a woman. Just as no one in the photos would ever mistake the child for a boy: Tom with his arms crossed, in front of a huge steam locomotive, as a six-year-old on a children's bicycle, on the back of a circus elephant.

It was a carefree childhood, says Lena. The parents, academics, both employed, lovingly raised Tom and his seven-year older brother, there were no classical role models. The brother was Tom's great role model, "a perfect big brother," who protected and explained, let Tom help repair the moped. Tom never had any trouble being a boy.

The doubts came just before the twelfth birthday. The voice broke early, Tom's body changed. Standing in front of the mirror, he thought more and more, "I don't like this." He found his first erection unpleasant. He was embarrassed about his looks. The brother told him it was normal: "You're becoming a man now."

For a year and a half Tom fought against this unease, went on "a compensation program", as Lena puts it: played video games, lifted weights, tried to make friends with the most athletic and masculine boy of the new class, to which he had just changed because of the frequent moves of his parents. It didn't help anything. Lena, who was once Tom, tells us that she wasn't accepted by the boys. The dislike of his own body became stronger and stronger, and Tom sank into depressive episodes. He felt wrong, "not normal."

At some point during this time Tom came across an article on [Kim Petras on](#) the Internet. The Cologne woman was the [first German Teenager](#) whose puberty had been halted in 2004 with the help of hormones, she was twelve years old at that time. Doctors at [Amsterdam](#) Free University had used these so-called puberty blockers for the first time in the mid-1990s. Stopping physical development prevents boys from beginning or progressing with voice breaks and beard growth, girls from menstruation and breast growth.



Today Kim Petras lives as a singer in Los Angeles. In her music videos, she stages herself as a seductive woman in an emphatically provocative way.

Puberty blockers should give young people time to realise whether they really feel that they belong to the opposite sex - if you stop taking them, puberty will continue. Most of them, however, like Kim Petras, take cross sex hormones soon after puberty blockers, boys estrogen, girls testosterone, and then go through puberty in the opposite sex. This treatment is now used in all German centres for transgender children and adolescents - except in Munich.

There, puberty blockers are considered the wrong path because a clear diagnosis is so difficult and so much can change in the course of puberty. And because the [long-term effects](#) are still quite unresearched.

In Munich, a wait-and-see therapy approach is pursued, young people are encouraged to develop strategies to cope with gender dysphoria. Only when teenagers have gone through natural puberty in their bodies, when they have felt their libido for the first time, can gain clarity about their true gender identity. If the incongruence and the psychological strain remain, cross sex hormones are given in Munich, too. But only at the end of puberty.

### **Treatment after puberty**

This is a path considered problematic by most other centres. Having to go through puberty in the wrong body increases psychological suffering and the risk of lifelong mental health problems, says Georg Romer. Painful operations such as epilating the beard hair or removing the breasts become necessary, the breaking of the voice, the male or female physique can hardly be corrected at that stage.

Achim Wüsthof, too, says that gender re-assignment after puberty is never as complete as it is in young people who start hormone treatment at an early stage. He was the Hamburg paediatrician and hormone specialist who helped Kim Petras to change from boy to girl, together with doctors of paediatric and adolescent psychiatry and sexual physicians. In the following years he and his colleagues treated more than 600 adolescents.

Those who do not begin to change sex until later in life usually suffered for the rest of their lives from the transition, which was never perceived as complete. But Wüsthof also says that there is no 100 percent certainty that a young person will not reconcile themselves with their birth sex or choose a different path than the one that changes their body. In his experience, however, the risk of making a mistake is much lower "than the unbearable suffering caused by non-treatment".

He and Romer refer to [long-term-studies](#) from the Netherlands, according to which only one to two percent of those treated so early regretted this later.

Korte and Bosinski doubt that these studies are applicable to today's cases. Those studies' subjects had been young people who fulfilled the long-term criterion. No long-term studies were yet available about those who had only emerged as transgender at the beginning or in the course of puberty and were treated accordingly early with puberty blockers and cross-sex hormones: People like Alex and Tom.

For Tom, Kim Petra's story was a revelation. He asked himself, "How would I feel if I were a girl?" "I could fully identify with her feelings," says Lena today. As Tom, she met a boy on a self-help platform on the Internet who was just going through the treatment and explained everything to him. Tom let his hair grow, confided in a friend, met her for make-up, shopping.

