Who do they think they are and what do they think they are doing?

The construction and establishment of trans and non-binary or genderqueer identities in a trans youth group.

Andolie Marguerite

Goldsmiths, University of London

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I declare that the work presented in this thesis is my own.

Andolie Marguerite

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Carrie Paechter you have been an amazing supervisor. Thanks for your support and friendship over the last 10 years!

Thanks Jesse, Janis and my sprogs, Claude and Kamile – you've all been great.

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Abstract

This thesis contributes to understandings of the changing field of trans and gender identities in the UK by examining the construction and establishment of trans and non-binary identities in a trans youth group for people aged 13 to 25. I discuss the results of an ethnographic study based on reflective observations of youth group sessions over a two-year period, and in-depth qualitative interviews with 11 youth group participants. The interview participants were 17 to 23 with diverse gender identities representative of the identities within the group. One participant, assigned male at birth, preferred a female identity. The others, assigned female at birth, preferred identities including male, trans, genderqueer, and genderfluid. The participants had a range of engagements with social and medical transitions and were at different stages along their gender trajectories.

I use a 'communities of practice' framework alongside a poststructural understanding of identity as unstable, multiple, fluid and performatively constructed. This enables a detailed understanding of the performative process of establishing trans and gender identities as 'authentic' within the youth group. Gender is co-constructed with physically sexed bodies, and the materiality of bodies is integral to experiences and understandings of gender and trans. Within the group, bodies and discourses worked together to construct and legitimate 'authentic' trans and gender identities.

Changes of name and pronoun, and changes to the body and performance of the body were reified events within the youth group. These marked movement along identity and gender trajectories within the community of practice of the group. Male and female-to-male identities were central and fully legitimated in the group; non-binary and male-to-female identities were partially legitimated and remained marginal, with effects on their perceived 'authenticity'. I recommend close attention and further research into community processes as they have a significant impact on young trans people's lives and identities.

Contents

1   Introduction

Situating my research

Trans as identity

This thesis explores the establishment of trans[1] identities in a youth group for young trans people. Trans has only become a commonly used term in the last decade, according to Whittle it was coined in 1998 by a parliamentary discussion group (Whittle, 2006). It is an inclusive term and can include anyone who feels differently from the binary gender, male or female, they were assigned at birth. This can include discomfort with gender role expectations, a desire to present sometimes or always in ways that don't conform to binary gender norms, living part or full-time as a different gender from the one assigned at birth. Some trans people will choose to have medical interventions such as hormones or surgery to support them to feel more comfortable with their gendered bodies or presentation, or to feel that their sense of identity is more aligned with their physical bodies. (Stonewall, 2017b; Terrence Higgins Trust, 2017)

Trans* is sometimes used to show inclusivity (Q Center, 2014) with trans seen as an abbreviation for transgender (National Center for Transgender Equality, 2018) however I consider trans to be already inclusive and so will use trans in this way in this thesis (Trans Student Educational Resources, 2017). Trans identities can include: transsexual, transgender, non-binary, genderqueer, genderfluid, agender, bigender, crossdresser, butch, femme, demigirl, boi, and androgyne among many others (Stonewall, 2017b). Trans is open to self definition so, for example, a butch lesbian may or may not consider themselves to be trans (Scottish Trans, 2018). Some people who feel differently from the gender they were assigned at birth may not identify as trans. This includes a range of people and does not depend on whether they have completed or are considering a medical transition. Someone assigned female at birth who

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[1] See glossary for terms related to gender, trans, LGBT, and queer identities and experiences.

presents and lives as male may consider themselves to be male and not trans. They may, or may not, consider themselves to have a trans history. Alternatively someone assigned female at birth that presents as male may consider their identity to be female and not trans. People who identify as genderqueer also may not consider themselves to be trans. All these people may also consider themselves to be trans. (Scottish Trans, 2018)

Gender variance across time and place

Discourses of correct gender and sexual behaviour have been different in different times and places. These discourses have produced different identities and different ways of knowing and thinking about behaviours (Foucault, 1972). Trans identities can be seen to have associations with other historical and cultural gender variant behaviours, presentations and identities (Ekins & King, 2006; Feinberg, 1996; Nanda, 2014). There are ample historical examples that include a range of cross-gender behaviours from people assigned both male and female at birth (Bennett & McSheffrey, 2014; Garber, 1997; Lewis, 2013; Oram, 2006). There are also many cross-cultural examples (Blackwood, 2009; Blackwood & Wieringa, 1999; Kulick, 1998; Lambevski, 1999). Examples of gender variance from other times and places include medieval crossdressing women and 18th century mollies in the UK, and, among many other cross-cultural examples, Indian Hijra and West Sumatran tombois. Some of these gender variant behaviours will be understood as products of sexual or gender identities while others will not. Cross-gendered behaviours in other times and places cannot be directly interpreted through current Western discourses of gender and sexuality. People with gender variant behaviours in other cultures and at other times will most likely not have understood themselves in the same way as lesbian, gay, bisexual, trans or queer identifying people do today in the UK or the Western world (Altman, 1996; Blackwood, 1995; L. L. Doan, 2006; Towle & Morgan, 2002; Valentine, 2007). It is not possible to know whether historical behaviours in particular were motivated by any sense of identity or whether they were motivated by financial or romantic opportunities, for example, that would not otherwise be available (Dekker, Van de Pol, Islam, & Nabers, 1989). Although the historical and cross-cultural examples of gender

variance cannot be simply reclaimed as Western LGBT identities, these examples do show that there are and have been many discourses of gender and sexuality and that these have changed and developed over time.

Trans, as well as being a social, cultural (or subcultural) identity, has a legal and medical history. Trans, and other gender categories, continue to be constructed and negotiated in the early 21st century in the UK. Gender and trans identities, constructions and discourses have developed (and continue to be developed) from and in resistance to, multiple gender and sexual identity discourses. I will look at these below.

The historical development of trans

Trans people have been the subject of medical and psychological interest for over 150 years. Until the mid 19th century in Western Europe, gender non-conforming in Western Europe was seen as crime or a sin. The work of early sexologists in the mid to late 19th century led to the establishment of homosexual, and later transsexual, as an identity (Chauncey, 1982; Faderman, 1978; Foucault, 1978; Halperin, 1989; Weeks, 1977). Following the early sexologists, gender non-conformity was understood to signify that an individual held a particular identity (Foucault, 1978). Ulrichs formulated the concept of the Uranian, in 1864 (Bland & Doan, 1998; Weeks, 2016). Ulrichs originally conflated cross-sex identification with same-sex desire[1]. He described himself as 'a feminine soul confined by a masculine body' (Bland & Doan, 1998, p. 119). Krafft-Ebing, a German psychiatrist, published *Psychopathia Sexualis* in 1886 (Krafft-Ebing, 2006), it detailed many sexual acts that Krafft-Ebing deemed perversions and established the concept of the sexual invert. Krafft-Ebing also conflated cross-gender presentation, cross-gender identification and same-sex desire. Those who displayed gender non-conforming behaviour were classified as inverts and the idea of sexual/gender identity was born. Later sexologists, notably Hirschfeld (1910) and Ellis (1938), distinguished between same-sex desire and cross-sex presentation, which led to the identities of the homosexual

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[1] Later Ulrichs would distinguish between these concepts

and the transvestite. Ellis and Hirschfeld continued to develop their theories and later distinguished between different types of transvestism leading to an understanding of separate identities of transsexual and transvestite (Ekins & King, 1996).

Until the late 1970s the psychiatric and medical profession had no agreed 'treatment' for individuals who identified as the 'other' sex and who desired a body that matched their identity. From the late 1970s physical interventions, surgery and hormones, became the predominant 'treatments' rather than psychological or psychiatric interventions (Cromwell, 1999; King, 1996). Before this many 'transsexual' individuals were 'treated' to 'cure' what was seen as a psychological or psychiatric problem. This perspective positioned 'transsexuals' as mentally ill. Even as late as 1970 *The Human Body and the Law* (Meyers, 1970), while recognising the existence of transsexuals, described physical interventions for transsexuals as a last resort when psychological 'treatments' had failed. There are documented cases of 'transsexual' individuals who had surgical and hormonal interventions in the early 20th century. The first documented vaginoplasties took place in the 1930s, and the first phalloplasty surgeries in the 1940s. Benjamin, Stoller and Money were all significant figures in establishing that transsexuals should be 'treated' with surgery and hormones (Benjamin, Lal, Green, & Masters, 1966; R. Green & Money, 1969; Money & Ehrhardt, 1972; Stoller, 1968). This change in treatment was developed alongside an understanding that mental and physical sex were different which lead to the establishment of gender and sex as different attributes (Fausto-Sterling, 2000).

The understanding that gender rather than sex was immutable led to the acceptance that surgery would bring comfort to transsexuals through aligning their sexed body with their gender identity. This developed into the 'wrong body' discourse. Surgery was understood to allow the 'true self' to be uncovered (Hines, 2007, p. 12). The 'wrong body' discourse is still current. Some trans people experience themselves to be in the wrong body (BBC News, 2016; Helyar, 2016), although others contest this conceptualisation (Owl, 2017). Many cis people also make use of this discourse (BBC News, 2016; Helyar, 2016; Owl,

2017). Prosser (1998, p. 85) talks of 'the transsexual's "true" sex, the body trapped within, realised in theory by sex reassignment' referring to some trans people's experience of feeling that surgery has uncovered their 'true self'. Many trans people, whether or not they understand themselves to be in the 'wrong body', do get pleasure or relief from medical interventions that change their bodies. This may be for several reasons. They may feel that their body is more aligned with their identity, that their body better represents their identity to others, or they get pleasure or comfort from their changed body (Beemyn & Rankin, 2011; Chu, 2017; Nuru, 2014).

The current legal and medical situation

The diagnosis of transsexualism brought with it the benefits of the legitimation of cross-sex identification and access to medical interventions, however it also meant that cross-sex identification was pathologised (Butler, 2004; Prosser, 1998). As well as being pathologised trans people have been socially marginalised and subject to discrimination, harassment and violence. Trans people, and others, have been active in seeking changes to legislation and medical categorisation and trans people are now more visible in society and have more legal and medical recognition as well as some improvement in social acceptance (Davy, 2011; Hines, 2007).

The last 50 years has seen the medical diagnosis of transsexualism change to gender identity disorder and more recently gender dysphoria and gender incongruence. The diagnosis of gender identity disorder and, within it, transsexualism were first included in the third version of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association in 1980, DSM 3. Not only was cross-gender identification or behaviour a medical condition diagnosed as a disorder, but the full title of DSM includes 'mental disorders' and it is published by the American Psychiatric Association, all of which contributed to further pathologising. Transsexualism also appeared in the International Classification of Diseases published by the World Health Organisation in 1975, ICD 9. Gender identity disorder was retained in DSM 4 (1994) and in ICD 10 (1992), although transsexualism was not retained as a diagnosis. The latest versions, DSM 5, published in 2013, and

ICD 11 include neither transsexualism nor gender identity disorder. DSM 5 includes a diagnosis of gender dysphoria. Gender dysphoria is understood as significant distress due to the lack of congruence between one's identity and one's body and was intended to be a term that did not pathologise gender non-conformity, including cross-gender identification (Bockting, 2015). It was included in the DSM with the intention that the medical profession provide supportive treatments for distress associated with cross-gender identification. It is argued by many that this is still pathologising (Davy, 2015). ICD 11, published in June 2018, has moved further to avoid pathologising gender non-conformity and cross-gender identification; instead of gender dysphoria, gender incongruence is included, again with the intention of enabling healthcare provision support. Gender incongruence is described as 'characterized by a marked and persistent incongruence between an individual's experienced gender and the assigned sex', and is included in the sexual health category, and no longer the mental health category (World Health Organisation, 2018). The view is that inclusion, unlike homosexuality, remains necessary in order to provide healthcare to adults and adolescents. The inclusion of 'gender incongruence of childhood' has been particularly disputed but continues to be included to be globally applicable and useful in different cultures and healthcare systems (Beek et al., 2017). However the implications of the changes to ICD 11 are not yet clear.

Current medical situation

Many trans people have medical interventions, although many also do not. Medical support for trans people is available through the NHS, as well as privately, with links to Gender Identity Clinics and information for adults on the NHS Choices website (Department of Health, 2008b). There is also support for young people, as I will detail below. The numbers of people being referred to Gender Identity Clinics continues to rise. Waiting lists are long, many people feel frustrated by the waiting times, and there is concern for people's wellbeing including mental health while they wait for specialist medical support (RCGP learning, 2015). The NHS will provide speech and language therapy, counselling psychology and hormone treatments through Gender Identity Clinics. The

clinics will also make referrals for some surgical interventions. These are chest surgery and hysterectomy for those assigned female at birth, and genital surgery for those assigned either sex at birth. Other surgeries are not usually available on the NHS. Genital surgery includes phalloplasty, or the creation of a penis, for those assigned female at birth. This is surgery with compromised results and patients need to decide what their preferred outcome is, for example sensation, penetrative sex or lack of visible scarring (St Peter's Andrology Centre London, 2017). There are also issues for vaginoplasty depending on the individual and the amount and type of skin available to form a vagina, but it is not necessary to choose between different compromised outcomes (Terrence Higgins Trust, 2015).

