

Preface

After several decades of invaluable work in the field of Gender Dysphoria (GD) and Disorders of Sex Development (DSD), Prof. Dr. Peggy Cohen-Kettenis will retire in 2013. Starting her work with individuals with GD and DSD in 1987, Peggy Cohen-Kettenis became a scientific leader in the field by publishing numerous papers over the years. She was a pioneer through her involvement in the development on the “Dutch Protocol,” on the treatment of adolescents with GD, in her participation in several guidelines on the treatment of individuals with GD and DSD, and as chair of the American Psychiatric Association’s DSM-V subworkgroup on Gender Identity Disorders. At the moment, she is a member of the ICD-11 working group on Sexual Disorders and Sexual Health.

We have asked a number of people who worked closely with Peggy to describe her career: her promoter during her PhD period, Prof. Dr. W.T.A.M. Everaerd; one of her PhD students in Utrecht, Prof. Dr. J.T. Swaab; the former director of the Genderteam at VU University Medical Center, Prof. Dr. L.J. Gooren and the coordinator of the Genderteam at VU University Medical Center, J. Megens; and the director of the Center of Expertise on Gender Dysphoria at VU University Medical Center, Dr. M.A.A. van Trotsenburg.

The ICIP in Utrecht

On August 23, 1948, Peggy was born in Djakarta. To place this in historical perspective, on August 30 the Radio Philharmonic Orchestra performed their opening concert in the Garden Hall at the zoo of what then was still called Batavia. In the announcement of the *Nederlands muziekinstituut* (<http://www.nederlandsmuziekinstituut.nl>), it was announced that the Dutch government planned to engage a group of musicians for 2 years to form a radio orchestra. *“Because in the East it is still not safe, which implied that it was a risky mission. Anyway, ‘overseas’ in those years*

there was a great need for cultural facilities.” The members of the orchestra returned to the Netherlands in 1950 with the M.S. Johan van Oldenbarnevelt. Peggy may not have been aware of this celebratory concert near her birthday, but it is nice that there was already music for her.

In 1968, the *revolution year*, she went to Utrecht University to study clinical and developmental psychology. She graduated in 1973, but already had a good working relationship with the behavior therapy group at the Department of Clinical Psychology (the ICIP). She became a behavior therapist and supervisor of trainees in behavior therapy, and somewhat later she continued her psychotherapy education at the Institute of Medical Psychotherapy.

Behavior therapy was introduced in the Netherlands in the early 1960s. We initiated a group “Behavior therapy and behavior modification.” Initially, we focused on teaching behavior therapy, which was soon followed by the development of a research plan. ZWO (Pure Scientific Research), currently the Netherlands Organization for Scientific Research (NWO), in those years supported a strong group of psychonomic psychologists. By 1970, social psychologists and clinical psychologists had merged with the psychonomic group into the foundation Psychon. At this time, it became easier to apply for grants for clinical studies, particularly for studies with an experimental approach and design. In 1970 we obtained a grant for “Behavioral treatment of agoraphobia,” then in 1972 for “Social skills training,” and the third in 1975 for “The development of phobias.” Peggy planned to look into the tendency of children to react anxiously as a function of perceived causal relationships between events, especially whether they could exert control over the events. In the meantime, we learned that in Amsterdam Erie Fournier and Yara Dekking had a plan to study social anxiety. The plan was supported by a grant of the *Preventie Fonds*. Bringing these plans together could lead to a fruitful cooperation, and it thus went forward. Peggy would take the task to construct measures for cognitive aspects and Yara did the same for social anxiety. When the measures were available, it would be possible to study the cognitive aspects of social anxiety. Cognitive aspects of social anxiety in children also became the title of the combined dissertation, which appeared in 1980.

In 1973, I became involved in problems concerning transsexuality. Together with Lex van Naerssen, we had built a relationship with working groups of the Netherlands Society for Sexual Reform (NVSH). We offered assistance to people who experienced problems with their sexual preferences. Sometimes people were troubled by their contacts with law enforcers, e.g., because they exposed themselves as exhibitionists. We also supported working groups, especially the work group transvestite and transsexuality. We became acquainted with Anton Verschoor who was very active in the NVSH and in the Foundation Netherlands Gender Centre. In 1973, the Health Council of the Netherlands set up a committee for a renewed consideration, after the negative findings and advice of a 1965 committee on the treatment of people with gender dysphoria and the legal adjustment of sex determination. Anton Verschoor wrote about the situation after 1965: “In professional circles there exists significant disagreement about the origins of the phenomenon of transsexuality; a majority of the psychiatrists consider these people as

serious patients and on this ground they oppose and reject somatic interventions. The operations were not considered to be a medical necessity and therefore are not to be paid for by the medical assurance boards.” Verschoor also writes: “Or, recently: is it proper and responsible that such an individual meets with his children on a regular basis; would that burden the child with identity problems?” (Verschoor, 1983). In 1974 the Supreme Court of the Netherlands announced that it was no longer possible to change birth certificates.