"Mama," Tom said one night to his mother, he was 15 by then. "You once said, "If I had been a daughter, you would have called me Lisa. Now you have a daughter."

Seitdem sie mit ihren Eltern gesprochen und sich Hilfe gesucht habe, sei es ihr anders möglich, auf die Mädchen zuzugehen. Sie treffe sich häufig mit ihnen und die Freundschaften hätten für sie eine große Bedeutung.

[REDACTED] berichtete, dass sie früher nicht gewusst habe, wer sie sei. Jetzt wisse sie es, was Kontakt zu anderen und ihr Leben einfacher mache. Da die Situation bislang noch ungeklärt sei, sie beispielsweise in der Schule sich noch nicht geoutet habe, seien manche Leute von ihr „irritiert“ bzw. könnten mit ihr „nichts anfangen“. Ein Lehrer habe vor kurzem ihren „Transvestitenstyle“ bzw. ihr Schminken kritisiert. Derartige Bemerkungen würden sie treffen, und sie versuche, sie „wegzuschieben“. Die meisten Klassenkameraden ignorierten sie oder würden mit ihr nicht sprechen. Mit dieser Situation habe sie sich eingerichtet. Sie könne die anderen auch ein bisschen verstehen; sie wüssten nicht, was sie mit ihr „anfangen“ sollten.

[REDACTED] wünsche sich die Namensänderung, mit der die Vergabe der weiblichen Hormone und ein Outing in der Schule verbunden seien. Sie könne dies kaum abwarten, zähle schon die Tage. Als sie [REDACTED] weibliche Kleidung getragen habe, habe sie blöde Sprüche abbekommen. Sie versuche, diese „nicht zu sehr“ an sich „rankommen zu lassen“.

*Since she had talked to her parents and sought help, she was able to approach the girls differently. She often meets them and these friendships are very important for her.*

*Xx reported that she hadn't known who she was before. Now she knows, it's easier to make contact with others and her life became easier. Since the situation has not yet been clarified, e.g. she has not yet revealed herself at school, some people were "irritated" by her or "do not know how to deal" with her. A teacher recently criticized her "transvestite style" or her make-up. She is hurt by such remarks and tries to "push them aside". Most classmates ignored her or would not talk to her. She had settled into this situation. She could understand the others a little; they did not know "how to deal" with her.*

*Xx wished for the name change, which would involve the prescription of female hormones and an outing in school. She cannot wait for this, counts the days. When she wears female clothes, she gets stupid remarks. She tries to "not let them get too close" to her.*

**"Some people are irritated by her": from one of the expertises for Lenas name change**

Source: private

For the mother, the confession was not as surprising as Tom had feared. Alarmed by the depressive phases and his strange behaviour, she had researched the Internet. His father struggled more with the news and urged to seek professional help. Well, they visited the Trans Identity clinic of the child and youth psychiatry hospital at University Hospital Frankfurt.

Tom found the protracted therapy sessions that now followed stressful. The questions he had to answer about his family, his childhood, his emotions. His parents were also interviewed separately. Every few weeks they went there now. Tom just wanted to be a girl as soon as possible.

Time, he felt at that time, was his enemy, it worked against him. Every week that passed, his body became more what he didn't want to be. Tom was putting the pressure on, sometimes describing his need as stronger than it actually was, Lena later confessed to in a chat with Alex. After three months, he had convinced the therapist, who prescribed puberty blockers.

"It was an incredible relief," says Lena today. For the first time she felt hope again.

Together with his parents Tom now planned the change to Lena in school, too. The teachers and the director were told, Lena's father visited the class on a Friday, while she stayed at home, and explained that his son was now his daughter. Everyone reacted with understanding. Sure, there was also further talking behind her back, but Lena did not experience any more open teasing.

After just half a year, the therapist agreed to a treatment with cross sex hormones, estrogens. She had actually been supposed to wait longer. Before she took the first pill, she hesitated, she says today. She tried to imagine her future as a man. She couldn't. She took the pill and knew that she was now taking a path that couldn't be reversed. She would go through puberty as a girl. "I'll have to swallow those pills for the rest of my life. Never be able to have children of my own. It was the only path I could imagine," says Lena.

