




Creating gender: A thematic analysis of genderqueer narratives

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ABSTRACT

Background and Aims: Increasingly, research is emerging on the subjective experience of genderqueer people. This study explored how genderqueer identities are understood and managed in both personal and social domains.

Method: Interview data from 25 genderqueer-identified American adolescents and emerging adults, aged 15 to 26 ($M = 21.28$, $SD = 3.20$), were pulled from a larger study of 90 transgender and genderqueer participants. The 90-minute semi-structured interviews included questions about gender identity, the developmental pathway of participants, and relationships with others regarding gender.

Results: Participants described “genderqueer” as a sufficiently broad category to capture their diverse experiences, and descriptions of genderqueer identities were heterogeneous, directly contradicting binary understandings of gender identity. A thematic analysis of interview transcripts resulted in three themes: intrapsychic experience, descriptions of master narratives about gender identity, and the co-construction of identities.

Discussion: Participants described navigating a series of master and alternative narratives, such that all transgender people transgress a cisnormative master narrative, but genderqueer people further transgress normative understandings of a medicalized, binary transgender identity. The experience of co-creating identities was the process by which participants actively navigated constraints of the master narrative experience. Participants described the integral role of language in crafting new narratives to legitimize genderqueer experiences, as well as the subsequent intragroup conflict resulting from conflicting relationships to narratives in the transgender community. This study highlights genderqueer identities as a source of strength and positivity, and the importance of expanding beyond the hegemonic gender binary within research and clinical practice.

KEYWORDS

alternative narratives; genderqueer; identity development; master narratives; narrative identity; transgender

Constructing a personal identity, or a subjective and evolving story of how an individual came to be the person they are, is widely recognized as a crucial developmental task across the lifespan (McAdams, 2013). Increasingly, research is emerging on the identities and subjective experiences of transgender people (Bockting, 2014; Clark, Veale, Townsend, Frohard-Dourlent, & Saewyc, 2018; Devor, 2004; Levitt & Ippolito, 2014; Rimes, Goodship, Ussher, Baker, & West, 2018). However, the experiences of genderqueer individuals, who identify as neither solely male nor female, have been notably ignored in empirical research (Bilodeau, 2005). This omission is glaring, especially considering the prevalence of genderqueer individuals in the transgender community—29% of respondents to the 2015 United States Transgender Survey used the term “genderqueer” to describe their

gender identity (James et al., 2016). Additionally, genderqueer individuals experience higher levels of discrimination and resulting psychological distress than transgender individuals who identify within the gender binary (Hansbury, 2005; Herman, Harrison, & Grant, 2012; Rimes et al., 2018).

Theorists have argued against binary models of gender identity due to their failure to accommodate the diversity and fluidity of genderqueer identities (Bornstein, 1994; Nestle, Wilchins, & Howell, 2002; Roen, 2002). Muñoz (1999) describes genderqueer individuals as engaging in a process of “disidentification,” whereby they “neither opt to assimilate within the [gender binary] structure nor strictly oppose it” (p. 11). Instead, genderqueer people adopt strategies that allow them to more authentically express a nonbinary gender by redefining and broadening existing

hegemonic ideas about gender. Richards et al. (2016) documented a number of such strategies, including “stretching,” meaning increasing the flexibility of masculinity and femininity to encompass more varied expressions. Another such strategy is “diversifying gender,” representing the exploration of gender as a continuum wherein different “sex characteristics, subjective gender experiences, and expressions” can combine to create potentially infinite genders, rather than a dichotomization of only masculinity and femininity (Monro, 2007; Richards et al., 2016). Other strategies include negating sex differences with the goal of removing gender as a way of ordering society, and creating ambiguity by expressing gender in ways that are androgynous or that vary between masculinity and femininity over time, thereby resisting a fixed gender assignment (Richards et al., 2016). These strategies all share an attempt to deconstruct mutually exclusive categories of femininity and masculinity and create room for genderqueer people’s experiences to be accepted as valid and “natural” rather than deviant.

“Gender non-conformity” differs from genderqueer insofar as it is often used broadly to denote individuals whose identities or behaviors differ from the norms ascribed to their assigned sex (Wyss, 2004). Though genderqueer identities can be a means for individuals to distance themselves from conventional categories, roles, and expressions (McGuire, Doty, Catalpa, & Ola, 2016), many individuals who would not identify as genderqueer could be described as gender nonconforming. “Non-binary” is frequently used interchangeably with genderqueer (e.g., Richards et al., 2016); however, participants in this study used the word “genderqueer” to describe themselves, and thus “non-binary” will not be used.

Conceptual framework

Identity development involves the attainment of a sense of continuity across time and situation (Pasupathi, Mansour, & Brubaker, 2007), and has been associated with numerous important outcomes related to health and well-being (McAdams & McLean, 2013; Schwartz, Donnellan, Ravert, Luyckx, & Zamboanga, 2013). Erikson (1968) understood identity development as a deeply contextualized phenomenon characterized by dynamic interactions between individuals and societies. Though a substantial amount of research has examined individual processes implicated in identity development

(Meeus, 2011), comparatively little attention has been paid to the cultural context in which these processes occur (McLean et al., 2017). To address this, McLean and Syed (2015) developed the Master Narrative framework as an integrative model for studying identity development in context.

