

**Developing Individual Accords: How transgender people negotiate
their knowable gender identities, changing bodies, and culture, to live
in and alongside the cisnormative gender order**

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Abstract

This study analyses the lived experiences of transgender people who seek to negotiate and develop congruent gender identities within, against and alongside predominantly cisnormative (gender identity matches sex assigned at birth) and binary (male/female) conceptualisations of gender in contemporary Western society. Using the framework of queer sociology and trans identity theory, I employ constructed grounded theory methodology to inform my analysis of 18 interviews with Australian transgender men and women across a broad age range and from diverse socio-economic and geographic locations. In doing so, this study engages with and illuminates the complex process of on-going negotiation involving an individual's knowable gender identity, gender identity as performed by and embedded in bodies, and gender identity as defined and produced by culture. Such movement means that while transgender participants in this study often use binary and static identity language to describe their experience, they live lives that express cisnormative, transnormative *and* genderqueer identifications and practices. Participants demonstrate agency by developing individual accords or understandings that honour their knowable gender identity and their complex positionalities in relation to the cisnormative binary gender order. This project thereby sheds light on and expands our understanding of diverse transgender identities by foregrounding how transgender people's lived experiences of gender identity are relational and contextual. Their lived realities testify to the reductive nature of binaries—whether the nature versus culture binary, cisnormative versus genderqueer, or the stable versus fluid gender identity binary—as a lens for understanding or explaining the production of gender identity. This study reveals that, far from constituting a rigid structure, the cisnormative binary

gender order is subtly but routinely managed by transgender people via complex gender practices that demonstrate agency and resistance against its hegemony.

Statement of Candidate

I certify that this thesis is entirely my own work and that I have given fully documented reference to the work of others. This thesis has not been submitted for assessment in any formal courses of study.

Margaret Jean Kelly

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Dedication

This thesis I dedicate to my dearest friend and conversational partner Helen. Thank you for your forever curious mind, intense intellect, black humour, courageous take on life, and for devoting these gifts to this project and our friendship. For the hundreds of hours of conversation we shared, for your unwavering belief in me and this study, and for always being available to talk through and challenge my thinking, I thank you.

Chapter One

Introduction

Gender is precisely a social relation that is embodied in certain ways, one that refers to (although it is not determined by) reproductive distinctions between bodies. It requires us to think of social embodiment as an active, changing historical process, not as a matter of fixed categories for bodies. What has always been shocking about transsexual transitions is that they reveal simultaneously the depth of embodiment and the force of the social process in a single life. (Connell, 2009, 108)

This thesis explores the lived experiences of 18 Australian transgender people, most of whom identify with a male or female binary gender identity. The participants in this study do not wish to dismantle the gender binary but, rather, negotiate a way to affirm congruent identities within, against, and alongside the existing cisnormative gender system that privileges individuals whose gender identity matches the sex they are assigned at birth. To do this, the participants develop individual agreements or accords about their gender identities in order to make sense of their “unique positionalities” (Keegan, 2020c, 389), which are comprised of changing transgender bodies, sexuality, social locations, and interactions with other social actors within the existing gender order. Riggs (2013) refers to the individual’s resolution of these complex inter- and intra- negotiations as “self-representations” (66). These “self-representations” (Riggs, 2013, 66) or what I call accords are not a straightforward acquiescence to a binary, cisnormative gender order that delegitimises “people’s own understanding of their genders and bodies” (Riggs et.al., 2020). Rather, participants in this study say that they know who they are and that this sense of legitimacy contributes to their on-going development of individual accords or understandings determined through life-long negotiations between their knowable gender identity, their bodies, their culture, and interactions with other social actors.

The term culture, in the context of this thesis, refers to the social process made up of the values, beliefs, expressive symbols, and typical practices and patterns of relating that comprise the ways of living that characterise a particular society. Connell (2009) directs attention to the symbiosis of such a “force of the social process” (108) with the “depth of embodiment” (108). Transgender people’s life stories illustrate their on-going negotiations with their changing bodies, the force of their culture, and their knowable sense of gender—whether that be “deeply felt” (Prosser, 1998, 79) and/or self-constructed or self-determined (Nagoshi et. al, 2010) —as they affirm their gender identities. On page eight, I extend the understanding of what is meant by a knowable gender identity. Bodies and culture, or the social process, work together as co-creators of gender identity and while some participants in this study use binary language and conceptions of static identity to describe various locations they inhabit in this on-going process, the analysis of their stories illuminates gender identity not as a fixed point of arrival but as something that is dynamic and characterised by movement. This thesis recognises a tension between the binary language participants often use to describe their identities, and the fluid identity evident in their experiences. The thesis works to reflect this tension through respecting and following the participants’ own terminology even as their life stories illuminate the movement and dance of transgender identities. These participants’ stories demonstrate the complexity of transgender people’s identities and offer us the opportunity to think in more nuanced ways about cisnormativity, gender identities, genderqueer practices and the interrelations of bodies and culture.

The study aims to provide a platform for the voices of 10 transgender women and eight transgender men from a wide age range and from different socio-economic and geographic locations in Australia. It contributes to and expands the existing literature on trans identities by focusing on an understudied group: transgender people who adhere to the gender binary. My study aims to add to and thereby broaden theoretical conceptualisations of transgender identities and embodiment and approaches this aim from a standpoint epistemology. I apply a qualitative constructed grounded theory methodology in the analysis of in-depth interviews with 10 transgender women and eight transgender men from a wide age range, from 22 to 83, and from different socio-economic and geographic locations in Australia. The transgender participants in this study illuminate differences in life experience and attitudes that change over time to do with gender and sexuality, as well as differences in opportunity and healthcare support. The application of this methodology foregrounds transgender people's lived realities over theoretical conceptualisations of how gender is produced, and thereby expands sociological scholarship on transgender people's life experiences and fosters a broadening of current scholarly perspectives on normativity, gender identities, and embodiment.

Approach Taken in this Study

I situate this study in the context of moves since 2014 to expand transgender studies to include more scholarship on the lived experiences of transgender people. These moves are the result of change over several decades. Before the 1990s, scholarship on transgender people identified and labelled "transsexuality" as a treatable condition and approached gender diversity as pathological (Schilt and Lagos, 2017). The term *transsexual* emphasised a person's medical transition from one

gender to another. Since the 1990s, the term *transgender* has become the preferred term as it is inclusive of all gender diverse people whether or not they use hormones and/or surgery to affirm their gender identities. Further, as part of the trans movement's focus on transgender rights and law reform, and the need to gain public speaking positions, transgender scholars and activists strategically foregrounded a singular, transgressive transgender identity (Stryker and Aizura, 2013).

Queer theory emerged at the same time as the rise of the transgender movement in the 1990s and contributed to the homogenising and “queering” of transgender identities (Johnson, 2014). In order to understand how gender was used to sex bodies and regulate sexual behaviour and so challenge the dominance of heterosexuality, Butler (1990/2010) proposed a theory of how gender identity was produced. They argued that gender identity was performative, meaning that it was brought into being through repeated performances of cultural scripts rather than coming from the body or any related natural essence. In this schema, a body is sexed male or female through being linked to repeated performances culturally coded as male or female. The normative purpose of these males and females was reproduction. The resulting heteronormative order naturalised the relationship between particular bodies and gender roles, normalised heterosexual reproduction, and pathologised any other sexual expression or gender presentation.

In their efforts to deconstruct the hegemony of the cisnormative gender order, queer theorists, building on Butler, analysed sexuality and gender diversity by incorporating transgender people's narratives as examples of resistance (Chaudhry, 2019; Hines, 2006; Keegan, 2020a). The concept of cisnormativity was developed to directly

address the problematic hierarchy of value in which gender identity is conflated with a sexed body, and cisnormativity is naturalised. Consequently, identities and bodies that do not conform to this norm are pathologized. Some transgender scholars were concerned that such incorporation positioned transgender identity as the “site in which to contain all gender trouble” (Stryker, 2004, 214) and that “any form of perceived nonnormativity” (Keegan, 2020a, 351) was encompassed within the queer project. In turn, trans people whose gender identities were perceived to be normative attracted the descriptor transnormative and were excluded. In this context, Glover (2016) defines “transnormativity [as] a process shaped by adherence to respectability politics, heteronormative standards and class privilege” (340). Further, Johnson (2016) argues that transnormativity disciplines transgender experience into a “hierarchy of legitimacy that is dependent upon medical standards” (465). The resultant hierarchy obscured the reality and diversity of transgender people’s lives and replaced the hierarchy of values assigned to gender identities within heteronormativity with an alternative and potentially just as problematic hierarchy of value (Adair et al., 2020; Bey, 2021; Chu and Drager 2019; Keegan, 2020a, 2020c; Nicholas and Agius, 2018; Roen, 2001; Wiegman and Wilson, 2015).

The lack of attention within queer theory to the particularity of lived experience resulted in a lack of scrutiny of the specificity of many transgender people’s lived realities, both the “subjective experiences that constitute difference” (Hines, 2006, 50), and the real-life circumstances and risks endured by some transgender people (Namaste, 2000; Stryker, 2004; Whittle, 2010). To address this omission and offer an alternate approach that would provide a framework for “exploring subjective, material and embodied experiences of difference” (Hines, 2006, 63), Hines called for a

sociological perspective. She proposed a *queer sociology* that contextualises queer theory's insights about the role of culture and performativity in reference to the embodied realities of transgender people's lives. Queer sociology is thus an analytical framework that respects queer theory's deconstructionist anti-normative position and the notion of gender as fluid as well as sociological approaches that study lived experience and relational subjectivities. These subjectivities include some transgender people's understanding of gender as constative, and their experience of bodies as constitutive—as transgender “embodied knowledges” (Ellasante, 2020, 421).

The constitutive element of bodies in becoming of gender identity is a central focus in the study of new materialism. New materialism argues that matter is conceptualised as existing in the act of mutual doing, of intra-action with culture, meaning that biological bodies and their associated social norms and significance are entangled, inseparable, and interactive (Davis, 2009; Gunnarsson, 2013). This notion is in line with Connell's (2009) observation that transsexual people's transitions “reveal simultaneously the depth of embodiment and the force of the social process” (108) where the social process is understood to be culture. According to this notion, bodies and culture are co-creators in the interactive process of becoming of gender identity. As such, new materialism is relevant to discussions of the sex/gender binary, sexual difference, and how bodies are embedded with social signification and how they respond, comply or reject such signification. In sum, bodies have agency in the interactive process of the temporal engagement with their social environment (Fausto-Sterling, 2000).

Accordingly, this study takes a queer sociological approach to transgender people's lived experiences that draws on new materialism's insistence on the role that bodies play as co-creators with culture in the production of gender identities. Transgender people's lived realities demonstrate that there is no singular or universal transgender identity. Consequently, the theoretical division between normative and non-normative identity is a false dichotomy. Rather than fixed categories, transgender people's experiences reveal relational complexity and movement of socially contextual identities (Halberstam, 1998; Moriel, 2005; Pearse, 2018) as they navigate multiple gender and sexuality hierarchies (Halberstam, 1998), while maintaining a commitment to a knowable gender identity, whether that be as Prosser (1998) describes as a "deeply felt" sense of gender identity (Prosser, 1998, 79) and/or a self-determined or self-constructed sense of gender identity (Nagoshi et. al., 2010). Halberstam gives the example of a butch identified person who is biologically female and who at times is recognised as a man and at other times as a butch lesbian as evidence of multiple and intersecting gender and sexuality hierarchies and the taking up of "multiple sites for becoming and being" (1998, 21). A queer sociological perspective allows for consideration of such intricate negotiations undertaken by transgender people in their relations with others and takes their lived experiences as the most central component of understanding gender identity.

The theoretical framework of this thesis extends queer sociology (Hines, 2006) by including the notion of new materialism (Gunnarsson, 2013)—with its emphasis on the body's inseparable interaction with culture or the social process—and incorporating trans identity theory. Trans identity theory recognises that transgender identity is developed in multiple locations simultaneously, and by the integration of

embodiment, social construction and self-construction (Nagoshi and Brzuzy, 2010). Trans identity theory (Nagoshi et al., 2013) draws attention to the importance of physical embodiment when considering gender and sexual identity and highlights how the fluidly embodied aspects of identity interact with the socially constructed, and self-constructed or self-determined aspects of identity, and how such integration is developed within transgender people's narratives of their lived experience. Queer sociology together with trans identity theory is a useful theoretical approach to studying the movement, complexity and diversity evident in transgender people's life stories.

Trans identity theory defines a self-constructed or self-defined aspect of gender identity (Nagoshi et al., 2013). This definition implies a constructed, conscious determination, a conscious knowing. And yet, some of the participants in this study talk of a "heart felt sense" of gender identity (Cora, 55) or an always present and persistent "inner voice" (Lena, 83). These participants' descriptions are in line with Prosser's notion of a "deeply felt" (1998, 79) sense of gender identity, implying an emotional awareness or sense of knowing. For some transgender people, their self-defined or constructed sense of identity is a cognitive choice, but for others, such as some of the participants in this study, they describe a commitment to a "heart felt" (Cora, 55) or sense of a knowable gender identity. In this thesis, I refer to both the self-determined and "deeply felt" (Prosser, 1998, 79) senses of gender identity as a knowable sense of gender identity. Transgender people both emulate and challenge the binary, cisnormative gender order, depending on desire, need, access to treatment, ability, and social context. As such, the transgender people in this study describe experiences of on-going socially contextual identity choices, even as they hold firm to

a knowable sense of a gendered self. Transgender people aim to make sense of these sometimes-conflicting interactions by negotiating individual internal understandings, “self-representations” (Riggs, 2013, 66) or accords. Their complex narratives thereby force a rethink of what it means to be socially embodied by scrambling supposedly fixed categories of gender and sexuality as well as binary and hierarchical notions that characterise cisnormativity and transnormativity (Keegan 2020c).

Aware of their tenuous social position and the experiences and insights gained through their life journeys, some transgender people may develop a heightened sensitivity to others’ reactions with respect to gender expectations. Connell (2018) documents her increased awareness of the everyday social influence of gender, stating that being a transgender woman makes her “more aware of the tension and complexity in real-life gender patterns” (2018, 334). While all social actors are immersed in the hegemonic cisnormative gender system, transgender people’s unique positionalities and life experiences may sensitise some to the complexity of gendered relations even as those who wish to and can be read as cisgender are recognised by others as being within the gender system. As Schilt (2006) argues, transgender people who maintain this insider/outsider standpoint are endowed with a unique perspective on the contradictions of dominant groups and the structures that support them. My study explores the unique standpoint and perspectives of transgender people’s inter- and intra-relationships and their negotiations with the structures and institutions that encompass social life. This exploration foregrounds the inherent value of the contribution transgender people make to our understanding of gendered human relations by showing that the movement of multiple, socially contextual identities revealed in their narratives are inadequately addressed in current theoretical notions

that collapse into binary, fixed, and hierarchical identity categorisations (Adair et al., 2020). While some participants in this study use binary language and describe static identity locations, their narratives reveal, and this thesis recognises, gender identity as movement and constant negotiation. This project demonstrates that the lived experience of transgender people expands theoretical considerations to include the scrambling of categories, the movement and relationality of identities, the commitment to a gender identity, and the agency of bodies.

Research Questions

Following Birks and Milles (2011), I contend that research questions for grounded theory should be problem-centred and developed from the standpoint of those with lived experience of the specific phenomenon in question. In seeking to understand how transgender people's identities, bodies, and culture relate, I am guided by the following questions:

- How do transgender people navigate everyday social interactions with family, friends, intimate partners, work colleagues, institutions, and social structures?
Is this different based on historical context and their age?
- How do transgender men and women negotiate the affirmation of their gender identities through these social interactions?
- How do participants renegotiate their social locations, understanding of the gender order, and position within it?
- What do transgender people's negotiations reveal about the rigidity or historicity of the gender order, the role of bodies and culture, and the actualisation of gender identities?

These questions are addressed in the thesis by analysing the lived experiences of transgender participants through a queer sociological perspective, which encompass notions of the fluidity of identities and the interactive and constitutive components of social interactions. This study finds that participants' negotiations reveal socially contextual movement of identities that are not static or fixed. Stryker (2004) cautions, however, that the focus on movement and relationality must not be at the expense of the specificity of the trans person's lived reality. Pearce (2019) refers to this specificity as resolvable movement or the attainment of the wish to live within normative and binary categories of male or female. My study broadens theoretical conceptualisations of transgender existence to include such resolvable movement of multiple identities and challenges the potential for reification of identities.

This study's findings may benefit gender diverse people through the sharing of stories of others who negotiate the actualisation of their gender identities as they interact with other social actors. It is my hope that this project's nuanced understanding of transgender people's identities, ignited by their own narratives, will enable a deeper understanding of transgender identities, how bodies and culture interpolate, and prompt further questioning and probing of the constitutive role of normativity in the organising frame of the gender order.

Thesis Structure

This thesis is divided into three broad sections. The first section, comprised of Chapter One and Chapter Two, introduces the topic and research questions to be explored, the significance of the study, and engages with the relevant literature, current theoretical debates, key concepts, and where this project is positioned within

this field of study. The second section, Chapter Three, covers the project's methodology, aims, and details the research methods. The third section, Chapters Four through to Eight, details the study's findings. Each of these chapters focuses on one of the interrelated components of the production and negotiation of transgender people's gender identities: the social force of cisnormativity (the normalising and privileging of gender identity that matches a sexed body and the related idealisations of binary masculinity and femininity); the institutional force of cisnormativity and of transnormativity as discussed in Chapter Five; the depth of embodiment and the body's role as co-creator with culture in the becoming of gender identity; and being read as cisgender and the ways in which self- and other recognition are relational. These interrelated components emerge from the participants' narratives that address the research questions detailed earlier in this chapter.

Chapter Four explores participants' lived experience of gender norms and the associated expectations of behaviour and personal presentation. The chapter examines how these expectations are enforced through social pressure, how expectations change according to historical and social context, and the ways that transgender people learn about other people's and their own perceptions of gender expectations associated with bodies, and the policing of gender by other social actors. This chapter establishes the essential backdrop for the study by discussing participants' navigation of their lives, their commitment to a knowable gender identity, and their interactions with family and friends as they develop from childhood to adulthood. This foundation is necessary to understand how cisnormativity is policed and achieves/maintains hegemony.

Chapter Five develops the analysis of the relational construction of cisnormativity through examining transgender people's interactions with health professionals, legal

structures, and government policy institutions. It illuminates the institutional enforcement of “the master narrative of cisnormativity” (Bradford and Syed, 2019, 306) as well as the ways in which transgender participants find agency and negotiate for their own gender affirmation by resisting or conceding to this.

Chapter Six focuses on the role of embodiment and argues that bodies are the site where gendered expectations are projected, enacted, lived, and negotiated.

Transgender people in this study perceive their bodies to have a form of agency and feel betrayed when, at puberty, their bodies defy their gender identity. In seeking gender affirmation, participants assert agency over their bodies to bring them into alignment with their knowable gender identity. As their bodies change, and via interactions with other social actors, participants become sensitised to gender expectations associated with their altered embodiment. The chapter explores how participants manage the inextricable intertwining of bodies and cultural expectations of gender in their on-going social interactions.

Chapter Seven explores the practice of “passing” or being recognised as cisgender by others and by the self. In participants’ pre-transition lives, recognition by others, which constitutes a matter of personal survival, takes precedence. As their bodies change during the process of transition and they recognise their bodies as more congruent with their knowable gender identity, participants balance their need for self-recognition with that of recognition by others. There is much at stake in this process: self-recognition means self-acceptance and recognition by others results in social and professional acceptance and potential for success, as well as heightened personal safety.

Chapter Eight explores the way in which, as transgender people's bodies change, so too do the social locations and power associated with their more aligned gender identities. I analyse the ways that participants make sense of their new social status and allocation of power through negotiating individualised accords in which they reconcile their personal values, life experience, and circumstances with cisnormative gender expectations.

Chapter Nine, the concluding chapter, synthesises the key findings of this study and discusses the ways in which transgender participants' lived experiences expand our understandings of how gender identities are produced. It discusses the ways in which a queer sociological approach to transgender people's lives centres their voices and experiences and expands knowledge about them.

Chapter Two

Engaging with the Literature

This project is concerned with key research questions about how transgender people negotiate their changing bodies, gender expectations, social locations, and the actualisation of their gender identities through interactions with family, friends, sexual and romantic partners, work colleagues, institutions, and structures. The study asks: What do these negotiations reveal about the function of gender norms, about how bodies and culture relate, and about the actualisation of identity? This literature review is framed by these concerns and the concepts they generate such as cisnormativity, transnormativity, transgender identities, genderqueer practices, and the roles of bodies and culture.

An understanding of these concepts and how they relate to this study requires a review of what scholars have said about what it means to be a transgender person. This review leads on to an examination of three debates in contemporary transgender studies. These three debates include i) transgender identities and lived experience; ii) the knowability and stability of gender identity, specifically of a “deeply felt” (Prosser, 1998, 79) sense of gender identity and/or a self-constructed or self-determined (Nagoshi and Brzuzy, 2010) sense of gender identity; and iii) the agency of the body and the relationship between the body and culture or the “force of social process” (Connell, 2009, 108). This exploration is followed by a discussion about how these debates, concepts, and tensions are explored in this study, where this project is positioned within this scholarly discourse, and the contribution it makes to new knowledge in this field.

What Transgender Studies Scholarship Says About What it Means to be a Transgender Person

Transgender scholars and activists who founded the field of transgender studies challenged essentialist beliefs in biological differences between men and women as separate groups that naturalised and normalised gender difference, a binary sex/gender system, cisgenderism and heterosexuality (Bornstein, 1994; Feinberg, 1992; Stone, 1991; Stryker, 1994). Cisgenderism describes a system that “delegitimises” (Riggs, et. al., 2020, 32) people’s experiences and beliefs about the relationship between bodies and genders. These scholars and activists recognised the diversity of such relationships and transgender identities. Stone (1991) implored transgender people to be visibly active and vocal and advocated for diverse and complex expressions of gender identity, arguing that such diversity would challenge and resist normative gender identification and presentation to a degree that could transform the existing, problematic, cisnormative gender order. Similarly, Stryker (1994) argued against static gender binary norms being imposed on bodies, the medicalisation of the transsexual body, and the transsexual person’s need to adjust the body to meet transnormative expectations. Further, Stryker encouraged all people—transgender and non-transgender—to examine the “seams and sutures” in themselves and thereby see that all gender identity is constructed (1994, 241). At the same time, Stone admitted the social force of transnormativity and did not expect individual transgender people to forego their desire to live within cisnormative gender expectations in an effort to revolutionise the gender system. Aiming to create an inclusive transgender movement that welcomed people who wished to dismantle the gender order and those who wanted to construct a life within and alongside its

borders, Feinberg (1992) popularised the term “transgender”, and later “trans”, as a way of bringing together all gender diverse identities with a shared experience of marginalisation.

By critiquing the notion of congruent, stable identities and stable oppositional binary gender categories, these scholars and activists recognised the existence of a spectrum of transgender identities. Bornstein (1994), who used the pronouns her and their, described her/their personal experience of transition from male to female and the realisation that she/they felt neither male nor female. Rather, Bornstein depicted her/their experience as the movement of multiple, “limitless” identities that last for “any length of time, at any rate of change” (1994, 51). Bornstein argued that “there are as many truthful experiences of gender as there are people who think they have a gender” (1994, 8). Expanding the notion of the movement of multiple identities, Halberstam (1998) conceptualised identity locations in multiple and simultaneous hierarchies, and movement of identities among and beyond locations in these hierarchies. Giving the example of *stone butch* as one location on sexual hierarchies, Halberstam (1998) reveals different hierarchies of gender and sexuality and the ways in which gender and sexuality can intersect. According to Halberstam (1998), butch dykes are perceived to have masculine qualities and male transvestites could be perceived to have feminine qualities. For butch dykes the way that their gender and sexuality intersect creates an identity that is not confined to one place on a hierarchy that devalues queerness but values maleness. At the same time, Bornstein thought that transgender people who identified as male or female were traitors and so embraced, by contrast, transgender people who refused to identify with the existing gender system. Bornstein and Bergman (2010) titled their book “Gender Outlaws” after these

transgressors of the gender order, laying the groundwork for the privileging of transgender identifications that refused cisnormativity.

Goffman (1963/1986) assesses being recognised by others as a relational social achievement, as a collective performance in everyday interactions, and a technique for escaping social stigma and social isolation. Goffman's conceptualisation is a preface to and in dialogue with Butler's (1990/2010) notion of performativity. Butler (1990/2010) theorised gender as performative, in that it is constructed and reified through on-going social interactions, bringing a sexed body into being by the repeated practices of performing cultural scripts and the associated meaning assigned to bodies. In Butler's formulation, gender is not an inherent essential quality aligned with biological sex. Rather, gender is the repetition of an act that describes and reinforces societal norms. According to Butler (1993/2000), it is the striving for the idealised norm that constitutes the driving force of performativity; in this way, the subject is "cultivated by the norm" (1993/2000, 25). Prosser (1998) has read Butler's theory as dismissive of a "deeply felt" (1998,79) sense of gender by arguing that all gender is performative and "not expressions of prior internal essences" (Prosser, 1998, 28). Further, Prosser asks how "the slippage" (1998, 28), or implicit connection of the theory of gender performativity with queer and with transgression came about and argues that while Butler does not suggest that all transgender people are queer and therefore subversive, Butler's theory does lay the foundation for the "syllogism: transgender = gender performativity = queer = subversive" (Prosser, 1998, 29). Other scholars have argued that Butler's theory, and by extension queer theory, enlists all transgender people in an anti-normative project and silences transgender people, like Cora (55) who is committed to a "heart felt sense" of gender identity, and who wish to

live as cisnormative men or women some or all the time (Bey, 2021; Chu and Drager, 2019; Hines, 2010; Keegan, 2020c; Namaste, 2000).

Seeking to acknowledge and account for experiences of lived physical transition, Prosser (1998), Nagoshi and Brzuzy (2010), Namaste (2000), and Rubin (2003) warned that theory grounded purely in discourses of anti-normativity erased some transgender people's lived realities. Subsequently, Hines (2010) called for more research to focus on everyday lived experiences to identify transgender people's daily and consequential on-going series of choices that are "materially, culturally, socially and spatially contingent" (2010, 598). These on-going series of choices mean that demarcation lines between identifications are blurred, and people who identify as queer can, simultaneously, emulate cisnormative practices, and those who appear cisnormative may, at times, be queer in practice (Hines, 2010). Hines proposes a queer sociology framework to study this phenomenon. Queer sociology combines queer theory's push to question and challenge gender assumptions and constructs that inform life's choices with sociology's interest in subjectivities, lived realities, and everyday social interactions.

Queer sociology acknowledges the discrete embodied life experiences of transgender individuals and respects both the constraints and possibilities enabled by the individual's social relationships (Hines, 2006, 2010), and the collective social performance referred to by Goffman (1963/1986). Concerned for the socially embodied aspects that influence the lives of transgender people, Hines (2006) argues that a queer sociological lens reveals the "subjective, material and embodied experiences of difference" (2006, 63) so necessary when studying transgender people.

From this sociological standpoint, Hines contributes a queer theoretical position that explores the deconstructive potential of transgender identity but does not preclude the lived experience of transgender people for whom gender is substantive. Queer sociology aims to avoid a polarity of identifications and the danger of universalising all transgender identities, as cautioned by Kunzel (2014).

The synthesis of queer theory and sociology, or as Green (2007) would have it, a “misplaced effort” (2007, 27) to bring them together, however, reveals a major tension between the two epistemological premises. On the one hand, queer theory is committed to the notion that there is no locatable self, a “refusal to name a subject” (Seidman, 1993, 132), and a subjectivity that, according to Green, moves towards an analysis of self and subjectivity that is “radically disarticulated from the social” (2007, 27). On the other hand, sociology aims to understand relational subjectivity and privileges the lived experience of subjects. Green argues that queer theory, therefore, cannot exist as a theoretical framework for examining subjectivities “conceived from the sociological position of a knowable, socially constituted interior—that is, a self” (2007, 42). Thus, the existence of transgender people who are committed to a “deeply felt” sense of gender identity highlights the tension between queer theorists who see the expansive opportunities of the diversity and flexibility of unstable identities (Eng et al., 2005), and scholars such as Benavente and Gill-Peterson (2019) who argue that queer theory abstracts the lived realities and “material livelihoods” (2019, 26) of transgender people.

Trans identity theory, as developed by Nagoshi and Brzuzy (2010), evolved from Roen’s (2001) work on transgenderism and retains and expands on the assumed

either/or stance of the male/female binary to include both/neither identification (Roen, 2001; Nagoshi and Brzuzy, 2010). Trans identity theory encapsulates the diversity of transgender experience by “explicitly incorporating ideas of the fluidly embodied, socially constructed, and self-constructed aspects of social identity” (Nagoshi and Brzuzy, 2010, 432). In other words, trans identity theory argues for the recognition of an embodied aspect of the self, together with a socially constructed self-identity, as well as a self-constructed sense of gender identity. This is one of Nagoshi et al. (2013) major contributions as it develops queer theory’s postulation of identity as constructed entirely through performativity without precluding transgender people’s lived realities. Hence, trans identity theory is useful when studying the complexity and diversity of transgender people’s lived experience and identities.

The conceptualisation of multiple transgender subjectivities as proposed by Halberstam (1998), Stryker (1994), and Stone (1991) opened the way for future theorisation to further develop the notion of movement and relationality of multiple identities. For example, Moriel (2005) argues that there are multiple transgender identities that comprise an on-going series of choices. Monro’s notion of gender pluralism addresses the problem of attempts to exclude from the transgender community those people who wish to live as male or female. A gender plural theoretical framework allows for the apparent contradiction of the social reality of gender together with the commitment to a “deeply felt” (Prosser, 1998, 79) or self-defined (Nagoshi et. al., 2010) sense of gender identity that compels some transgender people to change their bodies (Monro, 2005). The notion of gender pluralism understands the contradiction of the social reality of gender as constructed *and* some

people's commitment to a sense of gender identity and a need to transition to find a 'home', a sense of belonging in their transitioned body (Monro, 2005).

Pearce (2018) follows poststructuralist transgender studies scholars Monro (2005), Hines (2007), and Davey (2011) and links the exploration of discursive power with "an acknowledgement of the *material conditions* of trans health" (2018a, 8, original emphasis). Pearce brought together her personal experience of medical transition in her early twenties, her interest in the social processes that limit transgender health practices, and her work as a sociologist interested in the connection between personal and public issues. These combined interests have Pearce centre the lived realities of transgender people, rather than theorists' "debates over authenticity or transgression" (2018, 48). Pearce's study concerning the healthcare of transgender people in the United Kingdom allows for transgender people's life experience to be thought of as both condition *and* as movement. By the term *condition*, Pearce means the understanding of transgender identity as fixed and fixable, as clearly defined, and striving to fulfill the wish to live as normatively male or female. Pearce's characterisation of transgender identity as *movement* involves the possibility of changing and fluid gender identities and corresponds to the conceptualisation of gender fluidity foundational to queer theory. The understanding of transgender identity as movement includes the recognition that movement can be and is resolvable for transgender people who affirm themselves as male or female. Pearce stresses that condition and movement are not two distinct and separate life trajectories for transgender people but represent multiple, overlapping, and simultaneous possibilities. Pearce's inclusive approach embraces both condition-oriented identities with movement-oriented identities "incorporating transitions and diversities both

physical and social” (Pearce, 2018, 45). Such a resolution considers movement as both unresolvable *and* resolvable and sees condition-oriented identities in unison with movement-oriented accounts of transgender people’s lives.

Recent Scholarly Debates

The following three debates crystallise key components emerging from the literature as discussed in the previous section. These key components are the place of lived experience when considering the knowability of a “deeply felt” (Prosser, 1998, 79) sense of gender identity and/or a self-constructed or self-determined sense of gender identity (Ngoshi and Brzuzy, 2010), in relationship with the body and culture in the becoming of gender identity.

1. Lived Experience

Chu and Drager (2019), Hines (2010), and Keegan (2020c) argue that by privileging movement and fluidity, queer theorists have not fully engaged with the lived realities of all transgender people and have ignored and silenced those who wish to “resolve” (Pearce, 2018) such movement. Further, some scholars have expressed concern that queer politics enable exclusionary tactics by producing a new “norm” (Adair et al., 2020). Wiegman and Wilson (2015), for example, define the norm to be “a device that divides the world into centres and peripheries ... [and] that in collating the world, [the norm] gathers up everything” (2015, 17). Therefore, they argue that the norm covers every contingency, prompting them to query what then is anti-normativity? Butler (1993/2000) argues that normativity is an ideal and as such it is unattainable. This means that both those who challenge the norm and those who aim but can never achieve embodiment of the norm are in effect, non-normative.

Therefore, the criteria used for controlling the imagined transnormative/queer boundary is vague and unstable and, according to Hines and Chu and Drager, queer-identified can be transnormative in practice and transnormative-identified can be queer in practice.

Despite the ways in which what constitutes transnormativity can change depending on historical time period and place, some transgender people who identify as queer—where queer broadly connotes a rejection of binary categorisation in gender identity and/or sexual orientation—do not condone the inclusion of transnormative identified people in their ranks as they hold that these people deny the transgressive potential of transgender identities (Bornstein, 1994; Stone, 1991). According to this perspective, all transgender people should express their intrinsic potential to challenge constructed gender categories and cisnormative gender roles through rejecting binary identification. Proponents of this belief are convinced that by dismantling cisnormativity greater freedom and tolerance for gender ambiguity and fluidity will result. Indeed, Bornstein (1994) argues that transgender individuals who are not transgressive and identify as normative are acting out a lie, are in a state of self-denial, and are ascribing to the very system that pathologized their gender identity, forcing them to change their bodies as a prerequisite to fitting into the cisnormative gender order.

Bornstein's (1994) concept of transgender people as only and ever transgressive does not correspond with the lived experience of many transgender people who seek social acceptance to live and ideally to be read as their knowable gender identity, including via medical interventions (Elliot, 2010; Johnson, 2014). Knowable in this context

means to be observed and understood. These transgender people acknowledge cisnormativity, may undertake medical treatment, and make a series of socially contextual on-going choices to fit into or align with cisnormativity and at other times to challenge it. For other transgender people, they experience multiple gender and sexual identities and are on a journey of discovery, exploring, adjusting, and changing their gender identity and sometimes, their sexuality, depending on their life stage and experience. Australian transgender person Norrie May-Welby exemplifies such a journey. In 1989, May-Welby transitioned. She was in her early twenties and enjoyed the attention and admiration she received due to her feminine looks and behaviour. Yet she found that she did not fully fit a binary gender identity and, in 2011, she won a legal case in the High Court of Australia to be granted the legal status of no gender (Pitts, 2014). For individuals such as May-Welby who do not straightforwardly identify with the binary gender order, Sanger (2018) contends that there is a significant negotiation with cisnormativity and all its preconceptions about how gender and sexuality are defined in relation to bodies.

Notions of multiple gender and sexual identities evolved from the mapping of static identity points in a linear direction, such as Connell's (1987/2003) gender hierarchy, to multiple and limitless gender possibilities conceptualised by Bornstein's (1994), and Halberstam's (1998) multiple identities located on multiple, simultaneous hierarchies. This conceptual transformation is seen in the contradictions, inconsistencies, and socially contextual identities identified in transgender people's life stories. Rather than all transition stories fitting a single, linear progression from male to female or female to male, a linear narrative of "movement in/out of transition" (Shepherd and Hanckel (2021), 41), transgender people's stories as

examined in this thesis demonstrate movement and negotiation as on-going. Their identities are continually negotiated and re-defined by on-going choices (Moriel 2005).

Such experiences are mirrored in Fausto-Sterling's (2000) model of gender and sexual identities as points in multi-dimensional space and Pearce's (2018) conceptualisation of movement as both resolvable and unresolvable, or fluid. The movement of transgender people's identities are in relation to, and in constant negotiation with, other social actors, and these interactions are defined by the relational identities of the transgender person and the other social actors at that time, and in that social context. In consideration of the socially relational component of lived experience, Nagoshi et al. (2013) propose their trans identity theory that integrates notions of the "fluidly embodied, socially constructed, and self-constructed aspects" (Nagoshi and Brzuzy, 2010, 432) of identity as expressed in the transgender person's life story. Nagoshi and Brzuzy (2010) argue that their trans identity theory "encompasses and transcends feminist and queer theory" (2010, 432) by neutralising the privileging and idealising of queer identified transgender voices. Such privileging has been a flashpoint between some feminists, including transgender feminists and queer theorists, and between queer-identified transgender people and other transgender individuals (Elliot, 2010; Hines, 2006, 2010; Nagoshi and Brzuzy, 2010; Johnson, 2007).

Arguing against the idealisation of queer identified transgender voices, Chu and Drager (2019) propose that the "critical value of the transsexual lies precisely in her being an *obstacle* to romantic narratives of anti-normative queerness" (2019, 103). Such idealised and romantic narratives deny the "materially, culturally, socially and

spatially contingent” aspects and regulatory practices that constrain the everyday lived experience of transgender identities (Hines, 2010, 597). Schilt and Lagos (2017) contend that the silencing of this experience has the effect of denying the wide spectrum of socially contextual identities and practices among transgender people and ignoring the insights and learning such experience may reveal. Hines (2010) and Kunzel (2014) caution that insisting on queer as an umbrella category for all transgender people, with the subsequent subsuming of individual differences, risks the reification of some identities, the ultimate denial of difference, and the reinstatement of yet another binary, that of transgender and not transgender enough.

The reduction of transgender identities into either transnormative *or* genderqueer identified, and the assignment of a comparative value runs the risk of minimising the intricacies of social interaction (Johnson, 2014). Such minimisation fails to acknowledge the individual enculturated social circumstances and experiences of each transgender person and their individual journeys of self-discovery through life experience. Hines (2010), Schilt and Lagos (2017), and Garrison (2018) argue for an appreciation of such individual life circumstances and an orientation towards an acknowledgement and respect for the rich diversity and contradictory narratives of transgender people. Indeed, Garrison reports more contradictory, “complicated, and boundary-challenging accounts” (2018, 21) of life experience expressed by transgender participants who align with the existing gender binary system than those who consistently identify as genderqueer.

Transgender people in this study, as with those in studies by Hines (2010), demonstrate that identification as normative does not preclude genderqueer practices.

Therefore, as proposed by Chu and Drager (2019), and confirmed by Garrison (2018), the study of transgender people who identify with normativity provides insights into the practice of gender and sexual norms and expectations and how they function. This study concurs with Chu and Drager's argument that "the most powerful intervention scholars working in trans studies can make ... is to defend the claim that transness requires that we understand, *as we never have before*, what it means to be attached to a norm – by desire, by habit, by survival" (2019, 108, original emphasis). The social consequence of attachment to gender norms is examined in Chapter Seven on recognition by self and others and in Chapter Eight which explores the advantages and disadvantages that accrue to bodies and associated norms.

2. Sense of a Knowable Gender Identity

Queer theory developed from a concern with the dominant conceptualisation of sexuality, and, in an attempt to reveal and deconstruct heteronormativity, queer theory conceptualised unstable identities and demonstrated a commitment to the "dissolution of the subject" (Green, 2007, 27). It has advanced an understanding of the way in which both sexuality and gender are made through the process of doing rather than existing prior to action. As discussed previously, the contrasting perspectives of scholars who have celebrated queer theory's expansive and inclusive possibilities (Eng et al., 2005) and those who have expressed concern that queer theory potentially obscures a reality in which some transgender people have a strong self-determined gendered self (Benavente and Gill-Peterson, 2019; Nagoshi and Brzuzy, 2010) and/or a "deeply felt" (Prosser, 1998, 79) sense of gender identity illustrate a tension over whether identity comes from a knowable sense of gendered self or is the result of repeated behaviours influenced by external factors.

This tension centres on the question of where gender identity comes from. Butler (1990/2010) argues that, up until the 1990s, the expressive identity hypothesis—where the individual believed their gender identity to be an expression of their innate sense—held sway. Butler offered instead a conceptualisation of gender as performative and not the expression of a prior “internal essence of gender” (1990/2010, 1998 Preface). Rather than existing prior to action and manifesting as an external expression of an internal feeling, both sexuality and gender are constructed through the process of repeatedly performing—or doing—they in line with external influences and expectations. During the 1990s, queer theorists developed these ideas into an understanding that rather than a self-contained natural human being free of societal pressure, the subject is, from its start, believed to be encrypted with social and cultural values and significance (Mansfield, 2000). In this conceptualisation, the subject is not an entity unto itself but rather a product of social rules, values and significance inculcated via the social pressure of living in society. Accordingly, our beliefs about gender identity, sexuality, and how we view our bodies, are not due to nature, nor a self-contained essence, but rather to social and cultural pressures, expectations, traditions, and politics (Mansfield, 2000).

Queer theory’s conceptualisation of where gender comes from presents a potential puzzle when considering a transgender person who has a powerful emotional awareness of gender identity and seeks to alter their body to better align with it. Prosser (1998) describes this as an “invisible but deeply felt” sense (1998, 79). Similarly, Rubin (2003) identifies an “immutable core self” (2003, 151), and Serano (2007) describes an innate sense of “subconscious sex” (2007, 27). For Prosser and

Rubin, the “deeply felt” (Prosser, 1998, 79) sense of gender identity described by participants in their studies—and echoed by participants in my study and detailed in Chapters Four and Seven—is so irrefutably strong that it is experienced as and firmly understood by the person to be a core. In turn, this powerful sense of a core gendered self motivates the reconfiguration of what Rubin describes as the less stable “flexible flesh” (2003, 151).

These apparent conflicts raise important questions. Does the queer theory concept that gender identity is a construction necessarily preclude the transgender person’s belief in and commitment to knowable gendered self? Is it possible to understand gender identity as a construction while simultaneously respecting some people’s firm engagement with a coherent sense of gender identity? Does Kirby’s (2002) notion of identity as “inherently unstable, differentiated, dispersed” and yet, simultaneously, “strangely coherent” (Barad, 2003, 828) help in this quest?

Nagoshi et al. (2013) notion of trans identity looks to address the questions posed above. This notion considers the embodied, socially constructed and self-constructed aspects of identity, with the self-constructed aspect specified as self-determined rather than a “deeply felt” (Prosser, 1998, 79) sense of identity. Whether self-determined or “deeply felt”, this self-constructed aspect is a knowable sense of gender identity.

Trans identity theory (Nagoshi et al., 2013) and queer sociology (Hines, 2006) are two theoretical approaches developed with the aim of finding a way towards exploring and understanding these integrating aspects of gender identity. They provide a potential path forward in transgender studies by considering the widely differing lived experiences and identities within transgender communities and the scholarship of transgender studies. These approaches encourage new pathways in

understanding gender identity, sexuality, self-identity, and embodiment in ways that, according to Stryker (2004) “gay, lesbian, and queer studies have not always successfully managed” (2004, 214). Hines contends that these new pathways consider the “tension” between the idea of gender as fluid and an alternative to gender normativity, and the subjective investment some transgender individuals have “*in* identity” (Hines, 2006, 64, original emphasis). In other words, Hines’ understanding of the investment in identity as subjective shows that queer theory is not in tension with transgender identities, and the queer sociology framework allows a way to decipher the apparent conflict between those who hold firm to the belief in a knowable gender identity and those who reject the notion of a gendered essence, believing gender to be fluid.