Gutachten an das Amtsgericht Senneberg vom 10.02.2010  
Geschäfts-Nr.: [REDACTED] - Proband: [REDACTED], geb. am [REDACTED]

[REDACTED] drängt auf einen sozialen Geschlechtswechsel innerhalb der Öffentlichkeit, weiß über die möglichen - auch negativen - Folgen Bescheid. Sie zeigt diesbezüglich großen Mut, sich in ihrer weiblichen Geschlechtsidentität zu zeigen und endlich so zu leben, wie sie es sich wünscht. Erste vertrauliche Mitteilungen gleichaltrigen Freundinnen gegenüber stießen auf positive Resonanz. [REDACTED] wird von ihren Freundinnen angenommen und akzeptiert.

[REDACTED] zeigt eindeutig mädchenhafte Interessen, lehnt jungenhafte ab und wünscht sich, als Angehörige des weiblichen Geschlechts zu leben und anerkannt zu werden. Sie fühlt sich offensichtlich in ihrem biologischen Geschlecht nicht wohl, lehnt ihre Genitalien ab. [REDACTED] hat den Wunsch, sich ihrer primären und sekundären Geschlechtsmerkmale zu entledigen und Merkmale des anderen Geschlechts zu entwickeln (z. B. Wunsch nach hormoneller gegengeschlechtlicher und chirurgischer Behandlung), um möglichst weitgehend das Aussehen einer Person des weiblichen Geschlechts zu erreichen. Nach ICD-10 besteht die Diagnose einer Transsexualität (F64.0). Die Prägnanz des transsexuellen Erscheinungsbildes sowie die Beharrlichkeit, mit der [REDACTED] ihren Weg geht, machen es für uns hochwahrscheinlich, dass sich das Zugehörigkeitsempfinden [REDACTED] zum weiblichen Geschlecht nicht mehr ändern wird. [REDACTED] wird auf diesem Weg von ihren Eltern und ihrer Familie sowie ihren Freundinnen unterstützt. Eine Namensänderung hätte neben der Anerkennung der Transsexualität auch den Vorteil, dass [REDACTED] aufgrund ihres männlichen Vornamens bei formalen Handlungen nicht in Erklärungsdruck

*Xx pushes for social transition within the public, knows about the possible - also negative - consequences. In this respect she shows great courage to show herself in her female gender identity and finally to live as she wishes. First confidential messages to friends of the same age were met with a positive resonance. Xx is accepted by her friends.*

*Xx clearly shows girlish interests, rejects boyish ones and wishes to live and be recognized as a member of the female sex. She obviously doesn't feel well within her biological sex, she rejects her genitals. Xx has the desire to get rid of her primary and secondary sexual characteristics and to develop characteristics of the opposite sex (e.g. desire for hormonal cross-sex and surgical treatment) in order to achieve the appearance of a person of the female sex as far as possible. Transsexuality is diagnosed according to ICD-10 (F 64.0). The conciseness of the transsexual appearance as well as the persistence with which she pursues her path make it highly probable for us that the sense of belonging to the female sex will not change any more. Xx is supported along the way by her parents and family as well as her friends. In addition to the recognition of transsexuality, a change of name would also be advisable. This would have the advantage that Xx, would not be under pressure to explain her situation at any formal actions, which is now the case because of her male first name.*

**"Clearly shows girlish interest." From the report for Lena's application for the name change**

Source: private

Shortly before she began her studies, she was not yet of age, Lena had gender re-assignment surgery. Legally, age of majority was a prerequisite, but Lena is strong-willed, still is today. She pushed so hard that she got the two necessary statements from the therapists. There are [physicians](#) who consider it reasonable to operate on 16-year-olds if they have "sufficient personal maturity". Lena had now lived as a girl for more than two years, another prerequisite for the operation.

Penis and testicles were removed, a neovagina was created from penis and testicle skin. Two surgeries were necessary. Lena was afraid of them, she knew every step that was taken, had watched YouTube videos on the Internet. When she woke from the anaesthesia, she felt liberated. Even more so when she stood in front of the mirror for the first time.

### **How Alex and Lena got to know each other**

During this time, Lena met Alex. In August 2011 their chat started, Alex had contacted Lena straight after discovering her entries on an internet platform. He was 18, had just graduated from high school and started training as an IT systems electronics technician. In the chat, Alex was convinced to be transgender and to have known for a long time. He asked Lena how he could find a therapist. Asked if he had to walk around in a skirt and high heels to be believed and prescribed hormones. In fact, during that time, he had already grown his hair shoulder-length, but he wasn't ready to dress as a woman yet.