Current legal situation

The Gender Recognition Act (GRA)(2004) brought about significant legal changes for trans people, including the right to have one's legal gender changed and to marry in one's new legal gender. It also marked and supported a change in attitudes towards trans people (Hines, 2007). Many trans people, however, do not choose to have their gender legally changed, the process is intrusive and requires professionals to approve the person's new legal gender. The legislation also does not recognise those who identify outside the gender binary (Stonewall, 2017a). There is a proposal to de-medicalise gender recognition legislation and make it less intrusive (Equality and Diversity Forum, 2017). The Equality Act (2010) brought significant protection against discrimination against trans people, as gender reassignment is a protected characteristic. However this protects people who are changing from one binary gender to the other rather than people who present differently from their assigned gender or who identify as non-binary.

Legal and medical differences for young people

Legal differences

The GRA does not allow for a change of sex on a trans young person's birth certificate, although they can have their gender changed on other significant documents such as passport if they have a diagnosis of gender dysphoria. Young

people who consider themselves to be transitioning from one binary sex to the other should be protected under the Equality Act. However young people are often very isolated and subject to bullying and harassment and new guidelines are to be produced to give better protection and support to young trans people (Equality and Human Rights Commission, 2017).

Medical differences

As with trans people over 18, not all trans young people desire or seek medical support or interventions. Young people under 17 years and 6 months old will not be referred to NHS 'adult services' but will instead be referred to the Gender Identity Development Service (GIDS). The situation for young people is more complicated as their parents or carers will be involved. This involvement may be supportive, but for young people who do not feel dysphoric this may also feel pathologising. It can also be very frustrating for young people who do not feel that their parents are supportive of their gender choices, including non-binary rather than binary trans identities (Richards, Bouman, & Barker, 2017). Young people in 2017 had to wait for over a year for their first GIDS appointment. As well as exploring a young person's gender choices, GIDS offer support for emotional and relationship difficulties associated with a young person's gender identification. Depending on the stage of puberty that a child has reached the young person may consider hormone treatment. This includes 'blockers' which halt the changes made to the body by hormones during puberty. This allows the young person time to consider their gender trajectory without going through further physical changes as a result of puberty (Gender Identity Development Service, 2017). Masculinising or feminising hormones may be prescribed after a year of blockers if the person is over 16. The NHS allowed the prescription of blockers to young people under 16 from January 2011, just before I conducted most of my interviews. None of the young people in my study had been prescribed blockers.

Young people, gender decisions and transitions

Views on young trans people are influenced by social understandings and knowledge of young people generally, LGBT young people, trans adults and

gender expansive children. Young trans people are seen as vulnerable both as young people and as LGBT people (de Montigny & Podmore, 2014). Young people have historically been, and continue to be, seen as taking more risks and to be more likely than adults to make poor decisions, or decisions that they may regret (Jessor, 2018). They are seen to require the support of adults, particularly parents, to understand and make decisions. It is expected that young people will take more responsibility for their decisions as they move towards adulthood. Research continues to find that young people need support to make significant decisions about their health care (Cherry, 2017).

Trans adults

Trans adults, like trans children and young people, can be perceived as victims and to have significantly poor quality of life. Trans people of all ages are more likely to suffer violence and marginalisation, loss of homes and relationships (Levitt & Ippolito, 2014; Lombardi, Wilchins, Priesing, & Malouf, 2002; Sausa, 2005; Singh, Meng, & Hansen, 2014; Toomey, Ryan, Diaz, Card, & Russell, 2010). They are also found to experience higher levels of depression, anxiety, and self-harm than the general population. However, almost all studies have found mental wellbeing at all ages is improved by social or medical transition, as are rates of self-harm and life threatening behaviours (Budge, Adelson, & Howard, 2013; Connolly, Zervos, Barone II, Johnson, & Joseph, 2016; De Vries et al., 2014; Grossman & D'augelli, 2007; Olson, Durwood, DeMeules, & McLaughlin, 2016). More recent research shows trans adults as agential, creative about their gender identities and lives, politically engaged, as well as active and supportive members of trans and queer communities (Hines, 2006a, 2006b, 2007, 2010; Hines & Sanger, 2010; Levitt & Ippolito, 2014; Meyer, 2015; Riggle, Gonzalez, Rostosky, & Black, 2014; Riggle, Rostosky, McCants, & Pascale-Hague, 2011).

While there is considerable research about LGB adults and young people, some of which includes trans people, it must be looked at with caution. Some research looks at LGBT as a broad category with insufficient attention to the specific experiences of trans people as different from 'LGB' people. Lesbian, gay and bisexual people in any case already have very different experiences of visibility, marginalisation and violence. (Dargie, Blair, Pukall, & Coyle, 2014)

Gender expansive children

Although the current DSM intends that children should no longer be diagnosed with gender dysphoria (or the previous diagnosis of gender identity disorder) unless they experience significant distress with their gender expression or identity (American Psychiatric Association, 2018), medical referrals in the UK, as well as in Europe and North America, have been increasing exponentially for young people of all ages who identify as trans with at least a 50% increase each year in the UK since 2009 (Chen, Edwards-Leeper, Stancin, & Tishelman, 2018; Steensma, Kreukels, de Vries, & Cohen-Kettenis, 2013; The Gender Identity Development Service, 2018; The Tavistock and Portman, 2016). The gender balance of referrals has also changed, with significantly more people assigned female at birth being referred (Aitken et al., 2015). Studies have found that a minority of pre-pubertal children diagnosed with gender dysphoria or gender identity disorder become trans adults, on average 15%, although more recent studies show 12-27% (De Vries & Cohen-Kettenis, 2012; Steensma et al., 2013). The validity of these figures is disputed; however, in a significant number of cases children's cross-gender identifications do not persist into puberty (Chen et al., 2018; Ristori & Steensma, 2016). Children who are diagnosed with gender dysphoria experience high levels of depression and anxiety compared to the general population of children. Recent research indicates that supporting children's preferred identity, whether or not they continue on a trans trajectory, is highly beneficial to their wellbeing including mental health, with significant improvements in anxiety and depression (Connolly et al., 2016; Ehrensaft, 2012; Olson et al., 2016; Ristori & Steensma, 2016). Even respecting a child's preferred name is linked to improved mental health (Russell, Pollitt, Li, & Grossman, 2018). One piece of research suggests that a complete social transition before puberty may cause difficulties for children whose gender identity develops in a different direction (Ristori & Steensma, 2016).

Young trans people

Recollections and research about trans adults may inform the need for research and support for young trans people. However, it is important that knowledge about trans adults including their gender non-conforming or trans childhoods

are not superimposed on young trans people now (de Montigny & Podmore, 2014). Recollections may in any case be problematic. More significant is that visibility and acceptance of trans identities for people of all ages has changed significantly in the last 10 years. Medical referrals continue to increase exponentially for people of all ages who identify as trans (Coleman et al., 2012) (Bouman, de Vries, & T'Sjoen, 2016). Trans identities are no longer seen solely as binary; non-binary and fluid identities are becoming more visible, if not more prevalent (Barker & Richards, 2015; Richards et al., 2016). As a result, trans young people may not experience their identities or be understood by others in the same way as young people in the past.

Almost all studies show that, unlike younger children, almost all young people who continued to identify as trans through puberty, and young people who identify as trans after puberty, continued to identify as trans as adults (De Vries & Cohen-Kettenis, 2012; Steensma et al., 2013). Supporting young people in their preferred identities has been found to decrease depression and anxiety, as well as self-harm and suicide (De Vries et al., 2014; Olson et al., 2016). Exceptionally, a very recent Finnish study found continuing mental health issues in a significant proportion of young people assigned female at birth who newly identified as trans post-puberty (Kaltiala-Heino, Bergman, Työläjärvi, & Frisén, 2018). Medical interventions for young trans people balance the risks of irreversible medical interventions against the risks of suicide and self-harm (Cohen-Kettenis, Delemarre-van de Waal, & Gooren, 2008). Common practice in the UK since 2011, following the model in the Netherlands, is for young people to be affirmed in their preferred identities. They may be prescribed 'blockers', puberty blocking hormones before the age of 16, and masculinising or feminising hormones from 16. Young people have not been found to regret physical interventions, however medical practitioners remain cautious. There are concerns that there may be longer-term regrets, for example about the loss of fertility associated with physical interventions (Cohen-Kettenis et al., 2008; De Vries & Cohen-Kettenis, 2012; Olson-Kennedy et al., 2016). Interestingly, contrary to views that young people are greater risk takers, research has found that young people are more cautious than medical practitioners about the

appropriate age for and nature of physical interventions for young trans people (Vrouenraets, Fredriks, Hannema, Cohen-Kettenis, & de Vries, 2016).

There is a significant amount of research looking at how to support young trans people and improve their lives, particularly in schools and colleges (Beemyn, 2003; Case & Meier, 2014; Hackimer & Proctor, 2015; Kearns, Kukner, & Tompkins, 2014; Scourfield, Roen, & McDermott, 2008; Singh, Meng, & Hansen, 2013; Zeeman, Aranda, Sherriff, & Cocking, 2017). There has also been research into the resilience strategies of trans youth (Singh, 2013; Singh, Hays, & Watson, 2011; Singh et al., 2014; Stieglitz, 2010; Zeeman et al., 2017). Neary raises the possibility of developing new discourses of gender within schools given the increased visibility of trans bodies and identities (Neary, 2017). There have been a few studies that look at the benefits of trans or LGBT spaces to the well-being and sense of identity of young trans people (de Montigny & Podmore, 2014; Rooke, 2010).

Trans identity development

Several models have been developed that look at the development of trans identities in adults. Rachlin (1997) defined a six stage transition process beginning with confusion, then self definition, though identifying options, making changes, dealing with transition and moving on with life post transition. Gagne et al. (1997) saw four stages of transition: not feeling right about one's identity, coming out to oneself, coming out to others, and resolution of identity. Lev (2004) suggested a six stage model and Devor (2004) suggested the most complex model with 14 stages. These models of development all have in common a desire for 'authenticity' to self and recognition by others, and start with uncertainty about identity and finish with a resolution of identity. Pollock and Eyre (2012) found three stages in the identity development of FTM trans youth. These are: growing awareness of their own identity and exposure to trans as identity, followed by a recognition of their identity as trans, and finally developing new ways of interacting in the world and with themselves in their preferred identity. Again this is similar to other models, however without a final stage of resolution.

These models suggest a linearity of identity development, as well as a final resolution of identity. They also suggest that people start from a position of confusion or lack of awareness of trans identities. These may not be the case as people increasingly have non-binary and fluid identities, and, particularly for young people, they may have been aware of trans identities or accepted as identifying as other than their gender as assigned at birth since early childhood.

Nuru (2014) looks at communication strategies that enable establishment and recognition of an individual's trans identity. Nuru, through Hecht et al. (2005), proposes a model of 'layers' of identity: personal, enacted, relational and communal, that individuals seek to bridge. 'Personal' identity refers to an individual's sense of their own gender, 'enacted' to their expression of gender, 'relational' gender is co-constructed in relationships with other people, and 'communal' identity refers to understanding one's identity through membership of a group. Nuru looks at communication that bridges 'identity gaps'. A personal-enacted identity gap is a mismatch between an individual's preferred identity and their identity expression. This model allows for a less linear understanding of transition than the stages of development models. Identity processes may happen concurrently, rather than consecutively, and development of external identity layers may then encourage internal identity development. For example developing 'communal' identity, which could be seen as the stage of identity resolution in a wider community, may influence 'enacted' identity as people redevelop their presentation.

Little research has looked in detail at the processes of identity construction (Hollander & Gordon, 2006). Nuru's study looks at some detail of communication processes supporting the establishment of identities, but also identifies the need for more research specifically into the construction of trans identities.

