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Meanings and perceptions of parenthood among transgender men who became pregnant before gender transition

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Abstract This qualitative study, with five participating interlocutors, sought to understand the senses and meanings of parenting among trans men who became pregnant before gender transition. Analysis was conducted in light of social theories of gender. The results demonstrated an experience of parenthood subject to a field of tensions and negotiations, as well as subjective production that oscillated between transgression and accommodation of the cultural perspective of their own experience. The forms of violence found to be practiced reiterated social vulnerabilities, exposed healthcare service weaknesses and produced harmful effects on transgender men who become pregnant before gender transition.

Key words Parenting, Transgender Persons, Gender, Health equity, Sexual and gender minorities

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Introduction

In recent years, a multiplicity of positions and statements on gender and sexuality have occupied a central place in public debate and have formed into field of dispute, whether over public policy chanages¹ or reactionary offensives attacking "dissident identities"^{2,3}.

Parenthood criss-crossed by the disputes involving these positions and assertions has been a way of claiming the right to exercise new forms of care^{4,5}. The term began to be used recently, especially since the 1960s, in French psychoanalytic literature, with the intention of marking the place of the constitutively experienced psychic and sociocultural processes involved in the dynamics of becoming a father or mother, without centring on performance gendering⁶⁻⁸. The phenomenon lends itself to polysemy and comprises a series of dimensions that describe everything from the authority relationship between adults and children, including its social and psychological aspects, and others; the set of practices, discourses and narratives informed by the argument of ensuring children are kept safe and sound, associated with a population management policy^{9,10}.

Parenthood is currently an arena of complex disputes, with confrontations biased by hierarchical positions of domination and subjecting people who perform parenting functions to judgment and legitimate recognition, based on rigid normative criteria^{9,10}. Parenting by trans men who became pregnant before transition (and are the focus of this article) is one concrete expression of the arena of dispute over redefinition of conceptions of family and parental roles and brings the collective health perspective to promoting an inclusive and sensitive approach to the needs of all types of families.

Parenting by trans men is often questioned and rendered invisible in health services¹¹. It is commonly associated with a "symbolic sterility"¹², which, allied to an absence of action to promote the possibility of trans people's occupying parental roles, seems to further problematise the condition of those who became pregnant before gender transition and classifies parenthood by such men as a "serious problem", in view of the need to re-signify their role and of the negotiations in underlying social spheres^{13,14}.

Studies of parenthood involving trans men have shown how challenging the parental experience – comprising assisted insemination, pregnancy, childbirth and parenting – can be^{11,15}. The challenges listed were: discrimination and prejudice, exhaustive concern with protecting

children from possible attacks¹⁶⁻²⁰, difficulty in aligning gender performance and normative notions of paternity^{6,21}, need for legal support²², absence of family emotional support and impaired mental health^{19,23}. Another study also revealed vulnerability to depression and anxiety²⁴ due to stigma and violence.

There is an urgent need to build new kinds of social intelligibility that reinforce the importance of the cultural and historical perspective in constructing other parenthoods; to build receptiveness in health services, by appropriate staff preparation and training; and to strengthen the health studies field, by fostering an understanding of the complex dynamics involved in sexual and gender diversity^{25,26}.

This article aims to contribute to critical thinking on changes underway in contemporary society and in public health policies by developing an understanding, based on social theories of gender, of the senses and meanings of parenthood among trans men who became pregnant before gender transition.

Method

This qualitative field study centred on the interlocutors' experience, privileging the production of senses and meanings of each individual's dynamics in experiencing their pregnancy, their parenting in different social contexts and the repercussions on their identities. As narrators of their personal stories and experiences, they also figure collectively, when conveying accounts and experiences of a group, as producers of intersubjectivity²⁷, which is why they are called interlocutors, regardless of the number of representatives.

The five study participants, corresponded to all users of Brazil's national health system (Sistema Único de Saúde, SUS) who declared themselves to be trans men, who were pregnant before gender transition and whose gender transition was monitored at an outpatient referral clinic in the city of Manaus, Amazonas State. The study site was an institution with a multidisciplinary team of psychologists, social workers, nurses and doctors, which meets the demands of the trans population of the state of Amazonas, whose overall population is estimated at 2.1 million. The region's health services face health inequalities, the state capital monopolises network resources, and care methods operate on the logic of a liquid territory, where itineraries vary depending on the volume and routes of watercourses²⁸.

