Where the Clinic Meets the Movement: Does Gender Ideology Arm Left-Wing Authoritarian Psychology?

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Abstract

For decades, psychological research on attitudes toward individuals who identify as transgender has focused almost exclusively on prejudice and has attributed that prejudice to authoritarian dispositions presumed to reside on the political right. Little research has examined the characteristics associated with strong endorsement of "gender-affirming" norms. We developed the Clinical Gender Affirmation Scale (CGAS), drawing items from official guidance issued by the American Psychological Association, American Psychiatric Association, World Professional Association for Transgender Health, and American Academy of Pediatrics, and administered it to 1,208 U.S. adults.

Across preregistered analyses, CGAS and related gender ideological-belief measures were strongly associated with left-wing authoritarianism (LWA), with Spearman correlations ranging from $\rho = 0.44$ to $\rho = 0.59$. CGAS also significantly predicted LWA, accounting for 31.5% of its variance. In ordinal regressions predicting CGAS, political identity was the strongest predictor, but LWA remained an independent predictor after controlling for political identity and age. LWA and CGAS were also positively associated with justification of political violence across six targets: killing Charlie Kirk, killing Donald Trump, killing Brian Thompson, arson of ICE buildings, damaging wealthy people's property, and violence against police. Both independently predicted all six violence outcomes after controlling for left-wing political identity.

These findings suggest that gender ideology is associated with LWA and willingness to justify political violence. Experimental research is needed to determine causality.

Introduction

In the psychological literature, opposition towards "gender affirming" norms has been treated as a symptom of prejudice, and this literature has overwhelmingly attributed that prejudice to authoritarian dispositions presumed to reside on the political right (Hill & Willoughby, 2005; Nagoshi et al., 2008; Norton & Herek, 2013; Miller et al., 2017). The psychology of those who most strongly endorse gender ideology has attracted almost no comparable scrutiny. This asymmetry reflects a broader pattern in which ideological content associated with the political left has been systematically underexamined (Costello et al., 2022; Nilsson & Jost, 2024, Krispenz & Bertrams 2024). The present study addresses that asymmetry directly. In this paper, we address the other side of the equation: What predicts *support* for gender ideology?

Left-wing authoritarianism (LWA) is the construct at the center of this study. It describes a psychological profile characterized by aggression toward perceived oppressors, enthusiasm for top-down censorship and institutional enforcement, and hostility toward conventional social institutions—in short, an authoritarian disposition organized around left rather than right political content (Costello et al., 2022). For decades it was assumed that authoritarianism was primarily a right-wing phenomenon, but recent psychometric work has established LWA as a robust, measurable construct with real-world behavioral correlates distinct from ordinary political liberalism (Conway, et.al. 2023; Costello & Patrick, 2022). LWA predicts support for coercion, punishment, and norm enforcement, but it does not by itself specify who should be protected, who should be opposed, or which institutions should act. We propose that these targets are supplied by ideological content.

In the present study, we test whether endorsement of gender ideology functions as one such *content package*, supplying those higher in LWA with targets, moral urgency, and a rationale for coercive institutional action.

A growing body of research suggests that identity-based, anti-oppressive, and social-justice frames can converge with authoritarian psychology when they are organized around perceived grievance, oppressor–victim categories, prejudice toward “privileged” groups, restrictive speech norms, or punitive justice-seeking. Studies of left-wing identity politics find that perceived grievance, identity-based ideology, prejudice toward groups perceived as privileged, and social justice attitudes are positively associated with LWA (Fasce & Avendaño, 2025; Love & Sharman, 2025). Previous research documents evidence that anti-oppressive ideological framing (critical theory) can sometimes serve this content-package function. Related work finds that postmodern or critical-social-justice-adjacent beliefs predict LWA and general, and that high-LWA individuals show greater support for restrictive political-correctness norms even after controlling for ideology (Conway et al., 2023; Deverson et al., 2025). Finally, broader research on perceived victimhood, moralization, and political violence suggests that identities organized around grievance, perceived victimization, and injustice, when paired with authoritarian or punitive dispositions, can predict support for anti-democratic or violent political action (Armaly & Enders, 2022; Mooijman et al., 2018; Nguyen et al., 2026). Taken together, these literatures suggest a common mechanism: ideological content that names an oppressor class, certifies ongoing victimization, and locates remedy in coercive institutional or social action which may supply authoritarian psychology with morally justified targets.

The present study asks whether the official positions of clinical institutions on so-called "gender affirmation" instantiate this process. We developed the Clinical Gender Affirmation Scale (CGAS) to measure the endorsement of consensus positions from the American Psychological Association (APA, 2015), American Psychiatric Association (APA, n.d.), the World Professional Association for Transgender Health (WPATH, 2022), and the American Academy of Pediatrics (AAP, 2018). These are not fringe organizations—they represent the official scientific and clinical establishment on care for individuals who identify as transgender. They are also, we argue, ideologically structured in a specific way. They draw on minority stress theory (Meyer, 2003) including extensions of that framework specific to those who identify as transgender (Hendricks & Testa, 2012; Testa et al., 2015; Bockting et al., 2013), which holds that such individuals face chronic psychological harm through stigma and discrimination, affecting their health and physical wellbeing through chronic identity-based stress. But rather than treating that framework as one explanation among several, the consensus documents embed it as clinical bedrock: failure to affirm becomes a source of physical harm, skepticism toward affirmation becomes a clinical risk factor, and the clinician's professional duty extends to advocacy against the social conditions causing that stress. The ideological architecture is not incidental to the scholarship; it is thematic. Its structure—named oppressors, certified victims, and an institutionally mandated response—is precisely the conditions identified in the literature on backfire effects: cases in which corrective or moralizing interventions unintentionally strengthen the very attitudes they seek to reduce, especially when they are experienced as coercive, identity-threatening, or morally accusatory. In this sense, the framework does not merely regulate belief; it can arm authoritarian psychology by activating threat, resentment, punitive certainty, and defensive group identification.

We propose that gender ideology content functions as a content package for LWA, potentially delivering three distinct forms of ideological fuel simultaneously. First, it specifies perceived sources of harm: Republicans/political conservatives, individuals not identifying as LGBTQ, Christians/religious conservatives, and law enforcement appear in the literature as groups or institutions associated with negative attitudes toward individuals who identify as transgender, restrictive policy preferences, discrimination, or mistreatment of individuals who identify as transgender (Campbell et al., 2019; James et al., 2016; Jones et al., 2018; Kcomt et al., 2020; Norton & Herek, 2013; Pew Research Center, 2022; Stenersen et al., 2022; Zell & Burnett, 2024). Within the proposed model, this perceived threat structure may provide authoritarian psychology with an identifiable set of enemies or oppressors—groups toward whom coercion, punishment, censorship, or institutional control can be morally rationalized as protective action.