Trans youth, identity and community

Studies of both young people and adults consider the benefits of a supportive community to the development of trans identities (de Montigny & Podmore, 2014; Hines, 2010; Schroeder, 2012). Amadeo et al. found trans youth

communities in Italy to enable self-acceptance and identity affirmation through peer support (Amodeo, Picariello, Valerio, & Scandurra, 2018). Rooke found a project for trans youth enabled them 'to create a space for themselves in the world as trans' (Rooke, 2010, p. 665), developing their self-understandings and enabling articulation of their identities beyond the group. De Montigny et al. (2014) found that consideration of power relations within an LGBT youth group enabled self-recognition and acceptance of difference. Others found community spaces to be potentially contradictory or constraining as well as empowering. Trans spaces allow support, discussion, and the construction of preferred identities while being constrained by the normative identity discourses within the space (Hines, 2010; Schroeder, 2012). Mason-Schrock (1996) found that the use of narratives with a transgender support group enabled the establishment of trans identities, but also constrained possible identities and identity trajectories.

My research focus

There has been no ethnographic study of a community of young trans people, although Rooke (2010) co-facilitated and evaluated a short term project of four sessions over two months with 17 young trans people carried out in 2006. Nor has there been a study of a transition community, a community in which members are establishing and changing their gender identities, since Mason-Schrock's study published in 1996. He attended eight sessions of a support group over 15 months and interviewed 10 male to female transsexuals who attended the group. While there have been studies into the development of trans identities in adults, the only study of the development of identities in young trans people is Pollock and Eyre's study published in 2012. Their study is of the development of FTM identities only, and their sample was 13 young people recruited through flyers at an LGBTQ young people's clinic.

My research is an ethnographic study (Hammersley, 2007) of a youth group, 4D for young people who were questioning their gender identity or who identified as trans. It is both an ethnography of a transition community and of a community of young trans people. It looks at the development of young people's

trans identities. I was a volunteer youth worker with the group. My data include fieldnotes from over 40 youth group sessions over a period of two years, and in-depth interviews with 11 members of 4D.

My research is the first ethnography of a community of young trans people. It the also the first study of a transition community since 1996. Data was collected over many sessions, and includes observations and in-depth interviews. This has allowed me to provide a rich and detailed account of the group and how it functioned. As researcher I was both a partial insider and a semi-participant in the group. In addition to the significance of my research as an ethnographic study, my findings have implications for theory, policy and practice.

My thesis contributes to theorisations of gender and trans as constructed, and discourses of gender and trans as open to change. It develops a theorisation of gender as developed in communities of gender practice, and broadens this theorisation to communities of practice of gender transition. I also detail the establishment of new and alternative identities through performative utterances, contributing to a development of speech act theory.

My findings are also significant to policy and practice. In particular they relate to the recent proposed amendments to the Gender Recognition Act (2004). They highlight the need to de-medicalise the recognition of gender identity, and to give a space to youth voice in relation to gender identification and gender transition. Finally there are implications for practice in groups that are formed around shared alternative identities. It is relevant in particular to trans identities, but could also apply more widely to LGBTQ identities. My findings show the significance of group processes, in particular reifications within communities of practice, to the development and recognition of new and alternative identities. However group processes may also foreclose the possibility of the development of some identities. It is important that groups and communities should maintain awareness of group processes to support the legitimation of wider gender and trans identities.

My research questions are:

1. How do trans and non-binary young people think about their gender identities and trajectories?

2. How do trans and non-binary young people establish their identities for themselves and others?

3. How does 4D as a community of practice enable and affect the establishment of new identities and identity categories for trans and non-binary young people?

The members of 4D were mostly assigned female at birth. Most were aged between 16 and 22, and were generally white with a minority of black and mixed-race young people; almost no young people of Asian origin attended the group at that time. There was considerable variation within the group in terms of class and educational achievement. Most people came from London and the Home Counties but some came from further afield.

The young people's routes to 4D were quite varied. At one end of the spectrum were young people who had sought medical help for gender dysphoria referred by medical professionals to 4D for support. At the other end of the spectrum were people involved in wider queer and trans communities who had heard of 4D through friends or acquaintances and were coming to enjoy activities with other young trans people. Some saw themselves very much within the medical model of gender dysphoria; others were quite gender transgressive and might or might not have been seeking surgical and hormonal interventions. I have appended pen-portraits of all the interview participants and brief descriptions of other members of 4D discussed in the thesis. See pen-portraits page 314.

My research participants were active in shaping and changing their own gender identities, although these were also shaped and constrained by prevailing gender norms. However, the participants might or might not have seen gender as constructed and open to change. I am interested in the participants' gender identities, including trans identities. I am interested in how they understood their own gender identities, how they understood gender identities more widely, and how they established new or alternative gender identities.

4D functioned as a community of practice, as I describe and discuss in chapters 3 and 7, with the young people learning and developing shared ideas of how to be trans. The group was not coherent and different individuals engaged differently with multiple discourses of trans. Some of the structures in 4D supported individuals to establish and maintain new gender identities. Two important rituals were the 'names and pronouns' circle and the working agreement, discussed in Chapter 6. These structures allowed divergent and contradictory discourses to coexist, and enabled, or permitted, individuals with different perspectives to work together. The multiple discourses of trans available to 4D members are discussed in Chapter 5. In chapters 9 and 10, I look at reifications including insider language and objects, such as clothing in the group. I consider how young people's identities were legitimated within 4D and beyond in Chapter 8.

My research position has been, and is, an important consideration. Young trans people, the group I researched, are potentially vulnerable young people. They understand themselves in ways that have been pathologised and stigmatised; they have also been portrayed as exotic or monstrous. I was clearly not an insider to the group. I had the role of youth worker within the group and was and am middle-aged. However, I was not an outsider either. I visibly do not and did not gender conform, and since working in the group, I now identify outside the gender binary, as genderqueer. The mutual influence of 4D on my identity and of my influence on identities in 4D is discussed, as is my ethical relationship with the group, in chapter 4.

Throughout this thesis I discuss participants' identities as they discussed or presented them at the time of the interview or observation. I use the pronoun that they said they preferred. I have given details of their preferred pronouns in my pen portraits. I carried out all the interviews and my initials AM are used in the interview excerpts.

Comments on language

As I discuss in chapter 2, I consider gender and trans to be constructed identities and categories. This construction is not a matter of individual choice,

or of role-playing, but is within constraints. These constraints include a lack of knowledge of identity or non-identity possibilities, as many possibilities are not yet established within discourses of trans and gender. Other constraints include the regulation and norms of trans and gender.

Given these constraints gender non-conforming and trans individuals have to find ways to have their identities understood by others; they may also need to explore their identity to understand their identities for themselves. As Whittle has said 'What trans people are trying to do is find a way of presenting their gender identity in such a way that the rest of the world will understand who they are.' (Whittle, 2000, p. 3). Trans people, including my participants, are agential and use discourses and other resources that are available to them to enable their identities to be understood. I use the term 'construction' in relation to identities to communicate the active use of resources within constraints with the aim of having one's identity understood by oneself and others.

I have used the terms 'new' and 'alternative' to apply to gender and identities. Individuals may not experience their preferred identity as new, but may be seeking recognition of a 'new' presented identity. At other times I use 'new' or 'alternative' to suggest identities that may not yet exist, or are not yet recognised.

Some people experience themselves to have multiple identities, and to move between identities. However for the sake of simplicity I generally refer to identity rather than identity/identities for simplicity in this thesis.

People, including trans people, understand and experience their identities in diverse ways. Some experience or understand their gender as innate and others as constructed socially and/or medically. I will use the expression 'preferred gender' to mean the gender that someone wishes to move towards, is moving towards, or has moved to. This may be movement in how they identify, and/or how they are recognised by others.

Outline of my thesis

In chapters 2 and 3 I lay out my theoretical framework. Chapters 5 to 10 are data chapters. Each chapter looks at a different process affecting the establishment of the gender and trans identities for the young people. I consider the establishment of gender identities for individuals as well as discourses of gender and trans in and beyond 4D. In chapters 7 to 10 I use a communities of practice framework to examine the establishment of identities in 4D.

In chapter 2 *Gender, power and identities* I discuss my understanding of gender as a construction and the relationship of gender identities to physical bodies. I discuss my understanding of power relations. I then look at the concept of identity, why identities are important and consider how these may be established in power relations. I also consider research into and the representation of trans identities, and the possibilities for changing identities, and social understandings of gender and trans.

In chapter 3 *Identities within a community of practice* I describe a community of practice. A community of practice framework is a useful tool for my study, as a community of practice is understood to involve changing identities as well as producing localised effects including language and performances of identity. I describe the three criteria for a group of people to be a community of practice: mutual engagement, joint enterprise and shared repertoire. I then look at the concept of reification in a community of practice. Finally I look at the establishment and legitimation of identities in a community of practice.

Chapter 4 *Methods and methodology* details my research process. I describe the participants, the workers and facilitators, and the spaces. I describe how I accessed the group and how I carried out my observations, interviews and analysis. I consider the methodological, ethical and epistemological issues of my research practice.

In Chapter 5 *Trans/gender/queer: Multiple discourses and identities* I examine the participants' engagements with multiple gender and trans discourses to produce, understand, and establish their identities. I describe four main

discourses of gender and transgender identity that I call the medical discourse, the transsexual narrative, queer theory and trans politics. I discuss how the young people negotiated these different and sometimes conflicting constructions of gender and trans identities. All the young people deployed elements from more than one of the four discourses. Some of the young people managed to synthesise together, at least partially, elements from the different discourses that they used. Other young people deployed completely conflicting discourses without any apparent concern.

In Chapter 6 *May the illocutionary force be with you: pronoun declarations in 4D* I examine the effect of the speech acts (Austin, 1976) that were made in the 'names and pronouns' circle at 4D. Every youth group session began and ended with the participants who were present sitting in a circle. In turn each person would say their preferred name and pronoun. I argue that the pronoun declarations were performative and that they established or re-established gender and trans identities for the 4D participants.

In Chapter 7 *4D as a Community of Practice* I examine how 4D fulfilled the requirements for a community of practice and I look at identities and trajectories in 4D. I explain and consider how each of the three requirements of a community of practice, mutual engagement, joint enterprise, and shared repertoire were met in 4D. I look at the relationship between these three aspects of the practice as they influenced each other. I also look at the development and legitimation of identities: gender and trans identities as well as group membership identities.

In Chapter 8 *Legitimacy, identities and trajectories in 4D* I discuss the process by which new members in 4D were legitimated and became legitimate peripheral participants (Lave & Wenger, 1991). I look at central and marginal membership and the possible membership trajectories within the community of practice. I consider the relationship between the identities within the group and individual gender trajectories and the implications for the legitimacy of marginal gender identities in the group. Many members as well as the youth workers desired that genderqueer and other more marginal identities had equal legitimacy

within 4D, I consider how the structure and membership of the group vitiated this.

In Chapter 9 *Reifications: reified events* I consider the meaning of reifications in a community of practice, and their relationship to the joint enterprise and the shared repertoire. I then look at reified events within 4D. I consider an individual's gender trajectory to be composed of rites of passage that are reified within the community of practice. These rites of passage include coming out to oneself and others as trans and navigating the wider community in an ambiguous identity.

In Chapter 10 *Reified objects: changing bodies* I consider reified objects. The reifications that I consider in this chapter are transformations to the presentation of the body and the body itself. These are associated with the later phases of movement along a gender trajectory: navigating the world in an ambiguous identity, and moving to present inone's preferred identity and navigating the world in that identity.

2   Gender, power and identities

Introduction

My study focuses on young people who identified as trans or genderqueer, or who were questioning their gender identity. My research participants were seeking to have their identity understood by others, in the wider community; some were also seeking to understand their own identity. For most of my participants, their focus was specifically their gender or trans identity. They wished to feel they were 'authentically' themselves in the world and that their presentation reflected their internal identity. Although the identities they wished to establish and their understandings of themselves were varied, they were all seeking to establish a 'new' gender identity that was not linked with the sex they were assigned at birth.

Gender is a construction, as I will discuss in more detail below (Butler, 1990/1999, 1993, 2004; Connell, 2002; Fausto-Sterling, 2000; Laqueur, 1990). My research participants were active in shaping and changing their own gender identities, although this was within the constraints of prevailing gender norms. However, some of my participants understood gender as constructed and open to change, while others did not. I am interested in my participants' gender identities, including trans identities. I am interested in how they understood their own gender identities, how they understood gender identities more widely, and how they established new or alternative gender identities. In this chapter I lay out my theoretical framework. I discuss my understanding of gender as a construction and the relationship of gender identities to physical bodies. I discuss my understanding of power relations. I then look at the concept of identity, why identities are important and consider how these may be established in power relations. I also consider research and the representation of trans identities, and the possibilities for changing identities and social understandings of gender and trans.