A master narrative is a cultural-shared story that informs beliefs, values, and behaviors, and guides the construction of individual life stories (Bamberg, 2004; Hammack, 2008; McLean & Syed, 2015). Master narratives are not stories of individual people’s lives, but templates that dictate the characteristics of legitimate identities. In other words, master narratives teach individuals which characteristics to adopt into their identities in order to be considered a “good” member of their culture (McLean & Syed, 2015). As such, identity development is understood as involving the processes of negotiation, or engagement between the self and society, and internalization, the adoption of aspects of the master narrative into personal life stories (McLean & Syed, 2015).

Aspects of master narratives are often problematic for marginalized groups. Part of identity development involves understanding one’s place in relation to larger groups (Erikson, 1968; McLean et al., 2017), but fundamental aspects of the lives of marginalized individuals deviate from the mandates of the dominant culture. Marginalized communities are thus saddled with the task of constructing alternative narratives, which may differ from or resist master narratives, in order to provide meaning and coherence to their collective experience (McLean & Syed, 2015). The process of developing marginalized identities can thus be understood as a dynamic negotiation between master and alternative narratives whereby individuals resist and internalize elements of both narratives in their personal identities.

Several researchers have applied the master narrative framework to the domain of sexual minority identity development. For instance, Cohler and Hammack (2007) identified two narratives that shape gay identity development; the first, dubbed the “narrative of struggle and success,” depicts gay youth as victims of violence, internalized homophobia, and mental health struggles who eventually find resilience through the cultural practices of the gay community. Conversely, the newer “narrative of emancipation” embraces sexual fluidity, normalizes the experience of sexual identity development, and underemphasizes the reliance

on rigid identity categories like “gay” or “lesbian.” Similarly, Hammack, Thompson, and Pilecki (2009) noted the deeply contextual nature of sexual identity development as fundamentally embedded within the familial and cultural contexts of sexual minority youths’ lives; gay identity development is understood as involving a process of narrative engagement whereby assumptions embedded in master narratives are resisted or internalized. However, though the developmental trajectories of sexual and gender identity are intricately linked (Diamond & Butterworth, 2008), the extent to which the specific narratives that shape sexual identity development also have bearing on gender identity development is unclear.

McLean, Shucard, and Syed (2017) applied the master narrative framework to the domain of gender identity development, which yielded descriptions of two alternative narratives – the “equality narrative,” where men and women were seen as the same, and the “should-be-equal narrative,” where structural inequalities between men and women are acknowledged. Results indicated that the less socially acceptable “should-be-equal” narrative was less likely to arise in dyadic interactions than post hoc interviews due to participants’ tendencies to avoid conflict and move toward agreement in actual discourse. This suggests that individuals may have fewer opportunities to engage with such narratives, and thus fewer opportunities to enact deviations from them, which in turn reinforces their rigidity. Findings highlight some of the mechanisms by which cultural beliefs about gender become deeply rooted yet are rarely acknowledged and remain invisible.

While significant, McLean et al. (2017) work did not take into account whether participants were cisgender or transgender, or explore the relationships between gender minorities and master and alternative narratives about gender, though it is likely that transgender and cisgender individuals relate differently to these narratives. Similarly, though previous research has demonstrated dynamic links between gender and sexual identity development, these developmental processes are dissociable and subject to unique influences (Diamond & Butterworth, 2008). As such, transgender individuals may face distinct narratives from those faced by their cisgender counterparts, such as transnormativity, which may only hold bearing on gender minorities. Transnormativity is a social framework by which transgender people’s experiences and identities

are held accountable based on a medicalized, binary framework (Johnson, 2016; Nicolazzo, 2016) and has been further conceptualized as a hegemonic alternative narrative guiding transgender identity development (Bradford, 2017). However, the specific role of transnormativity in shaping the process of genderqueer identity formation has not been examined within developmental literature. As such, additional research exploring the content, process, and context of genderqueer identity development is warranted. The goals of this study were to characterize the phenomenological experiences of a sample of genderqueer individuals, explore the descriptions of master and alternative narratives present in their discourse, and document the strategies these individuals employed in navigating these narrative constraints.

Method

Research team

The analytic and writing team consisted of seven members, ranging in professional level (one Associate Professor, two Assistant Professors, one Postdoctoral Fellow, two Graduate Students, and one Undergraduate Student). Additional intersectional identities included the following: two identified as White, cisgender, queer females, one identified as a White, cisgender lesbian, one identified as Asian American, queer, and genderqueer, one identified as White, queer, and genderqueer, one identified as a White, bisexual, non-binary person, and one identified as a White, heterosexual trans woman. The lead interviewers were two White, queer, cisgender females. A broad range of interviewers and coders have contributed to the project in a variety of ways, and represent many intersecting ethnic, gender, and sexual identities.

Participants

Participants in this study are a subsample drawn from a larger sample of 90 transgender participants from nine different cities in the United States, Canada, and Ireland (for full study sample description see McGuire et al., 2016). The current analytic sample consisted of 25 adolescents and emerging adults from five cities in the United States who identified themselves as genderqueer in their demographics or at some point during the interview. It is important to note that a genderqueer identity is not mutually exclusive to other identity

Table 1. Disaggregated sociodemographic variables of sample ($n = 25$).