Second, it mandates institutional norm enforcement: non-affirmation is framed as clinically harmful to patients, and clinicians are instructed to work with families and institutions to promote acceptance and "affirmation," including by: addressing parental resistance when it is understood as harmful to the child; involving parents, unless their involvement is harmful or not feasible; and ensuring that new names, pronouns, speech, and interpersonal interactions are respected in clinical and institutional settings (American Psychological Association, 2015; Coleman et al., 2022; Rafferty, 2018). Within the proposed model, this provides authoritarian psychology with a mechanism for norm enforcement: dissent from "affirmation" can be construed not merely as disagreement, but as inducing physical harm, thereby making compelled

affirming speech, institutional discipline, and intervention against parental resistance appear morally necessary and clinically protective.

Third, it reorders conventional sex and family norms. The clinical literature and professional guidelines increasingly frame gender identity as not reducible to biological sex. They recommend "affirmation" of asserted names, pronouns, and "gender expression"; and emphasize that family, school, and clinical environments should support "affirmation," with rejecting responses treated as risk factors for psychological distress and suicidality (American Psychological Association, 2015; Coleman et al., 2022; Hidalgo et al., 2013; Olson et al., 2016; Rafferty, 2018; Ryan et al., 2010; Tordoff et al., 2022; Russell et al. 2018). Within the proposed model, this supplies LWA with a third form of ideological fuel: a conventional order to dismantle. As such, biological-sex classifications and traditional parental or familial authority is seen as structures of harm requiring a moralized project of institutional correction.

Each component is specific, actionable, and derives from clinically endorsed consensus positions (American Psychological Association, 2015; Coleman et al., 2022; Hembree et al., 2017; Hidalgo et al., 2013; Olson et al., 2016; Rafferty, 2018; Ryan et al., 2010; Tordoff et al., 2022). Thus, gender ideology identifies the type of oppressor and oppressed classes about which people high in LWA are particularly concerned; it seeks top-down censorship and control over those who do not conform to its dictates, something those high in LWA generally endorse when applied to "oppressors;" and third, it seeks to exercise that control in a project that aspires to overturn the status quo with respect to sex and family, and overturning the status quo is something those high in LWA generally endorse. Thus, LWA is predicted to correlate with endorsement of "gender-affirming" principles, practices, and recommendations (measured through CGAS) such that those high in LWA will do so substantially more than those low in LWA.

Study Overview

A questionnaire assessing LWA, CGAS, beliefs about the importance of affirming people's "gender identity," beliefs about the threats to individuals who identify as transgender from a variety of groups (White supremacists, men, the Supreme Court, etc.), beliefs about an ongoing "trans genocide" and support for anti-democratic behaviors unrelated to gender ideology issues was administered to a national sample of over 1,200 adult Americans. The present report is organized around three central questions:[1]

1. How strongly do CGAS and other gender ideology-related beliefs correlate with LWA?

2. Does LWA predict CGAS and other gender ideology-related beliefs over and above political identity, or is LWA just a proxy for being liberal?

3. Do CGAS and LWA predict support for political violence?

[1] Analyses are ongoing, and additional research questions will be addressed in subsequent analyses. Initial analyses have yielded evidence relevant to the broader claims of this project beyond the three questions addressed directly in this report. Appendix A provides the full correlation matrix across key study variables, as well as an additional matrix disaggregating perceived danger from each outgroup identified in the study.

Methods

Participants and Design

We recruited 1,305 U.S. adults through CloudResearch Connect. Data collection began after pre-registration on the Open Science Framework (OSF: n2cqj). 97 participants were excluded for failing one or more attention checks, failing all three bot-detection items, completing the survey in under six minutes, having duplicate IDs, or incomplete responses, yielding a final analytic sample of N = 1,208. The sample was 51.2% female, 47.8% male, and 1.1% transgender identifying/gender non-conforming; mean age = 45.1 years (SD = 16.0). By party affiliation, 55.0% identified as or leaned Democrat, 27.2% identified as or leaned Republican, 15.1% were Independents with no lean, and 2.7% reported no affiliation or something else. By race/ethnicity, the sample was 56.8% White, 12.0% Hispanic, 11.8% Black, 11.7% Asian, 5.5% multiracial, and 2.3% another identity (Alaska Native or American Indian, South Asian, Middle Eastern, or something else). By religion, 51.2% identified as Christian, 22.4% as agnostic, 13.3% as atheist, and 13.1% as another religion or something else (including 1.9% Jewish, 1.6% Buddhist, 0.9% Muslim, and 0.7% Hindu). Sixteen respondents who reported no political affiliation or "something else" could not be placed on the left–right spectrum and were excluded from analyses controlling for political identity (N = 1,192 for those models). Scales were presented in randomized order across participants.

Measures

Left-Wing Authoritarianism (LWA). We used the 13-item Brief LWA Scale (Costello & Patrick, 2022).

Clinical Gender Affirmation Scale (CGAS). We developed the CGAS to measure endorsement of the official clinical consensus positions of the APA (2015), APA (n.d.), WPATH (2022), and AAP (2018) on individuals who identify as transgender and medical interventions. The five items were derived directly from the clinical guidance language in these documents and rated on the same 7-point agree/disagree scale. Table 1 shows, on the left, the text in APA (2015), APA (n.d), WPATH (2022), AAP (2018) that served as the basis for the 5 CGAS items we administered (shown on the right). Internal consistency was excellent (α = 0.95; M = 4.87, SD = 1.93).

Table 1. CGAS Genesis

Genesis of the Clinical Gender Affirmation Scale

Illustrative source language from major clinical organizations and the corresponding questionnaire items.

