

XWHY? STORIES OF NON-BINARY GENDER IDENTITIES

by

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ABSTRACT

This research project explored the narratives of people who identify as having a non-binary gender identity. This is an important study, filling a gap in current psychology and health literature, because it expands the conversation on transgender and transsexual populations to include people who identify their gender outside of the binary of female and male. Eight people participated in open-ended interviews telling the story of their gender identity. The collaborative narrative method was used in this research, chosen specifically because of its focus on keeping participant voices intact. This in-depth method involved unstructured interviews and collaborative thematic readings of interview transcripts by participants and researchers to identify common experiences shared by people belonging to this population. Some of the major themes explored are threats to welfare, compulsory conformity, the body including gender affirming procedures (surgery/hormones), gender performance, coming out as trans/genderqueer/non-binary, community support and intersectional analysis.

PREFACE

This dissertation is original, unpublished, independent work by the author, M. Cayley. The University of British Columbia Behavioural Research Ethics Board (BREB) granted permission (Certificate # H14-02991) for the fieldwork with human subjects described in the following manuscript.

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GLOSSARY

AFAB – assigned female at birth.

AMAB – assigned male at birth.

Agender – a gender identity where a person identifies as not having a gender.

Androgynous – a term used to describe a person whose gender presentation includes both typical masculine and feminine characteristics.

Asexual – a term to describe someone who identifies as not having a sexual orientation and/or sexual desire irrespective of gender or natal sex.

Aromantic – a term to describe a person who identifies as not having romantic desire, regardless of their gender or natal sex.

Bigender – a gender identity where a person identifies as having two genders.

Bottom surgery – refers to a person having surgery to alter the appearance and function of their genitals to align with their internal sense of gender.

Cisgender – a person whose natal sex aligns with their gender identity.

Cissexism – the assumption (socially, culturally, interpersonally) that people identify as cisgender.

Clocked – is when a non-cisgender person (i.e. trans, genderqueer and androgynous) is noticed (clocked) as being non-cisgender. This is the opposite of passing (see below).

Cross-sex hormone treatment – when a person who does not identify with their natal sex chooses to take hormones that are endogenous to their identified gender. Taking these hormones stimulates a variety of physiological, cognitive, and psychological changes.

Femme – a gender identity that embodies femininity.

FTM – a natal female who identifies as male; this may or may not involve transition.

Function wear – a term to describe clothing and items that people can wear to help conceal or augment aspects of their body to align more with their identified gender and away from their natal sex. Examples include chest binders to flatten breast tissue, or a silicone filled bra to produce the appearance of breasts.

Gender – refers to the social, cultural and psychological constructions of being female, male or something else.

Gender affirming procedures – single or multiple procedures, which may include cross-sex hormone treatment, top and/or bottom surgeries to physically affirm a person’s gender identity. Previously referred to as “sex reassignment surgery.”

Gender binary – the concept that the only two genders are female and male.

Gender-related body dysphoria – having unease, dissatisfaction and/or discomfort with primary or secondary sex characteristics, body parts that produce the appearance of a specific natal sex and/or sex-specific bodily functions.

Gender diversity – a term to acknowledge the spectrum of genders.

Gender expression – the way an individual performs their identified gender including the clothing they wear, haircuts, way they carry their body, way they use their voice and language they choose to use (also called gender presentation or gender performance).

Gender identity – an individual’s private sense and subjective experience of their gender (also referred to as gender orientation).

Gender Dysphoria – a diagnosis that is located in DSM V (previously Gender Identity Disorder in DSM IV TR). This diagnosis is controversial, however it allows people in Canada access to medical procedures that are covered by healthcare. This diagnosis is still heavily entrenched

in the gender binary, and is less supportive of people seeking out some procedures (top surgery for example), but who are not interested in a full transition to the “opposite” gender.

Gender nonconformity – this term is often found in medical and psychological literature to describe people who do not conform to the gender binary of male and female or for people who are not cisgender.

Gender orientation – another term to describe a person’s private experience of their gender on a spectrum. Not to be confused with sexual orientation.

Gender presentation/performance – the way an individual performs their identified gender (i.e. the clothing they wear, haircuts, way they carry their body, way they use their voice and language they choose to use).

Gender pronouns – when using the English language the gender identifying pronouns that a person chooses to use including (but not limited to) ze/hir/hirs, they/them/their, she/her/hers, ey/em/eir, and he/him/his

Genderful – a word used to describe someone who identifies as having all aspects of gender embodied.

Genderless – a word used to describe a person who identifies as not having a gender.

Genderqueer – a term used by some people who do not identify as female or male. Other words used by people fitting this description include: androgynous, gender fluid, gender-bent and gender rebel.

Heteropatriarchy – is a word to describe the dominance and power that cisgender heterosexual males have in western society.

Heterosexism – the assumption (socially, culturally, and interpersonally) that people identify as heterosexual.

Heterogender – a word to describe two people in an intimate relationship who have differing gender identities. This is irrespective of natal sex.

Heterosexual – a word to describe two people in a sexual relationship who have a different natal sex, irrespective of their gender identities.

Homogender – a word to describe two people in an intimate relationship who have the same or similar gender identities. This is irrespective of natal sex.

Intersectionality – the concept that each person has multiple identities and they intersect in a variety of ways, and how they intersect can change across social situations and locations. Race, class, ability, sexuality, religion, ethnicity, gender are all examples of intersecting identities.

Islamophobia – antagonistic, prejudicial or otherwise discriminatory feelings, thoughts and behaviours towards Muslims and/or Islam.

Intersex – a term used to describe variance in chromosomes, hormones, and genitals, often but not always, identified at birth, this includes, but is not limited to people who are born with ambiguous genitals and/or who are identified as having chromosomal abnormalities.

Microaggression – a behaviour, statement, word or episode that is seen as indirectly or subtly discriminatory against members of a marginalized groups including gender, ethnic, racial and sexual minorities.

Misgender – when someone uses the wrong gendered language for a person. This could be using the wrong pronoun, or attaching a label like “lady.” Misgendering can happen by mistake or intentionally.

Misogyny – dislike of, contempt for, antagonistic, or otherwise discriminatory feelings, thoughts and behaviours towards female-identified people (women, transwomen, femmes).

MTF – a natal male who identifies as female; this may or may not involve transition.

Natal sex – The biologically differentiated status of intersex, female or male, which is determined at birth. It includes genitals and secondary sex characteristics as well as invisible features such as genes and hormones.

Non-binary – a term used to represent people who do not align with the gender binary of male female.

Passing – a word to describe when a non-cisgender person is read by other people as their identified gender and is not known to be non-cisgender.

Queer – a term used to refer to people who identify as a gender and/or sexual minority. Some use queer as an alternative to gay because it is more inclusive of gender diversity. Queer can refer to a person's sexual orientation and / or their gender identity.

Same-sex relationship – a word to describe two people in a sexual relationship who have the same natal sex, irrespective of their gender identities.

Sexual orientation/sexuality – a term to describe a person's sexual identity with regard to the gender of people they are romantically, intimately and sexually attracted to.

Trans-exclusive radical feminist (TERF) – A feature of second-wave radical feminism where natal sex and gender are viewed as equivalent and transwomen are not accepted as *real* women.

Top surgery – a procedure that seeks to reconstruct the chest so it appears more like a person's identified gender. This can involve removal of breast tissue, or augmentation of breast tissue.

Trans* – the word trans* (asterisk included) refers to any person who identifies as gender diverse. Trans* acts as an umbrella term. In other literature this can refer to people labeled

as: transgender, transsexual, having a diagnosis of gender identity disorder or gender dysphoria, genderqueer, gender-fluid, queer, gender-bent and a variety of other terms.

Transition – a word used to describe gender affirming procedures such as going on cross sex hormones and/or having gender affirming surgical procedures.

Transgender – a person whose natal sex does not align with their gender identity.

Transfeminine – a person of any natal sex who identifies as trans and feminine.

Transmasculine – a person of any natal sex who identifies as trans and masculine.

Transmisogyny – an intersection of transphobia and misogyny encompassing antagonistic, prejudicial or otherwise discriminatory feelings, thoughts and behaviours towards transwomen and gender-diverse people who identify and/or present as feminine.

Transphobia/Transphobic – antagonistic, prejudicial or otherwise discriminatory feelings, thoughts and behaviours towards gender diverse people.

Transsexual – a person whose natal sex does not align with their gender identity and as such they seek out gender affirming procedures, which may include taking hormones and undergoing surgical procedures.

Two-spirit – is an umbrella term to describe gender variance in North American indigenous cultures. Two-spirit people participate in a variety of gender roles yet the precise meaning of this term varies across indigenous sub-groups.

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Lastly, and most importantly, thanks to all the people who came and shared their stories with me.

This project is nothing without each of you. I am changed.

DEDICATION

This dissertation is dedicated to all the gender rebels and queerdos of the world. You are awesome.

EPIGRAPH

“When we try to think seriously about what it means to be transgendered, we begin to realize how little we really know about what it means to be gendered. It poses a threat to ideas that, to most of us, are so fundamental to our understanding of human nature and deeply embedded in our common sense that we are scarcely able to question them, even if we are willing.”

Goethals & Schwiebert (2005, pp. 457-458)

CHAPTER 1 INTRODUCTION

Thoughts from the author

One of the first things we do when a baby is born in North America is to label it as a boy or a girl. When someone is pregnant, they are often asked about the genital construction of their growing fetus. Culturally, we are ignorantly obsessed with gender. We demand obedience to the gender code and base this conformity on the appearance of genitals at the time of a baby's birth.

For some people this ignorance works out just fine. They are socialized into a role, the role seems to fit or they don't question it, and their life as a gendered person rolls along in the mainstream way. For others, gender feels like an ill-fitting suit. Yet to transgress the gender edict is dangerous and commonly results in violence, shame, and rejection – beyond the daily confusion about what bathroom to use and what style of underpants to wear.

I set out to explore the concept of non-binary gender identity to better understand the experiences of people who reject the binary, who live true to their internal sense of gender, regardless of the M or the F on the birth certificate. This project inherently challenges the language of gender, but goes beyond that to challenge the very idea of gender. As the quote on the first page suggests, our collective gender blind spot is colossal.

Before you continue reading, I invite you, the reader, to consider your gender. How do you know your gender? How have you arrived at this knowledge? Often we don't question our gender, we just follow the rules that have been laid out for us. I hope as you

read through this manuscript you learn something about yourself and your intrapersonal experience of gender.

My participation as a researcher in this project had me in a head on collision with myself. Using a collaborative and qualitative method demanded that I spent time in contemplation. As a result, I often felt adrift in a dream full of mirrors; unable to escape my reflection. I began this project as she, as Clare. I am now they; I am Mair. I owe endless gratitude to the co-researchers that accompanied me on this journey. Their courage to be true to their-selves illuminated the path for me to do the same.

To say this project changed me would be accurate if you were looking at my experience from outside of me (which you are). However, I see this change as a dismantling of the barriers that withheld me from myself. I was always here, I was just scared of the consequences of being me. Now, I dread the consequences of not being me.

Overview

This dissertation research explored gender diversity from within the discipline of counselling psychology. People fitting the description of gender diverse are often classified using many different labels including (but not limited to) transgender, transsexual, genderfluid, genderqueer, agender, androgynous, non-binary, trans*, gender-variant or gender non-conforming and are commonly assumed to belong to LGBTTT2QQIA (Lesbian, Gay, Bisexual, Transgender, Transsexual, 2-spirit, Queer, Questioning, Intersex, Asexual) communities. For the purpose of this paper the term gender diversity (or gender diverse) will be used to describe any person who does not align with the traditional binary of female/male and/or that their gender identity does not align with their natal sex; inclusive of all non-cisgender people. This term was chosen

specifically because it conveys a sense of freedom and inclusion of diverse people compared to words like disorder, variant, and non-conforming.

This dissertation includes a review of relevant research and theoretical literature (Chapter 2) and an outline of the methodology (Chapter 3), an analysis and discussion of the findings (Chapter 4), and a discussion of implications for the field of psychotherapy practice and research (Chapter 5). A conceptualization of gender diversity will begin with the literature review including perspectives from a wide variety of disciplines to provide the reader with a breadth and depth of information. Academic scholarship involving gender diverse populations is explored followed by a discussion of the pertinent theoretical perspectives.

Problem

North American culture has traditionally ascribed to the gender binary of female and male, which is a challenge for people who identify outside of that binary or who have a body that does perform in a way that their culture has prescribed (Butler, 1990). I believe that the social construction of this female/male gender binary is restricting and denies many people an opportunity to express the depth of their identity. Furthermore, I believe that gender is an individual experience with a variety of features. Through this research I explored the narratives of people who identify as having a non-binary gender identity in order to share these stories within the field of counselling psychology and beyond.

Counselling psychology and related disciplines currently have very limited available research about gender diverse people. Of this limited research, most is focused on people who identify as transgender or transsexual, which usually excludes people who

don't identify within the culturally-prescribed gender binary. This lack of research is especially problematic given that licensed practitioners are encouraged to turn to the literature to support clients who present with concerns that are unfamiliar to the practitioner. Furthermore, practitioners are sometimes in the position of assigning diagnoses related to gender diversity, and that some gender diverse people seek irreversible medical treatments involving surgeries and hormone therapy. Without enough literature, research and discourse on issues of gender diversity, it is reasonable to expect that practitioners do not have adequate information to provide ethical, safe, and effective support and health care to this population.

Purpose of the proposed study

Building on the identified problem above, the purpose of this research was to co-construct narratives of people who identify as having a non-binary gender identity. Specifically, the research question was: *How do people with a non-binary gender identity narrate the story of their gender?*

The goal of this research project was to contribute to a current gap in counselling psychology literature and provide academic scholars and mental health practitioners with information on the intricacies and experiences of people who identify as non-binary.

This study used a method called The Collaborative Narrative Method (CNM; Arvay, 2003), which involved unstructured interviews and multiple readings of interview transcripts to pull out pertinent themes and stories. Details about the method can be found in Chapter 3 of this manuscript.

Rationale

There is currently a dearth of literature that mental health practitioners can refer to support their clients who identify as gender diverse. This research will contribute to a current gap in academic scholarship and provide the field of counselling psychology with information on non-binary gender identities. This research can be used to give counselling and other healthcare practitioners some insight into the issues faced by this population, and ways to offer support and affirmation. The gap in the literature is particularly noteworthy around issues of non-binary genders and the spectrum of gender identities. Furthermore, gender diverse people do not currently have a voice in the literature. The limited research available on transgender populations focuses on pathology and diagnosis and is entrenched in the gender binary. The researcher intends to make a contribution to the gender discourse by elevating the voices of non-binary people and sharing their stories.

CHAPTER 2 LITERATURE REVIEW

Introduction

This section will review the salient literature that discusses gender diversity. Literature offering a global perspective will highlight some examples of non-western gender diversity, providing the reader with an introduction to some cultural examples and responses to gender diversity. However, given that this research project is taking place on unceded Coast Salish territory at the University of British Columbia in the Lower Mainland of Vancouver, BC and will involve participants (co-researchers) from this geographic area, the focus will be on North American research and literature. Additionally, emphasis will be on literature from counselling psychology, and related fields.

What is gender diversity?

Most of the research and literature that discusses the diversity of gender is focused primarily on transgender identities and ascribes to the gender binary as an assumed part of gender identity. Counselling psychology research is beginning to include discussions of gender beyond the binary; however, this research is currently quite limited. As such, the literature reviewed in this section will be focused primarily on binaried gender identities. Discourses on non-binary genders are currently quite easy to find outside of academia such as in blogs, social media, and magazines.

Understanding gender diversity depends on one's cultural and socio-political locations. For the purpose of this research the term gender diversity is intended to reflect the wide variety of gender identities, whether or not they are aligned with the gender binary, and to describe people who do not identify with the culturally prescribed gender

roles that are associated with their natal sex. This includes people who identify as (but not limited to): transgender, transsexual, non-binary, trans*, genderqueer, genderfluid, agender, bigender, androgynous, gender-rebel, gender-creative, genderless and genderful. The term is meant to include any person who does not identify as cisgender.

In the academic fields of medicine and psychology, gender diversity is often pathologized and given a diagnostic label. For example, the DSM V (APA, 2013) has a diagnosis titled “Gender Dysphoria” which includes a requisite emotional distress in addition to identifying with the opposite gender for a full diagnosis. The ICD-10 (WHO, 2008) includes a few diagnoses related to gender identity including “Transsexualism,” “Dual-role Transvestism,” and “Gender Identity Disorder of Childhood.” Despite the popularity of these two medical resources, some professionals from a variety of different disciplines assert that these gender-specific diagnostic labels are oppressive and problematic (Lev, 2013; Markman, 2011; Meyer-Bahlburg, 2010; Vance et al., 2010).

Gender diverse populations face issues beyond the diagnostic labeling that occurs in the medical system; gender diversity is also a politically and culturally relevant issue. Susan Stryker (2008) in her book *History of Transgender* provides a detailed account of gender diversity including the social and political issues that have emerged in gender variant discourses. One common theme addressed in Stryker’s book is that oppression, marginalization and violence are common experiences of gender diverse people living in North America. Marginalization of gender diverse people exists in non-western cultures too; however, there is also literature about non-western cultures that portrays gender diverse people in a positive light where they are seen to have special powers and are important members of their community (Nanda, 2000).

A professional response to ongoing mistreatment of gender diverse people has been found in a resource for specialists of all disciplines who work with gender diverse people called *The Standards of Care for the Health of Transsexual, Transgender and Gender Nonconforming People* published by The World Professional Association for Transgender Health (WPATH, 2012). This comprehensive set of guidelines is now in its seventh edition and offers information on how to provide non-oppressive, ethical and supportive care for all types of practitioners who work with gender diverse people.

The term “gender diversity” will imply different things depending on the person describing it, the context they are using it in, their socio-political-cultural location and their personal beliefs on human diversity and on gender. Although this may offer the reader more complexity than clarity, the goal is to demonstrate that there is currently no unified definition of gender diversity. Historical, sociological and psychological descriptions of sex and gender tend to adhere to the binary of female/male when this distinction is simpler and more rigid than what actually happens in the world. For this research gender is understood to be an identity, separate from the biological and chromosomal sex that is assigned to a person’s body. If we can see gender as an identity irrespective of the sexing of a person’s body then there becomes room for fluidity and spectrum; hence the use of the word diversity. Identity as a concept is viewed as a dynamic experience that is subject to change across different contexts and time periods. “Even the most institutionalized sex/gender identities are always more varied than a focus on cultural norms would imply” (Nanda, 2000, p. 5).

The goal of this next section is to summarize the salient literature on the topic of gender diversity with an emphasis on the field of counselling psychology and including biopsychosocial perspectives.

Non-western gender diversity

“The frequent Euro-American misidentification of gender diversity with homosexuality has led to misunderstandings of other sex/gender systems and to misplaced judgments of other cultures”

(Nanda, 2000, p. 3).

Many cultures share in the trend that gender diverse people often face discrimination and marginalization (Lev, 2013; Nanda, 2000; Shelley, 2008; Stryker, 2008). The fact that gender diversity is so prevalent across the world is a testament to it being a universal feature of human diversity, and as such it is unsettling that a common theme in gender diverse discourse is that this group of people consistently experience discrimination. Gender diversity appears in many cultures worldwide (Stryker, 2008). “Cultures construct their sex and gender systems differently and these systems do not always neatly divide into male and female, man and woman” (Nanda, 2000, p. 1). One trend that appears in literature across a variety of cultures is that natal male gender variance occurs more frequently and is more frequently emphasized than natal female gender variance (Nanda, 2000). In North America the transgender movement began with natal male gender variant behaviour (Stryker, 2008). A strong argument to explain this pattern has yet to be clearly identified.

North American indigenous cultures

There is so much diversity across indigenous groups that it would be impossible within the scope of this research to understand gender diversity in a comprehensive manner in these contexts. For the purpose of this research, this section will refer to general trends within North American indigenous groups, while acknowledging this does not capture the experiences of each individual nation.

North American indigenous cultures have historically included individuals who were labeled berdache (a pejorative word meaning “male prostitute,” “kept boy” or “catamite”) to describe natal male gender variance (Gilley, 2006; Ishikawa, 2011; Nanda, 2000; Smithers, 2014). The term two-spirit, which means “being of both male and female spirits” (Gilley, 2006, p. 89) became popular in the 1990’s as LGBT scholars argued that the term berdache was rooted in heteronormativity and heteropatriarchy (A. Smith, 2010). Two-spirit people are described as occupying a third gender space rather than adopting characteristics of the other natal sex. “Not to be confused with transvestitism, this third gender often embodied a mixture of the social, ceremonial, and economic roles of men and women” (Gilley, 2006, p. 8).

There is some indication that two-spirit people has historically been understood to have spiritual powers, although this information is not consistent across resources (Nanda, 2000). North America is a large area, and as such indigenous cultural practices may vary by geographic region and subcultures. Some North American indigenous subcultures have been known to have not three but four genders. For example, the Navajo people have a gender diverse role called *nàdleeh* where natal males adopt many characteristics of the natal females in their community including clothing, work, language

and behaviour. Alternately, in the Mohave society the natal male who adopts a female role is called alyha and the natal female who adopts a masculine role is called hwame (Estrada, 2011; Nanda, 2000).

One theme that seems to be common to these gender diverse identities in indigenous North American culture is that people adopting different gender behaviours and identities have historically been central rather than marginal in their societies. Nanda (2000) suggested “repression of visible forms of gender diversity, and ultimately the almost total decline of transvestism, were a direct result of American prohibitions against it” (p. 15). In these cultures natal male and female gender variants will most frequently have sexual relations or marry people of the same natal sex. These relationships however are not considered homosexual because the gender diverse person is not seen as aligned with their natal sex. Instead they are understood to occupy a different gender space than their natal sex. Nanda indicated that homogender (same gender identity/presentation, *potentially* different natal sex) relationships within these cultures are more likely to be viewed negatively by the community than homosexual relationships. This discrepancy between homosexual and homogender seems to be due to the cultural acceptance of gender diversity, but the lack of cultural acceptance on homosexuality. In a homogender relationship the two partners are viewed as having similar gender presentation and identity making them appear homosexual which is viewed negatively within this culture. However, within a homosexual relationship (same natal sex), if the two partners have very different gender identities and presentations (one person presents masculine and the other presents as feminine) then this is seen as more acceptable because it *appears* heterosexual (different natal sex) when it is actually heterogenderal (different gender

identity) and may or may not be heterosexual. It seems that in this culture relationships that appear hetero (having a male and a female person) are more culturally accepted. This is less about genital construction (natal sex), and more about gender presentation within the partners. “Historical Native ideas about gender did not employ the gender-binary, bodily-sex-equals-gender view commonly found in European society” (Gilley, 2006, p. 8).

Hindu culture

There is a classic Hindu text called “The Rigveda” which suggests that before creation the world did not have any distinctions including sex and gender (Nanda, 2000). Hindu poets and artists have embraced this concept through artistic expression including androgynous paintings featuring men with wombs. In Hindu culture, hijra people are the most common example of gender diversity and are understood to occupy a third gender; however historically they have been discussed as being a sexual minority (Jami & Kamal, 2015). The word hijra is an umbrella term with diverse meanings typically including intersex, transvestite, transgender, bisexual and homosexual men with feminine characteristics (Jami & Kamal, 2015); however, Ishikawa (2011) argued that the term hijra is “distinctly different from the conceptual underpinnings of what is seen as transgender in the west” (p. 213). Ishikawa argued that the concept of hijra is different because the Hindu culture’s understanding of gender is different than the western binary of female/male. Hijra people are almost exclusively natal males and are seen as having both feminine and masculine characteristics. Natal females who adopt masculine clothing and adopt male identities do not fit into the category of hijra (Jami & Kamal, 2015).

Hijra people often worship Bahuchara Mata who has been traditionally associated with gender diversity and is seen as a form of the Hindu mother goddess. A surgery is often performed for a person to move from being seen as a natal male to a hijra. The surgery involves chanting Bahuchara's name, which is thought to encourage a trance. When a trance has been achieved the person performing the surgery "a midwife" (usually also a hijra) severs the penis and testicles and the blood is allowed to flow uninterrupted from the body to free the person of their maleness (Nanda, 2000). Their fertile organs (penis and testicles) are planted in the earth to provide fertility to the surrounding community.

Hijras are included in mainstream Hindu culture and have specific roles such as performing at marriages and after births – they sing and dance and bless the child and receive traditional payments of money, sweets and cloth in return. They are thought to have fertility power due to the fact that they surrender their own fertility in the ritual surgery, and as a result can confer blessings for fertility on other people.

In Hindu culture there is also a female gender variant identity called *sādhin*, which roughly translates to "female ascetic" (Nanda, 2000). This group is not nearly as visible as hijras and has become "significantly less visible in modern day culture" (p. 40). *Sādhin* refers to women who do not marry and choose an "unconventional but respectable alternative to the accepted female roles of wife and mother" (Phillimore, 199, p. 331). Common *sādhin* identifiers include choosing clothing traditionally worn by men and maintaining a short hairstyle. Natal females voluntarily decide to become a *sādhin* usually around puberty. The choice to adopt a *sādhin* identity is related to a natal female's determined rejection of marriage. Despite identifying as a *sādhin*, the person

will remain socially a woman, be referred to using female pronouns and birth name, and will perform both traditionally female and traditionally male tasks within their culture (Nanda, 2000; Phillimore, 1991).

Brazil

In Brazil, gender diverse identities are defined by a person's sexual orientation rather than their specific gender role behaviour in realms of culture other than sexuality. "This theme of sexual orientation being a marker for gender identity characterizes most gender diversity in Latin America" (Nanda, 2000, p. 43).

Travestís are natal males who identify as female yet are not considered women despite typically having chest implants and sometimes taking feminizing hormones. Travestí's "shape their bodies to exaggerate the curves identified with the female body, with a 'hidden extra': bodies with breasts and a penis" (Cornwall, 1994, p. 111) and do not identify as men or as women but as their own identity of travestí. Another example of gender diversity in Brazilian and Salvadorian culture is the transformistas, people who perform in drag, but otherwise present aligned with their natal sex. Transsexual is another term that is now being used in this culture (Cornwall, 1994), and refers to people who choose to have genital surgery. People who identify as travestí typically choose to keep their penis intact because it is thought that removing it would prevent semen from leaving the body, leading to symptoms of a mental illness or "madness" (Nanda, 2000 p. 47). Cornwall argued that transformistas, pre-operative transsexuals and travestí's do not identify as men, and are not referred to as men by others. They are often grouped into a "residual category marked by the pejorative term *bicha*" (p. 113).

Travestí people primarily have sexual relationships with natal males where it is appropriate for them to use their intact genitals for sexual pleasure; they are also often involved in prostitution (Cornwall, 1994). Although Nanda argued that travestí sexual relations with natal males are not considered homosexual but heterogenderal because the relationship is culturally defined by the social/sexual differences in gender, and not by the sameness of the male bodies and sexual orientation. However, Cornwall argued that these gender diverse identities are seen as homosexual “*homossexuais*” (p.113) if they take a receiving role in sexual relations with other men, but not if they have a “preference for the inserter role in sex” (p. 113).

Polynesia

The main component of gender diversity in Polynesia (similar to other cultures) involves natal males who adopt the characteristics of natal females in their culture. In Tahiti and Hawaii they are referred to as māhū, in Samoa they are called fa’afafine (which means like a woman), in Tonga they are fakaleitī and in Tuva they are called pinapinaaine (Dolgoy, 2014; Matzner, 2001; Nanda, 2000). This geographic diversity reflects the cultural variation of Polynesian people.

In Polynesia, there is no clear cultural sanction to a third gender so people can occupy a cross gender role and then leave the role later in their life; creating a more fluid gender system compared to other cultures. However in Samoa the fa’afafine is viewed as a “third sex” (Schoeffel, 2014, p. 77). The fa’afafine is a gender occupied by natal males who adopt feminine features and behaviours and who play only a passive receptor role in sex (the receptor is the person who receives the phallus and does not engage in penetrating their partner). In Samoa many adolescent boys participate in homosexual

sex; however, the fa'afafine is a "legitimate sex partner" (p. 77) because it allows the adolescent boy to play the active inserter role and learn appropriate sexual behaviour in preparation to have sex with women (Schoeffel, 2014).

Polynesian gender variance has been described as liminal, in that gender diverse people occupy both sides of the gender binary (Nanda, 2000). For people who identify as māhū their diverse identity is associated with their gender, not their sexuality (p. 64). Māhū are a marginalized member of society and often do not have access to the same level of community respect and access to resources compared to other people. Typically they are only given equal social access to resources if they give up their nonconforming gender identity and "perform the duties of a husband and household head" (Nanda, 2000, p. 69).

Thailand and Philippines

In contemporary Thailand and the Philippines gender diversity primarily refers to transgender males (Nanda, 2000). In Thailand they are known as *kathoey* and *bayot* and in the Philippines they are known as *bakla* or *bantut*. Bakla (a man with a feminine heart) and has negative connotations and bantut has stronger negative connotations where it means, "joke of a woman" (Nanda, 2000, p. 80). Bantut are viewed as neither men nor women and their receptor role in same-sex sexual relations is considered an abomination in Muslim culture. This is an example of how currently, the attitudes towards gender diverse people are "ambivalent and can include ridicule and hostility" (Nanda, 2000, p. 72) and their social position is "generally derided" (Nanda, 2000, p. 77).

Historically in the Philippines anatomy and/or sexual orientation had little impact on identity and social position (Nanda, 2000) and gender diversity was symbolically

central to the culture. One example is with babyalan people (transgender women) who were seen to have sacred personages and ritual healing power as well as being accomplished singers and dancers.

Summary

It seems that the separation of gender identity and sexual orientation is culturally specific. While some cultures define gender variance by a person's sexual orientation, others leave sexual orientation in the background. Others include both sexual orientation and gendered behaviour in their conceptualization. This difference draws attention to the fact that there is no unified script for global gender diversity, which is an excellent example of how gender is a cultural construct with group-specific features. There is diversity within gender diversity.

Another common theme observed in prior research is that natal male gender variant behaviour is typically more visible than natal female gender variance. The reason for this trend has not been made clear. Additionally, some cultures value a third gender space and include people identifying with a third gender in cultural celebrations and ceremonies valuing their uniqueness. In contrast other cultures deride individuals identifying with a gender other than their natal sex and these people become marginalized members of society.

What is clear from this review is that gender diversity exists in a variety of cultures worldwide. How a culture responds to genders other than female and male is unique to each group.

Biopsychology, neuropsychology, and cognitive psychology literature

Research in cognitive and neuropsychology has recently begun to explore differences between transgender people and cisgender people. This is an interesting avenue of study because cognitive differences between natal females and natal males have been well established in existing literature (Swaab & Garcia-Falgueras, 2009; Torres, 2006; Veale & Clarke, 2009). Some of the prominent differences indicate that natal females outperform natal males on tests of verbal fluency, perceptual speed tasks, fine motor skills, verbal memory and verbal learning (Torres, 2006). Natal males have been shown to outperform natal females on tests of visuo-spatial ability, math problem solving, and visual memory (Torres, 2006). Few sex differences have been identified on tests of attention and working memory.