Data were collected, from August 2022 to April 2023, by semi-structured interviews based on a script comprising the following open questions: How did you become a father? What difficulties are encountered in exercising parenthood? Talk about gender transition. What is your perception of how you are seen in your social environment when exercising parenthood?

At interview, the participants were from 26 to 37 years old, all had a child aged 4 to 17 years and were in relationships with cis women and three lived with their partners. All lived with their children, except José, whose daughter was in her mother's care. Only Jorge had a formal job; the rest provided occasional services on their own account or in family businesses (Chart 1).

All are interested in changing their names and, on their children's birth certificates. Their civil name appears in the "Mother" field. In the "Father" field, Jonas registered his son with a friend, whom he refers to as his stepfather; Jorge registered his son with the child's godfather; and the others registered their children in their name only: solo parenting.

The Thematic Analysis method suggested by Gomes and Nascimento²⁹ was used in the following steps: (a) transcription, review, reading and re-reading of the interviews; (b) coding of reports; (c) classification of core meanings; (d) comparison between the different core meanings; (e) classification of core meanings into thematic areas and naming; and (f) writing interpretative summaries.

The study was approved by the ethics committee of the Universidade Federal do Amazo-

nas, as registered under opinion No. 5.528.881. A declaration of free and informed consent was signed by the study participants and the institutional authorisations appropriate to the field were obtained.

Results and discussion

Although parenthood is plural and dynamic⁵⁻¹⁰, it is subject to rigorous standards of judgment and condemnation, when experienced by trans men, sometimes rendered invisible and sometimes violated, depending on the context and how such men are recognised in symbolic and social organisation, which interfered in the interlocutors' production of senses and meanings.

The interlocutors' experience of parenthood includes a desire to be recognised as a father, no longer as a mother, and this movement lays bare the cultural meanings of fatherhood and the individual meanings attributed by the interlocutors. Accordingly, a movement was observed that oscillated between transgression and accommodation of the cultural perspective around their own experience.

The interlocutors demonstrated that they are subject to a field of constant tension and negotiations as regards their identities jointly with their parental role, often leading their fatherhood to a place of abjection, causing impacts on their health and prompting coping strategies.

The research results, which were focused on understanding the social and cultural context situated around the interlocutors, were constructed

Chart 1. Interview characteristics, by interlocutor.

Name	Age	Ethnicity	Education	Children's age and gender	Family formation	Income in minimum wages	Profession/ Occupation
John	27	Brown	Higher	4 years old, Female	Lives with partner and daughter	1.5	Independent
Joseph	28	Brown	Higher incomplete	7 years old, Female	Lives with partner and father	0.5	Independent
George	38	Brown	Upper secondary	17 years old, Male	Lives with partner, son and 2 stepdaughters	1	General services
Jonas	30	Brown	Upper secondary incomplete	4 years old, Male	Lives with his son	1	Independent
Joaquim	26	Brown	Higher incomplete	9 years old, Male	Lives with parents and son	1	Student

Source: Authors.

in two thematic areas: 1) meanings of parenting under the sway of cisheteronormativity and 2) parenthood in trans masculinities: experiences in social and health contexts.

Meanings of parenthood under the sway of cisheteronormativity

The interlocutors' narratives denounced the tensions that operate on a binary, sexist logic to accommodate them in an "identity triad"; that is, man, father and heterosexual, fulfilling the criteria, respectively, of masculinity, parenthood and sexuality forged in the matrix of intelligibility, a structure within which naturalising patterns sediment and are established by language to guide the functioning of social life and its instances³⁰.

Female and male roles are constructed through discourses that support the cultural understanding of parenthood. Trans men who became pregnant before transition are often subject to questioning about their identities and bodies, on the naturalising premise that men do not get pregnant and their experience is thus not contemplated in the spheres of family, education, law or health care.

This phenomenon is triggered during pregnancy when they are asked: "Is the shemale (machuda) going to have a baby. Where do males get pregnant?" (Jonas, 23 Dec 2023), and "Didn't you like men? What kind of shemale are you?" (Joaquim, 11 Apr 2023). "Machuda" is an emic term in the regional language of the Amazonian peoples to designate a woman who has relations with other women and whose gender expression is more masculine. It is recognised to be synonymous with other attributes in different regions of Brazil, such as "butch", "dyke" or "trucker".