Participant	Assigned sex	Age	Gender identity	Sexual orientation	Race
1	Female	24	Trans* or Queer	Undefined/ fluid	Other
2	Female	22	Queer, Male or Trans*	Gay	Latino/ Hispanic/ Mexican American
3	Male	24	Genderqueer or Transfem	Undefined/ fluid	White
4	Female	21	Female	Genderqueer	White
5	Female	22	Genderqueer/ Queer	Lesbian/ queer	White
6	Male	24	Genderqueer/ Gender Fuck/ Transsexual/ M-F	Undefined/ fluid	Other
7	Male	24	Genderless	Fluid	African American
8	Female	16	Genderqueer	Pansexual	White
9	Female	22	Genderqueer	Queer/ Gay	White
10	Female	21	Trans*/ Genderqueer	Queer	Native American
11	Female	22	Transgender/ Genderqueer	Gay	Latino/ Hispanic/ Mexican American
12	Female	26	Genderqueer/ Transmasculine	Queer	White
13	Female	17	Androgynous/ Genderqueer	Homosexual	White
14	Female	23	Transmasculine/ Genderqueer/ Man/ F-M	Queer	White
15	Female	25	Nongendered/ Trans*/ Genderqueer/ Other	Asexual	White
16	Female	15	Mostly Male	Mostly heterosexual	White
17	Female	19	Transweird/ Bear	Pansexual	White
18	Female	24	Genderqueer	Queer	White
19	Female	20	Transgender/ Genderqueer	Queer	White
20	Male	26	Genderqueer/ M-F	Bi	Pacific Islander/ Chinese/ Asian
21	Female	16	Trans*/ Genderqueer/ BRRL	Queer/ Gay/ Sometimes dyke	White
22	Female	22	Genderqueer	Queer	Other
23	Female	21	Genderqueer	Gay	White
24	Female	17	Genderqueer	Queer	Pacific Islander/ Chinese/ Asian
25	Female	19	Male/ Gender Fluid/ Gender Neutral	Bi	White

labels, such as male, female, transmasculine, and transfeminine (Bilodeau, 2005; Herman et al., 2012; Markman, 2011) and thus participants produced a diverse range of gender identity descriptors (Table 1). Consistent with previous studies focusing on genderqueer identity (e.g., Herman et al., 2012), the majority of participants in the current sample reported being assigned female at birth ($n = 21$, 84%). Participants ranged in age from 15 to 26 ($M = 21.28$, $SD = 3.20$). Participants reported diverse educational backgrounds and approximately two-thirds identified as White. When asked to identify sexual orientation and predominant attractions, participants provided 13 unique labels. Two participants declined to label themselves but gave information about predominant sexual attractions. Complete demographic information for the included sample can be found in Table 2.

Procedures

A semi-structured interview protocol was developed to cover a range of topics relevant to transgender adolescents and emerging adults including demographics, gender development, family and peer relationships, body image, religion, internalizing and externalizing risk behavior, sexual history, genderqueer community connection, and bullying. Only responses pertaining to genderqueer or nonbinary identity were included in the present analysis. The Institutional Review Board

of Washington State University approved the study and questionnaire prior to any data collection. Participants were recruited through in-person and online networks of sexual and gender minority-focused youth centers, as well as a study website. Youth centers providing at least weekly services catering to transgender youth were included in recruitment efforts. Researchers visited community centers for a three- to eight-day period to recruit and interview participants in local setting. Full board IRB approval was received to waive parental consent for minors who did not wish to notify parents of their desire to participate in an interview for transgender youth. Some participants responded by setting up interview times in advance through email or online communications, but the majority were recruited directly at weekly support group meetings or during center drop-in hours. Participants were paid 20 dollars for their time and insights.

Data analysis

A multi-stage standardized thematic analysis was used to code and interpret the interview following recommendations by Braun and Clark (2006). A research assistant transcribed the interview, and a second research assistant double-checked for transcription errors or misinterpretations of the dialog. Sections of the transcript pertaining to genderqueer identities

Table 2. Aggregated sociodemographic variables of sample ($n = 25$).

	Number	Percent (%)
Assigned Sex		
Female	21	84.0
Male	4	16.0
Current Gender		
Feminine	2	8.0
Masculine	3	12.0
Genderqueer	80	80.0
Age		
<21	7	28.0
21–23	10	40.0
>23	18	32.0
Parent's Education		
Some college	7	28.0
College degree	8	32.0
More than college degree	3	12.0
Other/unknown	7	28.0
Participant Education		
High school or less	10	40.0
Some college	8	32.0
College degree	6	24.0
Other/unknown	1	4.0
Race		
White	16	64.0
Black/African-American	1	4.0
Latinx/Hispanic	2	8.0
Native American	1	4.0
Asian/Pacific Islander	2	8.0
Other/multiple responses	3	12.0
Sexual Orientation		
Mostly heterosexual/straight	1	4.0
Gay or lesbian	6	24.0
Bisexual	2	8.0
Queer	9	36.0
Pansexual/fluid	6	24.0
Asexual	1	4.0

were then extracted and compiled into a single document, hereafter referred to as genderqueer content. Genderqueer content was defined to include narratives about not fitting into the gender binary, references to ways the gender binary is oppressive, and acts of challenging binary understandings of gender. Two researchers (the first and second authors) familiarized themselves with the genderqueer content, then identified initial “codes,” or identifiers of the most basic meaningful semantic elements of the data. Guided by inductive reasoning, codes were then sorted and grouped based on similarity, and similar codes were combined to form overarching “themes.” The entire research team met to review each preliminary theme based on internal homogeneity and external heterogeneity (Patton, 1990), as well as the extent to which the themes related to the data set as a whole. After reaching a consensus, the final themes were named and defined.