One interesting area of study of natal sex differences in cognitive abilities is within people who identify as transgender or with the opposite gender as their natal sex would indicate. This sphere of research most frequently uses the DSM language of gender dysphoria (DSM-V) or gender identity disorder (DSM-IV). The intelligence of children with gender dysphoria is identified to be within comparable ranges to populations who do not have diagnoses of gender dysphoria (Cohen et al, 2003), which makes research comparing cognitive abilities of transgender people with other groups seem like a promising and appropriate avenue of exploration. Despite this new and interesting research, there is currently no unified definition of gender diverse identity within the academic community and no unified theory to explain its etiology.

At present, the literature is unclear as to whether transgender populations are more similar in cognitive function and ability to their natal sex or to their identified

gender. Some research indicates transgender people are more similar to their identified gender (Torres, 2006), while other research indicates they are more similar to their natal sex, in terms of cognitive abilities and intelligence (Haraldsen, Opjordsmoen, Egeland & Finset, 2003). Additionally, research has explored changes in cognitive ability after taking cross-sex hormones, and some literature has indicated that people taking cross-sex hormones begin to perform more similarly to their identified gender than natal sex (Miles, Green, Sanders & Hines, 1998; VanGoozen et al 1994, 1995). However, the research is in its early phase and some research refutes this evidence (Haraldsen et al., 2005; Miles, Green & Hines, 2006). All sides of this interesting and juvenile research will be presented next.

Haraldsen, Opjordsmoen, Egeland and Finset (2003) did a study exploring four sex-sensitive cognitive factors (rotation, visualization, perception and verbalization) and two sex-neutral factors (logic and arithmetic) from the Kit of factor referenced cognitive tests (Ekstrøm, French & Harman, 1976). The authors compared subjects with a diagnosis of Gender Identity Disorder (GID) with a control group. They had 52 GID subjects including 21 natal females and 12 natal males from Norway and 9 natal females and 10 natal males from the USA. They had and 29 people in their control group including 15 natal females and 14 natal males. All the tests of cognitive ability were done prior to any of the GID subjects receiving cross-sex hormone treatment. The authors controlled for confounding variables including education, handedness, psychopathology, and did a chromosomal and endocrinological screen to ensure all subjects were either XX or XY (one XXY was not included) and not taking any hormones. These authors found that both the GID groups and the control group the natal males were superior in

visualization and rotation. They did not identify any tests where the natal females were superior. They conclude that the “cognitive pattern” (p 906) of people who have a diagnosis of Gender Identity Disorder is consistent with their natal sex and not their gender identity.

Haraldsen et al. (2005) suggested that cognitive performance in young people with gender identity disorder was more likely to resemble their natal sex than their gender identity. Using what appears to be the same sample as their 2003 study (52 GID subjects: 33 from Norway, 19 from USA and 29 controls). None of their GID subjects had received cross-sex hormone treatment prior to this study.

The GID subjects were assessed 8 – 12 weeks prior to cross-sex hormone treatment and then 3 – 12 months after receiving cross sex hormones. The authors were not clear about how many times the non-GID subjects were tested. They tested six cognitive areas: perception, arithmetic, rotation, visualization, logic and verbalization. These tests were from the “Kit of factor-referenced cognitive tests” (p. 164) developed by Education Testing Service (www.ets.org), and indicated that the tests chosen are based on a factor analysis.

They found that the GID subjects and the controls showed a similar pattern of time-dependent improvement in cognitive performance. Despite the fact that administering cross-sex hormones causes significant physiological changes to transgender people, this study did not identify any cognitive differences. The authors identified that irrespective of gender identity, natal males scored higher on tests measuring visuo-spatial ability than natal females and that “the presence of GID had no impact on the cognitive test results of sex-associated factors within each group”

(Haraldsen et al, 2005, p. 912). The authors concluded that transgender women (natal males) have cognitive patterns more similar to their natal sex than their identified gender. These authors did not identify an area in which natal females were stronger, which might be considered a limitation of their study. Other research (Torres, 2006) has identified that natal females score higher on tests of verbal fluency (verbalization) which was a measured variable in this study and memory, which was not measured in this study.

A study by Cohen-Kettenis, van Goozen, Doorn, and Gooren (1998) researched transgender women and transgender men and compared them to cisgender women and cisgender men. They were looking to see if the organizing/activating impacts of pre/perinatal hormones had an impact on cognitive abilities. Their sample consisted of 77 trans-identified people (44 MTF age 17-54 and 34 FTM age 18-57). A control group of 51 heterosexual cisgender men age 18-53 and 29 cisgender women (18-46 years). They did not clarify the sexual orientation of the cisgender women participants.

They measured lateralization using the Dichotic Listening Task (Bouma et al., 1984) lateral preference using a 15-item questionnaire (Oldfield, 1971), spatial ability using the Card Rotation Test (Ekstrøm et al., 1976), and verbal memory using the 15 Words Test (Heslinga & Van den Burg, 1983; unpublished master's thesis). They found that there were marked differences between cisgender men and cisgender women, and that the trans people scored somewhere in between these two groups (without cross-sex hormone treatment). They found prominent what they call "gender differences" but what this writer understands to be "natal sex" differences and that "the two transsexual groups occupied a position in between these two groups, showing a pattern of performance away from their biological sex" (p. 631). The authors then interpret their data as providing

evidence that “organizational hormonal influences may have an effect on the development of cross-gender identity” (p. 631). One limitation of this research paper is that the authors are imprecise in their language. They identify their control groups as “heterosexual men” and “women.” They say nothing about the sexuality of any of the other participants, thus making their inclusion and exclusion criteria unclear. They also use the word gender when they seem to be referring to natal sex (genital appearance at birth). Although these criticisms are unlikely to impact their data in a significant way, it is still indicative of a poor discussion of the difference between sexuality and gender identity. Regardless, their data are an interesting contribution in this sparsely researched area of knowledge.

Miles, Green, Sanders and Hines (1998) found that a group of MTF people (N = 29) undergoing cross-sex estrogen hormone treatment scored higher on a test of verbal memory compared to a group of MTF people who were not receiving cross-sex estrogen hormone treatment. The verbal memory was tested using a sub-test (Paired Associate Learning) of the Wechsler Memory Scale (Wechsler, 1945). In this study no differences were found in other measured cognitive tasks including digit span (Wechsler) mental rotations (Vandenberg & Kuse, 1987) and controlled associations (Ekstrøm, French, & Harman, 1976). These tests were chosen because they have shown natal sex differences favouring males in prior research (Voyer, Voyer & Bryden, 1995). Three of these four authors conducted a follow-up study (Miles, Green & Hines, 2006) and found that estrogen treatment did not have the same influence. Miles, Green and Hines (2006) reported using a more reliable design by exploring a broader variety of memory functions (object and location memory, verbal and visuo-spatial), which have demonstrated natal-

sex differences in prior research (Collaer & Hines, 1995; Voyer et al., 1995). In this study they recruited 103 natal males who had a diagnosis of GID, 74 ended up participating in the research. One group ($n = 27$) were tested pre-estrogen treatment and then again between 3 and 12 months into estrogen treatment. Another group ($n = 27$) who had been receiving estrogen treatment for a minimum of 28 months were tested first, and then tested eight weeks after stopping estrogen treatment. These people who went off estrogen did so because this is a pre-requisite for genital surgery to reduce the risk of blood clotting. Their ceasing of estrogen treatment was not due to their participation in this study. A final control group ($n = 20$) was tested after they had been on estrogen treatment for at least three months, and then tested again 3-12 months later. The authors observed few changes to the subjects who were undergoing estrogen hormone treatment and concluded that they found “no support for the hypothesis that treatment of M– F transsexuals with estrogen influences memory or cognitive abilities that show sex differences” (Miles, Green & Hines, 2006, p. 714). This finding implies that despite taking cross-sex hormones, some MTF trans people perform more similarly to their natal sex than their identified gender on tests of cognitive ability.

VanGoozen, Cohen-Kettenis, Gooren, Frijda and Van De Poll (1994, 1995) did two studies over two years measuring aggression, sexual motivation, cognitive functioning, visuospatial ability and verbal ability. In their first study they measured spatial ability using the Rotated Figures Test (Ekstrøm et al., 1976), verbal fluency using The Word Production Categories Test and The Sentence Production Letters Test (adapted from Gordon, Corbin & Lee, 1986) and verbal reasoning using The Verbal Reasoning Test (Luteijn & Van der Ploeg, 1983). This first study involved testing 22 MTF people

pre testosterone treatment and 3 months into testosterone cross-sex hormone treatment. In their second study they measured aggression and anger proneness using the Vragenlijst over Agressief Gedrag (Van Goozen, 1990; cf Van Goozen, 1995), which is an adapted version of the Buss-Durkee Hostility Inventory (Buss & Durkee, 1957). It was translated into Dutch for their study, and included four subscales assault, irritability, indirect aggression, and verbal aggression. They measured anger proneness using the Anger Expression scale (Spielberger et al., 1986). Sexual interest, sexual attitudes, and sexual arousability were all measured using scales that the authors developed in their lab. They did not discuss how the scales were developed, normed, or any psychometric properties of the scales. Sexual interest was measured using the Sexual Interest Questionnaire, which although somewhat unclear in what construct it measures, seems to be focused on measuring sexually motivated behaviours. They measured sexual attitudes using the Sexual Attitudes Questionnaire, which is focused on sexual opinions, and attitudes ranging from liberal to conservative. It seems that this questionnaire would be culturally bound to the social group that it was developed by, and that what consists of a “conservative” sexual attitude may be very different in different parts of the world. They measured sexual arousability using the Sexual Arousability Questionnaire. This second study included 35 FTM trans men, and 15 MTF trans women. Both trans groups were receiving cross-sex hormone treatment, although the authors did not specify how long each participant had been on cross-sex hormones prior to their participation in this study. They were compared to a group of controls who were 20 men and 20 women, the authors did not specify that they were cisgender men and women; however, they did indicate that

all 20 of the women reported “normal menstrual cycles” (VanGoozen, Cohen-Kettenis, Gooren, Frijda, & Van De Poll, 1995, p. 347).

Through these two studies, the authors discovered that androgen hormones given to FTM people increased their proneness to aggression, sexual arousability and performance on the spatial ability measure; these observations are typically associated with natal males. These authors also noted that androgen hormone treatment lowered the FTM population’s performance on a test of verbal fluency and that androgen suppression in MTF decreased proneness to aggression, sexual arousability and performance on the spatial ability test while their performance increased on the test of verbal fluency. These authors concluded that although there is evidence for sex-specific hormonal organizing effects in humans, these organizing effects are not stable in the event of cross-sex hormone administration to MTF and FTM transgender people. These authors argued that cross-sex hormone treatment changes transgender people’s cognitive ability and some of their behaviours around sexuality and aggression to make them more similar to their identified gender, rather than their natal sex. If these data are replicated in other research, this could have implications for transgender people who pursue cross-sex hormone treatment. If cognitive abilities and sexual behaviour change with cross-sex hormone treatment this could impact a many areas of a trans person’s life including career/employment, education, relationships, sexuality, intimacy, and communication. Healthcare professionals who support trans people would need to know about these potential changes to help support all the areas of life that gender transition impacts.

Heylens et al. (2012) conducted a comprehensive meta-analysis exploring the genetic and hereditary influence of gender identity disorder. These authors reviewed

PubMed, Web of Knowledge/Web of Science, and Google Scholar using the search terms: transsexual, gender identity disorder, twins and genetics (p. 752). Their literature review revealed 8 monozygotic (MZ) female twins, three of whom were concordant (37.5%) and five of whom were discordant (62.5%) for GID. They identified 5 dizygotic (DZ) twin pairs, none of whom were concordant for GID. They also identified 31 male twin pairs, 15 of whom were MZ. Of the MZ male twins, 6 (40.0%) were concordant for GID and 60% were discordant. Of the 16 DZ male twin pairs, all were discordant for GID.

Although the etiology for gender identity disorder is poorly understood (Heylens et al., 2012), evidence suggests that there is a strong biological link for people who meet criteria for diagnosis. The authors hypothesized that this biological link could be related to variance in prenatal hormone exposure, which has an impact on central nervous system (and as such cognitive) development. Although this is not necessarily evidence that transgender people are more like their identified gender than natal sex, it does provide evidence of a biological connection to transgender identities. The authors of this meta-analysis also go beyond the evidence and suggested that “the etiology of GID is a complex process of biopsychosocial components with unexplained interactions” (Heylens et al., 2012, p. 756) and that the etiology of GID “remains largely unknown” (Heylens et al., 2012., p. 751).

Veale and Clarke (2009) did an extensive review of literature to explore the etiology of gender variance. They reviewed published literature in a variety of areas related to gender diversity including genetics, prenatal hormones, handedness, familial correlates and psychosocial factors. They did not report on the methods for their literature

review, how and where they searched for published literature or how many publications they reviewed.

Heylens et al. (2012) reported further that there is within-family concordance, which means that people with gender identity disorder are likely to have a relative (parent, brother, sister, aunt, uncle etc.) who also has gender identity disorder or identifies as transgender (these authors use the word transsexual). It seems through this recent research that there are strong genetic links to transgender identities. This by no means implies that being transgender can be solely explained by biology or genetics, but that there is a significant connection. This biological evidence points research and theory in the direction of exploring physiological differences between people who are transgender and people who are not. It provides evidence that there is a biological link, which offers support to the hypothesis that being transgender is related to biological factors like prenatal central nervous system development and the impact of hormones on the adult brain.

Veale and Clarke (2009) also suggested that prenatal androgen exposure could play a role in the development of gender variant identities because androgens influence fetal brain development. They implied that people who are transgender have some brain structures that are more similar to their identified gender than their natal sex. The authors indicated uncertainty about whether this is an organizing structural difference that takes place in utero, or if this difference is the result of activating effects of hormones on the brain during adolescence.

Swaab and Garcia-Falgueras (2009) reviewed literature related to sexual differentiation of the human brain and discussed some of the pertinent findings. These

authors did not disclose the methodology used in their literature review. Throughout their paper they discuss their own research on the sexual differentiation of the brain reporting on lab observations; however, they do not discuss their research methods or statistics and report only the main findings. Despite these limitations of their paper, these authors discuss some incredibly interesting findings and amalgamate relevant literature creating an important contribution to the literature on how biological factors impact gender diverse identities.

Swaab and Garcia-Falgueras (2009) argued “there is no proof that social environment after birth has an effect on gender identity or sexual orientation” (p. 17) and suggested that biological factors influence these aspects of human diversity. The authors discuss evidence that demonstrates how sex-specific hormones impact the brain during the second trimester of pregnancy; however, genital development happens in the first trimester. Along these lines a fetus could develop with masculine genitals and then due to the impact of sex-hormones in the second trimester (for a variety of reasons) develop brain structures that are more similar to natal females. In this way the genitals of the baby at birth would indicate it was a natal male (as would the chromosomes) however the brain of this child may develop like a natal female, and this person *may* indicate that they identify more with the female gender or that they are transgender. An interesting takeaway from this research is that masculinized genitals may not correlate to the degree of masculinization of the brain.

Swaab and Garcia-Falgueras (2009) assert that potential abnormal hormone levels in utero lead to differences in cognitive ability and provide a potential scientific explanation for gender diversity. Some of the differences in cognitive abilities and

behaviours discussed earlier in this section (aggression, verbal fluency, visuo-spatial ability) are suggested by Swaab and Garcia Falgueras to be the result of structural and functional differences which are precipitated by the diversity of possible interactions between developing brain cells and prenatal hormones. These authors suggest that this diversity in exposure to prenatal hormones can influence not only cognitive abilities but also gender identity and sexual orientation.

The two brain structures that have been identified to have natal sex differences are the central subdivision of the bed nucleus of the stria terminalis (BSTc) located near the hypothalamus and the third interstitial nucleus of the anterior hypothalamus (INAH3). Both of these areas of the brain have been found to be larger and with a higher density of neurons in natal males as compared to females (Zhou, Hofman, Gooren and Swaab, 1995 & Kruijver, Zhou, Pool, Hofman, Gooren and Swaab, 2000). Swaab and Garcia-Falgueras (2009) discussed the BSTc and INAH3 differences in the context of a theory of transsexuality:

The theory on the origins of transsexuality is based on the fact that the differentiation of sexual organs takes place during the first couple of months of pregnancy, before the sexual differentiation of the brain. As these two processes have different timetables, it is possible, in principle, that they take different routes under the influence of different factors. If this is the case, one might expect to find, in transsexuals, female structures in a male brain and vice versa, and indeed, we did find such reversals in the central nucleus of the BSTc and in the INAH3, two brain structures that, in rats, are involved in many aspects of sexual behavior (p. 21)

Swaab and Garcia-Falgueras claimed:

Our observations thus support the above-mentioned neurobiological theory about the origin of transsexuality. The size of the BSTc and the INAH3 and their number of neurons match the gender that transsexuals feel they belong to, and not the sex of their sexual organs, birth certificate or passport. Unfortunately, the sex difference in the BSTc volume does not become apparent until early adulthood (Chung, De Vries and Swaab, 2002), meaning that this nucleus cannot be used for early diagnosis of transsexualism (p. 22)

Although these suggestions are based on clinical observations, the authors reported limited examples of their observation, and their results would need to be replicated in future research to give strength to their arguments.

Other research (Owen-Anderson et al., 2008) measured empathy in 20 young (mean age 6.86 years) MTF trans children with a diagnosis of GID and compared them to a group of natal females, a group of natal males, and a group of natal males with externalizing disorders. The researchers measured empathy using a maternal report measure, a self-report measure and an in-vivo evaluation where the children were observed reacting to a pain simulation performed by two adult actors. The authors found that natal males with GID had more empathy (as reported by their mothers) than natal males without GID. Again, it could be argued that this marked difference between these groups of children provides some evidence that there are biopsychosocial differences between transgender and non-transgender populations, especially given that this group was studied well before they reached puberty, so they had not yet experienced the activating effects of pubertal hormones.

Medical view of gender diversity

In North America, gender diversity, specifically transgender and transsexual identified people are often discussed from a medical perspective and treated within the medical system. Medical professionals in mainstream medical and psychological practice use the Diagnostic and Statistic Manual of Mental Disorders (DSM; APA, 2013) and the International Statistical Classification of Diseases and Related Health Problems (ICD-10; WHO, 2008) to diagnose their patients/clients. These labels help to provide some gender diverse people with access to the necessary treatments they need to make their body look and feel more congruent with their gender identity. This might involve surgeries and cross-sex hormone therapy. These labels are also problematic in that they presume this population of people to have a mental and/or physiological illness. This pathologizing of diversity creates stigma, marginalization, and oppression in non-minority spaces. There is currently an ongoing dialogue among professionals and scholars about the existence of a diagnosis for some gender diverse people, specifically those seeking physiological treatments like hormone replacement therapy and surgery. It is thought by some (Vance et al., 2010) that removing the diagnosis from the DSM and/or ICD would eliminate medical services coverage for gender diverse treatments thus making gender diverse people in search of treatment on their own to cover the cost of a “cosmetic” procedure. Currently there is no obvious solution to the issue of continued marginalization by keeping the diagnosis in the professional manuals, while maintaining access to care and treatment for those people who seek it. Many of the contributors in the Vance et al. article argue that the risk of preventing treatment coverage by removing the diagnosis is

too big and the diagnoses should stay until another solution is proposed and made available.

Intersexuality

This review of the medical system and current treatment of gender diverse people would be incomplete without a discussion about people who live with intersex conditions. A brochure published by the American Psychological Association (APA, 2006) estimated that 1 in every 1500 births is born with an intersex condition (this pamphlet did not provide any information about research methods or data collection). Intersex conditions are defined as conditions that lead to the atypical development of sex characteristics. Examples include being born with abnormal or ambiguous genitals, abnormalities of internal reproductive organs, sex chromosomes and/or sex-related hormones (APA, 2006). Examples of intersex conditions include Klinefelter syndrome, Turner syndrome, and androgen insensitivity, although there are many different intersex conditions. Some people who have an intersex condition, namely chromosomal and internal sex organ abnormalities may not be identified at birth. Some of the research that has been done involving intersex populations is relevant to this research, and will be discussed next.

Torres (2006) presents evidence indicating that women with congenital adrenal hyperplasia (CAH), which involves significantly higher than average exposure to androgens prenatally will perform more similarly to natal men on tests of visuo-spatial ability than natal women. The author explains that these CAH women experience heightened androgen exposure (which can happen at any point in utero development), which is hypothesized to increase their scores on tests of visuo-spatial ability. Although

this piece is not about transgender people specifically, it does provide evidence that abnormal levels of prenatal hormones can lead natal females to perform more similarly to natal males on tests of cognitive ability. The author notes that the hypothesized mechanism for the development of CAH (prenatal exposure to androgens in the second trimester) is the same hypothesized mechanism for some FTM trans people's CNS development. Again, this evidence is speculative at present however it offers researchers future avenues of exploration.

Another population that has emerged in this complex sex-differences and cognitive abilities research is women who have Turner syndrome. Turner syndrome is a genetic disorder where females are born without one of their sex chromosomes (they are X, rather than XX). This leads to a variety of physiological complications including non-functioning ovaries and sterility (Torres, 2006). Women with Turner syndrome have been identified to have a decreased ability on visuo-spatial tasks that does not improve with androgen exposure (Torres, 2006). The reason this research is interesting in the context of this literature review is because the population of people with Turner syndrome is thought to have developed their disorder due to abnormal exposure to androgens in utero. This is similar to the hypothesis for FTM transgender people. Some FTM transgender people improve on tests of visuo-spatial ability when they are given androgen hormone treatment (Torres, 2006), while people with Turner syndrome do not improve with androgen treatment. However, other research cited above (Miles, Green, and Hines, 2006; Haraldsen, 2005) demonstrates that some trans people do not change in their performance on tests of cognitive ability that have shown natal sex differences after being given cross-sex hormone treatment. Torres makes a suggestion that there may be

something unique about the organizing effects of the brain structures for transgender people that are somehow different from what happens to people who have Turner syndrome despite similar hypotheses to the development of these two “disorders.” I realize this interpretation is a stretch, and it could easily be argued that people with Turner Syndrome are inherently different than transgender people because they are missing an X chromosome and as such their condition is more medically significant. This topic remains in the manuscript because it opens the possibility for future research that could explore how and why some FTM transgender people respond to androgen treatment while Turner Syndrome people do not.

Along a similar avenue, Torres (2006) also reported past research that found natal males with hypogonadism (diminished function of the testes) scored lower on visuo-spatial tasks compared to natal males without hypogonadism *and* compared to natal males who acquired hypogonadism post-puberty (Hier & Crowley, 1982). Androgen replacement therapy to these natal males who had hypogonadism did not improve their performance on spatial tasks the way that androgen therapy has improved transgender men’s performance on spatial tasks (Torres, 2006). This is more evidence that the organizing effects of androgens on the brain, in particular the cerebral regions have a long lasting impact on visuo-spatial abilities. One caution of interpretation here is to remember that cognitive ability is a spectrum, much like other abilities and body functions. Some natal males will score very high on visuo-spatial abilities and others will score low, irrespective of their gender identity. The research with transgender people is new and has only looked at very small samples of people. Some of the trends that have

been observed are fascinating, however at present they do not indicate an established phenomena.

Research in counselling psychology

It is first noteworthy that there is a significant dearth of literature within the field of counselling psychology that explores issues of gender diversity. This is particularly significant given that gender dysphoria or gender identity disorder has been in the DSM since 1980 (APA – DSM III) and counselling psychology is a discipline that educates many current and future mental health professionals. In Canada TransPulse (www.transpulseproject.ca) is a growing online resource that provides research and information about trans individuals in Canada.

Counselling psychology scholarship has traditionally grouped literature involving gender diverse populations with literature on sexual orientation, which provides confusion around the difference between sexual orientation and gender identity. The *Handbook of Counselling Psychology's* most recent edition has a chapter titled “Psychology of Gender” (Nutt, 2008) however there is no mention of gender diversity or transgender people. The chapter focuses exclusively on the experiences of women and men and is firmly entrenched in the gender binary. Additionally, the chapter titled “Counseling Psychology and Sexual Orientation” (Croteau, Bieschke Fassinger, & Manning, 2008) includes a very brief discussion about “gender-transgressive” people (p. 198) although the authors ascribe to the gender binary and connect gender transgression to sexual orientation which reinforces the confusion between these two distinct aspects of personal identity.

In a content analysis examining articles published from 1990-1999 in eight

journals relevant to counselling psychology, Phillips, Ingram, Smith, and Mindes (2003) noted that none of the articles focused on transgender or gender-diverse concerns and 2.11% of the articles focused on lesbian, gay or bisexual (LGB) issues. The authors did note an increase in the proportion of articles focusing on LGB issues compared to prior content analyses, in addition to an increase in the number of articles that were written from a queer-affirmative approach. If this observed trend continues and gender diverse people remain grouped under the queer umbrella, then we can expect scholarship in counselling psychology to increasingly feature articles focusing on gender diversity.

Smith (2010) reviewed eight counselling-related journals to explore if gender diverse populations were being included in LGB scholarship from 2000-2008. This author followed a similar style of Phillips et al (2003) reviewing the same eight journals all related to the discipline of counselling psychology. Due to the fact that there is so little actual research that has been conducted with sexual and gender minorities, Smith included brief reports, commentaries, introductions to special issues and reactions/rejoinders. Smith explained the inclusion of non-research articles by indicting that “they serve an important role in moving forward a scholarly topic and framing it within the larger field of professional psychology” (p. 53). The eight journals that were reviewed in these two studies are listed here: *Journal of College Student Development (JCSD)*, *Journal of Consulting and Clinical Psychology (JCCP)*, *Journal of Counseling and Development (JCD)*, *Journal of Counseling Psychology (JCP)*, *Journal of Multicultural Counseling and Development (JMCD)*, *Journal of Vocational Behaviour (JVB)*, *Professional Psychology: Research and Practice (PPRP)*, and *The Counseling Psychologist (TCP)*. Smith’s paper reviews the historical scholarship until 2008 that is in

any way connected to gender diversity and LGB populations. As such, the Smith paper is an excellent starting point to examine counselling psychology scholarship, which focuses on gender diversity. Smith's important paper provides the context for gender diversity issues in counselling and professional psychology.

Continuing the work of Phillips et al., Smith (2010) indicated that of the 237 articles that focused on LGBT people from 1990-2008 there was one article that included gender diverse people and nine articles that included the word transgender in the title or the abstract. Smith also noted that there is a lack of coverage in JVB, which might be an indication that career issues for this population are not being addressed; however career issues might be addressed in other journals.

One limitation of the Smith (2010) and Phillips et al (2003) content analyses is that the authors omitted several journals that are related to counselling psychology including: *Counselling Psychology Quarterly*, *Counselor Education and Supervision*, *Counseling and Values*, and *Counseling and Clinical Psychology Journal*. To bridge this gap, the author of this study conducted multiple searches of each of these additional journals using the words: trans*, transgender, transsexual, gender identity disorder, gender dysphoria and gender diversity with only four results total. When these four articles were examined none of them addressed gender diversity specifically and simply included the word transgender as it relates to the acronym LGBT (Lesbian, Gay, Bisexual and Transgender) and were exclusively focused on sexual minority populations. A recurring theme in academic scholarship is that issues of gender diversity are often overlooked and as such need much more attention.

Most of the papers focusing on gender diversity that have been published in the discipline of counselling psychology appear in the prominent journals *The Counselling Psychologist* and *Journal of Counselling Psychology* and are mainly comprised of brief reports, commentaries and informational articles that urge the reader to conduct research with gender diverse populations. Consequently, it seems that people in the field of counselling psychology are aware of the major gap in scholarship with gender diverse populations and that very few scholars are actually pursuing research with these populations. This gap poses an ethical issue to practicing professionals who are often encouraged to turn to the literature when they have a client present with an unfamiliar issue. Professionals working with gender diverse clients may have very little information available to help them offer ethical and respectful services to this population, and instead rely on consultation with peers and self-driven professional development. This gap in the counselling psychology literature needs attention. Some of the barriers to publishing in this domain are discussed next.

Smith (2010) notes that few early-career professionals are among those publishing in the LGBT area within the discipline of counselling psychology. He indicated that there are barriers to publishing articles on LGBT issues including lack of funding, lack of support from university faculty and administrators, fears of jeopardizing attainment of tenure, and difficulty in recruiting participants; making it appear that publishing in LGBT realm might compromise an early-career professional's career success, equal access to resource and safety in the workplace. The author suggests, "early career scholars should be given support for their efforts to conduct and publish research in LGBT issues" (p. 63) and that "counselling psychology needs to attend to scholarship focusing on transgender

persons” (p. 64) and goes on to imply that lack of institutional support for scholars wishing to pursue LGBT research may be indicative of a culture of prejudice on a systemic level. This suggested prejudice offers one explanation to why there is currently so little scholarship in counselling psychology that explores gender diverse populations. It is also consistent with the earlier discussion that gender diverse people face marginalization of which silencing is one example. This observed trend in the historical literature in counselling psychology speaks to the lack of visibility for this population.

Smith (2010) indicated that universities and organizations who are supportive and accepting of LGBT people are more likely to create environments where scholars feel safe to explore research on LGBT issues. Lastly, Smith noted that currently the vast majority of scholarship on LGBT issues originates in the USA and it was recommended that counselling psychology researchers from other countries also contribute to the research.

It is clear from this extensive productivity review that queer issues do not frequently appear in counselling psychology scholarship, and articles involving gender diverse people are even less common. Evidently, very little is currently known about gender diverse people from within the discipline of counselling psychology. This is especially problematic because counselling psychology as a field promotes sensitivity to diversity and multicultural issues (Bedi et al., 2011). Prior publications have suggested that counsellors become familiar with transgender issues in order to provide ethical care (Goethals and Schweibert, 2005). Fortunately, there seems to be recent and increased attention to gender diversity within the field as publications are beginning to emerge that include gender diverse populations. The current literature that is available is mostly

restricted to gender diversity within the gender binary of female and male. Hopefully in the future, scholars will continue to explore this rich area of non-binary gender diversity. Recent research from within counselling psychology and related disciplines that explores gender diversity and transgender populations is discussed next.

Budge, Rossman and Howard (2014) explored the experiences of coping and psychological distress among genderqueer individuals, and how social support offered a moderating impact. In their population over 50% had clinical levels of depression, and over 30% with clinical levels of anxiety (within a sample size of 64). They found that reported levels of social support moderated the impacts of depression and anxiety. These authors also noted that “counselors generally lack knowledge and awareness of genderqueer individuals, despite the fact they make up a large section of the gender-transgressive community” (p. 96). Beyond this important contribution to the discourse on gender diversity, these authors offer a review of the important terminology for counsellors working with gender diverse clients.