During pregnancy, the interlocutors already had relations with women and their gender expression was masculine. That situation led to things being said around them with a view to accommodating them into a heterosexual binary logic, in two ways. The first, involving discourse that lesbian women cannot have heterosexual sexual relations and, the second, supported by a Christian religious perspective, perceiving pregnancy as "salvation" from what is judged to be deviant behaviour, as in Joaquim's narration of when he revealed the pregnancy to his father:

When I told him I was pregnant, he relaxed. You don't like women?! Then everything will work out fine. I think that, to my father, that was salvation (Joaquim, 11 Apr 2023).

The meanings produced in the interlocutors' contexts revealed that, even before transition, when their homosexual sexuality was recognised, things were said that place subjects within a restricted, limited framework which, at this juncture, finds support in society's compulsory cisheteronormativity, but is incapable of encompassing all the complexity and plurality of possible manifestations, sexual and gender movements³¹.

In the social context, what can be seen is a forced understanding of motherhood, attributed to how the interlocutors practice care:

People generally don't understand, do they? Because no matter how much you explain that you are the father, someone with a closed mind will always see you as a woman. It's difficult, but you ignore it and get on with life (José, 13 Sept 2022).

The binary structure impregnated in gender relations, associated with parenting and constructed by a conservative hegemonic culture on man-woman patterns of dialogic interaction, results in the respective parental roles of father and mother, disregarding the repercussions that have occurred in the social and historical fields of our present context. Butler³² argued that such family arrangements are effaced, because they represent a threat to socially legitimised gender and kinship structures:

Variations on kinship that depart from normative, dyadic heterosexually based family forms secured through the marriage vow are figured not only as dangerous for the child, but perilous to the putative natural and cultural laws said to sustain human intelligibility³²(p.224).

The meanings of parenthood present in social discourses reiterate the primacy of biology over gender, as cited in other studies of trans people who began the transition after pregnancy¹⁴⁻¹⁷. These meanings are connected with the understanding that regards the sexed/maternal body as almost obligatorily at the service of reproduction and ascribes the interlocutors' demand for recognition of paternity to a supposed maternal instinct¹⁵, strengthened in the participants' context by the type of care they perform.

Fatherhood then is an attribute of a certain masculinity: that of married heterosexual men³³. The rules of conjugal relationships are more associated with men³⁴, which influences meanings of parenthood in the social context in which the interlocutors move, accompanied by their partners, and are called father and their partner, mother, to accommodate them within the nuclear family formation and meet gendered expectations of parental roles. The gendering of parenthood produces specific practices and behaviour for men

and women, in such a way that it can be said that parenting, like gender, is also performatised^{27,35}.

Masculinity is defined by the attributes of the paternal role, as in John's narrative:

The burden on me is greater, as the provider, you know, whether I like it or not, I was raised like that, that a male person will always take greater responsibility, they have to run around getting things done (João, 25 Aug 2022).

The interlocutors' performance of masculinity permeates understandings of the conception that attributes the provider role to the father. Paid work is a point of reference in conceptions of fatherhood and masculinity, especially on the hegemonic view^{36,37}. The interlocutors raised the financial factor as a challenge in gaining legitimacy and recognition as a father. This is because prejudice raises numerous barriers to trans people's entering the job market, undermining their mental health and self-esteem and rending them even more vulnerable for lack of minimum rights and conditions of citizenship. Interlocutors' life stories were found to include problems with housing, lack of food and income obtained from prostitution, issues identified also in other studies³⁸.

Gendering is also expressed in João's being recognised as a "big daddy", for exercising exhaustive care for his daughter. On the other hand, when Jonas was called "father", he was questioned about his son's mother: "'Where's his mother?' So I say I am mother and father [...] Normally everything is directed to the mother [...] no one sees the father's side".

Although the situations are different, both underline the synonym: care is a feminine attribute and it is thus up to the interlocutors to accept being named mother and father, as a strategy to satisfy the need to resignify male identity and not stray from the commitment to caring for their children and maintaining effective and affectionate bonds with them.