Source language (APA, APA Psychiatry, WPATH, AAP)	Questionnaire item
APA: "stigma and discrimination" and the "mental health consequences" of these experiences. (p. 832) **APA Psychiatry:** "Family and societal rejection of a person's gender identity are strong predictors of mental health difficulties." (p. 3) **WPATH:** "Gender minority stress associated with rejection and nonaffirmation has also been associated with suicidality." (p. S174) **AAP:** supportive youth report "significantly less distress than those who only experience rejection." (p. 8)	**1.** Failure to affirm a transgender person's gender identity increases the risk of serious psychological distress to the trans person.
APA: "Respecting and supporting TGNC people in authentically articulating their gender identity and gender expression" can improve well-being. (p. 835) **APA Psychiatry:** support may include "open-ended exploration" of gender identity and expression. (p. 3) **WPATH:** provide care that "affirms gender identities and expressions." (p. S21) **AAP:** children should be "free to develop and explore their gender." (p. 4)	**2.** People should be supported in expressing their transgender identity.
APA: discrimination can include "not using a person's preferred name or pronoun." (p. 838) **APA Psychiatry:** social affirmation may include adopting "pames." (p. 3) **WPATH:** staff should address people by their "chosen names and pronouns at all times." (p. S104) **AAP:** "A patient-asserted name and pronouns are used by staff." (p. 4)	**3.** Using the name a person chooses as part of their gender transition is a necessary form of support.
APA: use of "incorrect pronouns and names" may reinforce the gender binary. (p. 840) **APA Psychiatry:** social affirmation may include adopting "pronouns." (p. 3) **WPATH:** staff should address people by their "chosen names and pronouns at all times." (p. S104) **AAP:** "A patient-asserted name and pronouns are used by staff." (p. 4)	**4.** Using a transgender person's preferred pronouns (e.g., he/him, she/her, they/them) is a necessary form of support.
APA: provide "a safe environment to explore gender identity." (p. 835) **APA:** discuss with parents the importance of allowing the child freedom in gender identity development. (p. 843) **APA Psychiatry:** family therapy can create "a supportive environment" for mental health to thrive. (p. 3) **WPATH:** parents/caregivers should "support children to continue to explore their gender." (p. S69) **AAP:** "Supportive involvement of parents and family is associated with better mental and physical health outcomes." (p. 4)	**5.** Parents should support their children's transgender exploration.

Sources: American Psychological Association. (2015). *Guidelines for psychological practice with transgender and gender nonconforming people. American Psychologist, 70*(9), 832–864. | American Psychiatric Association. What is Gender Dysphoria? | Coleman, E., et al. (2022). Standards of Care for the Health of Transgender and Gender Diverse People, Version 8. *International Journal of Transgender Health,* 23(sup1), S1–S259. | Rafferty, J. (2018). Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents. *Pediatrics, 142*(4), e20182162.

Affirmation Enforcement (ADA). Five items assessed coercive behavioral intentions tied specifically to "gender affirmation," including legally requiring use of preferred pronouns, requiring use of preferred names, and supporting institutional enforcement actions (e.g., taking down a YouTube video for "deadnaming;" ignoring a Supreme Court ruling on males in female sports to "protect" them). Items were rated on 7-point oppose/support sliders. Internal consistency was acceptable ($\alpha = 0.77$; $M = 3.33$, $SD = 1.55$).

General Anti-Democratic Attitudes. Four items assessed support for anti-democratic political actions in non-sex-specific contexts, including blocking a legally elected official from taking office and ignoring Supreme Court rulings to achieve preferred policy outcomes. Items were rated on 7-point oppose/support sliders ($\alpha = 0.62$; $M = 3.65$, $SD = 1.48$). The lower alpha for this scale reflects genuine item heterogeneity across the four distinct anti-democratic scenarios; the scale is retained as specified in the pre-registration.

Outgroup Threat Perception. Eleven items assessed how dangerous respondents perceived various groups to be toward people that identify as transgender in the United States (Republicans, Right-wingers, Christians, Police, Capitalism, White nationalists, the U.S. Supreme Court, Men, White people, "Cisgender people,"[2] and the LGBQ community). Items were rated on a 5-point scale from Not dangerous at all (0) to Extremely dangerous (4). Internal consistency was excellent ($\alpha = 0.93$; $M = 1.82$, $SD = 1.05$ averaged across items).

Trans-Genocide Belief. One item asked respondents to rate how likely it is that "transgender people are facing genocide in the United States" on a 5-point scale from Not likely at all (1) to Extremely likely (5). This item was retained as a single indicator consistent with the pre-registration.

Violence Composite. Four items assessed the justification of political violence: setting fire to ICE buildings, damaging the property of wealthy people, killing Donald Trump, and violence against police. The two theoretically focal killings, Charlie Kirk (allegedly killed by Tyler Robinson, in a case widely covered and publicly perceived as connected to gender ideology) and Brian Thompson (allegedly killed by Luigi Mangione), were assessed with the same scale but analyzed separately and were not included in the composite. Items were preceded by brief factual descriptions of each event and rated on a 5-point scale from Not at all justified (1) to Completely justified (5). Internal consistency was good ($\alpha = 0.86$). Results for Kirk are reported both individually and against the composite.

Results and Discussion

Table 2. Demographics.

Characteristic	*n*	%
Sex		

[2] The term "cisgender people" is used here because the term was used in the study. It refers to people who do not identify as transgender.

Female	618	51.2
Male	577	47.8
Transgender identifying/gender non-conforming	13	1.1
Age		
Age in years, *M* (*SD*)	45.1	16.0
Political affiliation		
Democrat or lean Democrat	664	55.0
Republican or lean Republican	329	27.2
Independent, no lean	182	15.1
No affiliation / something else	33	2.7
Race/ethnicity		
White	686	56.8
Hispanic	145	12.0
Black	142	11.8
Asian	141	11.7
Multiracial	66	5.5
Another identity	28	2.3
Religion		
Christian	618	51.2
Agnostic	271	22.4
Atheist	161	13.3
Another religion / something else	158	13.1

Analytic plan.

The OSF pre-registration (n2cqj) specifies Spearman correlations as the primary confirmatory analyses. We used Spearman's correlations rather than Pearson's correlations because many of the variables were ordinal/Likert-type or non-normally distributed, making a rank-based

correlation more appropriate and robust. Appendix A (Table A) provides bivariate correlations across all key study variables.

Results.

Here, we focus on the results bearing on the first research question: **How strongly do CGAS and other gender ideology-related beliefs correlate with LWA**? Figure 1 presents these results and shows that all correlations were substantial, ranging from $r = 0.44$ to $r = 0.59$. In figure 2, we also examined this relationship using regression analysis. CGAS significantly predicted LWA, $\beta = 0.56$, $R^2 = 0.315$, $F(1, 1206) = 554.60$, $p < 0.001$, indicating that CGAS alone accounted for approximately 31.5% of the variance in LWA. Thus, the relationship was not merely descriptively correlational; endorsement of CGAS was a strong statistical predictor of left-wing authoritarianism. Keeping in mind that our items distilled ideas and recommendations promoted by major U.S. professional societies regarding individuals that identify as transgender, these findings suggest that those ideas and recommendations are especially appealing to individuals high in LWA. These findings raise a question of scientific responsibility. Clinical recommendations are expected to rest on evidence rather than ideology, yet the positions distilled in CGAS are disproportionately endorsed by individuals high in a form of political extremism that is corrosive to liberal democracy. At minimum, this suggests the institutions advancing these recommendations failed to test whether their guidance encodes ideology rather than medicine, a confusion of activism with clinical science. Whether that failure reflects bias, institutional capture, or inattention is an empirical question the present correlational data cannot answer, and one future research should address directly.