The first author and third author independently coded the entire genderqueer content, during which

units of text were sorted based on the final themes. Cohen's kappa was .86, which indicates very good inter-rater reliability according to Altman (1990). The first, second, and fourth author then extracted several illustrative quotes corresponding to each theme.

The attempt in this analysis is not to make generalizable statements about the prevalence of these phenomena among genderqueer individuals broadly; rather, our intent is to provide narrative exemplars of these phenomena as they arose unprompted in the semi-structured interview. As such, no conclusions can be meaningfully drawn from the prevalence of these themes within the data set and thus such frequencies are not included. We aim to reveal the existence of these phenomena rather than the frequency.

Results

Participant responses were analytically coded into three broad themes: (1) Intrapyschic Experiences, whereby participants described the internal or phenomenological aspects of being genderqueer; (2) Descriptions of Master Narratives, or explorations of the social landscapes that genderqueer people navigate; and (3) Co-Construction of Identities, including the actions and strategies employed by genderqueer people in responding to the narrative constraints of their social landscape.

Theme 1: Intrapyschic Experiences

Theme 1.1: Genderqueer Identity Development.

Participants discussed the processes of developing a genderqueer identity as well as changes in their identities over time. Participants often discussed the development of both gender identity and sexual identity, consistent with previous findings on the dynamic interplay between these developmental processes (Diamond & Butterworth, 2008). One participant (Male/Gender Fluid/Gender Neutral, White, age 19) described struggling to find an appropriate label for their sexual orientation, given that available sexual orientation labels are predicated upon a binary understanding of gender (i.e. “lesbian”):

“And so I often used ‘queer’ as a sexual orientation identity and then I identified as bisexual and then I identified as pansexual. I’ve often gone back to lesbian but then I decide that I don’t like words that make it so that I have to pick gender.”

Similarly, one participant (Trans*/Queer, Other race, age 24) described how their use of identity labels evolved over time:

“...As a kid, I figured out that it didn’t feel right, then lesbian, then uh, yeah then transgender, trying to figure things out.”

They went on to describe how, after reaching a stable transgender identity, the importance or relative significance of this identity in their life decreased over time:

“I think the entire, my entire story about gender as it is right now is just...focusing on who I am past gender...as more of a whole person.”

This same sentiment of decreasing genderqueer identity centrality was echoed by another participant (Queer/Male/Trans*, Latino/Hispanic/Mexican American, age 22):

“...It’s changed a lot over time, and I feel like... at this point it’s part of what happens with my gender and with my sex but it’s not nearly as important as it has been in the past... which is fine by me...”

Theme 1.2: Gender Fluidity. Many participants described their gender identity as fluid, or fluctuating over time. This phenomenon can be understood as distinct from the developmental process of identity formation, given that participants describe their gender fluidity as a stable, enduring, and consistent dimension of their gender identity rather than a transitional or developmental period. For example, one participant (Pangender/Gender fluid, Native American, age 21) described their gender identity as “pan-gendered,” stating:

“...My identity tends to cover a broad spectrum. ...I also identify as female-to-male depending on the day... As trans-man...I have a very fluid gender so pan-gendered is usually a safe bet.”

Importantly, participants experiencing a fluid gender identity described experiencing “being masculine” or “being feminine” in a different way as those who do not, given that their experiences of gender also intrinsically include recognition of their past and future gender being different than their current gender. For instance, one participant (Feminine/Genderqueer, White, age 21) described this aspect of gender fluidity by stating:

“Being genderqueer, you kind of understand both sides because you kind of are both sides... I mean I can act like a total dude and I can act like a big girl at the same time... I guess that’s better, because you know both sides. You can understand people better. But, I mean... I wouldn’t know what it’s like to be just like, ‘Yeah, I’m female’ or be like, ‘I’m a male’ and be okay with it. Or not think about being the other sex. Because I wouldn’t really know. I just know about being genderqueer.”

However, some participants viewed their own gender fluidity as stressful or upsetting. For example, when asked about the negatives of being genderqueer, one participant (Transweird/Bear, White, age 19) responded:

“The fact that I don’t know who I’m going to be on any given day... It’s like the weather forecast here, you can never really tell the forecast for nice weather in the middle of winter, it will end up snowing and freezing over for five days.”

This distress can be understood in terms of master narrative components which dictate that transgender identities ought to be stable, integrated, and unambiguous (Diamond & Butterworth, 2008). Given that the function of such narratives is to confer legitimacy to certain identities, the result of internalizing this expectation may lead an individual to doubt the legitimacy of their own transgender identity; this may further manifest as a sensation that one’s gender fluidity is chaotic, unnatural, or disturbing. In other words, internalizing the expectation that one’s identity ought to be stable may lead a fluid individual to view themselves as failing to be a “good” transgender person.