In Alex's life story, which he wrote retrospectively in a notebook, it all sounded less clear. He wrote: "Socially, most of the time, I was quite happy to be a man, even though I often wished I had been a girl." The other entries from the previous two years rather paint the picture of an insecure young person who feels marginalized and puts this down to not being a real man or not enough of a man.



**Alexa began her graduate course as a woman.** Source: Private archive (11)

Alex's desire to become a woman in early summer 2011 came as a surprise to his parents - despite that first tentative confession two years earlier. In the chat, he wrote to Lena that both of them didn't want to admit it at first, but his mother had said: "I don't think you're in the wrong body. But even if you are, you'll always be my child."

That's how the parents describe it. The mother was worried about losing Alex if she didn't show acceptance and understanding. At some stage, she says, she believed him. Alex had always been the one to explain things, the one who dug into topics, read a lot when he was interested in something, and he then could present his views with great conviction.





**Between 2011 and 2012, Alex had doubts whether he was really a woman.** Source: Private archive

The father took it with a lot more difficulties. It bothered him that Alex did not want to engage in things anymore, which were natural to him before. For example, helping with changing tires. "He didn't act natural anymore, so dolly." There were lots of rows. Alex became flustered in those situations. At some point, the father says, he no longer dared to raise the issue. At some point, he felt that he could accept it, as long as Alex was happy.

Alex finally found a therapist in the next bigger town who had already treated other trans people. After a few months, he was convinced of Alex's gender identity disorder and supported his wish to become a woman.



**"You'll always be my child." At first, Maria and Michael Huber did not want to believe Alex that he was a girl.** Source: Marlene Gawrisch / WELT

Alex was an adult. Unlike with Lena, his parents were no longer involved in clarifying whether he was transgender. For most therapists, the will and self-assessment of those who want to make a transition requiring treatment are now the determining factor. This development is also reflected in the [German Guidelines for the diagnosis and treatment of Gender Dysphoria, used by Physicians and Therapists](#), published last summer. They say: "As a general rule, the self-description of those seeking treatment is the basis for the diagnostic assessment. "

Many trans people welcome the step towards more self-determination and away from [pathologizing](#) their feelings. It's a relief to no longer have to "convince" a therapist of their true gender in protracted sessions.

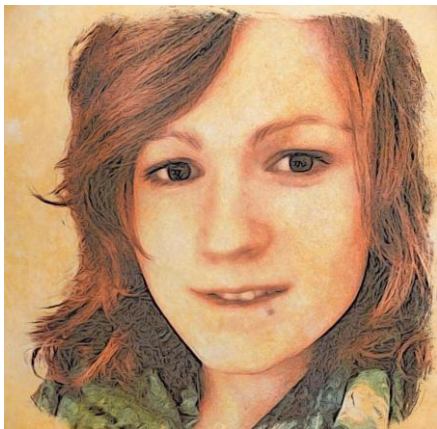
Others warn against the danger of a hasty diagnosis and hormone prescription, such as the Berlin YouTuber "[EinRückkehrer](#)" (a detransitioner) who tells about his journey. He became a trans woman as a 37-year-old and reconciled himself with his birth sex three years later. After a mere 45-minute



session with a gender therapist, he says, he has confirmed him as a clear case, and right at the beginning of the next session he issued him with the prescription for hormone therapy.

He had told the therapist that he had just gone through two severe traumas and was psychologically stricken. The confirmation of his transidentity aggravated his mental suffering, during his transition he tried several times to take his own life. "My gender identity crisis was triggered by a psychological problem," says the 40-year-old, who now wants to remain anonymous, at a meeting. Had the therapist recognized this, he would have been spared a lot.

Maria and Michael Huber later found an audio file on Alex's laptop, recorded in early 2018. Alex tells us that during that time between 2011 and 2012 he had doubts as to whether he really was a woman. But no one wanted to listen to those doubts, he says. Maria Huber played this file to Alex's first therapist a few months ago. The therapist seemed shocked. He had been very sure, he told her, that Alex was transsexual.