Gender

In the second half of the twentieth century, the term gender came into usage to clearly distinguish social sex roles from biological sex. The establishment of the word gender is generally attributed to sexologists such as Stoller (1968) and Money (Money & Ehrhardt, 1972; Money, Hampson, & Hampson, 1955), who wanted to distinguish between social and biological attributes of men and women. It was used to justify the surgical treatment of intersex infants, changing their 'ambiguous' bodies and reassigning their sex to maintain the binary construction of sex (Kessler, 1998; Repo, 2013). It was taken up by feminists and transsexuals. Feminists wanted to escape social roles that were determined by their physical sex. They used the concept of gender to justify having other roles than wife and mother (Paechter, 2007). Transsexuals wanted to establish that their sense of themselves could be different from the identity associated with their assigned sex. They used the concept of gender to claim that their identities were not impossible, as their bodies did not determine their feelings or behaviours (Fausto-Sterling, 2000).

In the distinction between sex and gender it is often understood that sex, coming from the body, is fixed and natural, and gender is constructed on the fixed base of sex.

> Originally intended to dispute the biology-is-destiny formulation, the distinction between sex and gender serves the argument that whatever biological intractability sex appears to have, gender is culturally constructed: hence, gender is neither the causal result of sex nor as seemingly fixed as sex. (Butler, 1990/1999, p. 8)

However, the distinctions between sex and gender have been eroded in common use, and even in psychological practice (Diamond, Pardo, & Butterworth, 2011). As Butler suggests, perhaps the social significance of sex is what is culturally important so that the concept of gender replaces that of sex.

> … if gender is the social significance that sex assumes within a given culture … then what, if anything, is left of "sex" once it has assumed its social character as gender? If gender consists of the social meanings that sex assumes, then sex does not *accrue* social

> meanings as additive properties, but rather *is replaced* by the social meanings it takes on; sex is relinquished in the course of that assumption, and gender emerges, not as a term in a continued relationship of opposition to sex, but as the term which absorbs and displaces "sex". (Butler, 1993, p. 5)

Certainly, the word 'gender' is now often used instead of 'sex', even when referring to physical characteristics (Paechter, 2007). Alongside this general lack of distinction between sex and gender is a continuing belief among many people that gender differences do arise from fundamental biological differences. Many scientists continue to look for differences between the 'binary' sexes and interpret social differences as arising from biological differences (Fine, 2010). The result is that gender is still seen to flow more or less directly from sex. Masculinity and femininity are seen as fundamentally dichotomous, although with some variations, deriving from male and female, the natural and unchangeable binary sexes.

There have been many critiques of the sex/gender binary, from queer and trans theorists (Bornstein, 1995; Butler, 1990/1999, 1993; Fausto-Sterling, 1993; Halberstam, 1998; Hird, 2000; Stone, 1991), as well as biologists. There continues to be a 'taken-for-granted' understanding of both sex and gender as binary as dichotomous (Ekins & King, 2006; Fine, 2010). However, this is changing and it is more common now for people to understand and present their gender as non-binary. The concept of non-binary gender is very recent in Western culture, and, when it is accepted, is often related back to the binary concepts of male/female and masculine/feminine (Teen Vogue, 2018). People who identify as non-binary understand themselves as not fitting neatly and exclusively into one of the binary gender categories: male or female (Richards et al., 2017). They may have a single fixed gender position other than male or female, no gender, a combination of male and female or other genders, or move between male, female and other genders. They may disagree with the concept of gender entirely.

The word 'gender' has several meanings. Gender is used at a social level as well as an individual level. At a social level it may mean the system of regulatory

norms and inherent power relations within which an individual's identity may be understood:

> If gender is a norm, it is not the same as a model that individuals seek to approximate. On the contrary, it is a form of social power that produces the intelligible field of subjects, and an apparatus by which the gender binary is instituted. (Butler, 2004, p. 48)

Gender has at least three further meanings at the level of the individual. One of these is a person's internal sense of their gender, their gender identity, although this may always be related to how they are or seek to be understood by others (Nuru, 2014). The terms gender expression and gender presentation are often used to mean the gendered ways in which someone acts and behaves. However I want to distinguish between declaring an identity, and presenting that identity. These correspond to two different stages of transition in Devor's (2004) model: 'acceptance of trans identity', and 'transitioning'. In fact Devor includes an intermediary stage of 'delay before transition' making it clear that it is possible to declare one's trans identity without changing one's presentation, as I discuss in chapter 6. Gender presentation is not chosen in the moment; it will have been learnt and will have a level of consistency to be read as gender identity rather than play (Davis, 2009). The concept of gender presentation is complicated. Masculine and feminine as well as male and female are appropriate terms for the performance of gender, although camp and butch could also be appropriate, among other terms. It is possible to both present as male and be feminine. Putting these concepts together: someone who presents as a man may then perform their maleness in a masculine way, they will be a masculine man; alternatively, someone who presents as a man who then performs their maleness in a feminine way will be a feminine man. In the performance of gender, unlike other aspects of gender, it is widely accepted that people may have attributes associated with both binary genders. A man may be mostly masculine but also have some feminine interests, tastes or attributes. (Francis, 2010; Halberstam, 1998; Paechter, 2006a)

Although the heterosexual matrix, (discussed below), requires gender declaration, presentation, and identity to follow consistently from assigned sex,

in fact all these attributes can function separately (Butler, 1990/1999). For example, one could be assigned female at birth, declare oneself to be male, present as a feminine man and identify as female to oneself and intimate others. However, some combinations of identities and behaviours may not be generally accepted as authentic. For example, if someone describes themselves as male but presents as female this may be seen as just a performance. Alternatively they may be attributed an identity of drag queen or transvestite that does have authenticity. An individual's internal sense of identity is generally related to how they wish to be understood by others. If an individual's internal sense of their gender is different from their consistent presentation to others this will almost invariably be seen in some sense as inauthentic. Someone who was assigned male at birth, presents as male but identifies as female is likely to be seen as 'closeted', with an idea that they should 'come out'. (Butler, 1990/1999)

Discourse

The social understanding of gender, with its associated norms and regulation, is a discourse. My use of the term discourse is Foucaultian as described here:

> [Discourses are] ways of constituting knowledge, together with the social practices, forms of subjectivity and power relations which inhere in such knowledges and relations between them. Discourses are more than ways of thinking and producing meaning. They constitute the 'nature' of the body, unconscious and conscious mind and emotional life of the subjects they seek to govern. (Weedon, 1987, p. 108)

Lessa (2006, p. 285) usefully summarises Foucault's (1972) definition of discourse as: 'systems of thoughts composed of ideas, attitudes, courses of action, beliefs and practices that systematically construct the subjects and the worlds of which they speak'.

Discourses are not just ways of thinking and talking about things but also include ways of engaging with things. Ways of engaging with things can include social research topics or modes of enquiry, scientific and medical research, as well as ways of engaging socially with other people. As I will discuss later in this chapter, discourses are produced in power relations and also produce power

relations. Discourses that relate to identity also produce ways of thinking about identity and therefore determine largely how individuals think about their own identities. Gender is one of a triad of identities that are understood to be interrelated: sex, gender and sexuality. I will describe the heterosexual matrix below, one of the most prevalent discourses linking sex, gender, and sexuality, specifically sexual orientation.

The heterosexual matrix

The most widely accepted discourse relating to sex, gender and sexual orientation is the alignment that is required by the heterosexual matrix (Butler, 1990/1999). The heterosexual matrix (Butler, 1990/1999) describes the widely held view that sex, gender and sexual orientation are linked together naturally and inextricably. The alignment of sexual orientation to sex and gender is the core element of the heterosexual matrix. Men, who are male and masculine, are attracted to women, who are female and feminine. In addition, more significant to my discussion of sex and gender, the heterosexual matrix delineates the following: there are two dichotomous sexes, male and female; people are born into one and only one of the sexes; aligned with each of the two sexes is a gender; masculinity and maleness are seen to be naturally aligned with the male sex, and femininity and femaleness with the female sex. I will elaborate this further below; the disjuncture between gender and sex is particularly important for many trans people, including my participants (Fee, 2010).

The young people in my study did not conform to this widely held discourse of gender. In particular my participants did not conform to the heterosexual matrix in that the sex they were assigned at birth did not align with their gender. Their gender identity, their gender presentation or their declaration of their gender, might not match their assigned sex. For most of the young people in my study both their internal sense of gender and their gender presentation did not match their assigned sex. Many of my participants' sexual orientation was also brought into question by the heterosexual matrix. Butler says the identities of my participants cannot exist within the regulation inherent in the heterosexual matrix:

> The cultural matrix through which gender identity has become intelligible requires that certain kinds of "identities" cannot "exist" – that is, those in which gender does not follow from sex and those in which the practices of desire do not "follow" from either sex or gender. (Butler, 1990/1999, p. 24)

It is important to move beyond the binary construction of gender through the heterosexual matrix to enable other gendered lives to become more liveable:

> To assume that gender always and exclusively means the matrix of the "masculine" and "feminine" is precisely to miss the critical point that the production of that coherent gender is contingent, that it comes at a cost, and that those permutations of gender which do not fit the binary are as much a part of gender as its most normative instance. (Butler, 2004, p. 42)

My study is concerned with how the participants thought about their identities and how they might move their impossible or unintelligible identities towards possibility and intelligibility.

Gender is performative

Gender is widely understood as socially constructed, but its performative nature gives us a further understanding of the operation and establishment of gender, gender norms and regulation. Butler (1990/1999) introduced the idea of gender as performative, building on Austin's (1976) discussion of the performativity of speech acts. If a speech act, or indeed any other act, is performative it brings about effects in the world. For Butler (1990/1999, 1993) identities do not exist outside of or prior to their construction. We are not born with a gender that we then learn to perform according to social requirements. Instead gender is constructed through its own performance. Repeated performances construct an individual's gender for themselves and others.

> In the first instance, performativity must be understood not as a singular or deliberate "act", but, rather, as the reiterative and citational practice by which discourse produces the effects that it names. (Butler, 1993, p. 2)

Although individuals often experiences their identities as innate personal attributes, I consider that identities are always relational, that is identities are

developed in relationships rather than by individuals (Foucault, 2000). The performative effect of gender takes place through social interactions. Both an individual's performances of identity and the interpretation of those performances by others are necessary to establish the performative effects. When an individual repeatedly performs their gender, and that performance of gender is constantly reaffirmed by others, then that gender will become fully established as the individual's 'true' gender identity. At this point, the individual's gender will have become 'naturalised' (Goffman, 1976); it will be seen as natural in the individual rather than an individual achievement or a construction in the local culture of gender (Butler, 1990/1999). The work that has been put in to establish their gender will no longer be visible. The individual is likely also to have an internal experience of their gender as natural.

The performative process of naturalising gender means that most people experience their gender as fixed, authentic and innate. They generally also interpret others gender performance as representing a fixed and innate authentic identity. Most people will perform a gender that is in alignment with their assigned sex. Thus most people will also experience their sex as naturally in alignment with their gender, as is found (Steensma et al., 2013). It is worth stating that people who identify as trans also often experience their gender as fixed, authentic and innate despite the lack of alignment with their assigned sex (Devor, 2004; Monro, 2007; Prosser, 1998; Shrage, 2009). At a wider social level the reiteration and the continuing affirmation of gender performances will establish gender norms, and the relationship of gender to sex and sexuality, including sexual orientation. These will also be naturalised. Thus the heterosexual matrix becomes established and solidified through a performative process, and is perceived as natural. The performative process conceals the constructed nature of these identities and their matrix of co-construction.

> Performativity is not thus a singular "act," for it is always a reiteration of a norm or a set of norms, and to the extent that it acquires an act-like status in the present, it conceals or dissimulates the conventions of which it is a repetition. (Butler, 1993, p. 12)

An individual must continue to perform their gender, and have that performance of gender reaffirmed by others, in order for that gender to continue to be understood as the individual's 'true' gender identity. Many people's identities are made intelligible through this process, however some are not. If an individual's performance is not consistent or is not coherent according to gender norms their identity will not be recognised or established. The misrecognition may suggest that their identity is not legitimate, or that it does not appear to be authentic, that it is merely a performance. This may challenge the individual's identity, and they may feel that there is something wrong with themselves. In addition, the norms that allow recognition are the same norms that are used to regulate gender. The regulation of norms makes some identities unliveable as well as unintelligible and some people become subject to social exclusion or violence (Butler, 1990/1999, 1993, 2004).

Bodies, sex and gender

I would now like to consider in more detail the construction of gender and its relationship to sex and bodies. Bodies are the starting point for the construction of gender: bodies are the basis on which sex is constructed, and gender is a construction derived and elaborated from the binary construction of sex.

Bodies are constructed

The process of gendering starts with the categorisation of babies according to the composition of their bodies. Human bodies are often understood as having a physical reality that is not interpreted, in fact that is beyond interpretation. However, in fact, bodies are always culturally interpreted. One's body has many meanings beyond sex and gender that will influence one's identity. There are meanings associated with our bodies from being open to physical acts from others, pleasurable and otherwise, as well as disease and aging. All of these influence our identities including gender, and in intersection with gender.