Theme 1.3: Diversity in Gender Transition. Participants described heterogeneous desires regarding gender transition, such that no singular transition trajectory was endorsed by all participants. This highlights the diversity of experiences, needs, and goals within the genderqueer community. For example, participants often described ambivalence or indifference towards medical transition, such as hormone therapy or surgical interventions. For instance, one participant (Female, White, age 21) described a vacillating desire for medical interventions in the past, which culminated in ambivalence at the time of the interview with some topics (e.g. testosterone) but a firm conviction with others (e.g. “sex change” [sic]):

“I did take [testosterone] for a while when I was young. Like... illegally. I got it off the streets, because in [city, redacted] you can pretty much get anything and everything you want. But after that, I decided that I didn’t want to change my body. I was just more so like... I guess I am still in the whole little thought process of it. But I know I don’t want to have a sex change [sic]. I know that.”

Another participant (Male/Gender fluid/Gender neutral, White, age 19) expressed a similar ambivalence towards medical interventions, with a desire for surgical interventions but not hormone therapy.

“And so one of the things that is currently on my plate and on my mind is mastectomy... And that idea which has been on my mind for a long time is really kind of exciting. And I could see myself doing that, I also really struggle with the idea of testosterone. I’ve wanted it and also not wanted it. I’m a singer, and I don’t want to lose my voice. And so that’s a hard one for me but there are so many days that I wished that I could have that sexy tenor voice or you know, and so at this point I choose not to make any steps forward cause I don’t want to regret any.”

Ambivalence was also described by another participant (Genderqueer/Queer, White, age 22), who was reluctant to take measures that would result in permanent changes to their body due to their experience of gender fluidity:

But see the problem is, I don’t want to do anything permanent. Like I don’t, I definitely don’t want to do surgery... I was considering, you know, getting some [testosterone]... but, I don’t know. I keep going back and forth on it. Maybe someday, but for now, I’m ok with it... ‘Cause I like going back and forth, you know, some days I’m really femme and some days I’m not. And you know, once you-you start doing hormones, it’s like, you can’t, I mean you could go back, but it’s-it’s like, it’s a more serious decision, and I’m happy with how it is right now, so.

Though this participant shares the experience of ambivalence with the previous participant, their aims and desires for gender transition differ greatly. Taken together, these quotes illustrate the highly individualized nature of gender transition, which may be particularly diverse for genderqueer individuals. Participants’ choices regarding medical transition represent the exertion of agency over their bodies and identities, which appears to be an important piece of their gender identity development. Participants shared that they found value in the opportunity to explore these different possibilities, even when

they discovered certain choices to be unsatisfactory. Kroger and Marcia (2011) noted that it is through such a process of experimentation, whereby an individual considers, accepts, and rejects various goals and values, that identity achievement can be obtained. While this may challenge models wherein gender is expected to be stable and predictable, having the agency to make decisions regarding one’s body and identity may be an integral component of genderqueer identity development.

Theme 2: Descriptions of Master Narratives

Theme 2.1: Transnormativity. The function of transnormativity is to structure identities in hierarchies of legitimacy, whereby some trans identities are seen as valid based on standards of medicalization (Johnson, 2016). Participants identified the role of transnormativity in shaping individual identity development, as well as collective processes such as intra-group dynamics. One participant (Male/Gender Fluid/Gender Neutral, White, age 19) described expectations of masculinity and medicalization placed onto them as a genderqueer person who was assigned female at birth:

“...It’s also really hard for me... because I feel as though in order to be trans... or in order to even be genderqueer, the expectation of a female-bodied genderqueer individual is that they are androgynous appearing, which more means to the aspect of male, masculine presenting. And I’ve done slam poetry on this, about how I want to tell you that my pronouns are male today and that I feel just fine wearing this dress, and I don’t want to get rid of my vagina cause as it turns out she still does good things for me. And I’m fine [with that], but people don’t want to have that conversation... because even among trans communities we want to have male and female, male identifying, male presenting and female presenting and female identifying. So it’s like there’s no place for me.

Similar sentiments were expressed by another participant (Queer/Male/Trans*, Latino/Hispanic/Mexican American, age 22), who described the divergent strategies employed by members of the transgender community in relating to transnormativity, such that standards of legitimacy are established based on proximity to or distance from transnormativity:

“I think that even, even within... trans communities and spaces I feel like there tends to be like this primacy given to cisgenders as... a thing that is either... to strive for or consciously... counter-identify oneself against, like my transgender is queer and better and cooler than that cisgender.”

The phrase “even within trans communities” demonstrates the ways that transnormative social pressures—that is, to “strive for” transgender identities which closely approximate cisgender ones—may be internalized and reinforced within the transgender community. This supports the claim that alternative narratives arise from master narratives, and thus can serve to unintentionally reinforce the very narratives from which they deviate (McLean et al., 2017). The construction of transnormativity, the utility of which is to legitimize certain transgender experiences, is described here as inadvertently centering cisgender norms and expectations.

Theme 2.2: Master Narratives and Interpersonal Relationships. Participants described the manifestations of these master narratives within interpersonal contexts. Some described interacting with people who had insufficient knowledge about genderqueer identities, which resulted in difficult interpersonal interactions. For instance, one participant (Genderqueer/Queer, White, age 22) described struggling to explain their identity to others who lacked the appropriate conceptual frameworks to be able to understand:

“People don’t get it. A lot of times they’re like, ‘So are you gay? Or are you trans? Are you dyke?’ I’m like, ‘Yes. On all of those.’ ...And also just explaining the whole like, I’m not male or female, but...in between. People have a problem with that. It’s like, they’re so used to the binary, like, ‘No, you know, obviously you have a vagina, you’re female.’”