3. The Relationship of Bodies and Culture

Bodies are the location where sex organs and gender expectations manifest and are the point of interaction with other such embodied beings. A major contribution of the second wave feminist movement in Western society in the 1960s and 1970s was to disconnect biological sex from gender by distinguishing between the body as biological, and gender as socially constructed (Meyerowitz, 2004). In the early 1990s, however, some scholars and transgender and intersex activists began to question the notion that the body is stable and could only be thought of as biological. They proposed instead that the sexed body too could be considered social and therefore political (Butler, 1993/2000; Rubin, 1993). Scholars of sexuality turned their attention to the diversity of human sexuality. Historian Weeks (1981) and political philosopher Foucault (1978) brought attention to the social history of sexuality and so highlighted the way in which sexuality has been historically constructed rather than

existing as a fixed and natural essence. Rubin (1993) termed this conceptualisation a “constructivist alternative to sexual essentialism” (1993, 149). Nagoshi et al. (2013) argue that feminist theorists question the notion that “embodied aspects of social identities are essential” (82). In other words, whether the definition of an identity is independent of social construction or whether “such embodied experiences are only understandable in terms of social constructions” (82). Queer theorists consider all aspects of embodiment as socially constructed and, according to Nagoshi et al. (2013), “dismiss the idea that embodied experiences may, in fact, be determinative of identity independent of these socially constructed aspects” (82). This scholarly work on bodies, gender, and sexuality illuminates the complex relationality of human bodies and the ways humans think about their bodies relative to the cultural meanings, significance, and values attributed to them.

In the last 4 decades, the humanities and social sciences have turned attention to the human body, evidenced by, for example, the introduction of the academic journal publications *The Body and Society* (1984) and *Body and Society* (1995). In this vein, Prosser’s (1998) study brought attention to the physicality of bodies in transition, to the distinction and the interplay between the fleshy material body and cultural notions of sex and gender. Prosser sees this interplay as the essential logic of the transgender person’s need to radically change their physical body to better align with their “deeply felt” (1998, 79) sense of gender identity. Whether the body, sexuality, and gender are considered as separate or a combined unit or system as Fausto-Sterling (2019) argues, the body is the site where gender and sexuality intersect and are lived out. The body is the location where socially embodied beings interact with other socially embodied actors within a self-generated system of gender norms and strictures.

Prosser (1998) proposes that a transgender person's alteration of the material flesh means that it might be possible to resist the cultural meanings embedded or encrypted in the body. But is it indeed possible for the body to resist cultural inscription? If it is possible for bodies to resist enculturation, what does this mean for the interaction of matter and culture? In her essay "Throwing Like a Girl", Young (1990) understands the influence of gender normative dictates on bodies as a means of managing gendered access to power, resources, and opportunities. For example, in Western societies, women are generally discouraged from access to power reserved for some men. The misogynistic vilification of Julia Gillard when she was Australia's first female Prime Minister, 2010-2013, is one example of the ways that women are discouraged from assuming political power (Summers, 2012). Young details another means of discouragement in which she argues that enculturation operates to discourage and confine female comportment, motility, and spatiality in male-dominated society, and highlights the implications of this enculturation for women's sense of agency and power in Western society.

Understanding the implications of the interaction of embodiment and gender normativity is critical to any exploration of how changes to transgender people's bodies alter their social locations and interactions with other social actors. Bordo (1998) argues that to understand transgender embodied subjectivity, we cannot focus solely on the body and physical changes to it, separate from identity. Instead, Bordo calls for a focus on body *practices* when examining transgender identities (my emphasis). Body practices, such as control of the spatial environment, convey gender identity just as do secondary sex characteristics, such as facial hair for men and

breasts for women. A study by Johnson (2007) looks at the consequences for transgender subjectivity as transgender individuals undergo radical body modifications. Johnson uses the term “embodied subjectivity” (2007, 55) as a way to explore how the self is “*lived* through embodied practices” (2007, 55, original emphasis) that reflect the social and cultural values attached to bodies. Following her interviews with transgender women and men, Johnson concluded that “embodied subjectivity” (2007, 55) is both dependent on an understanding of bodies, and body practices, and is an ongoing process of “*becoming*” (2007, 55, original emphasis). The notion of *becoming*, employed by Barad (2003), foreshadows a new materialist scholarship and its conceptualisation of the intra-action of culture *and* matter.

To comprehend how social forces work to encrypt bodies, one must understand how bodies are open to such immersion and what, if any, agency they have in this process. To this end, Grosz (2004) asks how bodies are open “to cultural transcription, social immersion, and production” (2004, 2). New materialist scholars explore the interaction of nature and culture, of matter and discourse, of bodies and their social significance, and aim to correct the imbalance produced by what they see as poststructuralist theory’s privileging of the force of culture at the expense of bodies, which are assumed to be non-agentic matter (Barad, 2003; Hird, 2004; Lane, 2009). The reciprocal intra-action between culture and matter is a focus of Grosz’s work on the intersecting space where the “biological blurs into and induces the cultural through its own self-variation, in which the biological leads into and is in turn opened up by the transformations the cultural enacts and requires” (2004, 1). According to this conceptualisation, biology is not a determinant of culture, but rather it is an

enabler of culture, and biology and culture are *co-creators* in the materialisation of bodies in their social worlds.

New materialists recognise the agentic nature of matter, where matter is an “active participant in the world’s becoming, in its on-going interactivity” (Barad, 2003, 803). However, this focus concerns scholars such as Bruining (2016) who do not endorse the notion of nature as a unit with its own “identifiable agentic drives” (2016, 33). Responding to this critique, Barad (2003) stresses that matter does not over-ride culture. Rather, matter is conceptualised as existing in the act of mutual doing, of intra-action with culture, and Davis (2009) describes this inter-relationship as the essential “entanglement and non-separability of the biological with/in sociality” (2009, 67). Gunnarsson’s (2013) concept of emergence in reference to the co-creative relational connection between matter and culture transcends the dualism between “interconnected levels of reality” (2013, 17) and the reductionist temptation to overemphasise either relatedness or distinction.

The notion of bodies and culture as co-creators is relevant to discussions of the sex/gender binary, sexual difference, and bodies and their signification. Therefore, it is relevant to this project’s exploration of the embodied lived experiences of transgender people and prompts questions about bodies and embodiment such as those posed by Prosser (1998). These questions centre around the effect changes to a transgender person’s body has on cultural meanings embedded or encrypted in that body. Prosser asks if it is possible for the body to resist cultural inscription and questions what this means for the interaction of bodies and culture. Further, he asks what are the consequences for social structures, systems, and hierarchies that depend

on sexual difference to support the uneven allocation of resources when a socially embodied self is altered and with it its attendant social and cultural significance? Biological studies such as those by Fausto-Sterling (2000) and Keller (2010) show that the duality of sexual difference is “rooted in human and scientific conceptual schemas rather than in the biological facticity of organisms” (Jagger, 2015, 337). As such, the enforcement of the sex binary difference, the suppression of diversity, and exclusion of those outside the binary frame reflects a cultural preoccupation that applies signification to bodies. But, as Fausto-Sterling (2000) points out when exploring the material body’s temporal engagement with its social environment, bodies have agency. Butler (1993/2000), too, accepts “materialities” that relate to the body (1993/2000, 66), and references Fausto-Sterling’s work and her efforts to develop interactive models that explore how “a) biology conditions cultural life and contributes to its forms, and (b) cultural life enters the reproduction of our bodies at a biological level” (Kirby, 2006, 145). While Butler (2021) argues that humans cannot escape their culture, so too humans cannot escape their physical bodies.

Discussions continue regarding the proportion of effective agency of culture and bodies and their place and significance in our gendered social world (for example, see Barad, 2003; Jagger, 2015; Kirby, 2002). But Hines (2020) cautions that the turn to new materialism with its nuanced understanding of the intra-action of bodies and signification may be flattened by some to mean the return to traditional bio-essentialist understandings of the body. Hines notes that such a misreading has united some conservative thinkers and certain feminist activists who are intent on resurrecting gender binaries on the basis that gender may be fluid, but sex is not.

Applying Concepts and Addressing Tensions

Having interrogated the key debates, related concepts, and emergent tensions and themes identified in the literature, my study aims to foreground the complex narratives of transgender people's lived realities and consider them against these theoretical considerations. My study teases out inconsistencies, omissions, and conflicts between lived experience, individual understandings, and theory. For example, Lena (83), the oldest participant in this study, and whose story opens Chapter Four, demonstrates how perceptions of what constitutes normative gender roles are historically and socially contextual. The contextual nature of gender norms means that Lena appears cisnormative while simultaneously performing genderqueer practices. Lena's life experience demonstrates that gender may be knowable *and* fluid, and that bodies and culture are inextricably intertwined in the process of gendered becoming. The historically contextual nature of what constitutes cisnormativity and transgender people's lived reality of both adhering to and challenging cisnormative expectations are in tension with the emphasis by some queer theorist on a singularly anti-normative position.

Where I Position This Study in the Literature

The debates canvassed in the literature foreground the complexity of the lives of transgender people. This complexity is at the centre of my consideration of nuanced understandings of such rich diversity. First, this thesis orients its enquiry to that of social embodiment that respects the individual, historical, current, and changing circumstances of each transgender individual. Second, this thesis employs Fausto-Sterling's (2000) notion of gender and sexual identities as points in multi-dimensional space, actioned via Pearce's (2018) understanding of transgender life

experience as movement—including resolvable movement—and condition. These scholars' models help to visualise the non-linear journeys of exploration of gender and sexuality, the multiplicity of and socially contextual identities, and the movement among and beyond these points in multi-dimensional space while respecting some transgender people's commitment to a sense of a knowable gender identity. Third, this thesis proceeds from the notion of resolvable movement as one of the points in this model to account for what Stryker (2014) describes as the "specificity of the transsexual" (2014, 1).

The displacement and movement evident in transgender people's complex life stories challenges the use of linear, static, binary terms, such as genderqueer/gender-conforming, male/female, heterosexual/homosexual, and constructionist versus essentialist, as limiting and inadequate to the task of describing the relational, contextual movement of transgender identities, including the commitment to a felt gendered essence, and transgender people's understanding of the agency of their bodies. This study addresses the tension between theory and lived reality by exploring two theoretical demarcations: between cisnormative and genderqueer identification and practice, and between a knowable gendered self and the movement and relationality of multiple identities in social interaction. By so doing, this study contributes to a more nuanced awareness of the diversity of transgender people's identities, practices, and lived experiences.

Chapter Three

Methodology

This thesis examines the lived experiences of 18 Australian transgender women and men to understand how they negotiate their social worlds and how they recognise themselves and are recognised by others in those worlds. I am concerned with how these participants navigate, adapt, resist, and/or confront “the master narrative of cisnormativity” (Bradford and Syed, 2019, 306) and associated societal expectations of behaviour. Grounded in feminist standpoint epistemology, and employing constructed grounded theory methodology, I conducted qualitative research through semi-structured longform interviews with these transgender people. The following section restates the research questions, summarises the ethics approval process, and outlines the epistemological position and methodology of this study. This is followed by details of the research and analysis method, and my own positionality and reflexivity as the researcher.

Research Questions

My research is guided by the following key questions:

- How do transgender people navigate everyday social interactions with family, friends, intimate partners, work colleagues, institutions, and social structures?
Is this different based on historical context and their age?
- How do transgender people negotiate the affirmation of their gender identities through these social interactions?
- How do participants renegotiate their social locations, understanding of the gender order, and position within it?

- What do transgender people's negotiations reveal about the rigidity or historicity of the gender order, the role of bodies and culture, and the actualisation of gender identities?

Ethics Approval

The Ethics application for this project was submitted to the Ethics Committee for consideration at their 27 October 2017 meeting. The project received ethics approval on 13th February 2018 (see Appendix A).

Each participant was made aware of the Ethics Committee Approval for this study and supplied with a copy of the Participant Information Sheet and Consent Form (Appendix B) outlining the personal care and safeguards approved by the Macquarie University Ethics Committee. The letter states that the participant may stop the interview at any time, and it includes contact details of appropriate counselling services should the interview cause the participant any issues or distress. The letter stipulates that the interview is recorded, all data kept secure, and the participants' names changed to assure anonymity. The participant was asked to nominate a venue for the interview, a place where they would feel comfortable and safe to talk about their life experiences.

Standpoint Epistemology and Constructed Grounded Theory Methodology

I employed a standpoint epistemology for the project because it privileges knowledge gained through lived experience. Rather than an objective truth, standpoint theory considers knowledge to be situated in lived experience and relational through interactions with other social actors (Smith, 1990). As this study centres the lives of

transgender people, it sits within the remit of the standpoint approach that has been used to frame research projects focused on gender, sexuality, race, age, class, and studies in postcolonial research and the interconnectivity or intersectionality of these various social positions (Collins, 1990/2000; Harding, 2009; Yuval-Davis, 1999, 2006). My study follows Harding's (2009) call to focus on both inter- and intra-relations and the structures and institutions that encompass all social life. In sum, a standpoint approach acknowledges the intersectionality of multiple and sometimes contradictory identities and social positions that are forged and co-created in conjunction with institutions and structures. As such, a standpoint approach is a useful tool in the qualitative sociological study of transgender people, who are themselves aware of their differing social positions and the limitations and opportunities when navigating structures and institutions.

I have chosen life history interviewing as the method for data collection for this project, and base my decision, in part, on Plummer's (1983) contention that this technique elicits "the confusions, ambiguities and contradictions that are played out in everyday experiences" (1983, 68). Similarly, Jackson (2002/2013) sees storytelling as a way of simultaneously disclosing participants' subjective uniqueness and their intersubjective connectedness to others. Transgender people's subjectivities and interactions with other social actors, their inter- and intra-relationships, are the focus of this study.

To gain a holistic understanding of the participant's life narrative and how inter- and intra-relationships relate to it, I asked participants to discuss pivotal life events, including areas of conflict and people of influence. Participants' life story vignettes

introduce each of the finding chapters. Each story illuminates the main themes of that particular chapter, demonstrating that the thesis's thematic chapters were directly informed by the participants' life stories. In Chapter Six, for example, Cora (55) outlines her life trajectory from an only child in a working-class family with a violent father who enforced strict adherence to cisnormativity, through her lonely 20s, her father's death in her late 20s, her transition in her mid 30s, through to a self-aware and successful businesswoman, close friend to many, and much-loved life-partner. Documenting Cora's life and the struggles and choices made at every stage helped me gain a perspective that enabled me to appreciate what Plummer (1983) names the "sense of the totality of a life" (1983, 69), while at the same time acknowledging the conflicting, contradictory, and context specific experiences contained within that life. Following this example, I contextualised each transgender participant's life story so that I could understand and appreciate the entirety of that life, including, but not solely focussed on, their transgender identity. This wider lens allowed me to record, see, and comprehend the complexity of transgender people's lived realities.

Representativeness and Recruitment

Foregrounding participants' life journeys required recruiting people who have gained knowledge of the subject matter—transgender people's lived realities—from personal experience of their social world (Bryman, 2012; Plummer, 2001a). The criteria used to identify and recruit transgender people with the life experience to be studied are detailed in the following paragraphs.

Sample Size

In qualitative constructed grounded theory methodology, the depth of knowledge about the phenomenon being studied is the most important factor when deciding the number of participants to be recruited (Mason, 2010). I decided on a sample size of up to 20 participants (10 transgender men and 10 transgender women) because I calculated that this number of long-form interviews would be a large enough data set to describe the phenomenon, and small enough to allow for deep questioning and analysis of participants' narrative complexity (Mason, 2010). My decision was guided in part by Plummer's (1995/2004) experience when recording participants' sexual life stories. Plummer found that a small sample size provides adequate data to address the studied phenomenon, while simultaneously offering the opportunity for a depth of understanding demonstrating a sensitivity to diversities, differences, and contradictions. The sample size of 20 was reduced to 18 (eight transgender men and 10 transgender women) because, after re-confirming our appointment times and locations, two transgender men did not attend the interviews.

The recently retired director of the Carmen Rupe Trust, Kelly Glanney, assisted me in the recruitment process. Carmen Rupe was a transgender woman born in New Zealand in October 1936, who moved to Sydney, Australia, in the late 1950s. The Carmen Rupe Memorial Trust, set up after her death, perpetuated her legacy through charity work and community service to assist transgender people. Kelly forwarded my email outlining the project to transgender people in the database she established while managing the Trust (Appendix C). Recipients of the email contacted me if they were interested in learning more about the study or wished to be involved. Once participants indicated an interest, I confirmed their suitability according to the selection criteria (see below), offered more detail about the study, answered

questions, and arranged the interview time and place. One participant read about my study in an article written by one of my participants in the Gender Centre Newsletter and contacted me directly. In addition to the recruitment process outlined above, I employed the recruitment technique of 'snowballing' (Allen, 2017). From this recruitment method, one transgender man participant referred me to two other transgender men, one transgender woman participant introduced me to another, and one transgender woman from my 2016 study (Kelly, 2016) introduced me to a transgender man and a transgender woman.

Stipulations for recruitment of this group of transgender people were as follows.

- 1) Participants self-identified as transgender and identified with the binary gender order.
- 2) Participants were adults (18+) at the time of the interview. The reason for this stipulation is two-fold. First, I wanted to capture the scope and life experienced during adulthood. Second, for ethical reasons I did not want to interview adolescents who may be vulnerable because of their young age and identification with a socially marginalised group.
- 3) Participants were recruited from a wide age range (22 – 83). This range is a factor in this study as I explore how age differences affect life-experiences, beliefs, and attitudes. Older respondents grew up in a time of strict adherence to gender roles, little available information about transgender people's concerns and issues, and no effective role models. Younger participants talk of the advantage of having easily accessible information on the Internet, more general acceptance of gender diversity,

access to medical support, and the availability of, and easier access to, transgender role models and spokespersons.

- 4) Participants had to have transitioned at least 5 years before our interview and were therefore relatively advanced in terms of their processing of the psychological and social effects of transition. I based this stipulation on numerous studies that have devised models for the development of self-identity in transgender individuals (Devor, 2004; Gagne et al., 1997; Lev, 2009; Nuttbrock et al., 2002; Pollock and Eyre, 2012). These models comprise three to 14 identified developmental stages until the transgender individual reaches a point of acceptance of their gender variance. While these models do not stipulate a set time frame, they do provide a good general indication. This 5-year recruitment stipulation was helpful as the transgender participants had time to not only adjust to post-transition life but also to reflect on pre-transition life and compare the two.

Demographics

I recruited people from a range of geographic and social locations and ages to record if and how these life circumstances influence participants' beliefs, experiences, and inter- and intra-social interactions. A demographic table of participants can be found in Appendix E on page 291 of this thesis. This table summarises the similarities and differences in participants age and therefore life experience and their geographic location, either cosmopolitan or regional. The wide age range of participants in this study (22 – 83) gave rise to diverse responses that illuminated the social progress that has occurred during the past six decades and how this has impacted participants' life experiences. Health outcomes for people living in regional areas are not as positive as

for people living in metropolitan locations that offer better access to health facilities and this is particularly the case for transgender people. The exact number and demographics of transgender people living in regional and metropolitan Australia are unknown. Until the 2016 Australian national census, gender diverse people were not counted, and there was no way of recording a person's gender other than male or female. The 2016 census was the first to offer the gender identity option of "other", however, one had to apply via a special on-line form as this option was not included in the generally available print or on-line Census form. In the 2016 census, 1,260 people identified as other sex/gender. Twenty-six percent of these people identified as transgender male or female, and 13% identified as genderqueer transgender (Australian Bureau of Statistics Census of Population and Housing, 2016). The Australian Bureau of Statistics website cautions that these numbers are not considered accurate because of the extra effort required to complete this special on-line form, confusion in identification options, the fact that some gender diverse people do not wish to identify themselves as they have assimilated into the community, or they have suffered discrimination and abuse and are therefore wary of identifying themselves.

I extrapolated the main demographics in the general Australian population while taking account of participants' acknowledgements that transgender people tend to gravitate to and live in, or close to, city centres. The reason for this is access to transgender support services (such as the Gender Centre in the Australian context) and adequate medical and mental health facilities. As well, several transgender participants explained that there is wider acceptance of diversity and less discrimination in major cities. Accounting for the preference of transgender

individuals to live in or close to cities, 85% of participants were recruited from cities and 15% from regional areas.

The participants in this study represent a range of socio-economic groups with differing educational and economic backgrounds. Those who had a limited education and were in lower paying jobs, unemployed, or worked in the sex industry, lived lives worlds apart from those participants who had attained tertiary qualifications and held professional positions. The impact of belonging to different socio-economic groups not only influenced participants' lifestyles but also their transitions. Those with high disposable incomes could afford quality medical assistance, hormone therapy, and extensive and expensive alignment surgery. Such investment, in turn, impacted their ability to be recognised as cisnormative by other social actors. For those transgender people who wish to be recognised by others as their knowable gender identity, being read as cisgender comes with significant rewards, including acceptance and a sense of belonging with family, friends, and at work. Also, a transgender person's ability to be read as cisgender can mean avoiding discrimination, unemployment, homelessness, abuse, and sometimes violence.

Data Collection

I collected data in line with Bryman's (2012) definition of research data collection methods as "systematic [and] well documented" (2012, 43). Before each interview, I noted the time, date, and location of the interview, and wrote a brief description of the participant, the venue, and our initial interaction. Each participant was given a copy of the Participant Information Sheet and Consent Form and the time to read it and ask any questions. This was followed by my verbal emphasis that the

participant could stop the interview process at any time, and I drew each participant's attention to the information about support services should they become distressed when recalling certain incidents. I reiterated that the interview would be recorded and that names would be anonymised to ensure confidentiality. I transcribed eight interviews within a week of the recording to maintain the freshness and immediacy of the experience and used REV, a professional transcribing service, to transcribe the remaining 10 interviews.

The data set highlights how, rather than one coherent lived reality, social actors live multiple and constructed realities that must be studied holistically as the pieces are interrelated, influence each other, and, in turn, are influenced by the immediate social context (Lincoln and Guba, 1985). In anticipation of the complexity of participants' changing life trajectories, I sorted the interview questions into key areas of life—family, intimate partners, friends, work colleagues—to identify the pieces of the holistic puzzle. For example, questions to do with work were grouped together as were questions to do with relationships with family. Over their lifetimes, participants experience different identities and changing social locations, and these were described, documented, and encapsulated within each key area of life.

This question design and my encouragement for participants to talk freely about their experiences meant that I did not strictly adhere to the list of questions attached in Appendix D. Instead, the participants' interests and concerns guided the direction of the interview within the framework as detailed above. I asked logistical questions such as age, employment, and years since transition at the beginning of the interview so as not to interfere with the flow of each participant's life story. Questions of a more

sensitive nature, such as those to do with experiences of power, I reserved for the last hour of the conversation when rapport and trust had been established. This format allowed me to gather widely varied experiences and circumstances relating to each of the topic areas and resulted in the length of each interview varying from 2 hours 30 minutes to 3 hours in duration.

During the interviews, I remained alert to any changes in demeanour or language that might signal distress or wariness and responded accordingly with understanding and sensitivity. In one instance, for example, the participant began to cry when recalling discrimination and abuse they suffered as a child. I asked if they wished to stop the interview and possibly re-schedule. After a minute or two, the participant regained their composure and said they wanted to continue the interview. I was concerned for this participant's well-being and called the day after our interview and again the following day to check on their welfare.

At the completion of each interview, I asked the participant if they wished to add anything more, if they thought issues had been missed, or whether they objected to and/or wanted me to change any terms used. One transgender person asked that I change the way I refer to transition as "before" and "after", saying this implied a single completed event rather than a life-long one. It was not until analysing the full data set and identifying the socially contextual identities of participants that the full import of this request became clear to me and contributed to a main theme of this study, that of transgender people's identities as moving, rather than fixed. The notion of movement, relationality, and continual inter- and intra-negotiation emerged from participants' narratives, even as some used binary and static identity language to

describe their experience. This experience confirmed my commitment to continually return to the original data, listen again to the interviews, appreciate each transgender person as the expert on themselves, and review anew the knowledge gained from analysing individual participants' responses and the complete data set.

At the end of each interview, I thanked the participant for their time and for trusting me with their life story. One to 2 days after the interview, I contacted each participant to check on their well-being and enquire if they had concerns regarding the content of our interview. Participant responsiveness to my approach supports my belief that participants are open to sharing their life stories with me because they consider me to be a researcher who is respectful, non-judgmental, and whom they feel they can trust.

Respect and Trust

Transgender people often suffer discrimination, oppression, and sometimes violence, and constantly have their identity judged, making some of the participants understandably sensitive during social interactions. Many have also had their life stories appropriated by social researchers who are keen to use transgender people's lived experiences to support their gender theories (Schilt and Lagos, 2017).

Considering these experiences and my concerns, I put much thought and care into developing a sense of trust when setting up and conducting interviews. Some of the ways I established trust included through holding preliminary telephone conversations with participants in which I stressed that they could re-schedule, cancel or stop the process mid-interview if they wished and without explanation, and also arranging our meeting venue in a location where they felt most comfortable and safe. During the lengthy preliminary telephone conversations, three participants expressed their trust in

me by agreeing to come to my home for the interview. Another three, who lived in cities and regional centres in other parts of Australia, agreed to come to my temporary accommodation when I travelled to these locations. Three participants were hesitant and possibly wary of me as researcher and asked to meet in cafés in their neighbourhoods, and one transgender woman preferred that we meet via FaceTime. The remaining eight participants demonstrated their trust in me by inviting me into their homes.

During the lengthy, face-to-face, in-depth interviews, I continued to develop the sense of trust first established in the initial telephone conversations by remaining entirely engrossed in each participant's narrative. I felt a strong sense of responsibility to each person's well-being as they divulged personal and sometimes painful details. As seen in the excerpts from transcripts I include in this thesis, this sense of trust encouraged participants to describe incidents in their lives and the feelings they evoked without fear of judgement or misuse.

Constructed Grounded Theory Analysis

Four sensitising concepts or background assumptions inspired this research project. Blumer (1954), the late American sociologist, defined the term *sensitising concept* as a research device that gives the researcher a “sense of reference and guidance” (1954, 7), suggesting theoretical directions that the inquiry might take. In other words, sensitising concepts serve as starting points and interpretive devices for the researcher. Charmaz (2003) calls them “background ideas that inform the overall research problem” (2003, 259). My initial four sensitising concepts or theoretical directions were: gender, bodies, being recognised as cisgender and power. Over time

and the completion of more interviews and analysis of the expanding data set, these concepts were refined to five themes that form the basis of the five findings' chapters: Chapter Four – gender normativity: family and friends; Chapter Five – gender normativity: structures and institutions; Chapter Six – bodies and culture; Chapter Seven – a knowable gender identity and recognition by others; Chapter Eight – individual understandings or accords of gendered power.

I employed a constructed grounded theory approach to the data collection and analysis because this inductive and explorative approach meets my aim to investigate participants' life experiences by allowing the theoretical directions as outlined above to emerge from the data. This organic, messy, and emergent process involved frequent comparison and development of ideas as I constantly assessed and re-assessed the theoretical adequacy of the concepts and the theoretical direction of the project.

I decided to code the data manually because my sample size—18 participants—proved a manageable number and, as a practicing artist specialising in the mixed media technique of collage, I prefer the tactile process of working directly with paper. Through my art practice I have developed an affinity with texture, colour, and composition, and employ learned skills and my intuition to make meaningful connections, thereby creating a whole new composition from the separate and sometimes contrasting materials. The combination of my artistic and academic research experience convinced me to use collage as a visual representation of the data set, as both artistic and research techniques share the same purpose, that is, to bring together different, sometimes contrasting, elements to explore their relationships.

The initial coding process meant going back and forth within and between data sets, Listening many times to the interviews, re-reading transcripts and updating memos. This practice facilitated an intimate knowledge of the data and a sense of closeness with participants, leading me to a deep understanding and regard for participants' life stories. From that point, I proceeded to coding. Coding incorporates "generalisable theoretical statements that transcend specific times and places and contextual analyses of actions and events" (Charmaz, 2014, 113). In other words, I coded participants' statements to reveal abstract meanings and concepts by employing action verbs or gerunds to capture the analytic import of each phrase or sentence. For example, Orion (26) said that in his pre-transition life he did not know or understand himself and that he felt "lost, confused and sad inside". Likewise, all participants recall earlier periods of confusion about their identity. I collated similar statements and developed the code of "feeling confused/not knowing oneself".

I progressed to focused coding comparing the related initial codes and selecting the significant one or devising a new code that subsumed several of these related initial codes. Focused coding allowed for the synthesis, analysis, and conceptualisation of larger segments of data, freeing me to advance to a more theoretically sensitive interpretation of the data while simultaneously remaining true to or grounded in the data (Charmaz, 2014). For example, as mentioned in the paragraph above, I coded participants' descriptions of not understanding or knowing themselves in their pre-transition lives. This code related to another code that was elicited later in the interviews when the discussion turned to participants' post-transition life experience. For example, Orion (26), Nat (30), and Graham (30) said that while their bodies had changed, they acknowledged that they were "the same [person] inside". In their lives

before transition, these participants felt that their bodies were not congruent with and had betrayed their sense of their knowable gender identity, which led to confusion. After transitioning, they recognise their bodies to be congruent with their knowable gender identity. I combined these separate but related codes under the focused code of “aligning one-self” as a congruent being and the resulting theme is relevant to Chapter Six to do with bodily alignment and Chapter Seven that explores transgender participants’ self-recognition and awareness of themselves as a coherent self.

Memo writing is a crucial component of both initial and focused coding. Charmaz (2004) describes memo writing as an “interactive space” (2014, 162) in which the researcher captures, compares, and questions the data and the codes as a means of developing conceptual and theoretical ideas. The established practice of memo-writing involves the researcher writing analytic notes to accompany every step of the analytic process. In 2013, Stocker and Close, in recognition of the cognitively different ways human brains process information, developed a novel way of transforming data into emergent theory, that of audio memo recording. Extending Stocker and Close’s memo recording model, and in recognition of the fact that my preferred mode of learning is visual, I developed a form of visual memo recording. The following section details my visual memo recording process.

My technique for mapping concepts involved manually transferring codes onto colour coded sticking notes and grouping these under four colour-coded initial sensitising concepts—gender, bodies, passing, and power. Along a 2-metre-long wall I created a collage with the colour coded sticky notes, re-arranging the notes into related groups under relevant concepts. The two-month process of going back and forth, moving close to, and then distancing myself from the codes organised on the wall enabled me

to see each code as a separate unit while appreciating its interconnectedness not only with the concept heading under which the code was placed, but also with the total data set. Standing back from the wall and creating distance between myself and the codes allowed me to identify emergent patterns and contradictions. For example, I recognised when a concept was overloaded with relevant codes, and I prioritised them into sub-groups or new concepts. This process, a dance of closeness to and distance from the data set arranged on the wall, represented the relationship between individual responses and broad conceptual themes. My own history and life experience, combined with the grounded theory scholarly approach, gave me the tools to visualise and acknowledge the relationship between manifest and latent knowledge made evident by my analysis of the groupings of codes on the wall.

The following examples describe some of these negotiations. Under the concept heading *gender*, I included all the codes to do with participants' perceptions of gendered norms and social expectations. These expectations, as understood by participants include the following: men are capable, and women are not; and men are to be heard and take up public space and women should be quiet and limit their physical expression. Getting close to and then retreating from the wall of data made obvious the connection between codes to do with gender expectations and those to do with bodies and their behaviour. The overlaps between these two sub-sections demonstrates how intertwined and interactive bodies are with gender expectations. The notion of constitutive and co-creative roles of bodies and culture evolved from this negotiation and is the foundational theme in Chapter Six.

Under the concept heading *power*, I placed codes to do with how participants understand and negotiate gender expectations to do with expressions of personal power, such as the ideas that men exercise power and authority, and women's power is their vulnerability. The concept heading *power* also contained codes to do with structural power, such as participants' experiences when navigating the legal and medical systems. When re-arranging the codes, it became obvious that the concept *power* incorporated two distinct expressions of power, one in reference to participants' interactions with other social actors and how they make sense of their changing social locations, and the second when navigating cisnormative institutions such as legal and medical systems. During this step, I divided the concept of power into two subsections: 1) negotiations of personal power, and 2) normativity as enforced via structural power. Structural power forms the basis for the discussion in Chapter Five, and Chapter Eight focuses on individual understandings or accords participants strike to make sense of changes in their expression of and expectation to exercise gendered personal power.

Finally, the initial concept of "passing" in the sense of being read as cisgender was heavy with relevant codes, and I divided these into pre-transition and post-transition stages of life. This step and the re-arrangement of the codes under these two sub-headings enabled me to identify the emergent notion of self-recognition and recognition by others, the consistency of some participants' commitment to a "heart felt sense" (Cora, 55) of gender, and the intricate and on-going balance of these three forms of recognition negotiated by participants throughout their lives.

During the initial stages of analysis, it was necessary to place the codes under each concept heading. As the analysis developed and my perspective increased, overarching themes and the relationality and interconnectedness of concepts began to emerge from my wall collage. To capture this phenomenon, I devised an analytical tool that allowed me to move beyond linear, binary, and static conceptualisations to one that acknowledges the complex movement of situated and relational multiplicities of social positions emerging from the data set. Rather than static interpretations of social locations as on previous models, such as hierarchy, spectrum, or matrix, I came to appreciate the 3D, relational, and changing participants' and other social actors' locations. Extending De Vries' (2014) model of a transparent dodecahedron prism to explain the interconnectedness and cross-referencing of themes and data points, I conceptualised my findings as a dance. My model emphasises the relationality between and among all the dancers, highlighting changing perspectives and the movement of socially contextual multiple identities.

Each of the five findings' chapters, Chapter Four to Chapter Eight, commence with a life story of one of the participants. Each story encapsulates the complexity of a narrative life and together with the life experiences of other participants in this study is emblematic of the main themes explored in that chapter. These vignettes convey the totality of a life in narrative form, a totality and complexity that often risks becoming disjointed and being reduced to items or issues when one does coding.

Positionality and Reflexivity

In the final section of this chapter, I turn to what I, as the researcher, bring to this project. My study is framed by standpoint epistemology that includes not only the

standpoint of the participants but also the influence of the positionality of the researcher on the study design, collection of data, and analysis. As previously stated and evidenced in the life story vignettes of some participants that open each finding chapter, I determined to centre the experiences and voices of the transgender people in this study. To do this I needed to remain mindful of the influence of my positionality. For while Pillow (2003) and Horsburgh (2003) argue that ideally it must be the participants' subjective realities and not the biases and values of the researcher that define the situation, my experience leads me to agree with Bryman's (2012) argument that the qualitative researcher's complete objectivity is not possible. Even so, I believe that it is my responsibility to be self-reflexive about my positionality and be honest about its influence on the project.

The researcher's positionality influences the connection and exchange between the researcher and the participant, and certain exchanges lead some sociologists to form a close affinity with participants (Becker, 1967). The intense interviewing process for this study, with some interviews taking up to 3 hours and covering emotionally charged subject matter, increased the affinity I felt towards the participants. In these instances, Bryman (2012) argues that it is difficult for the researcher to "disentangle their stance as social scientists from their subjects' perspective" (2012, 39). Noting this, my overall aim was to balance my ability to separate participants' subjectivities and stances from my analysis and theorisation of the data with the empathy I developed for my participants. But, at times, I recognise that my attempts to balance objectivity and empathy were tested, and I found myself deeply concerned for the welfare of participants. Nevertheless, I believe that my empathy and admiration for my participants' courage and resilience is a strength of the methodology.

In terms of my positionality, I am a white, middle-class, educated, middle-aged, cis-gender, heterosexual, single woman. English is my first language and I also speak Italian and have travelled widely and lived abroad for extended lengths of time. For 20 years, I was a businesswoman, managing my own company, and I have been an exhibiting artist for the past 15 years. This experience means that I am at ease when relating to others and am flexible in my thinking when faced with changing social situations. With the aim of further challenging my flexibility of thinking, eight years ago I returned to academia, specifically to study the sociology of gender.

The researcher's gender identity influences the project when studying gender-related issues and the sociology of gender (Berger, 2013). To this influence, I add the cultural gender expectations, beliefs, and biases when the researcher grew up and came of age. In Chapter Four and Chapter Six, I document how cultural gender norms and the accepted knowledge of gender and sexual diversity prevalent in the formative years of a participant's development affect their beliefs, biases, and life experiences. So too for the researcher. I grew up in Australia in the 1950s and 1960s, coming of age in the 1970s. I was subject to the strict adherence to gender binary expectations of that time, even as I questioned aspects of such gender strictures. In the 1970s, I was an active participant in the second-wave feminist movement. These experiences and the gender premises they were founded on were foregrounded and challenged during the interview and analysis process and subsequent conversations with participants. For example, Janice (66) and I are similar ages, and both of us lived in what Janice described as a "very transphobic, homophobic, straight world". Some parallels in our lives prompted me to reflect on my feminist objection to traditional and firmly held assumptions prevalent in the 1960s and 1970s to do with the social dominance of men as a group. According to this assumption, men dominate public space and discourse,

while women manage the domestic sphere. The lived experience of transgender people shows that this assumed arrangement is not a straightforward calculation but rather a complex, changing, and contextual relationship (Keegan, 2020c).

Considering the above discussion, the influence the researcher's personal situation has on her work remains a contentious notion, and there is a lack of scholarly agreement on how such influence can be controlled and accounted for (Galdas, 2017; Holmes, 2020; Ortlipp, 2008; Rowe, 2014). Some sociocultural scholars, such as Davis and Khonach (2019), argue that researchers must maintain objectivity, while feminist scholars foreground their positionality and subjectivity in relation to the topic and participants being studied. To document my experiences, insights, and changing positionality, I made long-hand form entries of my thoughts, feelings, and reflections in a print diary. As Berger (2013) and Ortlipp (2008) recommend, I referred to these notes and recordings when analysing the data and writing up the findings and in this reflexivity section. To enhance the credibility of my findings, I found it essential to reflect on the on-going changes that had occurred in my own thinking and the personal growth I had undergone throughout the interviews and subsequent on-going conversations with participants.

In sum, 4 years ago, I started this project with the underlying assumption of a hierarchical gender order in which one gender or sexuality unilaterally oppresses the others; therefore, to eliminate such oppression it is necessary to eradicate the gender binary. Keegan (2020c) defines this model as M>F and describes its reliance on the assumption that bodies and behaviours are recognised as and signify stable identities, for example, either male or female, and heterosexual or homosexual. The queer theory project to dismantle the gender binary order aims for the eradication of the

dominant/oppressed schema by interrupting the repetitive performativity of gender binary norms male or female (M/F) (Keegan 2020c). My study finds that transgender people's positionalities scramble fixed identities and categories because they do not necessarily assume fixed, binary, gender, and sexuality identities. Such scrambling complicates theories that depend on the destabilisation and deconstruction of fixed and binary identities. Transgender participants' narratives invite us to interrogate our thinking about hegemonic gender orders beyond binaries and fixed categories. This realisation was a major turning point for my project as it invited a more nuanced approach to my analysis. In the re-writing of large sections of this thesis, this nuanced lens opened new vistas and encouraged a deeper questioning in my research practice and in my personal life.

Such deeper questioning is evident in the history and development of the project topic. Initially, in 2013, and motivated by the misogynistic and disempowering treatment by the government opposition and the media of Australia's first female Prime Minister, Julia Gillard, my intent was to explore gendered power. I wondered if transgender people might bring a unique perspective to this topic. As the research progressed and I completed half the interviews, I came to see that the transgender participants and their life experiences were the focus of my study. Rather than asking these participants to shed light on my initial topic of gendered power, their life stories became the central point and focus of this thesis. For this reason, participants' life story vignettes open each of the finding chapters to foreground their voices and life experiences.

In Chapter One, I discuss the insider/outsider standpoint and its relevance to participants, but it also applies to the researcher. My standpoint, according to Berger

(2013) and Holmes' (2020) definition of the insider/outsider positions, is that of the outsider as I have no personal experience of being a transgender person. In my instance, the outsider position is beneficial as I ask participants to tell their life stories as the experts. By referring to participants as the experts I am attempting to reduce the power imbalance between researcher and participant. The inherent power differential in this relationship echoes the many instances of such power imbalances endured by transgender people throughout their lives, for example, in the doctor/transgender patient relationship and in familial relationships. Often, these power imbalances have been accompanied by the denial of the person's gender identity and other abuse. Such incremental violence accumulates over transgender people's lifetimes making them particularly sensitive to having their views dismissed or their gender identity mis-recognised or not recognised at all. Appealing to participants as experts in their life histories can result in what Berger and Malkinson (2010) describe as a "therapeutic-like" (2010, 307) response. This was the case with responses from five participants in this study. For example, when I thanked Nat (30) for his time and honest and thoughtful replies to my questions he said he felt empowered by our 3-hour talk, that it was like a deep session with a psychologist. As Berger and Malkinson (2010) caution, and I became aware, along with the beneficial effect of such an intimate conversation comes the responsibility on the researcher to be sensitive to and avoid trauma-inducing questions and to be prepared to stop the interview should the participant become distressed.

The outsider stance means that I cannot appreciate what it is like to be a transgender person, the difficult choices they must make and the discriminatory and abusive behaviour they suffer. I have worked to use language terms that showed a sensitivity to transgender individual self-identities, and I followed the linguistic lead of each

participant, repeating the terminology they were comfortable using. I immersed myself in reading memoirs of transgender people (some include Bornstein, 1994; Cummings, 2007; Emery, 2009; Feinberg, 1993; Mock, 2014; Serano, 2007; Stryker, 2008/2017) and studies focused on the everyday lived experiences of transgender people, for example, studies by Garrison (2018), Hines (2010), Prosser (1998), Rubin (2003), and Schilt (2010), and I reviewed scholarly articles, such as Fawcett and Hearn's (2004) examination of the possibilities and challenges of researching marginalised groups when the researcher has no direct experience of the specific social divisions and oppressions. This background information informed and sensitised me when preparing interview questions. My questions came from the literature rather than from previous experience and while I was emotionally engaged with participants and their life stories, my aim was to manage the distance between these narratives and my role as researcher and critical analyst of the data.

The following chapters, Chapter Four to Chapter Eight, detail participants' narratives and my analysis of their responses. Five key themes emerged from the 18 interviews. These themes are gender normativity – confronting the binary at home, and in institutions; the relationship of bodies and culture; self and other recognition; and negotiating individual understandings, “self-representations” (Riggs, 2013, 66) or accords.

Chapter Four

Gender Normativity: Confronting the Binary at Home

Lena's story

At the time of our interview Lena is 83, having transitioned at the age of 50. She has spent most of her life in large Australian and American cities and is now in semi-retirement, living in a seaside town on the east coast of Australia. Lena stands tall, about 6 ft, and is slim, fit, and active, despite having several health issues due to long-term hormone ingestion. She is intelligent, well read, sharp witted, and proud of her rational thinking and common sense take on the world.

Looking back, Lena realises that she had been equipping herself for transition for some considerable time:

I'd been preparing myself for many years beforehand, even if I didn't know I was doing it. For many, many years, I thought I was a transvestite. I was also interested in drama, so I was gaining instruction in makeup, and also watching how other people moved and walked and talked and ate, and that sort of thing. I didn't start from a tabula rasa when I transitioned.

Pre-transition, Lena thought of herself as a transvestite and attended cross-dressing clubs in Australia and in the USA while working and living there. (The term transvestite was first used in 1910 by German sexologist Magnus Hirschfeld and referred to a person who sometimes dressed in clothes associated with the opposite gender—male or female—but did not live as that gender.) Lena was in her early twenties in the 1960s when she was conscripted into the National Service for 2 years. At that time, the Australian Defence Force was a place of strict adherence to heteronormativity. Trying to resist the need to transition, Lena thought that being married and having children would satisfy her if she was allowed to occasionally cross dress. She could not sustain this life, however, and, after 15 years of marriage, her wife asked for a divorce.