Figure 1. Correlation between LWA and Gender Related Measures.

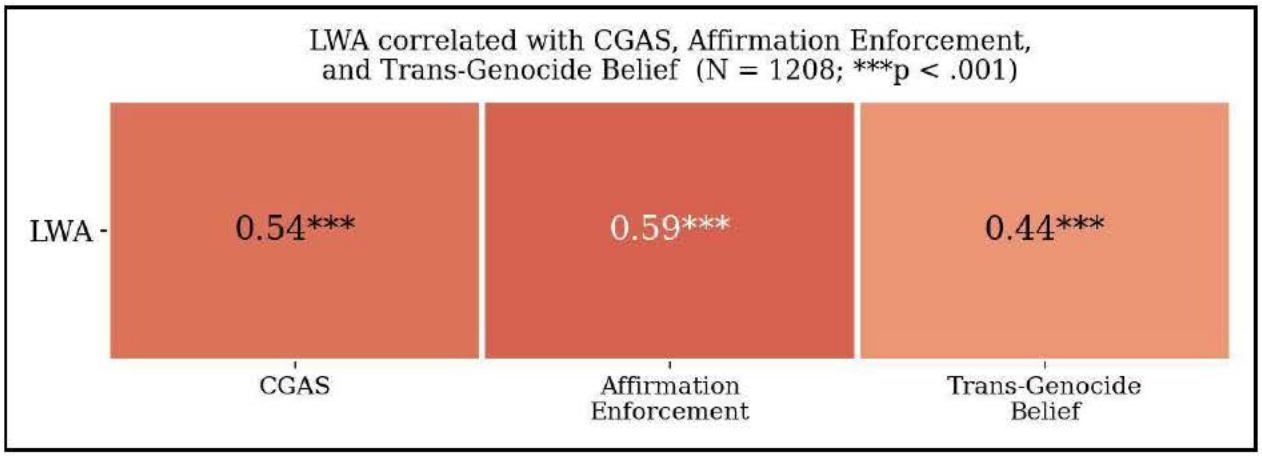


*Figure 1. Bivariate Spearman correlation matrix across key study variables (N = 1,208; OSF pre-registration: n2cqj). ADA = Affirmation Enforcement (gender-specific coercive behavioral intentions); General Anti-Dem = domain-general anti-democratic attitudes; Trans-Genocide Belief = perceived likelihood that a genocide of people who identify as transgender is currently underway in the United States. All correlations p < 0.001. ***p < 0.001.*

Figure 2. LWA as a Function of CGAS.

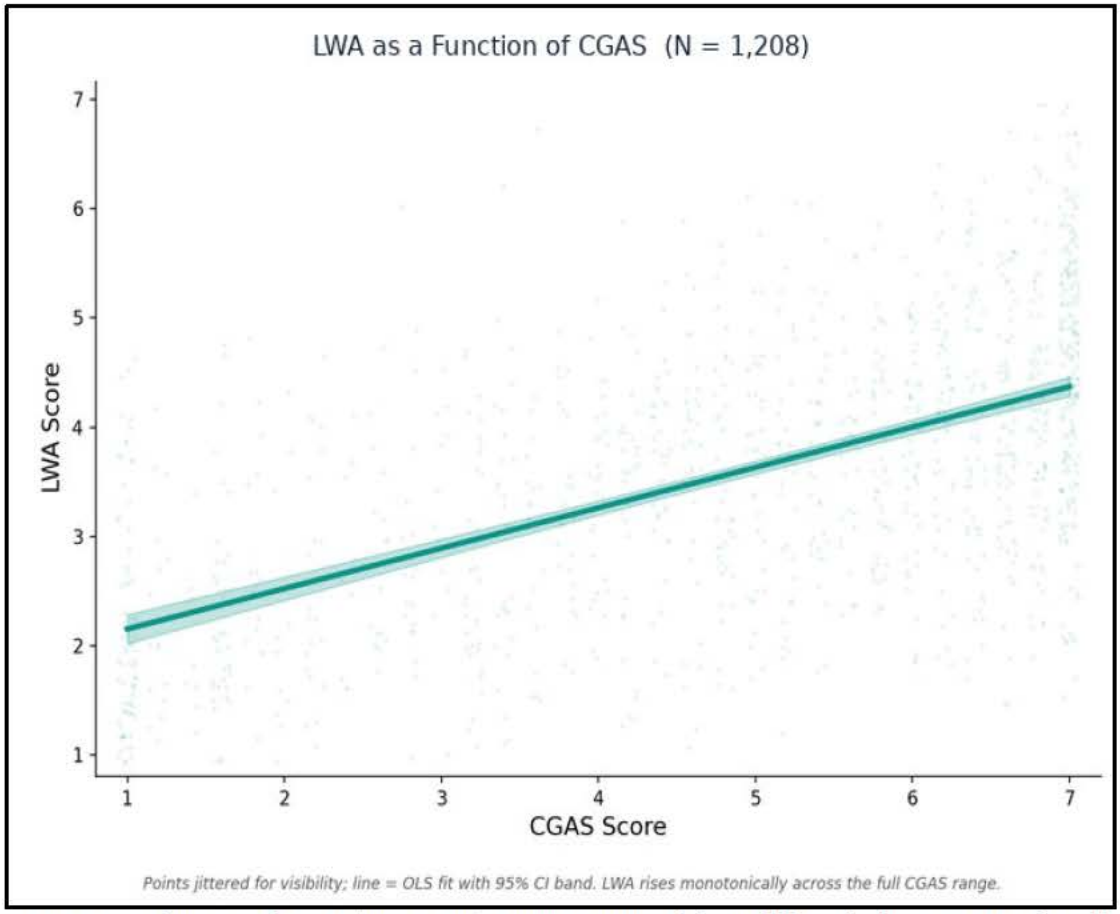
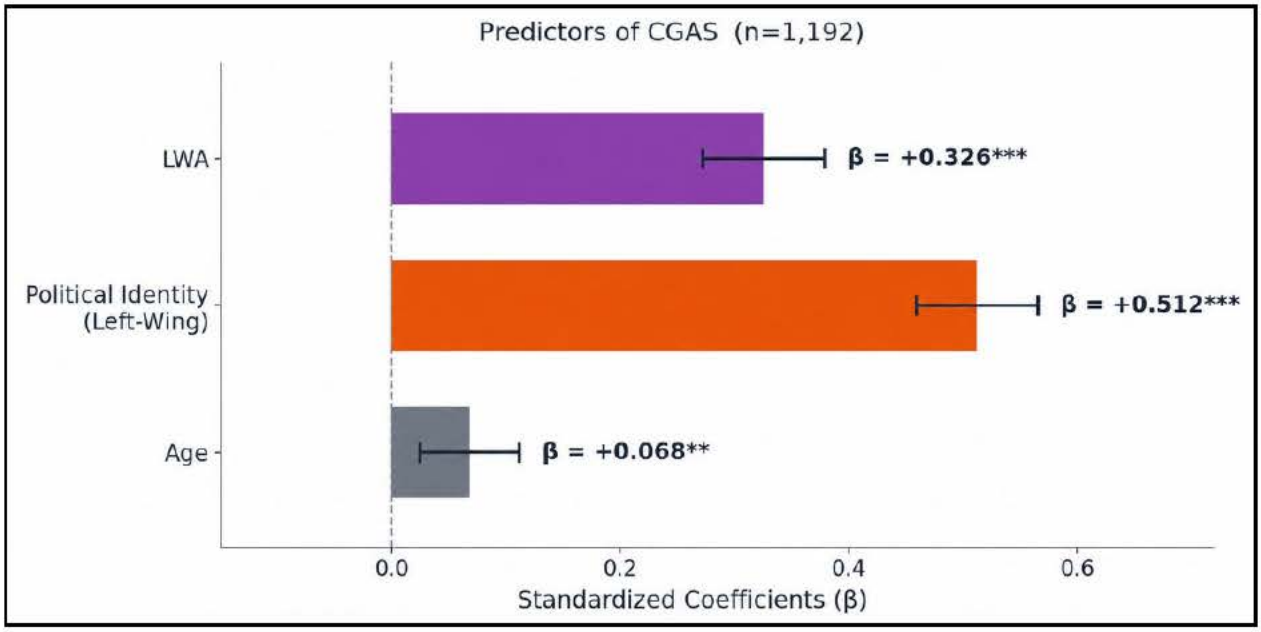