> The body implies mortality, vulnerability, agency: the skin and the flesh expose us to the gaze of others but also to touch and to violence. The body can be the agency and the instrument of all these as well, or the site where "doing" and "being done to"

become equivocal. Although we struggle for rights over our own bodies, the very bodies for which we struggle are not quite ever only our own. The body has its invariably public dimension; constituted as a social phenomenon in the public sphere, my body is and is not mine. (Butler, 2004, p. 21)

Bodies are always seen through a social and cultural lens. People look at bodies from a position of knowledge that has been socially developed. This is perhaps clearer when we think about disability: we look at bodies expecting them to have a certain form, for example that they have two arms and two legs. If someone's body does not meet these norms we will categorise them as disabled.

... the idea of the material comes to us already tainted, containing within it pre-existing ideas about sexual difference. Butler suggests that we look at the body as a system that simultaneously produces and is produced by social meanings. (Fausto-Sterling, 2000, p. 23)

The physical substance of bodies is always understood through social interpretation. In particular, sex is interpreted through a culturally developed understanding of bodies (Butler, 1990/1999, 1993, 2004; Connell, 2002; Fausto-Sterling, 2000; Laqueur, 1990). This has been the case historically since at least the middle-ages, as both Fausto-Sterling (2000) and Laqueur (1990) show in their discussions of the historical development of the meanings of sex, gender and sexuality.

Our bodies are changed through social processes

Social understandings together with physical matter form our understandings of bodies. Our bodies are always understood through a social interpretation of their physical matter. In a continuing cycle our understandings of bodies are changed and elaborated by their social meanings. Alongside this, social understandings of bodies are also changed or elaborated through people's engagement with their own and others' bodies. Beyond this, social processes also have a physical effect on bodies, as Connell describes here:

It is clear that bodies are affected by social processes. The way our bodies grow and function is influenced by food distribution, sexual customs, warfare, work, sport, urbanization, education and

medicine, to name only the most obvious influences. And *all* these influences are structured by gender. So we cannot think of social gender arrangements as just flowing from the properties of bodies. They also precede bodies, form the conditions in which bodies develop and live. There is, as Celia Roberts (2000) puts it, a co-construction of the biological and the social. (Connell, 2002, p. 54)

Our bodies influence social understandings

Some theorists (Connell, 2002; Shilling, 2012) also attribute a level of agency to bodies. It is certainly the case that the physical nature of our bodies will affect our engagement with other people and the physical world.

> Bodies cannot be understood as just the objects of social process, whether symbolic or disciplinary. They are active participants in social process. They participate through their capacities, development and needs, through the friction of their recalcitrance, and through the directions set by their pleasures and skills. Bodies must be seen as sharing in social agency, in generating and shaping courses of social conduct. (Connell, 2009, p. 57)

The sense that bodies influence our engagement with the physical and social world is clear when we think of the effects of illness or disease on a person's body and the consequential impact that this has on their engagement with others or their capacity to engage with the physical world. An individual's body will also have an impact on their ability to perform gender. It may be that the physical construction of someone's body, for example large breasts, will make it impossible for them to perform some masculinities. Their performance of identity will affect how their identity is perceived and their identity may not be validated, or may be challenged, by others. This may then make it extremely unlikely that they will be accepted or understood by others as holding a male identity. This will have further effects. This may then impact their internal sense of their own identity. Finally, this process may reaffirm established body and gender norms, and therefore it may also influence social and cultural understandings of identity.

Construction of sex

Sex is constructed as natural: the assumption is that sex can be read directly from the body without any social meanings attached to the body. In this 'natural' construction there are two categories of bodies: male and female. Bodies are understood to have genitals that take one of two distinct and easily distinguishable forms. Based on the construction of the genitals it can be determined which of the two sex categories someone belongs to. The consequence of this construction is that we expect, when looking at a body, that it will immediately be recognised as falling into one of two dichotomous sex categories. However, this construction of sex does not in fact represent the reality of human bodies. There are a significant proportion of genitals that do not easily fall into one of the two binary sex categories. The binary nature of sex is not a physical reality but is in fact a social construction. (Butler, 1990/1999; Carrera, DePalma, & Lameiras, 2012; Hird, 2000; Kessler & McKenna, 1978)

Construction of gender

Gender is constructed on top of the naturalised construction of sex. Gender is understood as the social or cultural differences associated with the biological differences of sex (Connell, 2002; Moi, 1999). Because of the binary dichotomous construction of sex, gender is also constructed as dichotomous. The focus on gender is always on gender differences rather than similarities.

> Most discussions of gender in society emphasise a dichotomy. Starting from a presumed biological divide between male and female, they define gender as the social or psychological difference that corresponds to that divide, builds on it or is caused by it. (Connell, 2002, p. 21)

An immense range of characteristics is included in gender: personal appearance, personal interests, interest in children, career choices, character traits, learning styles, levels of activity, and risking taking are a few examples. Although some aspects of gender are seen as constructed there is still a strong 'common-sense' understanding that males and females are 'naturally' dichotomously different. There is considerable ongoing research looking at gender differences and their possible relationship to sex differences. There is

also a lot of popular literature describing gender differences as oppositional and directly related to innate biological differences (Fine, 2010).

The term 'gender' was coined to separate biological characteristics from social and cultural characteristics. In fact the two concepts are rarely disconnected from each other. The term gender is also often elided into sex in everyday use; people do not distinguish clearly between the two terms. As a consequence gender is constructed as inevitably linked in a binary fashion to the physically sexed body. The plethora of research and popular literature portrays the common understanding of gender differences as biologically based (Fine, 2010).

Consequences of the heterosexual matrix

Widely held discourses about sex are used to categorise individuals at birth. Most common discourses construct bodies as falling into two sexes: male and female. An individual must be categorised as belonging to one and only one of these two sexes. The sex of many babies is now predicted before birth through the use of ultrasound scans, although the baby's sex is still confirmed at birth. A baby's sex is usually determined from the physical formation of their genitals. The categorisation of babies into two sexed categories even before birth reflects the desire to describe and engage with babies as dichotomously gendered as soon as possible. Discourses of gender come into effect as soon as a baby's sex is predicted. Parents often prepare for girls and boys differently, choosing gendered clothing, toys and decorations for their unborn child.

Sex is constructed as having a fundamental role in society. Western societies are structured around divisions between male and female, and the related concepts of masculine and feminine (Paechter, 2007). Discourses about gender come in to play immediately after the categorisation of sex. There are immediate effects on how a baby is treated. There is usually an imposition of gendered clothing and colours on newborn infants. People also relate to babies differently according to their sex, holding girls and boys differently and making different levels of eye contact (Paechter, 2007). As children grow up they learn about sex and gender categories. Children see adults and other children around them

falling into two visible categories. Children learn that there are only two binary genders, and that they must belong to one and only one of them.

I use the term gender here as children, and indeed adults, usually see the presentation and behaviour of others falling into two categories. They do not often see other people's genitals, and if they do this occurs in specific limited situations. Therefore, children learn that other people fall into two categories based on presentation and behaviour, that is they fall into two gender categories. However, because of the requirements of the related constructions of sex and gender, the gender category that someone belongs to is generally assumed to be in a one-to-one correspondence with their physical sex. In this way children learn that there are two binary sex categories, that gender flows directly from an individual's sex and so there are also two corresponding binary gender categories. Because of this one-to-one correspondence between gender presentation and sex one can 'know' someone's sex from their behaviour and presentation (Burkitt, 2008; Fausto-Sterling, 2000; Paechter, 2007). In fact people who present as male will be attributed a 'cultural genital': a penis; and people who present as female will not (Kessler & McKenna, 2006).

In the process of learning that there are two binary gender/sex categories children also learn which category they belong to. This is through the ways that adults, and older children, interact with them. As children develop an awareness of their identity they seek to have it recognised by others. Most seek to fulfil what they understand to be the gender requirements of their sex. That is they 'know' they are male or female and choose to present themselves as male or female, this is at least in part to be understood as such. They will seek to conform to the heterosexual matrix. These understandings and behaviours feed back into the heterosexual matrix to reaffirm understandings of sex and gender.

Sex and its relationship with scientific enquiry

There continues to be a large amount of scientific enquiry looking for and at sex differences. The scientific questions that are asked and the scientific enquiries that are made often already construct bodies as 'normally' dichotomously sexed. (Fausto-Sterling, 2000; Fine, 2010). Recently much of this scientific enquiry has

focussed on differences in the brain (Bao & Swaab, 2011). There is research on the differences between men's and women's brains. There is also research into the similarities and differences between women's and gay men's brains, as well as heterosexual men's and gay men's brains (Bao & Swaab, 2011; G. Wilson & Rahman, 2005). This is despite many contradictory or inconclusive findings of sex-differences (Fine, 2010; Jordan-Young, 2010). Ongoing scientific research into the location of sex differences show their importance to society, otherwise the time and money for this scientific enquiry would be focussed elsewhere.

> ... the corpus callosum is a pretty uncooperative medium for locating differences. That researchers continue to probe the corpus callosum in search of a definitive gender difference speaks to how entrenched their expectations about biological differences remain. (Fausto-Sterling, 2000, p. 145)

The scientific focus on sex differences reinforces, or even creates, the view that sex differences have a large importance in society. These enquiries into the biological location of sexual differences further influence the social meanings attached to bodies. (Fausto-Sterling, 2000; Fine, 2010)

In addition to scientific enquiry often assuming dichotomous sexes, scientific findings are also interpreted to show dichotomous differences. For example testosterone and oestrogen are both present in most bodies, it is the balance of testosterone and oestrogen that differs, statistically, between men and women. This difference has been interpreted as a dichotomy, or an opposition, rather than a difference of degree. This is compounded by the way that testosterone is referred to as a 'male' hormone and oestrogen a 'female' hormone. (Fausto-Sterling, 2000; Kessler & McKenna, 1978)

The heterosexual matrix and transsexuality

The traditional understanding of transsexual is someone who has a gender identity that does not match the construction of the body: for example an individual who has been assigned female at birth but who feels themselves to be male. The heterosexual matrix constructs someone whose sex and internal sense of gender do not correspond as unintelligible (Fee, 2010). If someone's physical attributes and gendered behaviour do not correspond, for example if

someone with a conventionally male body presents as a woman, this may be seen as a performance, rather than the presentation of an authentic identity. The 20th century construction and treatment of transsexualism reflects the heterosexual matrix. More recent understandings of trans are more nuanced, and medical and social solutions more varied (Richards et al., 2017). However, the traditional construction of transsexualism is still current and felt to be appropriate for many trans people's sense of themselves. The medical treatment of transsexual people traditionally brings the sex of the body into alignment with the individual's gender identity. In keeping with the heterosexual matrix, gender and sex are both binary and should be aligned with each other. 'Treatment' since the 1970s has been physical interventions to the body rather than psychological interventions (Cromwell, 1999; King, 1996). Physical interventions may include hormones and surgery. 'Sex' hormones change aspects of the body including fat distribution, hair growth, and voice with either masculinising or feminising effects. Surgery may include the removal or augmentation of breasts and genital surgery to correspond with the individual's gender identity. Many surgical possibilities exist for people who identify outside the gender binary, and choices about physical interventions should take account of individual preferences and circumstances (Bellringer, 2017; Ralph, Christopher, & Garaffa, 2017).

Power

Power relations structure how people think and talk about identities. Ways of thinking and talking about identities in turn affect what identities are possible for people to understand or recognise. This works at both the level of the individual and for the individual in their interactions with others. An individual will understand their own as well as others' gender identities within the gender possibilities of which they are aware. This is both positive and negative. The relational nature of identity is positive as it enables recognition of one's gender by others, as well as oneself. It is also constraining, as this recognition of gender is only possible within established discourses of gender.

Power relations are implicated at every level of identity construction, as I will discuss below. I am using a Foucaultian model of power, which I will discuss in relation to identity construction, specifically sex and gender identities (Foucault, 1977, 1978, 1980, 2000).

> Foucault argued, power is widely dispersed, and operates intimately and diffusely. Especially it operates discursively, through the ways we talk and categorise people. It impacts directly on people's bodies as 'discipline', as well as on their identities, constituting subject positions that people take up. And it is productive not just repressive: it generates forms of life. (Connell, 2009, p. 77)

> This form of power that applies itself to immediate everyday life categorizes the individual, marks him by his own individuality, attaches him to his own identity, imposes a law of truth on him that he must recognise and others have to recognize him in. (Foucault, 2000, p. 331)

Power is not a resource that people are able to store and use. Instead power is an effect that is mobilised in the interactions between people and groups.