All members of the 1973 committee knew people who suffered from gender dysphoria, and, in contrast with the 1965 committee, they were positive about hormonal and surgical interventions and they also argued for the adjustment of the birth certificate. The *transsexism* committee took its name from a proposal by committee member Coen van Emde Boas, who reasoned that gender dysphoria is about sex (determination) and not about sexuality, thus transsexism. He was an important advocate for treatment. Legal issues were in the hands of Frans van der Reijt, lawyer and committee member. The committee noted that there was no reported scientific evidence about the efficacy of the treatment of gender dysphoria. There was also no systematic review in which treatment probands (those who ask treatment for gender dysphoria) had received treatments.

As a member of the committee, I was invited to design a study among probands who had been treated for gender dysphoria. About that time, Peggy was finishing her dissertation work, and she already had become a member of what we called the working group on the sexuality project. In 1977, together with Lex van Naerssen, we wrote a book about sexuality. Peggy also became active as a member of the board of Netherlands Society of Sexology. In 1979–1980 we wrote a grant application, which was funded by ZWO-Psychon for the “Ex-post facto evaluation of the treatment of transsexualism.” Peggy acted as direct and daily supervisor of Abraham (Bram) Kuiper who performed the research as part of his dissertation. The study was conducted in close cooperation with Louis Gooren’s group, currently well known under the name of “Kennis- en Zorgcentrum voor Genderdysforie” at VUmc. Bram obtained his doctoral degree in 1991. In 1987, Peggy moved to Utrecht Medical School and in 2002 to VUmc. Late in 1985, I moved to the University of Amsterdam.

It has never been difficult to follow Peggy’s work. She is an international expert on gender dysphoria and eventually became director of the Kennis- en Zorgcentrum at VUmc.

Walter Everaerd

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Peggy at the University Medical Centre Utrecht (1987–2002)

In 1987 Peggy became associate professor at the University Medical Centre Utrecht (UMCU), in the Department of Child and Adolescent Psychiatry. The UMCU was called the Academic Hospital Utrecht at that time, and the Child and Adolescent Psychiatry unit was situated in the center of Utrecht, in Nicolaas Beetsstraat at a time when we all went out for lunch in the center of the city. Peggy's room was in the cozy attic of the outpatient child and adolescent clinic, where the child psychiatrists and psychologists had their offices. During that time, new hospital and university buildings were prepared in Uithof, outside of the city. A few years later, we moved with the adolescent clinics from Nicolaas Beetsstraat to a temporary location of "Geertebolwerk," to wait for our new location, which would be ready for use in 1989. The old charming location was redesigned as housing for young urban professionals.

The Department of Child and Adolescent Psychiatry of the University Medical Centre of Utrecht consisted of age-specific outpatient divisions (infants, children, and adolescents), several inpatient units, and a unit for acute psychiatric problems where adolescents with the first psychotic episodes were taken care of. Each subdepartment of child and adolescent psychiatry was headed by a child psychiatrist who was responsible for the quality of the patient care and to whom the personnel had to report. According to a matrix structure of management, Peggy headed the psychologists and educationists of all subdepartments of the Child and Adolescent Psychiatry. Consequently, she was part of the management team of the Department of Child and Adolescent Psychiatry. Right after she arrived in UMCU, Peggy started frequent meetings of psychologists and educationists to synchronize assessment procedures and to introduce systematic updates of evidence-based methods of assessment and treatment. She introduced a positive, critical, and innovative climate within the group. As a result, the group was ready for education of students and young professionals that were following post-master tracks for psychotherapy and clinical psychology. Moreover, she stimulated research projects within the group that involved assessment and treatment. Being an academic specialized department with a supra-regional function, child and adolescent psychiatry focused on serious psychopathology with high impact on quality of life. The specific regions of interest were neurodevelopmental disorders, mainly addressed from a neurobiological perspective, under the inspiring and stimulating management of Prof. Dr. Herman van Engeland. The Department of Child and Adolescent Psychiatry became part of the "brain division" of UMCU (psychiatry, neurology, sports medicine, and rehabilitation medicine); Peggy divided her growing group of psychologists and educationists into three sections, with specific expertise on (1) assessment, (2) individual and group therapy, and (3) family therapy. These sections participated in the continuous education of child psychiatrists and psychologists. Many health psychologists, psychotherapists, and clinical psychologists were trained to meet the requirements for certification.