Master narratives shape the available conceptual frameworks for individuals to understand their social worlds, as well as individuals’ understandings of what constitutes normal, acceptable, and valid identities. The individual cited above described their ability to be understood by others as contingent upon the extent of others’ negotiation with master narratives about gender identity. In other words, others must, to some extent, identify and question cisnormative master narratives to be able to interact with the participant in an affirming way. The same participant (Genderqueer/Queer, White, age 22) went on to describe the resulting frustrations from interactions with individuals who have not engaged master narratives to the same extent:

“...Explaining it sometimes is just frustrating. And sometimes I don’t want to explain it, like, I’m genderqueer, go

Google it, deal with it yourself, because I’ve been dealing with it.”

When describing their past selves, participants cited a similar lack of knowledge about genderqueer identities; in particular, participants described lacking the language to articulate their experiences of gender. The same participant from above (Genderqueer/Queer, White, age 22) described their initial apprehension about using the word “transgender”:

“At first um, all I knew was the word ‘transgender,’ and I knew that didn’t fit me because I don’t feel like I’m in the wrong body. I just feel like maybe society’s perceptions of my body are too limiting, if that makes sense? So it wasn’t that I feel like a male, but sometimes I am masculine.”

This sentiment can be understood as the participant comparing their experience of gender to the available narratives of transgender identity, and concluding that their identity was insufficiently similar to these narratives to constitute a valid transgender identity. However, they describe eventually arriving at a new definition of these words, and an accompanying mindset which externalizes the problem to that of society’s limited definitions.

Beyond the difficulties within interpersonal relationships, the stress of being misunderstood resulting from such master narrative deviations may have adverse consequences for the mental health and subjective well-being of genderqueer individuals, resulting in self-hate and self-harming behavior. One participant (Genderqueer, White, age 23) described how this strain contributed to them considering suicide:

“I think that... it’s extremely difficult for one body to... take on so much in a world that provides so little. Because I mean, I’ve been to the point, I think everyone... gets to [the point] when they start to, you know, self-hurt or self-medicate... I’ve had hundreds of conversations where I’ve called my mom or my best friend or my partner and I have talked through, I mean, I’ve thought about how to kill myself... I’ve been to those places; I’ve just never done those things. So I can relate to, kind of that state of mind and... I have never faced something as difficult as like, just raw, honest... approaches to identity characteristics that are just not supported [and understood] by... society... And I think that it’s... too much for one human being to take on that much.”

Theme 3: Co-Construction of Identities

Given the inapplicability of available narratives like transnormativity, as well as the absence of viable

alternatives, genderqueer communities may then be saddled with the task of co-constructing new narratives to guide their own identity development. The power of master narratives is derived from their resistance to change, and deviations from these narratives are met with opposition, so the crafting of new narratives may be a protracted and laborious process (McLean & Syed, 2015; McLean et al., 2017). It has been noted that marginalized individuals engage in more identity-related processes such as autobiographical reasoning, or explicating connections between past and present selves (McLean et al., 2015); as such, participants were actively engaged in co-constructing new narratives applicable to genderqueer identities.

Theme 3.1: Positive Reframing. Participants shared numerous active strategies for navigating the constraints of master and alternative narratives. For example, participants described processes of positive reframing, whereby benefits, strength, and positivity were derived from genderqueer identities. One participant (Genderqueer/Transmasculine, White, age 26) highlighted the freedom and possibilities made available by genderqueer identities, and how these possibilities serve to benefit all:

“...It just means there are other options, and it means people get to define for themselves what masculinity and femininity is. But it doesn’t have to be about what we have seen on TV every day of our lives or what our parents... instilled in us because of what their parents instilled [in] them. There is definitely more sort of like personal freedom. And then I think... because if it gets to that point, then there is potentially more space for just identity, identities of all different kinds to kind of be able to solidify and grow.”

Similarly, another participant (Genderqueer/Queer, White, age 22) described the ability to blend into divergent environments resulting from their fluid gender identity and expression: “I can kinda be a chameleon. I can fit in with different spheres... different groups of people.” They elaborated on their gender fluidity as a source of strength and freedom:

“The fluidity of it is helpful sometimes...and it’s good for me too, because I don’t have to deal with [being] the same person every day. Like, I can be who I choose to be. So... just getting your head around that and be like, ‘It’s ok to be completely whatever you want.’ You know, that’s a very freeing concept...it’s just really freeing.”

Theme 3.2: Self-Presentations and Intragroup Conflict. Distinct from a passively fluctuating internal sense of gender identity, participants described actively altering their linguistic self-presentation based on their current environment in order to be perceived as legitimate or valid. For example, one participant (Male/Gender Fluid/Gender Neutral, White, age 19) reported using different identity labels in different situations due to inconsistent awareness of genderqueer identities, illustrated by the following exchange with the interviewer (I):

- I: “What’s the extent to which you use the term genderqueer outside of the queer community?”
 P: “Outside of the queer community, I probably more use the term gender non-conforming.”
 I: “Ok. Then genderqueer? And within the queer community, would you be more likely to say genderqueer or transgender?”
 P: “Depends on who I’m talking to... Close friends, it’s funny because I feel like trans is more a large envelope but with close friends I would identify as trans but with a community in general I would introduce myself as genderqueer.”