Lena then affirmed her gender identity. But this act came at a huge emotional cost. Even though she loves her family, including her ex-wife, only Lena's middle child has stayed in contact.

Lena remains convinced that if her affirmation were to happen now, in a time of acceptance of gender diversity and more relaxed perceptions of normativity, rather than in the mid-1980s when adherence to gender norms was stricter, her family would not have felt the need to reject her:

If it were all happening now, I could point at a number of families, many, many families, where the marriage has gone on very successfully after one partner or the other, or in some cases both, have transitioned from one gender to the other gender role. Yes, I think that if it were happening now, it'd be different. I'd have more of a chance to make my case and say, 'It really doesn't change anything that's important, I will still do all the things that a father and husband could do, as far as I can'. But apart from that, innately, I will be the woman that I have known that I was all my life.

Unlike her wife, Lena's mother accepted her transition, to a degree, even though, while she was alive, she often asked Lena when her son is coming back. On occasions of family significance, such as a funeral and a wedding, Lena's mother wanted her to attend the event as her son. The force of the social imperative to adhere to gender normativity as experienced via the emotional manipulation by loved family members distressed Lena. She felt in an emotional bind. On the one hand, she wanted to be true to her sense of gender identity and her new embodiment as a normative female achieved via medical means. On the other hand, she felt pressured to please her mother by adhering to traditional cisnormative notions wherein the sexed body and gender align.

Some friends deserted Lena after she transitioned, although it was unclear if this rejection was due to the transition, or the divorce, or both. A number of these people

have re-connected with her in recent years when recognising that in many ways Lena is the same person they had known:

Over the years, we kept running into each other and they realised that even if there had been a lot of Lena inside J. and they had never seen her, there was still a lot of J. inside Lena. We had things in common, memories in common. They started to treat me as they had treated J., and that was fine with me.

Of the friends and family who have remained distant, Lena says it is because they adhere to traditional, binary, oppositional gender norms, and think of gender identities as separated by a brick wall. Lena's life experience, however, has encouraged her to see gender identities as lanes on a highway separated by unbroken painted "lines to be crossed when necessary".

In her working life, Lena held a senior position at a tertiary education college and continued to work there after her gender affirmation. All but a few of her work colleagues, together with the senior management, supported her during her affirmation. Due to her female dominated work environment, Lena believes that her colleagues perceived her to be joining the majority, rather than reducing her social status and importance from man to woman.

Gender norms are historically and culturally contextual (Stephens, 2020), and Lena talks at length about evolving cultural gender norms, comparing the situation when she was growing up in the 1940s and 1950s and her transition in the mid-1980s, to the more relaxed attitude towards gender fluidity today. The term genderfluid describes a person who does not identify as a stable gender identity and first entered the Oxford Dictionary in 2016 (Hines, 2018). The notion of gender fluidity prompts Lena to think about how gender is embodied and what this means in terms of social interaction and acceptance.

When I was first transitioning, I wanted to be as completely like a genetic

woman that I could be, which meant that I took hormones to get breast development, and I went through surgery to remove the penis and testicles. All this was really so that I could blend in more. It wasn't something that was demanded by my mind, I knew what I was in my mind. But I knew also that other people have rights, and cultural norms, and if I wanted to blend in with them completely, which meant being able to go into dressing rooms, and gymnasium, or whatever, in female company and be accepted in female company, then I would have to change certain aspects of my physical body.

Nowadays, again, it's a thing that's changing. There are more and more people that are not going through these physical changes, but still consider themselves to be trans women. They are content to say, I know what I am and what I have under my clothes is nobody's business, unless I allow it to be.

Lena had wanted to be accepted as a normative woman. At that time, the cisnormative assumption was that the body's sex organs matched the person's birth assigned gender. This norm meant that Lena believed she had to use medical means to physically align her body with her knowable gender identity. She insists that she did not alter her body to prove to herself that she was a woman because she knew herself to be a woman. Rather, she changed her body to be accepted by others, especially other women in women-only spaces, such as change rooms.

The changing attitudes to gender norms and embodiment that Lena observes in contemporary society has her ponder her decision to undergo sex reassignment treatment:

Embodiment is not as important to me as it once was. I don't know what my decision would be now if it were all happening now. It is an invasive procedure surgically and it's certainly a ... What shall we say? An upsetting procedure in some ways, hormonally. One's emotions become very volatile, and I don't like my emotions to be volatile, I like to be in control.

The deeply held cisnormative conviction of the connection between body and gender identity, even if attained through medical intervention and therefore contradicting cisnormative beliefs, remains difficult for Lena to overcome.

Equally, I don't know if I would be happy to be half one thing and half another, looking female until I took my clothes off and then seeing the

remnants of my masculinity, that might also be unpleasant for me, unacceptable. Without having gone through my life twice, I have no way of knowing that.

Even as notions of gender identity, embodiment, and perceptions of normativity have progressed with the historical context, Lena's musings suggest that the body/gender connection and the notion of gender being a binary—"half one thing and half another"—are deeply embedded in Lena's psyche.

Introduction

This chapter, the first of the five findings' chapters, focuses on the perceptions and practices of gender normativity as experienced by 18 transgender participants in their interactions with family and friends. Gender normativity is defined as "adhering to or reinforcing ideal standards of masculinity or femininity" (Merriam-Webster, 2015), and as identity is a group project, the standards, ideals, or rules of cisnormative practice are socially configured. Lena's (83) story illuminates the historicity of this relational social process, and the impact that changing perceptions of what constitutes gender normativity have on the domains of transgender people's lives, including their material bodies.

In Chapter Two, I introduced Fausto-Sterling's (2000) conceptualisation of gender and sexual identities as points in multiple-dimensional space. Such a notion highlights the effect of normalisation as an attempt to stabilise identities according to a socially acceptable reference point or axis in that space. But, as Lena's (83) life story reveals, perceptions of normativity are not stable, and change over time and social interaction. Perceptions of normativity are historically contextual, socially contextual, and continually changing, and this means that as a reference point, the notion of normativity is an unreliable measure against which social actors are judged. Through

her life experience, Lena acknowledges that social perceptions of cisnormativity are historically contextual, and that people can both adhere to cisnormative expectations *and* be genderqueer in practice. These realisations had Lena see gender differences not as divided by something hard and impenetrable but instead as unbroken lines on a highway “to be crossed when necessary”. Australian driving rules and road signs are enforced to reduce the number of collisions and keep people safe on the roads. The rules state that it is permissible to cross painted dividing lines if they are broken and if the road ahead is clear. If the painted lines are unbroken, it is illegal to cross them. In reality, of course, people do cross unbroken painted lines. They do this despite the risk of a collision, prosecution and, possibly, a sense of guilt. As with crossing unbroken lines on a road, there is much at stake for the transgender person when changing or veering across gender lanes. Such a challenge to cisnormativity is often met with derision, psychological and social punishment and, in Lena’s case, the heartbreak of losing family and several friends. While being a transgender person and/or one who undergoes gender affirmation is not equivalent to breaking the law, in a cisnormative world, transgender people are made to feel that their identities are law-breaking. This sense of being “gender outlaws” (Bornstein and Bergman, 2010) is evident not only in the lives of genderqueer identified transgender people but also in the narratives of the transgender people interviewed in this study.

Lena’s (83) life story shows how one transgender person navigates her way through a period of history that records major social progress in the acceptance of gender and sexuality diversity. Her own life experience continually intersects with changing social attitudes and understandings of heteronormativity as she forges her own path towards understanding and acceptance. This chapter explores tensions evident in

Lena's and other participants' narratives as they navigate their changing lived realities from childhood, adolescence, adulthood, and through transition, during a time of changing social perceptions of normativity, to offer a nuanced understanding of transgender identities.

I focus on two themes in this chapter. First, the way in which gender normativity, as the expectations, perceptions, and practices of living to ideal forms of masculinity and femininity, operates as a social force and is enforced through pressure by family members and friends. Heteronormativity is foundational to the hegemonic binary gender order that configures two separate genders—masculinity and femininity, two sexes—male and female, and two sexualities—heterosexual and homosexual (Connell, 2002). To differentiate the two genders within a cisnormative gender order, men and women must comport themselves in normatively oppositional ways: men, for example, exercise authority and women do not (Moi, 2001). In Lena's words, when she was a child and adolescent, it was generally assumed that men and women must keep in their own separate lanes by adhering to these opposing gender expectations. This chapter examines how these lanes are policed by other social actors such as family, intimate partners, friends, and work colleagues. In the past 6 decades, hard-won and perhaps fragile social progress has resulted in changes to the meaning of normativity, and I explore how these modifications effect what is at stake for transgender people when they cross lanes. The wide age range of participants in this study (22 to 83) allows me to explore changes in historical perceptions of gender normativity, and how these changes manifest in transgender people's lived experience.

Second, I examine how transgender participants navigate their own and other social actors' perceptions of gender normativity in their quest for personal meaning, a sense of alignment, and a place of belonging. I document how transgender people's bodies and social interactions open conversations that challenge what is considered normative while, simultaneously, in certain social circumstances, transgender people emulate aspects of traditional understandings of cisnormativity. Lena's (83) narrative foregrounds both the difficulties transgender people experience navigating social interactions with others and their agency in simultaneously challenging and emulating cisnormative assumptions as a means of belonging, getting their needs met, and survival.

Cisnormativity

First, I consider what it means for a transgender person to stay in their assigned gender lane. How do participants manage the social pressure to adhere to cisgender norms associated with the body they were born into, one that is at odds with their felt sense of gender identity? Also, what is at stake for a transgender person such as Lena (83) when, in mid-life, she determined to change lanes, thereby disturbing one of society's major organisational frames, that of the assumedly natural alignment of body and birth assigned gender? The following section is structured in line with the arrangement of the interview questions into topic groupings, as detailed in Chapter Three, that is, transgender experiences of growing up and adolescence, interactions with family, friends, and work colleagues, and the policing of gender norms including the psychological damage inflicted by such control.

Transgender participants describe growing up and being made aware of the gender lane that was deemed the correct one for them according to the body they were born into. They talk of their sense of discomfort and ill fit with expectations that clashed with their sense of gendered self or, as Lena (83) describes it, her “inner voice”. Lena grew up in the 1940s and 1950s, coming of age in the 1960s. These decades, post second world war, are known for strict adherence to traditional gender expectations. According to historians Damousi and Lake (1995), women who had worked in factories supporting the war effort were encouraged to give up their jobs and independent lifestyles for returning servicemen and retreat from the public domain to the domestic sphere. Before the 1950s, in the wider public, little was known or understood about transgender people. Christine Jorgensen, an American actress and night club singer, was the first person to receive notoriety for undergoing a series of sex reassignment operations in Copenhagen, Denmark, in 1952. From the 1940s, the term transsexual was used to describe people such as Jorgensen who had medical treatment—surgery and hormones or only hormones—to transition. In the last 2 decades of the twentieth century, the term transgender has become the preferred umbrella descriptor when referring to any person who identifies as gender diverse (Whittle, 2010).

Lena’s (83) early family life was unusual for the time as her father shared the domestic chores and treated his son and daughter equally, teaching them both practical life skills, such as cooking, knitting, carpentry and cementing. She says her father was “an honourable man, a kind man, a gentle man” who was also “brave”. He travelled for work and Lena remembers once, on his return, she had a daydream.

I had been turned into a girl, probably by a magician or something, some form of magic. My father coming home from sea and me greeting him and saying, ‘You’ve got two daughters now’.

Unlike other participants’ distressing memories of punishment for similar declarations, Lena is proud of her parents and her upbringing and the fact that neither parent ever hit or shamed her or her sister.

All the other participants describe growing up and sensing the pressure to conform from family, friends, and society at large. The pressure and persecution young gender diverse people experienced was due to the difficulty they had adhering to the cisnormative gendered behaviour associated with their body and expected by their family and friends (Dietert and Dentice, 2013). Maia (66) was born in the mid 1950s and says that as a young boy she was presented with and pressured to accept a “whole lot of stuff around the binary. You know, our little binary society that says, ‘this is what men and women in your class, in your social group, in your community, this is how we are supposed to behave’”. Maia’s response highlights the way gender normativity intersects with class and age and shows how these social hierarchies of domination and oppression are inextricably linked (Hunnicutt, 2009; Pease, 2019). Maia was encouraged to not only follow cisnormative expectations but also the interrelated expectations of her socio-economic class. Chapter Five considers the ways that the intersections of gender and class influence how transgender people navigate social structures and institutions.

Some participants, such as Kara (45), report emotional pressure. When Kara was a child, she understood she was not meeting gender expectations even though she says that she “wanted to” fit in to the gender order and thereby please her parents and

especially her father. Kara felt uncomfortable playing sport, especially football, but offered to join the school football team just to see the look of love and pride on her father's face. She adds that this foray into sport was short lived, and her much loved father was ultimately disappointed.

Other participants describe brutal pressure to conform. As a child, Juliette (39) had a sense of dissonance that made her feel "in conflict with herself" and that manifested in "social issues at school". Due to her inability to fully conform to the gender expectations deemed appropriate for her body, other children inflicted "endless bullying" on Juliette. The brutality of these attacks increased, and when she was in grade three, these children "smashed" Juliette's face "into a brick wall". She was hospitalised and needed stitches. Juliette's parents' solution was to move her to another school, but like the narratives of other participants who were similarly bullied, the mental scars of the violent abuse remain.

Having survived her childhood, Juliette (39) suppressed her gender dysphoria and attempted to live her life as her birth-assigned gender throughout her adolescence. When she was 19, Juliette tried to discuss her feelings of disquiet to do with her gender with her parents. At that time, her parents knew nothing about transgender identity and Juliette did not have the knowledge or the language to guide the conversation. Juliette says her mother and father "freaked out", and she was so distraught at their reaction that she squashed her sense of unease and went on to marry and have two children. Only when her 10-year marriage ended did Juliette have the will to face her transgender identity. At this crucial time in her life, her parents

accepted her transgender identity, and they continue to fully support her, a move Juliette believes has helped her to construct her new life.

These experiences highlight the social force of gender normativity, and this is particularly so for older participants like Lena (83) and Maia (66). These older respondents forced themselves to live as the gender they were assigned at birth despite their discomfort because they did not want to hurt and possibly be rejected by family members. To them, in their historical moments, the possibility of changing genders seemed insurmountable. Lena, for example, was aware of the damage her transition could inflict on her wife and children, and for more than 15 years, she attempted to negotiate a truce between her need to change her body to align with her sense of gender identity and her socially accepted life as a happily married cisnormative man. Lena “tried not to transition for the sake of my family” and believed that if she could maintain her practice of cross dressing that could satisfy her need to live as a woman.

Over time, the need to transition increased, and when her wife asked for a divorce, Lena (83) said the “crisis at home caused me to realise that I had to transition or commit suicide”. Thirty-four years later, Lena is still in love with her ex-wife and has not re-partnered since their separation. Of the divorce she says, “Separation from my family was the worst thing, worst aspect that occurred”. The emotional pain at the loss of her wife and two of her three daughters is still sharp for Lena and she is particularly disappointed in the rejection by her oldest daughter with whom she was very close. Lena had always thought that this daughter “would think for herself, rather

than accepting what the world told her to think”, and she views her daughter’s rejection as a testament to the social force of normativity.

Some parents have a strong perception of the inextricable connection of the body with gender identity and, indeed, a person’s identity. They become distressed at the physical alteration in their transitioning child to the point where they grieve the loss of their son or daughter as if they had passed away (Grossman et al., 2008; Whitley, 2013; Testoni and Pinduccia, 2020). Testoni and Pinduccia (2020) found that some parents of transgender children reacted to their child’s transition with an emotional experience similar to mourning. These parents equate or at least confuse the pre-transition body and birth assigned gender with their child’s identity. On transition, the change to and loss of the pre-transition body is seen as the physical loss of the child they had given birth to, nurtured, and loved. A number of participants in my study spoke about their mothers’ grief at what they perceived to be the loss of their child, and Lena (83), Kara, (45) Seth (63), and Ansel (55) describe the longing of their mothers for the person they had appeared to be before transition. Ansel says that his mother accepted his transition, but “2 years in she tells me that she misses her daughter”. Sympathetic and understanding of his mother’s yearning, Ansel says that in his mother’s heart, “she does miss her daughter”. Likewise, Seth’s mother lamented that she missed her daughter, and Seth would often comfort her saying, “I’m still here. You’ve gotta remember S. is still here. I’m not going anywhere”. Lena says that while her mother did not reject and refuse to see her, she repeatedly asked Lena if she would “go back” to presenting as the son she had known. She would voice this by saying, “When are you coming back to us?” Transgender participants spoke sensitively of

their parents' distress as they understand their parents' grief and longing even as they determine to live as their self-determined gender identity (Nagoshi and Brzuzy, 2010).

Participants such as Kara (45) came to this sensitive stand only after a period of what Kara describes as self-obsession following transition. At that time, Kara says she was oblivious to others around her and specially to close loved ones. Now she knows that she told her parents of her transition at a bad time for them as they were going through a divorce.

I didn't give any thought at all to the impact that must've had on my parents and my brother who I'm also very close to. I didn't even consider them going through a grieving period for a person that they may have deemed as gone and, unfortunately, I did never discuss this with mum. I wish that I had. In my head, I was exactly the same person so why would they be grieving, but I've read a lot about parents that talk about losing a child even when they accept a new child. I don't know. I'd love to ask.

Kara's acknowledgement of the distress her news inflicted on her family highlights the high cost and potential devastation for families inherent in the transgender person's dilemma. Their decision to transition must be weighed against the risk of loss of recognition by parents whose acceptance and love depend on their child's compliance with cisnormative expectations. Such compliance assumes the alignment of body, gender, and identity, and that this alignment is naturally ordained.

As well as the potential for loss of family, a transgender person's decision to transition also risks the loss of friends or changes in the tenor of friendships. Thirty years ago, when Lena (83) transitioned, she had mixed reactions from her friends:

Some of them were overjoyed for me that I had come to a decision that was so vital to me and they were out to support me in any way they could. A few of them thought because of the divorce they had to side with either my wife or me and so they cut me off and sided with my wife ... By far the majority of those who stayed with me were good, close friends, and some who were in

effect neutral and neither gone one way or the other, came back to me over the years.

Of the friends who rejected her, Lena says they saw “gender as being a brick wall”, a structure she believes they found impossible to see over. Lena attributes such loss to the fact that some people, in the 1990s, held an insurmountable conviction that the alignment of body and gender identity is natural and innate. Lena’s experience of negotiating these friendships foregrounds how gender assumptions are often mediated in friendship groups.

Post-transition, transgender participants talk of a change in tone of some friendships and have come to see friendships as gender segregated. This change in tone in their relationships with men and women they accredit to the different ways males and females have learned to interact and communicate with other members of their group and in mixed company. Graham (30), for example, describes this gendered difference in communication.

I know a lot of guys who are really left-leaning, beautiful souls and they still ... view women as lesser in some way. On a really deep level, and I don’t think that they know it. But it’s something that I can certainly see because I know they don’t see women the same way that I do. I know that the little comments that they say kind of mean something. They just see women as different, it’s just almost like a different species of human being. That’s the way men and women treat each other ... like we’re different species.

Young (1990) contends that the social assumption that men and women are different encourages detachment and the practice of opposing communication styles. Young (1990) and Moi (2001) argue that according to this social force, females are thought to be talkative, practice emotional expressiveness, and have a co-operative communication style. Conversely, males are believed to be closed emotionally, competitive, and connect with other males via a competitive hierarchy. Indicative of

these opposing and hierarchical styles of communication, Maia (63) is aware that her known transgender identity and her refusal to modify her deep voice to align with her normatively feminine appearance creates confusion when communicating with male and female friends and workmates. She says that this confusion results in people not treating her like a woman, and not treating her like a man, but communicating with her as Maia. Maia's experience indicates that her transgender identity places her outside the common practice of the cisnormative dynamic and, therefore, people must improvise a communication style and find new ways of relating with her person to person rather than gender to gender.

Anthony (35) says that while he has learned to enjoy the familiar way men relate with each other, he is conscious that his lesbian friends are excluding him from the sense of familiarity and closeness he once enjoyed with them. He notes that this change in connection with his lesbian friends means that he is unable to explore his changing notions of masculinity with them. Anthony adds that these conversations, if they were to occur, would challenge and extend his understanding of transnormative expectations to do with masculinity. Exploring transgender friendships and their impact on identity development, Zitz et al. (2014) argue that transgender men who do maintain friendships and open communication channels with women, and particularly lesbian women, have a platform to address and process contested notions of masculinity, power, and their (trans) masculinity. One such contested notion that Anthony and other young male transgender participants would like to explore is the competitive nature of homosocial relationships.

Graham (30) observes what he understands as the competitive behaviour and attitude of his cisnormative male friends. One friend Graham describes as, “quite masculine looking, he’s quite big, as in tall, broad shoulders, footie player, a rugby player build”. According to Graham, this friend’s family celebrates ideal hyper masculinity, and his friend displays this masculine persona “without even meaning to. It’s just part of the way that he moves around”. Attempting to emulate this ethos, Graham mimics his friend’s masculine presentation. He recalls that in the recent past, when he was in the process of transitioning, he and this friend used to “discuss ways to seem more masculine to keep me safe. He was sort of teaching me how to protect myself, so he knows my whole story”. As soon as Graham started to be recognised by others as male bodied, however, he became aware of a change in the tone of their friendship that included “the way he spoke to me and related to me”. To Graham, it seemed that his friend was more guarded with him and, rather than protective, he was more competitive and more closed emotionally. Graham’s experience tells him that once he is recognised as a man, he is no longer due the protection he previously was given by this friend. Instead, Graham believes that he enters a competitive environment where some men compete with other men in demonstrations of their manhood.

Also, Graham (30) became aware that his close male friend grew wary of and avoided close physical contact with him. This change may be understood considering Sedgwick’s (1985) analysis of male friendships and men’s complex understanding of the link between homosociality, homosexuality, and homophobia. According to this analysis, some men want close male friendships but fear them being read by others as homosexual relationships. Sedgwick (1985) argues that the continuous relation between homosociality and homosexuality is disrupted and turned into a form of male

bonding that includes desire for intimate friendship coupled with homosexual panic. The change in tone in Graham's friendship may be testament to masculinities' multiple, labyrinthine hierarchies, and largely unspoken social processes, and Graham knows that he has much to learn.

All the transgender men participants describe hierarchies in their transgender communities that are based on physical attributes coded as masculine, for example, facial hair, musculature, and deep voice. These participants talk of the fierce and constant competition among members of these communities to see who among them is masculine looking enough. Members such as Orion (26) are publicly downgraded by other members. Orion (26) knows that he is not seen as masculine enough as he gets called "faggot" by other transgender men.

I'm not seen as masculine, I'm seen as a gay guy, as more feminine ... There are plenty of straight guys who are just like me, and I am sure you assume they are gay, and they can live their life, but it is just frustrating. I don't tick all those masculinity boxes and therefore I feel like I'm not supported. I'm always seen as something else like a gay guy. Even in the trans community. I don't have a big enough beard or a big enough dick then I'm not masculine enough. But I'm 6 years on T [testosterone] and I'm not going to change that much. It's like, this is what I am. I am seen that way regardless. There is a hierarchy in the trans guys. The guys at the top haven't necessarily had the surgery but look masculine. They go to the gym, and they are seen as more masculine.

The exclusionary practices described by Orion demonstrate how oppositional binaries work in all hierarchies to control communities' boundaries.

While all the transgender men participants talk of the exclusionary practices exercised by some in their community, Cora (55) is the only transgender woman to mention the existence of a transgender women's hierarchy. In the first few years after transition, Cora frequented a night club in the centre of the city and describes the hierarchy

created there by transgender women. This hierarchy is based on physical attributes that depend on the extent of medical treatment undertaken and how well these transgender women are read as cisnormative women. Cora describes each level of this hierarchy.

At the top-of-the-ladder are the post-operative transsexuals ... It is just part of their journey, now they are women. End of story. They don't associate with the community. Nobody would know. You've had your surgery and you are there [indicating top of the hierarchy] ... Then, further down, there are the people who are pre-operative. So, there's this assumption that you just haven't had your surgery yet, but that you are going to have surgery to be a real woman.

The descending locations on this hierarchy range from people who have medically transitioned and now are read as cisgender and live as normative women, to those who have recently transitioned, to people who are experimenting with hormones and deciding whether to transition or not, down to the lowest ranks on the hierarchy populated by cross-dressers, drag queens, and sex workers. Cora says that these lower ranks are reserved for people who do not aspire to live full time as normative women. Cora's nightclub experience is one example of the complexity and multiplicity of femininities' hierarchies theorised by Schippers (2007), Budgeon (2014), and McCann (2020), and discussed in more detail in Chapter Eight.

In the wider social world, the persecution and policing of gender presentation and behaviour by some social actors can damage transgender participants' mental health, as reflected in two 2021 studies into the health and wellbeing of LGBTQA+ young people in Australia (Hill et al., 2021 and Bretherton et. al., 2021). Hill et. al. (2021) found that 80.4% of young participants experienced "high or very high levels of psychological distress" during the previous four weeks (Hill et al., 2021, 10).

Growing up in a transphobic, homophobic home, school, and social environment,

Janice (66) suffered intense pressure to adhere to gender norms. She says that any deviation from heteronormativity was not tolerated by other social actors. Janice recounts that “Every message that I’d ever received about people like me, from the age of 5 through to age of 40, was that these people were weird, sicko”. The pressure on Janice to conform intensified, and the resultant dissonance and fear of being discovered or outed manifested as “anxiety, panic disorder” that immobilised her, rendering her unable to go to work or mix socially.

I had a whole lot of mental health issues around anxiety, panic disorder, agoraphobia, all those sorts of things started happening in the late '80s. In fact, I took time off work. There was one day when I just drove home, because I was in the company car, I drove straight home and rang my ex up at work and said, ‘I can’t do this anymore. Can you ask them to come get the company car?’ I saw a psychologist for quite a few months. Didn’t once discuss gender.

Due to the shame and lack of knowledge that engulfed consideration of non-cisnormative behaviour in Australia in the 1980s, Janice was unable to discuss her gender dysphoria with her psychologist. The inability to communicate the source of her distress prolonged her pathway to transition, and the trauma.

To learn more about such trauma and to gather and offer alternative perspectives, I talked with a psychiatrist and a psychoanalyst who specialise in helping transgender patients. These mental health practitioners suggest that for some, self-loathing resulting from the social pressure to adhere to cisnormative practices accumulates over many years, inevitably manifesting as mental distress in the form of such illnesses as anxiety, panic attacks, and depression. The history of physical and verbal abuse and oppression imposed on people who do not adhere to gender norms is contained in participants’ descriptions of the internalised oppression and transphobia they and many in the transgender community suffer, and the lateral violence and microaggressions they may inflict on members of their own community (Tran et al.,

2021). Internalised transphobia is the incorporation into the self of society's criticism and rejection of gender non-conformity and transgender people (Bockting et.al, 2020). In other words, some members of the transgender community incorporate the abusive and negative treatment inflicted by other social actors into their own personal narrative, self-image, and sense of worth.

Transgender participants navigate on-going social interactions by negotiating their own internal narrative, "self-representation" (Riggs, 2013, 66) or accord to make sense of their experiences of both challenging *and* emulating gender norms.

Participants' stories demonstrate that gender identities are multiple, changeable, historically and socially contextual, and often non-linear. These findings highlight the necessity of studying the diverse realities of transgender people's lived experience (Shepherd and Hanckel, 2021). Lena's (83) narrative that opens this chapter describes how for much of her pre-transition life her sense of being a woman was intermittent and context specific.

Even if for a lot of my life it was intermittent, sometimes I would feel more male, sometimes I would feel more female. Clearly, when I was doing National Service there was little or no chance to feel very female and I just took it on as something that one does. Sometimes there are tasks to be undertaken, duties to be fulfilled that may not be to one's preference, and that's just too bad. That's part of being a human being in a human society.

For Lena, it was a matter of personal safety, public duty, and convenience that she emulated the gender order when she was serving in the National Service. At other times, and of her free will, she alternated between identifying with her female persona while cross-dressing and her male presentation in the workplace and at home. Lena demonstrates how veering back and forth across "gender lane" occurs in her

everyday practice, revealing how human gender expression is richer, more context specific, changeable, and varied.

Gender stereotypes are a shorthand means of reducing such richness of gender expression to limited, generalisable characteristics that represent an “oversimplified view of reality” (Ellemers, 2018, 278) as they reflect characteristics and behaviours generally considered typical of members of particular social groups. When striving to adhere to an imposed gender lane, in both pre- and post-transition life, some transgender participants in this study describe occasionally employing stereotypically stylised and idealised notions of what it means to be a normative man or woman as a shorthand way for them to be recognised as belonging to a socially legitimate group. Maia (63) explains that when she was young, “being trans was something almost entirely unspoken of”, and Maia, and many similarly aged transgender women she knows, “spent some period of their life proving that they were incredibly macho”. They performed to a hyper masculine ideal to prove to themselves and others that they were men. In recent years, and post-transition, Maia describes the temptation to resort to stereotype felt by many of her transgender women friends and observes how they “quite often adopt stereotypes and play the game that they think people would want them to play”. Her conviction is that adhering to stereotype is about “belonging, being accepted and not putting yourself at so much risk of standing out”. Stereotypes are a way for these transgender people to appear cisnormative and thereby ensure social acceptance and avoid discrimination and exclusion.

Participants talk of selectively adhering to stereotypical behaviour when seeking approval for medical treatment. Participants do this because they believe that some

mental health and general practitioners revert to evidence of transnormative presentation and behaviour when assessing if the transgender patient is suitable for treatment. A study of the prevalence of cisgenderism in scholarly articles to do with child psychology by Ansara and Hegarty (2012) found that mental health professionals were more cisgenderist than other authors. Further, a review of relevant literature relating to “transgender people’s experiences and perspectives of general healthcare” was undertaken by Heng et.al. (2018). Twenty articles were analysed to find that an underlying theme of cisnormativity and transphobia impacted the health care outcomes of transgender patients. As discussed in detail in Chapter Six, participants Orion (26) and Nat (30) describe how they attempted to adhere to the transnormative expectations of their health care provider and “put on” a stereotypical masculine performance in order to convince the doctors to give them their letter of referral for hormone treatment. Transgender women participants relay similar stories of adherence to idealised feminine presentation when attending medical appointments. For example, on Cora’s (55) first visit to the psychiatrist she came straight from the office and was wearing a well-cut man’s suit. The doctor did not say anything, but Cora got the distinct impression that he was disapproving. For her second visit, she wore a dress, heels, and makeup, and acted in accordance with transnormative feminine expectations to convince the psychiatrist of her need to transition and to live as a woman.

Indicating membership to a group via adherence to stereotype can secure personal safety. Although adherence to stereotype restricts gender expression, Abelson (2014) argues that it is the very restriction and acting out of the prescribed way of presenting oneself that can keep a social outlier safe from attack or rejection. According to Maia

(66), transgender women “quite often adopt stereotypes” because “maybe it’s just easier, maybe it’s safer”. Similarly, transgender men participants, conscious of their safety and social inclusion when in the company of other men, describe how they aspire to the hyper masculine ideal, when necessary, to safeguard themselves.

Abelson studied this aspect of personal safety through interviewing 19 transgender men living in the San Francisco Bay area and found that the fear of violence from other men shapes the interactional practices of men, including transgender men. This shaping includes conformity to transnormative expectations leading to the inhibition of transformative practices (Abelson, 2014). Such use of stereotypical behaviour precludes alternate expression, fortifying group membership and the exclusion of the other, thereby reinforcing gender normativity.

Sexuality and Gender

For some participants, the practice of veering across gender lanes not only concerns gender identity, but it also includes exploring sexuality. The cisnormative assumption that the body and gender identity are aligned is accompanied by the expectation that the sexuality of the person is too. But Fausto-Sterling (2019) argues that while “sex, gender, orientation, bodies, and cultures” are intertwined, “deeply embodied” (2019, 529), and active and co-creative in identity development, there are more complex configurations of bodies, gender, and sexuality than the notion of heteronormativity allows. However, the assumption that gender identity and sexuality are naturally aligned continues to exert powerful social pressure, and this has led some transgender participants to conflate their gender dysphoria with the exploration of their sexuality.

All the transgender men and half the transgender women participants in this study attempted to reframe their gender identity as a sexuality issue. Seth (63), for example, says that when he was young, he was unaware of the existence of transgender people and the possibility of medical transition and, therefore, concluded that his dissonance was due to his sexual orientation. Since transition, Seth identifies himself as a heterosexual man, but also maintains contact with gay friends he knew from his pre-transition years. These friendships cause confusion in his group of male friends at his local pub who Seth believes suspect him of being gay. Marlow (28) comes from a conservative, traditional family and community, and in the first decade of the 21st century, when he was struggling with his gender identity, the gay and lesbian rights movement was gaining social traction and a certain degree of legitimacy in progressive social circles. Goffman (1967/2017) theorises social interactions and argues that to maintain social cohesion, identity options are limited to the “legitimate institutionalised kind” (1967/2017, 9). As Marlow wanted to maintain contact with his family and friends, he thought that if he identified as lesbian, with its degree of social legitimacy, rather than as a transgender person, it may be comparatively more acceptable to his community.

Similarly, Anthony (35) says in his pre-transition life he “shifted” his sexuality from “being kind of lesbian” to being bisexual, followed by a time “immersed in gay boy community” where he expressed himself through “gay masculinity”. Graham (30), Nat (30), Orion (26), Jason (35), and Marlow (28) established long-term relationships with lesbian lovers and became active, to various degrees, in the lesbian community before transitioning to transgender men. Janice (66), a lesbian transgender woman,

says that she understands the difficulty some people experience in differentiating gender identity and sexuality. Janice says she has,

spent the last 25 years trying to explain to people that difference between gender and sex. And for cis gender people who have never had to question it, never had to think about it, who have all those three things aligned quite nicely according to social norms, [gender and sex] must be a breeze.

The difficulty some social actors experience in differentiating between gender identity and sexuality is felt by Orion (26), Nat (30), Graham (30), and Anthony (35), who are often mis-identified as small gay men. These transgender men tell me that they are not as tall as the average cis gender male, have fine boned facial features, and are aware that sometimes they comport themselves in line with the norms of their birth assigned gender. Participants acknowledge that for some social actors, these visual markers signify femininity, with the assumption that they are effeminate men who are presumed to be gay.

Transgender women participants also recall incidences of gender and sexuality identity misidentification. Recently, Juliette (39) attended a school reunion and came out as transgender to friends from school days. These friends said, “We always thought you were gay, and we were surprised when you got married”. This interchange is in line with Goffman’s (1967/2017) argument that gender is a collective performance and in everyday interactions people strive to manage orderly and predictable social interactions and to reduce embarrassment. Therefore, regardless of the best intentions of Juliette’s friends, to diffuse a perplexing group situation such as not knowing a person’s gender and sexuality identity, generally, people will select from a limited number of socially legitimate options and identify these transgender men and women as members of the gay and lesbian community.

The need for social actors to identify themselves and others according to limited socially legitimate options is simultaneously adhered to and challenged by participants. All participants except Kara (45), who I discuss in the following chapter, see gender identity as Lena describes, like broken painted lines down a road. Lena (83), Cora (55), Adelia (37), and Ione (57) believe that all humans are transgender to some degree, and that a person's body, gender identity, and sexuality are related but not necessarily aligned, nor static. They propose that if left untethered by societal norms, sexuality and gender identities range across a broad spectrum. Echoing Halberstam's (1994) argument that we are all transsexuals and there are no transsexuals, Ione thinks, "that the majority of people transgress gender, as gender is strictly defined", leading her to conclude that there are no strictly cisnormative people and "everyone is cis and trans gender". Ione bases her understanding on her life experience and on knowledge gained as a sex worker. She tells of male clients who paid to spend time with her, not for sex, but because they wanted to dress in women's clothing and put-on makeup and sit with someone who would accept such behaviour and not judge them negatively. Ione saw herself as a quasi-psychologist for these anxious men. She says she "was dealing with people who were trying to deal with gender ambiguity and the ill fit of a human being within this gender binary". Ione believes that these clients' anxieties result from being in a society that insists that "this is what being a male is and this is what being a female is, but he doesn't quite fit any of that". As with transgender individuals who are held personally responsible for their mental illness, other society members who do not conform to gender norm strictures, including Ione's clients, must take individual responsibility for their inability to stay within the confines of their assigned gender lane.

Wrestling with the “ill fit” of the gender lane they were ascribed, wanting but not daring to live as women, Lena (83), Jacinta (55), Janice (66), and Cora (55) tell of periods of cross-dressing in their pre-transition lives. Each participant describes the overwhelming desire to dress in women’s clothing and makeup and the sense of relief and comfort they felt when doing this. But these periods were always followed by an onslaught of feelings of guilt, shame, and remorse as cisnormative strictures closed in on their thinking. Such shame led to frantic purging of female attire; a process Lena describes as full of “hatred of myself ... I became so ashamed and thought I was utterly defective”. Likewise, Cora describes “periodic cross dressing. And then, of course, the hatred of myself and the purging that left me in a really schizoid state”. These transgender women suffered years of sessions of cross-dressing immediately followed by purging and self-loathing because they say they knew that, within cisnormative society, cross-dressing was an illegitimate option and therefore wrong. Rather than question the rigid gender dress and behaviour code, however, they blamed themselves and internalised the shame. Enforcement of social expectations around gender normativity creates the conditions and situations where the individual must take responsibility for the anxiety produced by their “ill fit”.

Participants describe the act of cross dressing as a means of managing the dissonance produced by the enforcement of the ill fit of gender normativity, while allowing them to temporarily resist the possibility of transition and the risk of disrupting their established lives. For decades, Lena (83) cross-dressed, veering back and forth across gender normative demarcation lines, convincing herself that this activity would satisfy her urge to live as a woman. Following her divorce, she no longer felt compelled to

disguise her gender identity and made the decision to transition. According to Lena, this decision initiated a major disruption to her life. She not only changed her body and gender identity but had to alter all legal documentation as she created a new life for herself. This experience led Lena to compare the public exercise of transition with the more private and mutable experiences of other people who live gender and sexuality diverse lives.

It's easier for some other groups of people, for instance, a gay person can decide that they're gay and they don't have to get any documents changed, they don't have to get permission from anybody, they just go to the gay haunts and watering holes, and meet other people, and have a good time. Then, 3 weeks later, they may say, 'Maybe I'm not', and they can do the whole thing in reverse. They have a lot more freedom to move than a person who is transgendered [sic]. Even transvestites very often go through cycles of, 'I'm giving it all up,' so they burn everything or give it away to charity. Then, sooner or later, they find themselves back, desperately wanting to be the person that they think is inside them.

Lena believes that not having to document physical changes to bodies affords homosexuals and transvestites a marginal degree of privacy. She says that for transgender people who transition, the visibility of their gender change and the alteration to publicly available personal identification documentation make it impossible for transgender people to maintain privacy. Such lack of privacy sets transgender people up for scapegoating, stalking, discrimination, and abuse (Ussher, 2020).

The lesbian, gay, bi-sexual, and transgender (LGBT) community has suffered discrimination and violence over many decades, and as documented by Berman and Robinson (2010), this is particularly the case for transgender women. Publicly available identity documentation, such as driver's licence, passport, Medicare card (that provides access to free healthcare in Australia), credit card, birth certificate, and more, mean that personal details, such as home address, email, and phone number,

make the transgender person an easy target for maltreatment. Lena (83) offers the example of the misuse of personal information by an “odd-bod constable” that resulted in the violent abuse of a transgender woman.

This situation happened a few years ago when they arrested a guy. His girlfriend came to bail him out, ... and she was known to the police as a transgender prostitute. So, they jeered at this guy as they released him, saying, ‘Shacking up with a tranny, what’s wrong with you?’ He went home and bashed his girlfriend. Two police, I must admit, got into trouble for it, but they shouldn’t have even had access to that information.

Lena says she appreciates the necessity of recording changes to gender on official documents, “otherwise it’d be very easy for people with criminal intent just to change their licenses and wipe out all their previous crimes and misdemeanours”. But to avoid targeting and abuse of transgender people, she suggests “these records be accessible only to selective people”. While Lena’s proposal to limit availability of personal identity documents has the potential to reduce targeting and abuse of transgender people, it is a solution that leaves transgender people in a precarious position and dependent on the attitude and normative beliefs of the law enforcement officer. I discuss the inconsistency of service delivery by those in positions of institutional power and the uncertainty this produces in transgender people in more detail in Chapter Five.

The requirement for transgender people who wish to officially record their transition forces the person to select one stable identity—male, female, or other. Such static identification presents a dilemma for people who experience transgender identity as a series of on-going choices involving movement of identity according to social necessity, personal desire, and changes to perceptions of normativity. As such, most participants conceptualise gender as negotiable. For example, both Lena (83) and Juliette (39) describe gender as painted lines down a road, with Juliette adding that

“being transgender means that the lines are blurred”, that the lines are merely suggestions. Juliette understands that each transgender person negotiates their own way of making sense of their life’s narrative as they navigate their own lived reality with the overlay and imposition of society’s gender normative expectations and separate and distinct gender lanes. Cora (55) spent many years trying to adhere to gender normative expectations, and her young life was dominated by her parents’ strict views on traditional gender roles. Only recently, and after years of therapy, has Cora been freed from her early conditioning and thinking on gender identity and sexuality. Cora says she has “let go of the need to be a woman. Now I don’t define myself as a woman, I see myself as a transwoman ... So, if you like, I have landed in a third gender position”. Cora is not intent on doing away with gender identifications, but rather broadening and loosening the grip of tight, prescriptive, and static definitions and expectations.

Different participant narratives represent individual “self-representations” (Riggs, 2013, 66) or accords negotiated by them to make sense of their changing bodies, lived experience, and interactions with other social actors who, like these participants over time and along with social progress, also changed their perceptions of gender normativity. Participant responses describe ever-changing interactions with other social actors that attest to the inadequacy of binary conceptualisations such as normative *versus* non-normative to account for and constrict the rich diversity present in all members of society.

Chapter Conclusion

This chapter has examined gender normativity as a group project and the impact on transgender people of social and community definitions of gender

normativity. It argues that gender normativity is constructed relationally, between an individual's knowable gender identity, their own perceptions of the meanings of gender and sexual normativity, and the gender and sexual norm expectations of their family, friends, and communities. These expectations are enforced through pressure, which can take the shape of emotional manipulation, exclusion, and violence. In social interactions, transgender people must navigate other people's understanding of gender normativity while conscious that they do not fit normative definitions and trying to find pathways to affirm their identities. In the process, they simultaneously challenge and perform gender normativity. Their experiences demonstrate that in practice, the theoretical distinction between normative *or* non-normative transgender identities, as discussed in Chapter Two, does not usefully explain the experiences of transgender participants in this study. As Halberstam puts it, there is no "natural divide" (Halberstam, 1994, 212). Transgender people are both normative *and* non-normative in practice. Additionally, this chapter also makes clear that the definition of normativity is itself unstable as it is constantly changing according to historical and social context. Such instability of definition has real-life consequences for transgender people, including the decision whether to alter their bodies, or not, and the extent to which they are included or excluded from both cisgender and transgender communities, and the wider social world.