Figure 2. LWA as a function of CGAS (N = 1,208). Points are jittered for visibility; the line is an OLS fit with a 95% confidence band.

A series of original regressions[3] addressed the second question: **Does LWA predict CGAS over and above political identity, or is LWA just a proxy for being liberal?** Accordingly, CGAS was regressed on LWA, political identity and age. Figure 3 summarizes those results.

Figure 3. Predictors of CGAS.



The results show that **LWA significantly predicted CGAS independently of political identity and age**, indicating that the association between LWA and CGAS is not reducible to ordinary left–right political identification. In the ordinal regression model, political identity was the strongest predictor of CGAS, $\beta = 0.512$, $p < 0.001$, showing that more left-wing respondents were substantially more likely to endorse CGAS. However, LWA also remained a strong independent predictor, $\beta = 0.326$, $p < 0.001$, even after political identity was included in the model. In other words, LWA was not simply standing in for being politically left-wing; it explained additional variation in between-person endorsement rates of CGAS beyond political identity. Age was also a smaller but significant predictor, $\beta = 0.068$, $p < 0.01$. Thus, CGAS appears to reflect both conventional left-liberal political identity and a distinct authoritarian-left component. Put plainly, CGAS is not merely measuring liberalism; it is also independently associated with left-wing authoritarian psychology.

Analyses have thus far established that LWA predicts CGAS, and it does so independent of liberal political identity. Our next set of analyses addressed our third question: **do CGAS and LWA predict support for political violence?**

[3] The most commonly used form of regression, ordinary least squares regression, is only appropriate for outcome variables measured on interval or ratio scales. Ordinal regression is used when outcome variables are measured on ordinal scales, as were the outcome variables in the present report.

Again, we addressed this with both bivariate correlations and ordinal regressions. Table 3 presents the Spearman's correlations of LWA and CGAS with justification for political violence directed at each of six potential targets.

Table 3.

Spearman's Correlations of LWA and CGAS With Justification for Political Violence

	Kill Charlie Kirk	Kill Donald Trump	Kill Brian Thompson	Arson of ICE Buildings	Damage Property of the Wealthy	Violence Against the Police
LWA	0.49***	0.51***	0.50***	0.54***	0.49***	0.47***
CGAS	0.31***	0.35***	0.27***	0.34***	0.28***	0.23***

Note. N = 1,208. Values are zero-order Spearman rank-order correlations (no covariates). LWA = left-wing authoritarianism; CGAS = Clinical Gender Affirmation Scale.
***$p < 0.001$.

The pattern was clear. Both LWA and CGAS were significantly positively correlated with justification for political violence across all six targets. LWA showed consistently strong associations, with correlations ranging from $\rho = 0.47$ to $\rho = 0.54$, all ps < 0.001. CGAS was also significantly associated with justification for political violence across all outcomes, though the associations were smaller, ranging from $\rho = 0.23$ to $\rho = 0.35$, all ps < 0.001. Thus, individuals higher in LWA—and, to a lesser extent, individuals higher in CGAS—were more likely to justify political violence across a range of ideologically charged targets.

Because the bivariate correlations do not distinguish ordinary left-liberal political identity from left-wing authoritarian psychology, we next conducted ordinal regressions controlling for political identity. This allowed us to test whether support for political violence was merely a feature of being on the political left, or whether it was more specifically associated with the authoritarian disposition captured by LWA.

Table 4 presents the ordinal regressions of justification of these six political targets on LWA and political identity.

Table 4.

Ordinal Regressions of Justification of Political Violence on LWA and Political Identity

Outcome	LWA β [95% CI]	Political Identity β [95% CI]
Kill Charlie Kirk	0.66 [0.57, 0.75]***	0.06 [-0.02, 0.13]
Kill Donald Trump	0.53 [0.45, 0.61]***	0.22 [0.15, 0.29]***
Kill Brian Thompson	0.59 [0.51, 0.66]***	0.07 [0.00, 0.13]*
Arson of ICE Buildings	0.62 [0.54, 0.69]***	0.12 [0.05, 0.19]***
Damage Property of the Wealthy	0.60 [0.52, 0.68]***	0.08 [0.01, 0.15]*
Violence Against the Police	0.60 [0.52, 0.68]***	-0.00 [-0.07, 0.07]

*Note. N = 1,192. Entries are fully standardized coefficients (β) with 95% confidence intervals from proportional-odds ordinal regressions; each violence item was regressed simultaneously on LWA and political identity (higher = more left-wing). LWA = left-wing authoritarianism; CGAS = Clinical Gender Affirmation Scale. *p < 0.05. **p < 0.01. ***p < 0.001.*

These analyses found that LWA predicted justification of political violence over and above political identity for all six outcomes. Across the six ordinal regression models, LWA was a consistently strong and statistically significant predictor, with standardized coefficients ranging from $\beta = 0.53$ to $\beta = 0.66$, and all confidence intervals excluding zero. In contrast, political identity was a weaker and less consistent predictor: it significantly predicted justification of violence in four of the six outcomes—killing Donald Trump, killing Brian Thompson, arson of ICE buildings, and damaging the property of the wealthy—but not killing Charlie Kirk or violence against the police.