> Power is not something that is acquired, seized, or shared, something that one holds on to or allows to slip away; power is exercised from innumerable points, in the interplay of non-egalitarian and mobile relations. (Foucault, 1978, p. 94)

Allen has developed Foucault's idea of power and describes power as 'a relational effect of social interaction' (2003, p. 2). Allen (2003) does not see power as purely the effect of the interaction between people in a given moment; he is clear that access to resources will affect the ability of individuals to mobilise power. Allen understands that, in moments of interaction, the mobilisation of power will likely also involve the mobilisation of 'resource capabilities' (2003, p. 5) to support the exercise of power. The different skills and knowledge available to individuals can be understood as different resource capabilities that will support individuals in their mobilisation of or resistance to power (Hines, 2007).

Identity is constructed and experienced at three levels: internally, between individuals, and at a group or community level (Nuru, 2014). At an individual

level the individual experiences their gender identity as male or female, or less frequently as non-binary. The individual will mostly also present this identity. For most people their experienced identity fits closely with their presentation of identity. There will be a recognition of identity, or a misrecognition, in all power relations, based on presentation (Kessler & McKenna, 1978). Power will sometimes be mobilised with the main or sole intent of categorising someone's identity; at other times the recognition of identity will be an indirect effect of mobilising power.

When a baby is born they are very soon categorised as male or female. This is the first, or one of the first, mobilisations of power directed towards a baby and it is intended to categorise their sex. This will have a lifelong impact on that individual's identity. I contend that all interactions place someone in an identity, even if that is not the intention. This will happen because the individual mobilising power will be doing so in relation to someone they understand or assume to hold an identity. Many interactions include words that make it clear how someone's identity is understood, for example when a shop assistant calls the customer 'sir' or 'madam'. At other times this isn't stated, and may be unclear. For example if someone gives up their seat to someone else on a bus it may be because of a perceived gender or age difference or simply because the individual looks tired. The individual whose internal sense of identity is recognised in a mobilisation of power will have their established identity reaffirmed, or a 'new' identity may start to be established.

Foucault argues that power comes from below, that it is in all relationships, between individuals, in families and small groups and that these power relations construct the power relations that run through wider society (Foucault, 1978). The mobilisation of power is constantly changing, it does not come from one place, but rather from many changing places, and between different and unequal groups and people (Foucault, 1978). There will be power relations between individuals in a group, and wider processes of mobilising power within a whole group. For example a friendship group in school will interact in ways that build a shared recognition and approval of others' gender performance. This could involve discussion of group interests, perhaps a shared

interest in sport or music. Interactions with other group members, for example discussion of sport, will contribute to an individual's sense of identity including gender. These mobilisations of power will extend outside the group to other groups and will affect mobilisations of power in wider society. Power relations run everywhere from individual interactions at the bottom to wider whole society views.

Power and resistance

The mobilisation of power is never in one direction, as Foucault argues, there is never power without resistance. Power and resistance are not separate, they are part of the same relationship. Resistance is not external to power rather power and resistance are constantly working together or against each other (Foucault, 1978). Power is mobilised within every relationship, egalitarian or not, and the mobilisation of power from one party will demand an engagement from the other party. The other party may be in agreement, may resist or oppose the mobilisation of power. The same silences and discourses may at times be used to strengthen and at others to resist or oppose the mobilisation of power (Kelly, 2013).

Power/Knowledge

Power is often considered to be repressive. However power is also productive. People choose to engage with power because it enables them to bring about effects or give them pleasure.

> What makes power hold good, what makes it accepted, is simply the fact that it doesn't only weigh on us as a force that says no; it also traverses and produces things, it induces pleasure, forms knowledge, produces discourse. (Foucault, 2000, p. 120)

These mobilisations will also produce knowledge. The process of describing an experience to others establishes that experience as significant. A description of an interaction can then be established as shared knowledge.

Not only does power produce knowledge, knowledge and truth also produce power. Foucault argues that knowledge and power are always together and intertwined.

> There is no power relation without the correlative constitution of
> a field of knowledge, nor any knowledge that does not presuppose
> and constitute at the same time power relations. (Foucault, 1977,
> p. 27)

As Foucault elaborates, power and knowledge are consequently part of the same process:

> In short, it is not the activity of the subject of knowledge that
> produces a corpus of knowledge, useful or resistant to power, but
> power-knowledge, the processes that traverse it and of which it is
> made up, that determines the possible forms and domains of
> knowledge. (Foucault, 1977, p. 28)

This means is that there is a constant co-construction of knowledge and power. The mobilisation of power determines what is considered to be knowable. This knowledge then becomes a resource that enables or supports particular mobilisations of power. Other facts, or fictions, will not have the general status of knowledge, and will not support a mobilisation of power. Consider intersex bodies: power is mobilised through medical discourse, which establishes as truth or knowledge that these bodies are problematic. This knowledge may then be used to mobilise power to surgically change those bodies in order that they should no longer be problematic.

The establishment and naturalisation of an identity will 'form knowledge and produce discourse' about that identity (Foucault, 2000, p. 120). Intertwined with the establishment and naturalisation of an individual identity there will be a performative process establishing knowledge and discourse about that identity and perhaps identities more widely. Discourse is created at the same time as knowledge. Appropriate language and behaviour will be established and include how that identity is recognised, how it is referred to, and how to engage with people who identify in that way. In this way mobilisations of power may change or solidify identities and related knowledge and discourse.

Disciplinary power

As well as a constant reiteration of norms, the performative process of establishing gender involves surveillance and discipline to regulate those

norms. Foucault (1977) understands this as a consequence of what he calls disciplinary power. According to Foucault, this supervising process is one of binary division. The process puts people into two categories, normal and abnormal:

> Generally speaking, all the authorities exercising individual control function according to a double mode; that of binary division and branding (mad/sane; dangerous/harmless; normal/abnormal); and that of coercive assignment, of differential distribution…The constant division between the normal and the abnormal, to which every individual is subjected, brings us back to our own time, by applying the binary branding and exile of the leper to quite different objects; the existence of a whole set of techniques and institutions for measuring and supervising and correcting the abnormal brings into play the disciplinary mechanisms to which the fear of the plague gave rise. (Foucault, 1977, p. 199)

These binary divisions are applied to the sexing of bodies, as well as the idea of appropriate genders. Intersex bodies are bodies that fall outside of established norms for binary sexed bodies and may be seen to require surgical or medical correction to bring them, ideally, within those norms. Trans people, whose bodies and identities may not correspond to their sex assigned at birth, have their identities accepted and regulated differently in different situations. They are more likely to have their self-defined identity accepted in mixed-sex rather than sex-segregated spaces, such as toilets and changing rooms. In sex-segregated and heterosexual sexualised situations it is important that the shape of one's genitals conforms to one's gender presentation. Regulation takes different forms depending on the genders of those involved. For example the presence of trans women will be policed by other women in women's toilets, but trans women are more likely to suffer violence from cis men. (Schilt & Westbrook, 2009; Westbrook & Schilt, 2014)

The regulatory process of discipline and surveillance of gender norms becomes a self-regulatory process. Individuals consider their own gender performance in relation to gender norms. This follows Foucault's idea of the panoptic regime, which he describes using the metaphor of the Panopticon (Foucault, 1977). The

Panopticon was a prison planned by Bentham the intention of which was to change the minds of criminals rather than simply punish them. The structure of the prison allowed all inmates to be visible at any time to a single guard while being unaware of whether or not they were being observed. To avoid punishment the inmates will control their behaviour at all times. They will subject themselves to the process of disciplinary power, observing and altering their behaviour to ensure that it meets the required norms. The intention is that the effect of the self-regulation will bring about permanent changes to the individual. This is a performative process: the expectations of the individual and the reiteration of their behaviour within accepted norms will become naturalised. The prisoner will both think and behave in accordance with the expected norms of behaviour.

> He who is subjected to a field of visibility, and who knows it, assumes responsibility for the constraints of power, he makes them play spontaneously upon himself; he inscribes in himself the power relation in which he simultaneously plays both roles; he becomes the principal of his own subjection. By this very fact, the external power may throw off its physical weight; it tends to the non-corporal; and, the more it approaches this limit, the more constant, profound and permanent are its effects: it is a perpetual victory that avoids any physical confrontation and which is always decided in advance. (Foucault, 1977, p. 202)

The panoptic schema applies to many social institutions, for example hospitals, schools, and workplaces, as well as prisons. The purpose of the panoptic schema is different in the different institutions, but will bring about changes to the mobilisation of power in society:

> [The Panopticon] programmes, at the level of an elementary and easily transferable mechanism, the basic functioning of a society penetrated through and through with disciplinary mechanisms. (Foucault, 1977, p. 208)

My interest in the disciplinary and panoptic regimes is that gender regulation penetrates every interaction in society, with individuals consequently regulating their own gendered behaviour. The processes of surveillance, regulation and self-regulation are very apparent in children and young people

who are, perhaps, more actively developing their gender identity. These processes are still important for adults. As I have already said, identity, including gender identity, is a source of pleasure for many people, as it becomes a source of recognition for and between individuals and within a group. However, alongside the pleasure that comes from recognition, there is also regulation and self-regulation. Individuals will monitor how they present themselves to ensure that their identity is recognised. The regulation that they receive from others may come from tacit approval or disapproval, or it may be active regulation: perhaps being told a piece of clothing is not appropriate for one's gender. People enjoy, and therefore seek, recognition of their identity and with it the feeling that others understand them. As a result people are often responsive to low level regulation. They will change how they talk or present themselves aiming for their identity to be recognised and understood. In part through processes of regulation, but also through shared practice, groups often develop shared ways of presenting their identities. These will be recognised by group members to signal membership of a group, they will also indicate to people outside the group that they are outsiders. I will discuss this in more detail in chapter 3.

Benefits, constraints and possibilities

It is important that we recognise that for most people there are benefits to identity norms. For most people their identity, including gender, is a source of pleasure. People often experience pleasure just from 'being' the person they are. It may be that the pleasure people experience comes from the recognition and intelligibility that are given by the norms associated with their identity: people feel understood by others. Recognition also allows for a sense of community membership, or a sense of belonging (Paechter, 2007). I will discuss this further in chapter 3.

However there are also constraints. People cannot freely enjoy or experiment with their gender; it is always performed within the constraints of gender norms, and subject to regulation. Among other things, the performance of gender is constrained by the physical possibilities of bodies and the social

understanding of those physical bodies. We are always embodied in the world and so our bodies are part of our engagement with the world. As Butler says: 'The body has its invariably public dimension; constituted as a social phenomenon in the public sphere, my body is and is not mine' (Butler, 2004, p. 21)

Gender can be changed

Gender, gender norms and gender identities, are created and recreated through a performative process. Without the continuous reiteration of gendered performances, gender would not be naturalised. It would not appear to be fixed and authentic. For gender to continue as it is it must be made to continue: it must be continually produced and reproduced. This means that there is the possibility for us to change gender, and to change its significance. (Connell, 2002)

The process of performing and engaging with gender produces the apparent reality of gender categories and gender differences. The performative nature of gender means that most people experience their gender as innate and fixed. When people are 'being themselves' they are also performing their gender identity. This will often be a taken-for-granted performance; people will perform within the gender norms that they have absorbed without thought (Kessler & McKenna, 1978). However these are still performances, they are never identical; they are always in relation to other people, even if those others are imaginary.

> If gender is a kind of doing, an incessant activity performed, in part, without one's knowing or without one's willing, it is not for that reason automatic or mechanical. On the contrary, it is a practice of improvisation within a scene of constraint. (Butler, 2004, p. 1)

Because gender is a process of improvisation within given norms, within this process there will always be subtle changes, influenced by wider social changes as well as localised gender relations. The performative process that is gender also has its failures. These failures will lead to regulatory processes, but they may also allow possibilities of change. Drag, butch, femme and trans can be seen

as gender failures: they are all gender performances that fail to meet gender norms. These alternative performances of gender can make visible the constructed nature of gender and show that there are other possibilities. These failures show that gender norms may be questioned, challenged or subverted (Butler, 1990/1999, 1993, 2004). They may also show possible ways to do this.

> If gender is performative, then it follows that the reality of gender is itself produced as an effect of the performance. Although there are norms that govern what will and will not be real, and what will and will not be intelligible, they are called into question and reiterated at the moment in which performativity begins its citational practice. … They can be exposed as nonnatural and nonnecessary when they take place in a context and through a form of embodying that defies normative expectation. What this means is that through the practice of gender performativity, we not only see how the norms that govern reality are cited but grasp one of the mechanisms by which reality is reproduced *and* altered in the course of that reproduction. (Butler, 2004, p. 217)

The future of gender

There are desires to 'undo' gender and change gender norms (C. Connell, 2010) and gendered relations, for example to prevent violence against women (Jewkes, Flood, & Lang, 2015) or make gendered relations less oppressive (Deutsch, 2007; Haslanger, 2017). However this is often restricted to norms of behaviour, interests, and sexuality and many people do not see any issue with the 'common-sense' sex and gender categories of male and female. Moi (1999) argues that the binary categories themselves do not constrain and regulate people's lives, and that the norms governing gender rather than gender categories need to be changed or removed (Moi, 1999). Haslanger (2000) questions whether the construction of identity categories necessitates oppressive norms, and suggests we ask if we want identity categories, and what we might want those categories to 'do'.