In the highly specialized Department of Child and Adolescent Psychiatry, several lines of research were combined with high standards of care: The focus was on autism spectrum disorders, psychosis, behavioral disorders, anxiety disorders, eating disorders, psychosomatic disorders, and gender identity disorders. Not surprisingly, Peggy was the one who was leading in the development of the care for children and adolescents with gender identity disorders. She instructed students and young professionals in the gender identity interview, taught us to observe specific aspects of gender development in children and adolescents, and started multidisciplinary consulting hours for children and adolescents with gender dysphoria. We, the junior colleagues, were trained in assessment and treatment of these youngsters in individual therapy as well as in groups.

Peggy expanded her work to Wilhelmina Children's Hospital (part of UMCU) and participated in the team for gender disturbances. The team consisted of pediatricians, clinical geneticists, urologists, endocrinologists, child surgeons, and psychologists. The team took care of children who were born with undefined gender or children with problems in gender development, e.g., due to androgen insensitivity syndrome. These children and their parents were psychologically treated by Peggy for years. In this team, children with genetic syndromes with consequences for gender development and their parents were also treated and guided, like boys with "Klinefelter syndrome" (47,XXY) and girls with "triple X" (47,XXX) or "Turner syndrome" (45,X0). This team was highly specialized in medical and psychological treatment of complex gender problems in children, and its reputation resulted in admission of patients from all over the world.

In 1993 Peggy was appointed special professor of gender development and psychopathology at the Medical Faculty in Utrecht. In 1996 she became the head of the department of medical psychology, organizing the psychological care for patients in all divisions of UMCU.

Peggy inspired many researchers and supervised many research projects. During the 15 years that she was appointed at UMCU, she supervised 12 PhD students, on the following research topics: "Developmental impact of neonatal stress" (Dr. P. F. Schothorst, 1990); "Transsexuality, evaluation of sex-change treatment" (Dr. A. J. Kuiper, 1991); "Prenatal exposure to Phenobarbital and diphantoin: A study on long-lasting consequences" (Dr. A. Dessens, 1996); "Towards a gender identity theory of transsexualism" (Dr. C. Doorn, 1997); "Information processing in a child psychiatric population" (Dr. H. Swaab, 1998); "Effects of sex hormones on cognition and emotion" (Dr. D. Slabbekoorn); "The effect of manualized behavior therapy with disruptive behavior disordered children in everyday clinical practice: A randomized clinical trial" (Dr. N. van de Wiel); "Sex reassignment. Predictors and outcome of treatment for transsexuals" (Dr. Y. Smith); "Emotional functioning in anorexia nervosa patients. A study on emotional experiences and neurophysiological responses" (Dr. M. de Zonneville); "Biological roots of sex differences: a longitudinal twin study" (Dr. C. Cohen-Bendahan); "Prenatal sex hormones and gender-related behavior" (Dr. C. van de Beek); and "Construction and validation of a questionnaire measuring social competence in youth" (Dr. E. Hulstijn). Many of her PhD students will remember Peggy's reassuring words in times of research

stress: “Just remember that doing research is basically only about counting and summarizing!” She was a very active reviewer in her field of expertise in those years, and in the same period she managed to publish numerous papers in high-impact peer-reviewed journals. She also organized numerous symposia at national and international conferences and held innumerable lectures. In addition, Peggy has been a member of the national research program committee “Geestkracht” since 2001 (ZonMw) and a member of the group that took care of the education of researchers in the national mental health care (since 2001).