Thus, the dominant pattern is clear: support for political violence was not simply a function of ordinary political identity. Political identity predicted some outcomes, indicating that conventional left-liberal identification was relevant in certain cases. However, LWA predicted all six outcomes, and did so with larger and more consistent effects. This distinction is central to the interpretation of the findings: support for coercion, punishment, and violence appears to be tied less to liberalism generally than to an authoritarian disposition organized around left-wing ideological content.

Following this logic, we then repeated the analyses using CGAS in place of LWA, with each of the six political violence variables being regressed on CGAS and political identity. This tested whether CGAS predicted for justification of political violence after controlling for political identity or whether its association with violence was merely reducible to ordinary left-liberal identification. See Table 5.

Table 5.

Ordinal Regressions of Justification of Political Violence on CGAS and Political Identity

Outcome	CGAS β [95% CI]	Political Identity β [95% CI]
Kill Charlie Kirk	0.42 [0.29, 0.54]***	0.12 [0.01, 0.22]*
Kill Donald Trump	0.22 [0.12, 0.31]***	0.34 [0.25, 0.44]***
Kill Brian Thompson	0.19 [0.10, 0.29]***	0.22 [0.13, 0.31]***
Arson of ICE Buildings	0.29 [0.19, 0.39]***	0.23 [0.14, 0.33]***
Damage Property of the Wealthy	0.23 [0.12, 0.33]***	0.22 [0.12, 0.32]***
Violence Against the Police	0.23 [0.12, 0.34]***	0.14 [0.04, 0.24]**

Note. N = 1,192. Entries are fully standardized coefficients (β) with 95% confidence intervals from proportional-odds ordinal regressions; each violence item was regressed simultaneously on CGAS and political identity (higher = more left-wing). LWA = left-wing authoritarianism; CGAS = Clinical Gender Affirmation Scale.

*$p < 0.05$. **$p < 0.01$. ***$p < 0.001$.

These analyses found that CGAS predicted support for political violence independently of political identity for all six outcomes. Across the six ordinal regression models, CGAS was a consistent and statistically significant predictor of political violence justification, with standardized coefficients ranging from β = 0.19 to β = 0.42, and all confidence intervals excluding zero. Political identity was also a significant predictor across all six outcomes, indicating that greater political liberalism independently predicted higher justification of political violence as well. However, the key finding is that CGAS remained significant even after political identity was included in the model. In other words, CGAS was not simply standing in for being politically left-wing; it explained additional variation in political violence justification beyond political identity. Thus, its association with political violence cannot be reduced simply to ordinary left–right political identification.

In several cases—especially justification for killing Charlie Kirk (commonly alleged as motivated by gender ideology), arson of ICE buildings, damaging the property of the wealthy, and violence against police—CGAS was as strong as or stronger than political identity. Thus, the results suggest that CGAS is not merely a clinical or attitudinal measure; consistent with earlier findings showing its strong association with LWA, CGAS appears to capture a form of left-wing ideological extremity that independently predicts support for coercive and violent political action.

Conclusion

Three findings pull in the same direction. People who strongly endorse gender ideology positions score dramatically higher on left-wing authoritarianism than their political identity alone would predict. Furthermore, both LWA and CGAS predicted support for political violence.

Together, these findings support the paper's core claim: gender ideology may function as an ideological accelerant, telling left-wing authoritarian psychology who the enemy is, why the situation is urgent, and—in those already disposed toward force—that violence is legitimate.

The potency of CGAS as a content package derives in part from its institutional provenance. The items assessed in our questionnaire operationalized positions of the American Psychological Association (APA, 2015), the American Psychiatric Association (APA, n.d), the World Professional Association for Transgender Health (WPATH, 2022), and the American Academy of Pediatrics (AAP, 2018). This institutional positioning matters psychologically. Content that appears embedded in clinical consensus may foreclose ordinary cost-benefit deliberation: dissent becomes not a legitimate position but a failure of professional duty or an act of harm. The present data establish the downstream correlates of that framing empirically.

Several limitations constrain causal inference. The cross-sectional design permits no conclusions about the direction of effects: CGAS may arm LWA, LWA may selectively draw individuals toward CGAS-consistent content, or a common third factor may drive both. The present data is consistent with all three accounts and cannot adjudicate between them.

Nonetheless, analyses of data collected for this study are still ongoing. We also assessed catastrophizing beliefs, such as the perceived likelihood that a genocide of individuals that identify as transgender is currently under way, and associate extremist responses, such as belief in the need to censor and punish those who oppose transgender dogmas and ignore Supreme Court rulings on gender ideology issues. We have good reasons to expect that LWA and CGAS will predict support for these sorts of anti-democratic beliefs, but those are empirical questions which will be answered in the analysis that are ongoing.

One mechanism by which clinical content may translate into violence permission deserves note. Trans-Genocide Belief—the perceived likelihood that a genocide of individuals that identify as transgender is currently underway in the United States—is predicted to more strongly relate to CGAS and LWA than to political identity and to be associated with elevated justification for political violence. This prediction is consistent with broader research showing that perceived threat, existential threat, and collective victimhood can increase support for hardline, punitive, or exclusionary action against outgroups, particularly when paired with authoritarian dispositions or strong moral conviction (Armaly & Enders, 2022; Carriere et al., 2022; Hirschberger et al., 2016; Kljajić et al., 2025; Schori-Eyal et al., 2014; Skitka, 2010). Related work on moralization and violent intergroup conflict further suggests that when a political conflict is framed as a moral emergency involving dangerous or demonized outgroups, violence can come to seem permissible or necessary (Mooijman et al., 2018; Saguy & Reifen-Tagar, 2022).

Furthermore, a second study is being designed to address some of the limitations of the study described herein. This second study will take the causal direction issue head on by using an experimental design to test whether exposure to CGAS-consistent content produces the patterns predicted by the present theory. The cross-sectional correlations reported here constitute the discovery sample; the planned pre-registered experiment will constitute the confirmatory causal test.