Moi further asserts that it is usually possible for people who identify as trans, and those people who are ambiguously sexed, to be unproblematically understood within the gender binary categories of male and female (Moi, 1999). While many trans and intersex people may prefer to be unproblematically

understood within binary sex and gender categories, there are also many who do not (Preves, 2003; Richards et al., 2017). Some people would like gender categories themselves to be dismantled, or to lose their significance. Others would like wider recognition of non-binary categories (Beemyn, 2015; Stachowiak, 2017). Fausto-Sterling (2000) argues for a future where the reality of gender variability is supported by science rather than the current practice of confirming the gender binary through medical interventions. This could mean that in the future gender difference would lose its significance. This would also mean that the resources associated with gender power/knowledge could not be easily mobilised to regulate gender norms.

> I imagine a future in which our knowledge of the body has led to resistance against medical surveillance, in which medical science has been placed at the service of gender variability, and genders have multiplied beyond currently fathomable limits. Suzanne Kessler suggests that "gender variability can ... be seen ... in a new way – as an expansion of what is meant by male and female." Ultimately, perhaps, concepts of masculinity and femininity might overlap so completely as to render the very notion of gender difference irrelevant. (Fausto-Sterling, 2000, p. 101)

It is also possible to consider that rather than dismantling gender or creating new gender possibilities that in fact we need to recognise and legitimate the gender identities that already exist. These gender identities need to be legitimated within legal and medical practices as well being socially and culturally accepted in order to become liveable.

> ...it is not a question merely of producing a new future for genders that do not exist. The genders that I have in mind have been existing for a long time, but they have not been admitted into the terms that govern reality. It is a question of developing, within law, within psychiatry, within social and literary theory, a new legitimating lexicon for the gender complexity that we have always been living. Because the norms governing reality have not admitted these forms to be real, we will, of necessity, call them new. (Butler, 2004, p. 219)

Legitimation is always double edged

The process of legitimating identities legally and medically is not straightforward. Trans people have gained medical and subsequently legal recognition since the late 20th century. Trans people have considerably more social recognition as well having legal rights and access to medical interventions to support them in establishing and maintaining their identities. However this is not without loss. Within many medical systems an individual needs a pathologising diagnosis of gender dysphoria, previously gender identity disorder, before acceptance for medical procedures, and legal recognition of their gender.

Gender dysphoria has replaced gender identity disorder in the DSM 5, and is intended to be less pathologising while also offering social recognition and social and medical benefits. However for a diagnosis of gender dysphoria there must be 'significant distress'. As Davy (2015) discusses, this is problematic in several ways. It may limit access to medical interventions for trans people who do not experience distress. Although trans people may choose to focus on distress to access interventions, constructing trans people as experiencing distress is a misrepresentation of many trans people's lives. Butler describes the problems of diagnosis of gender identity disorder:

> What is most worrisome, however, is how the diagnosis [of Gender Identity Disorder] works as its own social pressure, causing distress, establishing wishes as pathological, intensifying the regulation and control of those who express them in institutional settings. … how do we return to the vexed issue of what the diagnosis also offers? If part of what the diagnosis offers is a form of social recognition, and if that is the form that social recognition takes, and if it is only through this kind of social recognition that third parties, including medical insurance, will be willing to pay for the medical and technological changes that are sometimes desired is it really possible to do away with the diagnosis altogether? (Butler, 2004, pp. 99-100)

While a diagnosis offers legitimation, problems remain with the diagnosis of gender dysphoria. Access to interventions is highly regulated and trans people are constructed as distressed. Denmark and Sweden have determined that trans

people are not mentally ill (The Local, 2017; Worley, 2017). Advocates in several countries have determined that psychiatric involvement should not be required for people wishing to change their gendered body, or their legal gender status (Davy, 2015). In the US the situation has an added dimension as most healthcare is paid for through insurance. The latest version of the ICD, ICD 11, has removed the category of gender identity disorder, and put 'gender incongruence' in the category of sexual rather than mental health (American Psychiatric Association, 2009). I would argue that the inclusion in any diagnostic classification remains pathologising, but is complicated by some people's need for healthcare to support their identities.

Possible reinforcement of the gender binary

Transsexuals, as they are understood now, did not exist prior to the development of modern medical understandings and technologies. Although there is a tradition of people living as and understanding themselves to be 'the other sex' this was not, and could not be supported by medical interventions until the 20th century. Those people who established the right to medical interventions to change their bodies to fit their sense of identity established two things. First, they established a new identity of transsexual: the word and the concept did not exist before the mid 20th century. They also established that people who identified as transsexuals could access medical procedures to bring their physical bodies in line with their gender identities. However, the original cross-gender construction of transsexuality again was double-edged; transsexuals were expected to conform, as much as medically possible, to the gender binary.

> A transsexual's drive to have his/her body conform with his/her psyche is so strong that many seek medical aid to transform their bodies hormonally and ultimately surgically, by removal of their gonads and transformation of their external genitalia. The demands of self-identified transsexuals have contributed to changing medical practices, forcing recognition and naming of the phenomenon. Just as the idea that homosexuality is an inborn, stable trait did not emerge until the end of the nineteenth century, the transsexual did not fully emerge as a special type of person until the middle of the twentieth. Winning the right to surgical

and legal sex changes, however, exacted a price: the reinforcement of a two-gender system. By requesting surgery to make their bodies match their gender, transsexuals enacted the logical extreme of the medical profession's philosophy that within an individual's body, sex, and gender must conform. (Fausto-Sterling, 2000, p. 107)

Like the binary gender identities of male and female, the identity of transsexual is also performative. People whose gender identity does not match their assigned sex now have an identity with which to identify. People may understand themselves as transsexual and wish to change their bodies to conform to the 'other' gender (Fausto-Sterling, 2000). It is becoming more frequent that people whose gender identity does not match their assigned sex identify reflect on and make choices about their bodies and identities in relation to broader trans and non-binary identities, although traditional transsexual identities and bodies continue to hold more legitimacy in wider society.

Historically transsexuals were encouraged to be stealth, to conceal their previous sex and live their life entirely in their 'new' identity. Trans identities are now understood as authentic and to have legitimacy, although this is particularly for those whose appearance conforms to binary gender norms (Roche, 2018). People whose gender identities do not align with their originally assigned sex now have more social and medical choices. They may choose some medical interventions or none, rather than expecting and being expected to follow a pattern of hormones followed by surgery. People may identify as male, female, trans and/or non-binary.

Trans identities

The traditional binary models of both gender and of transsexualism do not account for many people's identities, particularly people whose gender is fluid or who identify outside the gender binary. In addition the traditional transsexual model constructs a new binary opposition of cis and trans. Queer theoretical and poststructural understandings of gender allow for the recognition of identities that are beyond these fixed binary constructions. Trans theorists (Bornstein, 1995; Stone, 1991; Stryker, 1994) and later queer

theorists (Butler, 1990/1999, 1993; Halberstam, 1998, 2005) have put forward understandings of identity as unstable, multiple, and fluid, which allow for the legitimation of non-binary gender identities. Indeed trans theorists suggest that living gender in unintelligible and transgressive ways will challenge binary gender (Bornstein, 1995; Stone, 1991; Stryker, 1994).

However there have been many critiques of both queer and poststructural theory and research in relation to trans identities.

Misrepresentation of transsexual experience of fixed and embodied and innate gender

Many trans people experience their gender to be the 'other' binary gender from that assigned at birth. This identity is experienced as fixed and innate. They understand their 'true self' as their experienced identity, and that their 'true sex' is waiting to be uncovered (Prosser, 1998). Queer theory is seen to misrepresent these trans identities.

For many trans people, as well as innate and fixed, their experience of their identities is deeply embodied. There has been considerable criticism of queer theorists for disregarding many people's sense of their gender as related to their embodiment. Butler, particularly *Gender Trouble* (1990/1999) first published in 1990, has been critiqued as understanding the body as a construction with 'no essential reality' (Monro, 2000). For many trans people their experience is deeply embodied, and they simply experience themselves as born in the 'wrong body'. Many experience pleasure in their postsurgical bodies and enjoy the increased alignment of their body and identity (Beemyn & Rankin, 2011; Chu, 2017; Nuru, 2014). The lack of attention to the body has been challenged by many theorists and researchers (Elliot & Roen, 1998; Johnson, 2007; Prosser, 1998). Connell (2010; 2012) understands bodies to have agency and reports her research participant to have experienced the impulse to transition as coming directly from her body. Whether or not bodies are understood as agential, this experience shows how much we must pay regard to gender and trans as embodied identities.

The body and identity are co-constructed (Connell, 2012). The body, its presentation, and its assumed morphology, may be resources in the performative establishment and authentication of identity. However the body may also contribute to the 'failure' of recognition as 'authentic', unless gender discourses change. Trans identities that are, increasingly, seen as legitimate correspond to bodies whose presentation conforms to binary gender norms, and trans people must manage the challenges of embodied recognition.

Lack of attention to the everyday realities of trans lives

Queer and trans theorisation have been further criticised for their lack of attention to people's lived experience (Elliot, 2016; Namaste, 2000, 2009). The theorisation of 'new' gender possibilities is seen to disregard many trans people's everyday lives. Gender presentation that does not conform to gender norms can result in identities that are not recognised. Presentation that challenges gender norms can result in marginalisation and violence.

The reality of many trans people's lives and identities has been made invisible through lack of attention to the specificities of trans experience. As Namaste explains, looking at violence against trans women as violence against women will render trans women's experiences invisible (Namaste, 2000). There is further criticism that trans people's experiences are homogenised and that there is a lack of research and theorisation about the intersectionality of trans and other identities, particularly non-white identities. This may result not only in a lack of understanding of the diversity of trans lives, but may also further marginalise trans people who identify as other than white (Roen, 2001).

Making transsexual lives invisible

Homogenisation applies also to understanding all trans lives as seeking to disrupt gender norms, when in fact many people who identify as transsexual are in fact seeking to conform to gender norms and embodiment. The valorisation of transgressive gendered lives is seen to devalue those lives and identities that do not seek to be transgressive (Elliot, 2009; Namaste, 2000; Prosser, 1998). Queer theorists have been criticised for using the trope of the transsexual for

their own ends: to destabilise binary identities and establish identity as fluid and multiple.

Making transsexual lives visible

Namaste (2000) acknowledged the benefits of a poststructural understanding of identity, but also understood the violence of the invisibility of some trans lives that was supported by the lack of empirical work looking at the specifics and differences of trans experiences. Namaste proposed a 'poststructural sociology' in which a poststructural understanding of identity would be linked to empirical work to understand trans lives, and particularly differences. More recently, other theorists and researchers have proposed a 'sociology of trans' and there has been recent empirical work that looks at the lived experiences of trans people (Hines, 2007; Monro, 2010). However this work continues to be critiqued as absorbing transsexual identities within the broader category of trans and disregarding the specificities of trans lives (Elliot, 2009, 2016).

Conclusion

The purpose of this chapter is to situate my research within a theoretical framework. I understand gender and trans identities to be performatively constructed and unstable. My research participants are actively engaged in transforming and establishing their identities as well as discourses of gender and trans, although they may, like many other trans people, experience their identities as innate rather than constructed. However, as I have discussed, this is the subject of much debate. Some trans people understand their true self as their experienced identity, and that their true sex is waiting to be uncovered (Prosser, 1998). Many other trans people understand their gender to be socially constructed and that they should make the best use of medical and social resources to enable their lives to be liveable (Faye, 2018).

I understand identities to be performatively established and naturalised. Trans identities are constructed in relation to gender identities, which in turn are constructed in relation to sex as an identity. Sex itself is a construction coming from an understanding and construction of bodies as dichotomously sexed. The constructed nature of identities becomes invisible, through a performative

process, and the process of their construction becomes difficult to challenge or resist. Identities are constructed within power relations. Gender is subject to regulatory processes, people whose gender performances fall outside established norms may be unrecognised or marginalised. As a result people discipline themselves, often seeking a performance that conforms to gender norms. As such genders and discourses of gender and trans are therefore resistant to change.

However there are 'failures' of gender: identities and performances that fall outside gender norms. The performance and recognition of non-binary and fluid genders may lead to the establishment of alternative discourses of trans and gender. It is unclear what may happen to gender in the future: whether further identities may come into existence and be recognised, or whether gender may lose significance as an identity category.