This quote illustrates the participant’s awareness of the constraints of master narratives—i.e., others’ lack of exposure to certain ideas—and their active impression management in light of these constraints. This demonstrates that individuals are not simply passive recipients of cultural knowledge, but active agents in influencing their surroundings and altering themselves to fit those surroundings.

The hierarchies and boundaries of legitimacy drawn by master narratives were described as manifesting in the form of intra-group relations. Participants described divergent experiences within the trans community, ranging from warmth and solidarity to conflict and aversion. This can be explained, in part, by the employment of different strategies of negotiating with master narratives and the subsequent formation of coalitional alliances on the basis of shared strategies. For example, the above participant (Male/Gender Fluid/Gender Neutral, White, age 19) shared experiencing maltreatment within the trans community by individuals who endorsed and embodied transnormative gender roles:

“I identify as Trans, but people are either frustrated or confused by the fact that I choose to present femininely... And I’ve gotten a lot of, actually, bad names thrown at me from the queer community about that because I’m [giving] them a bad name.”

The accusation that this participant gave the community “a bad name” indicates that the participant’s behaviors were viewed as a threat, in that their transgression of transnormative expectations may be seen as calling into question the assumptions that grant legitimacy to certain trans identities.

The converse side of these discursive tensions was represented as well, with many participants advocating for strategies of resisting or deconstructing gendered beliefs and expectations and disparaging those who accepted or conceded to the norms of the dominant culture. For example, one participant (Genderqueer/Gender Fuck/Transsexual/M-F, Other race, age 24) described a sense of pride and appreciation toward the creativity in transgressing gendered narratives:

“Well, the queer community is...I mean, it gives me a sense of pride to see queer folks that I know identify in such ways because, you know, for every queer person you have 15 different identities. ...It makes me happy just to see people transgressing, gender-queer especially.”

However, this same participant went on to describe a corresponding aversion toward those who employ different strategies of relating to master narratives, which they viewed as assimilative and politically harmful. Though this participant expressed a desire to medically transition in certain ways, they simultaneously distance themselves from medicalization narratives guiding transgender identity:

“The thing about the...transgender community is that, the fight for stealth is a fight for obscurity, and it really makes me kind of irritated...I know I have my own body issues and I would like to not suffer from them. But at the same time, unless people know we are here... it’s kind of essential that people know we exist. So it’s...kind of like a double-edged sword, if we go into obscurity we lose privileges and we lose rights”

Another participant (Genderqueer, White, age 23), reported a similar sentiment, describing an incredulous view toward hegemonic narratives of transgender identity, and a suspicion toward those who align themselves with such narratives. In particular, this participant appears dubious about the plausibility of experiencing a gender identity that is not characterized by fluidity—one that is “singular” and “rigid”—and doubts whether anything positive could be derived from such a mindset:

“...It’s sad to say that I found the trans community and some of the movement, especially how it’s framed in the larger modern day-age... to be very problematic. ...And I would imagine that if you were approaching it as, I need to transition or I need to be, you know, a readable, singular, rigid...identity...I can’t see how that would not create anything but dissonance and frustration and conflict because, if you’re trying to change what you are, how can you be born? ...I don’t see how that could be something that, if it’s approached that way, can provide something positive...”

Discussion

The goals of this study were to provide a robust description of the intrapsychic experiences of genderqueer individuals, characterize the master narratives explored in their narratives, and describe the way in which genderqueer individuals navigated these narrative constraints. Participants described “genderqueer” as an umbrella term broad enough to encompass a wide range of identities and provide room for gender fluidity. Results suggest that genderqueer identity development trajectories may mirror those of other sexual and gender minorities insofar as the achievement of a genderqueer identity may be followed by a period of decreasing centrality of the consolidated identity. This can be understood as analogous to Cass’s (1979) final stage of gay identity development, Synthesis, whereby an individual’s gay identity is viewed as one of many aspects of self rather than a single, central identity, as well as Devor’s (2004) penultimate stage of transsexual identity development, Integration, whereby transsexual identity becomes less salient. This phenomenon, however, has not previously been extended to the development of genderqueer identities, and thus future studies should aim to further examine the course of genderqueer developmental trajectories.

The experience of gender fluidity has been poorly characterized within academic literature, but participant narratives suggest that this phenomenon can be understood as a consistent and enduring flux in an individual’s sense of their own gender identity. This may correspond to fluctuations in an individual’s gender expression of masculinity or femininity, but these phenomena should not be conflated. In fact, participants emphatically dissociated gender identity from gender expression, reinforcing the legitimacy of identities which do not correspond with the physical presentations to which they are stereotypically associated.

Gender fluidity research could help to elucidate the defining features of fluid identity and fluid expression, and provide a framework for improved measurement of these concepts.

Participants' struggles with normative expectations of transgender identity and expression can be understood in light of the legitimizing force of transnormativity; the utility of alternative narratives is to confer legitimacy to experiences which deviate from the expectations of the dominant culture (McLean et al., 2017). However, only certain transgender identities, such as those which utilize medical interventions to achieve stable, singular, binary identities, may be viewed as valid (Diamond & Butterworth, 2008; Johnson, 2016). Genderqueer individuals are faced with the unique situation of layered narrative deviations. In other words, genderqueer identities deviate from the expectations of the cisnormative master narrative, yet additionally deviate from the transnormative alternative narrative. Therefore, the co-construction of genderqueer identities can be understood as the crafting of what McLean et al. (2017) describe as an "intersectional narrative," or an alternative narrative which resists another alternative narrative.