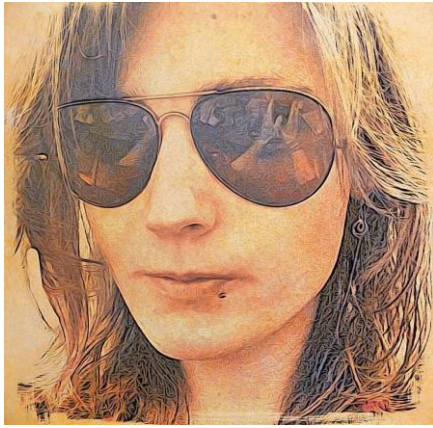


**In 2014 Alex requested to change the name to Alexa**      Source: Private archive

A few months after the beginning of the therapy, Alex grew small breasts due to the hormones. He grew his hair. The family was now only allowed to call him Alexandra or Alexa. Alexa sent a WhatsApp to her friends that she was now a woman. Some couldn't handle it, avoided her. Other friendships became closer.

At home, Alexa dressed more feminine. Maria Huber still remembers how she gave her makeup tips. Alexa had her beard hair removed at her own expense with a laser forever, the health insurance had refused to cover it. She practiced speaking at a higher pitch. Only in the workplace she remained Alex for the other trainee, wearing trousers, shirts, T-shirts, neutral clothes. However, some people must have noticed her change, says the mother.

In that time, Alexa was better than she had been in a long time. She no longer suffered from dark moods. And she met a girl on the Internet with whom she had her first intimate relationship. But it didn't last long, the girlfriend had mental health problems, was depressed, and Alexa soon found it all too much. She ended the relationship.



**A judge ruled on the application after two expert opinions were available.** Source: Private archive

After completing her training in the summer of 2014, Alexa now wanted to lead a full life as a woman - with a degree course in a big city where everyone should know her only as Alexa. She applied to the Local Court for her name and gender marker to be changed in the register of civil status. Two reports from psychotherapists were necessary to confirm that Alexa had been living as a woman for two years. A judge finally decided.

### **Criticism of the name change procedure**

Many trans people perceive this procedure regulated by law as an impertinence. The Federal Constitutional Court has also repeatedly criticized certain passages, which is why the Justice and Interior Ministries have now proposed a simplified procedure in a [bill](#). However, a judge will still decide on the basis of a "reasoned certificate" from a therapist or doctor.

Critics, [on](#) the other hand, [argue](#) that the applicant's wish alone should be enough, like in Denmark, France, Ireland or Malta. There, a mere administrative act is sufficient. The association "[Trakine](#)" in which parents of transgender children have joined forces, demands the same for minors: a declaration of intent without a degrading appraisal process, waiting periods and lower age limits.

Alexa got the two expert opinions without any problems, say the parents. The application was granted. She accepted the award as the best apprentice in her year as Alexandra. In the photos, you can see her in denims, blazer and blouse, her hair shoulder-length. A pretty young woman proudly holding the certificate in the camera.

At the place of study she told no one that she had once been a man, not even her roommate. She blossomed during that time, says the mother. The parents gradually felt they had a daughter.