Singh, Meng and Hansen (2014) did a phenomenological study with 19 trans-identified youth between the ages of 15 and 25 years old. They used a phenomenological approach rooted in anti-oppression and feminist theories seeking “a deep structural understanding of the daily lived experiences of the resilience of trans youth participants” (p. 201) using semi-structured interviews. The interviews were focused on resilience, gender identity, discrimination and prejudice. These authors discovered that self-empowerment, access to supportive healthcare and educational environments, supportive trans community, positive reframing of mental health and family and friends were supportive variables that contributed to individual resilience. The variables that

decreased resilience were adultism, barriers to healthcare, isolation, employment discrimination, financial instability and gender policing. This research supports prior studies that indicate employment and career are important variables to consider with gender diverse communities and that having access to social supports and financial resources offer an opportunity for resilience and empowerment. Similarly, Moody and Smith (2013) identified that social support from friends and family and optimism were protective factors against suicidality in a population of Canadian trans adults ($N=133$).

Dietert and Dentice (2013) published a study exploring the experiences of gender non-conforming adults in the United States. They conducted open interviews with 32 FTM trans people aged 18 – 57. Their interviews were focused on gathering information across a wide variety of topics related to gender diversity and to “get insight into various aspects of our participants’ lives” (p. 32). They found that early life gender socialization experiences challenged these trans people to conform to the gender binary, which some of them indicated feeling constrained by. Participants in this study who indicated they did not conform to the gender binary reported that they felt challenged by family, peer groups and social surroundings. The authors concluded that the socially reinforced gender binary contributes “to social inequality for transgender youth who must constantly negotiate their identity while dealing with demands for conformity from both family and peers” (p. 25).

Budge, Tebbe and Howard (2010) published a qualitative study exploring the work experiences of transgender people. They used a semi-structured interview with 19 transgender-identified people ranging in age from 20 – 67 years old. They had five main interview questions (a) what was your experience in the workplace pre-transition, (b)

what was your experience in the workplace during/after transition, (c) are you currently working in a career that you find ideal, (d) can you have any job you want, why/why not, (e) how would your career aspirations be different if you were not transgender.

Using a grounded theory approach they found two distinct themes to be important: the process of gender transitioning while employed, and the career decision making process. Within the process of gender transitioning theme five subthemes emerged: preparation for transition, coming out at work, presentation and appearance at work, others' reactions at work and coping experiences related to work. Within the career decision-making process theme, six major themes emerged: occupational barriers, occupational prospects, and occupational aspirations, taking action, occupational gratification and contextual influences. This research provides the field with incredibly helpful information about important career-related variables that are specific to transgender people. This research also points out important career and workplace specific variables that are particularly relevant to this population. Pursuing an empowering and sustainable career is one way that gender diverse people can remain self-sufficient so it is critical that practitioners working with gender diverse people remain aware of the issues relevant to this group.

Other research has investigated career-related experiences with gender diverse populations. Brown, Dashjian, Acosta, Mueller, Kizer and Trangsrud (2012) explored the career experiences of nine MTF trans people ranging in age from 20 – 66 years old. Using semi-structured interviews that “were designed to allow participants to give meaning to their career and educational experiences” (p. 874). These authors discovered that the people they interviewed felt inclined to move from male-dominated occupations

to more female-dominated professions during or post surgery and/or hormone therapy. The authors indicated that discrimination and harassment were related to the choice to change profession, but there were a variety of other variables that influenced participants desire to move to more female-dominated professions. These other variables include: desire to pursue further education, interest in a helping profession, career barriers due to transition and that typical male gender expectations/activities felt incongruent.

Workplace discrimination has emerged in other studies as a contributing factor to career-related stress for gender diverse people. Dispenza, Watson, Chung and Brack (2012) used semi-structured interviews with nine MTF trans people ranging in age from 21 – 48 years old to explore career, work experiences, discrimination in the workplace, the role of career in identity and how being transgender has impacted career trajectory. Through these interviews, the authors discovered that discrimination based on gender identity has a negative impact on career development trajectory. They identified forms of discrimination to include: microaggressions, horizontal oppressions (discrimination from other LGB identified people), health care systems, policies, support systems, housing and educational institutions. Subsequently, the authors recognized the impacts of discrimination to be stress (anxiety, depression, apprehension, interpersonal challenges) and coping (counselling, support groups, advocacy, social support and proactive resistance). This study is a helpful addition to the literature as it reinforces the discrimination narrative consistent with other gender-diverse research, however the authors also indicate what supports are effective to cope with workplace or career-related discrimination.

Career-related issues and discrimination seem to be common themes in the limited literature exploring the experiences of gender diverse people from within counselling and applied psychology (Effrig, Bieschke & Locke, 2011; Nadal et al., 2012; Smith, Shin & Officer, 2012; Tebbe & Moradi, 2012). Given that gender diverse research is so rare in this field, the number of studies indicating discrimination to be a prominent issue provides evidence that discrimination is incredibly common for gender diverse people. Other research has begun to identify coping strategies specific to gender diverse populations (Budge, Katz-Wise, Tebbe, Howard, Schneider & Rodriguez, 2013; Sánchez & Vilain, 2009), which include collective self-esteem, positive identification with a social group, and direct social support.

As indicated earlier in this paper, the current literature in counselling psychology involving gender diverse people is limited. Most of the research to date involves populations of MTF or FTM people with very few genderqueer, gender-fluid or other non-binary gender diverse people being represented. Future research could fill some of the gaps by exploring issues of gender diversity that move beyond the specifics of career.

Violence, oppression and discrimination

Transgender people face violence and discrimination proportionally higher rates than people belonging to LGB groups (Chestnut et al., 2013). “Transgender people face poverty at twice the national rate, while transgender people of colour experience four times the national poverty rate” (Chestnut et al., p. 5) with transgender people, transgender people of color, and LGBTQ people of color experiencing “disproportionately severe violence” (p. 7). HRC (2015) published a report that indicated 53 transgender people were killed between the years 2013 – 2015, 87% of whom were

transgender people of colour. The breadth and severity of violence underscores the vulnerability of transgender people to hate violence. The violence that transgender people face can be a barrier for them to access emergency support in the aftermath of violence, making them more vulnerable when they do experience violence.

“Access to health care is a fundamental human right that is regularly denied to transgender and gender non-conforming people” (Grant, Mottet, Tanis, Herman, Harrison and Keisling 2011, p.1).

In 2008, the National Center for Transgender Equality and the National Gay and Lesbian Task Force formed a groundbreaking research partnership to address this problem, launching the largest comprehensive national transgender discrimination study. Over eight months, a team of community-based advocates, transgender leaders, researchers, lawyers, and LGBT policy experts came together to create an original survey instrument. Over 7,000 people responded to the 70 question survey, providing data on virtually every significant aspect of transgender discrimination nation including housing, employment, health and health care, education, public accommodation, family life, criminal justice, and identity documents. (Grant et al., 2011, p. 2)

Although these American statistics may be less relevant to Canada, given the differences in healthcare models between these two countries, the statistics are important and highlight the proportion of people living with a gender diverse identity who experience discrimination in healthcare settings. Some of the prominent statistics include: 19% of the sample reported being denied healthcare due to their transgender

identity, 28% reported experiencing harassment in medical settings, 2% (140 people) reported being victims of violence while in the office of a doctor, 50% reported having to educate their doctor about transgender care, reported over four times the national average for HIV infection 2.64% in this sample compared to .6% of the USA population, with rates for transgender women engaged in sex work up to 15.32%. Twenty five percent of respondents reported misusing drugs and/or alcohol to cope with their experienced discrimination, with 41% reporting a suicide attempt compared to 1.6% of the general population in the USA (2010). These statistics suggest that receiving medical care can be detrimental to the well being of trans and gender diverse people and people belonging to this population may be reluctant to seek out medical care for fear of mistreatment.

Currently no large-sample statistics are available for Canadian populations. Notwithstanding, the above statistics are staggering. Transgender people in the USA do not get the support and care that they need and deserve from the healthcare system. Furthermore, it is important for healthcare practitioners working with gender diverse people to understand the discrimination that this population faces in order to provide ethical, sensitive and appropriate care.

Theoretical grounding

Four theoretical approaches will be discussed here to help the reader understand how scholars have conceptualized gender diversity in the past. Theory is being employed here to provide the reader with different yet related perspectives about gender diversity. The theories presented offer a discourse on gender diversity that summarizes and integrates the academic research currently available. Theories that are being discussed here help to explain gender diversity and the impacts of living in a western culture with

this identity. Minority stress theory, gender as a social construction (including gender role socialization theories, doing gender, and queer theory), transgender theory and transgender identity development theories will be discussed in detail next.

Minority stress theory

“Transpeople are among the most subjugated and marginalized of social groups.”

(Shelly, 2008, p. 3).

Minority stress theory (MST; Meyer, 1995, 2003) was developed as a way to describe issues related to sexual minority populations. In counselling psychology research MST has been used to help conceptualize experiences of distress among sexual minorities (Szymanski & Sung, 2010; Velez, Moradi & Brewster, 2013) however it has also been applied in research with gender minorities (Sánchez & Vilain, 2009). Velez, Moradi and Brewster suggest that MST is likely to be applicable to the experiences of distress in gender minorities in addition to sexual minorities. One goal of this dissertation research is to explore gender from a perspective that is affirming of identity diversity and fluidity. One facet of affirming diversity is to acknowledge and validate the oppression and marginalization gender diverse people have historically faced and continue to endure at higher rates than LGB identified people and people who are not sexual or gender minorities (Sánchez & Vilain, 2009).

MST has been identified as “a major conceptual perspective to drive the research agenda on sexual minority populations’ health” (Velez, Moradi & Brewster, 2013, p. 532). MST (Meyer, 1995,2003) provides a valuable structure to understand the experiences of gender diverse people. Although this theory has previously focused on experiences of sexual minorities given that sexual and gender minorities are often

grouped in the literature it has been used to facilitate an understanding gender diverse people's experiences (Sánchez & Vilain, 2009). MST acknowledges the concept of intersectionality (intersecting identities) which has been suggested by Szysmanski and Sung (2010) to be particularly important for minority based research from within the field of counselling psychology.

Intersectionality as it is being used here refers to the intersection of multiple identities that a single person might hold including but not limited to gender orientation, race, ethnicity, age, ability, class, education and sexual orientation. MST's underlying principle is that people from marginalized social groups experience heightened levels of stress and negative life events because of their minority identity or identities which can lead to mental health problems, psychopathology and the experience of ongoing distress (Szysmanski & Sung, 2010). MST indicated that the stresses experienced by minority populations are in addition to the stresses that the rest of the population might face on a regular basis (Meyer, 2003). Part of the significant effect that minority stress has on an individual is that the stress is thought to last over a long period of time over which there is limited escape or reprieve. For example, living in an anti-transgender and heterosexist culture may encourage gender diverse people to keep their identity private, choose not to pursue affirming treatments for fear of safety and/or to keep continuous caution for their physical safety. Over time concealing their identity may have a negative impact on their mental health, sense well being and safety. Minority stress is not merely a group of negative experiences based on one's sexual or gender orientation, but rather a pattern of systemic discrimination that occurs over a long period of time (Meyer, 2003).

Meyer (2003) proposes four types of minority stress that are specific to sexual minorities. Each of the four types will be discussed here and how they might apply to gender minorities.

1. *External environmental stress*. This can come in a variety of forms including prejudice, rejection, harassment, discrimination, violence, and stigma. These stressors can be overt and direct, or subtle and indirect but both are theorized to negatively impact the recipient.
2. *Expectation of stigma*. This stressor comes from the experiences of discrimination and harassment and impacts the recipient's ability to feel safe being out and visible in public spaces. According to MST when a person experiences some level of external stress related to their minority sexual orientation they begin to feel less safe and comfortable being "out" and experience heightened levels of fear, anxiety and other symptoms of psychopathology (Meyer, 2003).
3. *Internalized heterosexism* was suggested by Meyer (2003) but will be labeled more broadly here to include gender diverse populations and labeled *internalized stressors*. Examples of internalize stressors relevant to this research are internalized heterosexism, homophobia and transphobia. Internalized heterosexism refers to the degree to which a person who does not identify as heterosexual upholds heterosexual values as the ideal or better than their personal sexual orientation. Internalized heterosexism can manifest in a variety of ways, and can exist without full awareness of the person holding the belief. Internalized homophobia might arise when a person goes beyond heterosexism to uphold the belief that homosexual people are valueless, subordinate or that there is something wrong with homosexuality. Similarly,

internalized transphobia might occur when a person identifies as gender diverse in some way, however holds negative feelings towards and about gender diverse people. Internalized transphobia and internalized homophobia are examples of internal stressors and according to MST are influenced strongly by external stressors like prejudice and discrimination.

4. *Identity concealment or identity management.* Sexual minorities are often viewed as an invisible minority in that people can hide their true sexual orientation if they choose to. Gender minorities potentially have the same choice to conceal their identity, however the consequences for gender minorities to conceal their identities may be more intense than those for sexual minorities. This is because identity concealment for gender minorities would involve wearing clothing and presenting on a daily basis that was incongruent with their true gender identity which would likely require more consistent effort than choosing not to disclose the gender of one's partners.

Velez, Moradi and Brewster (2013) discussed how sexual minorities have lower levels of identity integration due to both external and internal stressors including identity counterfeiting and/or avoidance, which they hypothesized, leads to lower job satisfaction and greater psychological distress. These authors found that the relationship between minority stress and psychological distress appears mostly through avoidance. This study did not include trans people and the authors suggested that as a future avenue of study. They also did not explore intersectionality, which is a common theme in gender diversity, as sexual minorities are often part of this group.

MST provides some rationale as to why gender diverse people are sometimes assigned a diagnosis of Gender Dysphoria, which includes “clinically significant distress or impairment in social, occupational, or other important areas of functioning” (APA, 2014, p. 453). The experience of distress about one’s identity and/or distress about one’s body can arguably be connected to the external and internal stressors discussed in the MST model. Although this is a promising way to conceptualize the psychopathology involved in some people’s experience of gender diversity, there is no way to measure causation of the relationship between being a minority and experiencing symptoms of psychopathology. So MST offers some support, but falls short of providing a convincing rationale for the psychopathology that minority people experience. Furthermore, validating the psychopathology of this population may be seen as further oppression rather than exploring the systemic forces (external stressors) that contribute to this population’s experience of distress.

Lastly, MST also fails to explain the phenomenon of gender diversity itself, and only addresses the psychopathology and distress experienced by this population. Despite MST being an important contribution to our understanding of what sexual and gender minorities live with in terms of stress, MST does not help us to understand gender identity and the factors that influence its development. Theories that discuss the social construction of gender including socialization theories, queer theory and transgender theory are discussed next followed by a discussion on transgender identity development models.

Theories on the social construction of gender

“The idea that gender is learned through socialization is ubiquitous in sociological literature on gender” (Carter, 2014, p. 242).

Much reading in sociological literature supports the notion that gender is a social construct that is learned rather than biologically determined. Gender social construction theories (Butler, 1990; Carter, 2014; Stockard, 1999; West & Zimmerman, 1987) argue that males and females learn about masculinity and femininity through social interactions particularly with family members in early life. Gender identity is formed at a young age, and typically is stable across the life span. Some of these models (Queer Theory and Doing Gender) discuss the performativity of gender, and argue that gender is something that is *done* rather than something that exists in and of itself. Gender socialization models will be discussed next, followed by a review of Queer Theory (Butler) and Doing Gender (West & Zimmerman, 1987).

Gender socialization theories

Gender socialization begins at birth, where parents and extended family members typically treat male and female infants differently (Carter, 2014). Language, clothing, toys, wallpaper, colours -- there are many examples of infant products that are gendered which shape a child's understanding of gender and gender roles. Male children are often discussed in ways to make them sound tough and brave, whereas female children languaged in ways to make them sound fragile and delicate. The way language is used has an influence on behaviour and begins to demarcate boundaries of acceptable and unacceptable behaviour. Boundaries then develop into what Carter (2014) refers to as

“identity standards – the references in which interactions, settings and contexts are used to compare the self to others” (p. 244).

Gender socialization is the process of identity development where people, most often children, learn the expectations connected to natal sex groups, and they subsequently learn to identify with a sex group, typically based on the alignment of their natal sex. Theories of gender socialization have come from many disciplines including biology, psychology, and sociology. Arguably, a child’s sense of gender identity comes long before their understanding of other major life concepts such as politics, nature, schooling or religion; making gender socialization a central aspect of childhood socialization (Stockard, 1999). Worldwide it is the practice in most if not all human groups to organize roles for people based on their natal sexes (Stockard, 1999).

Socialization depends on an interaction between biological and social factors, and infants come into the world pre-programmed with the ability and desire to interact with other humans (Stockard, 1999). As such, Stockard argued “it is logical to expect that biological factors are involved, at least to some extent, in gender socialization” (p. 216). Male and female bodies have differing exposure to hormones prenatally, at adolescence and in adulthood making their bodies develop differently, and as discussed in an earlier section, their brains develop and function differently. However “even with such biological influences, many, if not most, aspects of gendered behavior probably result from social influences” (p. 216). This argument is made due to the variance in gender roles across cultures. “The extent to which physiological factors influence differences between sex groups is an active and contentious issue and will probably not be resolved anytime soon” (p. 217).

The research involving social learning theory, as it relates to the development of gender identity is not strong (Stockard, 1999). Research exploring sex role behaviour modeling and reinforcement shows little support for the importance of this in the development of gender identity. Furthermore, the notion that caregivers might treat female and male children differently in terms of warmth, restrictiveness and discipline behaviours has not stood up in research. Lytton and Romney (1991) discovered in a meta-analysis that parents were likely to treat their differently sexed children similarly in these areas. One area in which caregivers reinforce gender roles is by encouraging and restricting the type of toys that children play with, which may or may not have a significant influence on the development of the child's gender identity (Fagot & Hagan, 1985).

Cognitive developmental theory has provided some significant and influential advances to this research area, namely that as children develop, their cognitive flexibility increases. Conceptions of what gender is, what appropriate gender behaviour looks like and gender roles alter and change as children's cognitive ability develops and becomes more complex (Stockard, 1999). Some research has noted limitations in cognitive developmental theory, specifically around the development of gender constancy (when a child develops a clear understanding that they are either a boy or a girl and this will not change) and gendered behaviour. Gender constancy is typically acquired by age 6 (Anderson, Collins & Schmitt, 1995; Kohlberg, 1966; Luecke-Aleska, Anderson, Collins & Schmitt, 1995, Stockard, 1999). This theory, shows limitations because although gender constancy appears at age 6, research has show that children much younger than this exhibit gendered behaviour such as preferring same-sex peers, a preference for

gender-specific toys, and show differences in aggression (Stockard, 1999) which has pushed researchers to try and understand the earlier life development of gender identity, this has been explored using gender schemas and cognitive learning theories.

Gender schemas are understood to be a way that individuals learn and organize information specifically related to gender and gender categories. Martin and Halvorson (1981, 1987) hypothesized that gender schema works simply for young children; that the child perceives a gendered object (toy, person, clothing) and decides if it belongs to the in group (the child's sex group) or the out group (the "other" sex group). It is thought that the ability to distinguish between males and females happens as early as one year of age (Fagot & Lienbach, 1993). Research has suggested that gender schemas are complex and multidimensional and involve things like cognition, stereotypes, affective components, evaluation, and as such are not yet fully understood (Fagot & Lienbach; Stockard, 1999). One interesting finding related to the development of gender schema, and the broader gender socialization theory is that children who have parents who display more traditional masculine and feminine attitudes are more likely to correctly apply gender labels (Fagot & Lienbach).

Peer group interactions form an important part of the discussion on gender socialization, as many different research has identified children choose same-sex peers to interact with, at as early as three years of age and increases in strength with age. This trend holds true even when children are not under pressure to make a choice (Stockard, 1999). It is argued that children are a reflection of their culture and that "cultural elements, such as norms, values, and the material elements such as toys and playthings, are strongly gender-typed. In addition, there are strong subcultures that are highly gender

segregated.” Stockard, 1999, pp. 220-221). Arguably, childhood is more gendered than adulthood, and that there are more firm differences between what is male and what is female, and “more extensive and apparent sanctions for violating these roles” (p. 221; see also Maccoby, 1991; Powlishta, 1995).

Psychoanalysis discusses the role of the maternal-child relationship as a site for early gender identity development. This theory argued that girls have an easier time developing their gender identity, because it is the same as their mother and it is more challenging for boys, because they have to abandon their femininity, which is considered a boys first identity due to the closeness (physical and emotional) of the relationship between infant and mother (Stockard, 1999). The masculine identity development begins with the concept that masculine is not feminine. Research in this area has indicated that “when fathers are more involved in early child rearing boys would be less likely to exhibit signs of ‘compulsive masculinity’” (p. 223).

The reader may have noticed that the above brief outline of some of the socialization theories on the development of gender identity are largely focused on a binary gender system and have a heterosexual bias in that they assume caregivers are mother and father, and that early life attachment is synonymous with close attachment to a biological mother. These theories do not make mention of gender diversity, gender non-conformity or leave any room for a discussion of transgender children and adults. Nonetheless, these theories offer a helpful perspective on the social reinforcement of gender-role stereotypes and provide evidence that gender identity begins to develop before one year of age and is reinforced by social relationships and cultural artifacts.

Doing gender

West and Zimmerman's (1987) paper discussing gender performance has been a significant contribution to the scholarly discussion on gender. They offer a theoretical stance on gender performance where they argue, "that a person's gender is not an aspect of what one is, but, more fundamentally, it is something that one does, and does recurrently, in interaction with others" (p. 140). West and Zimmerman indicate that in addition to the problems with the binary of homo/heterosexual the binary of girl/boy is also problematic, inaccurate and overly simplistic. "Doing gender involves a complex of socially guided perceptual, interactional, and micropolitical activities that cast particular pursuits as expressions of masculine and feminine 'natures'" (p. 126). They argue that although individuals are the ones that "do" their gender, their gender performance is carried out in the presence of other people who "are assumed to be oriented to its production" (p. 126). They see gender as an important feature of social interactions rather than belonging to the individual performer. To these authors gender serves an important social function acting as a "means of legitimating one of the most fundamental divisions of society" (West & Zimmerman, 1987, p. 126). The performance of gender is seen as "natural" when in fact "it is being produced as a socially organized achievement" (p. 129).

West and Zimmerman challenge the essentialist concepts of male and female by arguing that the doing of gender changes depending on the context, demonstrating that what is male or female, masculine or feminine can change depending on the location of the context, and who is doing the performance, and who is observing it. Furthermore, it normalizes behaviour that submits to the gender binary, because there are social norms

around gender, and it can be risky not to obey them. This can also be problematic, in terms of gender resistance, and the confrontation of gender inequality.

Queer theory

Judith Butler (1990, 2004) argued that gender is a social construction, and that we are constantly maintaining, and performing our gender (1990, 2004). In her writing she discusses the social construction of sex/gender and how a compulsory binary gender system is not an accurate representation of individual identity. This queer perspective helps to understand why people who are gender diverse struggle to feel societal acceptance because as Butler argued, gender/sex is a binary that we are required to perform based on how our body is sexed when we are born. Queer theory might query how a penis produces an interest in wearing tie and how a vagina produces an interest in high heels. Queer theory acts as a promising starting point in its rejection of gender and sexual binaries, however there are some limitations to this theory that will be explored.

Queer theory has been proposed in the past to explain and understand gender diverse identities (Butler, 1990, 1993, 2004; Shelly, 2008). The word queer evades definition (Shelly, 2008) because it disobeys the essentialism commonly believed to link natal sex, sexuality, gender and desire (Jagose, 1996). Queer theory rejects the use of binaries such as female/male gay/straight thus providing space for the intersectionality and fluidity of our many identities “because gender intersects with racial, class, ethnic, sexual and regional modalities of discursively constituted identities” (Butler, 1990, p. 4). Many people including gender and sexual minorities who wish not to be identified with the limited language of the gender binary choose to use the word queer to describe their sexuality, desire, and/or gender identity. Although formerly used pejoratively, the word

queer has now been reclaimed and is intended here as affirming of queer-identified people. Queer theory was developed as an extension of feminist theory to include intersectionality of identity beyond gender and to challenge essentialist binaries of sex, gender and sexuality. First (McClung, 1915) and second wave (Raymond, 1979) feminist theories have been criticized by their assumption of a white middle class cisgender female position which privileges this identity and silences others including transwomen (Berzoff, 2011). First and second wave feminist discourses assume an essential woman, which legitimizes the exclusion of people who do not fit into that category including people who are gender diverse. Raymond's (1979) second-wave radical feminist stance is arguably transphobic and transmisogynistic in her assertions that biological sex and gender are equivalent and as such trans women are not *real* women. This is an example of a trans-exclusive radical feminist stance (TERF) that is deeply entrenched in cissexist values and the gender binary of female and male and characterizes some of the inherent problems with second-wave feminist discourse.

Judith Butler explores how gendered bodies are prescribed to behave in culturally specific ways; when people move outside of this direction they are seen as deviant or subversive (1990). She talks about gender as a performance, and that gender does not exist on its own but happens when we perform our gender in the broader social world in which we exist. In essence, gender does not exist until it is compared to other genders.

Judith Butler challenges the dominant western discourse regarding the nature of sex, gender and sexuality (Shelly, 2008). She criticizes the binary of "natural" (heterosexual) and "unnatural" (homosexual) as a socio-political-historical construction that she argued has actually very little to do with human nature and has more to do with a

normative cultural expectation of gender and sexual identity (Butler, 1990). Butler challenges the essentialist notion of natal sex and argued that gender does not imply the basic self: "...whatever biological intractability sex appears to have, gender is culturally constructed: hence, gender is neither the causal result of sex nor as seemingly fixed as sex" (Butler, 1990, p. 8). West and Zimmerman echo this sentiment with the argument that "gender depictions are less a consequence of our 'essential sexual natures' than interactional portrayals of what we would like to convey about sexual natures, using conventionalized gestures" (1987, p. 130).

In queer theory, gender is described as an unarranged rehearsal on a social stage, and therefore one cannot author their gender because gender is continuously negotiated in a broader social context (Butler, 2004). "If gender is the cultural meanings that the sexed body assumes, then a gender cannot be said to follow from a sex in any one way" (p. 9). She argued that despite the fact that natal sex might appear to follow a strict binary in morphology that there is no reason to assume gender should follow suit. "When the constructed status of gender is theorized as radically independent of sex, gender itself becomes a free-floating artifice, with the consequence that man and masculine might just as easily signify a female body as a male one, and woman and feminine a male body as easily as a female one" (p. 9).

Regarding gender diversity, Butler (2004) sheds light on how capitalism is related to the diagnostic category of gender dysphoria (APA, 2013) and that the diagnosis is necessary for people who wish to pursue gender affirmative procedures. She asserted that gender diverse people must surrender to the diagnostic conversation so they can gain

power over their body even when they might feel that the diagnostic label takes away their autonomy.

Over-valuing the third space gender and eliminating the first and second spaces, which some gender diverse people strongly identify with has been a criticism of Butler's queer theory. Some trans people may "be more motivated to maintain the gender binary than to blur it" (Shelly, 2008, p. 20). Furthermore, some gender diverse people who ascribe to the essentialist notion of female and male might believe that they have always been one sex, and that their body has simply been mis-sexed. For these people the word queer may not apply or feel insulting (Shelly, 2008). Prosser (1998) suggests that using the label "transsexual" may fit for some gender diverse people who see their situation as a medical issue. For some, removal of the diagnosis from the DSM and ICD-10 could have problematic outcomes. Prosser argued that queer theory can be seen as insensitive to the everyday lives and bodies of transpeople. Despite the fact that queer theory makes conceptual space for diverse gender identities by criticizing the social construction of gender and gender performance, there are clearly still some issues with queer theory's ability to fully account for the variety of genders and the diversity within gendered discourse.

Transgender/genderqueer theory

Lastly, an emerging transgender theory (TGT; Shotwell & Sangrey, 2009; Nagoshi & Brzuzy, 2010) will be explored. This theory focuses on the limitations of feminist and queer theories and adds discussion about both internal and external gendered experiences. TGT acts as an extension of queer theory incorporating aspects of

intrapersonal identity that occur irrespective of social context. The authors argue that queer theory ignores the private experience of gender.

TGT has recently emerged as a theoretical approach that fills some of queer theory's gaps; namely focusing on the limitation of seeing gender as a purely social construction. Transgender theory works to be more inclusive of the variety of gender identities and sexed bodies and the different agendas that each person may have for how their body is seen and how their gender is enacted on a social stage. In short, TGT privileges both the internal and external perspectives of gender performance.

TGT critiques queer theory is its concentration on the artificiality of gender as potentially minimizing the need for some people to seek and receive gender-affirming body procedures including surgeries and/or hormones. For many people who identify as transsexual these procedures are fundamental to the experience of living in an affirmatively sexed body. Nagoshi and Brzuzy (2010) argue that queer theory does not give enough space for the support of transsexual identified people by over-focusing on the performance of gender on a social platform. The authors argue that transsexual people are actually oppressed by queer theory's assertion that gender does not actually belong to an individual and is simply a social construction.

Another aspect of queer theory that Nagoshi and Brzuzy (2010) criticize is that they interpret queer theory to be overly focused on the categories and binary of male/female. "Although queer theory may accept feminine males and masculine females, as well as a plurality of gender identities, it nevertheless builds on the assumption of the male versus female gender categories." (Nagoshi & Brzuzy, 2010, p. 435). Relatedly, TGT critiques feminist theory for having an essentialist perspective (something essential

about all women, biologically driven), which then excludes female identified people who were not necessarily born into female bodies. This is similar to queer theory's critique of first and second-wave feminist theories.

TGT proposes that recognizing the internal *and* external experiences of gender is critical to understanding the lived experiences of gender diverse people. TGT has been influenced by Roen's (2001) ideas that gender diversity must include more than just an either/or discourse that accepts the fluidity of gender but still retains the gender binary. Roen contends that gender diversity must also include a both/neither conceptualization of gender that exists outside the male/female binary. This both/neither concept allows gender diverse people to be seen as transgressing the gender binary and not necessarily as physically transitioning from one gender category to the other because there are more than two genders acknowledged. This is particularly relevant to people who identify as non-binary or who exist somewhere other than male or female. Monro (2000), in turn, argued for the need to understand the lived experiences of transgender people and the limits of gender fluidity that are imposed by the biology of the human body. She claims that even queer theories of gender fail to account for the sense of self within social structures and the impact that these structures have on the fluidity and plurality of gender expression. TGT fills a need for theory to incorporate both a self-embodiment and a self-construction of identity that can "dynamically interact with this embodiment in the context of social expectations and lived experiences" (p. 435). Conceptualizing gender as an entirely social construct (queer theory) is problematic according to TGT because it is seen as denying a person's sense of individuality or internal identity that continues to exist between the performances of gendered behaviours.