The practical stakes are straightforward. Research frameworks for understanding authoritarianism have historically focused overwhelmingly on the political right, while

analogous left-wing pathways have received far less attention. Yet federal agencies and public safety officials are concerned not only with ideology in the abstract, but with radicalization pathways: the content that tells people who to fear, why the situation is urgent, and when force becomes acceptable. This study suggests that the same psychological machinery operates on the extreme left, and that it may be running through institutional channels—clinical guidelines, professional standards, credentialed expertise—that current threat-detection frameworks are not well designed to recognize. Violence connected to gender ideology remains largely undocumented in the academic literature. This study provides a first systematic empirical look at the psychological infrastructure that makes such violence conceivable.

***Where the Clinic Meets the Movement: Does Gender Ideology Arm Left-Wing Authoritarian Psychology?* is a report commissioned by the U.S. Department of Health and Human Services.**

Appendix A: Preregistered Confirmatory Analyses (OSF: n2cqj)

Table A. Correlation Matrix.

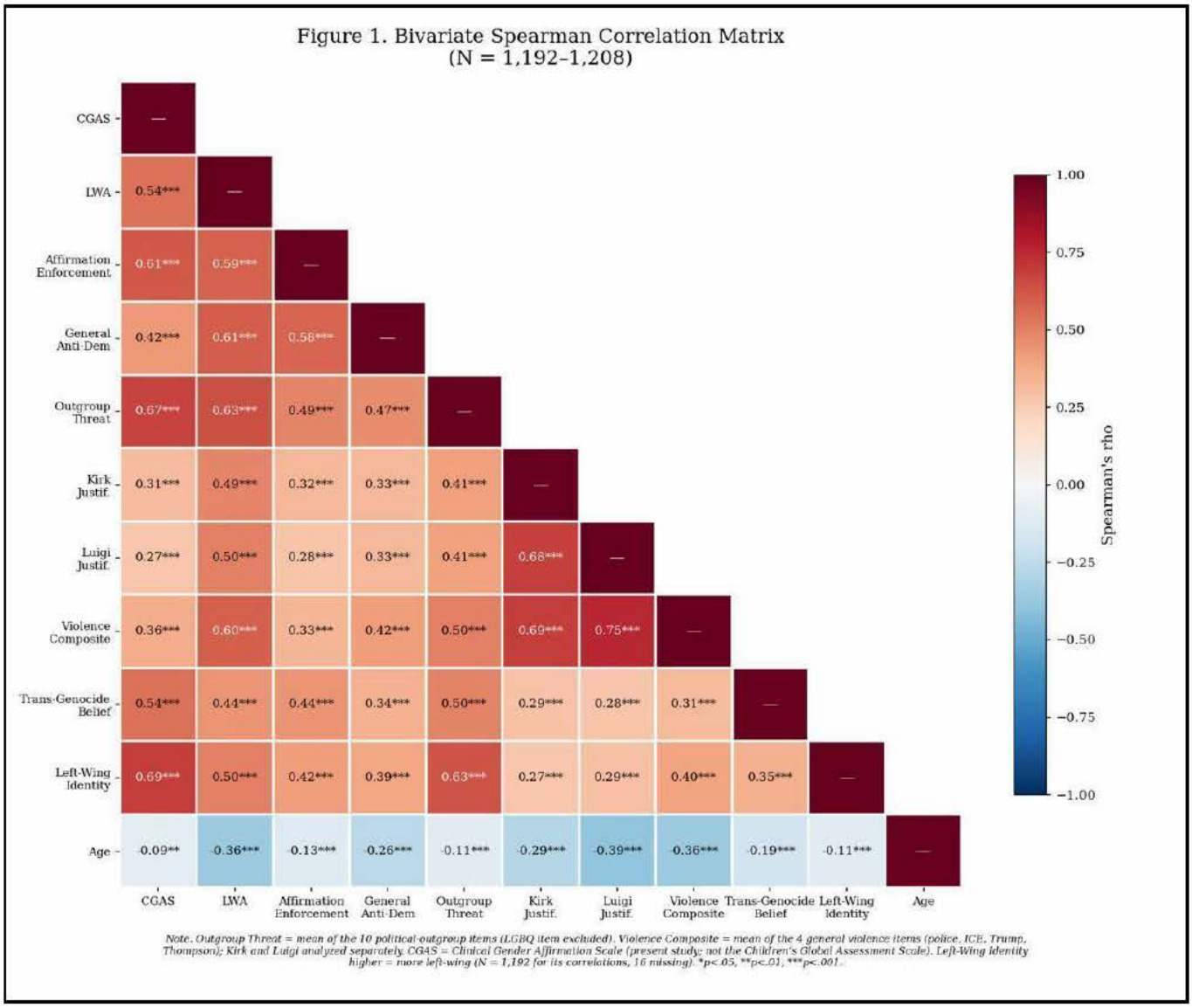


*Table A. Bivariate Spearman correlation matrix across key study variables (N = 1,208; OSF pre-registration: n2cqj). ADA = Affirmation Enforcement (gender-specific coercive behavioral intentions); General Anti-Dem = domain-general anti-democratic attitudes; Trans-Genocide Belief = perceived likelihood that a genocide of people who identify as transgender is currently underway in the United States. All correlations $p < 0.001$. ***$p < 0.001$.*

All preregistered Spearman correlations specified under RQ3 through RQ9 of the OSF pre-registration (project n2cqj) were statistically significant in the predicted direction (all *p*s < 0.001). The complete bivariate correlation matrix is presented in the main text as Figure 1. Key preregistered associations: CGAS × LWA: ρ = 0.540; CGAS × Affirmation Enforcement: ρ = 0.612; CGAS × General Anti-Democratic Attitudes: ρ = 0.423; CGAS × Outgroup Threat: ρ =

0.652; CGAS × Violence Composite: ρ = 0.362; CGAS × Trans-Genocide Belief: ρ = 0.539; LWA × Affirmation Enforcement: ρ = 0.594; LWA × Violence Composite: ρ = 0.601. All associations *p*s < 0.001, *N* = 1,208.