Accumulating parental roles makes parenting dangerous terrain, not because of the responsibility attributed to caring for children, but because of the vigilance directed to controlling these functions, which are often specified by unattainable performances combining gender, sex and sexuality. "No one sees the father's side", in the excerpt highlighted, expresses not only the desire to be recognised as a father by name, but represents the desire for a deconstruction of the naturalising conception that still today frames discourses that remove the father from giving care and endorse the notion that children's education is an attribute of femininity.

Heterosexist surveillance was also experienced when Jonas was accompanied by his son's stepfather (a cis man). He reported that: "people were staring at our faces. I think they thought there were two gays and a child [...] It doesn't bother me".

That the nuclear family consisting of a cisgender father and mother should be the rule appears to have been inspired by psychoanalytic concepts⁴, which establish that the maternal and paternal functions are fundamental to children's full development and keep them from any psychological harm and, in another sense, that rule serves to guarantee cultural and human procreation. Related declarations include discursive practices, operated by hegemonic powers, seeking to perpetuate heterosexuality in a symbolic field that is jeopardised by the emergence of new family configurations.

The results underline that parenting, like sexuality, goes through the process of life management and biopolitics³⁹, which is constituted by subjecting bodies and controlling populations in the field spread by the imperative of cisheter-onormativity. Given the diversity of family formations, in response to an urgent organisational policy need, the parenting considered in this study is associated with the notion of device, as a strategic function of domination, "[...] constituting an articulated network of statements, practices and rules that crystallise into an dynamic of evaluation" (p.81).

Resignification of the fatherhood of trans men who become pregnant before transition is hindered by cultural factors, regulatory discourses and other instances of law, including the primacy of biological aspects in naming gender, the sovereignty of maternal instinct, the gendering of parental roles, beliefs about the nuclear family and the absence of legal provisions and rights that contemplate other possible families.

Parenthood and trans-masculinities: experiences in social and health contexts

Here, interactions in the social context are permeated by violence and stigmas that reveal the interlocutors' vulnerabilities and coping strategies. As in another study, these practices appeared in health contexts¹² and educational spaces. The participants' narratives spoke of a lack of knowledge about trans-identities, imbroglios over social names, precarious citizenship and perceived blaming of parents to justify health conditions or school performance in connection with their children.

In this respect, despite all the changes in gender constructions in modernity⁴¹, the interlocutors found that society at large understood little of how their parental role related to their gender identity, which interfered directly in their itineraries in health facilities:

Because society itself doesn't even know how to identify the term "trans man". It only says "the woman who became a man". People don't understand, they don't know. They often think it's the opposite, you know? And that goes for health services and policies, too (João, 25 Aug 2022).

The unintelligibility of trans identities in parenting leads subjects to a process of abjection, to places that are "those 'unlivable' and 'uninhabitable' zones of social life which are nevertheless densely populated by those who do not enjoy the status of the subject, but whose living under the sign of the 'unlivable' is required to circumscribe the domain of the subject" (p.155).

In addition to the lack of knowledge, there is a weakness in health policies that, through protocols, ensure a stigmatised experience of gender in health services:

When I went to the maternity ward it was a bit strange, because I had to wear a dress that I didn't want to wear. The maternity staff arrived and asked: "Where is his mother?" And I replied "I am his mother!" They often thought she was my sister and made some jokes that didn't bother me (Jonas, 23 Dec 2022).

The receptiveness and care recommended in health services are supplanted in practice by actions that reproduce naturalising criteria, which places identities under tutelage¹² and frames subjective manifestations as related to abnormal and pathological conditions, in health services which should offer care that is universal, comprehensive and, most importantly, equitable⁴³⁻⁴⁶.

The interlocutors' narratives also indicated that, in institutional dealings that form part of social devices, such as health units and schools, there are parameters of social intelligibility that govern parenting and its roles. In this conjecture, the mechanisms provided by the State point to a fragile legal framework that sometimes exposes trans parents to embarrassing situations, for example, when they have to show documents that have not yet been rectified:

Then the person wonders: "But how's that? Did you have her?" So there are always these kinds of questions (João, 25 Aug 2022).

So I see I get looks when I say my registered name, and people look at me differently. I think this will only stop the day I put my name, even if it's already male (Jonas, 23 Dec 2022).

Bento⁴⁷ recognises the importance of a social name in trans people subjective identity, although he stresses that this reflects what he calls "precarious citizenship", in which rights are almost completely absent or fragile, given that most of them are constituted as "legal makeshifts" through flimsy mechanisms associated with dominant discursive patterns and practices regarding gender and sexuality, which do not include a paternal identity associated with a female name on a civil record.