TGT and queer theory overlap in their acknowledgement that intersectionality is critical to acknowledge especially in gender/sexuality discourse. Intersections create oppression and opportunity:

Much of the philosophical and political understandings of non-heteronormative gender identity and sexuality are derived from queer theory ... one must always take into consideration multiple axes of oppression; to do otherwise presumes the whiteness of women, the maleness of people of colour and the heterosexuality of everyone (pp. 434 and 442).

In this way TGT can be seen as partly as an extension of queer theory, and partly its own separate theory.

TGT holds that embodiment is an essential component of the self. Shotwell and Sangrey (2009) suggest that embodiment emerges through self-construction which is a narrative process and that this independent aspect of self exists in relation to and interactions with the social environment. Nagoshi and Brzuzy (2010) propose a refinement of the Shotwell and Sangrey model, which involves three things. First, consistent with Shotwell and Sangrey they believe that the embodied aspect of identity generates bodily experiences, some of them decidedly unconscious and these are essential for informing one's identity. Second, also consistent with Shotwell and Sangrey, TGT proposes that there is a self-constructed aspect of identity that derives its distinctiveness from the narrative of lived experiences. The ability to self-construct one's identity is similar to queer theory's suggestion that the destabilization of socially constructed and imposed identities is possible. TGT theorists (Nagoshi & Brzuzy, 2010) choose to define the socially constructed aspect of identity as a third and distinct feature of their theory.

Consistent with Butler (1990), they believe that the social environment essentializes social identity by demanding that individuals conform to artificial and limited gender categories and that performances conforming to these expectations also act as essentializing powers. Nagoshi and Brzuzy seem to be proposing that both public identity and lived experience are inseparable entities and dependent on one another. TGT then is dedicated to the view that personal lived experience of gender is a critical aspect of transgender identity. This personal experience of gender is thought to include all other identities that intersect with gender. The narrative of lived experience may allow people to reject all categories, not simply a gender binary. Transgender theory advocates for practitioners to look for sources of empowerment in the dynamic interactions among embodied and constructed aspects of identity.

Although TGT attempts to transcend queer theory by privileging the internal lived experience of gender diverse people, the authors' conceptualization and arguments are weak and open to critique "because identification is always relational, gender 'crossing' – shifting one's social gender presentation, sometimes with medico-technical aid in the form of surgery and hormones—affects the gender formation and identity of people other than the trans or genderqueer person" (Shotwell & Sangrey, p. 56). A person's individual and private experience of gender (or any other aspect of identity) is nothing until it is compared to other people in social contexts. If we have no other gender to compare ours to, then our gender cannot exist as part of our identity because there is no way to define it outside of socio-cultural spheres. Our sense of what gender is wholly dependent on how we see other people performing their gender, so in essence even in the privacy of our own homes and our own closets; gender is still a social performance. Having a gender diverse

identity impacts socio-cultural knowledge of gender because “trans and genderqueer people come to bear a disproportionate weight of the theoretical, political, and personal issues involved in the gendered lives we all live” (Shotwell & Sangrey, 2009, p. 57).

Another critique of TGT is that the authors force the intersection of gender and sexuality, seeing queer theory’s forced separation of these two constructs as misguided. Although this mandatory intersection of gender and sexuality might be applicable to some gender diverse people, it is not necessarily applicable to all gender diverse people and as such excludes people who see their gender diverse identity as distinct from their sexual orientation.

TGT introduces some important concepts to the dialogue on gender diversity, namely the authors Nagoshi and Brzuzy (2010) remind us to acknowledge and seek the internal experience of a gender diverse identity. Although their theory does not offer a complete approach to conceptualize gender diversity, they have added important questions and arguments to the discourse on gender.

Transgender identity development theories

There has been some literature that discusses identity development in transgender and transsexual populations. These models have been heavily focused on the gender binary of male and female, and they are focused on the experiences of people who identify within the gender binary, and seek gender affirming medical procedures to make a transition from male to female or female to male. Although these models do not apply directly to the population of interest in this research project, they are indicative of the theoretical models currently available for gender diverse populations and are worthy of a brief mention here. Two models will be discussed.

Frank Lewins (1995) outlined a six-stage model to conceptualize the identity of male to female transsexuals. The stages that were identified in this model were: a) abiding anxiety, b) discovery, c) purging and delay, d) acceptance, e) surgical reassignment, and f) invisibility. This model is very clearly entrenched in the gender binary of male and female, and is focused on populations that seek gender-affirming medical procedures in order to be clearly perceived by others as their identified binaried gender. Although this model is likely applicable to other gender-variant populations, it is not applicable to the population in this research. It was included here to educate the reader about the academic discourse on gender identity.

Secondly, Arlene Lev (2004) created a six-stage model of transgender emergence. Her model is discussed as a developmental process, and as such one stage is required before proceeding to the next. The six stages are: a) awareness, b) seeking information/reaching out, c) disclosure to significant others, d) exploration: identity and self-labeling, e) exploration: transition issues/possible body modification, f) integration: acceptance and post-transition issues. This model is much more inclusive than the Lewins model. This model does not require transition, although transition and body modifications (surgery/hormones) are discussed. This model is a helpful way for people who work with gender diverse populations to understand the process of identifying in this way. A criticism of this model is that it focuses on “transition” and is as such related to the gender binary. Although Lev indicated that body modification is not requisite in the model, she is still focused on the transition or movement to a particular location, which limits the audience for which this model can be accurately applied.

Summary

What stands out as significant in this literature review is that at present the discussion on gender diversity seems very entrenched in the binary of male and female. The literature that is inclusive and supportive of trans people often assumes that the gender binary is still relevant and that trans people just identify on the 'opposite' side. I was interested in learning more about people who identify outside of this gender binary. The lack of literature that discusses gender outside of the gender binary is what provided a rationale for this research.

The purpose of this study was to hear people who identify as non-binary speak about their gender identity. My intention was to hear their stories, and listen for common themes across their stories. The research question: How do people with a non-binary gender identity narrate the story of their gender? This research question was explored using a collaborative narrative method (Arvay, 2003). This narrative method asks the research to be contemplative of the research process. Additionally, this method acknowledges power relations that exist in the dynamic between researcher and participant (referred to as co-researchers hereafter). There is collaboration in the generation and analysis of the data. This method provides space for the co-researchers to share their personal experiences of identifying as having a non-binary gender identity.

CHAPTER 3 METHOD

Co-authoring a story of genders

The purpose of this study was to explore the gender narratives of people who self-identify as having a non-binary gender identity; this includes people who identify as gender diverse, gender non-conforming, genderfluid, trans*, non-binary-trans, transgender, transsexual, androgynous, and/or genderqueer. This narrative inquiry involved unstructured interviews where co-researchers were asked to share the story of their gender.

There are few studies that explore gender diverse populations from within the field of counselling psychology. None of the research studies involving trans and gender diverse populations use a collaborative narrative approach where the participants collaborate in the process of storytelling and data collection. This method (Arvay, 2003) was chosen because of its ability to elevate the voices and stories of the population of study -- gender diverse people. Additionally, I hoped to give the co-researchers the opportunity to share what they wanted other people to hear as a way of empowering and celebrating the beauty and creativity of diverse genders. This was an effort to increase the dialogue of diversity from a lens of inclusion. Currently the dominant discourse about gender diversity involves pathologization in the form of a mental health diagnosis.

This chapter will begin with a discussion of the ontological and epistemological roots of the methodology for this research. The underlying theoretical philosophy of science will be discussed as it relates to the epistemology and ontology of the methodology. Lastly, the chosen method, an adapted version of the collaborative narrative method (Arvay, 2003), will be discussed.

Relativist ontology

I believe that ontology is a personal perspective about how each of us understands the nature of our own being and our realities. As such, I have not simply chosen an ontology that fits with my preferred method, but have identified a method that fits with my personal beliefs about the nature of being.

The word ontology, as it is used here, is understood to mean the philosophical understanding of the nature of reality and of being (Ponterotto, 2005). A relativist ontological understanding asserts that there are multiple constructed realities that exist simultaneously (Ponterotto). Within this framework it is understood that reality is constructed intersubjectively. What we call reality then is generated in the social world through experience and context. Relativist ontology assumes that reality is relative to the individual and that an objective reality does not exist.

Social constructionist epistemology

Epistemology is used here to represent a philosophy or understanding of knowledge. Epistemology helps us to explain how we understand things that we believe to be true (Ponterotto, 2005). A social constructionist epistemology asserts that knowledge is socially constructed (Burr, 2003; Gergen, 1985). Congruent with relativist ontology, there is space within a social constructionist epistemology for multiple and conflicting realities and/or knowledge. Within this paradigm, knowledge is understood to be a construction that begins in the mind of the individual rather than it being an external and singular object (Ponterotto, 2005).

Social constructionism evades a unified definition given that “there is no one feature, which could be said to identify a social constructionist position” (Burr, 2003, p.

3). Social constructionism encourages people to be suspicious of the assumptions about what they believe to be true in the world. For example, in her description of social constructionism Burr uses the constructs of sex and gender challenging the reader to question the categories of female and male as a pure representation of naturally occurring biological differences in humans. She goes on to assert that these “seemingly natural categories may be inevitably bound up with gender, the normative prescriptions of masculinity and femininity in a culture so that the whole categories of personhood ... all the things that it means to be a woman or a man have been built upon them” (p. 4). She argued that social constructionism would “equally well and just as absurdly divide people into tall and short, or those with ear lobes and those without” (p. 4). In this quote she demonstrates how social interaction is a powerful vehicle that both sustains and reinforces knowledge.

Another feature of social constructionism is referred to as anti-essentialism, which is similar to queer theory’s rejection of essentialism that was discussed in Chapter 2. Anti-essentialist beliefs suggest that there is no determined nature of people and the world (Burr, 2003). Essentialism traps people in labels, bodies and identities that can be pathologized and lead to oppression; social constructionism challenges us to question this practice.

Burr describes social constructionism as an act of questioning reality and argued that our knowledge is not a direct perception of reality. She asserted that the very notion of truth is problematic because there are multiple truths and therefore no such thing as a purely objective fact. Rather than knowledge being a thing that we do or do not have, Burr describes knowledge as a process of construction between people. “The world can

be socially constructed by the social practices of people but at the same time experienced by them as if the nature of their world is pre-given and fixed” (p. 14).

Research from within a social constructionist epistemology acknowledges the dynamic interaction between researcher and co-researchers is essential to understanding and recounting lived experiences (Ponterotto, 2005). This is consistent with Burr’s description of knowledge as a process of social interaction. Ponterotto also indicated that from a constructionist epistemology it is expected that a researcher may identify with the co-researchers in some way, and will be influenced by the research process and the stories of the participants. Within a constructionist epistemology, knowledge is seen as sometimes hidden, and emerges with reflection, dialogue and researcher-co-researcher interaction. In this way, the researcher and co-researchers co-construct the knowledge that is generated by the research.

Queer theory

From within a social constructionist epistemology Butler’s (1990, 1993, 2004) queer theory acts as the principal theoretical framework for this research. Although imperfect (see Chapter 2 for an overview and critique of Butler’s queer theory) this theory is well established and reinforces the importance of social construction of knowledge specifically around gender and sexuality. Butler argued that gender does not exist without the social context where it is performed which is well aligned with social constructionist’s claims that knowledge is a process of social construction. Queer theory asserts that our knowledge of gender is actually a process that we navigate everyday and is subject to change and evolution. Queer theory also asserts that gender is a performance that we engage in whether intentionally or not. Given the population of study for this

project, the socially constructed binary of male and female makes it challenging (and poses risks) to people who do not identify within that system.

Butler's queer theory acknowledges intersectionality of identity. Intersectionality is infinite because there are many possible identities and how they interact is highly personal and dependent upon so many variables of which gender is one. Queer theory creates space for understanding intersectionality rather than essentializing the experiences of certain people based on how their body behaves and what features their body does or does not have. Additionally, Butler's queer theory focuses on oppression, which is historically, and presently an important factor in gender diversity (Nanda, 2000; Shelly, 2008).

Research and counselling practice from a queer theoretical perspective involves acknowledgement that the process of research is not value-free and that power dynamics are involved. Counselling practitioners working from this paradigm are asked to self-reflect about their identity, privilege, values, biases and judgments (Enns, 2004). Therapists are asked to examine their power, acknowledge it, and work to reduce it (Enns). This request seems appropriate for researchers working from within a similar paradigm because there is an inherent power-dynamic within the researcher-co-researcher relationship. Acknowledging power can create a research relationship where the goal is to work towards collaboration rather than to figure out who is the definitive knower.

Situating the researcher within the research

At a few different points in this chapter I have discussed the importance of self-awareness, acknowledgement of power and reflexivity for people doing research from within relativist ontology, social constructionist epistemology and a queer theoretical

perspective. Being a reflexive researcher involves an awareness and acceptance that I have influenced the research and have been influenced by the research.

Throughout this research journey I continually reflected on how I was being impacted and how I was impacting the research. I consulted with other researchers and counselling professionals familiar with gender diversity to get support, talk about the findings and explore my reactions. Furthermore I kept a journal of the research process where I was able to reflect on my feelings and reactions. These reflexive practices gave me more self-awareness as I navigated the research journey, and I believe gave me the space to act with integrity. I demonstrated respect for the stories of the co-researchers by giving them the opportunity to write their own story. I felt like writing their stories for them felt like too far of a step from their experience for what I was comfortable with. I also allowed each co-researcher to tell me their story without an expectation that their story need to contain certain elements or look a certain way. I just allowed them to speak and share what they wanted to share.

Reflexivity in research also involves disclosure of the social position I hold in the position of primary researcher in this project. I am a white settler living in Vancouver on unceded Indigenous land belonging to the Coast Salish people, including the territories of the Musqueam, Squamish, and Tsleil-Waututh Nations. I identify as an androgynous queer. I am well educated and acknowledge the privilege that has contributed to my opportunity to pursue a PhD in counselling psychology at UBC. Within this privilege I recognize the inherent power of my position as both a doctoral student and researcher in this project. As I conducted this research I worked to lower my voice and opinions on the topic, and gave my co-researchers the opportunity to elevate their voices.

I approached this project with curiosity and openness as I listened and learned about others' experiences. Rather than assuming that my experiences with gender were in any way similar, I let my co-researchers narrate *their* stories in *their* way. In line with queer theory I did not assume that there is a universal or essential experience to having a non-binary gender identity but that there are an infinite number of truths and realities and experiences.

Introduction to narrative inquiry

Narrative research refers to qualitative research “that uses or analyses narrative materials” (Lieblich, Tuval-Mashiach & Zilber, 1998, p. 2). This includes data that is collected as a story or life story, which is the intention of this study. Narrative research can be used to learn about social groups, social phenomenon and can include interviews, autobiographies or conversations (Lieblich et al., 1998). Evidently, narrative research is broad and involves the common theme of narration or story. “Qualitative researchers are interested not in prediction and control but in understanding” (Pinnegar & Daynes, 2007, p. 4).

Narrative inquiry involves awareness of how dialogue can be a powerful generator of knowledge. The way that we express ourselves in the social world, through the stories we tell, through performance, art and other creative forms is a reflection of our self-construction and acts to generate knowledge. In the collaborative narrative method there is an emphasis on how the social world is an arena where “power relations are played out” (Arvay, 2003, p. 164). This requires consciousness of who is speaking, who is listening, and the power relations between them. Within this research project, this consciousness was demonstrated through ongoing reflexivity and co-construction of

narrative dialogue. Additionally, by inviting the co-researchers to write their own stories I ensured their voices were kept intact and they were represented accurately. Arvay (2003) indicated that reflexivity within narrative inquiry involves scrutiny for the researchers process, an examination of how power dynamics are addressed within the research relationship and in the sharing of the research story. For this research project reflexivity also involved ongoing collaboration with the co-researchers to privilege their stories. Using a narrative inquiry allowed the research to honor the voices of the co-researchers. This is particularly relevant in counselling psychology scholarship because gender diverse people are underrepresented making them appear invisible.

Although I was interested in hearing their stories and quieting my own story, I inherently influenced the research process by being in the room as the stories were generated. Within narrative inquiry, the people constructing these stories are not seen as static but dynamic with growth and learning being an inherent aspect of the research process. Both the researcher and those researched have the potential to learn and expand their awareness (Pinnegar & Daynes, 2007).

Research question

Using a collaborative narrative method (Arvay, 2003) the research question was: How do people with a non-binary gender identity narrate the story of their gender?

Ethical considerations

People who identify as gender diverse belong to an oppressed population (Shelly, 2008). I was sensitive to their marginalized position and worked diligently to offer respect, warmth and openness to receiving them as they presented themselves, without expectation or judgment. I listened to their stories. I communicated empathy. I used my

clinical counselling skills to assess the stability of each co-researcher. I was prepared with knowledge of local resources that are safe for queer and gender diverse people if any of the co-researchers requested additional support. Although nobody made this request, it was important that I had the information and made that known. Given that this is such a small population, most of the co-researchers were already connected to, or knew of the appropriate local resources.

As an insider of queer and gender diverse communities I strove to avoid over-identifying with the co-researchers. I maintained professionalism in this way through ongoing consultation with my supervisors, and keeping a journal tracking my reactions to and questions about the process.

Collaborative narrative method

The method used for this study was the collaborative narrative method developed by Arvay (2003). This is a reflexive method that involves inspection of the researcher's process of doing the research in addition to attending to power relations within the data analysis.

This method was chosen because it is, as it's name suggests, about collaboration in data generation and data analysis – the co-researchers produce and analyze their own narrative accounts. Through the use of this method I was able to hear rich stories of gender diversity. Given that so little is known about this population, a narrative and open approach was chosen deliberately to give the co-researchers a voice in how the data were analyzed and interpreted.

This research also holds the potential for social justice activism. “My aim with this method was to be collaborative, to attend to power relations within research and to

deal with issues around voice and representation” (Arvey, 2003, p. 163). The goals of social justice endeavors within academia are to improve access to resources and increase empowerment for people who belong to oppressed social groups (Baluch et al., 2004; Beer et al., 2012). My choice to pursue research that explores the experiences of people who identify as non-binary will hopefully increase the visibility and representation of gender diverse voices in counselling psychology scholarship and discourse. Burr (2003) indicated that within a social constructionist research paradigm qualitative methods are often the “research tools of choice” (p. 25).

The traditional collaborative narrative method involves seven steps to data collection and analysis. After conversing with my supervisor who is the author of the collaborative narrative method, we decided to make a change to the end stages of the data analysis and story writing. Rather than writing the stories on behalf of each co-researcher, I invited them to write their own story. I will discuss the amended procedures below.

Research procedures

Ethics

The University of British Columbia Behavioural Research Ethics Board (BREB) granted permission for this study (Certificate # H14-02991). After I obtained approval from BREB, I began recruiting based on the inclusion and exclusion criteria described in the next section.

Recruitment

I intended to recruit between 5-7 participants who identified as having a non-binary gender identity. The sample size reflects Riessman’s (1993) argument that a

narrative analysis suited to smaller sample sizes because the method is time consuming and detail oriented.

Lieblich, Ruval-Mashiach and Zilber (1998) argue “narrative research does not require replicability of results as a criterion for its evaluation ... narrative studies mean that they are highly time-consuming for the researcher” (p. 10). Braun and Clark (2013) recommend between 6-10 participants for small interview-based projects (cf. Fugard & Potts, 2015).

The inclusion criteria were that people self-identify as having a non-binary gender identity, were over 18 years of age, were able to converse in English and were able to meet in a face-to-face interview in Vancouver. Regardless of an individual’s gender presentation, if they self-identified as gender diverse and met the other criteria they were invited to participate in the research project if there was still space available and they remained interested. I responded to queries by email and invited interested parties to meet in a public place of their choice for the preliminary interview where we covered informed consent. The recruitment poster was presented on Facebook to seek people willing to participate. The poster was shared over 100 times on Facebook and I got responses from people across North America (New York, Texas, Toronto).

Stage one: Setting the stage – a reflexive preliminary interview

In the first stage I met with each potential co-investigator and had a reflexive preliminary interview. During this meeting, we determined if the person met the inclusion criteria for the study including identifying as non-binary and being able to speak and understand English. I explained the time commitment of participation in the study, which was expected to be approximately 10 hours for each co-researcher. In this

conversation I explained the basic outline of the study and the tasks that the co-researcher would be asked to complete as part of their participation. Upon meeting the inclusion criteria and agreeing to the time commitment I reviewed informed consent with the co-researcher and both of us signed the informed consent form and a copy was given to each co-researcher for their records. I had 8 people who agreed to participate.

This first meeting was also a time where the co-researcher was given the opportunity to contemplate their participation in this research project. I used this time to develop rapport with each co-researcher and to facilitate a conversation about gender and how it relates to this project. I helped the co-researcher to make an informed decision to participate (or not) by explaining the stages of the research process and by clarifying our roles. I stated my values and communicated awareness of the dynamics of the research relationship. Additionally I disclosed aspects of my identity to reduce my power and locate myself as an insider to queer communities rather than a researcher who might be seen as fetishizing gender diversity and appropriating narratives for the purpose of getting a doctoral degree. I also used this time to explain that by using a narrative research method was not attempting to “capture” an objective truth, but that through the process of telling and retelling stories the research story would be co-constructed. I informed each person that the goal was not to “recapture the lived moment of the telling in the research text” (Arvey, 2003, p. 165) but to co-create a gender narrative that the co-researcher felt comfortable sharing. I let each person know that they could withdraw from participating in the study at any time, for any reason. I was attentive to the power relations operating in the research process and made every attempt to encourage their agency.

Stage two: The performance

The second stage of the study involved unstructured interviews that entailed between 1-3 hours. In this narrative interview the co-researcher shared their story about their non-binary gender identity. “Tell me the story of your gender” was the opening question.

Prior to the interview each co-researcher was asked to think about their gender identity and was invited to bring in documents, diaries, photographs or anything else that they felt was relevant to their experience. Most people arrived with some notes, but no photographs or other artifacts were brought to the research interview. This unstructured interview was front-loaded with the co-researcher telling their story without my interruption, although I took notes and asked questions to clarify or to probe further.

Through this performance it was critical that I maintained an ongoing awareness of the complexity of human interaction and the variety of different ways that I communicate to each co-researcher beyond the use of my voice and words. I worked during these interviews to be attuned to each co-researcher, while maintaining “a dual consciousness” (Arvay, 2003, p. 166). This dual consciousness, being aware of the unfolding process and how I was influencing the process helped me to remain aware at a reflexive level that I was engaged in a complex interaction between researcher and co-researcher and my presence in the room had an impact on the process.

In total, 8 people participated in this performance interview with 828 minutes of recorded dialogue. The average time for each interview was 103.5 minutes or approximately 1 hour and 42 minutes.

Stage three: The transcription process

The third stage was the transcription process. I transcribed the interviews verbatim including indicating pauses, silences (“...”) and any other behavioural observations that I was able to capture while maintaining an awareness that “...the exact reproduction of the speech act is impossible” (Arvay, 2003, p. 167). The transcription process attempted to reproduce the interviews as accurately as possible knowing that the reproduction would never be exact (in tone, embodiment and context).

Attending to the co-researcher body language is one way that I attended to not only *what* was told in the story, but also *how* the story was told. My training as a psychotherapist allowed these observations to come naturally, and I worked to notice without probing the way that I would with a client in a therapy session. Silences, laughter and things that I said throughout the interview were all important aspects of the dialogue and contributed to the transcript. Although I kept field notes, I did not include them in the transcript, so that the co-authors had *their* story to reflect on, and were not overly influenced by my own personal process. These field notes contributed to my personal researcher journal, rather than part of the transcript.

Throughout the transcription process I maintained awareness that what I chose to include and exclude was a representation of my own biases, assumptions and frames of reference (Arvay, 2003). I worked diligently to inspect my practices of transcription and sought consultation with my supervisors and the co-researchers in some instances to help me with any areas that felt unclear or ambiguous.

Stage four: Collaborative interpretative readings of the transcript

The fourth stage involved collaborative interpretive readings of the transcript. I shared the interview transcript with each respective co-researcher. The transcript was presented to each co-researcher on a sheet of paper with four columns, one column for each thematic reading. I explained to each co-researcher what each reading involved. I invited them to do the four readings, and then to write their own narrative in whatever format they chose.

The four readings were as follows:

Reading for content

The first meaning unit area was designed for them to clarify the content of the narrative transcript. They were asked to consider the following questions: Is this the story you meant to tell in the transcript? Is there anything missing? Is there any misunderstanding? Do you want to add or delete anything? They were invited to make any changes that they felt were necessary. None of the co-researchers reported making any changes.

Reading for the self of the narrator

The second reading focused on the position of the narrator in the transcript. When reading in this step co-researchers were asked to use third-person language to read for the story of the narrator as an observer of their own transcript. They were asked: Who is the narrator of this text? How is the narrator positioned in this text? What does their position say about their-self? What type of voice is being used for what purpose? What do the metaphors tell you about the narrator's voice or positioning?

The goal of this reading was to understand how the narrator constructed the self-narrative. The co-researcher shifts out of the role of participant, and into the role of an “interpreter of the research text” (Arvay, 2003, p. 169).

Reading for the research question

The third reading involved extrapolating how the narrator answers the research question. They were asked to answer questions like: How does the author answer the research question? How does the author explain their gender story? What do they say, and what is unspoken but implied? What meaning do you make of the story? How do they answer the research question?

Reading for relations of power and culture

The last reading focused on power and culture. The co-researchers were asked to read for themes of power and oppression and again to write in the third person. They were asked to consider questions such as: Where has the narrator lost voice? What oppressive experiences do they describe? How do they describe their visibility or invisibility? What examples of social injustice are represented? How have cultural or social practices or performances impacted their story of gender?

This reading was to focus on the broader social and cultural context of a gendered narrative. It offered an opportunity for co-researchers to critique gender politics, culture, and the power relations involved in being a gender minority. These power dynamics are understood to contribute to the self as a narrator and the construction of their story.

Interpreting the self of the researcher in the transcript

As the primary researcher, it was my responsibility to go through the transcripts separate from the co-researchers and do my own readings for each of the listed areas

above. These interpretive readings were conducted in order for me to share my own reactions to the stories and to investigate my ‘self’ as a researcher. Given that this research is conceptualized as a co-construction it was essential that I shared my own reactions as part of the story construction. My story will be shared in Chapter 4; however the writing of this dissertation is a much broader conceptualization beyond my own story.

Stage five: Writing stories

Typically in the collaborative narrative method, stage five involves an interpretive interview where the researcher and co-researchers, after completing the interpretive readings, sit together and collaborate on the data analysis. This step is typically referred to as the interpretive interview – a collaborative interpretation.

After consulting with my supervisor Dr. Buchanan, and expressing my discomfort writing these deeply personal stories on behalf of my co-researcher, Dr. Buchanan and I decided to invite the co-researchers to write their own stories. If a co-researcher chose not to write their story, I told them that I would write a narrative in the first person based on their transcript and the interpretive readings that I completed on my own if they were comfortable with me writing for them.

At this point in the research journey, two co-researchers were unable to be reached after several attempts via email. Five of the remaining six co-researchers agreed to write their story on their own, in their own words. The co-researchers were invited to share their story in whatever style felt right for them. One co-researcher requested that Mair write a story for them, which was written in the first person. This co-researcher approved their story prior to its placement in Chapter 4 of this text.

Lastly, the researcher also wrote a text, in the form of a narrative thematic analysis, drawing on the major themes that were interpreted across the eight narratives. See Chapter 4 for a presentation of this analysis.

Many of the issues that arose in the narratives are left unresolved and open for the reader to make sense of. Additionally, as expected, there are points of ambiguity, and points of contradiction. This reflects “real life” where there exists a process but where that knowledge is infinitely incomplete.

Stage six: Across narrative thematic analysis

Using the completed transcripts, Riessman’s (2004) narrative thematic analysis style was used. The data were coded manually line by line into meaning units, printed on coloured paper (each co-researcher was assigned a specific colour) and manually cut into individual codes. Once the codes were printed and cut they were then categorized. The categories were created by clustering together codes that were related to a similar topic, for example “coming out as trans,” “going on hormones” or “sexuality and desire.” A total of 35 categories were created, grouping codes of similar topics together. From these categories 7 main themes were created. To avoid redundancy, please see Chapter 4 for a discussion of the created themes.

Credibility and trustworthiness

This section will outline the various ways that credibility and trustworthiness were addressed in this research project. Due to the nature of qualitative research, traditional quantitative methods for determining trustworthiness including validity are not relevant in this context. For this research, reflexivity, analysis of power, representation

of voice, member review and expert peer review were used to determine credibility and trustworthiness.

Reflexivity

Throughout this project I engaged in an ongoing process of self-reflection, as indicated in the collaborative narrative method (Arvay, 2003). My process of self-reflection, or reflexivity, as it is referred to in the literature, involved ongoing journaling both about my process as a researcher, but also about my life in general. This allowed me to be aware of where I was at, both as a researcher, but also as Mair, in Mair's life, as I went into each interview. I considered the quality of my emotional energy, and worked to maintain a compassionate, calm and consistent demeanor in each interview.

Additionally, I consulted with peers, professionals and my supervisors throughout the research process to get clarity, feedback and support.

Expert peer review

Part of my process of peer review was to speak with relevant people in the professional and trans community to reduce my blind spots, and get feedback on the creation of the seven themes from the categories. I spent 2 hours with each of the following people for this support: an academic with over 10 years of qualitative research experience, a registered clinical counsellor with personal and professional experience working with trans and gender diverse people, and an artist from the trans community who is familiar with trans issues.

My conversation with the qualitative research expert involved discussing my process of interpreting and clustering the data. I was encouraged to discuss *how* I generated the categories and *how* my own biases were impacting the process. This

person reminded me to “listen to the data” rather than looking for something that I wanted to find.

My conversation with a registered clinical counsellor familiar with trans issues was to discuss my rationale for developing the categories into themes. This person invited me to challenge the language I was using, and similar to the first peer reviewer, reminded me to reflect the data instead of my opinion. I learned in this conversation that data could be analyzed in different ways depending on the person doing the analysis. Although I worked to stay close to the data I was still an instrument in this process of analysis.

My last peer reviewer with a trans artist familiar with gender issues helped me to label and organize the categories into themes. For example, I arrived at this conversation with a theme called “violence,” and then changed the name of the theme to “threats to welfare” to better reflect the experiences discussed in the narrative transcripts.

These conversations helped me to re-evaluate my process of theme generation, and increased my confidence that I was hearing the content of the co-researchers stories. All three of these individuals offered their support for my developed themes, and challenged me to listen to the data rather than my own experience. This process of peer review was undoubtedly vital to the integrity of this project.

Member check

I checked in with each member to hear their feedback on the themes that I identified in the data. I wanted to see if the themes resonated, felt comprehensive and if they felt could offer some pragmatic value to dialogue on trans populations. I clarified in

this communiqué that these were not the themes from any *individual* story, but were from *across* all of the stories.