In the following chapter, Chapter Five, I examine transgender participant's interaction with the people who work within society's institutions, particularly the medical and legal professions. New ways of caring for, treating, and legally identifying transgender people demonstrate social progress and changing perceptions of normativity. However, to date, for the most part, in day-to-day interactions with

people who work in the medical and legal professions, transgender participants encounter people and institutions that reify normative notions of binary, static, gender identity. Participants' dealings with these professionals reveal that gender normativity is embedded in the professions as well as the social structures that encompass them. Professionals reproduce the binary thinking of their professions, the institutions in which they work, and their social environments. In order to get their needs met, transgender people must navigate their interactions with these professionals while aware that success is dependent on whether the individual professional is prepared to think in terms of the transgender person's experiences.

Chapter Five

Gender Normativity: Confronting the Binary in Institutions

Kara's story

In her role as a senior executive in a multinational consulting firm, Kara (45) wields significant professional power and influence. She has not come out to anyone in her firm and is read as cisgender and normatively female 100% of the time. Of medium height, slim and fit, Kara has good posture and narrow shoulders that she is proud of. Elegantly dressed, Kara exudes confidence throughout our interview. She is intelligent, self-aware, and curious about life and fellow humans.

Kara transitioned while working for another large company, in another city. Initially, she thought it best to leave both the work environment and the city in which she lived, and then find employment as Kara and in a different place after she had transitioned. When she relayed this plan to her boss, he encouraged her to stay with the company while she transitioned and committed his full support. The company conducted “a whole machine” of lectures and education programs for all her work colleagues while she was away for 6 months undergoing medical transition and recuperation. Of her re-entry to her workplace, Kara says,

I think of my audacity. I just waltzed back into work 6 months later and I was embraced. From day one I was Kara ... I would imagine that probably within 5 years no one had any memory of what had happened.

This level of support and preparation allowed Kara to successfully assimilate back into her work environment.

To undertake the necessary surgery, Kara's surgeon required approval letters from two psychiatrists. After not liking the first psychiatrist she met, Kara searched out gender support networks in her home city to obtain a referral to a more supportive psychiatrist.

I was under an endocrinologist when I was transitioning and met with a psychiatrist who I didn't like. I like everybody so it was really interesting to me that this fellow just clearly did not want to be in the position that he was in. That was my feeling. I wanted someone else. I remember going in [to the Gender Centre] and had this meeting. I never went back in there, but they referred me to a psychiatrist ... Very quirky psychiatrist, but he was great. It was him, his report that enabled me to not have to live as a female pre-surgery. That was hugely important to me. I can't really explain why.

Following her transition, Kara worked in the same office for 10 years before relocating to another city.

I saw it as an opportunity to not escape my history, but I thought going to an environment where I am just me and it's not a part of my story and I never spoke about it again.

In this new city, she was head hunted by the company she still works for. Both during the interview process and afterwards, Kara did not tell her new company of her transgender identity.

Kara describes her transition at 21, 24 years ago, as so complete that now she has difficulty remembering presenting as male. Kara does not use her dead name and she has destroyed photographs of her pre-transition self.

I can't remember being male ...I don't think there are any photos around of me as a male. I think I destroyed them all which is terrible. I'm sure probably my dad would have some buried away somewhere. I kinda want to have a look now. I had short hair and a boy's school uniform, but I wasn't very good at being masculine. It never occurred to me to go and get biceps and be well-built like you see those guys.

Her assimilation is complete, and in a recent conversation, Kara's life-long friend admitted that she could not remember Kara presenting as male, and that extended family and friends never refer to her transition.

When she was recuperating from surgery, and sharing a ward with an older transgender woman, Kara witnessed some of the mental health issues suffered by many in the transgender community.

The first time I ever met another transgender person was in recovery at the hospital. Another girl, much older than me, much more complicated personal circumstances and I would say psychologically damaged, which impacted me as well. That's probably the time that I opted out of thinking I would have anything to do with that particular community.

Since that incident, Kara has avoided transgender communities. However, in the 6 months prior to our interview, she decided to up-date herself on transgender issues and advocacy. After familiarising herself with the gender support network web site in her new city, Kara was again confronted with the real-life circumstances of many in the transgender community. On the web site she saw "things about syringe exchange and HIV, and I get that that's the reality for some people".

At this stage of her life, however, her response is to want to help and support.

I feel now, oh my goodness, I've had this dream run, maybe I would be able to help somebody that was to go through a similar situation now ... I seem to have unfairly benefited from the work other people have done. I feel that there's maybe a little bit of debt that I need to repay. I just don't know what that looks like yet.

It was while reading the web site's newsletter that Kara came across an article that mentioned my research project. Kara contacted me directly because she wanted to talk about her story.

Recently, senior directors in her company indicated that Kara is being considered for a promotion, and this possibility prompted her to think about revealing her transgender identity. She believes that by telling others her life story she may advance the understanding of transgender people. Kara feels that it is time for her to give back to the transgender community after her 24 years of what she calls a “dream run”. But there is much at stake, and the personal cost could be high. Kara fears becoming recognised for her transgender identity only, rather than her competency in the workplace.

Kara is aware that she is in a position of power and privilege. She was born into a loving, middle-class family, and received her education in a private boys’ school. She transitioned when she was 21, and single. As a result, she advocates for early medical assistance for gender diverse adolescents.

What I have learned is the best part about my dream run is that I didn’t ever go and make my life more complicated than it needed to be because then you just impact so many other people around you ... no matter how well-meaning you are, it’s a very narcissistic thing to do and you come through that. But the damage you could do, particularly if you had a spouse and children. I shudder to think.

Kara attributes her “dream run” to her early transition, the waiving of the stipulation that she would have to live as a woman for 12-months prior to transition, the support and love of her family, her social and economic circumstances, education, the support of her workplace, her confidence, self-assurance, and ability to communicate well, and her ability to be read as cisgender. Her experience demonstrates how many factors are critical to transgender people’s gender affirmation.

Kara's life advantages mean that she deals easily with other professionals and institutions. For example, she recalls changing her passport.

I remember this very male, very blokey fellow in the passport office. He was so embarrassed for me. I remember him taking me into a private room, so I wasn't at the public counter. I had my two psychiatrist's reports and the medical information that they needed. Back then, they wouldn't have had the IT systems and the checking that I would imagine they go through now, particularly with privacy and terrorism and all those things. There were a few stamps that happened and then I had a new passport [within] I would say 36 hours.

Kara's stable, gender normative identity, her socio-economic status, and interpersonal communication skills encourage the confidence and ease with which she negotiates interactions with other social actors, structures, and institutions.

Introduction

Kara's (45) story illuminates the role of social institutions such as workplaces, governmental law makers and enforcers, and the medical and psychiatric professions. Social institutions such as these form the bedrock of contemporary societies and intersect to regulate and to manage human bodies, their movement, social interactions, and social acceptance (Connell, 2002). Transgender people must interact with the law and medical institutions to get their needs met, and often these institutions' procedures intersect, forming a web of compliance. For example, when transgender people apply for gender identity changes on official documents, they must supply proof of medical or psychological treatment. While many institutional policies and procedures have been advanced to be inclusive of people with diverse gender and sexual identities, participants describe inconsistent service delivery. Such inconsistency includes a confusion of different and conflicting laws and procedures and having to negotiate with some people in legal and medical institutions who maintain traditional gender normative beliefs. Kara's story also illuminates the role of

transgender people's own socioeconomic backgrounds and resources in their ability to confidently navigate normative institutional forces and affirm their gender identities.

In this chapter, I examine transgender people's interactions with the social institutions that have a direct effect on their lives: government, legal administration and law enforcement, and the medical and mental health profession. The discussion of these institutions and professions, and the people who act as their gatekeepers, demonstrates the extent to which transgender people's identities are produced and regulated by institutional forces. I begin with a brief overview of the law to do with change of gender identity on official documents and then explore how these laws, and their enforcement, affect and constrain the lives of transgender participants. Second, I give an overview of how the medical treatment and care of transgender people has advanced in recent decades, progressing from the diagnostic model and its reliance on the transgender patient having to adhere to a distress narrative to the informed consent model that encourages the patients' agency and a mutually respectful relationship. Then I analyse the ways in which transgender participants negotiate face-to-face interactions with medical and mental health professionals. Participants' narratives reveal tensions produced when powerful institutions such as medicine and the law instil normative expectations through micro social interactions between professionals who work in these institutions and people from a disempowered marginalised group. Their stories also reflect the extent to which their own backgrounds influence the ways that they are able to navigate powerful structures. At the same time, participants demonstrate agency and resilience in the ways that they persistently navigate these norms reproduced through institutional practices, and remain committed to achieving

alignment, including by establishing alternative communities of knowledge and support.

The Law

A brief overview of Australian laws that govern changes to formal identity documents reveals a complex web of ever changing medical and legal requirements for transgender people, made more confusing by the fact that each state and territory and the Commonwealth government have different responsibilities and laws and offer inconsistent services (Abiom, 2020a; Connell, 2021; Haire et al., 2021). Australia has an over-arching structure of the national Commonwealth Government of Australia, and a federation of states and territories, each with their own government and laws. This second tier of government is made up of six states—New South Wales, Queensland, Victoria, South Australia, Western Australia, and Tasmania—and two state territories—the Northern Territory and the Australia Capital Territory. The Commonwealth government and the states and territories divide and share governmental responsibilities, with the Australian Constitution specifying which areas are Commonwealth government responsibilities. These ‘heads of power’, in the main, are specified in Section V, Part I of the Australian Constitution¹.

The Commonwealth government is responsible for the national health, Medicare, and welfare systems, and the allocation of passports and visas. For 20 years and up until 2007, the Commonwealth Government issued interim 1-year passports to transgender people traveling overseas to undergo affirmation surgery. This arrangement was rescinded in 2007, but reinstated in 2011, along with the deletion of the requirement

¹ Australian Constitution, Part V – Powers of the Parliament. <https://www.apf.gov.au>

for sex affirmation surgery before making application for a passport. As of July 2013, any person living in the Commonwealth of Australia has the right to revise their gender identity on Commonwealth issued documents with any Commonwealth government agency. The person must provide a statement from one treating medical practitioner, psychiatrist, or psychologist stating that the person making the application is receiving treatment (not necessarily surgical treatment) or have a birth certificate, gender recognition certificate (Western Australia), or an identity acknowledgement certificate (South Australia) displaying their revised gender identity. Additionally, up until 9th December 2017² when the marriage equality bill became legal in the Commonwealth of Australia, and therefore in states and territories, married gender diverse people wishing to legally transition were forced to divorce.

Each state and territory are responsible for change of gender identity and name on driver's licences and birth certificates. If a transgender person wishes to change their name and/or gender identity on these documents, they must make application to the state where they were born or adopted and abide by the law of that state. At the time of writing this thesis, in Western Australia, the person must obtain a recognition certificate that is issued on receipt of an application form accompanied by a declaration from one doctor or psychologist certifying that the person has undergone a reassignment procedure. Such a procedure may include hormones and surgery or hormone treatment alone. In South Australia and in the Australian Capital Territory (ACT), gender diverse people can apply for a change to their gender identification,

² On 9th December 2017, the *Marriage Act 1961* was updated by the federal parliament to allow for marriage equality. The right to marry in Australia was no longer determined by sex or gender. www.ag.gov.au

and this application must be accompanied by a declaration from one doctor or psychologist stating that the person is undergoing appropriate medical treatment. This treatment may be counselling and/or hormones and/or surgery. In Victoria, the law changed in May 2020, and people may request an alteration to their official documents by making an application accompanied by a statement from an adult they have known for 12 months and declaring that the application is made in good faith. No proof of medical or psychological treatment is required. Also, the person can, within limited options, select their own gender identification. In New South Wales and Queensland, a person who wishes to change their gender identification must provide declarations from two medical practitioners verifying that the person has undergone sex reassignment surgery. In Queensland, unlike all other states and territories, a person's sex change is recorded on their birth certificate as a note and no new birth certificate is issued.

The mix of regulations pertaining to gender identity change for the Commonwealth, states, and territories creates a variable and confusing set of recognitions for transgender people. The legal procedure erases many transgender people's lived experiences of who they are. For transgender people such as the participants in this study, they are not changing their gender, but rather, they are affirming their knowable gender identity and having it recognised in their wider social world. Government policy language does not recognise this aspect of transgender people's lived experience of gender identity.

In 2013, the Commonwealth Government allowed gender identification on passports to be either male, female, or X³. The Commonwealth Government warns, however, that while the gender identity category X is in accordance with international standards, Australian gender diverse people visiting certain countries may encounter difficulties with authorities when crossing some international borders. In 2014, Norrie May-Welby was the first transgender person to be recognised by the Commonwealth of Australia as having non-specific gender. In the same year, the Australian Capital Territory announced that gender identification on birth certificates could be assigned male, female, or X, regardless of surgery or hormone treatment. In 2019, the Tasmanian Government's *Births, Deaths and Marriages Register Act* was passed allowing the registration of gender on birth certificates to be a matter of personal preference of the parents, and that changes to gender identification are based on self-identification and require only a statutory declaration from the applicant.

During the last three decades, Australian transgender advocacy groups have lobbied Commonwealth, state, and territory governments for the abolition of the requirement for transgender individuals to undergo sex alignment surgery before changing their gender identity on state documents. These advocacy groups aim for individual responsibility for gender identity and embodiment rather than inconsistent and dictatorial government control. In 2008, the Australian Capital Territory was the first to abolish the requirement for sex alignment surgery along with forced divorce. In Western Australia, a successful High Court challenge in 2012 forced the state government to delete the requirement for transgender individuals to undergo surgery prior to approval of a change of gender classification. In 2016, South Australia

³ Australian Government guidelines on the recognition of sex and gender, 2015. <https://www.ag.gov.au>

abolished the requirement for sex alignment surgery and forced divorce, and in 2019, the Victorian government passed the law abolishing the requirement for sex alignment surgery to change gender identification on birth certificates. The marriage equality bill passed in the Commonwealth parliament on 9th December 2017, becoming law early the following year. All states then had to pass state laws that recognise same-sex marriage, thereby negating forced divorce for transgender people. At the time of writing, New South Wales and Queensland require sex alignment surgery in order for an individual to be recognised as a different gender from the one they were assigned at birth, and the person applying for a change of gender identity on their birth certificate or driver's licence must produce statutory declarations from two medical practitioners to prove that they have undergone surgery.

In sum, these progressive changes to federal, state, and territory laws reflect social progress. Nonetheless, despite the efforts by governments to be sensitive to transgender identities, for example, with the introduction of alternate gender markers such as X on official documents, these advances risk masking the ways institutions continue to distribute rights and privileges according to normative standards of gender (Davis, 2017). Further, transgender people do not experience the uniform protections that gender normative people enjoy. Transgender people must interact with individual representatives of these law-making institutions and these representatives hold subjective views of gender that the transgender person must navigate in order to get their needs met. Transgender participants' stories of anti-transgender bias and the associated inconsistent service delivery illuminate the precarious nature of transgender people's interactions with the state and its representatives (de Vries, 2014).

In the previous section, I document the current situation with Australian passports. In sum, Australian transgender participants may change their gender identity on their passports without the need for alignment surgery, and they may select a gender identification from the categories, male, female, or X. Kara (45) regularly travels interstate and internationally for business and leisure and does not report any difficulty with border officials. She has the identification female on her passport, has medically transitioned, and is read by others as cisgender. Unlike Kate, Anthony (35) is concerned when travelling internationally and when transferring through Middle Eastern countries because he is worried that scanners will reveal his transgender identity. He has had chest surgery, takes hormones, and is identified as male on his passport.

I think the situations that make me most nervous are when I'm traveling internationally because you have to go through the body scanners. They always freak me out because I don't know what's gonna be the response from that, and in different countries, the response may or may not be more or less scary. So, I have a strategy. If I'm traveling with my partner or traveling with friends, almost always it's like, 'Let me go first, then if something happens to me, then you can come after and help' ... it does make me nervous, stopping in say, Singapore or Malaysia or Dubai. I do what I can. [These countries are] not really the places where I'd like to be having those conversations with folks, so that makes me nervous.

Despite his concern, Anthony explains how he manages negotiations with officials in government departments by appealing to gender norm expectations.

Society expects men to be kind of confident and take up space and be bossy, and I'm a pretty confident human. So, I think when dealing with government departments, I tend to just be like, 'Sort it out!'. I am fairly confident in that. I've had good responses. I imagine if you are a trans woman, being that bossy, you might get a different response because women aren't supposed to behave like that.

By emulating the confident mannerism associated with masculinism (Nicholas and Agius, 2018), Anthony says he enjoys the "ease of walking through the world as a man". His observation of the corresponding expectation that women should not

display confidence and authority, and how this negative expectation reduces women's ability to defend themselves, is foundational to the gender order. In Chapter Eight, I return to discuss the effects of these opposing gender expectations and elaborate on Anthony's newfound experience of walking with ease.

When dealing with law enforcement, Ansel (55) and Nat (30), like Anthony (35), are nervous and ambivalent. Despite extensive efforts by state governments' police forces to advance policies and practices that foster community outreach, build trust, enhance safety, and encourage gay, lesbian, and transgender people to report crimes against them (see Berman and Robinson, 2010, for an analysis of New South Wales, Victoria, and Queensland state police and police liaison officer programs), these participants are hesitant when dealing with law enforcement officers. They believe such encounters will be inconsistent depending on the gender normative beliefs of each officer. Nat (30) divulges another reason transgender people might be concerned with law enforcement. If a transgender person is imprisoned in a foreign country because of a discrepancy in their passport gender identification, or convicted of a misdemeanour and sent to prison in Australia, would they be incarcerated in a men's or women's prison? Nat recalls someone once asking him, "If you got arrested and you got thrown in prison, where would you want to go?" Without hesitation he answered, "A woman's prison", and added, "Even a bloke would say that". While acknowledging the logic of selecting a female prison because of the risk to his personal safety posed by imprisonment in a male prison, Nat struggles with the paradox his preference presents for his own gender identity.

Well, ... Even a cis bloke would say he wanted to be in a woman's prison compared to a man's prison ... They're the hardest prisons in the world ... I certainly wouldn't want to be in a men's prison in the men's shower ... So, I

would try and exercise the privilege of my birth certificate, and go well hold on, from a technical point of view, that says F, so put me in that jail.

Nat asks for social recognition as a man, despite his birth certificate classification as female, and his genitalia normatively coded female. However, when pressed in the stressful situation of facing imprisonment, he asks that his stated gender identity be ignored and that he be recognised as a female. Ansel (55), too, talks about the dilemma of the prospect of gender segregated imprisonment.

You've decided to live your life as male. [Therefore] you don't get the right to be in this gaol [female], regardless of your genitals. [But in the case of preferencing a female gaol] I'm asking society to not look at my gender identity, but to now judge me on my genitals ... what's between my legs or what I was born. So, if something bad happens to you, do you go – oh, can I have the softer side of this? I've literally asked every trans man friend of mine and they've all said female prison, so I know I'm not alone in it.

These participants' responses reveal issues they anticipate when negotiating normative institutions and the individual "self-representations" (Riggs, 2013, 66) or accords they strike to make sense of their conflicting concerns when navigating what Reeser (2013) names the "omnipresent sexual binarism of the nation state" (2013, 9). Such concerns are not top of mind for cis gender people, thereby highlighting the ways institutions are normatively constructed and constrict the everyday lives of gender diverse people.

In sum, the history and current state of the law in Australia as it pertains to gender diversity is a complex mix of changing state, territory, and Commonwealth governments' stipulations. Trans advocacy has led to social progress and improvements to these laws and their implementation; however, these improvements are applied inconsistently across states and territories. The transgender person must not only navigate this confusing web of different laws and conditions of application,

but they must also negotiate with individual officials and law enforcement officers. Therefore, despite the law reform at the administrative level, as outlined earlier in this chapter, at the practical social interactional level, legal outcomes often adhere to gender normative expectations.

The face-to-face interactions with the law reported by participants reveal inconsistent outcomes. Such inconsistency depends on, among other variables, the gender normative beliefs of the individual provider, the transgender person's ability to be read by others as either cisgendered male or female, and their communication skills to convince others of their need for assistance. In these instances, the intersection of class with gender identity is strikingly evident. I selected Kara (45) as spokesperson for this chapter as her education, supportive workplace, successful career, financial independence, communication style, and her ability to be read by others as normatively female, give her greater ease when navigating law administration and enforcement. Other participants are more reticent and apprehensive in such dealings as they anticipate difficulties when interacting with individual law administrators and enforcers. This can be due to their socioeconomic backgrounds, the extent of support they have had from family and friends, and the extent to which they fit normative gender identity in public. Their narratives highlight the inconsistent and unpredictable service delivery layered on the complex legal systems and procedures summarised above, and how these interact with participants' own backgrounds, circumstances, and presentation in the world. Participant trepidation when interacting with law enforcers creates stress through the re-living of what Nixon (2011) describes as cumulative traumatising past violence. The uncertainty of dealing with the law has fostered a fear of the legal system in some participants as they voice their concern for the gender

normative nature of institutions such as the prison system. Such fear and trepidation results in participants sensing that in this context they must constrict their gender expression to that of a stable normative identity, either male or female, and maintain a low social profile.

Medical and Mental Health

Here, I examine a second powerful social institution, the medical establishment, and the medical and psychiatric diagnosis and treatment of transgender people. This overview includes an exploration of transgender participants' experiences of navigating this system, the power differential between themselves and the people who administer and implement medical and mental health treatment, and the constricting effect this normative system imposes on participants' gender expression.

Medical and mental health professions' diagnosis and treatment of transgender patients, and transgender participants' navigation of these arrangements include their negotiations with the professionals who administer them. The current rules and arrangements covering the diagnosis and treatment of transgender people in Australia intertwine with the legal parameters as outlined in the previous sections to form a matrix of management and control. Transgender participants' experiences of this matrix reveal the inconsistent application of these arrangements by those working in the medical and mental health professions. When a person does not conform to gender norms nor comply with this matrix of control, the individual, rather than the system, is censured, and must limit their gender expression to get their needs met.

In documenting the medical and psychiatric profession's arrangement for the diagnosis and treatment of gender diverse people in Australia, I focus on the treatment of those gender diverse people who wish to medically transition. Currently, in Australia, medical and mental health practitioners diagnose and treat transgender patients according to the guidelines recommended by the World Professional Association of Transgender Health (WPATH)⁴, whose mission, as stated by Schultz (2018, 73), is to “promote evidence-based care, education, research advocacy, public policy, and respect in transgender health”. WPATH determines the recommended Standards of Care (SOC) for the provision of a wide range of world-wide health services relating to gender transition (Coleman et al., 2012). These internationally accepted clinical guidelines set out the professional consensus for the psychiatric, psychological, medical, and surgical support of transgender individuals. These guidelines provide clinical guidance for health professionals to “assist transsexual, transgender, and gender non-conforming people with safe and effective pathways to achieving lasting personal comfort with their gendered selves, in order to maximise their overall health, psychological well-being, and self-fulfilment” (Coleman et al., 2012, 166). The WPATH authors (Coleman et. al., 2012) emphasise that the stated criteria are not requirements, but rather recommendations for best practice treatment of transgender individuals.

⁴ The World Professional Association of Transgender Health (WPATH) (<https://wpath.org>) is an international organisation of professional health practitioners who are committed to the understanding and treatment of transgender people.

The local chapter of WPATH, the Australian and New Zealand Professional Association of Transgender Health (ANZPATH), formed at the World Professional Association of Transgender Health WPATH 2009 conference⁵. In 2019, ANZPATH changed its name to AusPATH and supported the New Zealand contingent to form its own national organisation. Based on the WPATH guidelines, the Australian association developed its own SOC protocols for the care of transgender people living in Australia. As with the WPATH guidelines, the AusPATH guidelines recommend that a qualified mental health professional be the first contact with the transgender person seeking intervention. The mental health practitioner is responsible for ascertaining the person's readiness for transition or whether the diagnosis of gender dysphoria is not better accounted for by other mental health diagnoses (Schulz, 2018). If the person is considered suitable for medical transition, the mental health practitioner completes a referral document addressed to a surgeon and/or an endocrinologist that includes details of the patient's history and eligibility for hormone treatment and/or surgery. One referral letter is required for breast/chest surgery and two referrals by independent mental health professionals are recommended for genital surgery. Additionally, a diagnostic code from the *International Classification of Diseases and Related Health Problems, Tenth Revision* (World Health Organisation, 1992) is required⁶. This code is necessary for treatment to proceed, and a requirement for eligibility to claim partial reimbursement for some of the cost of treatment via the Australian national health scheme, Medicare.

³ The Australian and New Zealand Professional Association of Transgender Health (ANZPATH) (<https://www.auspath.org>) is the local chapter of WPATH.

⁶ Centre for Disease Control and Prevention, National Centre for Health Statistics.
<https://www.cdc.gov>

The power of the medical and mental health establishment is based on practitioners' knowledge, experience, and access to treatment for their patients, and Kaba and Sooriakumaran (2007) argue that this situation creates an uneven balance of power between doctor and patient. The power differential that exists between the medical practitioner and patient is exacerbated in the practitioner/transgender patient relationship (Poteat et al., 2013; Riggs et al., 2014). Poteat et al. (2013) contend that social hierarchies of power serve to reinforce inequalities and that interpersonal stigma such as transgender identity, in turn, fortifies the already exalted medical power and increases the power differential between doctor and patient. Most medical interventions inform patients about treatment options and the patient and doctor together make the decision whether to proceed or not. However, for transgender patients, the mental health practitioner is the sole person to decide if the individual seeking medical intervention obtains the treatment they want. In the next section of this chapter, I explore how the power differential between doctor and transgender patient discussed in studies by Poteat et al., and evident in this study's findings, manifest in both the diagnostic and informed consent models of transgender treatment and care.

The Diagnostic Model

The diagnosis of gender dysphoria plays a key role in transgender individuals being referred for treatment to transition. The diagnosis of gender dysphoria (American Psychiatric Association, [APA], 2013)⁷ was formerly known as gender identity disorder (APA, 1980) and was included in the *Diagnostic and Statistical Manual of Mental Disorders, Third Edition (DSM III)*. The disorder was separated

⁷ American Psychiatric Association [APA], 2013. <https://apa.org>

into two diagnoses: transsexualism for adults and adolescents, and gender identity disorder for children (Zucker and Spitzer, 2005; Schulz, 2018). The diagnosis was revised in 1994 in the *DSM-IV* (fourth edition), replacing transsexualism with gender identity disorder but maintaining the two separate subsets for adults and children. This edition removed the categorisation of transgender identity as a condition and mental health disorder, replacing it with the category of gender dysphoria. In the recent and current edition, the *DSM-V* (fifth edition) (APA, 2013)⁸, while the transgender person seeking medical treatment is no longer considered to suffer from a mental illness, the diagnosis continues what Davies (2018) calls the “subtle pathologisation of this subjectivity” (2018, 18). Such subtlety is evident in the need for a diagnosis of gender dysphoria to obtain partial financial reimbursement for the cost of some treatments under Medicare and additional private health cover. Treatment and the cost involved depend on diagnosis, which adds weight to the practitioner/transgender patient power imbalance and puts pressure on the transgender person to adhere to the gender dysphoria distress narrative and gender norm expectations.

To meet the criteria for the diagnosis of gender dysphoria and subsequent treatment, the person must claim that they have experienced continuous incongruence between their knowable gender identity and their assigned gender for a period of at least 6 months. The distress narrative is foundational to the diagnostic model, with the implication that the distress the transgender individual experiences is due to the individual’s underlying mental imbalance. If a transgender person does not comply, they risk being unable to convince the practitioner of their need to transition, and so be excluded from treatment. Whether the person is distressed or not, they feel

⁸ *DSM-V* (fifth edition), APA, 2013. <https://www.dsm.psychiatryonline.org>

pressure to adhere to the distress narrative and describe experiencing an inability to function socially and with regards to employment. Lev (2004) argues that such a determination negates the very real possibility that the person's distress is due largely to society's response to gender expressions that are deemed non-normative. Members of the transgender community suffer from discrimination in all areas of social life and the resultant distress is elevated when rejected by family and friends or refused treatment to transition by health care practitioners (Haas et al., 2014; Grant et al., 2011; Halliday and Caltabiano, 2020). Therefore, as Lev argues, the distress transgender people report may be largely due to societal discrimination and ill treatment and not the internal distress viewed as the core component required by the DSM diagnostic model.

Transgender people who wish to transition are responsible for convincing the practitioner of a uniform distress narrative, and the intent to adhere to a normative identity. As will be discussed in Chapter Seven, Cora (55) felt the pressure to appear normative in her appointments with her psychiatrist, and this discouraged her, and other transgender people, from openly describing and discussing their own experience of gender variance. When this situation occurs, the transgender person cannot enter an honest relationship with the therapist and so does not receive helpful and life enhancing counselling. In turn, the normative beliefs of the therapist go unchallenged and are reinforced. Janice's (66) shame and guilt induced by fear of what other social actors would think of her cross-dressing and desire to live as woman resulted in her inability to discuss gender with her psychologist. Consequently, she suffered alone and in silence, and the anxiety attacks she experienced increased in number and intensity.

Not all participants felt the need to adhere to the distress narrative. Kara (45), for example, told her psychiatrist that rather than feeling distressed, she felt a persistent, strong determination to transition and to live as a normative woman. For both transgender people who experience distress and those who do not, the possibility of being refused treatment encourages transgender people to describe or even to exaggerate a personal distress narrative. Such a reliance on a distress narrative leads Schulz (2018) to conclude that some transgender people learn to “perpetuate a personal narrative rooted in distress and body dysphoria” (2018, 79). In other words, some transgender people pathologise themselves as well as being pathologised by the mental health establishment. Kara’s (45) markedly different experience from the other participants indicate the wide variety of lives lived by transgender people and the impossibility of confining these diverse lived realities to one single narrative and diagnosis, particularly one that hinges on a unified narrative of dysphoric distress.

One critique of the diagnostic model is that it continues to pathologise transgender identity. The latest *DSM-V* version includes reference to continued mental health care for transgender people, and while continued care may have beneficial mental health outcomes for some post-transition transgender people, such care continues the psychiatric diagnosis and attached distress narrative into post-transition life. As such, a reliance on the mental health diagnosis is contested among some medical professionals and transgender people. Schulz (2018) argues that the DSM diagnostic model of gender dysphoria has been institutionalised into medical, mental health, and social work training programs. Such institutionalisation and reliance on the diagnostic model make it difficult for medical and mental health practitioners and for

professionals in the law and policy development to develop an appreciation of the diversity, complexity, multiplicity, and mutability of gender identities. Gifford (2019) contends that, by definition, the medical diagnosis model forecloses notions of transgender identity that are non-medical and self-determining and that go beyond static identity and gender normative conceptualisations of gender and sexuality. Shepherd and Hanckel's (2021) study of the ontologies of transitions in healthcare delivery advocates for "widening the possibilities" (2021, 53) of transgender transition to be inclusive of the diverse lived realities of transgender people thereby reducing the harm inflicted by restrictive adherence to the binary gender system.

A second critique of the medicalisation model of care is the onus it places on the individual practitioner to decide if the person is suitable for treatment (Connell, 2021). The granting of this responsibility is based on the assumed objectivity of medical and mental health professionals. But Gifford (2019) argues that the assumption of such an "objective outside eye" is an illusion, and even the most well-meaning practitioners are not "immune" (2019, 20) to the force of the social process of cisnormativity. Practitioners are members of society and hold a diversity of views about gender as is evident within the general population. Therefore, the influence of the "master" cisnormative narrative and the transnormative "hegemonic alternative narrative" (Bradford and Syed, 2019) to make itself felt through the power imbalance in the practitioner/transgender patient relationship is an all-encompassing theme for transgender individuals wanting to obtain medical treatment. To convince the practitioner of their need to transition, the transgender person must ascertain the gender assumptions of the practitioner, and act in accordance with them. Shultz (2018) argues such play-acting limits the opportunity for the gender diverse person to

“truly explore the risks, benefits, side effects, and other potential consequences” (2018, 82) of transition. Further, Schultz proposes that a combination of the individual practitioner’s gender norm assumptions and dependence on the diagnostic model—particularly the distress narrative—erases the lived realities of many transgender identities.

Orion’s (26) experience provides an example of how some transgender people often have to navigate a practitioner’s binary gender norms. Orion found that his psychiatrist adheres to this belief system and describes his psychiatrist as “very old-fashioned” in his understanding of masculine gender identity. When Orion began his transition, as recently as 6 years ago, he had to get an approval letter from his psychiatrist, but he found it impossible to identify with the doctor’s description of masculinity. Orion argued with his psychiatrist, saying, “I am male, but some of the things you are describing are not me. And you are saying because I don’t tick all those boxes that I am not who I say I am”. After some time, and only when Orion finally agreed with the psychiatrist’s description of masculinity, did he get his longed-for approval letter. Orion admits, “It was a lot like he was saying stuff and I just had to agree to it”. He felt that to get his referral letter, he was coerced into adhering to the psychiatrist’s expectation of what a man should be and how a man should behave. This interaction demonstrates the precariousness of transgender people’s positions in relation to powerful professionals and how these micro face-to-face interactions illuminate how gender relations reinforce normative macro structures and institutions (Connell, 2002).

Pathologisation

Stryker (2017) contends that the powerful medical establishment has the social licence to determine what is considered normal and what is pathological, and so transform the diversity in the human condition into onerous social hierarchies. Participants' narratives demonstrate how the pathologisation of gender diversity may lead some in the medical profession to use the transgender person's illness as a pretext for inappropriately questioning their gender identity and genitalia. Omar (26) says that for all the practitioners he has come into contact with, "it is all about gender", regardless of what doctors and nursing staff are discussing with him. Such treatment leads him to believe that for some in the medical profession, the transgender person is considered and treated as "less of a person" because "everything is about gender". Omar 's (26) chronic health condition has had him admitted to hospital on many occasions, and his familiarity with hospitals and medical professionals has made him wary of both. He describes one hospital stay in 2017. The nurse used Omar's vulnerable state to satisfy a curiosity about Omar's genitalia through an intrusive and unnecessary examination. In order to have surgery, Omar had to

shave a patch of my leg. But there was a guy [nurse] that was just adamant to do it, adamant to do it, for all the wrong reasons. I know that and I was like, no, I'll do it. But he was adamant. Then the [other] nurse was just "oh let him do it". But I was not happy about it and he looked a bit too much. They [the nurses] came back after surgery and they apologised for it. They said, we understand what he did was wrong ... And this was a nurse in a hospital.

Such incidences of abuse of power by some doctors, mental health professionals, and nurses recalled by some participants points to widespread and systemic insensitivity and lack of knowledge of transgender care, on occasion leading to negative experiences and outcomes for transgender patients (Shepherd et al., 2019).

Ansel (55), for example, was shocked at the refusal of his regional practitioner to refer him to one who was experienced in transgender care. Graham (30) describes his

first experiences of interacting with the Australian healthcare system about his gender dysphoria as shame inducing. He says, “talking about your gender dysphoria to a health professional is usually not very good or appropriate”. While Graham acknowledges that he had “some of the best care available”, he was not convinced that the practitioner was “an expert” in the field. He says,

Maybe younger people now, who are being treated by people who know what they’re doing and use appropriate language ... understand a lot more. There are guidelines and best practice ... but it’s pretty much shame from the beginning, from the people who are trying to help you. And it’s ... sanctioned by the health system.

Such negative experiences are not isolated cases for a transgender person who has endured a lifetime of disempowering cumulative incidences of others negating their gender identity. Nixon (2011) names such cumulative insensitivity as “incremental and accretive” violence which has the effect of re-traumatising the transgender person.

Informed Consent Model

The recently instigated informed consent model offers transgender people greater involvement in decisions to do with their treatment (Connell, 2021; Schulz, 2018). During the informed consent consultation, the medical practitioner provides the patient with information about the medical intervention, the risks, side effects, benefits, cost, and down time. Under this model, on-going mental health therapy is considered a recommended option but not a necessity. The transgender patient is encouraged to seek mental health assessment and psychotherapy support without being forced to undergo the gatekeeping determination of a mental health gender dysphoria diagnosis. That said, the transgender person seeking treatment must attend at least one consultation with a counsellor or medical practitioner to discuss the

practical and social aspects of transition, such as “social, financial, occupational, and familial aspects and consequences of receiving medical transition services” (Schultz, 2018, 83). Essentially, unlike the diagnostic model, under the informed consent model the transgender person does not have to adhere to the distress narrative. Rather, they must show that they have the cognitive ability to make an informed decision. The informed consent model signifies a shift from considering transgender identity as a mental health disorder, a condition with a fixed and fixable identity, to one that acknowledges the movement of individual transgender identities and lived realities and respects transgender people’s right to self-determination (Pearce, 2018; Schulz, 2018).

According to the informed consent model, patients and caregivers are partners, and the doctor/patient power differential discussed earlier in this chapter is reduced. The practitioner contributes their clinical knowledge and skills to the relationship, and the transgender person brings their personal values, beliefs, and individual conceptions of their gender identity. The informed consent model, Katz (2002) argues, thereby depends on, and develops a relationship of trust and mutual interaction between transgender patients and their care providers. As such, Apker (2012), Schulz (2018), and Suchman (2006) consider the informed consent model to be a relationship-centred model of health care that emphasises the notion of partnership and the relational process of shared decision making between the transgender person and the practitioner.

Studies have shown that such collaborative relationship-centred models of health care have better health outcomes (Beach, 2006; Drake et al., 2010; Lown et al., 2009). One

better outcome, for example, is an increase in the patient's commitment to their own health care and to following the advice of the practitioner (Beach and Inui, 2006). The findings of these studies support the paradigm shift from the diagnostic gatekeeper model to the informed consent model of care. This shift indicates the progress from understanding transgender people's identities as a universalised medical condition, to an appreciation of the diverse lived realities of transgender people (Pearce, 2018, 2019; Shephard and Hanckel, 2021).

The informed consent model has mixed support, however, as various transgender advocacy groups have different parameters and meanings for informed consent. Some organisations believe that informed consent involves consultation with the medical practitioner and after all treatment options are explained and discussed, the patient makes the final decision to commence treatment. Other advocacy groups understand informed consent as freely obtaining treatment without medical interference or even consultation. These differences have practical implications for the improved diagnosis of gender diverse people and on-going treatment protocols. In Australia, the implementation of the informed consent model has been tentative and inconsistent, and Connell (2021) states that while there is a move for "greater patient influence" (2021, 94), to date, control remains with the individual practitioner. This means that the medical knowledge, understanding, diagnosis, and treatment offered to transgender individuals is inconsistent, depending on the knowledge and personal gender beliefs of the individual physician.

Both the diagnostic and informed consent models place responsibility for the management, diagnosis, and treatment of transgender people on the individual

practitioner. Such a responsibility involves a substantial commitment of time and effort to gain adequate knowledge to do with transgender issues and this may be unsustainable for practitioners in busy practices. The negative effect of limited knowledge is witnessed in the narratives of participants in this study. This lack of medical knowledge is particularly the case for transgender people seeking assistance when living in regional areas. For example, Ansel (55) and Seth (63) lived in regional centres in their childhoods, adolescence, and early adulthood, and both report feeling disappointed and frustrated by the limited knowledge resulting in inadequate medical treatment and care. Eventually, after months of travelling regularly to their closest respective city centres, they each disrupted their lives and permanently relocated to city centres to receive appropriate on-going treatment. The participant demographic table in the Appendix of this thesis indicates the participant's geographic locations, either metropolitan or regional. Ansel and Seth had the financial and emotional support that enabled them to move from a regional centre that did not offer adequate healthcare facilities to a city where appropriate healthcare is available. This privilege is not afforded to some transgender people who are unable to access knowledgeable and competent healthcare.

Inconsistent Service

The medical and psychiatric professionals' level of knowledge of gender diverse issues and their individual gender normative assumptions result in participants experiencing inconsistent service delivery from doctors, psychiatrists, psychologists, and nurses. Transgender people are at the mercy of the individual interpretation of the rules, and it is the arbitrariness of these contacts and the anticipation of yet another disempowering or negating experience that may create anticipatory stress for them.

The SOC guidelines in effect in 1997 when Kara (45) transitioned stipulated that a transgender person wishing to medically transition had to live for 12 months as their preferred gender before undergoing surgery. Undaunted by an unsatisfactory consultation with the first psychiatrist, Kara found the second psychiatrist had a thorough understanding of gender diversity, and his diagnosis and support allowed Kara to forego the 12-month stipulation. Kara describes this allowance as “stretching the rules” and, as noted previously, that it was “hugely important to me but I can’t really explain why”. She believes that this psychiatrist’s knowledge and guidance contributed to her “dream run” transition. Such inconsistent service offering means that searching for supportive and well-informed medical assistance can be a fraught endeavour. The medical establishment thus controls the lives of transgender individuals in sometimes random ways, constricting their gender expression and dismissing their lived realities.

Compounding their experiences of inconsistent medical and mental health service delivery, some transgender people with a sexual orientation other than heterosexual learn to hide their sexuality to ensure they obtain treatment (Bockting et al., 2009; Schulz, 2018). Bockting et al. (2009) found that while some transgender people may identify as gay or bisexual, in consultation with medical practitioners, many found it necessary to state a heterosexual orientation in order to gain their referral letter for treatment. Twenty-two years ago, when Cora (55) commenced the process of transition, her primary psychiatrist gave her a list of names from which she could select her second psychiatrist. Cora decided to interview a couple of the psychiatrists on this list to see whom she liked the best, but the interview with one of these psychiatrists proved traumatic. At this consultation, Cora explained her history and

although she had been cautioned by other more experienced transgender people about how to answer questions says she wanted to be “really open and honest”. When the psychiatrist asked her if she experienced sexual arousal while dressing in women’s clothes, Cora answered, “Yes, there was some level of sexual arousal from cross dressing”. The psychiatrist immediately dismissed Cora saying, ““You’re not actually a – the term back then of course was – transsexual. You’re not transsexual, you’re a cross dresser””. He followed this rejection by advising her to, “Go along to the XXX Night Club with all the other men and have fun there”. The Club was a venue where men went to dress as women and socialise with other cross dressers who were similarly dressed. Cora was shocked when the psychiatrist wrote back to her primary psychiatrist stating that he disagreed with the primary psychiatrist’s decision to support Cora because of her sexual arousal when cross-dressing and demanding that the first psychiatrist withdraw his approval.

Cora’s (55) experience demonstrates that approval for treatment is based not only on normative gender expression but also on normative sexual behaviour and demonstrates the widespread conflation of sexuality and gender (see Fausto-Sterling, 2019). The psychiatrist’s response links gender diversity with sexuality and sexual perversion and is in line with Rubin’s (1984/2011) notion of a “hierarchical system of sexual behaviour” (1984/2011, 149). According to this system, hetero- cisnormativity is the apex of the hierarchy, and transsexuals, transvestites, and fetishists are aligned with a sexual caste equated with sexual perversion. Cora found that the mental health practitioner who held normative ideas of gender and sexuality had the power to deny her experience and understanding of her own identity and make a life-altering decision on her behalf.

Although traumatised and with the “fear of God in me about medicos”, Cora (55) went to see another psychiatrist who had a reputation in the transgender community for being blunt and abrasive but who was, in fact, open and willing to hear Cora’s story. He became her second psychiatrist and after six sessions with him she received approval for surgery. Reflecting on the traumatic session with the dismissive psychiatrist, Cora says she views such treatment as an abuse of the power differential inherent in the practitioner/patient relationship. Transgender people are entirely dependent on individual mental health professionals for approval for treatment and, as discussed earlier, the professional’s knowledge and attitudes to gender and sexuality diversity weigh heavily on the support they give or refuse (Connell, 2021).