Table B. Disaggregated Outgroup Threat Variable

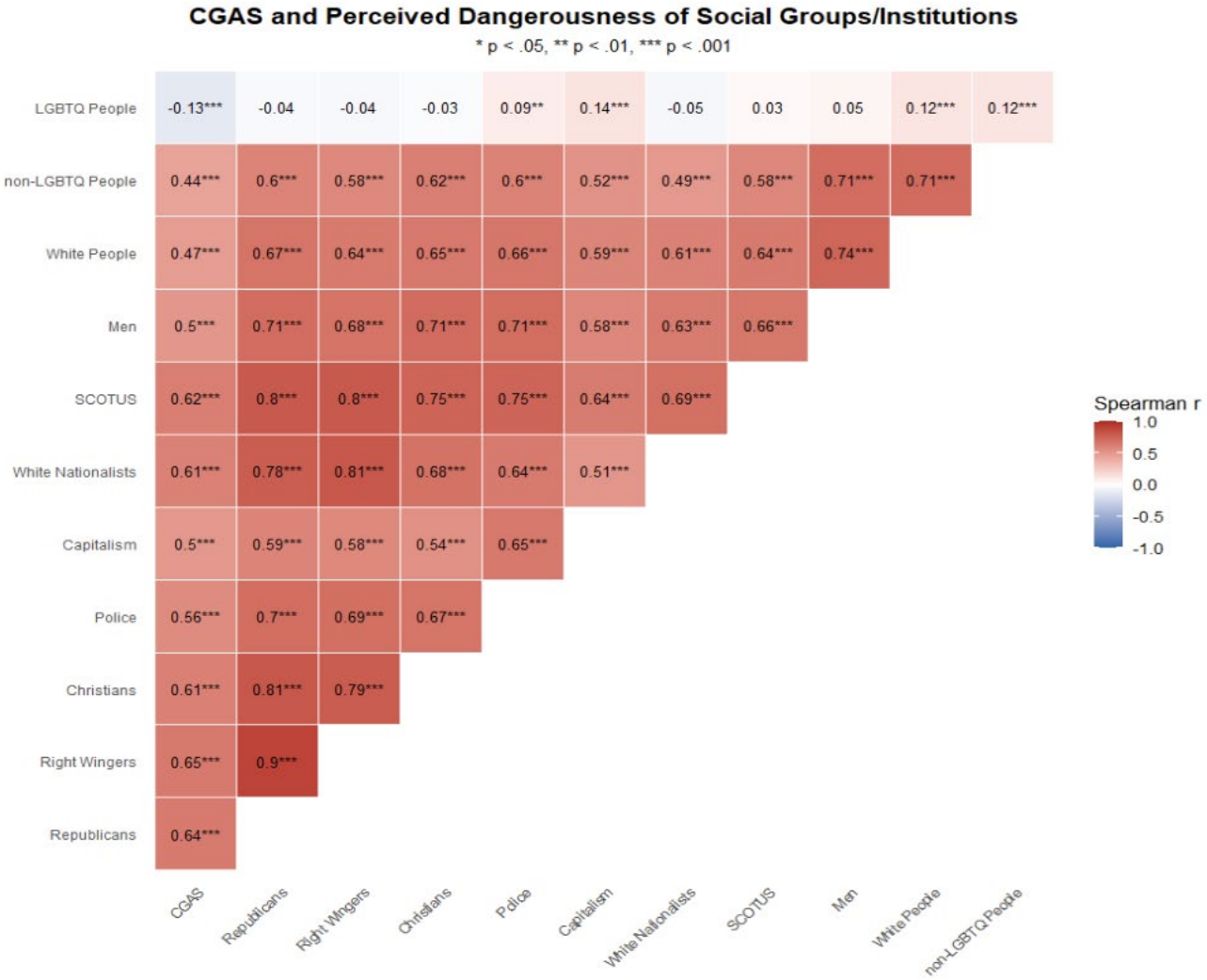


*Table B. Bivariate Spearman correlation among CGAS and perceived dangerousness ratings for each social group or institution (N = 1,208). CGAS = Clinical Gender Affirmation Scale; SCOTUS = U.S. Supreme Court. All correlations p < .001. ***p < .001.*

Table B disaggregates the outgroup threat measure by examining perceived dangerousness for each group or institution included in the study. CGAS was significantly and positively correlated with perceived dangerousness of every putative outgroup target: Republicans, ρ = 0.64, *p* < 0.001; right-wingers, ρ = 0.65, *p* < 0.001; Christians, ρ = 0.61, *p* < 0.001; police, ρ = 0.56, *p* < 0.001; capitalism, ρ = 0.50, *p* < 0.001; white nationalists, ρ = 0.61, *p* < 0.001; the U.S. Supreme Court, ρ = 0.62, *p* < 0.001; men, ρ = 0.50, *p* < 0.001; white people, ρ = 0.47, *p* < 0.001; and non-

LGBTQ+ identifying people, $\rho = 0.44$, $p < 0.001$. By contrast, CGAS was negatively correlated with perceived dangerousness of individuals who identify as LGBTQ, $\rho = –.013$, $p < 0.001$. This pattern suggests that CGAS is not merely associated with a generalized tendency to perceive social groups as dangerous. Rather, it is specifically associated with heightened perceived threat from groups and institutions commonly framed as opposing or endangering individuals who identify as transgender, while predicting lower perceived threat from the LGBTQ ingroup. These findings provide initial evidence for the proposed mechanism: gender ideology may supply authoritarian psychology with a structured map of perceived outgroups, threat sources, and oppressor classes, thereby giving LWA a concrete set of targets toward which coercive or punitive impulses can be directed.

Appendix B: Scale Items

Brief LWA Scale (Costello & Patrick, 2022)

All items rated on a 7-point scale: Strongly Disagree (0) — Moderately Disagree (1) — Slightly Disagree (2) — Neither Agree nor Disagree (3) — Slightly Agree (4) — Moderately Agree (5) — Strongly Agree (6).

Antihierarchical Aggression subscale:

1. The rich should be stripped of their belongings and status.

2. America would be much better off if all of the rich people were at the bottom of the social ladder.

3. When the tables are turned on the oppressors at the top of society, I will enjoy watching them suffer the violence that they have inflicted on so many others.

4. We need to replace the established order by any means necessary.

5. Anyone who opposes gay marriage must be homophobic.

6. People who are truly worried about terrorism should shift their focus to the nutjobs on the far-right.

Anti-Conventionalism subscale:

7. The "old-fashioned ways" and "old-fashioned values" need to be abolished.

8. All political conservatives are fools.

Top-Down Censorship subscale:

9. Classroom discussions should be safe places that protect students from disturbing ideas.

10. University authorities are right to ban hateful speech from campus.

11. To succeed, a workplace must ensure that its employees feel safe from criticism.

12. I am in favor of allowing the government to shut down right-wing internet sites and blogs that promote nutty, hateful positions.

13. Getting rid of inequality is more important than protecting the so-called "right" to free speech.

Clinical Gender Affirmation Scale (CGAS; present study)

All items rated on a 7-point scale: Strongly Disagree (1) — Strongly Agree (7). Items derived from clinical guidance language in APA (2015), WPATH (2022), and AAP (2018) consensus documents.

1. Failure to affirm a transgender person's gender identity increases the risk of serious psychological distress to the trans person.

2. People should be supported in expressing their transgender identity.

3. Using the name a person chooses as part of their gender transition is a necessary form of support.

4. Using a transgender person's preferred pronouns (e.g., he/him, she/her, they/them) is a necessary form of support.

5. Parents should support their children's transgender exploration.

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