From a critical perspective, there is a need to reflect on the dynamics of the name rectification process, as it is extremely bureaucratic, time-consuming and expensive⁴⁴ and can thus hinder trans people's access to health services, especially with regard to guaranteeing their sexual and reproductive health. Accordingly, the process for altering personal documents and registering children appears to constitute a strategy that oscillates between assuring identity recognition and aligning with an imperative, with of ratifying cisheteronormative criteria of intelligibility through the State.

For the interlocutors, talking about parenthood meant dealing with violence and exhaustion, as present conditions call for energetic action to combat various transphobias, in addition to marking the place of struggle and affirmation of their identities⁴⁸. The violations and prohibitions produce countless vulnerabilities, leaving them "[...] exposed to their possibility, and not to their realization"⁴⁹(p.22). Such strategies are varied and include passability, confrontation, breaking emotional bonds and emotional distancing, included in a constant dynamic of "conformity and resistance"³⁸(p.91).

In the fabric of social relations of power and exploitation in a capitalist, patriarchal, sexist, racist and transphobic society, violence against trans people⁵⁰, as a public health issue, institutes a process in which the "[...] derealisation of the Other means they are neither alive nor dead, but endlessly spectral"⁵⁰(p.35). In that situation, violence can be interpreted as an abjection of identities and, in another sense, a practice that does no harm, because such lives were already denied. Butler⁵⁰ writes that: "those who are unreal have, in a sense, already suffered the violence of derealisation. [...] But they have a strange way of remaining animated and so must be negated again (and again)"⁵⁰(p.34-35).

The stigma and prejudice associated with trans parents is supported by the idea of parenthood "[...] as a social device, forged with the intention of ensuring the functioning of a certain

order of collective intervention"⁵¹(p.81), in which a care relationship could explain everything from psychological problems to maladjusted and deviant behaviour, as seen in Jonas' narrative, when asked about his son's restless behaviour: "Why is he like that?' He is like that because I am raising him, and that is the way he is".

The movement to blame parents is reflected in the present-day malaise brought on by the "normative and orthopaedic" dimension of parenting¹⁰, which standardises effective parenting practice in material form as the production of bodies imbued with docility and obedience, on the argument of guaranteeing the offspring's wellbeing.

In practice, this is fantasy discourse, because the State does not guarantee that basic support from education, protection and care are provided in atypical conditions, although guaranteed by law. This scenario surfaced two interview excerpts, in which the children's health conditions (oppositional defiant disorder and autism) warranted the presence of a teaching assistant teacher to monitor educational progress, facilitate communication, develop relational strategies and so on.

João and Jorge told of making adjustments and developing strategies to ensure that their children are OK at school, that is, filling an institutional gap:

My daughter is getting into a lot of trouble at school. She has Oppositional Defiant Disorder, and I get called in by the school all the time. I have a whole routine of my own and having to go and sort things out in the middle of her class is hard (João, 27 Mar 2023).

I go to school with my son every day. I spend about five hours there every day, because there is no teaching assistant (Joaquim, 25 Apr 2023).

The lack of mechanisms to ensure the necessary support in these situations has harmful effects on identity, self-esteem, notion of time, engagement with personal interests, construction of affection and availability⁴⁸. Parenting by trans males cannot be understood without first recognising the social vulnerabilities they are prone to, like those that emerged from the field: prejudice, precarious support networks, exposure of their bodies and weak public policies.

Given the difficulties and hardships encountered in this process of resignification, some mechanisms have been brought in to mitigate the health impacts of the violence and effacements. The interlocutors' passability is seen as a way of not making their identity public and not suffer-

ing the prejudice and violence resulting from that revelation:

I try to go unnoticed everywhere, even at my neighbourhood health centre. Not that it's shameful to be a trans man, but I avoid it, you know? [...] because they do hurt me (John, 25 Aug 2022).

On the other hand, passability represents demarcation and social control over their bodies that come to be monitored on the basis of a repertoire of procedures capable of fulfilling legitimate identities supported by the same mechanisms that once excluded them.