Inconsistency in service delivery is influenced by the intersection of socio-economic class as evident in Kara’s (45) transition experience. Her personal presentation, self-confidence, and clear articulation of her need for transition convinced the second psychiatrist to allow Kara to by-pass the 12-month requirement. Other transgender individuals from disadvantaged backgrounds who are not well educated, articulate, socially networked, and financially independent, or who do not have the support of close family, friends, and workplace describe damaging encounters with some medical professionals due to their social disadvantage. Cora (55) grew up in a working-class environment, and both Cora and Kara transitioned in the late 1990s when Cora was 35 and Kara 21. At the time of her transition, Cora believes she lacked self-confidence, social skills, and the ability to express herself, whereas Kara had all these qualities. In the previous section, Cora describes the unsettling confrontation with the second psychiatrist she went to see. She says her lack of social

and communication skills left her without the appropriate language to convince him of her need to transition, thus her socio-economic background created an additional layer of disadvantage for her when attempting to convince a medical professional of her need to transition.

Transgender People's Agency

Despite the barriers described above, participants find loopholes to access treatment and empower themselves within the practitioner/transgender patient relationship. One such strategy is the development of their community-wide referral system that enables the sharing of information and contact details of transgender friendly practitioners, as well as gender clinic websites and newsletters (Haire et al., 2021). Additionally, participants describe a vibrant on-line network of transgender people seeking and sharing information, contacts, advice, and support, as well as recommendations to supportive medical practitioners. For example, following Al's (55) unsuccessful visit to his local regional general practitioner and her refusal to refer him to a specialist, he "had to come through the networks" to source a practitioner in his closest capital city. These informal networks and established transgender support services mean that the transgender community accumulate and disseminate much medical knowledge and a database of recommended medical professionals they can trust. Sharing knowledge and contacts through these networks helps to empower transgender people and to manage and work around the power differential in some mental health and practitioner/transgender patient relationships.

This shared knowledge can help transgender people educate themselves on the correct answers to give the mental health practitioner to satisfy the gender dysphoria

diagnosis and thereby qualify for treatment (Schulz, 2018; Waszkiewicz, 2006). Cora (55) said that when she transitioned 22 years ago aged 35, members of the transgender community shared assessments of the transgender friendly attitudes of certain medical/psychiatric practitioners. They coached each other on what to say in consultations with these professionals to appear to meet the doctor's gender norm expectations. Schulz (2018) argues that transgender people, like Cora, often attend consultations with mental health practitioners as informed clients who are motivated by their goal of obtaining the referral letter to allow treatment. The result of such play-acting, however, is that practitioners may inadvertently influence transgender patients to display only those gender normative behaviours and dress that will allow access to treatment. Nevertheless, the medical and mental health establishment continues to be the final arbitrator as to which bodies get treatment and which do not. Such interactions as described by participants leave unchallenged gender expectations and assumptions, foreclosing consideration of alternate notions of gender expression, and reinforcing transnormativity and the notion of a singular and universal transgender identity.

Some medical professionals recognise the need for more education on transgender issues, and in a study conducted by Arora et al. (2019), healthcare providers in Australia identify a pressing need for health care education, evidence-based resources, and local referral pathways to improve transgender treatment and care. Due to the inconsistent gap in knowledge, as discussed previously, some participants describe acting in a teaching role and educating ill-informed doctors, nurses, or medical staff. Orion (26) says that taking on this educator role can be frustrating, and it diminishes his faith in the medical profession. He offers the example of a recent visit to a doctor

where the doctor asked Orion, “Have you still got your prostate?” and Orion had to explain that as a transgender man he never had a prostate. Orion, Nat (30), and Marlow (28) say that when the practitioner voices a genuine interest in learning, they see an opportunity to advance the understanding of transgender issues. If Orion thinks the doctor is “honestly trying to learn and they ask the right questions at the right time and say things like, ‘I don’t know much about this, but I am reading up on it’”, then he does take the time to educate the doctor on transgender issues. The lack of knowledge of transgender issues among some general practitioners in busy practices, particularly those in regional areas, is understandable, but as the study by Arora et al. (2019) shows, some medical practitioners are aware of and wish to amend their gap in knowledge of transgender issues.

In sum, the medical and psychiatric diagnosis, treatment, and care for transgender people, for the most part, is dependent on approval by the individual practitioner. Isolating the practitioner/patient experience in this way places a heavy reliance on the individual practitioner’s knowledge of gender and sexuality diversity, and their objectivity when it comes to gender normative assumptions. Consequently, all participants describe inconsistent service delivery that at times is unhelpful, hurtful and/or re-traumatising.

Chapter Conclusion

This chapter has explored how cisnormativity is policed and functions as a policing technique in institutions such as the law and medicine and how these intersect to reinforce the existing gender order. In the two sections on government and legal institutions and the medical and mental health professions, the chapter

demonstrates how the rich diversity of gender and sexual identities is policed and constrained to binary identification (Poteat et al., (2013). Despite law and policy reform to recognise gender diversity, and a shift to a trans-centred model for medical and mental health care for transgender people, legal and medical professionals continue to function as gatekeepers who may assert their own beliefs about transnormativity on transgender people (Riggs et al., 2014; Tefler et al., 2015; Urquhart, 2016; Williams, 2016). Necessary face-to-face interactions with people who work in these institutions are influenced by the professionals' cisnormative beliefs, knowledge of transgender people's issues, and, as highlighted in Kara's (45) life experience, the intersection of social variables such as class and gender (Bartholomaeus et al., 2020). The qualitative study conducted by Bartholomaeus et al. (2020) examining the healthcare experienced by transgender young people and their parents living in Australia found that levels of healthcare differed according to the knowledge and transnormative beliefs of the individual healthcare provider. As such, these contacts underscore the relational aspects of interactions within institutions, and how these macro structures owe their continuation and potential for change to the micro interactions of people and groups.

While transgender people at times appear to comply with transnormative expectations in order to get their needs met, they demonstrate their agency and take power back when they use these interactions as opportunities to inform and educate professionals. These critical meeting points in transgender people's engagement with professionals in medical and legal institutions demonstrate the arbitrariness of these connections, the cumulative force of social relations, and transgender people's power to effect slow

and incremental change to perceptions of transnormativity embedded in and institutions.

The following chapter explores the role of embodiment—the interactions of bodies and culture—in the becoming of gender identity. The body is embedded with cultural meaning and significance in the form of gender expectations, and these embedded bodies are the site where social interaction takes place. The alignment of body and associated gender norms and expectations leads to recognition and acceptance by others in such social interactions. Cisnormative expectations influence perceptions of biological responses, meaning that bodies *and* culture work together as co-creators in the becoming of gender identity. The way the material body is discussed by participants in this study can be understood as the material body having a form of agency in this process of co-creation. When the body does not align, for example, at puberty, the young gender diverse person sees their body as traitorous. Transgender participants believe they take back agency over their body on transition when their body is transformed so as to align with their sense of a knowable gender identity and be recognised by self and others. By following transgender participants' experiences of transition, the following chapter illuminates the process of gendered becoming as the lived body in transition interrupts birth assigned cisnormative expectations and consciously embodies those practices associated with their gender identity so as to be read by self and others as that gender.

Chapter Six

Bodies and Culture as Co-Creators of Gender Identity

Seth's story

Seth is 63 and transitioned when he was 43, 10 years after giving birth to his son. He worked all his life as a nurse and was the first child in his working-class family to gain a tertiary education. Seth is now retired, living in a modest rental house in an outer suburb of a major city. He has few assets, having spent his savings on expensive medical procedures, hormones, full sex alignment surgery in Europe, and providing a private education for his much-loved son. His son is now married and lives in another state, but father and son keep in close contact. Seth is in an on-again, off-again relationship with a cis gender heterosexual woman. He is a chain smoker and suffers from depression that requires life-long medication.

Growing up, Seth felt constant “pressure to conform” to cisnormative gender expectations held by his parents and brothers. Seth was the long-awaited daughter after three sons, and one of the older brothers, in Seth’s view, was determined that he would be “pink and fluffy and grow up to be a lady”. Working in the travel industry, Seth’s older brother would return from overseas trips with dolls for Seth, which held no interest for him. But he loved the pair of linen Italian shorts with “pockets and a zip up the front” that his brother bought him. Seth loved those pants because he could puff out his chest, put his hands in the pockets and swagger in them while pretending to be a man. Wanting nothing more than to be a boy, Seth remembers “putting my brother’s clothes on and shoving things down the front of those and putting cream in my hair like dad used to do”. Although never discussed, the young Seth sensed that his wanting to be male bodied, dressing up and

pretending to be a man, was somehow “wrong”. Discussing his dressing up in the bathroom, Seth states,

I knew that this wasn’t gonna go down well with the family, but that was the only room in the house that had a lock on it, so I used to lock the door and do this from time to time.

Shaming is a tactic used to encourage adherence to cisnormativity, and Seth’s sense of shame drove him to cross-dress while hiding in the bathroom, with the door locked.

The pressure to conform to female gender expectations could be communicated without words. Seth gives the example of several friends’ parents looking sideways, giving critical glances or “scratching their heads about my behaviour”. Seth’s mother’s response to these criticisms was to categorise her son as a tomboy. This label was used to explain his preference for playing rough with the boys and his general orientation. Seth was no longer allowed to be a tomboy, however, “when I reached the age of about twelve, then I was getting messages loudly and clearly”. At puberty, Seth’s father told him that he had to “act like a young lady now”. When his body started to change and he began menstruating and developing breasts, he raged against what he considered to be his body’s betrayal saying, “What is my body doing to me? This is not what I want”. Feeling increasing distress, he had “all these raging hormones that are telling you one thing and your brain telling you another”. Seth detested his body’s betrayal and felt that his body was the reason he was excluded from the male peer group he had grown up with since kindergarten.

As a means of coping with his perception of his body, Seth withdrew from social contact and alienated himself from friends and family.

We had a triple swing set in the backyard, and it had those ring things. And I used to put my legs through, and I'd swing like that for hours until I'd about pass out. I'd just think to myself. And mom would come out the back and she'd go, 'Why don't you go up and see such and such?' I'd go, 'I don't want to. Don't want to', 'Oh, no. I don't want to do that.'

I was a competitive swimmer and played other sports, so I did all those things. Went to school, obviously. But I wasn't happy. I wasn't. It really became predominant, really dominated my life in my teens that I just wasn't happy being like this.

During his twenties and thirties, Seth was often verbally abused for being an outspoken female and not conforming to feminine expectations. As part of this, he was often accused of "having balls". This accusation connects sexual anatomy with gender identity, norms, and expectations: power and the expectation to be heard is associated with masculinity, and men with balls. Thus, having balls is a compliment for men. Being accused of having balls, however, is considered an insult to women, as women with balls do not meet expectations of behaviour deemed normatively feminine. Seth learned that dominance was considered the domain of male beings and subservience and silence that of female bodied beings.

In his mid-thirties and 10 years before transitioning, Seth gave birth to a son. He had always wanted to have a child, describing his pregnancy as "great". He said, "I was super healthy. My skin was brilliant. My hair was great ... I was really, really happy". Defying the accepted naturalised and normalised association of gender and body during his pregnancy, Seth was unconcerned that he knew himself to be "a bloke having a baby". Seth believes himself to be intersex, and as proof, Seth says that when he was pregnant and close to term, he had an X-ray of his abdomen, the result of which his doctor described as unusual. The doctor said, "If you were to deliver vaginally, I'd give you a party at Buckingham Palace" as there is "absolutely no

expansion” in the pelvis. Seth understood this comment as evidence of his intersex status.

In his early forties, Seth persistently dreamt that he was a man, with a penis and testes.

I started having these dreams, but over and over and over, of having a penis, of being a bloke, that were so real that I’d wake up, and when I didn’t, and I wasn’t, I was really upset. Really upset. And this went on and on and on. To me I’d liken it to my subconscious saying, ‘Hey mate, time you woke up. You’ve gotta do something about this. This is not going away’.

Because I’d tried ... All the thoughts I’d had through all those years that came to the fore. Now and then I’d do something else, or ‘I’d push that away and concentrate on something else. It’ll go away. If I worry about something else, it won’t be an issue. So, there was a series of dreams happening, and so well timed. Things often happen for a reason.

After months of such dreams, Seth watched a television program on medical transition and saw that it was possible to physically disconnect what he believed to be his female sexual anatomy and construct the sexual anatomy he had long dreamed of. The realisation that, through medical intervention, he could create the alignment of his body with his sense of gender identity was overwhelming.

I saw this show on TV. I was gonna say it’s called *The Change* or something. It was about a bunch of guys in England going to see surgeons, who at the time were considered to be the world’s best, in Holland, about transitioning and surgery and the possibilities. I remember, I watched that, and thought, ‘Oh my god, that’s around’. I cried buckets after that for ages. I thought, ‘Oh my god. That’s who I am’.

Seth says, “All these things fell into place” and the dreams and television program spurred his decision to transition. At the time, he was living in a small regional town where medical knowledge about transgender identity was limited. Consequently, the hormone treatment prescribed by the doctor was incorrect and ineffective.

[The doctor] immediately put me on Andriol caps, which I chuckle about now, because they are used generally for women who are postmenopausal

and have no libido. And I'm sure they're fabulously successful for that, but not for what I want.

After months on this medication and no noticeable change, Seth travelled to a major city centre to meet with a specialist.

I saw a guy who's ... He's quite famous around the traps ... Yeah. Fabulous guy. And he had so much time and respect for us... So, I went along to see him ... I got the hormones and things. We talked about my life and stuff. He said, 'Okay, now I'll tell you what you've been doing. You were given Andriol tabs, weren't you? ... And you doubled the dose, didn't you, because nothing was happening'. And I said, 'Yes ... How do you know?' He said, 'Because you all do the same thing' ... those Andriol, they're great for postmenopausal women. They're just not what you need'. And he said, 'You're a pretty big solid fellow, so we'll stick you on 250 milligrams.

It was not until Seth moved from a regional location to a major city and received knowledgeable medical assistance and his letter of referral for surgery that his transition progressed.

Seth describes the freeing sensation he felt after surgery to have his breasts removed.

Unbelievable freedom ... I can still remember, and it can almost bring me to tears. I can still remember the first time I put a shirt on with no breasts. Wow. Wow. I will never forget that. I've heard someone saying, 'I'm having my chest surgery done'. And I'm going, 'Fantastic'. A lot of them [young transgender men] know that I'm transgender, and I go, 'I still haven't forgotten that sensation, and I'm so looking forward to you having that feeling also'. Because it's just the most freeing thing. Women have breasts. Men don't. Having said that, we know a lot of guys do these days because of whatever. But generally, men don't have breasts, particularly not significant ones.

While Seth defied the cisnormative assumption that females have babies by assuring himself that he was a "bloke having a baby", he insists on the related assumption that only females have breasts and, therefore, he must have his breasts removed to identify and be recognised as a man.

Apart from any other surgery I've had done, that was it [having his breasts removed], that was the defining moment. Because when you're front on, and people will look at you quickly as you well know, and they'll go, 'Yep,

that's a bloke'. Because there are no breasts. Whatever is happening between your legs or in your brain or whatever is beside the point.

Without breasts, Seth is convinced he is recognised as the man he says he has always known himself to be. This new embodied form signals a different way of being seen and treated by both men and women, and Seth relishes what he experiences as the freedom of being able to move through the world recognised as a man.

One of the pleasures of Seth's life is going to his local pub where he meets up and bonds with his male friends while enjoying a beer, a chat, and the comradery of his mates.

I've got a number of straight male friends at the local pub. I love going there with the blokes to have a few drinks. They're as Aussie as they get. Now I know the sort of rapport I have with them and the conversations I have with them would not be happening if I were female. There's no way they would open up to me as a female the way they do to me as a bloke.

This acceptance and sense of belonging is interrupted by one man at the pub who finds Seth's company intrusive. Seth believes this man's angry reaction is because of the confusion his presence creates. While Seth is recognised as male—he has a long beard, deep voice, no breasts, and strong body with defined musculature—this man knows that Seth is transgender. Despite Seth's self-identification as male and his masculine embodiment, the knowledge that Seth is transgender causes the man to publicly accuse Seth of not being a real man. Seth puts such a reaction down to insecurity and fear.

He just can't cope. My take on that, he's not particularly bright, which doesn't help him. But I look like a bloke. I sound like a bloke. I act like a bloke. So, [this other man thinks that if I can be recognised as a man] what's stopping him from being a girl? ... If somebody sticks out, we can go, 'Oh, that's one of them'. I'm safe because I can recognise that. But when somebody looks like they do or is like them in some way then that's very frightening because it makes them doubt themselves ... If I can go from

female to male, well, then, what makes him more of a bloke? It's the fear factor.

Seth believes that the assumption a person's body naturally indicates their gender identity is embedded in cultural gender norms. For people like the man at the local pub, Seth believes such norms are sacrosanct. But so too are they for Seth who followed them when in male form but denied the same norms when he was in female form. Seth has negotiated an individual, internal understanding or accord that allows him to be at ease with this dichotomy.

Attending his first school reunion since transition was a major turning point for Seth. In his school days, Seth was known as the good-looking girl with great legs, so he was uncertain about the reception he would receive from his old school class. To his relief and delight, he was welcomed, with one man telling Seth that he thought he was the "bravest person I've ever met in my life". Such recognition and acceptance had a profound effect on Seth, and he has re-established school friendships and become Facebook friends with many.

Throughout Seth's life, his body has been through many physical changes—puberty, pregnancy and childbirth, hormone treatment, second puberty, and full sex alignment surgery. Seth's surgery included removal of breasts, uterus, cervix, ovaries, fallopian tubes, and vagina, and construction of testes and penis. According to Seth, the removal of these organs equates to no longer having any "female cells in my body".

Everything has been ripped out, cut off. I'm hollow inside. Everything that is female is gone ... I don't have a vagina. I even had that removed. Everything is gone which is great.

Seth has had full sex alignment surgery that has given him his own penis and “the testicles I always wanted”. He is proud of his male body and relishes the notion that his physical appearance embodies and is congruent with his knowledge of himself as male gendered.

Introduction

Seth’s (63) life story highlights how transgender participants negotiate the complexities associated with the agency of the materiality of the body, both its immutability *and* changeability, and the role of hormones in changing not only the physical features of bodies but also influencing the gender norms and societal expectations that attach to bodies. Seth states that he has always known his gender identity to be masculine, even as his body was read by others to be female. Such knowing is not universal to transgender people’s experience and some transgender people come to this awareness over time. Bodies are the site where cisnormative conceptualisations meet the historically and socially contextual lived realities of transgender people, and this chapter discusses the different life trajectories of participants in this study.

Throughout Seth’s life, his physical body has dominated his world. His narrative moves from childhood to adulthood and includes his experiences of pregnancy and childbirth, transition—including surgery and hormones, and his attainment of a sense of alignment of body and inner self. During puberty, his bodily changes made Seth distressed as he felt a separation between his sense of self and his body and that he had no agency over his body. In his thirties, through his pregnancy and birth of his son, Seth’s body changed again. (To read literature on transgender men, pregnancy

and childbirth see Heng, Heal, Banks and Preston (2018), and Pasley, Hamilton and Veale (2022). Ten years later, he learned about medical transition, and he instigated hormone treatment and full sex alignment surgery. At each of these crossroads, Seth navigated the tension that results from the physicality of his changing body and cultural expectations of gender. Seth's experiences illustrate the new materialist notion, as discussed in Chapter Two, that bodies and culture are co-creators in the becoming of gender identity. His narrative demonstrates the ways gender expectations become embodied as well as the ways the biological body and the cultural force of gender expectations become inextricably intertwined and interactive, an on-going process Barad (2003) names "interactive inter-activity" (2003, 828). As Seth admires the physical changes to his body from ingesting the hormone testosterone, such changes as hair growth, deep voice, and increased musculature, he envisages a marked improvement in personality traits deemed by Western society as masculine, attributes such as assertiveness and self-confidence in the way he moves through his social world. For Seth, changes to his body through ingestion of testosterone are indicative of the interactive process of associated cultural characteristics.

This chapter explores how the body is embedded with cultural meaning in the form of gender expectations, and how hormones work to not only change the physical appearance of bodies, but also to reinforce the cultural significance associated with body types coded male or female. Cisnormative expectations influence perceptions of biological responses, meaning that bodies *and* culture work together as co-creators in the becoming of gender identity. Bodies are the site where social interactions occur, where bodies and their embedded gender norms and cultural significance are recognised by other embodied social actors. I examine how transgender participants

understand this process of co-creation and how they make sense of changes to their bodies and associated gender expectations and social locations as they navigate their lives within and alongside the cisnormative gender order.

Transgender Bodies

Here, I explore aspects of both the immutability and the changeability of the body as understood and experienced by transgender participants. I follow Seth's (63) exploration of the materiality of the body and his longed for wish to change his body, to be rid of the sex organs he deemed to be female and to acquire those he thought of as male, and to be recognised as the man he states he had always known himself to be. Seth's experience is not that of all transgender people and some come to such awareness of their gender identity over time. All the participants in this study point to puberty and the evident physicality and agency of the sexed body as the life event that interrupted any illusion that they may have entertained of living according to their sense of a knowable gender identity. Studies of transgender men by Prosser (1998), Rubin (2003), and Schilt (2010) indicate that while puberty is a defining event for all young people, it is a particularly difficult time for gender diverse young people. So too for Seth, who on developing obvious breasts was ostracised from the circle of boys he had grown up with and formed friendships with and was pressured to constrict his comportment to that of a cisnormative young woman.

Throughout his young life, Seth (63) thought of himself as a boy and camouflaged the mismatch of his birth assigned gender by accepting the categorisation of tomboy. But with the onset of puberty, the physicality of the body intruded on his life and Seth understood his developing body to be marked as cisnormatively female. The conflict

between the gender identity assigned to him at birth on the basis of his body and his own felt gender identity caused Seth to hate his “huge breasts ... with a passion”, as to him they represented his assigned female gender identity. This mismatch made Seth feel that he no longer knew his social location or where he belonged in his world, and his way of coping with this dilemma was to retreat into himself, withdrawing from social contact. Seth’s experience aligns with that of participants in Rubin’s (2003) study who identified puberty as a time when the physicality of the body intruded on their sense of identity. Puberty can force young gender diverse people to confront their dilemma, the mismatch they feel between changes to their bodies, bodies’ social significance, and their sense of a knowable gender identity. Seth believed that his body was betraying him, and his developing body parts were a constant reminder of the social organisation of bodies and gender, the life path determined by his birth assigned gender identity, and that this was at odds with his sense of gender identity.

Prosser (1998) found that, for transgender people, distress at the pubertal development of body parts and all that they represent often made them hate their bodies. In line with this finding, Seth (63) hated his breasts. Similarly, Janice (66) says she grew to hate her penis to the point where she had regular thoughts of self-mutilation.

And I was fantasising self-harm. I was getting to that point where concepts of both self-harm and mutilation were fairly regular thoughts ... I think all of our experiences of gender are very different. Each individual. And I understand, and I support and appreciate people who say, ‘I want to transition, but I don’t want to have surgery’. Where surgery is a choice for them. I know for some people surgery isn’t a choice, it’s just not a possibility for lots of reasons. But for me, it was more about surgery than about transitioning. Do you know what I mean? It’s been about the penis and attached parts and pieces. They were so symptomatic and symbolic of who I wasn’t that I was ... getting close to hav[ing] done anything to be rid of them.

While Janice empathises with transgender people who do not want to undergo surgery, for her, the physicality of the body was defining. Janice and Seth are in their mid-60s and grew up in a time of strict adherence to binary gender expectations and the assumption that certain body parts signified membership to either male or female social groups. Janice, Seth, and other older transgender participants' narratives describe the force of the notion that bodies take on particular meanings and significance as the result of culture, and that culture is inextricably intertwined with the way we understand bodies.

Hormones and Surgery

To transition, all participants in this study took hormones after having them prescribed by a medical practitioner, a mix including testosterone for transgender men, and oestrogen and progesterone for transgender women. Participants record different physical responses to ingesting hormones but generally testosterone is faster acting than oestrogen and the visible physical changes are more pronounced. Transgender men report growing facial hair, their voices deepening, and defined musculature in a matter of weeks to months following initial ingestion. Such fast-acting consequences surprised Seth (63) because he had spent “the majority of my life full of oestrogen and having a child with all those hormones going through my body”. He initially feared that his transition would be a long process, but once the hormone treatment was underway, Seth saw “a very significant change”:

Musculature changed relatively quickly. I mean considering I'm fighting 40 plus years with the majority of my life full of oestrogen, having a child with all those hormones, to somebody with hair on my back, fairly quickly. Not on my face, as I said. Very little on my chest. Stomach came quickly, legs quickly. Voice took a couple of years 'cause it was a long, horrible breaking process like it is for some cis males, and if I yelled at somebody my voice would crack, which is the weirdest sounding thing when you're looking at ...

generally people are looking at what they think is a middle-aged woman whose voice is cracking.

Hormone induced visible changes to the body like those described by Seth are viewed by all participants, transgender men and women, as evidence of their previously latent masculine or feminine identity. According to this understanding, hormone ingestion is considered a device for facilitating the outward expression and appearance of the consistent inner gendered self.

As well as believing that testosterone is a more potent hormone than female hormones oestrogen and progesterone, transgender men participants also believe that testosterone “actively makes the man” (Rubin, 2003, 152) in that testosterone not only produces physical changes such as facial hair and deeper voice, but also enhances a person’s self-confidence and assertiveness. Transgender women participants too hold firm to this assumption. Adelia (37) presents as normatively female; she looks and behaves in a feminine manner and continues to take female hormones. At times, however, she notes that she is “very vocal”, meaning that she dominates the conversation, and that this trait causes her husband to fear her. Adelia attributes her assertive behaviour to her pre-transition “male hormones”, the residual effect of having once had larger amounts of testosterone in her body. As with all the other participants, Adelia’s response supports Fine’s (2017) argument that testosterone is culturally understood as the defining factor that makes men stronger and more dominant than women. In this formulation, hormones, rather than culture, dictate behaviour and identity.

Hormones produce and alter characteristics such as depth of voice, body and facial hair, fat distribution, breast development, skin thickness and texture, and musculature,

and play a major role in gender recognition. The prominence of these visual signifiers is employed as a shorthand indicator of gender identity, and I discuss the role of these secondary sex characteristics in self and other recognition in more detail in Chapter Seven. Because of the deciding role of secondary sex characteristics in gender attribution, participants describe how members of the transgender community create hierarchies, competing for evidence of such attributes in themselves, and policing them in others in their community. In Chapter Four, I detail how transgender men participants describe (trans)masculine hierarchies, and the competition to gauge who is the most masculine looking, who is closest to the cisnormative masculine ideal. Similarly, in the transgender women's community, the competition is based on who can be read by others as cisnormative female. Participants' experiences of such hierarchies demonstrate the inextricable intertwining of bodies with gender expectations, and how bodies are disciplined via self-monitoring and policing by others.

All the participants in this study have had some form of surgery, including extensive sex-alignment surgery, breast surgery, and facial surgery, as well as electrolysis and non-invasive fat re-distribution treatment. Janice (66), Maia (63), and Seth (63) describe such surgery as their life's defining moment. But the cost of these treatments is high, and while not all transgender people wish to have surgery, those who do may not be able to afford it. In sum, for those who wish to have surgery, the ability to afford such treatment has a profound effect on the person's life trajectory, including employment opportunities, accommodation, love life, friendships, and attachment to family.

Historically contextual changing perceptions of cisnormativity result in the loosening of the ties that bind physical bodies to cisnormative gender identity and the need for surgery (Madrigal-Borloz, 2019). In Chapter Four, Lena (83), the oldest participant in this study, reflected on the social progress she has witnessed throughout her life and her associated realisation that “embodiment is not as important to me as it once was”. She says she does not know what her decision regarding surgery would be if she were to make that decision now because of the greater acceptance of gender diversity and gender expression. Lena’s (83) thoughts raise questions about the role of bodies as co-creators with culture in the becoming of gender identity, and bodies’ relevance and involvement in historically contextual changing notions of cisnormativity. They also raise questions about how identity and embodiment intersect with age and the passing of time, co-creating the possibility of acceptance both to self and others of a more fluid appreciation of the body and gender identity. Butler (1993/2000) proposes that identity is “cultivated by the norm” (1993/2000, 25), meaning that the subject is constituted in the striving for the unattainable goal of reaching the norm. As the meaning of what constitutes the norm changes depending on time and place, and the expectation of embodiment along with it, Halberstam (2018) proposes that the current generation of gender variant children “may experience their gender identity in vastly different ways vis-à-vis people just a decade older than them” (2018, 68). What do these vastly different ways mean for transgender people, particularly older ones?

In sum, transgender participants show that bodies are not independent free-floating entities, nor are they blank slates awaiting cultural imprint. Rather, bodies and their social significance are co-creators in the becoming of gender identity as realised through on-going social interactions. Bodies, therefore, exist, interrelate, and produce

consequences in social settings as they are loaded with cisnormative assumptions that in turn direct these social interactions. In the next section, I explore the implications for our understanding of gender and the cisnormative meanings loaded on bodies when transgender participants change their bodies.

Bodies and Cisnormative Practices

In this section, I explore how agentic bodies are embedded with cultural meaning and cisnormative expectations, and what this co-creation of bodies and culture means for the transgender body in transition. Johnson (2007) uses the term “embodied practices” (2007, 55) to reflect the notion that bodies are recognised according to the social and cultural expectations, values, and significance attached to them. Throughout their lives, both pre- and post-transition, and on-going social interactions, transgender participants hold firm to the belief in an inner sense of gendered self. They consider this inner self as separate from, in as much as it is misaligned with, the body they were born into. Social significance is attributed to what transgender people believe is their misaligned body. Anthony (35) describes this process of embodiment as gender norm assumptions being “stuck on the body”. His statement prompts the question, what happens to these mis-aligned “stuck-on” embodied norms when a transgender person alters their body? Is it possible, as Prosser (1998) argues, for the transitioning person to reject their previous embodied enculturation?

Transgender participants do not necessarily object to cisnormative gender expectations, but they do object to the gender expectations attached to the body they were born into because they do not align with their knowable sense of gender identity.

And while all transgender participants recognise and do not condone gender inequality and the gendered power differential their main focus is on their need to live fulfilling lives within and alongside the gender system. As Keegan (2020c) argues, the subordinate gender order framework M>F (male is greater than female) that relies on static categorisations of bodies and gender identity, and oppression of one category by the other, does not describe transgender people's experience and understanding of gender. As such, the transgender experience of transition brings to light the process of gendered becoming, as the lived body in transition must interrupt gender practices imposed on it since birth and consciously embody cultural practices attached to the gender identity the transgender person knows themselves to be. Johnson (2007) argues that this conscious learning process illuminates the ways all individuals assimilate "cultural practices of embodiment" (2007, 55) assumed to be innate and deemed appropriate by family, partners, friends, workplaces, and wider society.

The next section commences with participants' understanding of how gender expectations are expressed via associated gendered emotions and behaviours and the taking on of roles that are attributed to sex hormones and the body. Such an attribution renders the body and associated gendered expressions of emotions and behaviours to be natural, innate, and therefore unquestioned and unchangeable. If transgender participants wish to be read by others as their felt gender—for example, male or female—they must emulate the personal gender presentation and behaviour that are generally assumed to be innate to bodies.

The force of the conviction that there is a biologically determined, naturally ordained gender difference in behaviour is normalised and assumed to be foundational to the

organising frame of the gender order (Pfeffer, 2014). Connell (2002) defines the gender order as a “patterned system of didactical relationships and material practices” forming the ways people and organisations are “connected and divided” (Connell, 2002, 54) through the repetition of gender relations in on-going social interactions. The cisnormative assumption that underpins these relations is that male bodies are dominant and have power and authority, while female bodies are deemed to have less power (Connell, 2002; Messerschmidt, 2018; Pease, 2019). Thus, gender norms and expectations, gendered power relations, and the institutionalisation of cisnormativity are reconstituted through bodies and the cisnormative assumptions associated with those bodies. This effect is seen in Seth’s (63) insistence that his inability to cry is not due to the stereotype of the strong, emotionally resilient man, but to the physical effects of testosterone.

I don’t cry now because I think it’s not masculine; it’s just I find it very hard to physically cry. Not that I haven’t. I have. But, not as regularly or as easily as I used to. And I hear a lot of guys had the same thing. So, it’s funny. I mean testosterone must have a tear blocker attached to it somewhere.

Fine (2010) contends that it is the cause-and-effect linking of cultural practices to bodies and through them to hormones that is used to explain different gendered physical behaviours and emotions. Such belief in the power of body chemistry and hormones to effect different emotions, behaviour, and personality traits in women and men corresponds to the hierarchical gender order (Connell, 2002; Fine, 2010). Accordingly, human relations enact and reiterate gendered assumptions that female bodies are reserved, vulnerable, and tend to be emotional, and male bodied humans are confident, bold, closed emotionally, but prone to displays of anger and aggression (Fine, 2010). Serano (2016a) contends that these assumptions are used to explain or excuse male aggression and violence and to delegitimise women’s anger and opinions as “mere symptoms of their body chemistry” (2016a, 65).

Scholars such as Young (1990), Moi (2001), and Fausto-Sterling (2000) critique the assumption that chemistry alone accounts for differences in behaviour that cause the gender hierarchy and is used to excuse gender inequality. Instead, Young (1990) documents the many ways women are trained to adhere to gender norms, and Schippers (2007) reports women receive “swift and severe social sanction” (2007, 95) should they enact the power, authority, and right to voice an opinion traditionally reserved for males. The training to be restrained is evident in Seth’s (63) narrative as he describes growing up presenting as a woman and being denied a voice and denigrated for having strong opinions. Seth grew up feeling the full force of the social expectation that females do not have authority and therefore should not be outspoken. He believes that due to this constant pressure he often became shy, retiring, and self-effacing, thereby exhibiting the cisnormative behaviours attributed to his birth assigned gender.

The punitive responses Seth (63) received for his expression of capability and authority when in female form changed dramatically post-transition. Once Seth was recognised as a man, his physical body and self-expression coincided with social expectations of a male bodied person. For example, as a man, Seth notices that he is given “more credibility” by others as they expect him to have opinions and to voice them. He says “people seem to take more notice of what I say. What I say to people seems to hold more credibility”. Post-transition, Seth embodies a socially coherent male form. He finds that he is comfortable responding to and meeting social expectations and that, in turn, he is rewarded by other people with their recognition, acceptance, and assumption that as a man, his voice should be heard. Such positive

responses from other social actors form a feedback loop that encourages Seth to be outspoken and confident, thereby reinforcing the association of dominance with male bodies.

All participants in this study hold the belief that hormones affect emotion and that emotional expression is dependent on female or male hormones that line up with ideals of masculinity and femininity. In Chapter Eight, I discuss how physical changes induced by hormones correlate with emotional changes that have consequences for the allocation of personal power. According to these cisnormative expectations, women are emotionally volatile and overtly expressive, and eight transgender women participants in this study mention an increase in their emotionality once their testosterone levels decreased and oestrogen and progesterone increased. Some, like Kara (45), recount being “moody and emotional”, and Lena (83), after transition, experienced what she describes as female hormone-induced emotional volatility. Lena prides herself on her rational thinking and says that her perception of increased emotionality and unfamiliar lack of control shocked and distressed her. Lena’s obvious scorn of emotional volatility may be a response to having lived for 45 years presenting as a man, thereby being subjected to the traditional notion that emotion is associated with femininity and aligned with reduced ability to maintain rational thought and behaviour.

Arguing against the notion that women’s emotionality is excessive, Serano (2016a), when describing her transition from male to female, compares the “thick curtain” cast over her emotions when she presented as a man to “crystal clear” emotions she experiences as a woman (2016a, 67). Arguing against the commonly held perception

that increased emotionality due to female hormones leads to a reduction in rational thinking, Serano insists that even though her emotions are now clearer and more precise than when she was male bodied, they do not inhibit her ability to apply logic or reasoning. She says that she remains “perfectly capable of acting on rational thought rather than following my feelings” (Serano, 2016a, 67). Lena (83) and Kara (45), while describing experiences of increased emotionality post-transition, continue to hold senior and responsible positions in their respective workplaces. Therefore, Lena and Kara’s career success and Serano’s insight indicate that while emotional expression is a subjective experience, notions of increased emotionality and subsequent reduction in rational thought in women are influenced by gender bias and used as an explanation or excuse to limit women’s exposure to the public domain.

Transgender men participants extrapolate the visible physical changes produced by testosterone—such as facial hair, increased musculature, and skin texture—to the belief in increased self-confidence and feelings of empowerment. Nat (30) summarises this improvement in self-confidence saying the taking of testosterone makes him feel that it is “easier to walk through the world as a man”. Further, transgender men participants in this study reflect responses by transgender men participants in Rubin’s (2003) study. Rubin’s study identifies four main behavioural changes when taking testosterone: 1) higher energy level, 2) decreased emotional availability, 3) increased anger and aggression, and 4) increased libido.

Like participants in Rubin’s (2003) study, participants in this study record an *increase in energy* and a *decrease in emotional expression*. Graham (30) says that taking testosterone gives him more energy, “more physicality”. Similarly, Anthony (35)

found that he had “a lot more energy ... physical energy” when he took testosterone, particularly in early transition. Anthony insists that he “never used to be like that” and that an abundance of energy “was not a problem for me pre-transition”. Although a decrease in emotional expression was reported by five transgender men in this study, all participants in Rubin’s study, and three transgender men participants in this study, report a *noticeable increase in anger and aggression*. Anthony (35), for example, said that he “got angrier a lot easier” because his “irritation/frustration/tolerance level” was lower than it was pre-transition. Similarly, Seth (63) became aware that “things that normally reduced me to tears or sadness now make me angry”. Such an increase is in line with cultural assumptions of gender differences that assume an association between masculinity, anger, and aggression (Fine, 2017).

The cisnormative assumption that men are associated with anger and aggression supports the perception that men are innately intimidating, and that a man’s angry outburst is considered by women to be potentially dangerous and possibly life threatening (Fischer and Evers, 2009). In line with Fischer and Evers’ (2009) conclusion, Ansel’s (55) experience tells him that an angry outburst by a man and one by a woman are read differently and evoke profoundly different responses from both men and women. An angry outburst by a man is read as intimidating and threatening, but one by a woman is seen as shrill and a sign of loss of emotional control. Ansel says that while he feels the same degree of anger or aggression as he did pre-transition, he is aware of the assumed association of masculinity with anger and aggression, and now he consciously manages his anger expression so as not to intimidate women.

Nat (30), Orion (26), Graham (30), Jason (35), and Marlow (28) say that they have not experienced an increase in anger and aggression. On the contrary, they explain that they feel less anger since transition and taking testosterone. In fact, in Marlow's case, he explains that he "always had anger issues":

[My anger has] nothing to do with hormones or anything like that. I've always ... as a child, I've had anger issues, I've had control issues. It's got nothing to do with being on hormones. That's something that I do like to state because although people were worried that I would get more angry, in fact, if anything, I've actually calmed down a lot more being on hormones. I think that's because I'm happy with myself. Well, I'm getting there, if that makes sense and I'm understanding these things. I think just men don't like to talk about feelings and I'm very sensitive and I'm very emotional and I will stand there and say, this is where I have a problem and I will cry. I don't care if I cry [or] if anyone sees that. It's just who I am, I'm a sensitive person.

Nat, Orion, and Graham mentor younger transgender men who are starting out on their transition journey, helping them with referrals, advice, and information. These participants suggest to their mentees that they adjust their thinking so as not to expect an increase in aggression and anger when taking testosterone. Consequently, these participants report that their young wards, like themselves, do not experience increased aggression. Their responses are in line with Fine's (2017) argument that it is the normalisation of such expectations that in some cases encourage aggressive and intimidating behaviour by some men. Fine states that while it is difficult to identify the cause of behaviour—hormones or culture—my findings support her notion that cisnormative expectations influence perceptions of biological responses, meaning that bodies *and* culture work together as co-creators.

The normalisation of the association of anger and aggression with men is also expressed by transgender women participants in this study. Jacinta (55) and Cora (55) suffered at the hands of their violently abusive fathers, but Kara (45) grew up in a

loving and supportive family. Even so, all three transgender women maintain the association of aggression with masculinity, and Kara observes that, “When I think about angry people I seem to, I do predominantly think of them being men because men do it in a more visible way”. Since transitioning and experiencing a reduction in testosterone, Janice (66) describes testosterone as “like a poison” and is convinced that “testosterone breeds aggression”. But Janice’s conviction of the danger of testosterone appears to set up a paradox for this participant. Voicing the cultural expectation that strong and forceful men are successful in business, Janice reflects on her pre-transition life and says that had she “felt more aggressive before, I might have been more successful as a man”. In this, she demonstrates the way in which people equate masculinity with power, authority, and aggression, and believe that the combination leads to success in life (Greig et al., 2000). Further, Schwalbe (2014) and Pease (2019) contend that this generally held assumption encourages a combative, competitive, hierarchical environment witnessed in contemporary commercial and political institutions and interactions.

The integral connection between aggression and masculinity underpins the interplay between gender, social values, and cisnormative gender expression that is deemed to be socially appropriate for men and women (Connell, 2005; Flood, 2008; Jewkes et al., 2015; Pease, 2019). The sense of intimidation resulting from the connection of men and violence is a cornerstone of the gender order and the conceptual framework supporting masculinity’s “successful claim to authority” (Connell, 1995/2000, 77). Fine (2017) argues that the linking of masculinity, aggression, and power with testosterone supports the cisnormative assumptions surrounding this hormone and is

employed as an irrefutable truth to explain, justify, and reinforce the dominance of masculinity.

Seth (63), Nat (30), and Orion (26) are the only participants to mention an initial and dramatic *increase in libido*. Seth says this increase occurred when he first began taking testosterone, but the initially strong response reduced over time. His reaction came as something of a surprise to Seth, because while he neither condones nor excuses male sexual aggression, he now believes he understands such behaviour better that he has personally experienced the increase in sexual drive brought on by testosterone. Orion and Nat say that their sex drive increased slightly when first taking testosterone, but they question whether this perceived temporary change was in effect a physical response or a product of the cultural association of testosterone with increased libido. In contrast to the association of testosterone with increased libido, Ansel (55) insists that he did not experience any change in sex drive. Further, to refute the stereotype of the male sexual predator, Ansel took time to describe the conventional, “ordinary”, “daggy”⁹ and non-libidinous lives of the cis gender heterosexual men he knows.

In addition to Rubin’s (2003) documented four behavioural/emotional responses when taking testosterone, participants in this study credit testosterone for their *increase in self-confidence*. Nat explains this new-found sense of assurance.

I think it does make you more confident. It boosts something in your body, and it makes you stand that much straighter and taller. And they teach women in business, if you want to feel more confident, you need to take deep breaths and like boost your testosterone. It does make you more confident. I don’t

⁹ ‘Daggy’ is an Australian slang expression to describe a person who is unsophisticated, slipshod, and even slovenly.

know how to explain it, the science of it all, but you hold your shoulders, you've got more confidence.

Transgender men participants' feelings of increased confidence are reinforced through supportive social interactions with others—both men and women. Graham (30), for example, notices that as a man, “people are more accommodating to me moving through the world ... I just find I move through the world a lot easier”. Transgender men participants say that they find themselves rising to the expectation that people have of the competence of men. Graham says, “men would start asking me for advice”, such as parking directions, but he notes that he was never treated with such deference when he was in female form.

Oh yeah, directions ... about parking. It's only happened a couple of times ... maybe three or four times, but... three or four times in the last 3 years and never before.

All transgender men participants describe incidences of this positive reinforcement feed-back loop. I discuss the expectations of capability and confidence for men and men's support for each other via what Pease (2019) names an “intra-psychic process” (2019, 108) and the consequences for gendered social relations in more detail in Chapter Eight.