The responses I received were supportive and the co-researchers indicated the themes did resonate and were comprehensive. The co-researchers thanked me for including them in the member check and most of the responses were supportive and affirming of the findings. Responses included comments like “spot on” and “definitely resonates.” One co-researcher responded by saying:

"I feel like there's so much more in the story of (my) gender that is actually about other aspects of self that are queered or othered or don't quite fit that interconnect with the 'othering' of gender (because gender is insidious/imbued in almost everything)."

This co-researcher suggested that their gender identity stretches far beyond what is possible to be captured in the seven themes. This is an important point to note, that each person's experience of gender cannot be entirely explained by the findings of this research project, but that the findings represent *shared experiences* across the stories.

Analysis of power

I am a white, middle-class, well-educated researcher and psychotherapist, which gives me great privilege particularly as the person conducting this research project in relationship to my co-researchers. I acknowledged my power; I identified myself as a queer, androgynous trans person, and I invited feedback, questions and discussion from the people involved in this project. Additionally, I used a collaborative method, and I invited the co-researchers to write their own story, in their own voice, with the intent of elevating their voice, and lowering mine. Despite the above recognitions, I was aware

that throughout this process I was the person in a position of power. I was the one holding the data, doing the writing, and getting the dissertation. I worked to reduce my power, but I remain aware that this did not remove it.

Concluding remarks

This method was expected to be challenging and intensive, and it was. It was incredibly time consuming and poignantly personal. I was asked to explore my own personal experiences that relate to research in this area and I am changed as a result. I believe that the appearance of these voices in academic scholarship and discourse is long overdue and I hope that this project helps the academic community to increase in sensitivity and openness when facing issues of diversity, with gender, or the many other aspects of identity.

CHAPTER 4 DATA ANALYSIS

Introduction

This research project took place on unceded Aboriginal land belonging to the Musqueam, Squamish, Tsleil-Waututh, and Sto:lo Nations. This area is now referred to as the Lower Mainland of Vancouver, BC.

This chapter will summarize the data that was collected during this research study. I will begin by providing information on the group of co-researchers, then providing the reader with 6 co-researcher's narratives covering their perspective of their gender. I will then share my story as the primary researcher in this project, and discuss the main themes that I heard as I listened to the stories, transcribed them, coded, and then categorized the data. Seven main themes will be discussed.

The co-researchers

The co-researchers were eight individuals each who self-identified as having a non-binary gender identity. Each person spoke and understood English. Three of the co-researchers disclosed that they were assigned male at their birth and five of the co-researchers disclosed that they were assigned female at their birth.

Five of the eight co-researchers agreed to write their own story based on their readings of their transcript. Each co-researcher was given the freedom to write in whatever way they felt most comfortable and no firm guidelines were given. Two co-researchers were unable to be reached after several email attempts. Their transcripts were used in the coding, categorizing and development of themes, however they do not have a written narrative that appears in this section. They were also not able to consent to quotes from their transcript being used in this manuscript so their voices are not explicitly

present in this section. One co-researcher requested that Mair write their story based on their transcript. Their story appears in this section, with their approval, in the first person.

Maya's story

it was just ...
absolutely clear from the time I was really young that
there were core aspects of masculinity that... that didn't work for me

It's a strange experience to read this transcript, and to recall how uneasy I felt in some ways with the interview. Not that I felt uneasy with Mair, who was a sympathetic listener, and one who knows their way around, too. We so often have so much explaining to do to others, and so much of what we have to explain just isn't really explainable. And this wasn't like that. Rather, I think my narrative, at least, is lodged in a tangled discourse of dismay that I'll probably never really unravel. My dad always wanted to play baseball with me but I just wanted to hang out with my mother.

it was literally that school would be over and I would be sitting in the kitchen
I was an only child
I would sit at the kitchen table doing my homework or whatever and my dad would
come home .. let's go out in the yard and play catch
and I would be thinking - oh god no -

I've been surprised lately to find out how much of my view of gender-experience has to do with my father. I was never really close to him, and I think it must have pained him that I never really trusted him, either. And, over and over, that deal got offered, to play fucking catch, and I turned it down. In this context, in making sense of my experience of gender, I'm really hung up on Julia Kristeva's notion of abjection.

When I am beset by abjection, the twisted braid of affects and thoughts I call by such a name does not have, properly speaking, a definable object. The abject is not an object facing me, which I name or imagine... What is abject is not my correlative, which, providing me with someone or something else as support, would allow me to be more or less detached and autonomous. The abject has only one quality of the object—that of being opposed to I. (1982, p. 1)

And that's the price I paid, for refusing my father, for refusing the Oedipal *deal*, to trade my mother for the phallus. I realize that's a little inflammatory, and that the dominant discourse in the MTF world is, or at least has been, that we have never been men. Having never been men, we have never – the story goes – had access to masculine privilege. We are, in our souls and bodies politic, women, and we always have been.

Thankfully that's a view that has begun to attract criticism. And situating this puzzle in a political economy of gender and the commodification of gendered cultural exchange, as Gayle Rubin does, offers some way out of the oppressive Freudian sexism of the whole scheme. But, when it comes to my own story, there's no way I can avoid this. The phallus, whether as a token of power-exchange or the physiological medium of sexual intimacy, fucked me up, endlessly. And well, maybe, I never was a man.

it was one of those suburban american things
my dad would come home from the plant and... start drinking but you know in a genteel
way
he would have a highball and then maybe he would have another one
and then dinner would be on the table and then he might be on his third
but it was all very genteel and [at some point] he started hitting me...
we would sit at the table and it would be really tense and we would have the TV news
on ... and there would be something on the news and I would make some remark and

some little conflict would flare up and he would reach across the table and knock me out of my chair

There's violence throughout my story. My father's disapproval was more than tacit, especially after he caught me putting on my stepmother's clothes. But there were so many reasons to knock your teenage son – as I then was – out of his chair: the Vietnam war, come to the dinner table in the evening news; a bad day at work; an unhappy remarriage. "Abuse" is too easy; my father's violence was but one strand in the whole fabric of closeted violence. I didn't hit people, but there was, in the instrumental force needed to stay in the closet, in the endless hours of compulsive masturbation, in the brutality I had to employ to hivy myself away from what I needed to love, a half-century of a kind of prolonged quasi-suicide. Julia Kristeva again:

The corpse, seen without God and outside of science, is the utmost of abjection. It is death infecting life. *Abject*. It is something rejected from which one does not part, from which one does not protect oneself as from an object. Imaginary uncanniness and real threat, it beckons to us and ends up engulfing us. (1982, p. 4)

And that's an engulfment I know I will never really escape. God, this sounds dismal, but again, I don't know any way around it. I wish I could see transition – or whatever it is I'm doing with gender – as truly liberating. But I don't think I'll ever lose that feeling of having seen too much, of having looked over an edge that one should never find oneself pushed to.

I write this, and there's that continual murmur of the shaming voice. That this is bombast, and inaccurate bombast at that. That I really don't know what I'm talking about, that I'm not really trans, or trans enough anyway, that my experience is too different from that of others, that I should just shut up.

sometimes I am critical of myself and that I waited until it was cool

you know I think people who... to do that, people who had similar situations to mine ..
they weren't willing to ... just suppress everything and suppress themselves and
suppress their way of being in the world
and sex work was how you got by... [but] you know coming out for me was like...
going to school and going to my honours seminar and saying I am transitioning
and I am [new name!] and I would like to be referred to using female pronouns

So I was uneasy, in the interview, seeing myself as some kind of impostor. There are times
when I think identifying as non-binary is yet another abjection, another refusal to be named
that leaves one adrift, deprived of the knowledge not only of what one is, but of what one is
not. This unease runs through my interview, at least in my reading of it.

I don't know if I want to stretch this whole abjection thing as far as passing, and how gender
variance invites us to shed our old skins. By not passing – no; by refusing to pass – there are
times when it feels like I'm walking around in one of those corpses Kristeva is talking about.

when I first came out, I got a lot of pressure to wear a wig. Some people were kind of
upset with me. I was running the support group then... I tried it briefly, I really didn't like
it

the other thing too ...

I think if I was young, and I had the right body shape etc etc etc
that I could pass ..

I think it is entirely possible that I would go

YES... because I know trans women who pass effortlessly
they don't have to wear makeup or do anything

Wow; now that is stupid. Does anybody pass “effortlessly”? Probably not, but there's another
side to it as well. I'm not sure I've ever heard another gender-variant person say this, but it's
not like the trials of passing are unfamiliar to me. Because I tried it for a very long time.

I hid who I was for 60 years
and frankly I don't want to be sitting on the bus and be thinking
what do people think about me
I don't want to do that
I don't want to be judged in that way

I have a son who's in his late 20s. We used to be quite close. I was the kind of dad who could just show up, crash on the sofa, and let life flow around me. But it's not like that anymore: our tacit agreement now is pretty much don't-ask-don't-tell. Ranting to his mother about me, he bitterly wondered why anyone would voluntarily make of themselves such an outcast(e). I wish he'd ask me that question, because I think it's a good one. I think it probably captures the reason why it's important to me to identify as non-binary.

there is some real value for me in not passing
saying no no no ...
I'm surprised among MTF's that there isn't more of a ..
you know, I don't pass and fuck you

The "fuck you" part of it means a lot to me. I see the non-binary thing as a response to what often looks like most of a lifetime lived in an oppressive system. And not necessarily an unhappy response, either.

for me there is a real quality of playfulness too...
you know that being able to play a little bit
in this... area of experience that for so long
was so oppressive ... and... the fluidity of
being able to move around in that space

When I read the interview transcript now, I see that I hedged that statement with a whole bunch of disclaimers, mainly of the I'm-so-old-it-doesn't-matter variety. But I think that's bullshit, basically. I don't really have any conclusions, or any particular claim to wisdom, and the disclaimers I mobilize are flimsy old excuses. And besides that, transition-or-whatever-it-is has been an epistemological earthquake. I don't really know what's what anymore, especially with the estrogen. Just talking about it leaves me babbling.

I love estrogen

I love it, I absolutely love it...

I just find estrogen to be unbelievably disruptive...

things are continually unfolding, continually opening up

So I don't really know what Mair is doing with all this, except getting their PhD which I believe will be a very good thing for those of us who got to speak here. I somehow wish my narrative were more coherent, and that I could draw from my experience a more authentic, stable, and grounded identity. But it hasn't really worked like that, and I think that, if anything, transition-or-whatever-it-is has unmoored me. And that's why I find the non-binary identity so compelling. I was really blown away by *Testo Junkie* (which I admittedly read after the interview with Mair). I like Beatrice Preciado's lascivious description of the disruptive power of T, and her blunt recognition that gender essentialism is just plain over:

Gender in the twenty-first century functions as an abstract mechanism for technical subjectification; it is spliced, cut, moved, cited, imitated, swallowed, injected, transplanted, digitized, copied, conceived of as design, bought, sold, modified, mortgaged, transferred, downloaded, enforced, translated, falsified, fabricated, swapped, dosed, administered, extracted, contracted, concealed, negated, renounced, betrayed . . . It transmutes. (2013, p. 129)

I don't know if my son would like my answer to his question (which I don't really think has an answer). Because the non-binaryness is precisely about embracing outcaste-hood, and although I've not had GRS and probably won't, being what Susan Stryker (2006) sees as a technologically monstrous challenge to the status quo. That's the "fuck you" part, I think. On a good day, I like to be able to look over that edge that so terrified and controlled me for so long. On a bad day, it sucks, being a freak. But I did try normal for a long time, and it never really worked out.

Dally's story

I am who I am

~

what influences my gender identity
there's a couple of really big intersectionalities for me
one of them is class
one of them is growing up rural

growing up rural working class poor
you can't ostracize anyone
your first responders are your immediate neighbours
cohesiveness happens where you just accept people for who and how they are
be super eccentric
be a little bit wacky
people just let you be

~

masculine was a safe space
a strong space
masculine became an empowered space
fixing a car
chopping firewood
doing a masculine bonding thing
where I generated a lot less abuse or negativity
one of the few places where he didn't belittle me
or verbally abuse me

~

masculine qualities that are valued in a rural working class space

is the masculine energy or the masculinity that I want to encompass
in my gender expressions as masculine
I need to be useful and competent
y'know build shit out of salvage and fix the shit
as a masculine-identifying person
I want to feel competent and have a skillset
it is also something that society recognizes as a more valid gender expression

if you can provide or if you are competent or clever or you can fix some shit
then you get social currency

~

social currency looks like something you can spend
or buy
or invest
you can stockpile
it has more value in one situation than in another

~

there are lots of things that feed into identity
ethnicity
economic standing
regional location
education
who you are in proximity to
who you have relationships with
what you do for work
how you contribute to society
how consumable/sexualizable your appearance is
so many nuanced things

about being human
that feed into our identity

~

community is about visibility and voice
seeing other expressions
other genders and sexualities
in proximity to your own
informing your own in a positive way

right now there's a lot of asymmetrical haircuts
with short undercuts
short hair or shaved part
facial piercings
within my social economic sphere
I don't know what it would look like in different spheres

you start accumulating a score
if you have so many markers
they're visible on purpose
to alert other people around you
displayed/preformed/presented

~

it is not the moment of arriving
it is all the moments where you miss your mark

I don't get to be that thing because it is not being validated by society

fake it until you make it

be more confident
be more brash
do those things
and really reinvent yourself

I remember wearing a lot of hockey jerseys
and dressing more like my male counterparts
having lots of female-identified friends that were really affectionate with me
and not dating boys
and having friends be like “are you gay”
and I was like “uh, nope just not into anybody right now”
because it is a small homophobic town

having the cover of having really long hair
I had exceptionally long hair when I was in high school and junior high
it gave me space to be a girl when I needed to

~

I have had top surgery but I am not on testosterone
I can still go into female washrooms

you need a trespassers cloak
where you can navigate the spaces that you're not necessarily supposed to get into

I will ...
take off a hood
or take off a hat
and I will on purpose try to be feminine
so it is safe for me

so that is still part of the cover
where I still have just enough femininity that I can occupy that space safely

when I am washing my hands
the other women in that space
will almost make eye contact
but not want to make eye contact
and you can see they're trying to assess me
to assess their own safety
they're doing this massive mental calculation
to figure out who is wrong

often feels like I am trespassing
like I am an imposter and I don't really belong in that space
but it is the safest space to be in
and often the most clean space to be in
men's washrooms fucking stink

I use the single stalls or the differently abled bathrooms
(but they rarely exist)
then I can go pee
without thinking about how to trespass in that space

or on a bus
if someone is trying to get past you
if they think you are female they will push you out of the way
but if they think you're male they're not going to push you out of the way
they're gonna gift you with male privilege

~

we are segregated in so many ways
boys and girls
boys line up over here
girls toys
boys clothes
the way our society is setup
this really rigid structure of male and female
we need to follow suit

I started transitioning from F to M
female to male transgender
when I was in my early 20's

there was a big push almost the same amount of pressure
naysay
eyebrow raise
that people still get as identifying as bisexual
you have to choose one or the other
you couldn't just kinda be a masculine person
who was really ok with having tits
having some feminine qualities
people really needed you to pick a camp
be one or the other

the number of times where strangers have read me one way
and then figured out that I am not biologically male
the number of times I have heard someone say

“you tricked me”

is like ... immeasurable

people feel like they have been hoodwinked

by the fact that you don't fit in one or the other

I'm not tricking anybody

they expect you to be one or the other

and when you're not

they feel foolish

they get upset

for some it has led to acts of violence

because someone feels threatened by something they don't know or understand

I devalue the binary

even though society values it so much

people actually exist more freely and more fully

when they aren't forced into one or the other

we start filtering them into these categories when they're still zygotes

what is it like to be placeless

I don't feel like I belong in this space

I don't feel like I belong in that space either

and what is this space inbetween

well this space is me

~

I opted to personally finance my top surgery

I don't like being the curiosity of the state who decides

who

how
when
and by whom
my body can be altered

lots of folks are on a waitlist for years to get an appointment with a surgeon
which is not actually the surgery
there is no flexibility
you can never find out where you are on the waitlist
doesn't take into account how stressful and how difficult it is to wait that long
it feels like it is whimsical whether it happens or doesn't happen
it is dishearteningly convoluted to have no agency

and it really comes down to gender
because if I wanted implants
I wouldn't need to see a psychiatrist
I can just walk in and be like
"here's my money, when can we perform the surgery?"
"ooooh, I'd really like to have DDD"

~

surgery has definitely changed how I physically am in my body
I'm not binding everyday
binding for me was wearing a full compression shirt
a super elasticized tank top
cover up but also compress
I had one that came down like over my hips and all the way up
wearing a binder all day is

exceptionally fucking hot

itchy

restricts how deeply you can breathe

changes how much room your organs have

affects your digestion

affects your circulation

it is tight underneath your armpits where your lymphoid system is

where big arteries are

people who have been binding for a long time

(I was binding for 17 years)

get lots of shoulder pain and circulation things like pinched nerves

lots of folks have trouble with their ribs going out

or the fascia in their upper back seizing because it is being pressed onto the bones and the

muscle all the time

not having to bind

not having to be in pain everyday

being able to wake up and put on a shirt

walk out the front door

and not worry about how long have I been in this thing for

where are the safe spaces I can take this off

because you can't wear them for very long

because it does lots of damage

you've got a time limit

so you have to be aware of when you put it on and how long you have it on for

~

I've never really liked lads sexually until I started identifying more masculine

and then I was like

“oh, that’s good and gay, I can get on board with that”

I’ve always been attracted to female bodies and female energy
I’ve never liked the words lesbian or even gay so much
because they feel older
my experience with the elder queer folk
second wave feminist
not into penetrative sex
there’s a lot of rules and morality that I am not on board with
it feels really oppressive
doesn’t encompass my complexity
who I like
what turns me on
what is exciting for me
what I want to do with another person
queer feels like a much broader term to describe
anything that is not heteronormative

the girly boys
the faggots
the dykes
the trannies
the tea girls
the bisexuals
the fairies
queer is about
personhood
who you desire

who you present as

everything that I am not would be heteronormative

get a girlfriend

get a boyfriend

get married have kids

get a house get a car get a mortgage

all the things that society marks as success

~

right now androgynous is the uber sexy thing

a more neutral space

it is almost the complete absence of secondary sex characteristics

it is like an adult body without secondary sex characteristics

represented in media and in fashion

it is a really powerful visual phenomenon

it's been happening for the past 4 or 5 years

and I imagine it will continue to happen for some time

~

I use they and he pronouns

my given name is feminine sounding

it is very easy for that to snowball into being called she all the time

I think if you give people a chance to be an ally

giving people concrete ways that they can support

make it easier for people to get on board with pronouns

like

“hey I’m going by this name, and this is why ...”

“these are my proper pronouns that I would like people to use when they introduce me or when they interact with me”

it validates my experience

it is empowering for everyone

you don’t just exclude them based on your own preemptive judgment

around what they are capable of

or what they can be

~

visibility and inclusion

connects to your personhood

connects to your life

the visibility piece is just around

gender presentation and identity

how people see you

Vancouver is a physical space

last year there was a big inclusion policy in parks

efforts to make ungendered bathrooms

that political agenda speaks to the culture that exists here

space is also emotional and intellectual;

how safe you are

how much of your personality and being you can bring

inclusion is being safe and belonging

you can be queer all you want in a locked room

but that doesn’t get validated

do you have a gender if you're on an island by yourself
how much is your gender informed by the people around you

~

I am who I am

HQ's story

the story of a gender.

In the end, I feel really exhausted by that quest: the story of my gender. These days I have way less of a clue about what my gender identity is. I used to feel much more amped up about it – I didn't seem to belong in either gender camp and was trying to make sense of why I was being treated so harshly.

My world was fixated, for great reasons of survival, on this gender plane; it was my leash of belonging.

Why don't people get it. I was hurt, and hurt came out as anger. Gender was a source of activism: trying to widen the space of belonging for people who weren't perceived by others to fit, or didn't feel themselves to fit the binary story of gender. It felt like most people thought gender had just one story rather than many. Gender was political because of the violence that was happening when adherence to the 'codes of gender' was failing.

I was interested in people not losing their lives and not feeling like their spirits were broken because of not adhering to a binary story.

Gender is such a powerful story, I get it.

It makes sense people want to adhere and belong to it; when you don't, shit can get dangerous, and the ledge of belonging on this earth gets very thin.

At points I wish I could better adhere, because feeling like I don't know how to live in this world and feel okay is a major waste of time. I think I resent that. I resent the danger.

I wouldn't care about gender or this research study if it weren't for the violence. The violence, and in its absence, the possibilities of freedom. That's my pull.

Freedom (from violence).

I still don't understand how something so arbitrary,
a myth,
like the binary-gender-code,
can cause so many problems: trauma, poverty, homelessness, unemployment, disconnection,
dis-belonging, disgust, all versions of interpersonal violence, and on and on.

For me, caring about non-binary gender is&was about staying alive and whole, but sometimes
gender is about academic pursuit, which is great, but let's not ever forget that gender can
never be just theoretical.

We can do better to welcome and belong and reconnect each other
across the galaxy of gender experiences.
I am always hopeful that academic theory can deeply inform
how we can show up for each other.

For myself, I feel a bit stalled on the outward politics of gender and more like 'how am I going
to carry this assembly of this thing I'm calling 'me' out to the world in a good way, a useful
way, without feeling aggression or harshness?' I'm tired of being angry.

I'm way more interested in being tender and gentle than creating more anxiety.

I don't want to be in a special non-binary gender club.

I want to do what I love in life free from violence: growing carrots and being a useful therapist.

I want this for everyone,

binary folk, non-binary folk, fuk-gender folk, genderqueers, smash the Code folks and so on.

I want freedom.

Gender feels more like a contemplative practice than a story of identity formation, if it feels
like anything right now...

I feel no part of that binary code, and also feel like I am all of it. From a system's view, we are
stuck in a great web of life system, so any identity people come up with is still part of the

system, created by and within that system. We can't escape the system because we are the system. We're re-writing it every moment. That feels like nuance. And spaciousness.

Gender is a changed activism for me now. How do I wake up and be accepting of myself and be useful in this world? That is a way deeper and more sustainable form of activism for me than making a big sign and getting only angry about things. Caring deeply about earth and the web of all life is actually all connected to my gender and identity. I can't fragment off parts of myself and call one 'gender' and another 'caring'. Maybe its not very 'gender forward', but it keeps all the threads of me connected which feels more congruent with how I actually experience gender.

The reasons why I don't want to burn fossil fuels flying to maui is deeply interconnected or integrated with my politic about caring for all beings. If I'm going to care for the web of life it means integrating gender and politics and bodies and worthy work. So gender isn't just about whether I'll wear pink or blue or both in maui but about how this being might choose to not get there.

I think that is confusing for some people, that gender isn't about how I dress or perceive my masculinity or femininity, but about actually all of this thing I'm calling 'me'. Gender is insidious. It's part of everything. When is gender absent in the interpersonal?

I think in many ways the most suffering about my gender story is in the quest for trying to belong. Aggressive disbelonging takes a toll.

I've always found my place out in the web of life, not with humans. The most genderless or genderfree place for me is in the woods. No expectations from the wild except wildness. {I have rich and wonderful connections with many humans too, but the woods, or dogs don't give a shit what pronoun I like.}

Gender is sometimes visible and sometimes invisible. Even when it's invisible, it can be palpable. No one has to say anything to 'feel' gender. Gender uses language, but is also a visceral thing, the nervous system can sense it.

The assembly of qualities that make people or energy more androgynous or non-binary was always more intriguing to me. Attraction is such an exquisite dance of many un-name-able aspects, some of which are called masculine or feminine, and many which are a mélange. It's less about having a penis, but how it gets related to, how it's used and not used.

The social training around how we should use and interact with bodies in erotic, sensual or sexual ways is quite specific and stems from the gender code.

What does feminine behavior with a penis feel like?

I love that there are a million ways to define non-binary gender.
That feels like progress.

Formative experiences. The practice of 'me' was still the practice, but the languaging changed over time.

How can we still call you <name> and you are like this now?

I get great inspiration from people who really do not get what is even going on with gender but are really seriously trying... Trying to understand rather than trying to get it right.

I don't actually need you to get me for me. I need you to think about gender and develop an understanding of gender that includes folks like me. There's zillions of us. Isn't everyone's life better when we include each other?

forms of violence

Sure. Violence feels like such a lite word to put to some of my experiences.

I didn't have parents to call and say 'hey, help me out'.

Who had my back? I'm not sure.

They were very disorienting times.

...we can't tell what 'it' is... or, we don't like it...or, we're going to correct it... or, we are not tolerating whatever it is that you are.

The feeling was like, 'I'm not going to be protected anyway', so why would I go talk to somebody or report anything?

A trans teacher just got kicked in the head and left for dead.

...one guy calling another guy a fag and threatening to shoot him.

I sustained a brain injury. It was 2012. It was a big city on the west coast.

I felt such an internalized sense of being at fault.

"It's kinda hard to tell what's going on with you so...what do you expect?"

I can't even rely that I will not have to defend myself on this.

Somehow people think they will 'correct' your gender by sexualized assault.

There is a lot of bashing on genderqueers. Anyone who is trans-anything in jail is at threat to be murdered today or tomorrow. Shit is grim.

I just didn't think that kind of brute physicality would happen to me still. Maybe when I was 20, maybe in the 90's.

I can't file my taxes with my partner or kids.

I have to navigate being in public space so as not to have people's gender-code-policing arise which generally gets taken out on me in mini aggressions or worse.

Do I feel safe walking alone at night? No I do not.

Do I feel safe walking into a bathroom alone? No I do not.

Do I feel safe going to a healthcare setting? Mostly not.

Do I feel safe enough to talk about my gender with profs or healthcare folks? It depends.

“So you can’t imagine a healthcare professional ever understanding you in terms of what your gender means to you?”

Yes, correct.

“So it is not actually your identity that creates stress for you, but its other people or society, an outside system, that creates the stress?”

Yes, exactly.

I think we are all susceptible to feeling judged by others, whatever the criteria. The right kind of family, the right kind of pumps, the right kind of relationship or vacations. There are so many codes or stories of belonging. I think gender is just one aspect of judgment.

If we’re fitting into the norm or matching, then the story becomes *invisible*.

If we’re not matching then it becomes a Thing.

Like racism. Like ableism. Like consumerism.

gender power-space?

A dynamic where your gender or lack of gender or whatever the fuck you want to call it has power and is not oppressed, not a thing, It is not wrong or bad and there is no violence against it.

Spaces that feel powerful.

Spaces where it doesn’t matter. Where it’s not a Thing.

Where gender is erased.

What are markers of gender power space?

I feel ease around my sister-in-law because she doesn’t feel threatened by me/my gender, probably because she’s comfortable in hers, and doesn’t have so much gender judgment. I sense a lack of expectation.

I feel a lack of projection.

I can tell because my nervous system relaxes.

When people just feel a deep ease in themselves and can get curious about others. The foundation of the connection is belonging, and from that base we can explore all kinds of ideas without feeling kicked off the island. There's trust.

Live and let live, in an embodied way.

I often use my intellect to protect me.

It depends how threatened I feel.

Something has to give.

I don't want to endlessly all the time feel in fight-mode about the gender code.

I betray myself by performing a version of 'conforming' to the code.

I don't have action in me to push against the code's power some days, which doesn't mean I'm accepting of it.

It means Total Fatigue.

At work, there are way too many things tipping the scales toward 'don't fucking say anything', so I'll just step back.

Part of the story of my gender is that it is a nonsensical thing. It doesn't make sense. And I'm fine with that. I feel pushed to make sense of it from society, 'the collective we', but for myself, I'd be okay with a question mark or mystery. It's not that I want to obliterate gender or somehow make it go away... I just want to be part of a consensus that believes gender is a *fiction* rather than a *fact*.

I don't mean fiction in the sense that me getting a brain injury is un-real. But it is proof that gender is an evolving thing. If gender's a fact. It's a 'fact' that is changing quite rapidly.

Gender's not static.

It's not what it was in 1962, or 1657 or millennia ago.

But 'we' talk about it like it's been around forever. Not true.

It's a construct; we made it up.

'We' are still making it up.

gendered anatomy and language

For some people the anatomy of gender is... a big thing.

I actually don't really care.

I want 'you' to be held and seen in exactly the way you want, and I think we can do that without language.

There are a lot of ways to affirm someone's gender
or see someone's personhood beyond their gender.

Language is not the only access point.

Viscera is very un-languaged.

We walk into a room and we can tell
if we are ok or if we're not.

Ironic that the anatomy of gender is so obsessively languaged.

It's like 'Stop that'.

Language fragments us. It can be a form of disembodiment.

Pronouns are good but we have to do better.

We have to see each other better.

...I don't know a freer term than 'they', but it still isn't really a fit.

When I actually sink in, another part of the story of this gender, is
a deep grief

I'm watching a normativity happening: body modification

fuk, lost another one

It feels like people that are living in a more liminal space of gender are dropping out ... month by month ...

Seems we're doing this thing en masse

and I don't know if it is actually getting people what they want.

for some people that is a way of fixing this gender/body dilemma
but I feel like these bodies are not a problem that need fixing.

modifying to belong or to fit, or to fit this Thing
I feel scared of it.

what worries you the most?

that people will still be suffering
and these modifications won't have done anything.
we are in a culture of dissatisfaction and danger, and I feel like the dissatisfaction and danger
is being turned inward into 'how can I solve this part of me ...
that my nose is too big or my chest or whatever the thing is ...'

I'm not sure this is going to actually end the suffering and the **violence** that we hope it is going
to end.

I feel concerned that:

it doesn't actually change anything
costs a lot of resources
there is sometimes a felt dissonance which seems we have to ignore because we're
clinging so hard to the 'wanted' change
having it have to have been worth it.

On one plane I feel so angry that people feel this is what they have to do
to find solace and reprieve and themselves
it feels counter to the idea of ...
freedom of the body.

This feels like **such** an un-popular thing to say.

For me, I feel a deep sense that I just need to hang onto this thing I call my body. It feels more collective to me. It's not just 'my' body. I feel a responsibility.

Around folks who've modified their body in a gender affirming way,
there's a sense of:
be supportive and don't question
you need to be ok with it.

And I'm like "whoa" this is symbolically huge for me, too.

what you do to your body ... impacts how I relate to my body.

we're all in the system having effect on one another.

I've been with lovers where they have add-ons or missing body parts and ...
I feel a grief and that feels inappropriate ... I'm thinking 'I should not have this grief' ... But I
sense a grief and it is not mine. I'm clear on that.

How can we have space for grief
in the body of the person?

Or the surrounding community members? Lovers? Family?

My tits weren't congruent with my gender ...
ok ...

and now I can't allow grief in for any of it.

It can feel like another form of fragmenting.

It feels medicalized, and privatized.

Anything other than outwardly celebratory and supportive feelings not welcome.

I get it. I get it, I get it, I get it.

And.

to have self-hatred towards a part of your body -

in my experience in my culture
my people would be like
“you can’t disrespect us that way by not ...appreciating your body”
whether it is a physical or an intellectual quality ...
it is like a disrespect to the collective to want such an outward change.

I don’t know the correlation
between white western culture and hyper individualism, but

I cannot even imagine being with my people and having body modification.
they would just be ...
not mad at me ... but ... what have you done to all of us?