In this regard, body modifications can be key markers of identity, as a mechanism with dual meaning affording, on the one hand, invisibility and, on the other, protection from attacks, violence and prejudice. Pontes and Silva⁵² argue that, to achieve congruence with cisnormality, passability constitutes a regulator of the power used to materialise bodies in order to attain the natural body.

Lastly, various kinds of action are taken to avoid the oppression experienced in health services and other social spaces, such as schools: using the knowledge gained in activism to guarantee rights; using headphones to avoid hearing possible criticism; avoiding people, including relatives, who do not recognise their identity; and, ultimately, but barely present in the narratives, directly confronting the hate speech often used in defence of family and common decency without understanding that, behind such gender discourse, the reference is only to people.

Final remarks

The experience of parenthood narrated by the interlocutors underlines the importance of recognising and giving due value to the singularities and peculiarities expressed in their experiences, which make it possible to understand the strategies that underpin social intelligibility and manage populations in their family settings.

This study evidenced the tensions that structured experiences in constructing transparent-hood, framing social lives that oscillated between transgression and accommodation. It was found, for example, that the interlocutors sustain their care functions, even in the context of demanding routines, even though members of various different social devices, by raising doubts about their body and/or social name, question the legitimacy of the parental relationship. An alternative dynamic demonstrated that the father could use

male gender stereotypes to demarcate how to exercise a paternal role.

In this way, the construction of transparenthood - which appears, in conceptual terms, to be related tangentially to mechanisms for managing populations and containing family dynamics seemed not to uncouple from a gendered, binary mode ingrained in the very notion of parenthood. The narratives indicated that transparenthood and dissident performances of parenthood are socially captured to maintain sexist ideals, and a biologistic matrix is used to maintain the device of compulsory reproduction, as well as to perpetuate gender roles by reinforcing passability as a strategy for legitimising the father's place.

Also, thoughts about trans male parenthood have broad implications for shaping social and health contexts. They can guide professionals working in these spheres to foster receptiveness and develop alternatives that allow these families to play a prominent role, by removing them from the stigmas that often confine them in dark places called "the closet" and from the suffering caused by stressful situations.

Finally, one crucial collective task is to understand the subversions and repetitions of these social constructions about parenting, motherhood and fatherhood as strategies of contestation and for guaranteeing the existence of human diversity. In the light of discussions about transhomoparenting and collective health, this study contributes to understanding the complex dynamics involved in parenting by trans people. It emphasises the importance of discussing existing tensions, exposing and combating the hostilities that families may be subjected to and recognising the overlays used as strategies for maintaining the biologistic matrix and gendering family roles.

Collaborations

DS Dantas: study conception, data collection, writing, analysis and final review of the article. GPLL Almeida: writing, analysis and final review of the article. BO Ferreira and M Therense: writing, data analysis and final review of the article. ALM Neves: guiding and coordinating the research, writing, data analysis and final review of the article.