In the same period that she devoted so much attention to her innovative clinical work, her impressive management job, and her pioneering research, Peggy was also very active in the Dutch professional network of psychologists. She headed the large division of “individual health psychologists” of the Dutch Society of Psychology from 1997 to 2000. I remember her discussing the specific mission for professionals at that time. She gave much of her energy to the development of the national register of clinical psychologists, a large step forward for the Dutch community of psychologists. She took part in the national advisory committee for installation of psychological specialists in the Netherlands (“College article 14 professions”) from 2002 to 2005. She also was a member of the supervisory board of the Association of Behavioural and Cognitive Therapy (1992–1999), and she was the chair of the curriculum committee and the principal lecturer of the post-master therapy education track in the central regions of the Netherlands from 1999 to 2004. On behalf of the University of Utrecht and the UMCU, she was a board member of the “foundation of post-master education in mental health care” (PDO-GGZ); this foundation took responsibility for the quality of post-master education in the central regions of the Netherlands. Moreover, Peggy took part in the steering committee to supervise the development of national multidisciplinary protocols for mental health care from 1999 to 2001.

During this period, Peggy also participated in the board of the Dutch society for Sexology (1994–2005) and in the board of the foundation of Medical Sexology (1993–2002). She has been a member of the board of the World Professional Association for Transgender Health (since 1995) and a member of the executive committee of the International Association for Child and Adolescent Psychiatry and Allied Disciplines (since 1999). In addition to all the above activities, from 1987 to 2002, Peggy participated in several project groups and committees to help develop the professional qualities of national and international psychologists.

Besides being an innovative clinician and researcher and a very inspiring and dedicated manager, Peggy also is a very pleasant colleague and wonderful person. On request, Prof. Dr. Herman van Engeland, the head of the department at that time, looked back at Peggy’s contribution to the Department of Child and Adolescent Psychiatry and praises her loyalty and reliability, her involvement with patients as well as colleagues, her enormous productivity, and her dedication to her work. She was a pleasant, quietly persistent, charming, and connected member of the staff who, on occasion, showed her excellent qualities as a cook by preparing very impressive Indonesian meals for her very grateful colleagues, whom she also traditionally offered Indonesian “spekkoek” on the occasion of her birthday.

Another member of the staff, Prof. Dr. Walter Matthys, at that time head of the clinic of behavioral disorders, remembers Peggy as “good-humored,” “cheerful,” “pragmatic,” “swift,” and “witty.” Dr. Jacques Giltay, a clinical geneticist and member of the multidisciplinary team for gender disturbances, describes Peggy as a very friendly and accessible person. She was highly respected for her knowledge and skills. A very nice colleague, e.g., illustrated by the fact that she acknowledged the contribution of the complete gender team in a chapter that she was invited to write for a handbook. Dr. Maretha de Jonge, one of the members of her group of psychologists and educationists, characterizes Peggy as a “pioneering professional,” a “warm person,” and a “stylish professor,” who was an “inspiring example” for young psychologists at the time.

Dr. Astrid Hoppe, a clinical psychologist in UMCU, values her open door policy: “Peggy was always available, not only as a manager, but also for personal issues.” She welcomed us colleagues frequently in her home: “We enjoyed many fine Indonesian meals at Peggy’s house.” She was an example for us in multitasking: “She combined her professional ambition with family life, seemingly finding the right work-life balance.” Peggy was able to put things in perspective: “Always positive and in control, I’ve never seen Peggy stressed.” Dr. Karin Tobias, clinical psychologist in UMCU at that time, now living and working in Perth, Australia, adds: “Peggy was the founder of the section of clinical psychology, I always perceived her as a team player.” “She was very dedicated to her patients and an advocate for better treatment for children and adolescents with Gender Identity Disorder.” “Next to this, she loved Asian food, good wine and social activities.”

Prof. Dr. Stephanie van Goozen, a fellow researcher in UMCU at that time, now appointed in Cardiff and Leiden, describes Peggy as “insightful,” in terms of not only her thinking and science but also her clinical work; “composed,” she never got agitated in times of stress, always remaining calm and collected, and dignified; and “enigmatic,” as in mysterious and defying description, she is not an easy nut to crack!

Peggy was very much appreciated in UMCU, and she was a very dedicated and productive clinician and scientist, a skilled and inspiring manager and supervisor, and, above all, a great colleague!

Hanna Swaab

Gender Dysphoria and Disorders of Sex Development

Progress in Care and Knowledge

Kreukels, B.P.C.; Steensma, Th.D.; de Vries, A.L.C. (Eds.)

2014, XXXII, 357 p., Hardcover

ISBN: 978-1-4614-7440-1