Identity formation is a group project, and the positive social interaction reported by transgender men participants is in sharp contrast to the non-supportive reactions that women receive in social interactions. Young (2002) argues that it is the continual diminishing of the worth of women's contribution, together with encouragement for them to confine their self-expression and physical movement, that ultimately limits their self-confidence. Transgender women participants' pre-transition life prepared them for encouraging responses from other social actors and, subsequently, some are

shocked at the negative reactions they receive when presenting as women. One example of this is how some transgender women in this study experience non-supportive social interactions in the workplace, through which they are faced with the lived reality of gender inequality. Juliette's (39) work colleagues know of her transgender identity, but her clients do not. Pre-transition, Juliette worked as a senior manager in the construction industry. Although highly qualified, experienced, and never being without a well-paying job, post-transition Juliette applied for 78 positions before finally securing a job in a small, family-owned business. She describes a recent site visit to meet her new client and being dismissed because she presents as a woman:

I would be involved in a lot of the tendering process. I'd go out there with my general manager, and he'll be standing there, and they'll always be talking to him, directly at him, like I wasn't there. My manager would sit back. He found it a little amusing and quite entertaining in the process because he'd then turn around and go, 'Okay, well, I'll let Juliette answer that because she's my technical manager'. For the rest of the whole tendering process, they will be dealing with me. So, that instant assumption that I'm the receptionist and that the general manager is gonna be doing all the actual talking, the technical design, the imports, the consulting process, the project delivery, all of that, they would then discover, 'Oh, okay. The person who I'm actually dealing with is standing right next to me, and not the person who I thought it was'. So, I have quite amazing interactions like that. Where I was previously, if I had been standing there [as a man] ... they would be speaking to both of us from the start, most definitely.

Juliette, now recognised as normatively female, is assumed to have less technical knowledge than her male manager. The automatic assumption of less capability has a cumulative effect on a person's self-esteem and has life-long consequences for women as a group.

Cora's (55) colleagues worked with her for many years before her transition and are aware of her transgender identity. Similar to Juliette, Cora received negative

responses from some colleagues in her workplace when discussing highly technical issues. Her many years of experience and knowledge of sophisticated technological aspects of her work gained and appreciated by her work colleagues when she was in male form appear to be ignored or dismissed once she is recognised as female bodied.

[Pre-transition] the thing that immediately struck me was a feeling that my opinion was not as valid ... I was trying to figure it out, well what is the difference here. Now I was presenting as a woman the feeling was different in terms of how much of my contribution made it into the projects we were looking at. And reflecting with some of my friends and colleagues at the time that was certainly a bit of a common theme for the women in the area.

Cora says that such negative responses from male work colleagues do not diminish her self-confidence because her previous work experience of positive reinforcement had instilled a firm sense of the worth of her contribution. However, she appreciates that a lifetime of such negativity has reduced her female workmate's self-confidence. Young (2002) argues that the continual diminishing of the contributions of women in the workplace, such as that experienced by Juliette (39) and Cora (55), can produce a lack of self-assurance in some women. This lack of confidence in the work environment together with on-going encouragement for women to minimise their physical dynamism, as experienced by Seth (63) when he was female bodied, ultimately leads to some women self-censoring and limiting their self-expression.

Gender Roles and Bodies

The gender binary order conflates gender roles with certain body types and behaviours loosely organised around human reproduction (Connell, 2002). Adhering to the expectation that male bodies have facial hair, musculature, deep voice, penis and testes, Seth (63) considered his need to transition and align his body with his gender identity as necessary to confirm his masculine identity. However, when in

female form, Seth denied the cisnormative assumption of the link between body organs coded female and pregnancy and the childbearing role of the cisnormative woman, saying that he knew himself to be a “bloke having a baby”. Riggs (2013) describes such complex negotiations and self-representations of transgender men bearing children, either when living as men or, as in Seth’s case, previously when living as their “natally-assigned sex” (62). Riggs (2013) concludes that these self-representations allow child bearing transgender men to vindicate their self-identified gender identity as men “precisely because they don’t feel like a woman carrying a child” (69). Seth’s negotiated accord or “self-representation” (Riggs, 2013, 66) manipulates cisnormative assumptions to do with gender identity, roles and body types, not as straightforward acquiescence to the gender order, but as a creative way to manage personal needs and current expectations. Connell (2002) argues that “Bodies are both objects of social practice and agents in social practice” (2002, 47), and Seth’s complex narrative represents the socially contextual movement not only of identity and gender roles, but also of agentic bodies. In the next section, I explore this concept further by examining participant’s experiences of changing bodies through puberty and their interpretations of their bodies as traitors, and their post-transition experiences and observations of how bodies and social practice are used to produce gender inequality.

Second Puberty

Transgender bodies are not entirely mutable because pre-transition physical and cultural markers are deeply embedded and difficult to dispense with (Johnson, 2007). As if to counter the influence of embodied cultural markers and to celebrate

their new embodiment, participants in this study imbue the visible physical effects of hormone ingestion with the reverence of a coming-of-age initiation. Early signs of hormone induced physical change, including larger breasts for transgender women and facial hair and deeper voices for transgender men, are watched for and greeted with delight. For example, when Seth (63) first started taking hormones, he devoted time each day to counting the hairs on his face. He knew that he had exactly “25 hairs on one side and 30 hairs on the other side” of his face. Participants view these physical changes as indicative of a second puberty, a chance to live their lives again, but this time as a coherent person in a body aligned with their inner sense of gendered self.

According to Prosser (1998), the notion of a second puberty does not represent a wish by the transgender person to relive the past, but rather it is a yearning for a perfect past, “the desire for the purified version of what was, not for the return to home per se (*nostos*) but to the romanticized ideal of home” (1998, 84). Such an ideal is witnessed in Seth’s recall of a talk with his 12-year-old son when explaining his upcoming process of transition. Following a lengthy explanation, Seth’s son asked, “So does this mean we will be going through puberty together?” When relaying this conversation, Seth is visibly moved by the memory of his young son’s response, both the unconditional acceptance offered and the opportunity it afforded to begin a new life with his much loved and yearned for child. Seth does not see a contradiction between his feeling of betrayal at the way his body developed during puberty and the fact that that body made his pregnancy and child possible. The firmly held belief that hormones allow for a new life, one that promises alignment of body and self, social recognition and acceptance, and the construction of an idealised version of their past life adds to the potency of hormones in the minds of all participants.

Gender Inequality

The cisnormative assumption that biological bodies and gender expectations are aligned and naturally ordained is used to explain the oppositional and hierarchical binary gender order that values masculinity over femininity (Connell, 2002). This system enables a gender power differential, and participants must navigate their changed bodies and associated gender expectations in on-going social interactions that make obvious inherent gender inequality. For example, all transgender men participants acknowledge that they are rewarded for being recognised as men. As men, they are assumed to be competent, have automatic authority, and the right to be heard. Graham (30), a salesman, sees the difference in his sales records pre- and post-transition.

In my line of work there's a sales element to what I do, and I found that my personality really has not changed at all, but just the tone of my voice has changed ... a deep voice over the phone I found was working for me, and there's evidence to suggest that is actually a thing, a male voice on the phone... I think they did a study in recruitment, recruiters who were male closed deals easier. Yeah, it was actually life changing.

Graham credits his new-found success at work to his deeper and authoritative voice and the fact that customers—both women and men—find a male voice more convincing as it is associated with authority and capability.

Each of the transgender men participants negotiate their own understanding, “self-representations” (Rigg, 2013, 66) or accord with their changed and improved social status. Seth (63), although aware of gender inequality, is unperturbed by the power differential he experiences between men and women, explaining that this is how the world works. Graham (30), however, feels that he is in a double bind. He is acutely aware of what he calls the “insidiousness of patriarchy” and knows that he is the

recipient of what Connell (2009) names the “patriarchal dividend” (2009, 142), that is, the benefits that accrue to men because they are men. Graham finds solace in talking about the situation with his friends.

I spoke to a lot of my friends about it a lot as it was happening and they said, ‘You should write a book, you should write a book’. Because there was just so much. I knew that the patriarchy was insidious. But I didn’t know how insidious it was until I transitioned.

Discussing such structured inequality between males and females with his friends and fielding their responses helps Graham process the unfairness and social damage imposed by gender inequality. He knows he benefits from gender inequalities but believes as an individual he can do nothing to change the situation.

Young transgender men in this study struggle with the disquiet they feel when enjoying the benefits of being recognised as members of the dominant group while, simultaneously, disapproving of gender inequality and some of the damaging aspects of masculinity. Participants in Johnson’s (2007) research manage this tension by ascribing to new forms of masculinity. Similarly, Orion (26), Nat (30), Marlow (28), and Jason (35) regulate their personal behaviour and consciously minimise any expression or action that may be deemed as aggressive or domineering. Marlow and Orion say that they are determined not to emulate their fathers’ hyper masculine behaviour and persona as they practice being more emotionally open. However, theorists, such as Connell (2002), Hearn (2014), Nicholas and Agius (2018), and Pease (2019), caution that adjusting expressions of masculinity, as young transgender men in this study do, may modify but will not change the hierarchical gender order that is premised on the hegemony of men.

Chapter Conclusion

In this chapter, I have explored how transgender people experience and understand their bodies as having a form of agency in the co-creation of gender identity. At puberty, bodily changes over which the transgender person has no control lead to misinterpretation and misrecognition by others, causing heartache for the young gender diverse person. Young Seth thought of his body as a traitor; it was betraying his self-identified sense of identity and the masculine cisnormative behaviours he wished to continue emulating. Alignment surgery and hormones helped Seth get back his sense of agency over his body, ensuring that he was recognised by himself and others as being in line with his self-identified sense of gender identity. Seth did not wish to change these cisnormative behaviours but rather to change his body so that it better represented his felt sense of gender identity and was read by himself and others as the gender he says he had always known himself to be. In this way, bodies *and* culture work together as co-creators in how one perceives oneself and is perceived by others. In this process, cisnormative expectations embedded in bodies influence perceptions of biological responses, meaning that bodies are loaded with cultural significance that influence characteristics, such as a perceived increase in self-confidence. This response has consequences in social settings that, in turn, reinforce such gender expectations, thereby directing social interactions.

The process of transition brings to light the process of gendered becoming and for transgender people, bodies and culture determine how their knowable sense of gender identity is interpreted and recognised by self and others. Bodies are the visible and constitutive interface between the interactive process of the subject's internal understanding of themselves, and their awareness of themselves as they present

through interactions with their social worlds. Therefore, bodies and culture are not two separately definable quantities, but are intertwined and interactive (Fausto-Sterling, 2019). Just as Butler (2021) argues that humans cannot escape their culture, so too, they cannot escape their bodies and the inextricable interconnection between the two elements, an on-going process Barad (2003) names “interactive inter-activity” (2003, 828). As each individual transgender person goes through the long process of addressing their need to change their body, transitioning and adjusting to and living as the knowable gender, they must continuously negotiate the gender expectations of other social actors and the delicate balance, or “interactive inter-activity” (Barad, 2003, 828) between bodies and culture.

In the following chapter, Chapter Seven, I examine how transgender participants manage to get their needs met, and to survive, in a predominantly cisnormative binary society by managing their gender identities and bodily presentation throughout their lives. Previous studies have focused on the process of being recognised by others in the person’s post-transition life. My study extends this focus to explore transgender people’s need to be recognised by others in their pre-transition life, and what this means for their internal negotiation and understanding of their gendered selves. Such attention to both pre- and post-transition recognition highlights the intricate on-going negotiation between the transgender person’s commitment to their knowable sense of gender identity, their need to recognise themselves as a coherent being by aligning their body with their gender identity, and their survival within, and alongside, the existing gender system. Transgender people navigate this balance throughout their lives and on-going interactions with other social actors. As part of this process, the transgender people in this study develop a self-understanding or individual accord

about how gender is constituted to make sense of these continual and intricate negotiations.

Chapter Seven

Self and Other Recognition: Gender Identity Achieved Relationally

Cora's story

A senior executive in a large, multinational company, Cora (55) transitioned at the age of 37 while working for the same organisation. Management supported her through her transition and ran educational programs for staff while she was on leave. Most of her colleagues accept her as a transgender woman, but even so, Cora is hurt that she is never invited to social functions such as kitchen teas, engagements, or wedding parties. Also, several people made it clear to Cora that they did not agree with her decision to transition, and Cora dismisses their implication that gender transition is a lifestyle choice.

[W]ho the fuck would do what we do? So, you make a choice to be ostracised, we lose friends, family, probably lose some status at work and go through enormous expense and enormous pain in medical procedures and then probably find it difficult in relationships.

Rather than a lifestyle choice, Cora describes the drive to live and be recognised by self and others as a gender different from her birth assigned gender as an “ingrained need”.

Cora is tall, almost 6 ft, and has broad shoulders in part because she was a competitive swimmer in secondary school. With long blonde wavy hair, fine delicate facial features and feminine clothes, Cora believes she is read as cisgendered most of the time. However, she is aware that for “about 10% of the time ... maybe once or twice a year” she is not recognised by some as a woman. Such misrecognition may be because Cora knows that when she is comfortable in company, her voice drops. When people notice this and combine the deeper voice with her larger physical

frame, large hands, and size 10 feet, they “put two and two together” and she gets “picked as transgender”.

Growing up in a working class and socially conservative family where she was the only child living in the home, Cora says her early life was “dominated by my parents because of gender” and added that her father’s control and “authority in the family” was unquestioned. She describes her father’s education as “year eight or equivalent” and because of this, she concludes that he had “very little ability to conceptualise what was going on with his son”. Closed emotionally and physically abusive, when her father was confronted with an issue, “his way of solving it was with violence”. Cora’s mother suffered from deep depression and anxiety and spent long periods of time institutionalised. She had a son from an earlier marriage, but he did not live with Cora’s family. While both Cora and her mother bore the brunt of her father’s attacks, Cora estimates that the abuses she endured were mostly motivated by her gender. The effect of repeated physical abuse and the long-term trauma of having to hide her inner self behind a charade of cisnormativity produced what Cora describes as a “schizoid state”.

In her twenties, Cora’s gender identity struggle and her sense of shame increased. She retreated from all social contact, convinced that she did not belong and believing that she was “utterly defective”. During the working weekday Cora was read by others as a cisgender male; however, socialising with her workmates was out of her comfort zone.

At work, I could present a persona that was functional enough to do the job ... In the professional environment I was reasonably functional. There was very little spontaneity needed. There were meetings. I’d raise ideas, but as soon as it came to going for drinks, that was utterly out of my comfort zone. Because you know my secret may get out. I just didn’t build any of those

social skills most people take for granted and so by my mid-twenties I didn't have a wide range of experiences.

As a result, outside of the office, Cora had no personal or social life, and she describes this time as one of utter "loneliness". She filled her lonely nights and weekends trying to repair and improve her "defective" self by learning computer coding and completing self-improvement courses and reading self-development books.

Cora went through periods of cross-dressing that were always followed by what she describes as "purging", "shame", and "hatred of myself", coupled with fear that her father would beat her or expose what she was led to believe was her shameful secret. At this time, Cora was still living in the family home with her parents, but when her father died, she felt freer to act and dress in a more feminine manner, without fear of retribution.

In her early thirties, Cora was working full-time at a demanding job and developing her career while also looking after her ailing mother. After years of mental struggle, the sense of incongruence between body and felt sense of gender identity became overwhelming. Cora was driven by a desperate need to transition and describes how, "the gender dysphoria was becoming of such an intensity for me, I just couldn't stop it". At the age of 37, Cora walked into the Gender Centre in her city, declared herself to be a transgender woman, and asked for assistance to transition.

When Cora came out to her mother, her mother's response was to ask Cora why she had not spoken of this earlier. This question, and all that it implies, still haunts Cora, and she wonders why her mother effectively shifted the responsibility of truth

telling onto her. While growing up in the family home, Cora says that her gender identity struggle was the “elephant in the room”; her mother and father knew of her struggle, but never spoke of it. The silence led Cora to believe that her gender brought shame to the family, and she internalised the shame and guilt, and suffered in silence, and on her own. According to Cora, this silence, and the inability to talk about her confusing issue was “worse than confrontation”. Sadly, when mother and child finally could talk of Cora’s transition, due to her advanced age and illness, Cora’s mother’s vision was failing, and she could only see shadows. She never got to recognise the transitioned Cora.

In the early post-transition years, Cora strove to be read by others as a cisnormative woman, and entered a long-term relationship with a cis gender heterosexual man. She replaced the socially embedded behaviours associated with masculinity with those associated with femininity. Her early life and lack of social interaction made this process challenging and she approached her transition cerebrally, saying she “tried to do it cognitively”. She explains, “I did what I did all my life, I bought some books.” Adding to this research, Cora spent time “observing fashion, trying to work out what would suit my body shape”. Pivotal in this process of becoming was her joining a group of transgender friends who supported each other through this developmental process. Given the minimal social connection in her early life, Cora experienced this support as transformational, both for her evolving gender expression and her developing social skills and growing self-confidence.

When we met, Cora had begun a deeply committed relationship with a transgender woman and has been in this relationship for the past 2 years. Cora identifies her sexuality as pan-sexual, meaning her sex organs and those of her partner are of no

consequence. She explains that if she is attracted to another adult and, in turn, this person—male, female or other—is attracted to her, then the couple will find a way to be together sexually. Cora describes her current relationship as “two assigned males at birth who have had affirmative surgery to various degrees to live as women, in a relationship”. She views her romantic connection as “two people being really, really authentic with each other”. This description prompts her to ask, “How do you define that? [according to a binary?]”

Now, Cora does not identify as a woman, but rather, as a “transwoman”, as a “third gender”. Refuting the criticism that the category “third gender” is yet another box, Cora recites the lyrics of a song, *Elisa is the fairest queen*, “landing on the space of being neither a man nor a woman”¹⁰, and defines this space as being a composite of a man and a woman, a “spectrum that encompasses everything”. Cora’s on-going negotiation is not only between self and social norms and expectations, but it is also an internal dialogue that attempts to differentiate between what she sees as her “authentic self” and a self that has been infiltrated by social norms.

It’s like I’ve had all these rules imposed from early on in my life, taken them on board and tried to live my life by all of these rules. But by sticking with it, I’ve got to this place where it really comes from my heart now.

Cora’s endeavour to find a sense of coherence with her “heart felt” sense of gender identity, self-recognition, and recognition by others has her question and rail against heavily imposed “outside rules coming in”.

¹⁰ *Elisa the fairest queen* is a ballad written in the 1500s for Queen Elizabeth I and features in the Sally Potter 1992 version of the film *Orlando* that is based on the book by Virginia Wolf.

Negotiating a place of reckoning with her gender identity and sexuality, Cora believes that she is at last at peace with herself. She is in a committed and loving relationship, has a supportive group of friends, and is respected for her contribution in the workplace. Cora's narrative describes the lived experience of transgender people's existence as unique to everyone, their background and life situation. As such, transgender people's experience of being recognised by others is complex, nuanced, contradictory, and contextual. While she feels that recognition by others is necessary for her sense of belonging, success in business and to survive, after years of therapy and introspection, Cora feels that this need is in balance with her recognition and acceptance of self.

Introduction

Cora's (55) story sensitises us to transgender people's lived experiences of multiple gender and sexual identities and how these are recognised by self and others. Cora's story highlights the way that, pre-transition, she had to be recognised as her birth assigned gender by living in silence at home about her felt gender, and then, after transition, had to work to be recognised by others as her felt gender. My study identifies the process of recognition for transgender participants as a complex and relational process that can be loosely grouped into two stages—pre-transition and post-transition—each with two dimensions, self-recognition, and recognition by others. Goffman (1963/1986) assesses being recognised by others as a social performance, a technique for escaping social stigma and social isolation. Being recognised by others in this sense is generally used to describe movement between two bilateral, discrete identity categories. Stone (1994) notes the hierarchical nature of these categories, one dominant and the other an oppressed group, such as male-

female, black-white, upper class-lower class or abled-disabled. As such, previous transgender studies have focused on being recognised by others after transition, a linear and hierarchical move from, for example, male to female or from female to male (Roen, 2002; Rubin, 2003; Schilt, 2010). On the contrary, this project illuminates the intricacy of the on-going negotiations or socially contextual choices navigated by transgender people as they manage their commitment to an inner sense of gender identity, desire for self-recognition as a congruent being, and their need for safety with and recognition by others. Central to these on-going mediations is the commitment transgender people feel to an inner sense of gender identity.

In this chapter, I explore the experience of recognition; both recognition of self as a coherent being, and recognition by other social actors. I argue that there are two stages of recognition. First, there is a well-documented stage of post-transition recognition that is reliant on others recognising the person as cis gender. Second, there is a pre-transition stage, when the person's behaviour adheres to the social expectations associated with their birth assigned gender, thereby belying their knowable sense of gendered self. Pre-transition recognition is particularly prolonged in the narratives of older transgender people who devoted a major portion of their lives to being recognised by others as their birth assigned gender. For these people, in the last half of the 20th century, options for expressing gender diversity were limited and being recognised as their birth assigned gender was a matter of survival in the dominant gender order.

I divide the stages of pre-transition and post-transition recognition by others into the inter-related processes of self-recognition and other recognition. As Cora's (55) story

demonstrates, in effect these are not separate actions or stages, but are composites that are intricately interwoven and interdependent. In the first section of this chapter, I focus on recognition by others in participants' early, pre-transition life. Throughout the entirety of participants' lives, they remain convinced of their core felt sense of gender identity. In their early life, this commitment was in tension with their need for recognition by others that was dependent on behaviour that was in accordance with their assigned gender identity based on "assumptions of essentialised and naturalised group difference" (Pfeffer, 2014, 4). Participants recall that their early stage of life was dominated by their confusion and dissonance at the mismatch between their knowable sense of gender identity and the cisnormative expectations being imposed by family and friends. To avoid rejection, maintain a feeling of belonging with family and friends, and to survive, the person camouflaged their incoherence between the knowable sense of gendered self and the physical body.

The second section of this chapter focuses on participants' post-transition lives and explores how they reconcile their changing bodies and self-recognition of their congruent body and knowable sense of gender identity. Like other-recognition, self-recognition is not an individual undertaking, it is a group project. As such, a transgender person must not only recognise themselves as the gender they know themselves to be, but also, they must have this confirmed by others. Thus, self-recognition and recognition by others are intertwined processes. This interconnection is demonstrated in Kara's (45) experience of looking in the women's bathroom mirror to see if other women were staring at her, thinking that she was a man. When Kara realised that these women recognised her as a woman, she looked once more in the mirror. This time, Kara says, "I saw myself as if for the first time". The other

women's response confirmed to Kara her self-recognition as the woman she says she had always known herself to be.

In such everyday social interactions, transgender people make on-going conscious choices to be recognised by others. Moriel's (2005) notion of recognition as an on-going series of choices on a spectrum is helpful to frame this discussion and understanding of how participants contextualise the process. The transgender lived experience of the two stages of recognition by others, pre- and post-transition, together with the commensurate processes of self and other recognition, mean that intricate negotiations and an on-going series of socially contextual choices produce tensions. Cora's (55) story and the life experiences of other participants show how throughout their lives transgender people manage these tensions and the balance between their knowable sense of gender identity, self-recognition as a coherent being, and recognition by others. Like most participants in this study, Cora's journey is not a single narrative of transition from one gender identity on the binary to being socially recognised as another. It is, rather, a story of movement of gender and sexuality identities, changing body, and social locations. In the body of this chapter, I refer to Cora's transition, and the experiences of the other participants, using the main themes I have identified in this thesis to frame discussion—cisnormativity, gender identities, bodies, and culture—while simultaneously keeping in mind the fact that the process of self and other recognition both before and after transition forms a lengthy, inconsistent, at times contradictory, contextual on-going movement.

Early Life

In this section, I focus on how participants' early life experiences of love and acceptance were often dependent on their compliance with gender expectations associated with their birth assigned gender. I document how participants are pressured to conform to gender norms while simultaneously remaining committed to their knowable sense of gendered self. Participants' responses vary depending on their age, the decades they grew up in, and the gender identity they were assigned at birth.

When thinking of "passing" as specific to recognition by others, Pfeffer (2014) defines the act of "passing" as the social accomplishment of presenting and being recognised by others as a member of a certain legitimate social group. Goffman (1967/2017) argues that in everyday interactions, to maintain social cohesion, social actors identify within a limited range of socially intelligible legitimate options. In the "master narrative" of cisnormativity (Bradford and Syed, 2019, 306) there are only two available categories, man or woman. The "compulsory nature of cisnormativity" (Bradford and Syed, 2019, 306) effectively renders transgender identities as marginalised within social structures and interactions. To gain acceptance as a member of these social structures and groups, people are encouraged to strive for the idealised versions of masculinity and femininity (Connell, 2002). Being recognised as cisnormative, therefore, is emblematic of the striving for normativity described by Butler (1990/2010, 1993/2000). The reward for such striving for recognition by others is social acceptance, inclusion, and avoidance of discrimination, exclusion, and abuse. As discussed in Chapter Four, the narratives of older and younger participants illuminate the effect of historical context and social progress on perceptions of what constitutes cisnormativity. The effects of changing perceptions of cisnormativity are witnessed in the following paragraphs that chart the early lives of younger versus

older participants, the pressure each person felt to conform to historically contextual gender expectations associated with their assigned gender, and what this meant for their knowable sense of gender identity and its incongruence with their bodies.

Participants recall childhood memories of navigating their social interactions, trying to conform to gender expectations associated with their birth assigned gender, but all the while conscious of the fact that often they did not live up to such expectations. Their recollections reflect findings from a study by Dietert and Dentice (2013) that record how gender diverse children are rewarded for complying with cisnormative expectations with love, acceptance, and a sense of belonging. Conversely, if they are non-compliant, they risk being cast out from the family, and all participants except Lena (83) recall anticipating and fearing negative responses from their parents to their gender non-conformity. Grossman et al. (2008) find that most parents in their study could not comprehend or empathise with the dissonance experienced by their gender diverse child. Over time, and positive and negative reinforcement, these young people began to realise the danger of exclusion associated with non-compliance. Cora (55) says her life was “fairly reasonable for a working-class family, I ate well, I had plenty of toys”, but Cora knew that her father’s violence was directed at her because of her inability to present an ideal masculine persona. She says this on-going situation “created a real double bind in a way”, for as a child and adolescent, Cora needed her parents’ support, but to receive this she had to hide and deny her identity. Cora recognised the untenable situation she was living in, to be true to her “heart felt” sense of gender identity meant risking loss of love and protection and, as a dependent child, her very survival.

Participants give examples of their parents' use of shame as a way of instilling conformity to gender norms. When this sense of shame is coupled with violent enforcement, Scheer et al. (2019) find an increase in the intensity of the traumatic experience. For Cora (55), her childhood and life through to her late twenties was dominated by trauma as her father inflicted physical violence, and her mother and father would impose periods of shame inducing silence and sometimes threats of exposure.

Probably the most intimidating aspect was one night when I went out – dressed – and they must have known what I was doing. I climbed out the bedroom window. And then walked into town. On reflection, quite dangerous. So, I'd come back and typically I'd go into the garage and change. But this night they came after me, so I slammed the garage door shut. And they were banging on the door screaming 'come out, come out'. I was utterly panicked. Really fearful of what was going on, I managed to get off all my gear and opened the door, but they had gone inside. Nothing was ever said. And that was worse than confrontation. We all knew, we all knew what was going on, but nothing was said.

The findings from my 2016 study of 12 transgender women align with the findings of this study. Both projects detail examples of acts of extreme physical abuse inflicted by fathers, stepfathers, and in one case the mother, on their boys to toughen them up in preparation for life as men. The aim of such abuse and debasement is to create a sense of shame and fear of reprisal in the child for their perceived feminine behaviour (Wallace and Russell, 2013). Halberstam (1998) argues that both transgender men and women endure similar degrees of shame and debasement when they were children and adolescents, but the transgender women in my studies experienced intense and extreme violence not experienced to the same degree in the narratives of the eight transgender men I interviewed. For example, seven of the 10 transgender women participants in this study and all but one of the 12 transgender women participants in my 2016 study suffered severe physical abuse as children and adolescents. The

difference in the intensity of punishment suggests a link with the basic premise of hegemonic masculinity, that male bodies must enact behaviours deemed masculine—authority, aggression, emotional reserve—and display an abhorrence of behaviours attributed to female bodies; ideal masculinity in male bodies is valorised while femininity is disparaged (Connell, 2002; Messerschmidt, 2018; Pease, 2019).

All participants say that to be accepted by others they camouflaged their sense of gendered self. Such camouflaging is experienced in different ways depending on the decades they grew up in and the age at transition of participants. Older transgender women participants who transitioned in mid-life talk of denying their knowable inner selves for decades to maintain the façade of a cisnormative male. Through their twenties, thirties, and forties they married and had children. Some, like Maia (63), aspired to the hyper masculine ideal, drank heavily, got into fights, and drove fast cars and motorbikes. Other participants such as Seth (63) and Cora (55) who were unable to consistently enact the gender norms associated with the bodies they were born into internalised the shame and removed themselves from social contact and connection.

Cora says,

I isolated myself and I told no one. My journey was one of – this is in a box ... I became so shamed and thought I was utterly defective. I went on a self-improvement program, reading self-improvement books. I was trying to fix myself. I was totally isolated. I had no friends. Very little extended family contact. I still lived at home ... I just would go to work, come home, and play on the computer.

These participants developed different approaches to the dilemma of non-conformity, but, essentially, in their world views, they were the sole bearers of the responsibility for their ill fit.

Sexuality and Gender

As I discuss in Chapter Four, as part of the process of identity development, participants explored their gender identity and sexuality, with some participants conflating the two. The implications of cisnormativity and heteronormativity, and the “prescribed boundaries of heterosexuality: both sexuality and gender” (Jackson, 2006, 105) on the process of self- and other recognition is seen in the difference between the stories of younger and older transgender participants. These differences attest to social progress and the recent acceptance of homosexuality as a legitimate social option. Older participants grew up in a time when homosexuality was a criminal offence. It was not until 1997 that Tasmania became the last state in Australia to decriminalise homosexuality. Therefore, for them, compliance with cisnormativity included the appearance of heterosexuality.

The intricately and dynamically related aspects of gender and sexual identities thread through Cora’s (55) life-story. In her early twenties, struggling with her gender identity, she was simultaneously exploring her sexuality and conflated the exploration of her sexuality with her gender identity struggle.

When I started to explore my sexuality, ... I assumed, now I can only reflect on this now that I’ve had all these other relationships, I assumed that well because I want to be, and feel like I’m a girl, I must be attracted to guys. So, I started to hit the beats ... But it wasn’t, in terms of that electricity that I previously described to you, it wasn’t there. I could get off, but that was the hormones at the time ... There was nothing other than the sexual encounter. But it wasn’t satisfying. I didn’t feel comfortable with the guys playing with my penis. So that became quite a cognitive dissonance for me ...

Similarly, in his adolescence and early adulthood, Seth (63) was uninformed about transgender people and the possibility of transition. He thought that because his inner voice insisted that he was masculine, his dissonance was due to his sexuality, and because he enjoyed being with women, he concluded that he must therefore be a

lesbian. He experimented with a series of one-night stands with “blokes, women, blokes”, but came to the conclusion that while he liked the company of women, he “didn’t want to be a woman with a woman”. Rather, he decided that he wanted to be a heterosexual man with a heterosexual woman and, post-transition, is adamant that he is a heterosexual man.

Knowable Sense of Gender Identity

Throughout their exploration of gender and sexual identities, participants’ narratives expose their uncompromising sense of a gendered interiority, an “invisible but deeply felt” (Prosser, 1998, 79) sense of inner self. Participants describe an internal voice, a psychic knowing or, in Seth’s (63) case, a series of dreams to convey the sense of an internal core wanting to express itself to the outer world. Seth translated the persistent dreams, saying his subconscious was insisting, “Hey mate, time you woke up. You’ve gotta do something about this. This is not going away”. Similarly, Janice (66) talks about the almost constant pressing need for some material confirmation of the “little voice inside me” that was telling her to adjust her physical presence to allow visible expression to it. This inner voice is convincing and compelling, and these transgender people go to great expense, endure pain and inconvenience, and possible social rejection to alter their material bodies to better align with and express what Cora (55) names a “heart felt sense”.

Participants’ responses make clear that they cannot accept and continue to live with the incongruity of body and knowable sense of gendered self, and they describe coming to the realisation that they must transition and change their body to better reflect this “core self” (Prosser, 1998, 79). For Maia (63), the force of the sense of a

knowable gender identity and the compulsion to transition was traumatic, and she admits that the only other option she could see available to her was to drive her sportscar at speed into a tree. While Stone (1987/1992) argues for “transsexual” people to “speak outside the boundaries of gender” (1987/1992, 164) and to forego medical transition, the experiences of participants in this study speak to the acknowledgement that Stone “could not ask a transsexual for anything more inconceivable than to forgo passing” (1987/1992, 168). For these participants, the idea of foregoing medical treatment is not an option, and their narratives expose the dissonance they felt having to hide their sense of gender identity. Orion (26) describes his pre-transition body, face, and long blonde hair as attractive, but he hated them, and his distress manifested into an eating disorder.

I think you reach a point when you are 18, 19, 20 when you were seen, when you must look good, look pretty. When you don't fit with that you are like, you don't really know where you fit. I didn't feel right. I feel like I tried and then I didn't fit a role. For a while I went along with it and then I was like this doesn't feel right. I don't really want to have long hair. I just didn't care about that kind of stuff. I didn't take any pride in myself. I feel like I went along with it quite a bit. It bothered me. It made me angrier. And I expressed that in a more-self destructive way. I just didn't know what was going on and what my thinking was. I just can't really place why I was so angry about the way I looked. I had a bit of an eating disorder. I didn't have much chest and when I didn't eat much and that made me more flat-chested.

Orion's parents reasoned that he was “irrational and delusional” rather than transgender and told Orion that they could not understand why he wanted to be a boy when he presented as an attractive girl. Finally, the medical crisis of his eating disorder prompted them to accept Orion's plea that he “wanted to be normal, but as a boy”. Orion's frustrated striving for cisnormativity had manifested as an eating disorder. He hated the disconnection of his body from his sense of gender identity, gave prominence to the integrity of his inner sense of gendered self, and denied and starved his body.

Older Versus Younger Transgender People

As mentioned previously, my study notes a marked difference in the narratives of older and younger transgender participants. Older participants such as Seth (63), Cora (55), and Maia (63) were children in the 1950s and 1960s, a time of minimal information about transgender, and, in Australia, strict adherence to the gender binary (Fela, 2019; Riley, 2015). Halberstam (2018) notes that prior to the 1990s, a child from a middle-class family who wanted to live as “the other sex” would be considered psychologically disturbed. This meant that these young people lacked the language to describe their gender identity, lived decades being recognised by others as their birth assigned gender, and did not transition until they were well advanced into their adulthood. Important and progressive social changes have resulted in young gender diverse people having knowledge of gender diversity and the terminology to describe their identity and, if they are fortunate to have parental, social and medical support, they have a less traumatic passage to adulthood. Halberstam argues that the contrasting life experiences of younger and older transgender people puts these two groups at odds with one another. As a result, Halberstam observes that some younger transgender people want to distance themselves from certain terminology, such as transsexualism, and from acknowledging the history of transgender activism.

Seth (63) contrasts his upbringing with the more gender fluid appreciation in today’s world. The influence of this early life resulted in Seth’s belief that “there's nothing more extreme I can think of that you can possibly do in your life than to be one gender and then be living as another gender”. Reflecting on gender fluidity and the possibility of identifying as transgender without undergoing surgery and hormone

therapy, he says he “never thought of being anything other than the bloke I am, because that’s what suits me”. Seth is the only transgender man in this study who appears to consistently adhere to the hyper masculine persona, and his acceptance of this ideal contrasts with the younger transgender men participants who, at times, question certain behaviours associated with idealised versions of masculinity. In line with transgender men’s responses in Schilt’s (2010) study, all the transgender men participants except Seth describe negotiating ways of neutralising what they see as the damaging aspects associated with certain hyper masculine behaviours. While they do sometimes enact hyper masculinity to be recognised by others as masculine and keep themselves safe from abuse, or promote their interests, these younger participants insist that this is a short-lived and context specific enactment to achieve an outcome. I refer to this phenomenon in more detail in Chapter Eight.

For older participants such as Seth (63), their life narratives parallel the social changes that took place in Australia in the latter half of the 20th century and the first 2 decades of this century. During this period, cultural knowledge of transgender identities increased, including because of the growth of the transgender rights movement in the United States (Meyerowitz 2004; Stryker 2008/2017). Here in Australia, Riseman’s (2020) on-going project maps evolving societal attitudes and how these have affected the lives of gender diverse people in Australia. Such transgender advocacy continues to promote the advancement of medical and psychiatric support and legal rights covered in more detail in Chapter Five.

Older transgender participants grew up in the fledgling years of transgender advocacy in Australia. Unaware of the possibility of transition, they spent the major portion of

their lives being recognised by others as their birth assigned gender. The energy and persistence required in building and maintaining the façade of a cisnormative male or female often included getting married and having children. This family life was destroyed on transition, causing personal devastation and heartbreak not only for the transgender person, but for their partner and children. Chapter Four focuses on Lena (83) who describes the heartbreaking separation from her wife and children as “the worst thing, the worst aspect”. Highlighting the disparity between older and younger transgender people’s lived experience, Lena believes that if she were to transition now as a younger person that it would be different, and she would be able to convince her wife to stay. She says, “If it were all happening now, I could point at a number of families, many, many families where the marriage has gone on very successfully after one partner or the other, or in some cases both have transitioned”. Acknowledging the social progress that has occurred in the past 8 decades and spanning two centuries, Lena ponders the changing perceptions of what constitutes cisnormativity and how this influences gender identities and bodies. She concludes that she would only know the answer to her question if she were to live two lives: the life she has lived, being born, and coming of age as she did in the 20th century and, with her transition, a second life coming of age in the 21st century.

Transitioning

In this second section, I explore how participants understand their changing bodies and how post-transition they develop a growing awareness and appreciation of the congruence of their body and their sense of gender identity. Participants describe their sense of joy and relief when recognising their aligned, congruent selves. Their descriptions affirm Rubin’s (2003) claim that the recognition of congruence is

“repairing of the link” (2003, 144) between the transgender person’s body and their sense of gendered self. Moriel (2005) goes further, arguing that through the repairing of this link and recognising oneself as a coherent self, a person undergoes “a transformation of oneself, one’s identity, one’s potential ... a move to a place where one can more fully express and fulfill oneself” (2005, 167). Seth describes this sense of freedom of expression and potential as “unbelievable freedom”. Similarly, Kara (45) uses the word “freedom” to describe her newfound sense of her congruent body.

Kara’s (45) description extends to what she calls the “narcissistic” phase of early transition. This phase, she says, was characterised by complete absorption in her new embodiment. Kara recalls being obsessed with her own appearance, intoxicated with the freeing sensation of self-recognition, knowing that her sense of gendered self is now reflected in and congruent with her physical appearance. She says that after “never being herself” for 21 years, post-transition, she experienced the liberation of being “let off the leash”. She felt suddenly free to be herself, saying of that time, “If you are remotely convincing in the gender that you’re transitioning to, then it’s all about you. The clothes, the hair ... you’re so self-obsessed for that period”. Marlow (28) tells of a similar experience when he first started taking male hormones.

When you first transition you count every hair. I don’t know what it is. You’re like, I think my voice is deeper today and you do these videos and stuff, which I’ve all taken down now because I’m just like, what the hell was I thinking? The number of photos I took of myself and now I’m just like, what are you doing? I think it’s just that experience of finally having this joyful moment of giving a shit about yourself and caring that you’re doing something for yourself no matter what people think. You just get that, yeah fucking take a photo and not even thinking like that. Just being really excited for yourself.

All participants describe varying degrees of this initial state of fascination with their own body and the elation at recognising the physical representation of their sense of gender identity.

Over time and social interaction with family, friends, and work colleagues, participants recall becoming aware of their social environment and their location in it. Accompanying this social awareness, participants talk of developing self-reflection. Cora (55) describes the gradual development of the ability to self-reflect because of therapy-inspired introspection.

In terms of where I have landed now, it just feels so free. It's like I've had all these rules imposed from really early on in my life, taken them on board and tried to live my life by all of these rules. But by sticking with it [self-reflection], I've got to this place where it really comes from my heart now.

Connell (2009) argues that such on-going dynamic negotiations juxtapose the transgender persons' subjective identity, their physical body, social embodiment, social group membership, and their self-appraisal and social appraisal. As with the encompassing of self and social appraisals reflected in Nagoshi et al. (2010, 2013) trans identity theory, this study finds that for transgender participants, self-recognition is not a static achievement and is not solely focused on the physical aspects of transition. Rather, it is an active, historically contextual, on-going, and relational negotiation with self and others.

Not all transgender people feel the need to undergo medical treatment or to be recognised by others as one of the two gender binary options, and some cannot afford, or do not have access, to treatment. For those who do experience this need and have access to medical treatment, being recognised by self and others as either a cisnormative man or woman is of paramount importance. Kara (45) enjoyed an education at a private boy's school, lives a life of relative privilege, has an advancing career and is financially independent. Also, she has the unwavering support of family

and friends and had a transition she describes as a “dream run”. On transition, Kara made the choice to assimilate completely and to be recognised as a cisnormative woman. She relocated with her workplace to another city, established an alternate life narrative, and “never spoke of being trans again”. She destroyed all photographs of her as male, does not use her previous name, and her assimilation is so complete that she now “can’t remember being male”. Kara says, “I’m fairly proudly female. That’s what I feel ... that’s how I identify myself”. As such, she says she cannot understand people who do not identify with “either gender”, fearing that this positionality would result in alienation from society. Kara believes that to be accepted in society, one must select between the binary options of man or woman, and for her, there is no question about her identification as a cisnormative female.

The series of choices transgender people make in their on-going social interactions are not necessarily straightforward or consistent as in Kara’s (45) case, but reflect the intricacy, complexity, inconsistency, and relationality of these negotiations. For example, Maia (63) is a transgender activist who has driven change in transgender legal rights. Based on visual cues alone, Maia is recognised as a cisnormative woman, but her voice is deep and recognised as masculine by some. Throughout each day, Maia makes choices as to whether to adjust her voice to agree with her feminine appearance or to maintain her masculine sounding voice. She does recognise the relative ease-of-living and safety accorded those who align with gender norms, and when she feels her personal safety is under threat or she wants certain needs met, she will adopt what she calls her “Marilyn Monroe voice”. For Maia, this descriptor means a highly feminised, soft, and sensual voice. Apart from these rare events, Maia uses the incongruence between her appearance and voice to draw attention to the

normalisation of gender expectations and to “make people have to stop and think about their assumptions about gender and identity”. Thus, Maia’s simultaneously cisnormative *and* genderqueer presentation blurs the imagined dividing line between these identifications.

As detailed in the previous paragraphs, recognition by others is relational, and is therefore, tentative, and even for transgender people who are recognised by others as cisgender all the time, there is a hesitation of fear of exposure. Kara (45) tells of an industry conference where a high-profile transgender woman was the guest speaker:

I felt nervous going into the conference because there is always that thing in the back of your mind, am I going to stand out like a sore thumb when I go and watch something like that? It was fascinating to me watching the audience reaction and the discussion afterwards with people going, gosh imagine what she’s been through and how brave she is to stand up and do that. I agree with all of that, but then coming back to here [the office] and thinking to myself: you have got absolutely no idea that there’s one sitting right next to you?