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References

- Facchini R, França IL, organizadores. Direitos em disputa: LGBTI+, poder e diferença no Brasil contemporâneo. Campinas: Editora da Unicamp; 2020.
- Peres WS. Cenas de Exclusões Anunciadas: travestis, transexuais e transgêneros e a escola anunciada. In: Junqueira RD, organizador. Diversidade Sexual na Educação: problematizações sobre a homofobia nas escolas. Brasília: Ministério da Educação, Unesco; 2009. p. 85-93.
- Peres WS, Toledo LG. Dissidências existenciais de gênero: resistências e enfrentamentos ao biopoder. Rev Psicol Polít 2011; 11(22):261-277.
- Zambrano E. Parentalidades "impensáveis": pais/ mães homossexuais, travestis e transexuais. Horiz Antropol 2006; 12(26):123-147.
- Carvalho-Barreto A. A parentalidade no ciclo de vida. Psicol Estud 2013; 18(1):147-156.
- Cúnico SD, Arpini DM. Família e monoparentalidade feminina sob a ótica de mulheres chefes de família. *Aletheia* 2014; 43-44:37-49.
- Gorin MC, Mello R, Machado RN, Féres-Carneiro T. O estatuto contemporâneo da parentalidade. Rev SPAGESP 2015; 16(2):3-15.
- Zornig SMAJ. Tornar-se pai, tornar-se mãe: o processo de construção da parentalidade. *Tempo Psicanal* 2010; 42(2):453-470.
- Souza FHO, Fontella C. Diga, Gerárd, o que é parentalidade? Clínica Cult 2016; 5(1):107-120.
- Teperman D. Parentalidade para todos, não sem a família de cada um. In: Teperman D, Garrafa T, Iaconelli V, organizadoras. *Parentalidade*. Belo Horizonte: Autêntica Editora; 2020. p. 89-108.
- Pfeil CL, Lemos DK, Gomes E, Algarte F, Giulia K, Carvalho MM, Pfeil BL. Gravidez, Aborto e Parentalidade nas Transmasculinidades: um estudo de caso das políticas, práticas e experiências discursivas. REBEH 2023; 6(19):7-31.
- Angonese M, Lago MCS. Direitos e saúde reprodutiva para a população de travestis e transexuais: abjeção e esterilidade simbólica. Saude Soc 2017; 26(1):256-270.
- Porchat P. Elementos para refletir acerca do trabalho psicanalítico com famílias que "saem do armário". Rev Bras Psicanál 2017; 51(2):103-116.
- 14. Trajano MG. Entre a cruz e a espada: experiências de parentalidade de homens e mulheres trans em contextos cisheteronormativos [dissertação]. Rio de Janeiro: Fundação Oswaldo Cruz; 2019.
- Dantas DS, Neves ALM. Parentalidade de homens trans: uma revisão integrativa. REBEH 2023; 6(20):60-82.
- Angonese M, Lago MCS. Família e experiências de parentalidades trans. Rev Ci Hum 2018; 52:e57007.
- 17. Pinho AR, Rodrigues L, Nogueira C. (Des)Construção da parentalidade trans: Homens que engravidam. *Ex Aequo* 2020; 41:195-205.
- Alday-Mondaca C, Lay-Lisboa S. The Impact of Internalized Stigma on LGBT Parenting and the Importance of Health Care Structures: A Qualitative Study. Int J Environ Res Public Health 2021; 18(10):5373.
- Charter R, Ussher J, Perz J, Robinson K. Negotiating mental health amongst transgender parents in Australia. *Int J Transgend Health* 2021; 23(3):308-320.

- 20. Haines BA, Ajayi AA, Boyd H. Making trans parents visible: Intersectionality of trans and parenting identities. Fem Psychol 2014; 24(2):238-247.
- 21. Salinas-Quiroz F, Costa PA, Lozano-Verduzco I. Parenting Aspiration among Diverse Sexual Orientations and Gender Identities in Mexico, and Its Association with Internalized Homo/Transnegativity and Connectedness to the LGBTQ Community. J Fam Issues 2020; 41(6):759-783.
- 22. Fedynich AL, Birkley EL, Chard KM. Cognitive-Behavioral Conjoint Therapy for PTSD: A Case Study of a Transgender Male Co-Parenting with Former Spouse and Perpetrator of Domestic Violence. Cogn Behav Pract 2020; 28(5):435-443.
- 23. Zhang Z, Chien HY, Wilkins K, Gorman BK, Reczek R. Parenthood, stress, and well-being among cisgender and transgender gay and lesbian adults. J Marriage Fam 2021; 83(4):1460-1479.
- 24. Moleiro C, Alarcão V, Giami A. Looking at Resilience among Transgender and Gender Diverse People in Portugal: Gender Affirmation Paths and Parenting Aspirations. Soc Sci 2023; 12(2):68.
- 25. Pederzoli AA. Papai ou mamãe? Uma discussão dos papéis parentais em homens trans que engravidaram [dissertação]. São Paulo: Universidade de São Paulo;
- 26. Pereira PLN. De barba e barrigão: histórias de gestação e parentalidade de homens trans [tese]. Rio de Janeiro: Fundação Oswaldo Cruz; 2021.
- Barbato S, Alves PP, Oliveira VM. Narrativas e dialogia em estudos qualitativos sobre a produção de si. Rev Valore 2019; 5(n. esp.):22-36.
- 28. Instituto Brasileiro de Geografia e Estatística (IBGE). Cidades e Estados: Manaus [Internet]. [acessado 2023 nov 28]. Disponível em: https://www.ibge.gov.br/cidades-e-estados/am/manaus.html.
- Gomes R, Nascimento EF. A produção do conhecimento da saúde pública sobre a relação homemsaúde: uma revisão bibliográfica. Cad Saude Publica 2006; 22(5):901-911.
- Butler J. Problemas de gênero: feminismo e subversão da identidade. Rio de Janeiro: Civilização Brasileira;
- 31. Louro GL. Teoria Queer uma política pós-identitária para a educação. Rev Estud Fem 2001; 9(2):541-553.
- Butler J. O parentesco é sempre tido como heterossexual? Cad Pagu 2003; (21):219-260.
- 33. Ribeiro CRS, Gomes R, Moreira MCN. A paternidade e a parentalidade como questões de saúde frente aos rearranjos de gênero. Cien Saude Colet 2015; 20(11):3589-3598.
- Therense M, Russo J. A ilusão da retórica da distinção total entre as esferas conjugal e parental: considerações a partir da análise de gênero. In: Soares LCEC, Rapizo RL, organizadores. Práticas e saberes psicológicos com famílias em diferentes contextos: clínica, comunidade, saúde e sistema de justiça. Curitiba: CRV; 2023. p. 41-67.
- 35. Cardozo F. Performatividades de gênero, performatividades de parentesco: notas de um estudo com travestis e suas famílias na cidade de Florianópolis/ SC. In: Grossi MP, Uziel AP, Mello L, organizadores. Conjugalidades, parentalidades e identidades lésbicas, gays e travestis. Rio de Janeiro: Garamond; 2007. p. 233-252.