When I land myself in western culture, I’m thinking
‘that is not the norm of how people are thinking’ ... they are not thinking ‘how does everyone
else feel about this?’
they’re just feeling how do I feel about this ...
it’s more about the ‘me’ I think.

There are likely huge family risks, but I don’t know it’s a collective question in western culture.

I don’t know there’s space for collective conversation around the fire, at the river. I know
people here are trying.

But even legally changing my name. I haven’t done it.
it feels out of loyalty to my people, my family.
and I actually have no problem with that.
I have already gotten kicked out at 16.
it has taken me a long time to repair with them.
it is not worth it to me to lose any more connection with them over this name thing.
if I modified my body chemically or surgically, they would just be so ... sad

not upset at me ... but just like ...
what has become of the world?
it is so crazy here.
why did we come?
So many folks looking for a place to belong.

I head back out to the woods.

A's story

Coming out a gay was a thing I did a very long time ago- in high school.

I thought I was bisexual or a bad lesbian, because I didn't really have language to describe that I had girlfriends, because that's what lesbians did, but it was unsatisfying and confusing (beyond just the general confusion of being a teenager!), and it didn't really make sense for me until I found new language. It turns out I'm attracted to masculinities - which is something that really floats above whatever bodies people might have under the performance.

I don't say performance- the performance of gender- to suggest there is anything not genuine about gender performance, or gender expression- because everybody has a gender, and the one they perform is sometimes the one they feel, but it is sometimes not- but that disconnect doesn't mean anything about the authenticity of either a person's felt gender, or the authenticity of what they are performing. Some of us get very lucky and have enough privilege to be able to perform what we feel. Many trans people are not so lucky, because there is an enormous cost to doing it- and it often gets us murdered.

Coming out as trans was about connecting the performance to my gender identity. I identify as transgender, and genderqueer and non-binary- which means no gendered pronouns are appropriate for me (although I acknowledge the current trend in performing androgyny tends towards performing a certain kind of understated masculinity), which for me is the struggle to be what looks like a man without importing all the worst excesses of it and being The man. It is a great responsibility. When people are busy or not looking very hard they mistake me for a man. I love it. I find it so validating, but I know that means I need to not behave like a creep to people, because there is some power in what looks like maleness and nobody deserves that power.

In the same way I didn't know I was queer until the internet gave me better language to situate myself, I also thought, in my 20s when I came out as trans- there was only one way to be

transgender. It was to be a binary-identified transsexual. Because I was assigned female at birth, the track for me was to pick a boy's name, use male pronouns, find a doctor who would prescribe testosterone, and get on a 3 year waitlist for chest surgery. But when I was there, in that masculine space, I noticed a really off-putting and quite patriarchal masculinity was expected of me, but also that the 'he's' didn't really fit me. It was always an ill-fitting costume. It took me another decade to figure out why that was. It occurred to me eventually that binary gender is part of the problem for me, and that switching teams and modifying my body was not going to fix anything. In the same way that the goal of Marxism was not to make everyone a capitalist, but rather to overthrow the system which imprisons all of us, gender is the problem. The structure of gender. It puts pressure on everyone. For people assigned female at birth, the womens' liberation movement has won us the ability to perform a broader range of behaviours - - so I was able to be a tomboy and wear pants my whole life -- this is something that trans liberation has yet to win for people assigned male a birth. We police all gender, but especially masculinities, aggressively and with violence, and I acknowledge that privilege about myself. My parents were permissive about my gender performance. In small towns I am still shouted at for being a dyke from passing pickup trucks but in Vancouver nobody looks twice at me. I'm able to work. I can shop for clothes. Taxis stop for me. This is not true for our trans sisters.

But I still feel pressure from within the trans community. I feel like because I'm not on a surgical track I'm not trans enough to be able to call myself transgender. I go to the all genders swim and see all the people with chest scars and I feel a great expectation. We are all still policing each other's genders. My friends outside the community, who have just figured out how to use 'they' in their sentences when they describe me, cannot fit it into their heads when I wear a skirt. This has always been true for me- people commented when I wore something non-masculine, either in a congratulatory tone or in horror... I just didn't recognize it as misogyny.

This is really the core of gender. It is a way to oppress ½ of the people on the planet. Our mothers were right- there is something subversive about women demanding equality. Where they were wrong is where the battle needs to be pointed. We cannot take a binary that is designed to be unfair and stall it at equal. We need to all get off the scale.

I'm not sure how to honor everyone's right to perform whatever gender they need to, particularly people who are very comfortable being men or women and still dismantle the system of gender, but I know there needs to be room for that if the world is going to be better.

I'm also coming to terms with my own misogyny, and my own transmisogyny. For personal and social reasons I am very uncomfortable with performances of femininity, because these were expected of me for so long and imposed on me in a non consensual way. What I'm coming to terms with is that gender policing is not ok, and that means it is not ok for anyone. This means pink dresses for everyone- even the girls. That is the hardest part of my relationship with gender these days.

I could say it is a relief to be able to be my real self- to be able to ask people not to 'she' me but to use 'they'. That every day is an act of daring. Perhaps I understate how dangerous it actually is to be me and walk around the world, but I don't want it to be the focus of everything the way it is. But I'm really quite tired of that. It shouldn't have to be. Walking to the corner store to buy milk should not have to be a great act of resistance with which I risk death.

The great liberty movements of the past- what my mother's generation did pushing the bounds of what it meant to be a woman, what the American civil rights movement did to let us sit anywhere on the bus we want to -- what current anti-islamaphobia activists are doing now to shine a light of the invisible centering of Christianity under the guise of secularism- I think the challenge now is to take the best and most effective aspects of those movements and point

them at gender. And I don't mean gender in the abstract, but I mean the way regular people think about gender roles and what is possible and appropriate, and how to deal politely with things we haven't seen before. I know tall, broad shouldered trans women and doing the brunt of this work because of their visibility, and I need to be an ally to those women, but I also need the structure that makes them and me abnormal in the eyes of all of our collective parents to dissolve. Gender is the problem, when it is imposed from outside. I don't identify as a libertarian because I am a socialist, but I walk with them in their view that there are some things nobody external should be able to interfere with. The performance of gender is one of these things.

Rory's story

The story of my gender cannot be separated from the story of me.

I am a person

just like you

we are the same

beating hearts in ribcages

each with experiences of joy and pain.

Genders evolve

we are all so much more than gender.

The gender binary is inescapable, devastating and dogmatic.

People often assume

we are our body (our sex).

And then people assume so many things because of the sex of our body.

(... “ass-u-me”)

Sex and gender are **not** one and the same.

My body is the source of many assumptions:

my pronoun

my gender

my personality

my interests

the gender of my partners

my hopes and dreams

my abilities

my habits

my lifestyle

that I am lost while shopping the “men’s” section

... so many things.

As a young person I learned some rules that were attached to my body:

there was an ok bathroom and a not ok bathroom

my pronoun was assigned, not chosen

my clothes were purchased in the “girls” section.

I don't recall feeling constrained by these things

perhaps my naivety was liberation.

It was *mostly* ok to transgress these rules

(which meant I vetoed female clothing and peed standing up).

As a young person I favoured masculine peers

those that were interested in masculine* things

getting dirty

wearing pants (pun!)

playing sports

*I think it is absurd to call these “masculine” things; they are simply things.

The gender binary commands a clear distinction between masculine and feminine.

either/or

A distinction that is problematic and inaccurate.

both/and

Where I live, masculinity is the most privileged quality of gender

which (in my opinion) made my childhood boyishness more acceptable.

If I had a penis and identified as femme I would have undoubtedly faced (and still face) much contempt

I feel sad thinking about how agonizing it must be for the people who experience that brand of intolerance.

Some people call this misogyny

transmisogyny

I agree with them.

When puberty changed my body's appearance the implicit expectations about how it was supposed to behave also changed.

Being a tomboy stopped being acceptable and became deviant.

I learned about these new rules by doing it wrong.

Being me became wrong.

The expectation was "be more girly, be more feminine"
even though that wasn't me.

I don't recall being aware of options

it was either conform or experience ridicule.

Girl or boy?

Man or woman?

Masculine or feminine?

WTF?

As I matured, the space between boy and girl became a vast ocean and I was trapped on one side confused about why the journey across seemed so dangerous.

(if someone invented a gender-PFD to support survival in this oceanic inbetween I would hug them [and probably cry]).

I wish that the space between boy and girl didn't exist.

That we were all just human beings

humans being.

So what about my body?

so.what.

My body is not an object, commodity or voluntary trans-educational device

but some days it sure feels like that is what people expect it to be.

The trans conversation inevitably ends up on the body

our bodies carry so much.

It is distressing that I am relentlessly asked to educate people about trans bodies.

My body feels tired of having this conversation ... again and again ...

And, I recognize my body is a tangible container of my gender, making it an easy target for (what feels like) interrogation.

I have been asked (by people I do not know well) about how I plan to “deal with” my chest, whether or not I am currently packing a dick, if I take hormones or when I plan to.

Since when is it appropriate to ask a colleague about their sexual organs?

“hey, nice to meet you; what do your labia look like?”

Some days gender feels like a mandatory and incessant explanation; the antithesis of liberation.

Other days gender feels like a fabulous fuck you.

It was after puberty that I began to have negative judgments about my body; these judgments continue to proliferate.

I dislike that my body is seen as female and the assumptions that accompany this misread.

Sure, I have “female” parts, but this does not a woman make.

Basically ... there is a serious disconnect between what my internal sense of gender is and what is projected onto my outer appearance – I am lost as to how I might reconcile this.

Without knowing any better people often refer to me as “she”, “this woman” or “lady”

The language people use often reflects the language of the dominant culture.

People are a reflection of their social location.

What I am talking about here is a broader systemic problem, and not an individual issue.

The gender binary is mandatory in most places at most times.

This makes it very challenging to take up space as a trans person

Without reliably feeling fear, rejection, embarrassed ...

Without reliably being misgendered, mislabeled, misunderstood...

The inbetween land freaks people out

It is a dangerous place to exist.

For example, I frequently get weird/scared/uncomfortable looks when in female bathrooms or people swear at me, call me a weirdo/creep, and/or run out of the bathroom

when I am simply trying to empty my bladder in the appropriate receptacle.

Kids ask their parents why that boy looks like a girl or why that girl looks like a boy or ...

WHAT IS THAT PERSON? (in the way that only a child can.)

And I wish that the parent stopped and said something rather than shushhhing their child and quickly turning away.

I have hips and tits.

There are days when

nothing fits right

nothing looks right

I feel offensive, to myself;

I wish I had a more androgynous body.

I have considered body modification ... but ... I don't want surgery and I don't want facial hair.
so there isn't a thing I could do to change my body.

Besides ... my body provides me with a variety of pleasurable sensations.

eating

fucking

movement

breathing

love.

to alter it by surgery and hormones feels (to me) like violence against nature.

I say that last statement with hesitation, and acknowledgement of my position as an AFAB white masculine(ish) person. I recognize that I have privilege within trans communities and have no idea what it is like to be an AMAB femme desperately needing surgery and hormones to survive the heteropatriarchy, sexist, racist, (trans)misogynistic culture that we call home(?).

My perspective is so limited by my perspective.

SEX

"if you're not a man or a woman, then who do you have sex with"

Get this, I fuck consenting adults!

When we have sex with people our gender is intimately connected to others' genders.

Gender has become more known to me through sexual intimacy.

However, gender is not sexuality.

I can identify as trans, irrespective of how I might identify my sexuality.

In my relationships with cisgender men I remember feeling pressured to *be* more feminine, to *be* someone I wasn't ...

besides ... wearing dresses felt like a costume party.

The cost of reciprocated desire was a female performance.

either ... show skin have boobs tight clothes be submissive

or ... no sex no love you are not desired

The dynamic had a homophobic tone when I think about it now.

In my interview we landed on some of the harsher experiences of my life: rape, physical violence, threats of violence, emotional violence, rejection from family, addiction, harassment, discrimination

feeling alone

feeling shame

feeling forbidden, am I a disgrace?

hating myself, hating society, and hating hate because it is futile and wasteful.

Feeling lost trying to find a home in this body.

My life's experiences have made me and have therefore made my gender.

I am the embodiment of my gender. What I am is what my gender is.

Inextricable.

and I have come a long fucking way.

When the word queer found me I was like “YUP”.

Queer, for me, is about gender and sexuality.

I didn’t “become” queer the first time I had my face between a woman’s legs

(although that was an important watershed moment, so to speak),
but being in a same-sex relationship made queer a more comfortable label.

Before I started dating people with vaginas I felt gender-shame.

My same-sex relationships have afforded the ‘un-dressed’ me the privilege of feeling desired.

Gender is prescribed, policed and enforced all around us.

This practice is harmful to so many people in so many ways.

I hope things change.

Change could be ...

more social acceptance and awareness

un-gendering language

un-gendering everything

more kindness, more kindness.

... freedom.

Freedom for all of us to just be who we are.

Free the way trees, oceans, birds and dogs are free. They don’t seem to care about gender,
or pronouns or labels.

They just are.

Mars' story

Self identity. That's what it all comes down to, I think. What is the extent that I am willing to change for others in order to belong? What do I need to do to express my genuine self, and how will this affect my quality of life? What sacrifices am I willing to make for my happiness? Is it even possible to guess how happy I might be if I go more one way or the other?

There are of course many questions that I've asked myself over the years, but as of now at the age of 30, it is these that have affected me the most: the questions that address the balance between genuine self expression and social acceptance. Both are equally important to me — equally necessary for my happiness, and equally relevant to my self identity.

That balance is something I've struggled with a lot my whole life. That probably comes as no surprise to most people who meet me. I express myself outside of gender norms, and I make very little attempt to hide it. Despite being perhaps less obvious than myself, I get a strong impression that this is something many — maybe even most — people struggle with, to some degree. The social expectation to fit in with the crowd falls upon all of us. It exists in nations and cultures, in religions and communities, and even among families and friends. Society taught me that I could be whatever I wanted to be, but at the same time showed me that there exists a clear hierarchy of opportunities given to people with certain physical and social traits. There are social rules for our behaviour tied to our gender, ethnicity, class, and any number of other arbitrary identifiers, and breaking these rules often has life-changing consequences.

It took my transition from the male to female role to realize that life is very different for people further down the rung. It took me even longer to recognize that I still exist much higher in this hierarchy than many others, but I digress. My point is that the life we might want for ourselves can become much more difficult, and sometimes impossible, to achieve just by being noticeably different.

I often wonder what people would be like if they had the agency to express themselves genuinely, without any stigma or judgment. I crave a world so colourful and diverse more than anything. I want more people to think about their self identity, and make conscious choices about their self/social balance. Maybe there could be more mutual understanding; and less violence, perhaps less suicide; if we began to nurture an honest awareness of ourselves.

To that end, I want to briefly tell you the story of my identity. My hope is that my openness and honesty will give you permission to be honest with yourself; to maybe silence that inner voice of judgment long enough to figure your-beautiful-self out just a little bit more. At the very least, I hope you'll gain some insight into me, so that you might not misjudge others, and this will maybe make the world a little safer for those of us expressing ourselves outside of the box.

My name is Mars. That wasn't the name I was born with, nor is it the only name I currently use, but since it's the name I'm giving you, I hope you can respect it as the name I chose.

Some of my earliest memories involve a desire to change my name. I've chosen probably a hundred different names for myself throughout my life, and it's still something I have difficulty settling on. That's why, when I give you a name that isn't on my birth certificate, it's not because I'm deceiving you or hiding something from you. To the contrary, it's because I'm telling you something about myself that's personal and important to who I am right now — it's my way of being genuine with you.

I don't identify completely with a male or female gender. This is a difficult concept to take seriously if you haven't experienced it, but I hope you'll try to relate as I try to explain. I was born in 1985 with an anatomically male body. I was wrapped in a male-coloured blanket, and people used male pronouns when talking about me. I was raised in a religious family, and when I was four years old I prayed to God with my mom and adopted my parents' religion. I was very excited, because I was sure that God would correct his mistake now, and change me into a girl.

I also prayed to be turned into (I remember each distinctly) a puppy, a kitten, a blanket, and a french horn. I wasn't sure what I wanted to be, but I was absolutely sure that what I was wasn't quite right. Today this is known as body dysphoria — in particular, I experienced this with my genitals — I felt very strongly that I had the wrong genitals, and this caused me a lot of ongoing distress.

I was never good at faking it, despite a childhood spent (like most) trying to fit in. I was a compulsive liar as a child, perhaps because I always knew there was something not normal about me. I've also never been good at being alone. I grew up in a small Mennonite farming town in Manitoba — if you know what that means, then you probably know that a need for community and human interaction is in my DNA. In my adolescence, when we moved to a larger liberal town in the Rocky Mountains, I was fascinated by the different kinds of people I met. I was afraid too, but the fear had been learned, and it quickly passed. Within a couple of years I had abandoned my religion and went into a rebellious fever, overjoyed at the many different things I was learning. The more I changed, the more I was criticized by my family. A rebel at heart, I challenged them, and the world, to tell me I couldn't be myself.

And so they did. But it wasn't my parents' fault; they only wanted me to be happy and succeed in life. Most people were nice to me, but their judgments were made more plain than words could have spoken. Why are you wearing lipstick? You're a dude, right? Is that a women's top? A thousand well-meaning comments had a message written between the lines that told me I could never live a respectable life if I continued to express myself. I was a rebel, and I was young, and I didn't understand the meaning of compromise. I became severely depressed. Life continued, and I graduated from high school. I struggled with an anxiety disorder, which, when combined with my depression and castaway disposition, made failing at everything come naturally. I dropped out of college, and for many years I couldn't keep any job for more than six weeks. I got drunk trying to forget myself, and I cut myself trying to remember.

Inevitably, I had to grow up. In 2008 I moved to Vancouver and started taking female hormones and living as a woman. Things started to turn around. I suddenly cared more about myself, and started trying to fit in again. I explored my body, my sexuality, my femininity, my fashion options, and I tried on names and personalities like hats. I was making progress, moving toward something that I could be happy with. I had vaginoplasty, thereby ridding myself of my lifelong body dysphoria. I chose a decidedly female name, which is the name my family now calls me. Had I found my place in a female identity, things might have gone a lot smoother for me. As time went on, however, I found that I had escaped one box of uncomfortable social expectations, and jumped into another. And boy was this new box full of expectations! As someone who's been on both sides of the gender fence, let me tell you, there's a good reason most transgender women become ardent feminists. Anyway, despite maintaining my newfound passion for social justice, I felt more and more like I didn't belong in either box.

Allow me to take a tangent from my story briefly, because this brings me to a subject I have put a lot of thought into. That subject labels. Labels are useful linguistic tools, as constructs that allow us to convey a vague idea in a concise package. Labels can be very helpful, or they can be destructive. Sometimes they can be both simultaneously. Male and Female, the genders, can be seen as labels — they describe a vague idea about someone concisely. Some people argue that gender or sex are biological designators, and you're either one or the other. The problem with that perspective is that biology doesn't work that way. Biological deviation is the very mechanism by which evolution takes place, and it happens all the time in every facet of the human experience. The gender binary; the labeling of two genders; is really only useful linguistically when you want to indicate whether someone is a compatible mate with someone else. We don't often use it for that, though. In fact, the most common use for gender labels and pronouns is to reinforce someone's social role. I think that this is the foundation upon which our gender inequality is built — when we generalize people, needlessly grouping them together, we are making assumptions about all of them. Many of the people we label women cannot give birth, for various reasons. Some chromosomal males develop physically as women. Many people

have sex chromosomes other than XX or XY. Gender labels also throw in behavioural roles, despite the fact that a great many people naturally exhibit the expected behaviours of the gender not assigned to them.

So, coming back to my story, when I say that I don't identify as male or female, perhaps now you have an idea about what I mean. I'm not ashamed of any truths of my existence. I desire to acknowledge my entire human experience; how I was born, who I have been along the way, and who I am now, without having to tell you what set of social expectations I more closely adhere to. But I'm a social creature too — I can't live like a hermit — and so a balance must be made. I think it's okay to change for others as long as you don't sacrifice your happiness. I have goals and desires just like anybody, and I don't want to dedicate my entire life to educating the world on every detail about myself. I also don't want to put an expectation on others to use strange new language they are uncomfortable with. So in public I use female pronouns, and I use the women's washroom when there is no gender-neutral washroom available. I like to dress in more masculine fashions, but my body's shape has become fairly curvy, so I wear mostly clothes labeled for women. These things are true all on their own, and are not related to my self identity.

My self identity is who I am, not what I am. It is not the configuration or working status of my reproductive organs. It is not my chromosomes. It is the food I love, and the way I like to do my hair. It is how I treat others, how I react to how others treat me, and how I feel about myself at the end of the day. It is the things I am passionate about, and the achievements I contribute to. It is my desire to be a better person than I was yesterday. Today I am living happily as a non-binary person with no regrets and no dysphoria. I still struggle with my anxiety disorder, but I have come a long way in learning to manage it. I am a professional in a STEM field, and I am achieving my goals.

I hope I've convinced you that there's nothing wrong with refusing to identify with a gender. I hope you can now recognize gender as a label, and not a criteria. I hope I've given you more of an understanding of myself, and a greater respect for those who exist as themselves outside of cultural norms. But most of all, I hope that you will occasionally consider your own self identity, with honesty, and find a way to express yourself that makes you happy just to be you.

Shared journeys: Common themes across narratives – Mair’s story

In the section that follows I will share my story as the primary researcher by identifying the themes that were common across all the stories. As I listened to each of the co-researchers tell their story I started to hear larger themes about gender, and what gender means in our current societal context. I listened to the barriers and challenges of living with a non-binary gender identity. I listened to stories of violence, rejection, pain and misunderstanding. I listened to stories of resilience, resistance, and of courage to ‘be me’ despite the consequences. I heard stories of support, acceptance and love.

I have identified seven themes from eight different stories about non-binary genders. The method that I used to discover these themes is discussed in Chapter 3.

The first theme that I discuss is called *threats to welfare* and is broken up into three subthemes one that is focused on *violence*, one on the impacts of *minority stress and microaggressions* and lastly on *misogyny and transmisogyny*. In this theme I discuss the experiences of abuse, violence, harassment, bullying, sexism, rejection, fear, terror, shame, and the microaggressions that the co-researchers described experiencing because of their non-conforming gender identity.

The second theme *compulsory conformity: gender as a social construction*. In this section I discuss the experiences my co-researchers shared about how it often feels like society requires conformity to the gender binary (clothing, pronouns, washrooms) and how living with a non-binary gender identity can make this challenging.

Additionally, in this section I explore how the co-researchers spoke of gender roles and stereotypes as arbitrary and that gender identity goes so far beyond the binary of male and female. Many of the co-researchers referred to the gender binary as a social construction

and reported that the compulsory conformity is not inclusive of people who identify their gender across a spectrum. Lastly, this section includes a discussion on sex and desire as aspects of gender binary conformity, and how cisgender heterosexual is the norm to which most identities are compared and that the binary of heterosexual or homosexual is also problematic and does not capture the spectrum of sexual desire, intimacy and partnering.

The third theme, *the body* presents gender as it relates to the human body. This theme is broken into three sub themes: *gender related body dysphoria*, *gender affirming medical procedures*, and *the healthcare system*. This theme includes discussion about genitals and secondary sex characteristics, medical procedures like taking cross-sex hormones and having surgeries with a broader conversation about what it is like to navigate the medical system to seek gender-affirming treatment. This theme also includes a discussion on gender euphoria, gender dysphoria and overall physical health within the context of having a non-binary gender identity.

The fourth theme, *gender performance*, shares the co-researchers' take on how gender is applied in the social world. This discussion includes topics like clothing, haircuts, social spaces, and community trends or identifiable markers. Also in this theme is the concept of "passing" which reinforces the gender binary, visibility and labels including preferred names and pronouns.

The fifth theme, *coming out* shares the experiences of the co-researchers coming out as trans, non-binary and (in some cases) their journey coming out a sexual minority. This theme covers the topics of coming out, being out, freedom, liberation, resistance and self-acceptance ("being me").

The sixth theme, *community support*, extends on the fourth theme but offers a distinct discussion on the role of acceptance and support for the co-researchers gendered journeys. This theme includes topics like activism, support, acceptance, belonging, friendship, being a support to others, inclusion and also how community is a common platform to engage in social activism.

The seventh and last theme, *intersectional analysis*, discusses the diversity of identity over some of the following areas: race, class, ability, religion, income, sexuality and geographic location. This theme also discusses how gender is part of identity, and that life experiences including trauma, intimate partnership, family of origin, country of origin, and so many other things influence gender. This theme reflects the intricacy and complexity of gender and identity as an inseparable aspect of personal identity.

Theme 1: Threats to welfare

The first theme that I will discuss is titled *Threats to Welfare*. When I use the word welfare I intend for it to convey things such as safety, comfort, having access to shelter and food, being loved and accepted. So when I say “threats to welfare” I mean that consistently and across all of the narratives in this research my co-researchers described experiences where their welfare and/or safety were threatened. This theme was by far the largest of all seven themes. The narratives within narratives that shared stories of violence were the most painful aspect of this project for me. It is both sobering and empowering to be able to share some of these words with you here.

I have broken down this theme into three main sub-categories (violence, minority stress/microaggressions and misogyny/transmisogyny) because I believe they are distinct yet share some important aspects. Violence is seen as a threat to a person’s welfare in

that it disrupts a person's safety in their own body. The stress of living as a minority where you are exposed to rejection, microaggressions and routine feelings of fear and shame is seen as a threat to welfare because these experiences disrupt a person's ability to feel safe as they navigate the world around them including their family, workplace, community and other public domains. Living as a gender minority also exposes people to poverty, potential lack of employment and/or lack of housing. Misogyny and transmisogyny are used here to describe threats and scorn that transwomen and femme-identified people experience. Consistently across these gender narratives I heard stories of negativity and scorn around femininity, whether it was female bodies, or feminine presentation. This was across stories irrespective of assigned birth sex.

The threats to welfare that I listened to were consistently linked to each co-researchers gender identity however there also were examples of these threats relating to their sexual orientation. These data suggest that when people identify and present their bodies in a way that does not conform to the gender binary of female or male it is expected they will experience harm, violence, trauma and abuse. I recognize that the nature of qualitative research is not generalizable, however the data in this research that threats to welfare are common is supported by quantitative data that also suggests violence, trauma and abuse are common in gender diverse populations. See chapter 2 for a review of the pertinent literature.

Our people experience terrible graphic violence as a certainty. And particularly a kind of sexualized violence that leads to murder in a way that seeks to erase the body completely. So when trans people are murdered they are horribly violated

and then dismembered and I know that as a certainty ... for my community ... and that has not happened to me yet ... and I feel like that is more or less inevitable

Trans people are killed every year like hundreds ... I know someone ... who was murdered for being trans and ... um ... it is just ... no one takes it seriously

Violence

When I am asked about the major findings from this research my mind and mouth frequently find the word violence. Prior to stepping down this path I recall some anticipation that I would hear stories of rejection, and perhaps of trauma and abuse, however the frequency and harshness of violence that I heard about was far beyond my expectations.

The co-researchers shared stories of violence in a variety of forms. I listened to stories of rape, murder, assault, and verbal abuse. The different contexts of violence varied from person to person, without any obvious and observable patterns. The most common contexts for violence were from family members, intimate partners and strangers in public.

so ... <laughs> things were kinda fucked up

and then sometimes he would get really mad at me and he would come into my bedroom and attack me and ... it was clear to everyone that the subtext of his anger was my cross dressing

*this guy identified me as trans on the train and he looked right into...got right up in my face looked in my eyes and said **“you oughtta be raped”***

I got a really bad hitchhiking ride ... and was quite brutally assaulted by a dude and a friend of his ... I don't need to talk about the details of that ... but it came around because of them not knowing <my gender> ... like I was a threat to their system ... they were like “what the fuck are you ... let's find out what the fuck you are” ... it was totally fucked up but it was very clearly trans bashing

if I tell anyone this shit like ... be even in further trouble or they'll be like “well yah no matter you got raped like what the fuck what were you doing Why don't you just wear a pony...” ... I don't know ... but it was that sense of feeling like I am not going to be protected anyway so why would I go talk to somebody?

He was super homophobic and made all these crazy death threats to me ... threatening to shove poles up all my different orifices ... and like just like rip off my limbs and fuck me with them ... so I would sleep with the bureaus and dressers in front of the door

and this guy came up to me and thought I was a prostitute and he was like “are you a tranny?” and ... I was dressed ... it was winter ... I was in a jacket, I wasn't you know... I was just standing there minding my own business in front of Starbucks waiting for my boss to come open the door because I was there early,

waiting and this guy um ... pulled a knife on me and told me to follow him he gestured toward ... there was an alley there ... the dark alley, right?

so I left home, I was like in the beginning of .. I guess I was going into 12th grade ... I sorta lived with this friends family I sorta lived on the street I got into a bunch of bad shit. Violence doesn't even cut it in terms of talking about that ... time in my life ... it feels like the version of your life ... violence feels like such a lite (like L I T E) word to put to that experience

that was always a huge issue, I never really felt safe with her and ... she was really abusive physically too ... and emotionally and she kinda hit me consistently ... why am I laughing about these things ...

I was going to teach at a local university ... and I am going to go teach my working with trauma class and I'm so early I'm going to take a walk through this forested area on campus ... I'm walking through ... these two guys totally take me down they like ... beat the shit outta my head ... I am left for dead ... they skate out and I am like ... uhhhhhh

There is a lot of bashing on genderqueers. Anyone who is trans-anything in jail is at threat to be murdered today or tomorrow. Shit is grim ... I wouldn't care about gender or this research study if it weren't for the violence. The violence, and in its absence, the possibilities of freedom. That's my pull.

Minority stress and microaggressions

The second sub-theme that I heard while reviewing the theme of threats to welfare was the negative experience of living as a minority including microaggressions. The experiences that I heard about in this area are consistent with minority stress theory discussed in Chapter 2. Microaggression, as the term is being used here is meant to capture the negative experiences described by the people in this study including being misgendered, having to constantly explain and justify ones' gender, and that non-binary genders are consistently challenged, unrecognized, invalidated and marginalized. The term 'minority stress' refers to a variety of stressful and negative experiences that the co-researchers in this research linked to their gender identity and presentation. Both microaggressions and minority stress involve feeling unsafe despite the lack of a tangibly perceptible and obvious threat.

do I feel safe walking alone at night?

no I do not

do I feel safe walking into the bathroom alone?

no I do not

do I feel safe going to a healthcare setting?

no I do not

like ... those are all forms of violence, but it is not like someone is holding a gun to my head

We so often have so much explaining to do to others, and so much of what we have to explain just isn't really explainable

often it feels like I am trespassing, like am an imposter and I don't really belong in that space

Stress also involves rejection, and not feeling accepted by people in their friends and family or people in public.