Kara’s fear of being publicly and involuntarily outed exposes the critical nature of self and other recognition. That is, that self-recognition is co-joined and reliant on other or social recognition which is, as Pfeffer (2014) contends, “tenuous, context specific and revocable” (2014, 11). As such, a transgender person, no matter their success in consistently being recognised as cisnormative, is aware that their group membership is precarious and that their sense of belonging is dependent on other’s recognition.

All transgender participants do not want to be involuntarily outed, but some will out themselves with the aim of violating the norm of social coherence to advance human rights and defend others. Participants such as Maia (63), Ione (57), Marlow (28), and Anthony (35) on occasion, and to promote gender diversity, disrupt social unity by self-disclosing their transgender identity and their discreditable stigma. Goffman’s

(1963/1986) conceptualisation of stigma differentiates discredited from discreditable stigma. Goffman (1963/1986) refers to people who have a stigma that is concealable, such as transgender people who are recognised as cisnormative, as having a discreditable stigma. Marlow (28) is recognised as male bodied by friends and work colleagues; however, he makes the choice to out himself as transgender when he feels it is necessary to refute someone who is denigrating gender diverse people. Likewise, and as I discuss in more detail in Chapter Eight, Anthony (35) was asked to speak at a ‘pub talk’ about domestic violence. Half-way through his presentation, Anthony shocked the attendees to attention by outing himself as a transgender man, thereby admitting to having suffered the chronic sense of threat and intimidation experienced by women as a group. Janice (66) works tirelessly for the advancement of gay and transgender rights and, sometimes, when she believes that self-exposure will advance those rights, she tells her audience of her transgender identity.

While recognition by others signals acceptance and group membership for some transgender people, it is unavailable or conditional for others. Geographic and socio-economic location influence the person’s ability to pay and access treatment and, together with age when transitioning, have consequences for transgender people wishing to be recognised as cisgender. This is particularly the case for transgender women who, after decades of testosterone, have non-reversible features such as large hands and feet, bone structure and facial hair. Johnson (2007) argues that for transgender people who want to be recognised as cisgender but are aware of the difficulty of meeting social expectations all the time, it is common for them to anticipate and be particularly sensitive to possible episodes of misgendering. After decades of undergoing therapy, Cora (55) says that on the rare occasion when

somebody does misgender her, rather than feeling hurt and retreating as she once did, she now uses this feedback in a positive way and views the comment as offering “good information about how I present”. At other times, and if appropriate, Cora offers that person or establishment feedback on the personal toll misgendering inflicts, and the need for sensitivity to gender diversity.

Not all participants admit to the self-awareness and emotional control exhibited by Cora (55) , and Ansel (55) believes that even if a transgender person has a strong character and has undergone therapy, they “still get damaged by the rejection” inherent in misgendering. To reduce the potential for such hurt, Ansel advises younger transgender men to be cognisant of the lengthy process of awareness and acceptance that their families and friends must go through. He tells his young charges to “work out who matters and then you’ve got to work out how much patience you’re going to put into them because they are transitioning too”. Ansel’s appeal to allow loved ones the time necessary to recognise and accept the transgender person’s transition demonstrates that the process of transition is not confined to the transgender person: the family, friends, and work colleagues are transitioning too. The notion of the process of transition being extended to significant social actors with the understanding that they too go through a period of adjustment and reckoning adds another dimension to the relational aspects of transgender people’s interactions and navigation of self and other recognition.

In sum, self-recognition achieved through the congruence of body and gender identity is the aim of all the transgender participants in this study. Post transition, participants develop a growing awareness of the congruence of their body and knowable sense of

gender identity and, over time, and interaction with other social actors, they come to understand the social significance of their transition. Throughout their post-transition lives, transgender people navigate the subtle balance of their sense of gender identity, recognition of self as a congruent being, and recognition by other social actors.

Chapter Conclusion

In this chapter, I centred transgender participants' sense of a knowable gendered self, a consistent, compelling "inner voice" (Lena, 83). It is around this central, reliable inner knowing that each individual transgender person negotiates and balances self and other recognition, both pre- and post-transition, navigating their own way through intricate inter- and intra-personal negotiations. This study finds that this commitment to the notion of a knowable sense of gender identity acts as the fulcrum, or reference point, around which transgender people manoeuvre the navigation of self and other recognition. Such navigation is on-going, and transgender people must constantly negotiate gender norms and expectations no matter what body they inhabit, thereby highlighting the omnipresent force of embodiment. As transgender people work to dovetail their changing bodies with the imposed historically and socially contextual social order exercised via family, friends, work colleagues, and their own perceptions of what constitutes cisnormativity, their sense of and commitment to their knowable gender identity remains consistent. It is the expression of this sense of gender identity through social interactions that is mutable. Thus, the knowable sense of gender identity is interpreted by the transgender person through the cultural filter of historically and socially contextual perceptions of cisnormativity. Hence, just as bodies and culture are interpolated, so too are self and other recognition.

Transgender people's on-going negotiations show that transition is not a linear change of location along a binary axis but involves intricate inter- and intra-personal manoeuvres through multiple locations on multiple hierarchies. In these social interactions, the movement to, or away from, certain expressions or identifications have real-life consequences for transgender people. Expression of cisnormative identified locations is granted social advantage, while the expression of genderqueer identification may involve significant disadvantage. Therefore, while theorists such as Butler (1993/2000) call for a reconfiguration of the "mapping of sexual difference itself" (1993/2000, 91), and Nicholas (2014) explores what a post-gender world may look like, others such as trans feminist Koyama (2016) ask that transgender individuals not be loaded with the heavy responsibility of such social remapping. Rather, I argue that a nuanced understanding of transgender people's identities derived from an analysis of their "self-representations" (Riggs, 2013, 66) or individual accords illuminates tensions that evoke insights into the complexity of gender inter- and intra-relations. Such illumination expands our understanding of gender and of self- and other recognition from linear, binary definitions to relational, interactive, and contextual conceptualisations of identities in process, even as these transgender participants experience a constant sense of gender identity.

The following chapter explores the expectation and exercise of personal power in gender relations and how through changes in social locations, the transgender people in this study develop heightened awareness of the problematic nature of the gender power differential. To make sense of these intricate and on-going negotiations, and resolve their disquiet witnessing and experiencing gender inequality, these transgender people mediate internal individual understandings, compromises, or

accords between their personal values, life experience, needs and wants, and societal pressure. For transgender people, gender inequality is not a straightforward calculation of M>F—male is greater than female, nor one that identifies the repeated performativity of M/F—a strict gender binary—as its root cause (Keegan, 2020c). Chapter Eight illuminates the complexity of transgender people’s relationship with gendered power through their on-going social interactions and the “self-representations” (Riggs, 2013, 66) or individual internal accords they negotiate to make sense of their changing bodies, social locations, and associated relationship with personal power.

Chapter Eight

Negotiating Individual Accords

Nat's story

Nat transitioned when he was 22. At the time of our interview, he was 30, and about to marry his cis-gender female partner who he describes as an ex-lesbian. As a transgender man, Nat adheres to traditional views of marriage that would not have held such sway if he had not transitioned and had remained in a lesbian relationship. He negotiates an understanding or self-narrative to make sense of these inconsistent beliefs:

I think if I had never transitioned, and identified as a lesbian all the way through, I wouldn't have gone to her parents and asked for her hand in marriage, whereas as a male, I was like, that's something you've got to do. Not you've got to, but I'm like, as a male getting married, I'm a traditionalist, so I'm like, I would do that, and I feel like that's a respectable thing to do.

Nat works hard and has advanced his career to middle management level and he and his fiancée recently purchased and moved into a house close to the city centre. Nat is proud of his achievements and feels that he has proved himself as a man.

When he was 4, Nat's parents divorced because his father was violent and had an affair with another woman. Nat believes that his father has no respect or affection for women and, pre-transition, he felt the impact of his father's disrespect:

We'd just clash because he doesn't respect women. I saw that growing up. Me as his daughter, his daughter that challenged him, he never respected.

Post-transition, his father

does not so much see me as his son now, but he does see me as a male ... he knows I'm read as male everywhere, so that's how he has to see it, and I think that's maybe where his respect derives from.

Nat's father has not granted Nat unconditional respect, telling him that now he presents as a man, "If you can succeed, hold down a relationship and get a career, then I'll believe that this was the right thing for you". Nat reasoned that for his father, being a man was hard, and he needed "to see me survive as a man". Recently, his father told him that he is proud that Nat is getting married, has bought a house, holds a large mortgage and is developing his career path.

Nat still feels angry towards his father because he believes that he has discredited the power and authority vested in masculinity by assaulting his wife, Nat's mother. Nat berated him saying, "You knew your role was not to beat the absolute shit out of her. You hold that position as a man to actually protect a woman". Nat describes his "traditional upbringing" and how he had been "presented these roles of what a woman does or what a man does", but that his father had abused that traditional view. He told his father, "Even your traditional standing of how you've said this is right and this is wrong, even you completely went against that my entire childhood and into my teens". Nat's anger at his father for his violent abuse of his wife is fuelled by his perception that his father has degraded the esteemed role and position that society allocates to men.

Transition was a turning point in Nat's troubled relationship with his father:

When I transitioned, I looked at my upbringing very differently, and got very, very angry at my dad in the process. I was always angry at him because he was extremely violent towards my mum. When I transitioned, I became even more angry at him, and I was just like, how? You hold this position as a man, and how society views you, and that's how you treat a woman. You are just a pig, and I became very angry, and I think that was probably all my late teen rage just coming out. I was like, I've just got all this anger. Now I'm not afraid to stand up to him.

Due to Nat's traditional family values and his father's history of family violence, Nat has always felt protective of his mother. Since transitioning, however, Nat has

actively adopted the traditional male role of protector, and his mother responds by relying on him as the man-about-the-house. The assuming of cisnormative roles, including the enacting or deferral of power and authority results in Nat believing that from “an authority sense, I do feel like a son. I don’t feel like a daughter who’s transitioned now”. This identity enhances his perception of his masculine persona, and “since taking hormones and testosterone, I’m so much stronger as a person”. For Nat, the movement of identities from lesbian daughter to transitioning man and now transgender man, with the aid of chest surgery and hormones, fuels his self-confidence when interacting with his family.

The other important male figure in Nat’s life is his older brother. Nat and his sister lived in the family home and went to the local school, but when Nat was 3 and their brother was 9, he was sent away to a private all-boy boarding school. Nat believes that his brother’s time at boarding school shaped him into a person who has no regard for diversity. Consequently, his brother does not accept Nat’s sexuality or gender transition. Although Nat never felt he really knew his brother, he was nonetheless intimidated by the brother’s occasional presence. Recently, however, Nat had an argument with his brother and sister-in-law. With his increasing self-confidence, he stood up to them, something he says he would not have done when he was in female form.

As a child, Nat was considered by his parents and his brother and sister to be “the problem child and the black sheep” because of his frustrated angry outbursts. He suggests that the frustration may have been because growing up he “always felt very masculine and male” and had always “wanted to be a guy”. Since his transition, he is “more comfortable and confident”, and his post-transition self-assurance means that he stands his ground with family members.

Nat transitioned while working for a company where his father held the role of general manager. Telling his father of his intent to transition was a difficult conversation, made harder by his father's insistence that it be done in his exposed glass-walled office. His father's disrespect was shared by some of Nat's work colleagues who discriminated against, abused, and insulted him:

One guy was like, 'What's between your legs?' I'm like, 'Is that not highly inappropriate? ... God, you have balls to say that' and then he was like, 'Oh, I don't want to say anything else that might offend you', and I'm like, 'What, and you didn't think that wouldn't?' You could hear him thinking and going to say something, and I was like, 'Trust me, do not say it. If you're thinking it's offensive and you didn't think *that* was, I can assure you this is', and then he pretty much asked 'Can I just see it?' I'm like, 'Fuck you', and at that point, I hurled down the phone a massive 'F' you.

Soon after this altercation, Nat went on 2-weeks leave to have a hysterectomy and took this opportunity to resign from his workplace. In his next career move, Nat did not explain that he is transgender but outed himself when defending a fellow colleague, a transgender woman.

I actually started in this training group, and it's probably a group of 30 of us, ... the one girl who's late is this very, very glamorous trans woman. Just waltzes in, and I'm like, oh, far out. Everyone's going to be talking about this and I'm...going to be sitting here, completely stealth, no one knowing ... I don't give myself 3 weeks.

You could start hearing comments, 'She used to be a male'. ... then I heard a girl make a lady boy comment, and this woman was also Thai. I just swung around, and I cracked it. I was like, 'What the fuck did you just say? Get outside', and I'd known this girl for 2 and a half weeks. I was like, 'Not that it's any of your business, but for the last 2 and a half weeks, the way you've been talking about this person being trans, I am, too', and she was like, 'Oh my God', and I was like, 'What you have said is so unbelievably offensive and I would not out myself, apart from the fact that I've told you to stop three times, and you don't care enough'.

Nat's ability to be recognised as a cisgender male, to be "read completely as male and not as a trans male" allows him an insider/outsider positionality that privileges

an insight into how people “really treat trans people”. Nat sees how the notion of cisnormativity operates as an exclusionary tactic; those who consider themselves to be cisnormative abuse and discriminate against those seen as outside cisnormative strictures. Nat believes he has a wider perspective on how gender power relations work, not only between cis and transgender people, but also between members of the transgender community.

Introduction

Nat’s (30) life experience illuminates notions of cisnormative societal assumptions to do with gendered power and how bodies, gender expectations, and the allocation of power and authority are intertwined, and inter-active. This chapter, therefore, addresses the debate introduced in Chapter Two to do with the co-creator roles of bodies and culture in the organising frame of the gender order. Nat’s narrative demonstrates how when his body changed, so too did his social status and allocation of power. But transgender people scramble gender categories (Keegan, 2020c), and their unique positionalities ensure that this is not a straightforward transfer from female to male, or male to female identified. As such, how do they manage and make sense of the transitions of their bodies, associated gender expectations, social status, and access to power and authority through interactions with family members, friends, and workplace colleagues? And what are the wider societal implications for their negotiated understandings, self narratives or accords that challenge the dichotomous power dynamic inherent in the hierarchical gender order?

This chapter begins by examining how transgender participants' lived experience shows how the force of bodies and their associated binary gender expectations work in social interactions to anticipate behaviour and predict power dynamics and social standing. Transgender participants' "unique positionalities" (Keegan, 2020c, 389) of living lives recognised as men and women make them acutely aware of the problematic nature of gendered power that privileges one side of the binary while disadvantaging the other side (Beasley, 1999; Connell, 2002; Messerschmidt, 2018; Pease, 2019). In order to live aligned lives within the cisnormative gender order, and with the knowledge of the problematic nature of the gendered power differential, transgender people such as Nat (30) negotiate a personal reconciliation, "self-representation" (Riggs, 2013, 66) or accord involving compromises between their values, life experience, circumstance, and societal pressure.

Next, I move to explore how for the transgender person, changes to social status and power and the associated share of benefits or disadvantages are not a straightforward calculation based on oppositional points on a binary axis; in the case of transgender men from not having power to asserting power and, in the case of transgender women from having power to being denied it. Transgender people's "unique positionalities" (Keegan, 2020c, 389) result in the allocation of power being more complex, multi-dimensional, and sometimes contradictory as transgender people take up multiple locations on multiple hierarchies. Nat's (30) narrative illuminates complex changing negotiations dependent on variables such as the body, sexuality, gender identity and expression, physical attributes, socio-economic class, opportunity, and recognition by others. Nat's and other participants' observations and negotiations reveal much about

this process and the intricate workings of gendered power relations in the wider social world.

Finally, I explore transgender people's agency managing the tensions that result from their everyday interactions in which the mutability of transgender embodiment and identities combines with their own beliefs and convictions and those held by other social actors. I detail five such tensions and examine how participants construct often complex and sometimes contradictory self-narratives or individual accords to make sense of the gender power differential made obvious through their on-going negotiations with other social actors.

Bodies and Expectations

In this section, I explore gender expectations and how the enactment of these in social interactions produce outcomes that reiterate the gender power differential. One gender expectation is that men are more capable than women and, as males grow from boys to men, they learn necessary skills that support this expectation (Pease, 2019). Anderson et al. (2013) explores children's development in matrilinear and patrilinear societies to find that in patriarchal societies boys are encouraged to venture forth, expecting to be successful and rewarded, and that this behaviour follows through to adulthood. The expectation of capability and the taking of risk supports what Schwalbe (2014) calls the "ideological conceit of men" (2014, 55) and Connell (1987/2003) includes in her conceptualisation of hegemonic masculinity as an "ideology of supremacy" (1987/2003, 83). Nat (30) became aware of the gendered omission in his education when his father-in-law offered to help him do handy-man jobs about his new house and had to teach Nat basic building and repair skills.

I think it's so hard to grasp, because there's such a mixture between what you put on yourself because of what you've learnt from society. Every trans man is like, well, I've got to learn how to do this because men do that, and it's like, why didn't you learn that when you were identifying as a woman? Makes no difference.

Nat wonders why he was not taught such life skills when he was female bodied. He notes that now he is recognised as male-bodied he, and he believes other transgender men, adhere to the expectation that men must be proficient at handy-man chores.

The expectation of capability works to feed self-confidence, which in turn encourages more men, compared to women, to attempt challenges for which they may not have experience or qualifications (Anderson, et al., 2013; Pease, 2019; Schwalbe, 2014). Post-transition, Graham (30) says he notices the expectation of automatic capability when “men would start asking me for advice” and adds that this never happened before in his life as a woman. Transgender men participants observe that this unqualified expectation works as a reinforcing feed-back loop, and Graham says that post-transition he participates in this loop and he both “vibes off” and gives his support back to other men. Pease (2019) argues that such “intra-psychic processes that give meaning to men” shape men’s sense of themselves and embeds “psychological patriarchy” into men’s subjectivities and identities (2019, 108), a notion Nicholas and Agius (2018) conceptualise as masculinism. The outcome of this process means that since being read as a man, Graham feels “more sort of prideful, that I should feel pride in myself. I get that vibe from people”. Pease and Ridgeway (1993) contend that the encouragement men receive to fulfil gendered expectations of capability and the rewards they accumulate as a result act to reinforce their sense of confidence.

Conversely, Moi (2001) and Young (1990) find that avoidance of risk taking, and lack of opportunity reduce women’s self-confidence. In line with cisnormative notions of

oppositional conceptual pairs based on what Beasley (1998) refers to as the “hierarchy of the dualism man/woman” (1999, 8), the antithesis of the expectation that men are capable is the expectation that women are not (Beasley, 1999; Ridgeway, 1993; Vescio et al., 2005). As such, transgender women participants are confronted with reduced appreciation of their skills when they transition. Cora (55), for example, believes that while she does not suffer from a gender power imbalance in the workplace, now she is in female form she is aware of a reduction in respect and regard from her male work colleagues when discussing highly technical IT issues. Attempting to process this confusing and contradictory allocation of respect in the workplace, Cora acknowledges that colleagues who know of her transgender identity and had worked with her in her pre-transition life as a man had held her IT capability in high regard. Now she presents as a woman, such respect is automatically denied her. Demonstrating what Connell (2009) refers to as the “force of the social processes” (2009, 108) and the association of male bodies with capability, Cora’s female form triggers a seemingly automatic response and resort to gendered norms that negate or reduce her colleagues’ previously high opinion of her advanced technical ability.

The gendered division of labour into highly feminised and masculinised industries and occupations is a major factor in the gender wage gap in Australia, which currently sits at 14%¹¹. In line with other studies that have examined experiences of transgender women and men in the workplace, including pay discrepancies (C. Connell, 2010; Hines, 2010; Schilt, 2010; Schilt and Westbrook, 2009; Schilt and Wiswall, 2008), Nat (30) compares two events that demonstrate the widespread practice of pay

¹¹ Australian Government, Workplace Gender Equality Agency, 2020. <https://www.wgea.gov.au>

inequality. The first event was when he was in female form and asked the boss for a pay increase.

When I was a female. This happened in a previous job, where I've gone, 'I want a pay rise', and he's gone, 'Why?' And I'm like, 'Because I deserve it because of ... here's my 10, 30 reasons', and he'd be like, 'No, you're maxed out'.

Nat's boss denied his request, ignored Nat's reasons for that request, and turned the responsibility for the denial onto Nat, implying that he had reached his maximum pay level for that job done by a woman.

In contrast, the second event happened post-transition and very soon after starting work for a new company. Nat was offered an unsolicited and unexpected pay increase.

In the role I'm in, from a base wage perspective, I pretty much wouldn't get a pay rise and I wasn't expecting one, and they're like, 'Here you go'. I'm like, interesting, and the first thing I thought was, I wonder if this is because I'm male ... And I even thought it was interesting that my first thought was, is this because I'm male? Because I do often think. ... Am I treated as just a general heterosexual, cis, white male? I'm like, well, I'm not, because they know I'm trans as well.

By way of explanation, Nat adds, "this is how society is built, honestly". Nat's (30) and Cora's (55) experiences reveal, as previous transgender workplace studies have done, that knowledge of the transgender identity of the person does not over-ride associations of capability with those recognised as male bodied and lack of capability with those recognised as female bodied (Levitt and Ippolito, 2014; Schilt and Connell, 2007). The automatic attribution of gender expectations to bodies is entrenched in Cora's workmates to the point where it overrides the knowledge of her previous life as a man.

Nat (30) recalls a second incident to do with pay inequality, when he was a member of a gender diversity panel at an industry conference. Nat was asked what workplace differences he has experienced pre- and post-transition.

They asked me, 'What's a positive?' And I said, 'It's not a positive overall for any company, but I'm paid more'. I've taken the same role as a female manager and I was paid an extra four grand, and she'd already been in the role for 2 years.

Remembering the shock of the mostly female audience at his revelation, Nat believes these women felt that he should have made a stand for equal pay by rescinding the extra remuneration he received.

When I said I was paid more, everyone's mouth opened, and I was like, 'Hold on. Do you expect me now as a human being to go, no, no, take that 20% back, or take that 10% back?' Everyone was angry, but if all men do put their hands up and go, 'I'll give 10% or the difference back', CEOs aren't then just going to just go, 'Oh, no, it's okay, we'll pay the women more.' Everyone just takes a pay cut.

Although Nat wants equality, he does not believe he will "ever live in an equal age, even when I'm 60 or 70. I'd like to think I would. I think it is slowly starting to be recognised, but gender pay parity is still worlds away". Nat reasons that pay inequality is structured into employment contracts and is therefore impossible to alter with a positive attitude towards gender equality demonstrated through the power of individual protest.

The issue of gender pay disparity is not always a case of a wage differential, it can be because of a lack of promotion and career development. Nat says the company he currently works for was rated one of the best companies in Australia for gender diversity and equal pay, and Nat and a woman he knows from his previous employment started work there at the same time and for the same starting salary. Despite boasting pay parity, however, Nat notices that few women in this male

dominated industry have been promoted to senior positions, thereby keeping women's career prospects and income on a lower level than that for men.

I look at the office and I go, there's not very many female managers here. You might be paying them the same, but you're not putting them in positions of power, necessarily. They'll drop one or two women in [senior roles] because they've got to, but it's a very male-dominated industry in general. But it doesn't have to be, and that's a problem, and when people talk about male-dominated industries, they talk about that because there are so many men in there that there is no room for change.

What Nat observes is a common occurrence in Australian business and according to the Australian Government Workplace Gender Equality Agency 2019/2020 report, women make up 50.2% of the private sector workforce but only 31.5% of key management positions¹². Nat's experience, and these figures, indicate that while the need for equal pay is accepted in some businesses, women are not considered for promotion. This lack of consideration is due to many factors, including an assumption that all young women will want to take time off to have and care for children, and unconscious bias based on the assumption that they are not as capable as men (Baird et al., 2018).

Previous studies have explored transgender women's experiences of such gendered discrimination when they are employed in the workplace (Connell, 2010; Schilt, 2010; Schilt and Connell, 2007). My 2016 study finds that transgender women who are searching for employment following their transition face discrimination at the initial hiring stage (Kelly, 2016). Kara (45), Cora (55), and Lena (83) transitioned while continuing to work in their respective companies. These transgender women did not suffer a reduction in their wage or discrimination in career promotion, however, other transgender women who changed jobs report difficulty in securing paid

¹² Australian Government, Workplace Gender Equality Agency, 2020. <https://www.wgea.gov.au>

employment post-transition. Juliette (39), for example, unsuccessfully applied for 78 jobs despite her impressive credentials and 20 years of experience. Finally, she got a job at a small family-run organisation, although with a starting salary 20% lower than she had been paid in her previous, pre-transition, employment.

Janice (66) has a similar story. After 12 months of disappointment, she volunteered at a lesbian, gay, bi-sexual, transgender (LGBT) organisation. This unpaid position enabled her to extend her network with people and organisations that are LGBT friendly and enhance her resume, which finally led to paid employment. Jacinta (55) was unemployed at the time of our meeting and had been so for approximately 8 years. Although Jacinta lacks a secondary school education, she is self-taught and skilled at agriculture and auto mechanics. Following her transition, she secured work in the transport industry, but a workplace disagreement led to her dismissal, and she has been unsuccessful in finding a suitable job since. Discrimination against transgender women seeking employment was a major theme threading through the transgender women's narratives in my 2016 research project and in this study, in contrast with the experiences of transgender men participants. Transgender women suffer employment discrimination not only because of gendered assumptions and unconscious bias applied to female bodies, but also when they are recognised as transgender women (Dietert and Dentice, 2009).

Conversely, all the transgender men participants notice that post-transition their opinions carry more weight, are taken more seriously by both men and women, and that when they give voice to their thoughts people pay more attention than when they were in female form. Marlow (28) says that "being a man gives you a platform to be

heard”, and Seth (63) feels he has more “credibility” and notices that he is listened to, and that people take more notice of what he says. The difference in attention paid by others is so marked that all the transgender men participants comment on how strange and disconcertingly unfamiliar it felt for them when they first experienced being listened to with such regard. As with participants in studies by Rubin (2003) and Schilt (2010), transgender men participants in this study acknowledge the cultural norm that insists men’s opinions are valued and men are given a platform to voice them.

The prevalence of this cultural norm is witnessed by transgender participants in different conversational patterns. Participants’ observations are in line with studies by linguists such as Jane (2016), who explores gendered speech pattern techniques to find that in mixed gender conversation, men “maintain their dominant status” (2016, 3). One linguistic practice to ensure dominance is the use of filler pauses such as *um* and *ah* as place holders, thereby stopping others from entering the conversation. Conversely, Jane contends that women use filler pauses to support the speaker, thereby conforming to their “traditional role as the listener and supporter” (2016, 5). The outcome of the use of such techniques is that men talk more than women, and while both men and women interrupt women, men interrupt women more (Rubin, 2014). Scholars Bahirao and Sonune (2020), Cannon et al. (2019), Handcock and Rubin (2015) and Knowles (2019) examine learned gendered patterns of speech and conclude that they reinforce men’s dominance and entitlement to be heard in the public square, while normalising the silencing of women and their invisibility in the public domain.

Over a lifetime, many women accumulate these inhibiting effects and are trained to doubt and limit themselves. Lena (83) thinks that women come to “just accept, ‘Oh, this is the way it is’, the men will talk amongst themselves, and they’ll tell us when and what to do”. Lena describes her understanding of the socialisation of women that encourages subservience:

There are a lot of women who are a lot stronger than the males around them. But even so, the dead hand of society has been laid on them and taught them that they are inferior, or their religion has taught them that they are unclean if they have been menstruating. All sorts of ways in which men have taken more than their fair share of [power] in society.

When living as a man, Lena witnessed many incidences, some obvious and others subtle, of women being demeaned in the workplace. As a senior manager in her institution, such treatment motivated Lena to advance women’s careers. But Lena became frustrated at the lack of ambition exhibited by some of her female work colleagues. Later in this chapter, I return to transgender women participants’ reactions to their observations of women being diminished.

Having first-hand, pre-transition experience of being silenced and observing how insecurity manifests because of such diminishing treatment, transgender men participants in this study are sensitive to the way women self-censor. Anthony (35) recognises that when he lived as a woman he felt especially inhibited when he needed to criticise men.

I’m not sure whether I would feel as confident as a woman before I transitioned to call men out. ... Doing it post transition, ... you get a really different response ... It’s like being told off by a ‘bro’ rather than some woman telling you off. ... I think I’m really conscious that I can be saying exactly the same things that I would have said when I was moving through the world in a female body to now, and they will be received by men in a really different way.

Anthony's pre-transition feelings of hesitancy to censure certain men in his social environment, coupled with his general observation of men's resentment at being reprimanded by women, demonstrate how not only women's contributions but also their issues and concerns are often dismissed by men as lacking in authority and gravitas (Baker, 2018).

The expectation is that men are capable, and the privileging of their voices and opinions often results in a sense of entitlement for men to dominate the public domain (Pease, 2019; Utt, 2015). Moi (2005) and Young (1990) argue that women often fulfil the opposing expectation, retreating from the public sphere, taking up less space and limiting their motility and comportment. Jason (35) talks about men's sense of entitlement to public space and the subsequent threat some men emit as they police the borders of their domain. To accommodate this domination in public space, Jason sees that some women are intimidated into minimising the amount of public space they inhabit:

I've had situations where I've been walking down the street and a woman would be walking towards me, and she'll cross the road and continue down the street because it's an empty street and I'm a man and I'm walking on the same side as her. She'll cross the road to avoid me. I don't know if that's exactly a privilege ... if 5 years ago [as a woman] I had been walking on the same street, she wouldn't have changed.

The taking of power by men and the giving up of power by women is witnessed throughout the history of the separation of the public and private spheres, the division of labour and the subsequent domination of the public domain by men (Bennett, 2006). Recent history and the rise of feminist movements has challenged the oppression of women and promoted women's rights issues. Nonetheless, and despite the appearance of more women in public life, the notion that the public domain is the

rightful place for men as the domestic sphere and caring for others is for women persists. This is evident in the high proportion of women who left the workforce to attend to their children's home learning education during Covid lockdowns (Wood et al., 2021).

As discussed in Chapter Six, gender expectations as outlined above are embodied, and Moi (2005) and Young (1990) contend that such gendered habits are imprinted in bodies. Utt (2015) argues that the habitual nature of such imprinting is normalised, thereby rendering it invisible and resulting in some transgender women and men being unaware that they carry these bodily habits. For example, Graham (30) notices the marked difference between the sense of entitlement to public space displayed by transgender women versus transgender men and suggests that this is due to their pre-transition social embodiment.

It's interesting when you get trans men and trans women together in a room. I'm not trying to over generalise, this doesn't happen all the time of course, but sometimes I observe the behaviour of groups of trans women and behaviour of trans men when they're in the same space. I can sometimes see people's socialisation, the way they were socialised and how that makes them take up space. Sometimes I'm like, 'Oh these trans women are really just taking up all of the space in here'. And they don't know, and it's not something they're conscious of, it's just how they were socialised and how the trans guys, they were all socialised to be quiet and be polite.

Graham's observation of some transgender women's unconscious domination of space highlights the practice of gendered embodiment, what Connell (2009) refers to as the "depth of embodiment" (2009, 108). Jason (35) makes a similar observation of transgender women and men at a social gathering and buffet lunch where people waited in line to get their food. He sees transgender women "who are used to privilege and [now] don't have it" automatically maintain their pre-transition sense of space control. He adds that for transgender men like him, we "will stand back from

the line” and defer to the people who are expecting and demanding to be at the head of the line. Jason adds that “to be at the lunch, and to watch these people who are so conflicted in their hierarchy, it shows”. Jason holds cisnormative, hierarchical gender role beliefs, and for him, these transgender women display a mismatch of characteristics coded masculine and feminine.

As this analysis demonstrates, gender norms and expectations are embodied and enacted in social interactions to regulate behaviour and predict gendered power dynamics and social standing. Such expectations have social consequences such as men’s domination of public space and discourse, and the widespread silencing of women, accompanied by discrimination, abuse, and pay inequality in the workplace. And while transgender men and women object to the gender power differential, their aim is to emulate those gender characteristics deemed normatively male or female so as to be recognised and accepted by others.

Personal Power

In this section, I explore how transgender participants negotiate the expectation and the implications for their changed social status and exercise of personal power and social status. Power is allocated according to a complex calculation of locations on multiple and intersecting hierarchies; however, overall, transgender women participants notice a reduction in the expectation that they are entitled to exercise power and transgender men experience an increase in the assumption that they are entitled to power. Nat (30) states, “From an authority point, I suppose I have [authority] more so as a male now. From a family perspective, I’ll very much stand my ground more now”. Aware that he is “read as male everywhere”,

Nat notices that his father has more regard for him because his father only respects males. Also, Nat is aware that his mother defers to him as the authority figure in the household because his mother has a high regard for masculine authority. Orion (26) offers another example. Recognised as a man he notices, “You are expected to be more powerful and have more authority, like have more authority in your persona than you have as a woman. You’ve got to come off more assertive like, and strict in a way.” All the transgender men participants echo Orion’s and Nat’s awareness of being expected to act and rewarded for acting in an authoritative manner.

Power, like identity, is a group project, and as Orion’s (26) and Nat’s (30) experiences show, it is not sufficient for one to assert power, the command must be interpreted as such by others for the exercise of power to be effective. Goffman (1959) theorised the interrelationship of power, hierarchy, and status in everyday life and argues that human interactions depend on how others read and interpret certain actions. Men and women mostly interpret others’ actions and responses according to understandings of cisnormativity and interactions between men and women that recreate and reinforce gendered power differentials in everyday life (Connell, 2002; Ridgeway and Smith-Lovin, 1999). The reception a person receives from others, whether that person is deemed to have authority, and therefore gravitas, depends in part on recognition as female or male bodied and within the masculine category, whether the body aspires to hyper masculinity or not. Within the boundaries of this gender framework, male bodies are expected to exercise power and authority, but female bodies are not and are censured if they do. Graham (30) attests to such censure and explains that his attempts to assert power were met with derision when he was in female form. Now he presents as a man, Graham says the difference in reception from others is stark, and “Me doing

a powerful act or saying something powerful or acting with authority or acting decisively is just generally more accepted”. With every positive reception transgender men participants receive when they demonstrate power and authority, they report a corresponding increase in their self-confidence. The legitimisation of “masculinity to maleness and to power and domination” (Halberstam, 1998, 2) is managed via complex social structures and practices that largely ignore female masculinities and give greater legitimacy to male bodied masculinities. Such legitimation protects masculine social privilege and superiority and unequal access to resources.

Transgender men in this study describe the ways they learn to embody the power and authority that had been denied them when they were in female form. To better explain this notion, I offer a conversation between two participants who are in a long-term relationship. Juliette (39) is a transgender woman, and her partner Jason (35) is a transgender man.

Jason: I don’t think I actually get male privilege because I don’t think I take it up. I think if I was a little bit pushier and a little bit more assertive, I’m sure I could grab a hold of it.

Juliette: It is there if you want it, and I think that’s the thing.

Jason: Yeah, but I don’t think I specifically as a person take it. But it is interesting to watch.

Juliette: It’s there to take.

Juliette, having grown up as male bodied and with the expectation that males exercise power, coaches Jason that in male form, power is now his inheritance. This sense of entitlement is accompanied by the privilege and power reflected by on-lookers when observing male bodies (Nordmarken, 2017). The assumption that certain forms of power are there for the taking by those who are male bodied, however, is difficult for Jason to comprehend due to his pre-transition life as a female.

As transgender men participants learn how to benefit from their improved power status, they negotiate the holding and wielding of authority. Unlike Jason (35), who is uncertain about taking power, Graham (30), Nat (30), and Anthony (35) say they are comfortable using the power they have acquired as men. Anthony explains that now he is recognised by others as a cisnormative man and sees how gender inequality operates, he takes advantage of his power to get things done more efficiently. He is aware of using his new-found masculine authority when he “wants to move through the world in a way that is beneficial to me, make money, get things done that I need to get done the quickest and easiest way possible”. To illustrate the phenomenon, Graham describes a recent incident when he and his partner went to a restaurant. His partner has food allergies and together they decided that her dietary needs would be met with the least fuss if Graham discussed them with the waiter. Graham insists that their experience has demonstrated that a directive from a man is more likely to be adhered to but more likely to be questioned or minimised if his female partner were to make the same request.

I mean if we're at a restaurant and there's something that needs doing at the table, like something that's going to cause a problem, dietary requirement that's going to cause a problem or they seem a bit 'attitudie' or whatever. She knows that if I go in there, it's going to get sorted quicker sometimes, depending on who the person is. So, we just tag team it, I'll be like, 'All right, I'm going to brave this one for us', and I'll go and do it and it is sorted.

Gender expectations that regard men as capable embolden Graham and the other transgender men participants to exercise power and authority as they believe their behaviour will be met with acknowledgement and respect. Both Graham and his partner do not agree with this power imbalance, but just as there is censure for non-compliance with gender norms, there is a payoff or reward for complying. For the sake of getting their needs met in this moment, Graham and his partner conform with

gender expectations and Graham takes the lead in discussing the special diet requirements with the waiter.

Juliette (39) describes gendered responses when comparing her experience as both a man and a woman working as a senior technical manager in a male dominated industry. Having to deal with assertive and sometimes aggressive men in this industry Juliette believes gives “you a little bit of backbone, a little bit of confidence that you have to find. If you haven’t got it, you’ve got to find it, or you will get eaten alive”. Even so, once Juliette transitioned and secured a position with a new company, she believes that her opinions, which may have once been valued when she presented as a man, are largely dismissed now that she is in female form.

Nine out of 10 times, historically [as a man], I would’ve gotten a fantastic response. Probably since transition, only five out of 10. ... A good skill I have is big picture ... I can weigh it all very quickly and put solutions on the table on the spot. But, sometimes, I think that the all-male management within the industry found that a little too threatening.

Such censure inhibits some women, and they become hesitant to voice their opinions and concerns and, over time, such diminution of women’s agency reinforces the gender power differential (Beard, 2017).

To illustrate how the process of inhibition works, Juliette (39) relays the story of a baby elephant in Thailand:

They say the little baby elephant has a tiny rope tied around its leg and then it’s tied to a tree. It can’t break the rope, so it basically spends its life, when it has finished its working day, tied to the tree. As a grown elephant, they still have that same little rope around it. Now, the elephant could walk away and snap that rope but because it believes that it can’t snap the rope, it’ll never snap the rope. This story is a great example of what a lot of women are taught, not even verbally, obviously, but just by the actions of their parents and their surrounding that the female should make those choices. That I do have to give up my wants and my wishes because now I have children, because that’s what

is expected of me and it's the right thing to do. I'm not supposed to have my wants anymore.

Juliette's story implies that it is the early socialisation of women, just like the early training of the baby elephant, that makes some women accept their lower social status and resist any attempt to "snap the rope" of oppression. Her understanding omits the fact of on-going social interactions that have the effect of the frequent suppression and censorship of women who do exercise self-determination and power because these attributes are seen as being reserved for male bodied beings (Halberstam 1998).

Changing historical and socially contextual perceptions of cisnormativity, as discussed in Chapter Four, influence binary notions of gender and effect the configuration of multiple gender and sexuality hierarchies and the subsequent allocation of power. In 1987, Connell conceptualised the gender power dynamic as hegemonic masculinity, with hyper masculine males at the apex of the gender hierarchy and as subordinate counterpart, the feminine ideal of "emphasised femininity" (1987/2003, 183). In response to Connell and Messerschmitt's (2005) call for further research into femininities, Schippers (2007) developed a theoretical framework that includes the intersection of other inequalities such as class, race, and ethnicity, and identifies multiple configurations of masculinities and femininities and how multiple hierarchical femininities are "central to male dominant gender relations" (2007, 85). McCann (2020) drawing on theories of femininity—for example, emphasised, hegemonic, cisnormative, patriarchal, and pariah femininities—offers the notion of "rigid femininities" (2020, 1) to explain how different types of femininities are utilised through cisnormative attachments that maintain "inflexible ideas about gender" (2020, 2) thereby reinforcing "a 'toxic' gendered system" (2020, 12). An

example of multiple femininities used in this way is the conceptualisation of female masculinities, which Halberstam (1998) sees as troubling the cisnormative relational gender power differential in the sense that female masculinities are thought of not as a legitimate option but as a “maladjustment” (1998, 9) to cisnormative assumptions of the allocation of power and authority according to the binary gender system. A further example of multiple femininities are those termed “new femininities”, which valorise attributes deemed masculine (assertiveness, control, and achievement) combined with cisnormative attributes ascribed to women (vulnerability and dependence) to produce what Budgeon (2014) names a capable but “reassuringly feminine woman” (2014, 317). In turn, these integrated hybrid gender identifications are then incorporated, normalised, and institutionalised within the hierarchical gender order (Schippers, 2007).

Embodying the notion of new femininities, Kara (45), while holding a senior position and wielding immense corporate power in an international company, says she believes that women’s power is in their vulnerability and that it is through appearing defenceless that they get their needs met. Similarly, Jacinta (55), Jason (35), and Graham (30) consider the perceived powerlessness and vulnerability of women to be the source of their power. Graham, for example, thinks “women command authority by being vulnerable” as they draw on “femininity as a means of power”. He believes “women flex authority and power in a different way than men do, so the relationship is different” and contrary to the notion that men are dominant, “being feminine is very powerful”. Vulnerability as a legitimate way for women to express power is consistent with heterosocial and homosocial cultures’ notions of the association of only masculinity with power and authority (Halberstam, 1998). All participants

interpret women's power as different from men's power and see that attempts by the feminine to obtain power deemed to be associated with the masculine are disciplined, explained away as misidentification, or incorporated into the cultural norm by transposing the actions to be more in line with normatively feminine attributes, such as vulnerability. Kara, Jacinta, Jason, and Graham's insistence on women's power being their vulnerability is founded on cisnormative associations of women as subordinate to the greater power associated with masculinity and male bodies.

Connell (2002), Messerschmidt (2018), and Pease (2019) argue that masculine hierarchies are centred around the notion that male bodied beings are dominant, and locations on the hierarchy of multiple masculinities are determined via an intricate matrix of domination that operates as an interlocking system of oppression, actioned through domains of power—structural, hegemonic, disciplinary, and interpersonal—and involving the intersections of race, gender, sexuality, and class. This competition is further complicated by the fear of being perceived as effeminate or homosexual (Pease, 2019). All the transgender men in this study offer experiences of navigating the complexity of the hierarchies of masculinities. These participants come to realise that their recognition as men by others varies according to their location on the intersection of hierarchies and that this recognition is historically and socially contextual and, therefore, tenuous.

Transgender men participants describe their attempts to understand the competitive nature of masculinities in their various social or workplace locations. Jason (35), for example, describes the male hierarchy in his workplace:

There is always an alpha male, and you can see which one it is. It's a competition. It's quite interesting to watch three or four guys in a setting,

because one will always find the alpha male position, and usually that is the person who is the loudest, who is the greatest.

Nat (30) would like to fit in with the hyper masculine, muscled group of men at his workplace, but knows he never will be accepted. He explains his understanding of how society operates:

Ours is a society where men don't cry, and you're weak if you cry. All those kind of things I think come from obviously some guy at some point thinking, well, we've got to be like this. You can't do X, Y, and Z. I think part of me, sometimes, even with my team now, they're all pretty good-looking, buff-ish kind of guys. I'm the smallest little dude on the team, and I plod about, but I look at them sometimes, and I'm like, I'd love to fit in with you guys. You guys aren't bad people. I listen to some of your conversation, I'll have a bit of a laugh with you, whatever, but I'm definitely not part of your crew. You're not part of mine. We are from different worlds, but I'm also a very adaptable person, too, and I don't know whether they really see that. I think they've just walked in and they're like, oh, the trans guy. That's the trans dude, and that's one thing I hate. I'm like, fine, if you know that about me, I don't care, but don't refer me to me as that guy.