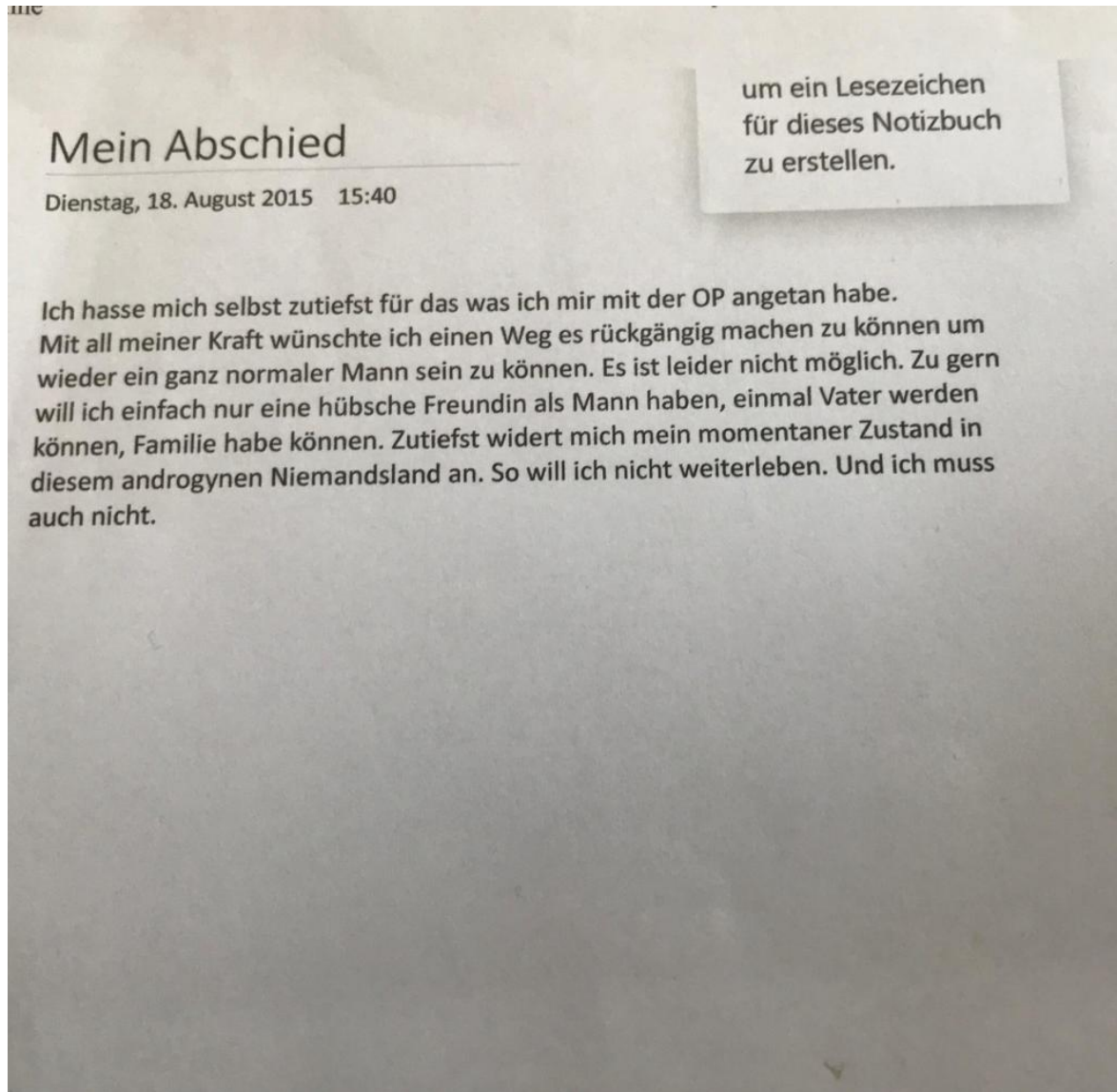
Lena understands only too well that Alexa didn't tell anyone about her male past. She does the same. She is afraid of prejudices and of no longer being seen as a real woman. And she feels like that. She would never use the term "trans women" for herself or call herself transsexual. "I'm just a woman."

She has never regretted the realignment of her body. It was a life-saving measure for her. But today, almost ten years later, the chapter is closed for her. "I've had the misfortune of being born in the wrong body. The problem is now fixed. "

Lena will never have biological children. That was explained to her before the operation, but she can only truly understand it now. At that time, it was suggested to take her semen and freeze it. But, the idea of being a biological father, and also a mother in an adapted gender, was too much for her to cope with then, and it still is too much for her today. She would decide against it again. At the moment, Lena doesn't want a child, but she can imagine it for later. "It doesn't have to be from me."

Alexa was determined to finish her path to become a woman as soon as possible, also physically. She planned the gender-reassignment surgery for the first semester break. On the weekends there was now frequent quarrels. The father tried to talk Alexa into waiting with the surgery, to take more time. "But the more I said, the more determined she became," says Michael Huber.

In February 2015 Alexa finally underwent surgery in Munich. After that she didn't feel well, she got [yellowfever](#), was in a lot of pain. A few months later the regular, second operation followed.



*I deeply hate myself for what I did to myself with the surgery. With all my strength, I wish I could find a way to undo it and be a normal man again. Unfortunately, it is not possible. I just want to have a pretty girlfriend as a man, to be able to become a father, to have a family. I am disgusted with my current condition in this androgynous no-man's-land. I do not want to go on living like this. And, I don't have to either.*

**"Androgynous No Man's Land." Shortly after the surgery, Alex regretted it.** Source: private

On August 18, 2015, shortly after the second intervention, Alexa wrote a note in her laptop. She titled it "My farewell": "I deeply hate myself for what I did to myself with the surgery. (...) With all my strength (...) I wished (...) to be able to be a normal man again (...) I would just like to have a pretty girlfriend as a man, to become a father, to have a family. My present condition in this androgynous no man's land disgusts me deeply. "