I still had this perception of myself as ...I don't know ... deeply flawed and irredeemable ... and that message certainly came from my father

my parents were like ... "you have to stop dating them" ... I guess it would be called a 'same-sex relationship' ... my dad was like "either stop dating this person or you're out of the house" ... and I was like "fuck you. I'm out."

and it was interesting to me was how... I felt such an internalized sense for being at fault... people of course are going to be like ... well ... "it is kinda hard to tell like what's going on with your gender ... what do you expect?" I felt like that was the response I was going to get. Actually ... probably out of all of it that was the most hurtful experience. I can't even rely that I will not have to defend myself on this

Under the subtheme of minority stress, I also heard stories of hiding and of fear. The co-researchers described, at times, choosing to conceal their gender identity out of fear they might be rejected if they came out, or choosing not to come out because of the potential consequences.

and being queer was never a thing I hid in the way that I hide that I am trans

The co-researchers also spoke of microaggressions, or situations where they felt dismissed, unsafe or uncomfortable, seemingly because of their gender identity, despite the fact that the observed behaviour was not overtly discriminatory or abusive.

and then some thing, it could be a multitude of things, even like an eye gesture ... I'm not sure ... it feels like ... very implicit things and suddenly it is like ... I feel back in a oppressed place ... I mean, sometimes it is very obvious but unsafe I would say ... like ok ... I am just going to duck on this one

there is no attack ... there is no thing ... but my nervous system is like "ARROOOOOGA AROOOOOGA leave the conversation" and I am like ... I'm fine it is ok but ... um ... so what would I do?

Lastly, under this theme of minority stress, I heard the co-researchers describe experiences where language was used an abusive, violent or threatening way. Co-researchers described situations of direct conflict, or abusive language, as well as situations that were less overtly aggressive, but deeply hurtful. A common pattern across these stories was the co-researchers descriptions of feeling like the support that was available to them was limited to a few people or that there was nobody they could safely turn to for support.

what feels like violence to me was the assault on my name ... and of course none of the teachers did anything about it. I don't even think I told the teachers.

It was loud it was hollered across the schoolyard it was hollered across the classroom and it was just like .. 'kids will be kids'...

Misogyny and transmisogyny

Misogyny is used here as negativity, hatred or contempt towards women and femininity. Transmisogyny refers to disdain, scorn and prejudice towards transwomen and AMAB people who identify and present as feminine or non-masculine.

As I listened to these stories about non-binary genders, I consistently heard direct and indirect negativity towards femininity. There was praise for the AFAB's (assigned female at birth) when they were more masculine, and there was rejection and scorn for the AMAB's (assigned male at birth) when they were more feminine in presentation and behaviour. This negativity towards femininity is different than simply rejecting gender non-conformity. This negativity, to me, sounded like a specific contempt for femininity, regardless of the natal sex of the person that was displaying said femininity.

the more masculine and the more boyish I was the less abuse I suffered

and when I started passing as a woman ... it is hard to describe in words that sense that when somebody is talking to you they are talking to somebody less intelligent ... they are taking a little bit longer to explain things or they are explaining it like you are five or sometimes it is more obvious like ... "can I speak to a male employee"

I don't think people realize how they treat men and women differently but they do, that is a generalization, but it is very very prominent

in Vancouver nobody looks twice at me. I'm able to work. I can shop for clothes. Taxis stop for me. This is not true for our trans sisters

masculine is something that society recognizes as a more valid gender expression

Now I say "hey I'm trans I've been on both sides of the fence and you gotta listen because you really don't know" it has really helped in some conversations, my gender and my experience has sort of helped me gain perspective for others so that's cool

just the amount of sexism that still prevails in our society which people who grew up male do not know

recognizing our experience of manhood, that no matter how miserable we might have been as men we still ... enjoyed lots of masculine privilege

one thing I miss is the ability to be invisible which I think is a total white male privilege thing

when I was a kid I was very emotional and I was sensitive and I had never really thought of myself kinda going through life and suppressing that, and having other people suppress it for me

that's a point of struggle for me because I'm thinking about how it's possible for me to perform any kind of femme and confront my dysphoria and confront my internalized misogyny

As someone who's been on both sides of the gender fence, let me tell you, there's a good reason most transgender women become ardent feminists

This first theme, threats to welfare, discusses the negative experiences that the co-researchers in this study described to me in our interviews. These findings are consistent with prior research on transgender populations namely around violence being more prevalent compared to non-trans populations. These findings also reflect some of the points made in the discussion of Minority Stress Theory. The sub-theme misogyny and transmisogyny sheds light on the continued existence of gender inequity in society. This is a painful theme, full of agonizing recollections that the co-researchers bravely shared with me and highlights the need for more support, acceptance, resources and continued progression in the direction of equality for all people.

Theme 2: Compulsory conformity: Gender is a social construction

The second theme that was common across the narratives in this research is the concept that gender is a social construction. Through discussing their experiences living outside of the gender binary, the co-researchers have a perspective of gender that is different from people who participate in the binary gender system. Examples about clothing, social space, toys and language were used to support a common sentiment that so many aspects of our culture are unnecessarily gendered. More than one co-researcher expressed confusion as to why there are toys specifically for ‘girls’ and for ‘boys’, which I find myself coming back to; why *is* this the case? As I sit here and write I am still unclear as to why pink is feminine and blue is masculine; these assignments seem indiscriminate and restrictive. In this research, language was an exceptionally popular example of the compulsory gender binary.

I listened to the co-researchers explain that there are times, usually on a daily basis, where they were forced to conform to the gender binary in order to exist in society. The use of gendered bathrooms was the most common example. Some co-researchers noted that there is an increase in gender neutral washrooms; however, unless you are aware of their location there are times when nature calls a that choice needs to be made about which door to walk through.

ok sure ... do you want me to go into the bathroom with the lady with the dress .. whatever ... but then don't beat me up when I am in there and ask me if I am in the wrong bathroom

Beyond bathrooms, the co-researchers spoke about gender role stereotypes that exist within the gender binary discourse. I heard people reject the expectation that just because their genitals are constructed in a certain way (assigned birth sex) does not prescribe the colour of clothing they might want to wear, their career, their preferred hairstyle, their pronoun or their personality traits. My co-researchers spoke about being frustrated and upset with the expectation that they behave in certain ways simply based on what their genitals looked like at the time of their birth. I heard people explain how these stereotypes are arbitrary, limiting and outdated. I also heard how existing in a liminal space was experienced as risky, radical and provoked discomfort by other members of society, both known and strangers.

we start filtering them into these categories when they're still zygotes

I really think in some ways that gender is just an enormous load of bullshit it is just my ... experience of being gendered or being in gender roles is just so ... I mean it is destructive and inhuman

gender is a tool of coercion, a cultural myth, sanctified rules about how to behave like a doctrine or a dogma ... I think gender is bullshit ... a total construction ... and it feels like a threat to not participate

I think the problem is that gender oppresses all of us. And that there are expectations on how you should be is kind of the problem

I feel no part of that binary code, and also feel like I am all of it ...We can't escape the system because we are the system

I don't identify completely with a male or female gender. This is a difficult concept to take seriously if you haven't experienced it

This theme highlights gender identity as a fluid and ongoing entity and not a stable construct. I heard each of the co-researchers explain that their gender does not exist in any one space, and that it will continue to shift and grow over time. This theme also discusses that conformity to the gender binary is required much of the time (bathrooms, clothing, language). This obligatory system is an example of how our social milieu limits people to one or the other, effectively excluding people who don't identify in that way. The compulsory gender binary also precludes people from exploring the diversity in their gender, or questioning the construct of gender. The co-researchers in this study, to me, adopt a radical stance by living true to their identity despite living in a society where this is seen as deviant and where there are limited spaces that are supportive of their gender.

Theme 3: The body

As I listened to stories about gender identity, issues related to the body were common, prominent and seemed to be emotionally loaded. Many of the co-researchers discussed making changes to their bodies through gender affirming surgery and/or cross-sex hormones while others described using clothing devices designed to conceal or

augment parts of the body (like a chest binder designed to flatten a chest with breasts) which I refer to as function wear.

The theme of the body in this research involved three sub-themes: *gender-related body dysphoria, body modification, and the healthcare system*. These will each be explored in more detail below.

Gender-related body dysphoria

Gender-related body dysphoria is meant here as distress, dislike and/or discomfort at aspects of one's body that are related to the sex that was assigned at birth. Sometimes this can refer to obvious characteristics such as genitals or chest structure, but can also refer to things like the physical impacts of hormones such as the location of body hair, distribution of body fat, or the sound of one's voice. Hormone-related body dysphoria can also refer to the hormone-related characteristics, psychological, and social traits that influence human behaviour. Body dysphoria was a common feature in the narratives of non-binary gender identities in this research study.

The co-researchers who experienced dysphoria discussed their body dysphoria as an inner sense that certain natal-sex related body parts were simply wrong and unwanted by the owner of that body (genitals and chest structure). Dysphoria was also described as a strong dislike towards certain functions or sensations in the body that were related to natal sex hormones. Some co-researchers described the cultural or social significance of specific body parts and their discomfort or lack of connection with the function; for example breasts to feed babies, or uterus to grow babies. The level of dysphoria varied

from person to person, additionally co-researchers discussed feeling different levels of dysphoria at different points in their life.

I decided "I'm going to transition" and I thought ... like ... "I'm going to be ugly and I won't make friends" ... it was weird because I really wanted those things in life but it was still enough of a dysphoria enough of a ... you know ... uncomfortableness with myself that it was worth it to me

I hate having ... I actually have a hard time naming the organ ... it is hard for me to say, I don't talk about it... it is "downstairs stuff" it is "werewolf time" ... classified as standard dysphoria

I had really severe physical dysphoria I did not like my genitals I didn't think there was anything wrong or evil stigma attached I don't think ... I just felt that they were really wrong I always got the impression when I was ... if I was swimming in cold water it felt like they would fall off I thought that would be great

yah I hate my chest I don't like that it is the shape that it is I don't like the way that it feels I don't like the feelings I get inside it I don't like the purpose that people feed babies from their chest is terrifying to me it is nothing I could ever do

wearing a binder all day is exceptionally fucking hot, itchy, restricts how deeply you can breathe, changes how much room your organs have, affects your digestion, your circulation ...

Gender-affirming body modification

Gender-affirming body modification was discussed as taking cross-sex hormones, and/or having gender affirming surgical procedures. Not every co-researcher had sought out body modification, and not every co-researcher was comfortable going into the details of their body modification choices that they did pursue. I gave each co-researcher space to tell their story in whatever way they wanted, and did not push for them to answer questions about their bodies. What I am reporting here is what people voluntarily shared. The decision to pursue or not pursue gender-affirming procedures is complex and personal.

Many of the co-researchers described taking cross-sex hormones. Some of the co-researchers who were taking cross-sex hormones described an experience called “gender euphoria” where they began to feel more known to themselves and comfortable in their bodies as the effects of the hormones unfolded. This referred to both the physical changes to their body, in addition to the psycho-emotional changes that can happen. Each person’s experience was markedly different in how they felt about it, what changes happened and to what degree the changes were. Co-researchers on estrogen therapy reflected feeling more comfortable expressing emotion and feeling softer. Co-researchers on testosterone reflected feeling a significant increase in their sex drive. Co-researchers

were much less candid about the physical changes that followed their cross-sex hormone use.

Co-researchers also explored their experiences with surgery. Similar to the discussion of hormones, each person's experience with surgery was different. For some, surgery eased their mental health suffering. For others, surgery was a way to feel more comfortable in their body, compared to using functional clothing like a chest binder. For the people in this research project surgery seems to be a highly personal choice with a variety of motivators and outcomes.

that depression that made me want to kill myself when I was younger um ... just disappeared with transition especially after surgery ...

I have had top surgery but I am not on testosterone or anything like that

but when I started taking estrogen I ... in some ways it was like coming home it was like finding myself again ...it is quite wonderful ... the first 6 months ...

I would wake up in the middle of the night and just lie there and think ...

This is amazing, can you believe this ... this is so wonderful ... it is called the pink cloud

Some of the co-researchers described not wanting to change their body through hormones and surgery. These co-researchers either used functional clothing to conceal or augment their body parts, or they just presented their body without any gender affirming procedures or specific functional clothing items. Some co-researchers discussed having

difficulty with the concept of body modification and saw it as an unnecessary violence towards the body.

I also have like a deep grief at like what feels like um ... a normativity that is happening in the genderqueer trans world ... on the one hand it is matter it is cells it doesn't matter and on the other hand it feels like ... we're doing this thing en masse and I don't know if it is the thing and I don't know if it is actually getting people what they want ... I am scared that people will still be suffering ... and this won't have done anything*

in the beginning in the way I thought I was a bad lesbian, I just thought I was a bad trans man because I didn't want surgery, and I didn't want hormones .. right now I hardly sweat and I don't have any hair and I like that*

to alter it by surgery and hormones feels (to me) like violence against nature.

I've been with lovers where they have add-ons or missing body parts and ... I feel a grief and that feels inappropriate ... I'm thinking 'I should not have this grief' ... But I sense a grief and it is not mine. I'm clear on that

The healthcare system

Most of the narratives around navigating the healthcare system for gender-related procedures were descriptions of negative experiences. The most commonly reported positive experience was the outcome of having the procedure that was desired (i.e. access

to hormones and/or surgery). Each co-researcher who told me about their experience traversing the healthcare system described frustration, stress, feeling unsupported and at times feeling hurt and insulted.

The main issue that the co-researchers described within the healthcare system was the many barriers that exist that block access to gender-affirming procedures. The most common barrier cited was the amount of time people had to wait to get their desired treatment. My co-researchers spoke about wait times just to get on a waiting list, more waiting once they were on a list and a lack of information from any involved professionals about how long the waiting could entail. The common denominator was that it can be distressing to endure the extended wait times required for access to government subsidized gender-affirming surgery.

there was one person I think waiting for 2 years and still waiting ... just to get in

*it is a really long process I know lots of folks who have been on a long waitlist
for years*

*it is just really ... um ... random and you can never find out where you are on the
waitlist you have no idea it just seems to be madly disorganized doesn't take into
account how stressful and how difficult it is to wait that long or like .. yah have to
jump through hoops and still not know it feels like it is whimsical whether it
happens or doesn't happen*

Due to the nature of the system, some co-researchers described how they chose to fund their own surgery. In these narratives, the choice to individually fund gender affirming surgery or surgeries can give the “patient” more choice about where and how it is done: *“I really don’t like being the curiosity of the state who decides how and when and by whom ... my body can be altered.”* One advantage of individually funded surgery is that it gives the person having the surgery more autonomy, however this choice is also with its negative aspects, namely that individually funded gender-affirming surgery can be very expensive: *“probably the single most expensive thing I have ever done in my life I am almost 40 so that says something.”*

The co-researchers that chose to go through the healthcare system in BC system still reported significant financial loss despite the fact that the Province of BC indicated that they cover the cost of gender-affirming surgeries (VCH, 2015).

I’ve been in poverty for a long time because of this ... and I was lucky too because I live in Canada my genital surgery was covered so that’s fine ... I still had to pay for my hormone therapy and had to pay for transit to get to and from clinics and everything

In addition to expense and wait time, another issue described in this research around accessing gender-affirming procedures in British Columbia was described as ‘getting permission’ to have the desired procedure(s). My co-researchers described situations where they were evaluated on how well they performed the binaried gender connected to their desired surgical procedure in order to be approved for the procedure. This was explained as a frustrating and demeaning experience because although a

procedure might have been desired, my co-researchers don't identify within the gender binary, and some felt as though they had to perform a disingenuous gender in order to get relief from their dysphoria or to be granted permission to have their desired procedure(s).

basically an interview with some gatekeepers who will judge you on whether or not you're allowed to have surgery and this is not safety things like 'are you a safe weight for the surgery?' it is really like 'do we think you are woman enough to get a vagina'

Here is an excerpt of both me (Mair) and the co-researcher discussing the healthcare system (CR signifies the co-researcher):

Mair: *"So you can't imagine a healthcare professional ever understanding you in terms of what your gender means to you?"*

CR: *Yes, correct.*

Mair: *"So it is not actually your identity that creates stress for you, but its other people or society, an outside system, that creates the stress?"*

CR: *Yes, exactly.*

This theme on the body is an important discussion about the intersection of gender and the body. The discussion about the healthcare system is important and highlights inconsistencies between what is advertised as subsidized support and what actually happens in the lives of trans people seeking affirming medical intervention. Furthermore, there is a noteworthy contribution of this research in that non-binary people might seek out some procedures and not others, and are not interested in a binary identity. Currently,

the way the co-researchers described, the system is set up to support binary gender identities, and “full transition” and this practice may exclude non-binary people from accessing medical support. Lastly, an important aspect of the discussion in this theme is that of the choice to pursue body modification and how that relates to gender-related body dysphoria. For some people they have some dysphoria and do not choose medical intervention, and for others they do choose medical intervention. Some other people simply identify as non-binary and do not have gender-related body dysphoria. The choice to pursue body modification is highly personal and private and that there are ways to change bodies to make them feel like a better container for a person’s gender, without conforming to the binary of woman and man.

Theme 4: Gender performance

The fourth theme that I heard in the narratives on non-binary genders from my co-researchers is the theme of gender performance. Aside from our body including the construction of our genitals and the appearance of secondary sex characteristics, our bodies perform gender any moment we are in a social space. The co-researchers highlighted gender performance as an important feature of having a non-binary gender identity.

Gender performance as a theme includes concepts such as being visible, what language is used to identify and label, what clothes and haircut are chosen, being able to pass or not pass as a binaried gender, and overall presentation of self in the context of a binary gendered world. An important distinction in the discussion of gender identity is the difference between the inner world gender identity, and the outer world presentation.

Inherent in the research question is the identity part, or having a non-binary gender identity. For some, despite identifying as non-binary, they described a preference to be read (also referred to “passing”) as a binary gender (either man or woman). For others, being seen as androgynous or occupying a liminal space was the preference as this accurately reflected their inner world gender identity. This highlights an important point: that a person can present their body and adorn it with whatever clothing, and this may or may not be congruent with their internal world gender identity. A person’s internal gender identity remains private until they communicate it to others.

My co-researchers gender presentation in terms of how they visibly existed the world. This included things like how they wore their hair, whether or not they wore makeup, what clothing styles they chose and what other markings they were adorned with including piercings and tattoos. For some, presentation was more closely linked to the subcultures they participated in and they didn’t see it as closely attached to their gender. For example, one co-researcher is interested in a particular type of music and wears clothing that is associated with people who listen to that type of music and participate in the associated subculture. For this person, the clothes worn were less about their gender and more about their personal interests and community.

For others, the clothes they wear are very much associated with their experience of gender, and use clothing as a marker to be seen not only for their gender but to align with queer community. This quote highlights the use of presentation to mark and make visible a queer identity, which to this person includes both gender and sexual orientation.

right now there's a lot of asymmetrical haircuts, with short undercuts, short hair or shaved part, facial piercings ... you start accumulating a score if you have so many markers ... its like they're visible on purpose it's to alert other people around you like a display we put on part of our presentation.

For some co-researchers, being seen as androgynous, genderqueer, non-binary or trans was important to them, for others they wanted to be read as part of the binary gender system (in other words they wanted to pass) despite having a non-binary identity. This highlights how gender is both an internal and external experience.

once I was ...started passing as a woman and people started calling me ma'am and then I started like .. holy shit I started caring a lot more I started really trying to be a woman and insisting you know like ... that I was a woman because I feel like as my mental gender I can't quantify that it is just a feeling um but I feel definitely more on the female if it is a spectrum I feel more on the female side than the male

part of transition for me or being gender variant ... you know one reason that I am ok as I am ... without passing... for me is well it is... part of it is a real fuck you ... I tried to play along with it for 60 years and it pretty nearly destroyed me ... but there is some real value for me in not passing ... I don't pass and fuck you

everybody has a gender, and the one they perform is sometimes the one they feel, but it is sometimes not – but that disconnect doesn't mean anything about the

authenticity of either a person's felt gender, or the authenticity of what they are performing

Another important aspect of gender performance is the language the people use to identify themselves, and to locate their identity within the context of gender. The co-researchers emphasized the importance of language in terms of using a preferred name, their pronoun preference and what labels they use to describe their identity.

language as a container for who we are is an interesting thing to think about anyway particularly as a person who likes to be gender neutral right now for me, it means ungendering language ungendering space

and this whole idea that a thing is socially constructed it doesn't exist by itself until we give meaning to it with words means that the language is critical because it is the container and if the limits of my language are the limits of my world that's why it matters

Labels are useful linguistic tools, as constructs that allow us to convey a vague idea in a concise package. Labels can be very helpful, or they can be destructive. Sometimes they can be both simultaneously

This theme discusses how people present their gender identity in the clothes they wear, their haircuts and style. Passing was also discussed here, and how it relates to non-binary gender identities is much different than how it relates to binaried gender identities.

Often, in the binary transgender/transsexual sphere people want to pass as their identified gender which often includes full transition (hormones and surgery) and wearing clothing that aligns with the gender identity. In this research however, many of the co-researchers were not interested in passing as male or female because they don't identify with either of those categories.

For the co-researchers in this study, gender presentation was intricately linked with identity presentation, as this theme indicates. The co-researchers discussed how aspects of their identity are queer, and how they choose to make these things visible by selecting certain hairstyles, clothing, and body modifications including piercings and tattoos. These aspects of identity presentation go beyond gender presentation to incorporate other aspects of identity for example music interests or other sub-cultures that they might belong to. This highlights how gender identity is closely linked with personal identity and that when we talk about gender performance or presentation, we must understand that we are not only seeing a person's presentation of their gender, but their presentation of their self, of gender is but one piece.

Theme 5: Coming out

The fifth theme that I heard in the stories of my co-researchers is the experience of coming out as a gender-diverse or non-binary person. People in this study talked about coming out as non-binary or trans as a similar thing to coming out as a sexual minority (gay, lesbian, queer, bisexual, pansexual). Although many of the co-researchers in this study also identify as sexual minorities they spoke about coming out as non-binary/trans as a separate experience to coming out in their sexuality; many of them shared that they

felt that being non-binary/trans was more stigmatized than being a sexual minority. Implicit in the coming out process is coming out as something other than cisgender, meaning that the co-researchers discovered their internal gender and then chose to “come out” and make it somewhat or fully public.

Some of the co-researchers described liberation and support in their coming out, while for others there was pain, suffering trauma and abuse. For some people coming out was not a single point in their story, but that coming out happens all the time, and that their gender identity is fluid and changing. Many of the co-researchers described only being out to some people, and keeping their gender identity private from others depending on the context and their felt sense of safety.

Many of the co-researchers described fear in coming out to family and friends. The fear seemed to be of rejection, abuse or violence. Some co-researchers had the experience of acceptance by their friends and family after coming out, while others endured violence and abuse.

gender euphoria it is like <laughs> it is more associated with the coming out process I don't know, I haven't done a real study of the term but it is called gender euphoria ..

I know that it was bad but even the next day I didn't remember ... I know that my parents told me things that absolutely devastated me and my brother came to my defense I remember that ... but I don't remember anything else I don't remember what was said. I don't know ...I remember it being really really awful and how could my parents say that

Another aspect to coming out that was discussed in this research is the experience of feeling liberated and brave in being out a non-binary/trans person.

And I feel like everyday is an act of daring.

But it is a relief to be able to be me.

it is not that I chose to not belong somewhere it is like ...over time I have repeatedly not belonged places and so ... it is like ok I get the picture ... I don't belong here ... but then it is a quest for belonging and ... I feel really exhausted by that quest ... I think in many ways I feel a type of resistant apathy like apathy as a form of resistance ... I just throw my hands up ... I am not sure where the belonging thing ends or if it is a place or ... people somewhere or bodies somewhere that inhabits this thing that is going to be called ... like a home for a gender

What does non-binary mean? Um ... it means ... being liberated from that system

the balance between genuine self expression and social acceptance. Both are equally important to me — equally necessary for my happiness, and equally relevant to my self identity

This theme discusses the radical act of coming out. Highlighted in this theme is that coming out is a process rather than a destination and that coming out happens all the

time. The co-researchers identified that coming out is a choice. Some co-researchers could choose to be out in some places (with friends for example) and not in other places (at work). Another aspect of the theme on coming out is the evolution of gender. The co-researchers discussed that a non-binary gender is not a destination, and that their gender identity has changed over time, and is likely to continue changing effectively making non-binary an unfixed point unique to each person.

Theme 6: Community / support

A common theme across all the narratives was that of finding support from community. This support for some, was around their gender, and for other people was just about being connected to other people, without a focus on gender or any other specific aspect of diversity. Each co-researcher spoke of community and support in different ways, but there was a common narrative of these things being important in living with a non-binary gender identity. The details of this theme is discussed here with a focus on the key-identified topics of activism, giving and receiving support, acceptance, belonging, friendship and inclusion. The main aspect of this theme was that the co-researcher narrated how having supportive people in their lives is important to their sense of feeling accepted, feeling safe and having a community.

I heard the co-researchers talk about how being connected to people was an important part of their life. The co-researchers spoke about being around other people who demonstrated acceptance as an important aspect of their support system. The concept of acceptance seemed to be closely linked to feelings of belonging. As discussed earlier the prescribed and limiting gender binary often evokes feelings of being trapped in

people who identify as non-binary. In this research the co-researchers spoke about how having a sense of acceptance and belonging was a reprieve to some of the challenges of living with a non-binary gender. Acceptance and belonging were demonstrated by people in their community and life using the correct language, outwardly expressing support of their gender, not questioning them or asking inappropriate questions, and offering love and care. Something I heard across the stories was that when co-researchers experienced feeling accepted and as though they belonged somewhere, it was a powerful antidote to the many challenges of their gender story. It seems, in these narratives, that the quality of the support, acceptance and care was much more powerful than the quantity.

Another feature under the theme of community and support was the concept of offering support or being a support to other people. The co-researchers discussed the value of being a support across different contexts for example in friendships, intimate partnerships and through gender diverse community events whether formal (for example support groups) or informal (social events, parties, picnics). Being a support for other people was something that influenced the aforementioned feelings of belonging and being accepted.

Lastly, under the theme of community and support people explored the role of activism and resistance in feeling connected to community. Activism was described as a variety of activities that took place in community settings with the purpose of social change or social justice. Activism was not always discussed, in this research, as it related to gender diversity issues, but social issues more generally. Some of the co-researchers spoke about how activism was a way to feel connected and united with other people

towards a common cause. For the co-researchers who discussed this topic, activism offered them a source of social support, a place to belong and have a purpose.

Because I am able to pass as a woman when I need to. And because I have a great support network that I sort of take for granted that I walk home in some pretty nasty alleys everyday and as much as there is a community that loves me, they are not with me when the dodgy truck pulls up behind me.

I think that for the most part if you give people a chance to be an ally it is a really empowering thing for everyone you just don't exclude them based on your own preemptive prejudice around what they are capable of or what they can be ...

I mean, community is about visibility it is about voice its about like um just like seeing ... seeing other expressions or other genders and sexualities being uh ... in proximity to your own and informing your own in a positive way

I get great inspiration from people who really do not get what is even going on with gender but are really seriously trying... Trying to understand rather than trying to get it right. I don't actually need you to get me for me. I need you to think about gender and develop an understanding of gender that includes folks like me. There's zillions of us. Isn't everyone's life better when we include each other?

gender was a source of activism: trying to widen the space of belonging for people who weren't perceived by others to fit, or didn't feel themselves to fit the binary story of a gender

The co-researchers participated in this study because of their non-binary gender identity, which in and of itself is an act of resistance against a societal norm that prescribes how bodies are supposed to behave. I heard the co-researchers discuss how this resistance, against the compulsory gender binary was made easier through community connections and support. Co-researchers discussed how friendships, partnerships and other intimate connections were integral to their ability to be out as a non-binary person knowing they had places to turn to for solace and reprieve.

Theme 7: Intersectional analysis

The common thread across the narratives was a non-binary gender identity. However, through the interviews the numerous aspects of identity that stretch far beyond gender were discussed. This last theme is that of intersectionality, where the co-researchers considered their many intersecting identities and how each one influenced and was influenced by their gender orientation. The main aspects of intersecting identities discussed in this research were class, race, religion, age, time/epoch, location (rural/urban), ability, privilege and equality.

What I learned is that gender is only one aspect of identity, and that identities are constructed based on a variety of infinite characteristics. Gender does not happen in

isolation or exclusive to other aspects of identity, but it intersects with identity to form its own unique place.

we all judge each other and we are all judged ... whatever the like criteria is on whether it is being in the right kind of relationship or having the right kind of family or going on the right kind of vacations there is so much codes of ... stories about belonging and in any environment um ... I think like ... I think gender is just one aspect of judgment which is like ... um ... like a bedrock of which sexuality and race and class and all of these other like signifiers or isms can also float alongside ...but gender is like ... it is never going away

particularly if we have any kind of intersectional analysis we realize that white articulate Anglophone educated trans people like me are rare and super privileged

there's a couple of really big intersectionalities ... one is class one is growing up rural ...these have influenced the foundation for my gender presentation

masculine qualities that are valued in a rural working class space ... is the masculinity that I want to encompass. In my gender expressions as masculine I need to be useful and competent; y'know build shit out of salvage and fix the shit

There are social rules for our behaviour tied to our gender, ethnicity, class, and any number of other arbitrary identifiers, and breaking these rules often has life-changing consequences

caring deeply about the earth and the web of all life is actually all connected to my gender and identity. I can't fragment off parts of myself and call one 'gender' and the other 'caring'

Intersectionality is an important aspect of this conversation on non-binary gender identities. Something that I heard both implicitly and explicitly in these interviews was that gender identity is not separate from personal identity. It is impossible to separate out one part and say that this one part is exclusively gender. Gender identity is influenced by the social locations of the person and their lived experiences. Having trauma in childhood impacts gender, as does class, race, ability, education, personality, family of origin and so many other variables.

Summary

The themes in this research highlight the commonalities across eight stories of non-binary gender identity. These themes in no way intend to try and capture the entirety of what it means to have a non-binary gender identity. As discussed in this section, gender identity is an inextricable aspect of identity, and cannot be summarized by the simplicity of these seven themes. Nevertheless, the themes identified in this section exemplify the common experiences that I heard in the stories of non-binary gender identities. I do not intend to encapsulate the non-binary experience within these seven

theme. What I hope is that this discussion identifies some of the prominent characteristics and patterns that were discussed by my co-researchers in this study.

In the next section I will discuss how the findings of this research study can be implemented into academic discourse and the practice of psychotherapy. This research fills a gap in the current discourse on gender from within counselling psychology, where the gender binary has previously been the lens from which gender is discussed. This is an important step forward to make academic dialogue more inclusive of diversity. In a field of study that supports the research-practitioner model, it is imperative that the discourse (research) is reflective of what happens in the social world. The counselling psychology scholarship is a place that practitioners go to get information on how to support their clients. Currently, and unfortunately, the non-binary population is invisible and silent. My research challenges this and adds a unique and new way of discussing gender with the goal of including all genders.