Participants discussed the integral role of language in shaping their identities and interactions with others; this is consistent with Vygotsky's (1986) general approach to development which emphasized the role of language as a symbolic cultural tool to mediate the internalization of cultural knowledge. As such, language and master narratives can be understood as reciprocally-reinforcing forces; discourses can be viewed as pre-existing social forms of communication that are both shaped by available master narratives, and provide individuals with means of interacting with those narratives (Bamberg, 2004). By way of illustration, participants described often struggling to interact with others given that easily-interpretable words do not readily exist to describe their experience of being genderqueer—as such, no readily available routes exist for the legitimization of genderqueer experiences, since narratives cannot be crafted with language which does not exist. Co-constructing genderqueer identities in the context of master narratives, then, involves a process of individuals reorienting their relationships to language, and creating new language when necessary. This is evidenced by the redefinition of the word "queer," which mirrors Hammack et al. (2009) observation of sexual minority

youths' dynamic engagement with cultural lexicon surrounding words like "gay," "lesbian," and "queer." However, this process is laborious, given the rigidity of master narratives, whose authority is derived from their staying power (McLean & Syed, 2015), and thus may at times result in fatigue, frustration, and loneliness.

These experiences of navigating master and alternative narratives may present a salient issue for mental health practitioners working with genderqueer clients. Transgender community belongingness has been associated with decreased anxiety and depression as well as increased well-being (Barr, Budge, & Adelson, 2016; Pflum, Testa, Balsam, Goldblum, & Bongar, 2015), but such connectedness may be particularly elusive for genderqueer individuals (Farmer & Byrd, 2015). Additionally, genderqueer individuals' distress may be aggravated by the internalization of components of harmful narratives, such as negative beliefs about gender fluidity. Unfortunately, the history of transgender health care has been anchored in a cisnormative framework that has enforced binary expectations on trans patients, serving to promote the internalization of these ideals rather than empowering trans individuals to resist them (Suess, Espineira, & Walters, 2014). This is particularly unsettling given that resisting master narratives can be an agentic, empowering process leading to more resilient outcomes (Toolis & Hammack, 2015). Though there has been much advocacy and articulation of alternative perspectives by the transgender community and academics in a variety of disciplines (e.g., Bornstein, 1994; Nagoshi & Brzuzy, 2010; Roen, 2002), such engagement with alternative perspectives has been notably lacking within health literature (Richards et al., 2016) and genderqueer individuals continue to face unique healthcare barriers (Grant et al., 2011).

For mental health practitioners working with transgender communities, clients may present for services with expectations that providers will require them to reproduce transnormative milestones in order to validate their trans identities (e.g. "born in the wrong body," wanting to "be the other sex," disgust or hatred of all secondary sex characteristics, etc.). In addressing referrals for medical interventions for genderqueer clients, clinicians may be in a role of advocating for clients who wish to pursue irreversible interventions without existing guidelines for nonbinary clients. Mental health practitioners, in supporting genderqueer clients in

accessing medical interventions such as hormones or surgeries, may be in a role of educating and advocating for clients with medical providers, as well as working with clients in their decision-making process to pursue medical interventions outside of a normative binary transgender framework. Furthermore, clinicians must trust the ability of their trans and genderqueer clients to assess their own needs and respect their capacity to make medical decisions which are right for them; as such, clinicians should view their role as facilitating the needs of their clients rather than arbitrating them.

Clinicians must be active and transparent in challenging the history of (and persistence of) enforced binary models of transgender identity by healthcare providers, and must approach genderqueer identities directly and uniquely. For example, clinicians who have worked primarily with binary transgender clients may expect certain trajectories which may be inapplicable with genderqueer clients. Furthermore, clinicians are called upon to explore their own understandings of gender roles, expressions, and identities, and to engage in the ongoing process of questioning their own gender biases and how they impact their work. Results from the genderqueer voices described here suggest that such engagement is essential for building rapport and establishing affirming therapeutic interactions with genderqueer clients.

Limitations

There are limitations to this study. As with most qualitative studies, the results of this study cannot be assumed to generalize across all genderqueer individuals due to the sample size. Furthermore, participants were exclusively North American adolescents and young adults and approximately two thirds were White, so results may be unique to these specific demographic groups. Given that master and alternative narratives are culture-specific (McLean & Syed, 2015), samples of different cultural compositions would likely yield different results.

Conclusion

Findings of the present study highlight both the diversity of genderqueer identities and the resilience of genderqueer people in navigating and challenging master narratives. Genderqueer identities may be a rich source of pride and positivity, but genderqueer individuals may experience social tensions resulting from

the lack of understanding and acceptance surrounding their identities. Clinicians and allies play an important role in supporting genderqueer people by questioning and redefining their own binary understandings of gender and advocating for broader recognition of genderqueer people's experiences and needs. Ultimately, the work of affirming new identities beyond the gender binary is fundamental to creating a world that supports people of all genders.

Declaration of conflict of interest

The authors have no conflicts of interest to declare.

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