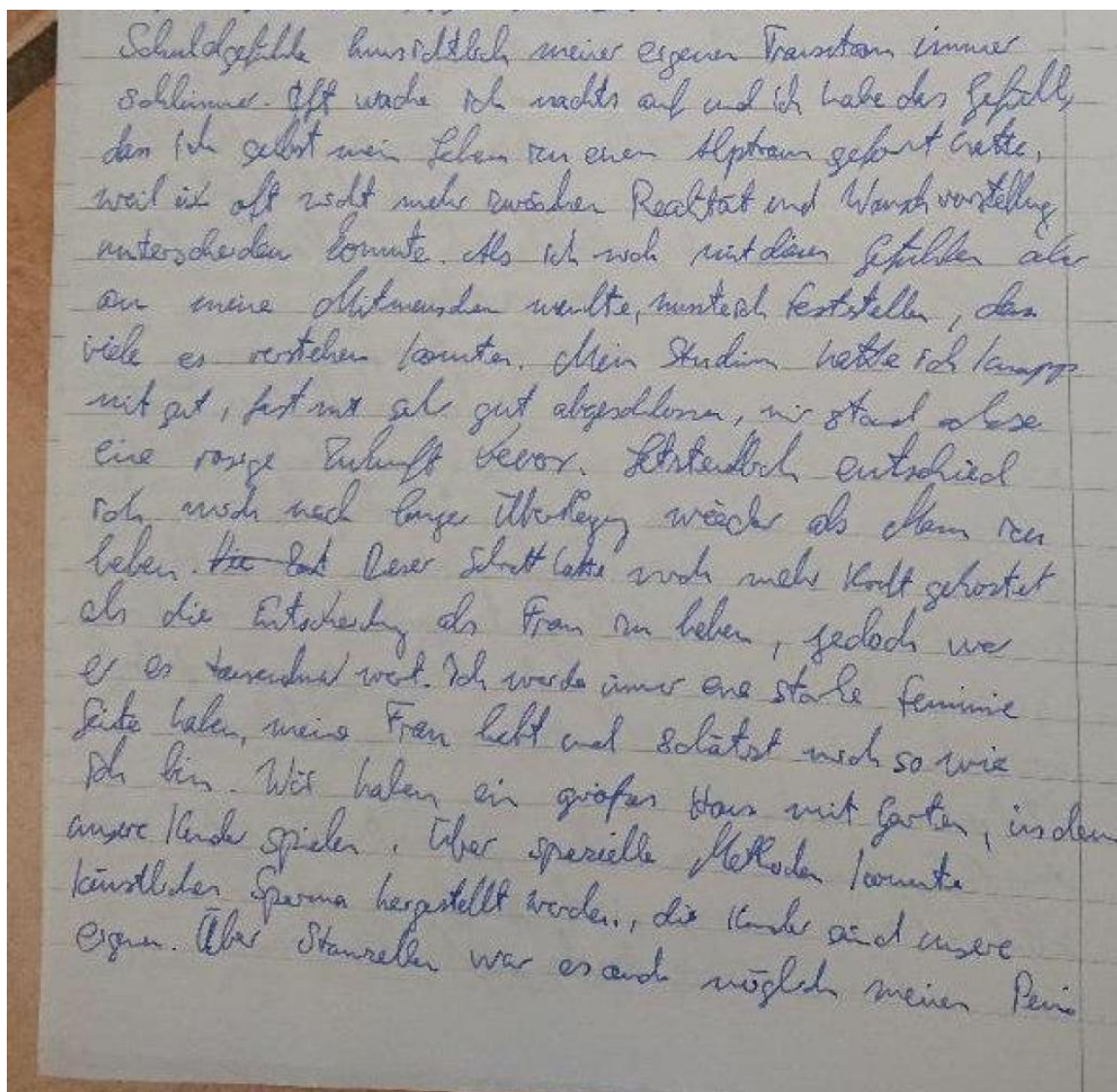
Parents found the note last year. It was a shock. For a long time, they had no idea how quickly and how much Alexa regretted the operation. How badly she had been since. They also found tons of selfies from that time. Alexa in underwear, skinny in front of the mirror, a vulnerable young woman.



At that time, the parents were worried that she could be anorexic, she had become so thin. Alexa was now often irritable, quarrelsome, hypersensitive. She reproached them for not taking enough care of them in their childhood, for having raised them wrongly. It seemed like a second puberty to the parents. At the end of 2016, Alexa again looked for a therapist, the parents only learned about it later.