CHAPTER 5 DISCUSSION

This study was done to try and understand the lived experiences of people who identify as having a non-binary gender identity. Current discourse in academia has omitted this population, groups them with transgender/transsexual populations, without understanding the differences between non-binary and other gender diverse identities. Using a narrative method allowed me to give voice to the co-researchers so they could tell me (and you) their story, and experience. This method allowed the co-researchers the opportunity to tell their story, unencumbered by traditional quantitative rubrics like questionnaires and prior assumptions. A narrative research method was an important choice, as so little is known about this population.

In this section, I will begin by discussing how the main findings of this research (discussed in Chapter 4) relate to current theory on gender, discussing both the similarities and differences. I will speak to how my findings reflect the knowledge that is already known, how my findings support prior research, where my findings diverge from prior research and what unique and original perspectives this research offers. I will then examine how this research can be applied to the study and practice of counselling psychology and used in training and education of psychotherapists. Lastly I will discuss future research directions, including what topics and questions might be useful directions to pursue, what issues have yet to be explored and also what limitations this study endured. I will conclude this chapter with final comments about this research study and dissertation process.

Research contributions

This study provides the reader with a comprehensive exploration of the lived experiences of people who identify as having a non-binary gender identity. Although each person's story is unique, there are a variety of commonalities across the narratives. The main themes (discussed in Chapter 4) highlight the most prevalent overlaps that I discovered as I listened to the stories and analyzed the data. These themes are: threats to welfare, gender as a social construction, the body as a gendered object, gender performance, coming out, community/support and intersectionality. Although these themes reflect some previous research and theory in the conversation on gender diversity, the themes also present a new and unique way of discussing gender. How these research findings reflect the knowledge that is already known, and how they provide a new perspective will be discussed next. How the data from this research relates to each of the theories discussed in Chapter 3 will also be discussed.

MST and this research

Minority stress theory (MST: Meyer, 1995, 2003) asserted that people who belong to minority and/or marginalized social groups tend to experience higher levels of stress and are more likely to experience negative life events. Meyer argued that this tendency towards stress and undesirable life events is due to living with a minority identity and goes beyond the stress and difficulty that is experienced by people belonging to dominant social groups. The stress that minorities experience can cause health problems including negatively impacting mental health.

The four areas that MST argued are impacted are: experiencing external environmental stress, expecting stigma, internalized heterosexism (referred to as

internalized stressors for this research) and identity concealment and/or identity management. Because this theory has been used in the past with sexual minorities, some of its tenets are not directly applicable to gender diverse people. Next I will discuss the ways in which this research project supports MST and then discuss the ways in which this research adds a new and unique perspective that this theory is unable to capture.

Each of the four tenets of MST are somewhat supported by this research project although the data in this project discuss aspects of identity that are not covered by MST. The first aspect of MST “experiencing external environmental stress” is supported in this current research particularly within the first theme identified in Chapter 4 – “threats to welfare.” Consistently across narratives I heard the co-researchers speak to a variety of different experiences that I would conceptualize as external environmental stress including violence, oppression, discrimination, abuse and rejection from loved ones. The second aspect of MST “expectation of stigma” was also supported by this research project. My co-researchers shared stories about being afraid of rejection or stigma, and discussed how living with a non-binary gender identity made them more susceptible to discrimination. This was discussed in the themes threats to welfare, compulsory conformity, coming out and intersectionality.

The third aspect of MST, “internalized stressors,” is supported in this research, although these data offer a limited support in this area of MST. Some of the co-researchers spoke about internalized transphobia directly, while others spoke about their gender identity as something they were ashamed of before they came out and openly identified as non-binary. The co-researchers did not underscore constructs such as present-day shame, internalized transphobia, or internalized heterosexism. Most of the

internalized stressors were discussed as historical, and not current. For the people in this research, coming out as trans/non-binary was discussed as a way of liberating the internalized stress (for example, internalized transphobia). Lastly, the “identity concealment” tenet of MST is somewhat supported in this research, although the support is weak. The support comes from the themes “coming out,” “gender performance,” “compulsory conformity” and “threats to welfare.” The co-researchers in this study spoke of concealing their trans/non-binary identity in certain places to increase their feelings of safety and reduce their exposure to harm. Co-researchers explained the concept of “passing” as their identified gender, and some discussed this as a milestone to achieve; while others rejected the notion of passing. Similar to the internalized stressors aspect of MST, this aspect is only somewhat applicable to the population in this study, and relates more to their pre-coming out than their current identity as non-binary. Due to the intrinsic differences between sexual and gender diversity, MST is limited in how it can be applied to gender diverse populations.

Another aspect of the trans/non-binary experience that MST fails to capture, is the stress of having to constantly explain one’s gender identity to other people. This involves explaining a name change, pronoun choice, and appropriate languaging. Many of the co-researchers in this research spoke about the frustration they felt having to constantly explain their-selves to their friends and family. Furthermore, the co-researchers spoke about being misgendered, which is a microaggression specific to gender and not sexual minorities.

MST offers a theoretical perspective about what it is like to live as a sexual minority in a heteronormative culture. The data in this study are not fully explained by

MST due to the difference between sexual identity and gender identity. One main difference that is critical to identify here is that a person's sexual identity is easily concealed, whereas a person's gender identity is often public. The data in this research indicate that a large part of gender identity is how gender is performed in social space. This makes gender identity an inherently public aspect of identity. Sexual identity is quite the opposite, and is performed (mostly) in private spaces making it much easier to conceal.

MST offers a helpful viewpoint to explain some of the challenges and stressors that come with living as a minority; however as discussed above it is limited in its applicability to this population. Although some authors have suggested that MST be applied with gender diverse/trans populations, for the reasons discussed above, the fit of MST with the findings of this research project is limited.

Doing gender model and the findings of this research

West and Zimmerman's Doing Gender model (discussed in Chapter 3) argued that gender is something that is "done" or "performed" and that it is done in the presence of other people, who are understood to be observers. They see gender as part of social interaction, rather than belonging to the individual who is doing the gender. This model of doing gender is supported by some of the data in this research. The themes in this research that align with the doing gender model are: compulsory conformity and gender performance. The theme compulsory conformity outlines how the people involved in this research spoke about gender as a requisite binary that feels forced. Many co-researchers indicated that they saw this binary as unnecessary and limited. This is similar to some of the arguments from *Doing Gender*, where the authors indicate that the binary is overly

simplistic. Lastly, the theme of gender performance from this research is closely aligned with the *Doing Gender* model. The theme on gender performance had the people in this research discuss how their gender was “done” or performed, and how gender is limited in its tangibility until it is performed in a social arena.

Although the *Doing Gender* model is well-supported by some of the data in this research; the *Doing Gender* model is limited in its ability to fully capture the experiences of gender identity discussed by the co-researchers. One major limitation of the *Doing Gender* model is that it fails to explain the complexity of experience that is associated with identifying as non-binary. The *doing gender* model is focused on gender as a performance, and is broad in its discussion of gender; understandably given that it is a sociological theory of gender rather than one of identity.

Gender socialization theories and the findings of this research

A variety of gender socialization theories were presented in the literature review. They will be explored as a group here to discuss how my findings are congruent with and divergent from their conceptualization of gender socialization. My findings reflect the experiences of people who identify as non-binary/trans and current models on gender socialization fail to include gender diversity in their discourse. Socialization models of gender argue that people learn about gender through social interactions, and dispute the argument that gender is biologically determined. These theoretical perspectives assert that the immediate family (caregivers, siblings) has a significant impact on how young people learn about gender roles. Language, clothing, behaviour, and non-verbal communication are all examples of how gender roles are implicitly and explicitly learned and taught. Although these theoretical perspectives are a helpful way to understand the

development of gendered knowledge, they are limited in that they do not discuss gender diversity, transgender/transsexual development or gender beyond the binary. In short, gender socialization models are heavily skewed towards a heteronormative/cisgender audience and are limited in how they align with the current research. Furthermore I would argue that they continue to perpetuate stigma for people who do not identify or participate in the normative systems of heterosexuality and cisgenderism.

One aspect of this research project that reflects the knowledge purported by gender socialization models, is that gender is something that is learned by social interaction. The people in this research identified that gender is a performance, done in a social space, and that they learned about gender by comparing their gender to the gender of others. Many of the people in this research stated that they learned about their gender by doing it wrong, or experiencing negative events like bullying, harassment, or rejection. Although gender socialization models do not acknowledge gender diversity, their argument that gender is a social construction, and learned through social interaction is reflected by the data in this research.

Queer theory and the findings of this research

Judith Butler's contributions to queer theory (1990, 2004) were discussed in the literature review, and some of the findings from this study reflect her arguments about gender. Namely the concept of gender performativity (similar to the *Doing Gender* model), and how the compulsory gender binary system is not an accurate reflection of individual identity. Furthermore, Butler speaks about intersectionality, and how gender is one part of individual identity being informed by many different identity variables (class, race, religion, education, age, ability, etc). These data also include aspects of

intersectionality, and gender performance. Although Butler speaks to the compulsory gender binary as being problematic, she fails to recognize the degree of marginalization that occurs when people live their lives outside of this binary on a regular basis, and the ongoing systemic oppression that occurs at many levels.

Transgender/genderqueer theory and the findings of this research

Transgender theory (TGT) offers an important contribution to the discussion of gender diversity in that they speak to privileging both the internal and external experiences of gender. The data in this research are aligned with the TGT in that gender was identified as both a performance, and as an internal experience. The themes of compulsory conformity and gender performance line up with TGT's assertion that gender is an external or social experience. The theme of coming out is aligned with TGT's assertion that gender is also an internal experience. Furthermore the research focus in this dissertation was on the experiences of people who identify as having a non-binary gender identity; the focus on identity being reflective of the internal quality of gender.

TGT's rejection of the gender binary is understandably supported by the findings in this research. TGT argued that the either/or discourse is dated, and that gender could also be seen as both/neither. Furthermore, TGT's argument that gender is not inherently linked to sexuality is also supported by this research. In the next section I propose a model of gender that builds on the work of TGT and the data from this research to provide a visual representation of gender.

Lev's transgender model and the findings of this research

Lev's transgender model is an important contribution to the research on gender diversity. Although her model is not totally supported by the findings in this research, there are some aspects that align and are worthy of discussion.

Firstly, Lev's model is presented as a developmental model that requires the person to pass through one stage before arriving at the next. This does not give space for gender to be something that is renegotiated and re-defined as some of the people in this study noted. Secondly, her model seems better fit to binary-identified populations as there is a point on transition and post-transition/integration. Although she indicated that physical transition is not required, her model seems to be geared to populations of people where this is relevant.

The themes in this research that do align with her model are coming out, community support and the body. Lev indicated that the process of identifying as a trans person involves discovering this identity and then communicating it to others and seeking support that lines up with the themes of coming out and then community/support. She also indicated that transition might be part of the process, and although her focus on transition is too specific for the population in this research, she is speaking (in part) about the body's role in gender identity, and this research had a theme devoted to issues of the body.

Although the Lev model was a very important contribution to the research on transgender and gender diverse identities, many of the stages in her developmental model do not fully apply to the population in this research and as such only somewhat align with these findings.

Unique perspective of this research – a new way to conceptualize gender

There are many shared experiences of the non-binary identified people who participated in this study, these are summarized as the seven themes discussed in Chapter 4. The model that I propose here is to provide the reader with a visual conceptualization of gender and sexuality based on the findings of this research.

The co-researchers in this study had common experiences however; there was nothing common about their gender identities, other than they used the word “non-binary” as one way of labeling their gender. For the co-researchers, there was no common pronoun, no theme of masculinity or femininity, and no common sexual orientation. This tells me that each co-researchers in this study had their own experience of gender, which was influenced by an infinite number of variables for example SES, ability, education, body construction all things that can change and evolve with time. If other aspects of our identity can change over time, why can't gender? Gender cannot be captured with a list of traits that would be inclusive of everyone's identity. Based on this, I propose that the construct of gender be seen as infinite, rather than a quantifiable. Some prior conversations on gender have rejected the binary, and included third, fourth, maybe fifth gender “boxes.” I propose that we let go of attempting to measure the immeasurable and view gender as one aspect of identity that is unique, dynamic, and infinite.

When we view gender as infinite, especially in the trans conversation, we can take away gender as a destination. Although Lev's (2004) model is an important contribution to the trans conversation, her model does not give a person the opportunity to define and redefine their gender; thus allowing gender to evolve. As the people in my study demonstrated, gender is not a destination, but an ongoing exploration. This might be

specific to the population who identify as non-binary, or this could be everyone's experience; future research could address this.

This conceptually is quite simple: gender is limitless. Each person has their own gender, and we don't know very much about it unless we talk to them about it. We can sometimes guess what natal sex a person is, but regardless of chest shape or the amount of facial hair, we do not know someone's gender identity unless they share that information with us. Despite simplicity, practicing acceptance of gender fluidity is incredibly challenging because gender is entrenched so deeply into our culture in so many ways, language being a very powerful example.

The gender binary is imbedded in the English language. We label people with male or female pronouns. We call people who give birth "mothers" and people who provide sperm "fathers." We say "Ladies and Gentleman, Boys and Girls" without hesitation. We have pictures of people in dresses on bathroom doors, and expect that people know which door they are "supposed" to use. We buy blue paint when there is a penis and pink when there is not a penis. We call people we have never met "lady" or "sir" based on so many assumptions that may or may not be aligned with that person's gender identity and/or preferred language.

Deconstructing gender, and creating space for gender identity to be as varied as we are as humans will take a massive cultural shift including shifting our language, clothing, toys, associations, expectations, and public spaces including washrooms. It seems we are on the edge of a major conversation change around gender, and I propose that we make it simpler, not more complicated. Below is a figure that displays a simplistic model of gender based on what I have learned through this research. This

figure is a visual representation of the range of gender identities. There is a multi-coloured spectrum (to indicate the limitless quality of gender) with two sides. One side is the internal experience of gender, or the private gender identity. The other side is the public performance of gender including the body. On the inside of this multi-coloured circle is an infinity symbol with the masculine and feminine on each side.

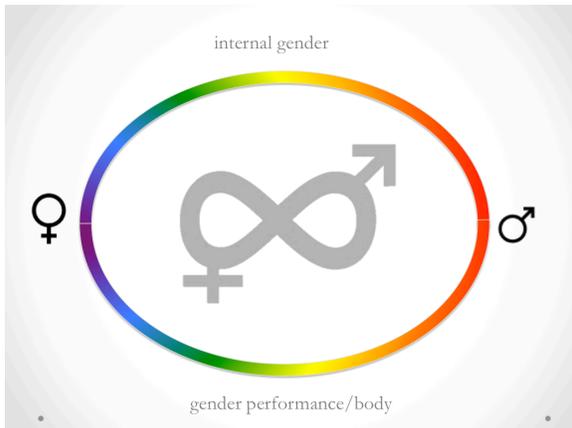


Figure 1 Proposed model

A summary of this figure is this: gender identity is infinite. Masculine and feminine are the end-point containers for how we language gender however gender exists far beyond these two options. The outward appearance of the body and the performance of the gender may or may not align with the internal gender of the represented person.

What we can do with this model is start to become more aware of our language, the assumptions we make about people, and deconstruct the binary that we continue perpetuate. This is to be inclusive of all humans, regardless of their gender.

As discussed in the literature review in this manuscript, prior literature in counselling psychology does very little to add to the dialogue on gender diversity (N. Smith, 2010). Davidson (2007) discusses the difference between genderqueer and

transgender people arguing that genderqueer people may not identify as transgender because the gender binary can feel compulsory from within the transgender community. Despite this publication from 2007, very little has changed in the discourse from within counselling psychology and the discussion of non-binary gender identities is still very rare.

In their discussion on the experiences of coping and distress in genderqueer individuals (n = 64), Budge, Rossman and Howard (2014) argue:

counselors generally lack knowledge and awareness of genderqueer individuals, despite the fact they make up a large section of the gender-transgressive community ... beyond understanding terminology, it is vital for counsellors to gain a solid conceptual understanding of binary systems and their impact on genderqueer identity (p. 96)

Despite their discussion of gender diversity and inclusion of non-binary gender identities Budge Rossman and Howard's research does not explore the non-binary gender identity, but an aspect of living with this identity: coping and distress.

This current manuscript makes an important contribution to the gender diversity discourse from within counselling psychology by exploring in-depth the experiences and intricacies of living with a non-binary gender identity. The next section will discuss the applications to counselling psychology practice and how this research can inform practitioners and academics working in the field of counselling psychology and beyond.

Applications to counselling psychology practice

The common factors literature (e.g., Falkenström, Granström, & Homqvist, 2014; Wampold, 2000;) consistently presents the field of counselling with evidence that the

therapeutic alliance is the best predictor of positive outcome in therapy, far beyond any technique, theoretical orientation, or intervention that is used. My suggestion that psychotherapists, counsellors, and other healthcare workers see gender as an infinite construct, is allied with this literature on therapeutic alliance. Building a therapeutic alliance involves just seeing a client as they are, and work to build a relationship with them, based on how *they* identify, and not based on *our* assumptions. This involves staying curious and open about someone's gender, and not making assumptions based on what is physically observable. When we work with gender in this way we see it as a self-defined aspect of identity with infinite options, unique to each person and that it is different than natal sex. For example, when we meet a client who is mixed race, we don't assume their sexual orientation; if their sexuality is relevant to their therapeutic work, then we will explore that together. So, if you meet a client who has facial hair, do not assume their pronoun or gender identity; if their gender is relevant to the work, it will emerge and we will learn what we need to know. Historically the body and gender have been tantamount and it will demand ongoing attention for practitioners to untangle this unnecessary and problematic web.

For many clients, gender might have nothing to do with their presenting issue for therapy and may not be part of the therapeutic conversation. For others, our willingness to stay open, careful and aware of how we use gendered language this might be a large part of what helps the client to feel safe and trusting in the therapeutic relationship. I have two suggestions for psychotherapists: an internal shift and an external shift, these will be examined next.

The internal shift that I suggest exists on an individual level. This shift requires an acceptance that gender reaches far beyond the male female binary. This is not an easy concept to grasp. To truly understand this means to look at all the ways in which you gender the things in your life. Have you ever questioned your own gender? How do you know what your gender is? What are the assumptions that you make about others' genders? Do you gender people in public without knowing their preferences? (for example using "he" for someone ahead of you in line at the coffee shop). Chances are you do it all the time without even noticing; many people do. I am inviting you to start noticing.

This act is radical and requires ongoing self-reflection. It demands acknowledgement of how much you have been shaped by gender role socialization based on the construction of your genitals at the time of your birth. This internal shift that I am inviting all of us to undergo is something that we will have to do everyday. It is not a place to arrive, but an attitude to adopt.

The external shift requires actively ungendering objects, space, and language. As psychotherapists, language is one of the main tools of our work; as such it is one of the most powerful places that we can make this shift. Ungendering our language and undoing the expectations that we place on bodies gives *all* clients the freedom to be who they are, unencumbered by the limits of the binary gender system.

This starts by changing the language and questions that appear on intake paperwork. When you have a form that says "Gender: M ___ F ___" what are you actually asking? If you are asking about identity, a more inclusive way of asking this question would be "Gender: ____." If you are curious about the person's natal sex,

perhaps pause first and ask yourself if this is an appropriate question. Knowing the construction of a person's genitals at the time of their birth is largely irrelevant to most psychotherapeutic work.

Then it means asking people their preferred pronoun and understanding how to use that pronoun, clarifying where you are unsure, and integrating preferences into your language without over-focusing on it. As the data in this research indicate, language is one of the most salient ways that gender diverse people can be supported. If, for example instead of referring to “the little girl inside” you could say “the little person inside.” Another example, instead of saying, “when you were a little boy” you could say “when you were little.” The language that we use is a critical way that we can offer our support to gender diverse clients, and to all clients.

In addition to language, another aspect of being an inclusive psychotherapist is ungendering spaces, for example bathrooms. This can be done by knowing the location of the nearest gender-neutral bathroom, and/or lobbying to have more accessible bathrooms part of your workspace, if they aren't already. Currently in Vancouver, public agencies including the Vancouver School Board and the Vancouver Parks and Rec Board (CBC, 2015; Posadski, 2014; Woo, 2014) are exploring how to make bathrooms more inclusive of gender diversity so this issue spreads far beyond the practice of psychotherapy.

The internal shift (accepting that gender is not a binary) must precede the external shift (awareness of language, ungendering public space). Once an individual openly recognizes the countless qualities of gender, they can then integrate more inclusive practices into their work (and life). This is a paradigm shift, and similar to other historical paradigm shifts it will take time. I invite the reader to consider where in their

life these values can be implemented, and am grateful that you are willing to read these words.

Counselling and other health-related training programs

During my training at both the masters and doctoral levels in counselling psychology I was not exposed to any discourse on gender diversity (including learning nothing about transgender/transsexual populations). In conversation with other counselling and psychotherapy professionals trained in North America, this lack of discussion on gender minorities (and other minorities) seems to be the trend. I believe curriculums must be updated, so we can train new therapists to offer inclusive, ethical and supportive psychotherapy to all clients of all genders and other diverse identities.

Unfortunately, I learned very little about all types of diversity in my training program. I believe that this gap in training could be addressed by adding a course on intersectionality with different topics such as: class, race, religion, sexuality, gender, and ability. Adding a course only on gender would miss these other intersecting identities, and miss the concept of intersectional oppression.

This increased awareness around how to use language to be more inclusive of gender diversity, will have an impact on how we use assessment tools. Firstly, ungendering the language on intake paperwork, assessment tools, and how we use language with clients provides inclusion for all genders. Secondly, we need to work into our assessments an awareness of how living as a minority might impact functioning. If we are sensitive to the fact that gender diverse people (and other minorities) face threats to welfare at higher rates than cisgender people, then we might be more sensitive to the context for their presenting issues and/or levels of psychopathology.

I believe that this type of training would benefit all healthcare professionals including but not limited to: medical doctors, social workers, nurses, psychotherapists, physiotherapists and occupational therapists.

Professional development

Most of the psychotherapists, medical doctors, social workers, and other healthcare professionals that I have interacted with since beginning this research admit to knowing very little if anything about gender diversity. For current practicing healthcare practitioners who have not received training in how to offer sensitive care to diverse populations, participating in professional development to augment their knowledge would be an important step to increased inclusivity in medical and healthcare. A genderqueer person may not be seeking gender-affirming medical procedures, and simply want to visit a physician for a routine pelvic exam. If we change our language to say “people with vaginas” rather than “women” then we are being inclusive of gender diversity without making assumptions about bodies. How inclusivity can be integrated into the practice will be specific to the specific profession and the type of care that is offered.

Future research

This study explored a new way of thinking about gender diversity. The research in this area is so limited and future research exploring gender diversity is expected to be useful to make further contributions to this unexplored terrain. I have a few suggestions for future directions that would be of use at this time, and offer helpful contributions to the dialogue on gender diversity.

More qualitative research exploring the diversity of gender identity is crucial. Before we begin to do larger sample size quantitative research, we need to know what

questions to ask – we simply need more information. Research that explores gender diversity, gender identity, and the diversity with trans communities is needed. Testing the model that I propose in this chapter would be another avenue of interesting research.

Another direction of future research would be to explore beliefs, practices and values about gender among counselling professionals. Although I make some suggestions and offer directions that people in the field of counselling can use in their practice, I am uncertain, at this point, if my suggestions are appropriate for the field at large, because I am uncertain as to what some of the mainstream values are within the topic of gender.

Lastly, research is needed to explore the experiences and identities of gender diverse people of colour, ethnic diversity, different abilities, and classes. Given that intersectionality was a theme in this research, understanding more clearly how gender intersects with a variety of other identity issues, is important to move this conversation forward, and to be inclusive of all people. Currently, much of the literature in this domain involves white people, and this perpetuates racism, making people of colour, ethnic minorities, differently abled people, and people of lower-class less visible and with less voice.

Limitations

There are a few notable limitations of this study. First that the sample was not racially or ethnically diverse. Future research exploring trans people of colour would be an important contribution to this discussion. Additionally, future research exploring other intersecting axes of oppression (race, class, gender, sexuality, religion, geographic location, age) would be of benefit to this topic. Another limitation was the size of the sample. Although the method allowed in-depth narrative accounts from each co-

researcher, and is appropriate in size given the chosen method, eight is still a relatively small number of participants. This topic necessitates future research to provide the field with more information and to continue to explore the complexity of gender identity.

Concluding remarks

This dissertation has felt like a radical act. I have noticed along the way how people seem to have so many assumptions and attachments to gender. I have noticed people respond to my research with discomfort, celebration, ridicule, humour, disregard and a variety of other things. *Disregard* has unfortunately come most consistently from people within academia. This has made my research challenging, painful, isolating and powerful. If the reactions are so polarized and strong, then this must be an important project.

Gender is not a light topic. It is so heavily entrenched in our culture at every corner. We participate in the compulsory gender binary most of the time, simply by using public washrooms, using language, having desire, and wearing gendered clothing (curious what section did you purchase the underwear you are currently wearing?). It is inescapable. I hope that by doing this project, and by completing this dissertation that a small shift in the way we discuss and work with gender happens.

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APPENDIX A RECRUITMENT POSTER

Do you have a non-binary gender identity?



If you are:

- 19 years of age or older
- Self-identify as having a non-binary gender identity
- Fluent in English

Then you may be eligible to participate in a study exploring the stories of people who identify as having a non-binary gender.

Clare Cayley, PhD Candidate is conducting this study as part of their doctoral studies in Counselling Psychology at The University of British Columbia. Dr. Marla Buchanan is supervising this study.

Contact Clare for more information:

Phone: [REDACTED]

Email: [REDACTED]

a place of mind



THE UNIVERSITY OF BRITISH COLUMBIA

APPENDIX B INFORMED CONSENT

Consent Form

Stories of Non-Binary Genders

Principal Investigator: Dr. Marla Buchanan
Faculty of Education
Department of Education, and Counselling Psychology, and Special Education
[REDACTED]

Co-Researcher: Clare Cayley
Department of Education, and Counselling Psychology, and Special Education
PhD Candidate
[REDACTED]
[REDACTED]

Thank you for your interest in participating in this research project that will explore the experience of people who identify as having a non-binary gender. Clare Cayley (co-researcher) will carry out this research as part of the requirements for completing the Doctor of Philosophy degree in the Department of Counselling Psychology at the University of British Columbia. The following document outlines the study and information about participation. If you require any further information please contact Clare Cayley [REDACTED]. My supervisor is Dr. Marla Buchanan who can be reached at [REDACTED].

STUDY PURPOSE

The purpose of the study is to learn more about people who identify as having a non-binary gender identity. We are hoping to learn more about non-binary gender identities through the stories that people share about their gender(s).

STUDY PROCEDURES

Consenting to participating in this study involves three interviews with the co-researcher. The total time for these procedures could range from 5-7 hours. The location of the interviews is flexible. We can reserve a private space at The University of British Columbia, or choose a different location that works for you.

Interview 1:

During the initial interview I will go over the procedures for this project going over the specific details and answering any of your questions. At the end of this interview I will ask you to reflect on your experience of living with a non-binary gender identity.

Interview 2:

During this second interview that could last between 1-3 hours, I will invite you to share your story of your gender identity. This interview is unstructured in that I will not have a set of prepared questions to ask you. However, I may ask you to clarify statements, or I may ask you to elaborate on things you share. **This interview will be audio recorded.**

After this interview co-researcher Clare Cayley will prepare a transcript for you to read through. You will be asked to do four readings, and the details for this will be explained during Interview 1. All materials will be provided.

Interview 3:

During this interview you will go through the four thematic readings of the transcript with co-researcher Clare Cayley to ensure that your voice has been accurately represented. You will be invited here to make any changes including removing or adding information. **This interview will be audio recorded.**

After this interview you will be invited to write a story of your gender. This story can come in whatever format you like.

STUDY RESULTS

The results of this study will be reported in a graduate thesis and may be published in journal articles or books.

POTENTIAL RISKS

There are no known risks associated with being involved in this study but some people may find that it is uncomfortable to disclose personal information to an interviewer. In addition, discussing past experiences can sometimes bring up painful or difficult feelings. If you feel that you need to process your experiences and feelings during or after this study, you will be provided with referrals to counselling agencies that are known to be queer and gender-diverse safe.

POTENTIAL BENEFITS

Some people find that discussing aspects of their life in an interview format can be a positive experience. Having someone hear and respect the story of your gender might feel empowering.

CONFIDENTIALITY

Your identity will be kept strictly confidential within the limits of the study. This means that only the principal investigator and co-researcher will have access to the audio recordings from the interviews. The audio recordings will be recorded on co-researcher Clare Cayley's password protected computer. All documents will be identified only by code number and kept in a locked filing cabinet in the home of co-researcher Clare Cayley. All computer data files will be password protected. Only the co-researcher and principal investigator will have access to the data. Files will be held for five years in a locked cabinet at The University of British Columbia after which they will be destroyed. You will be asked to use a pseudonym to ensure no names or identifying information will be included in the final report. Quotations from your interviews may appear in the reports of this research study, although all identifying information will be removed to ensure your privacy.

CONTACT FOR INFORMATION ABOUT THE STUDY

If you have any questions or desire further information with respect to this study, you may contact Clare Cayley at [REDACTED] / [REDACTED] or my research supervisor Dr. Marla Buchanan at [REDACTED].

CONTACT FOR CONCERNS ABOUT THE RIGHTS OF RESEARCH SUBJECTS

If you have any concerns or complaints about your rights as a research participant and/or your experiences while participating in this study, contact the Research Participant

Complaint Line in the UBC Office of Research Ethics at 604-822-8598 or if long distance e-mail RSIL@ors.ubc.ca or call toll free 1-877-822-8598.

CONSENT

Taking part in this study is entirely up to you. You have the right to refuse to participate. If you decide to take part, you may choose to withdraw at any time without giving a reason and without any penalty.

Your signature below indicates that you have received a copy of this consent form for your own records.

Your signature indicates that you consent to participate in this study. You do not waive any of your legal rights by signing this form.

Participant signature Date

Printed name of the participant signing above

Witness signature Date

APPENDIX C RESOURCES FOR CO-RESEARCHERS

Catherine White Holman Wellness Centre
South Hill Family Health Centre
202-1193 Kingsway, Vancouver BC
604.442.4352
contactus@cwahwc.com

QMUNITY
Main location:
1170 Bute Street, Vancouver BC
Accessible location:
610-1033 Davie Street, Vancouver BC

resource@qmunity.ca
604.684.5307 ext. 100

Vancouver Coastal Health Transgender Health Information Program
A BC-wide information hub providing access to information about gender affirming care and supports
www.transhealth.vch.ca
Local: 604.734.1514
Toll free: 1.866.999.1514

Prism Services - Three Bridges Community Health Centre
Prism is Vancouver Coastal Health's clinical, education, information and referral service for the lesbian, gay, bisexual, trans, queer and Two Spirit (LGBTQ2S) communities.
Three Bridges Community Health Centre
1292 Hornby Street, Vancouver BC
604.658.1214
prism@vch.ca