- 36. Silva MR, Piccinini CA. Sentimentos sobre a paternidade e o envolvimento paterno: um estudo qualitativo. Estud Psicol 2007; 24 (4):561-573.
- 37. Connell RW, Messerschmidt JW. Masculinidade hegemônica: repensando o conceito. Rev Estud Fem 2013; 21(1):241-282.
- Almeida GS, Pilar A, Gebrath Z. As relações de trabalho como um aspecto da assistência à saúde de pessoas trans. In: Coelho MTAD, Sampaio LLP, organizadoras. Transexualidades: um olhar multidisciplinar. Salvador: EDUFBA; 2014. p. 187-199.
- Foucault M. História da Sexualidade I: A vontade de saber. Rio de Janeiro: Edições Graal; 1988.
- Souza FHO. Mutação Sociais, Família e Parentalidade. Uma entrevista com Gerard Neyrand. Psicol Soc 2018; 30<u>:</u>e161410.
- 41. Neves ALM, Sívori HF. Ação Política em Saúde de Pessoas trans em Manaus, Amazonas. Cien Saude Colet 2024; 29(1):e00642023.
- Butler J. Corpos que pesam: sobre os limites discursivos do "sexo". In: Louro GL, organizadora. O corpo educado: pedagogias da sexualidade. Belo Horizonte: Autêntica; 2000. p. 151-172.
- 43. Bento B. O que é transexualidade? São Paulo: Brasiliens; 2008.
- Bento B. A reinvenção do corpo: sexualidade e gênero na experiência transexual. Salvador: Editora Devires; 2017.
- 45. Leite Jr J. Nossos corpos também mudam: a invenção das categorias "travesti" e "transexual" no discurso científico. São Paulo: Annablume; 2011.
- Teixeira FB. Dispositivos de dor: saberes-poderes que (con)formam as transexualidades. São Paulo: Annablume Editora; 2013.
- 47. Bento B. Nome social para pessoas trans: cidadania precária e gambiarra legal. Contemporânea Rev Soc UFSCar 2014; 4(1):165-182.
- Arantes A. Da gestação à parentalidade: relato de uma gestação transmasculina, controle da reprodução humana e o reforço do estigma para população trans. REBEH 2023; 6(19):105-119.
- 49. Butler J. Regulações de gênero. Cad Pagu 2014; 42:249-274.
- 50. Butler J. Violência, Luto, Política. In: Baptista MM, organizador. Gênero e Performance: Textos Essenciais 1. Coimbra: Grácio Editor; 2004. p. 21-51.
- Souza FHO. Atendimento clínico de pais separados. In: Soares L, Rapizo R, organizadores. Práticas e saberes psicológicos com famílias em diferentes contextos: clínica, comunidade, saúde e sistema de justica. Curitiba: CRV; 2023. p. 69-88.
- Pontes JC, Silva CG. Cisnormatividade e passabilidade: deslocamentos e diferenças nas narrativas de pessoas trans. PERI 2017; 1(8):396-417.

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