### Alexa's feelings of guilt and remorse

The following year, she got worse and worse. Her best friend now had a boyfriend, this irritated Alexa. At one point, she admitted that she had fallen in love with her friend. "When she came together with Peter (name changed, ed.) my feelings of guilt regarding my transition became worse and worse," Alexa wrote in her notebook. She imagined what it would be like to have reversal surgery, to marry her friend, to have children with her. She was dreaming of a future as a man.



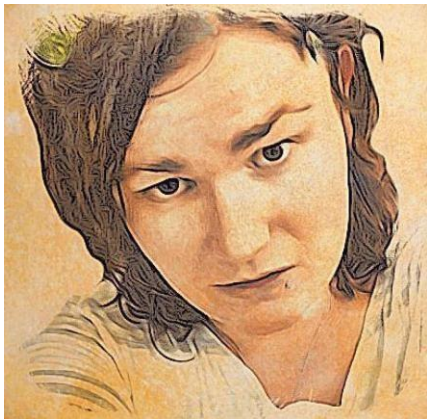
Feelings of guilt about my own transition getting worse. I often wake up at night and have the feeling that I myself had shaped my life into a nightmare, because a lot of the time, I could no longer distinguish between reality and wishful thinking. But when I turned to my fellow human beings with these feelings, I found that many could understand it. I had just finished my studies with good, almost with very good marks. So I had a rosy future ahead of me. In the end I decided, after long consideration, to live as a man again. This step had cost even more strength than the decision to live as a woman, but it was worth it a thousand times. I will always have a strong feminine side, my wife loves and appreciates me as I am. We have a big house with a garden where our children play. Special methods allowed the production of artificial sperm, the children are our own. Using stem cells, it was also possible to make my penis ...

**Excerpt from Alex' diary** Source: private/Alex

She first told her parents at the beginning of 2018 that she no longer knew who she was: man or woman. She spoke of thoughts of death. "What would you do if I had an accident?" she asked her mother. The mum asked her not to hurt herself, to seek help. Alexa promised. In March, she declared that she wanted to live as a man. Parents should call her Alex again.

Alex stopped taking estrogens, got prescribed testosterone, took out shirts he had worn as a boy. He told friends at home. At the beginning of the year, Alex received a scholarship for a Franco-German Master's course, for which he had applied as a woman, and was unsure how to deal with it now. He wanted to start his studies as a man, but his passport said he was a woman. He told his parents that he envied his brother, who had a girlfriend, who had done everything right: "And I, I killed Alexander."

His mood swings scared the parents. The mother took him to doctors, therapists. They also went to the surgeon, together with their father. Alex wanted to know what he could do to become a man again. The surgeon said a reversive surgery was possible, but difficult. It'll never be the same again.



**Alex just before he died. He lived again as a man** Source: Private archive

On his last weekend, at the end of June, Alex planned to move to France. He cancelled the lease of his room in student accommodation, met friends for a barbecue on Sunday and arranged to meet a friend in the university cafeteria on Monday. Shortly before, he cancelled the date. He went to see his parents.

When the mother came home from work, she saw Alex's bag in the hallway. She called for him, but he didn't answer. Maybe he'd gone out into the woods again, she thought. Alex loved the forest. It wasn't until she went down to the basement later that she found him. Alexander had hanged himself. He was 25 years old.

On his gravestone, he asked in one of his farewell letters, to put his true, his complete name: Alexander.

Lena and Alex last wrote to each other in 2014. At that time, according to Lena's impression, Alex was well, she took estrogens, had a girlfriend, wrote of her plan to have an operation. Then the contact broke off. Lena only found out about Alex's death through this research. She says no one could know what his path would have been without transition. But his story shows the dilemma faced by all those involved in the question of whether someone is really transsexual. She says, "There's no absolute certainty."

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### **How this story came about**

At the beginning of this research, there was a question. Why is the number of children and young people, who feel they have been born in the wrong body, increasing? This touches on social change just as much as the role of medicine and how it deals with change. Experts give different answers.



The author had contact with parents who are worried about the development of their children, but do not want to go public, for fear of being considered transphobic or for fear of their children finding out and cutting them out of their lives. Maria and Michael Huber wanted to tell the story of their son Alexander, they granted insight into records, photos, medical reports - on condition that they themselves remain anonymous.

It was similar for Lena - she agreed to meet, because her own path was different from Alex's. She brought with her documents and expert reports confirming what she said.