Jason's and Nat's standpoints offer insights into how these diverse hierarchies operate for them as transgender men, a standpoint Humphrey (2007) defines as "journeying between different life-worlds" (2007, 11). Aware that they are recognised as men by others some or most of the time, and are therefore competing directly in the hierarchy, Jason and Nat acknowledge that as transgender men, they are not entirely of the hierarchy and their acceptance is conditional.

Prior to transition, and when living as men, the transgender women in this study recall varied experiences of hierarchical masculinities. As discussed earlier in this chapter, and in my 2016 study, some transgender women adhered to the hyper masculine ideal and benefited from the allocation of power and authority. Janice (66) says these transgender women go from the most exalted position in society to the lowest. Others, such as Kara (45) believe that in her pre-transition life, and despite her elevated socio-economic status, she was relegated to lower levels on the hyper masculine hierarchy

because of her feminine appearance and disinterest in sport. From this standpoint, Kara offers valuable insight, explaining that as a senior executive in her company she interacts with “a lot of high achieving alpha males”. These men, according to Connell (1995/2005), are examples of the hyper masculine males at the apex of the gender hierarchy.

Kara (45) compares her sense of intimidation when interacting with these types of men when pre-transition she was recognised as an effeminate male.

These were the sorts of men that I was so terrified of when living as a male.... I wasn't blokey enough ... they are very uncomfortable around effeminate males. Their masculinity is so core I think to their identity and who they are that they really aren't very good at dealing with anyone that doesn't have that ... if you can't talk about sport and have a beer and do all that sort of stuff, you're just not a male. ... The more masculine, the more intimidating for me. ... Certainly, in my late teens and the beginning of my working life.

Now, 24 years post-transition and living and being recognised by others as a normatively feminine woman, Kara notes that these same men, confident in their high-power roles, continue to be dismissive of effeminate men but are among the strongest supporters of women in business.

Now, it's the blokiest of blokes that are in many ways more tender around the women in an organisation ... I think they're so confident in their own ability that we're not really deemed a threat ... It's just one of my observations in life that the people I would have been most scared of 20 years ago are the people who are the kindest and gentlest now.

Kara's reflection highlights the complexity of masculine and feminine hierarchies. As Kara moved location from effeminate male to normatively female, her relationship with hyper masculine males changed from being treated with disdain to being treated with kindness and support. The different treatment received from those at the apex of the hierarchy indicate an intention to control borders.

As participants such as Kara (45) proceed through the transition process, and subsequent changes to their social location on multiple and simultaneous hierarchies, they report a changing relationship with power and describe complex and sometimes contradictory experiences of privilege and disadvantage. For example, and in line with Halberstam's (1998) argument that power and authority are not the sole possession of male bodies, Nat (30) says he had authority when he identified and was recognised as a butch lesbian.

I think, from a personality point of view, not from a gender point of view, I've always been quite strong-willed, so... I've never been afraid, really, regardless of any gender, to look at the power of authority and stand up. This was probably, to be honest, more as I identified as a woman, I think because I knew I carried a lesbian and butch image. As far as women were perceived, I felt like I probably wasn't maybe as stood up to or refuted or rebutted against, more so because of that.

Post-transition, however, Nat is read "as a small, gay, little kind of gay boy". He says people's comments about how young and effeminate he looks do not so much "demasculinise" him, but they do have the effect of diminishing his sense of power. Nat's post-transition experience demonstrates that transition is not a linear change of location along a binary axis but involves evolving and complex inter- and intra-personal negotiations while moving about and occupying multiple locations on multiple hierarchies.

In sum, participants' narratives expose the contextual, relational, and embodied aspects of personal power. As participants change their bodies, they become aware of their changing social locations and the associated allocation of power and authority. These experiences illuminate a complex, sometimes contradictory, context specific system of social relations, bodies, identity, and power. In this way, bodies and culture work as co-creators in reinforcing the hierarchical gender order.

Power Differential

I now turn to explore participants' specific dealings with the allocation and exercise of power and how as they transition, transgender people are confronted with the real consequences of the cisnormative assumption that men take power and women give up power. Janice (66) summarises this learning curve and realisation:

Twenty-five years of going through a huge learning curve about gender, and power, and what is misogyny, ... having lived for 40 years identified as a male in society, with all the white male, white heterosexual male, with all the privilege that comes with that ... you are going from the peak ... from the absolute peak of power in society to pretty well the bottom.

Janice says that the loss of the structural social edifice supporting the gender power imbalance, "all that social structure keeping you there" is palpable in transgender women's reactions. The social structure Janice refers to is the nub of male power and privilege, and Connell (2002), Messerschmidt (2018) and Pease (2019) argue that the association of power, authority, and domination with masculinity and male bodies is ingrained in social relations, structures, and institutions, thereby ensuring the concomitant advantages that accrue to men as a group. The shock these transgender participants experience when they acknowledge these hitherto unrecognised benefits attests to the opacity of the system of gendered power, especially for the people who inhabit its apex (Kimmel, 2016; Kimmel and Ferber, 2017).

Some transgender women participants consciously rail against the limiting of expression deemed appropriate for women, and Lena (83), Janice (66), Maia (63), Ione (57), and Adelia (37) refuse to adopt these gender norms and will not countenance silencing. Lena says that in business she has

encountered situations where people have tried to talk over me or disregard my thoughts, or reproduce my thoughts as their own, and I don't stand for it ... I say, 'I just said that', if it is something that I have just said. Or, if I'm interrupted, I'll say, 'Just a moment, I was talking'.

These participants' refusal to be ignored or dismissed reflect the encouragement to be outspoken in their development from child to adult. Pre-transition, when recognised as male bodied, they learnt that their opinions were valuable and of consequence. Post-transition, Maia (63) senses that people's reactions to her, and their confusion about how to treat her, neither as a man or a woman, are due to her continued projection of an entitlement to power, and her masculine sounding voice.

The power stuff was weird, because I'm never quite sure whether where I stand with people and how I deal with people and how they react to me is about sort of vestigial male privilege that I've somehow managed to carry over.

Maia's acknowledgement of her carry over sense of authority and the confusion this creates for others when expressed through her female embodiment highlights what Halberstam (1998) argues is the coercive force of the cisnormative assumption that only male bodies are entitled to power.

In the first section of this chapter, I discuss how the gendered allocation of power is not a straightforward calculation for the "unique positionalities" of transgender people as their bodies and gender and sexual identities do not "map neatly onto the operations of power" (Keegan, 2020c, 389). This dichotomy is evidenced in my conversations with young transgender men participants. Here, I sense a personal struggle between their need to be 'read' and accepted as men and their observations of negative and damaging aspects of some elements of the hyper masculine ideal. Each of the transgender men participants negotiate context specific ways of managing this struggle. In certain situations, for example, for reasons of personal safety, a

transgender man may decide to enact the hyper masculine ideal. In other situations, they may negotiate a more nuanced relationship between personal values and the masculine ideal. For example, Marlow (28) is a thoughtful and caring young transgender man, and he says he is proud of his sensitivity even though he recognises that his family and particularly his brothers and stepfather are confused by what they see as a misalignment of gentleness with masculine embodiment. His sensitivity and emotionally expressive nature put him at odds with the specific context of hypermasculinity and working-class practices evident within his family home. Marlow says he “has a very different outlook than my family does and I’m happy being sensitive and emotional, and I am happy actually expressing that because if I don’t, I think I would be sick still”. Such a disconnect, however, resulted in him feeling like an outsider. He went travelling and volunteered for a charity, and made friends with likeminded emotionally open, thoughtful, and caring young men. For the first time in his life, Marlow connected with young men who were living a life free to be themselves, devoid of the strictures of the hyper masculine ideal. Marlow’s struggle points to the difficulty not only transgender men but many young men experience in finding their place within the social confines of cisnormative expectations.

Transgender Accords

Transgender participants’ agency is demonstrated through the social interactions they undertake, and the individual negotiated understandings, “self-representations” (Riggs, 2013, 66) or accords they strike between their personal values, life experience, circumstance, and societal pressure. Experiences of bodies through transition means that each transgender person must mediate a considered

relationship between changing bodies, cisnormative expectations and the benefits or disadvantages that accrue to these. Such mediations mean that individual pacts or accords may appear contradictory, paradoxical, and inconsistent as transgender people work to dovetail the mutability of their bodies and personal life experience with the imposed social order and changing perceptions of normativity as exercised via family, friends, and workplace colleagues. In the following segment, I examine five tensions that emerge from issues raised in participants' narratives and discussed by them as needing resolution. I explore how participants negotiate these resolutions, "self-representations" (Riggs, 2013, 66) or individual accords in their attempts to make sense of and incorporate these ever-changing scenarios. The tensions are as follows: i) heterosexual and same-sex marriage. Nat (30) navigates his parents' preferencing of heterosexual marriage enacting the traditions associated with heterosexual marriage; ii) gender roles and (iii) pay inequity. While Nat enjoys the workplace benefits that accrue to him now he is recognised as a man, he navigates his unease and the distress at what he knows to be unfair advantages, iv) domestic violence and (v) sexual assault. Nat does not critique the social system that enables his father's violence, but rather blames his father as an individual who has abused his socially exalted position.

Heterosexual/Same-Sex Marriage

An example of the dovetailing of transgender life experience and heteronormativity is seen in the paradox that opens this chapter. Nat (30) describes his need to ask his future father-in-law for his daughter's hand in marriage. His traditional views when considering heterosexual marriage would not have held for Nat if he had remained a butch lesbian marrying his lesbian partner. Nat is at ease with holding these two opposing views, a set of behaviours for a heterosexual

marriage and a completely different set of behaviours for a same-sex marriage. Also, Nat believes that his family would not have given his same-sex marriage the same credence as his heterosexual marriage.

If I was a female getting married, particularly to another female ... I don't think my parents would have probably taken that marriage as seriously as if I was male. They're still very conservative ... They're not against gay marriage, but I don't think they necessarily would have looked at that, if I was getting married as a female, and taken it as seriously.

The accord or self narrative Nat has struck with his opposing views on heterosexual versus same-sex marriage and the traditions surrounding them helps him reconcile his parents' notion that while they do not object to same-sex marriage, for them, heterosexual marriage holds precedence over same-sex marriage. Nat's adoption of heterosexual marriage traditions, such as formally asking for his father-in-law's permission to marry his daughter, and referring to his partner as his fiancée, reference the higher value his parents place on heterosexual marriage.

Gender Roles

Juliette (39) and Jason (35) are transgender life-partners, and both hold traditional views about marriage and gender roles. Juliette was in a heterosexual marriage with a cis gender woman before transitioning and partnering with Jason who, before transitioning and then meeting Juliette, was in a lesbian relationship. Their experience of living together and sharing domestic chores has meant that they have had to renegotiate their belief in traditional domestic gender roles as the reality of each other's abilities became obvious. For the first 6 months of them living together, Jason and Juliette strove to adhere to cisnormative gender roles. Jason did all the outdoor chores, such as mowing the lawn and repairs and maintenance, while Juliette kept the inside of the house and did the cooking. After 6 months, they realised

that this traditional gender role arrangement was not working, and they renegotiated a job-sharing program that better suited their individual skills. Juliette and Jason are at ease with the self narrative they have struck between their traditional gender role views and the reality of their re-negotiated domestic roles, even as one contradicts the other.

Despite their re-negotiated domestic arrangements, Jason maintains that men dominate the public sphere, “the world side of things” and women hold power in the domestic sphere.

You look at the world side of things, the whole alpha male, someone’s got to be in charge. I kind of feel sorry for men because ... they are not in charge at home. I’m sorry but being female from watching relationships and having so many female friends who have husbands and have had a successful life ... they are in charge.... all women know how to get what it is that they want... the majority of women have more power over their specific men than the other way. I don’t think that most men are actually in charge of their wife or their female partner. I don’t think it actually works that way. I think, put a group of men together, they are going to fight for it [i.e., to take control, to be in charge]. Whereas you put a couple and most of the time the man is going to respond to the woman and give her what she wants.

Jason holds to his traditional belief in the gendered division of labour even as their life contradicts this arrangement. He is aware of the negative repercussions of the gendered division of labour and is sympathetic to Juliette’s gender discrimination difficulties in the workplace. Juliette does not question Jason’s traditional beliefs, and Jason and Juliette manage to hold the tension of these opposing ideas despite the evidence their lived realities expose. Jason’s firm belief demonstrates the powerful force of the social process of cisnormativity.

Pay Inequality

An outcome of the division of labour and separate domains for men and women—public for men and domestic for women—is the hierarchical system that values one at the expense of the other (Baker, 2018). Earlier in this chapter, I discuss Nat's (30) post-transition experience of being paid more than women, and while he wrestles with the unfairness of such a system and wishes for pay parity, he does not believe that individual acts of protest such as him giving up his promotion and pay rise will advance equal pay. Nat reaches a compromise between his own values and the incidences of gender inequality he observes by not challenging or seeking to change society, but rather by living within society's bounds while also, on occasion, speaking out in defence of marginalised individuals.

Violence

Nat (30) identifies the system of power imbalance in his family that is captured in the notion of *paterfamilias*, meaning the automatic acceptance of the male as head of the household. Nat holds firm to beliefs such as the man is the head of the household and is granted an exalted position in society. When this position is abused, as in the case of Nat's father physically assaulting his wife, rather than considering the cultural and structural arrangements that add to gender inequality that in some cases leads to domestic violence, Nat considers this behaviour to be a sign of his father's personal weakness, an individual failing and not a systemic one. The social structures that inflate the social standing of men and diminish that of women include the division of labour, opportunity and pay inequality, and the financial dependence of some women. Nat reconciles the conflict between his trauma of witnessing and experiencing family violence perpetrated by his father and the cisnormative ideal by accusing his father of abusing the privilege bestowed on him by society. Domestic

violence is a problem negatively impacting all society, both the victim, the perpetrator, children, family, and friends.

#MeToo, Sexual Assault

The structured gender power imbalance and the association of masculinity with power, dominance, and aggression, and femininity with powerlessness and vulnerability, as discussed earlier in this chapter, mean that some men and a small number of women involve themselves in predatory sexual behaviour in the workplace (Garrett, 2011). This behaviour continues to be institutionalised, sequestered, and protected by social structures, and excused and enabled by complicit accomplices. One recent and highly publicised example is the powerful support systems that for decades enabled and protected Harvey Weinstein from prosecution (Kantor and Twohey, 2017). This labyrinthine structure of privilege, entitlement, money, hegemonic masculinity, and influence worked to hide exposure by the women who had been victims of Weinstein's assaults. As Kantor and Twohey (2017, 2019) and Farrow (2019) make clear, such systemic abuse of women is not about sexual gratification, it is about the exploitation of unfettered power. In response to the media coverage surrounding the prosecution of Weinstein, in America, in 2020, the journal *Australian Feminist Studies*, dedicated a special section in volume 35 (105) to examining how the #MeToo movement had reverberated within "institutions, practices and discourses" within Australia (Black et al., 2020, 239).

At the time of the final six interviews for this study, such media coverage about the #MeToo movement was intense, and Jacinta (55) and Lena (83) were keen to offer

their opinions. Jacinta, in her mid-fifties, had transitioned when she was 35. Living and working on a farm, she was socially isolated, and in the tortuous years before her decision to transition she retreated completely from social contact. Her awareness of social movements, particularly feminisms, therefore, is limited, and it is from this standpoint that Jacinta makes the following observation of the Harvey Weinstein case.

I've got absolutely no time for sexual assault and mistreatment of women ... but I can't help thinking that some of these women who have come out 30 years later against Harvey Weinstein, why didn't they speak up at the time. I know why they didn't ... it would have ended their career. They were happy to put up with it for the sake of their career and then come out years later.

Jacinta's opinion does not take into consideration the power imbalance, often gendered, that is structured into most institutions and workplaces and particularly the entertainment industry. Such an imbalance and associated discrimination and abuse make women's career advancement particularly difficult, hard won, and tenuous. These women's success or not is dependent on the favours of the men who have been allocated power by these institutions. While the #MeToo movement has given a platform for the voices of individual women, it has yet to prosecute the institutions that allocate power to people who go on to abuse their position (McCann, 2018).

Lena too thinks that "Weinstein is a pig" and that he "deserves everything that he gets", but like Jacinta (55), her assessment ignores the powerful institutions that enabled his criminal behaviour. It is his personal power that Lena objects to as she rejects any notion that the allocation of power is gendered and will not concede that social structure is foundational to the allocation of disproportionate power. Lena transitioned in her fifties and in her pre-transition life held a senior position in a tertiary education institution. She insists she has always promoted gender equality in the workplace and has not experienced gender discrimination herself.

I have always recognised that there will be power structures, and sometimes these are necessary in order to achieve what has to be achieved. I don't think I have allowed it to affect me since I transitioned from male to female, and I don't think anyone should. I see no reason why power should depend on one's gender. It's just pointless to imagine that there is a connection.

Lena's age, life experience, and late transition culminate in her refusal to countenance the notion of structured gender inequality. As mentioned earlier, in her pre-transition life, Lena recognised individual incidences of discrimination against women in the workplace and attempted to stop these acts in the department she headed. Throughout Lena's life, she has taken individual responsibility for herself and those in her immediate environment. Pre-transition, in her workplace, she worked hard to advance her career and since transitioning has transformed herself and her life course. Lena's focus on individual responsibility means that she does not want to recognise structural gendered power imbalances nor see what Kimmel (2016) describes as the invisibility of privilege to those who have it.

Chapter Conclusion

In this chapter, I explored how transgender people's lived experience shows the force of embodiment and highlights how bodies and culture in the form of embodied gender expectations work together to anticipate behaviour and predict power dynamics in social interactions. Transgender people's lived experiences inform the debate introduced in Chapter Two, that of the agency of bodies and their co-creator roles in the organising frame of the gender order, as changes to bodies not only affect the transgender person's sense of a coherent self but also the reactions of other social actors in on-going social interactions.

My study reveals that transgender people exercise agency in managing these social interactions by negotiating “self-representations” (Riggs, 2013, 66) or individual accords to make sense of their changing social locations and associated power and authority. Transgender people’s transition involves evolving and complex inter- and intra-personal negotiations while occupying multiple locations on multiple hierarchies and, as such, their individual accords may appear contradictory to expectations that rely on stable identities. Transgender people’s “unique positionalities” (Keegan, 2020c, 389) have them effectively scramble fixed gender categories. Maintaining multiple locations on multiple hierarchies, as transgender people do, contravenes the dichotomous power dynamic inherent in the gender order (Connell, 2002). Therefore, as illuminated in this chapter, the nuanced lived realities of transgender people and the movement of identities through complex and on-going social interactions open up new ways of considering models of gender identity and gendered power.

Chapter Nine

Conclusion

My objective has been to interrogate the complex interplay between changing bodies, gender expectations, identities, and inter- and intra-relations evident in 18 transgender participant's life stories. I have explored what this interplay reveals about identities, bodies and culture, historically and socially contextual changing perceptions of cisnormativity, transgender people's understanding of themselves in their social worlds, and the implications of these insights for wider society. To make sense of the interplay of on-going relational choices, the transgender people in this research negotiate individual internal understandings, "self-representations" (Riggs, 2013, 66) or accords. Drawing on participants' experiences, prioritising their standpoints, respecting their language and terminology, and analysing how they develop and navigate individual accords illuminates and informs the key concepts that have been central to the three debates that exist in the field. In sum, these key concepts are as follows: i) transgender identities and lived experience, ii) some transgender people's commitment to a knowable gender identity, and iii) transgender people's experience of the relationship between bodies and culture.

This study's findings show that transgender participants demonstrate resilience and agency when navigating a hostile world. Their lived realities are embodied, complex, contextual, and nuanced, and through their existence and constant negotiations of bodies, culture, gender identity, and interactions with other social actors, they contribute to transformations in a gender order that on the surface appears to be rigid.

While some participants in this study use binary language and describe static identities, their narratives reveal identity as negotiation and movement, thereby presenting a challenge to theoretical binary conceptualisations of gender such as cisnormative versus genderqueer, culture versus bodies, cis versus trans, and gender identity as fluid versus a commitment to a knowable sense of gender identity, whether this be “heart felt” (Cora, 55) or self-determined (Nagoshi et. al, 2010). The next section briefly summarises the findings for each of the chapters Chapter Four to Chapter Eight, and addresses the concerns raised in this thesis by answering the research questions posed in Chapter One, the introduction. This summary is then followed by a discussion of the study’s findings as they relate to key themes and concepts as discussed in Chapter Two, engaging with the literature, and concludes with the contribution the thesis offers this field of study.

In Chapter Four, I examined how gender norms and the associated expectations of behaviour and presentation are enforced by family and friends as children grow to adulthood. The perceptions and practices of living to ideal masculinity and femininity is thus a group construction which is dependent on and varies across time and place and is imposed through pressure and coercion. One of the foregoing concerns of the research was to answer the question as to how transgender people navigate everyday interactions with other social actors and institutions and if these interactions are different based on historical context and age. In Chapter Four, we see that in their family and friendship groups, transgender participants such as Lena (83) must continually negotiate her interactions with other social actors, balancing their quest to live in alignment with their knowable gender identity and their need for connection and acceptance from those who make up their social environment. In this process,

Lena demonstrates how she simultaneously challenges and emulates cisnormative assumptions, which she recognises are themselves changing due to historical and social context.

In Chapter Five, I addressed the second half of the first research question to do with how transgender people navigate interactions with institutions. Participants' experiences demonstrate how cisnormativity is embedded and reified in powerful institutions such as the law and the medical profession. While these professions are progressing to be more understanding of transgender identities, they continue to impose a top-down approach to the relationship between the professional and the transgender patient or client. The law and medical institutions intersect policy and procedures, creating a web of compliance that makes it unnecessarily complicated and difficult for transgender people to navigate in order to get their needs met.

Practitioners who work in these institutions, on the most part, act as gatekeepers, and transgender people must negotiate this power imbalance by adjusting their personal presentation to adhere to transnormative expectations held by some doctors.

Transgender participants such as Kara (45) are more successful than others when interacting with the medical and legal professions due to their socio-economic background, education, professional standing, and ability to articulate their case for transition. The inconsistency in professional knowledge of transgender people's issues means that some transgender participants approach their interactions with the medical and legal professions as an opportunity for power and agency, educating professionals when they can, and maintaining an alternate power structure of community-based knowledge. When transnormativity is performed as a means to a

desired end, their conscious performance of gender expectations demonstrates resilience, creativity, and a commitment to navigating these powerful structures.

Chapter Six explored how the experiences of transgender participants in this study make explicit the powerful process in which bodies and culture are co-creators in determining how the expression of the knowable sense of gender identity is interpreted and recognised by self and others. By doing so, this chapter addresses the research question to do with transgender people's social interactions and what they reveal about the role of bodies and culture in the actualisation of gender identities. The material body is understood by transgender participants as having a form of agency, and bodies are the site of contention when the body does not align with cisnormative expectations, such as at puberty, when the body is seen as a traitor to the knowable sense of gender identity. The transgender person reinstates their agency over their body when they align it with their knowable sense of gender identity.

Bodies are not independent entities but are embedded with cultural meaning and significance in the form of gender expectations, and this process is highlighted when transgender people alter their bodies. In interactions with other social actors, transgender people must negotiate the complexities of gender norms and societal expectations that are ingrained in bodies. Transgender participants' narratives illuminate how bodies and culture interact and work together as co-creators in how one perceives oneself and is perceived by others. Transition brings to light the process of gendered becoming as the transgender person consciously embodies cultural practices in line with their knowable gender identity they know themselves to be so as to be recognised by self and others.

In Chapter Seven, I investigated the research question to do with how transgender men and women negotiate the actualisation and affirmation of their gender and sexual identities through social interactions. My study found that the process of recognition is a relational process that continues from early life and through transitioning. This finding, that of pre-transition and post-transition “passing”, highlights the ways that transgender people must constantly and continually negotiate gender norms and expectations regardless of what body they are in. A second related finding is that transition has two interdependent dimensions, that of self-recognition and recognition by others. In childhood, participants talk of camouflaging their “heart felt” (Cora, 55) sense of self or socially isolating themselves. Older participants who transitioned later in life extended such camouflaging into their adult life, often marrying and having children, and they describe the increasing intensity of the life-or-death decision to transition. The transgender participants in this study are committed to a sense of a knowable gender identity. These participants say that they know who they are, and to have this gender identity confirmed to themselves and recognised by other social actors they believe they must look and behave in a certain historically contextual transnormative manner. The stakes are high for transgender people wanting to be recognised as cisnormative and be recognised by others: other recognition is rewarded with social acceptance and misrecognition is punished with rejection.

Lived experience of being gender diverse reveals binary, hierarchical gender expectations in culture, and, in Chapter Eight, I explored how transgender participants become aware of the force of embodiment in this process and the problematic nature of gendered power. Transgender people navigate evolving and complex inter- and

intra-personal negotiations while occupying multiple social locations. In order to live aligned lives within the cisnormative gender order they reconcile their experiences of gender inequality. To make sense of the compromises and series of on-going choices needed for such reconciliation, transgender participants negotiate individual understandings or accords between their needs, personal values, life experience, circumstances, and societal pressure.

Key Themes and Concepts

In this section, I return to some of the key themes introduced in Chapter Two, and discuss the implications of my findings in relation to these themes. In sum, these themes are cisnormativity, a knowable sense of gender identity, and the relationship of bodies and culture.

Cisnormativity

My study reveals the unstable and contingent nature of the notion of cisnormativity as perceptions of what constitutes cisnormativity are historically constructed and socially contextual. Such changing perceptions are evident in the greater recognition of gender diversity in recent decades, particularly since the early 21st century, which include expanded recognitions of gender identity on official documentation such as birth certificates, and an increase in trans-centred medical support. These changing perceptions of gender are evident in the contrast between the life stories of older transgender participants and their younger counterparts: the former group faced greater misunderstanding about and discrimination against them for their gender identities while the latter group, although suffering discrimination, have access to more information, support, and improved social acceptance.

My study found that while progress has been made in legal recognition and by the medical profession, that progress has been implemented incrementally and inconsistently. Further, the extent of the recognition and support available to transgender people can depend on time and place, as well as on the particular individuals they deal with in government, legal, and medical fields regardless of the law or medical ethics/principles. Recognition is also reliant on the transgender person's socio-economic background and ability to convince others of their need to transition. Such variability is testament to the socially contextual and interactional aspects of all gender relations. In order to navigate safely and achieve a life in which they can live wholly as themselves, the transgender people in this study have learned to be flexible in the ways that they express their gender identity in social interactions.

When negotiating such social interactions, transgender people's gender identities may appear both cisnormative *and* genderqueer in practice. They may appear to other social actors as normative in certain social situations in the sense of identifying with, performing the traits of, and being read as a binary male or female while, simultaneously, they may be read by other social actors as genderqueer as they explore their sexual identities, disconnecting gender identity from sexuality and refiguring the relationship between them. Transgender people may change how they identify over their life course, including shifting from binary to non-binary gender identification. They are always genderqueer, however, in the fact of their transness in the context of the "dominant narrative" (Braford and Syed, 2019, 306) of cisnormativity that is predicated on binary sex and gender. Thus, transgender people's "unique positionalities" (Keegan, 2020c, 389) demonstrate that transgender people's

identities cannot be reduced to an either/or. Transgender people's complex lived realities push back on Kate Bornstein's notion of binary-identified transgender people as "gender traitors" by demonstrating that all the transgender people in this study have lived as gender outlaws in different ways and at various times of their lives.

I argue that rather than viewed through a reductive binary of cisnormative or genderqueer, that the gender identities of the participants in this study can be better understood as on-going negotiations and agreements, both within the individual and between the individual and their social worlds. Their identities are constructed relationally and are characterised by movement. Following Pearse (2018), this movement can be either or both unresolved, and therefore fluid, or resolved when a transgender person is able to affirm and live their knowable gender identity. Turning the focus away from static notions of identity and to the movement of socially contextual practices, including the achievement of coherent identities within and alongside cismornativity provides a key to better understanding how cisnormativity is configured, and gender identities are formed. Following Drager's (2019) proposal that the study of transsexuality is a means for understanding cisnormativity and the function of gender expectations, and Chu's (2019) argument that transgender studies scholars must explore "what it means to be attached to a norm—by desire, by habit, by survival" (2019, 108), my study aims to add to and prompt further inquiry into cisnormative assumptions and expectations, how they function, and their involvement in the formation of identity.

Knowable Sense of Gender Identity

Transgender people in this study are committed to a knowable sense of gender identity even as they experience multiple, socially contextual identities in everyday social interactions. They navigate a delicate balance, maintaining the integrity of their sense of gender while conducting on-going negotiations with other social actors. These are high stakes negotiations for transgender people as recognition by others is rewarded with social acceptance, but with self-recognition comes a sense of cohesion. My study finds that transgender people's understanding of their knowable sense of gender identity not only drives their need to alter their bodies in a bid for alignment and cohesion, but it also maintains their sense of personal integrity in a world of uncertain responses from other social actors.

This project finds that transgender people's interpretation of their knowable sense of gender identity is filtered through a cultural sieve, giving rise to some participants' use of binary and static identity language and terminology to describe their experience. Transgender people's life stories, however, reveal relationality and movement as they negotiate changing bodies, a knowable gender identity, and their social interactions. This experience is not fully captured by conceptualisations of gender as entirely socially constructed or performative. Because of this, I join Bey (2021), Chu and Drager (2019), Fleischman (2019), and Keegan (2020c, 2020b) in calling for an inclusive understanding of all transgender people's experiences by admitting and confronting the messiness, complexity, and contrary notions of embodied gendered being. In this way, all transgender people's experiences are centred and can contribute to how we understand gender.

Bodies and Culture

Bodies and associated gender expectations are enlisted in the social organisation of the gender order and used to explain gendered power differentials (Connell, 2002; Fausto-Sterling, 2000). Personal power, like identity, is a group project, and changes to bodies are read by other social actors as indications of a change in social location and are accompanied by gendered expectations of that body's behaviour and exercise of power. For transgender people, however, their "unique positionalities" (Keegan 2020c, 389) make their relationship with gendered power more complex than proposed by some feminist and queer theory conceptualisations that rely on notions of M>F (male is greater than female) and/or M/F (male and female identities are formed through repeated performance) (Keegan, 2020c). This complexity is seen in transgender people's individual internally negotiated "self-representations" (Riggs, 2013, 66) or accords.

The individual accords negotiated by each transgender person to make sense of the social consequences of changes to their body illuminate the delicate balance between bodies and cultural significance. This study shows how transgender identities in transition must navigate the complex terrain of the interconnectedness and interaction of gender norms and expectations with bodies in which culture is not simply applied to bodies but integrated in them as gendered embodiment. Transgender people's "embodied knowledges" (Ellasante, 2020, 421) expose the workings of the interpolation of bodies and culture and provides the opportunity to further explore unique positionalities beyond binary applications such as male *or* female, transgender *or* cisgender, and transgender *or* not transgender enough.

This Study's Contribution

My study distinguishes between queer identification as a totemic symbol and genderqueer-as-practice as seen through the lived experience of transgender people whose practices defy binary notions of identification. Participants negotiate individual internal accords as a means of making sense of their ongoing social interactions, identifications, and practices. Foregrounding and exploring these “self-representations” (Riggs, 2013, 66) or accords expand our understanding from that of adhering to *or* challenging cisnormativity to a broader, contextual notion of queerness, moving it from a project of dismantling the cisnormative gender order to one of relational, contextual movement that is inclusive of cisnormative identification and practice. Such expansion builds on the work of transgender activists such as Bornstein (1994), Feinberg (1992), Stone (1987/1992) and Stryker (1994) who called for transgender people to resist the pull of cisnormativity, even as Feinberg included transsexuals in their conceptualisation of an inclusive transgender community, and Stone recognised the social force of cisnormativity. Participants’ experiences manifest Halberstam’s (1998) conceptualisation of the movement among multiple identities on multiple, simultaneous hierarchies. Transgender people do this while simultaneously negotiating with and adapting to cisnormative expectations as they try to manage their everyday lives. Participants’ daily practices show that their lives are an on-going series of choices, and that these calculations are negotiated through interactions with other social actors who are themselves negotiating choices within and alongside the gender system.

The contribution this study makes to scholarship is to prompt and to further a nuanced understanding of the complexity and diversity within the group of transgender people who sometimes adhere to cisnormative gender practices, and to call for a

reconceptualisation of the approach to studying transgender identity. By focusing on the lived realities of individual transgender people, this study follows Hines' (2006, 2010) call for queer sociology to re-focus from purely theoretical understandings of gender diversity to include the particularity or specificity of the daily practices of transgender people. The significance of a nuanced appreciation of the diverse lived realities of transgender people means that rather than current oppositional binary terms such as normative *or* queer, which Nicholas and Agius (2018) argue "always collapse into hierarchy" (2018, 226) of trans or not trans enough, my study is consistent with Nagoshi and Brzuzy, (2010), Pearse (2018) and Hines (2006) in highlighting the need to understand the relational movement of multiple identities. My thesis recognises that transgender participants' life narratives reveal identity to be continual negotiation, movement, a dance, while simultaneously demonstrating that such an understanding of transgender identity must respect some transgender people's commitment to an internal reference point, a knowable gender identity, and some transgender people's use of binary and static identity terminology to describe their life experience.

Future Research

Future research may explore intersectionality beyond that of age and socio-geographic locations which holds the attention of this study. My project's focus is clearly on the diversity of experience in a group of transgender people who largely identify as male or female. Therefore, when recruiting participants, a CALD (culturally and linguistically diverse) background was not a pre-requisite and only one of the 18 participants in this study is from a CALD background. By extending the recruitment criteria to include participants from CALD backgrounds, future studies

may build on the findings of this project and include chapters on the intersectionality of race, ethnicity, culture and language with gender, sexuality, as experienced and recorded in transgender life stories.

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Appendices

Appendix A – Ethics Approval

Office of the Deputy Vice-Chancellor (Research)

Research Services
Research Hub, Building C5C East Macquarie University
NSW 2109 Australia
T: +61 (2) 9850 4459 <http://www.research.mq.edu.au/>
ABN 90 952 801 237

14 February 2018

Dear Professor Reynolds **Reference No:** 5201700959

Title: *How do transgender women and transgender men experience and navigate male privilege, pre- and post-transition?*

Thank you for submitting the above application for ethical and scientific review. Macquarie University Human Research Ethics Committee (HREC (Human Sciences & Humanities)) considered your application.

I am pleased to advise that ethical and scientific approval has been granted for this project to be conducted by Ms Margaret Kelly under the supervision of Professor Robert Reynolds and Associate Professor Shirleene Robinson.

This research meets the requirements set out in the *National Statement on Ethical Conduct in Human Research* (2007 – Updated May 2015) (the *National Statement*).

Standard Conditions of Approval:

1. Continuing compliance with the requirements of the *National Statement*, which is available at the following website:

<http://www.nhmrc.gov.au/book/national-statement-ethical-conduct-human-research>

2. This approval is valid for five (5) years, subject to the submission of annual reports. Please submit your reports on the anniversary of the approval for this protocol.

3. All adverse events, including events which might affect the continued ethical and scientific acceptability of the project, must be reported to the HREC within 72 hours.

4. Proposed changes to the protocol and associated documents must be submitted to the Committee for approval before implementation.

It is the responsibility of the Chief investigator to retain a copy of all documentation related to this project and to forward a copy of this approval letter to all personnel listed on the project.

Should you have any queries regarding your project, please contact the Ethics Secretariat on 9850 4194 or by email ethics.secretariat@mq.edu.au

The HREC (Human Sciences and Humanities) Terms of Reference and Standard Operating Procedures are available from the Research Office website at:


http://www.research.mq.edu.au/for/researchers/how_to_obtain_ethics_approval/human_research_ethics

The HREC (Human Sciences and Humanities) wishes you every success in your research.
Yours sincerely

Dr Karolyn White

Director, Research Ethics & Integrity,
Chair, Human Research Ethics Committee (Human Sciences and Humanities)

This HREC is constituted and operates in accordance with the National Health and Medical Research Council's (NHMRC) *National Statement on Ethical Conduct in Human Research* (2007) and the *CPMP/ICH Note for Guidance on Good Clinical Practice*.



Appendix B – Information Letter

Department of Sociology
Faculty of Arts
MACQUARIE UNIVERSITY NSW 2109



Phone: +61 (02) 98507947

Email: rebecca.sheehan@mq.edu.au

Chief Supervisor's Name & Title: Dr Rebecca Sheehan

Participant Information Letter

Name of Project: Traversing gender: Transgender individuals' experiences and reflections on gender, power and authority.

You are invited to participate in a study of transgender individuals' experience of gender, power and authority. The purpose of the study is to investigate how transgender women and transgender men experience and reflect on gender, power and authority. The data collected from these one-on-one interviews will add to the bank of knowledge on gender, power and authority, and to the discourse on gender inequality. It will contribute to a better understanding of the behaviours and structures that support and enable discriminatory behaviour and gender inequality experienced by the LGBTIQ community and the wider community.

Margaret Kelly, a PhD research candidate, is conducting this study to meet the requirements of a PhD Postgraduate Degree, Macquarie University, Arts Faculty, Department of Sociology. The project is under the Supervision of, Dr Rebecca Sheehan, Program Director of Gender Studies, Department of Sociology, phone: 98507947, email: Rebecca.sheehan@mq.edu.au

If you decide to participate, the one-on-one interview will take from one-and-a-half to two hours, and will be recorded for the researcher's record only. You will be asked a number of questions, about twenty, and you may talk as freely and openly as you wish about your experiences. If at any time during the interview you do not want to answer certain questions or you want to have a break, or stop the interview, your wishes will be respected. It is important that you are comfortable during the interview and you will be asked to nominate a venue where you feel most at ease.

Any information or personal details gathered in the course of the study are confidential, except as required by law. The research is not concerned with collecting information on illegal activity and if the researcher senses that you may be about to reveal such activity, either as a perpetrator, victim or witness, she will temporarily suspend the interview and the recording.

Your privacy will be respected, your name changed, and your identity anonymised. No individual participant will be identified in any publication of the results, and only Margaret Kelly and supervisor will have access to the data. A summary of the results of the data will be made available to you and you can request this in electronic or printed form. As well, should you wish to have a copy of the complete thesis, it will be made available to you in electronic form.

Participation in this study is entirely voluntary: you are not obliged to participate and if you decide to participate, you are free to withdraw at any time without having to give a reason and without consequence. Once you have read this letter of information and have agreed to take part in this study, the researcher will record your approval, under your agreed anonymised name, in her journal. If you experience distress any time after the interview you may wish to contact ACON, www.acon.org.au. ACON offer confidential fee-based, short-term counselling for LGBTI people. Or, the Gender Centre, 95197599, where counselling services are offered free-of-charge to Gender Centre members, their family and friends. Other services are – ReachOut Australia at

au.reachout.com; Beyond Blue at beyondblue.org.au, 1300224636; and Lifeline at www.lifeline.org.au, 131114.

Researcher's Name: _____
(Block letters)

Researcher's Signature: _____ Date: _____

The ethical aspects of this study have been approved by the Macquarie University Human Research Ethics Committee. If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Committee through the Director, Research Ethics & Integrity (telephone (02) 9850 7854; email ethics@mq.edu.au). Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

Appendix C – Recruitment Email

Research Project Title:

Traversing gender: Transgender individuals' experiences and reflections on gender, power and authority.

This study aims to understand how transgender individuals experience and reflect on notions of power and authority. Particularly, I am interested in gaining an appreciation of peoples' relationship with power and authority when they lived as the gender they were assigned at birth, and as they live now, and how these two states compare.

The project involves one-and-a-half to two hours face-to-face interviews with people who identify as transgender—both transgender women and transgender men. All participants will be adult, aged 20 plus, and will have transitioned away from their birth assigned gender and be living as their self-identified gender for at least five years.

Participants' confidentiality will be assured at all times. I will record and transcribe the interviews, and both the recordings and the transcriptions will be stored in a secure locker and password protected computer and seen only by my two university supervisors and myself. Participants' identities will be anonymised, and their names changed, unless they wish otherwise. As well, the analysis of participant's responses will be conducted thematically. In other words, readers of the thesis will be unable to determine the identities of participants based on specific experiences, as is the case in case-study analysis.

It is important that people in this study feel comfortable talking about their experiences, and each participant will be asked to select a location for the interview where they feel at ease. I will travel to the location for the face-to-face interview.

The findings of this study will form the basis of a Macquarie University PhD thesis, and a summary will be provided to all participants—either in print or digital version. As well, should a participant request a complete copy of the thesis, this will be forwarded to them—print or digital version. The purpose of the thesis is to contribute new insights gained from transgender individuals to the conversation on discrimination and gender inequality, with the ultimate aim of reducing both.

Please contact me directly if you would like to ask me questions about this

project or if you would like to volunteer to be a participant in this study. email me at:

[REDACTED]

Thank you for your interest in this project. Kind regards,
Margaret Kelly

Appendix D - List of Interview Questions

Workplace

1. First, let us talk about your workplace. Are you working now? If yes, what is your job? Is it the same job as before you transitioned? If no, what job did you have?
2. If you got another job after transitioning, was this a difficult thing to do?
3. If you are working, could you please talk to me about your relationships with workmates and those in charge? I'm particularly interested in your experiences of increases or decreases in respect and regard.
4. How did any increases or decreases manifest in promotion, demotion, salary increase or decrease?
5. If you aren't working now, is this because of employment discrimination? Can you talk to me about this?

Friends

6. Do you have the same friends as when you were living as your assigned gender? Do you believe you relate to your friends, and they relate to you, in a different way now than when you lived as your assigned gender?

Significant Other

7. Do you have a significant other in your life—a husband, wife, partner or lover? If you feel comfortable, can you talk to me about your home life, and especially the power dynamic in the relationship? Has this dynamic changed?

Children

8. Do you have children? If you feel comfortable, can you describe the relationship you have with your children, and has this relationship changed?

Embodiment

9. Can you talk to me about embodiment and what it means to you?
10. Have you noticed differences in treatment or regard of your body by others?
11. How do you consider your social standing to be now as compared to when you lived as your assigned gender?
12. Considering your life experiences, do you believe you are now more sensitive to or more aware of differences in treatment because of gender? Can you talk to me about your thoughts on gender inequality and gendered power?

Power and Authority

13. In all aspects of your life and work, social, and personal—do you sense you had more authority when you lived as your assigned gender or do you feel that

you have more respect now? If you sense a difference, can you please describe examples of this difference? Why do you think this is?

14. Has your attitude to authority and power, and also the abuse of power, changed over the years? If yes, in what ways has it changed and why do you think this is?

15. As we close this interview, would you like to share further reflections and insights? Do you think I have missed an important issue? Are there any terms I have used that you would like me to change?

Thank you for your time and your honest and open reflections and insights, and I am grateful and respectful of the trust you have placed in me.

Appendix E – Demographic Table of Participants

<u>Anonymised</u> <u>Name</u>	<u>Age</u>	<u>Self-identified</u> <u>Gender</u>	<u>Location</u>
Seth	63	transman	regional/city
Jason	35	transman	city
Ansel	55	transman	regional/city
Anthony	35	transman	city
Orion	26	transman	city
Nat	30	transman	city
Marlow	28	transman	regional
Graham	30	transman	city
Ione	57	transwoman	city
Juliette	39	transwoman	city
Adelia	37	transwoman	regional
Cora	55	transwoman	city
Lena	83	transwoman	regional
Jacinta	55	transwoman	regional
Denie	60	transwoman	regional
Maia	63	transwoman	regional
Janice	66	transwoman	city
Kara	45	transwoman	city