While I use a poststructural framework I seek to pay attention to the specificities, identities and embodied experiences of my research participants. Rather than incorporate transsexual understandings within trans theorization, I wish to examine the diversity of identities and experiences. It is important that non-binary and fluid identities are not valued over fixed binary identities, both cis and trans. While the existence of further genders or identities may allow for the recognition of more people's identities and lives, it will not mean that gender inequalities or gender oppression are eradicated, and we must pay attention to the quality as well as the existence of lived identities.

3   Identities within a community of practice

The uses of a community of practice framework

My study is an ethnography of a youth group and concerns the establishment of gender identities and trans identities, as well as the establishment of new understandings of gender within and beyond the group. All ethnographic writing is intended to communicate a comprehensive understanding of a community to outsiders. As such it always requires detailed description (Geertz, 1973). This will likely include description of the community members and their relationships, routines and rituals, and significant artefacts (O'Reilly, 2009).

However, my focus is the changing and developing identities within 4D, the youth group. A community of practice is understood to involve changing identities, as well as producing localised effects including knowledge, language, and performances of identity (Lave & Wenger, 1991; Wenger, 1998). I will use a community of practice framework as it provides tools to look at the production of identities and the performance of those identities. It also suggests a focus on the development and changes to local knowledge and language within a community.

The term 'community of practice' describes a community of people who are mutually engaged in a shared practice, working together in shared ways towards shared objectives (Lave & Wenger, 1991; Wenger, 1998). The young people in 4D engaged with each other with a shared purpose, and so the group functioned as a community of practice (Wenger, 1998). The value of a community of practice framework is that it considers a social group or community to develop through the engagement of the members:

> The value of the notion communities of practice ... lies in the fact that it identifies a social grouping not in virtue of shared abstract characteristics (e.g. class, gender) or simple co-presence (e.g. neighborhood, workplace), but in virtue of shared practice. In the course of regular joint activity, a community of practice develops ways of doing things, views, values, power relations, ways of talking. And the participants engage with these practices in virtue of their place in the community of practice, and of the place of the

community of practice in the larger social order. (Eckert, 2006, p. 683)

The engagement of the members of a community of practice is productive: it produces knowledge and language, as well as identities and performances of identity (Mills, 2011). Identities are developed within and produce power relations between the group members as well as beyond the group. A communities of practice framework suggests a detailed enquiry into the processes within the youth group to understand changing identities, and understandings of identity within the group (Lave & Wenger, 1991).

Changing of identities is intrinsic to a community of practice (Lave & Wenger, 1991). Members change identity as they develop expertise in the community; this is an ongoing process. Newcomers join the community and are accepted in the group as legitimate new members. Wenger (1998) calls these newcomers 'legitimate peripheral participants'. They are accepted in the group and are allowed to see and participate in at least some of the group practices. As these newcomers learn about the group they move to become more central members of the group.

As I have described in chapter 2, identities are constructed in power relations between people and groups (Foucault, 2000). These power relations also produce knowledge, that is power/knowledge (Foucault, 1978). As well as changing identities within 4D, my study is concerned with how the young people understood trans and gender identities, and how this knowledge was developed and deployed within the group. This in turn affected the power relationships between members of the group. This focus also fits well within a community of practice framework. In a community of practice members engage with each other to negotiate meanings significant to the practice of the community. As community members engage with each other they establish and re-establish knowledge as well as learning about the practice. This knowledge in turn produces and reproduces power relationships in the community.

The identity work that the members of 4D were doing was unusual; it was unlike the identity work considered by many researchers using a communities

of practice framework (Clark, 2012; Eckert, 1989; Eckert & McConnell-Ginet, 1992; Jones, 2012; Paechter, 2003, 2007). The members of 4D were actively seeking to establish alternative identities to the ones they had been accepted as holding. In fact, in my study, many of the participants were actively seeking to establish an identity constructed in binary opposition to the identity they were assigned at birth: many of those assigned female at birth sought to be understood and accepted by themselves and others as male, and many of those assigned male at birth sought acceptance as female. Other 4D members were seeking to establish a gender identity, or a concept of gender that remains unavailable, or not understood or accepted, in many wider communities. For example, a fluid or non-binary gender identity was and remains unaccepted, and in fact inconceivable, in many communities.

In most communities of practice, once peripheral members have moved to more central membership they remain as central members. For example, Lave and Wenger's (1991) original work looked at apprenticeship learning in communities of practice such as tailors and midwives. Once the tailors and midwives had moved to become central members in the community of practice they generally remained as central members during their working life. Experienced tailors became master tailors with a high level of status and ability to mobilise power within the community. 4D was unusual in that there was an expectation that central members were on an outbound trajectory. This was in part because of the membership requirements of the group: participants had to be 25 or under. In fact, most young people moved out of the community once they had established their preferred identity or had transitioned sufficiently away from their original identity, although there was no explicit requirement for this (see chapters 8 and 10).

Wenger (1998) identifies three features that a community of practice must have: mutual engagement, joint enterprise and shared repertoire. I will discuss these requirements in the following section of this chapter. I will consider in detail how the practice in 4D met these requirements in chapter 7.

Mutual engagement, joint enterprise and shared repertoire

Mutual engagement

The practice of a community includes the everyday processes of doing things within the community. More importantly it also includes the interactions and negotiations of the community members with each other as they carry out the community activities. The practice is concrete; it is produced through the members' engagement with each other. It is through the mutual engagement of community members that everyday processes are established and given their shared meaning (Li et al., 2009).

> Practice does not exist in the abstract. It exists because people are engaged in actions whose meanings they negotiate with one another. (Wenger, 1998, p. 73)

Teachers in a school, for example, could constitute a community of practice. Discussions between teachers about managing pupils would be part of their mutual engagement. The teachers' discussions about school processes will establish the everyday practices within the school, and their significance.

Wenger sees the negotiation of meaning as the principal outcome of the mutual engagement of community members (Wenger, 1998). Members must all be actively involved with each other in the practice of the community, through social engagement either of words or actions. The meaning of aspects of the practice, for example routines, objects, and language is negotiated through this social interaction. This negotiation is not necessarily consensual but may be conflictual and unresolved (Mills, 2011).

Communities of practice are not homogenous. In fact not only are they not homogenous but by their very nature they accommodate diversity. As I have said, the negotiation of meaning in a community of practice may be conflictual and unresolved. The members are diverse to start with but the process of negotiation intrinsic to the establishment of the joint enterprise does not only create similarities but will also create disagreements. Disagreements as well as agreements are necessary to the process of negotiating meaning and as a result

a level of diversity is accommodated within the practice (Mills, 2011; Wenger, 1998)

Joint enterprise

The joint enterprise is the shared purpose that community members have negotiated and established through their engagement with other community members.

> Negotiating a joint enterprise gives rise to relations of mutual accountability among those involved. These relations of accountability include what matters and what does not, what is important and why it is important, what to do and what not to do, what to pay attention to and what to ignore, what to talk about and what to leave unsaid, what to justify and what to take for granted, what to display and what to withhold, when actions and artifacts are good enough and when they need improvement and refinement. (Wenger, 1998, p. 71)

Individual community members have different positions within the group and the joint enterprise will hold more significance for some individuals than for others. The joint enterprise, like all aspects of the group practice, is not fixed but is being continually elaborated, consolidated or changed. The ongoing negotiation of the members brings about changes to the practice. In 4D, this is most clearly seen in the shared repertoire and the reifications that are produced by the community. I will discuss these in chapters 8, 9, and 10.

Shared repertoire

The shared repertoire consists of the shared resources the group has developed through its practice. These resources support the group practice, and can include local language, jokes and stories, but also routines and significant objects among other things. Shared language, for example, gives individuals readily available ways of communicating. This in turn changes and develops the group practice and the shared repertoire. The shared repertoire is always changing or being re-established. (Lave & Wenger, 1991; Wenger, 1998). The shared repertoire will give members a sense of a shared identity and will make them identifiable to each other (Mills, 2011). It will also make the community

members identifiable as part of a community to others outside the group. An outsider interacting with community members will be aware that insider knowledge is being demonstrated and they will be understood and understand themselves as outside or peripheral to the group. Newcomers to the group will not necessarily have sufficient knowledge to engage fully, and will be visible as newcomers. However if they are accepted as legitimate newcomers they will be positioned as 'legitimate peripheral participants'. A legitimate peripheral participant is allowed access to the practice, including the shared repertoire. Through this they will learn community specific words and knowledge. Central members may also explain the practice and shared repertoire to them.

As the shared repertoire develops to facilitate communication, investigating the nature of the shared repertoire will show what is considered important to communicate within the community. This will show the attributes and behaviours that are valued within the community. In communities engaged in the construction and performance of gender, the shared repertoire will most strongly include ways of performing gender:

> Shared repertoire here consists of ways of performing the self, such as styles of walking, talking, dressing and behaving, that are common to group members. To be accepted as 'fully masculine' in a particular social grouping, one must therefore display certain characteristics and behaviours; without this one is not seen as fully part of the group. Hence it is not simply a matter of claiming membership of a particular community of masculinity or femininity; one has to be accepted as a legitimate participant by those who are already members. Identity can be seen as a competent and convincing performance of a particular role. It is defined not just internally by the individual but externally by the group's inclusive or exclusive attitude towards the individual. (Paechter, 2007, p. 23)

Participants in a community of practice must have sufficient legitimacy to learn the practice if they are to become more central members of the community. Increasing knowledge of the shared repertoire establishes increasing legitimacy within the community and with it more central membership.

Reifications

> I will use the concept of reification very generally to refer to the process of giving form to our experience by producing objects that congeal this experience into "thingness". (Wenger, 1998, p. 58)

Reification is a process through which objects or events come to represent concepts within a community of practice. Reifications are created through the participation of members and the negotiation of meanings within the practice (Tusting, 2005). However reifications are also part of the practice and enable participation. I will consider here Wenger's concept of reification (1998). In chapters 9 and 10 I will look in detail at the reifications that have been constructed in 4D. I will also look at the effects of these reifications in and beyond the group.

Reifications, like local language or jargon, become a resource for communication between participants (Farnsworth, Kleanthous, & Wenger-Trayner, 2016). Local language and reifications exist because of a history of negotiating meaning. Through negotiation, reifications already have high levels of shared meaning in the local community and they may then become a shorthand way of communicating. However, reifications have disadvantages as well as benefits (Wenger, 1998). They are a resource for communication, but their meanings have been negotiated in the past and the objects or processes may no longer hold the same significance in the community. People may rely on established reifications and jargon to communicate within a community of practice rather than negotiating and developing the meaning of other objects or language that may be important to them as individuals. Reifications may over-generalise what is important in a community, rather than represent any diversity.

Some items of clothing and make-up are examples of reified objects in gender communities (Paechter, 2003). They have acquired meanings beyond their physical substance and may be used for gender attribution, correctly or incorrectly, or result in gender regulation. A man wearing knickers rather than pants will be understood to be performing gender in a particular way, even if only to himself.

> ...the concept of reification suggests that forms can take a life of their own, beyond their context of origin. They gain a degree of autonomy from the occasion and purposes of their production. Their meaningfulness is always potentially expanded and potentially lost. Reification as a constituent of meaning is always incomplete, ongoing, potentially enriching, and potentially misleading. The notion of assigning the status of an object to something that is not really an object conveys a sense of mistaken solidity, of projected concreteness. It conveys a sense of useful illusion. The use of the term reification stands as both a tribute to the generative power of the process and as gentle reminder of its delusory perils. (Wenger, 1998, pp. 61-62)

Events and processes as well as objects may be reified. Some events in an individual's life, inside and outside a community of practice, may be given particular significance and become reified. Starting primary school has a high level of significance to many children and parents. It is seen as a time when children are moving from dependence to greater autonomy, with greater responsibility for themselves and their behaviour. Starting primary school has been reified and can be seen as a rite of passage. Rites of passage mark as legitimate someone's new or changing identity within a community. They mark them in a way that is understood by the community not just the individual, which will have implications for their future trajectory within that community. I discuss rites of passage further in chapter 9. Children who have begun primary school will be included in the community of primary school children, and will be on a trajectory to becoming more central members of the community; they will be able to explain to younger children how school works and how to behave as primary school children.

Analysis of both the shared repertoire and reifications build an understanding of the localised nature of the practice within a community. The shared repertoire and reifications also tell us what is important to communicate within the practice. Local knowledge that has been established within a community may indicate discourses that are established within the group. Reifications are similar to the shared repertoire; they have developed through the mutual engagement of the participants as a result of what is important to the participants. The process of reification is performative (Butler, 1990/1999).

Through reiteration the reified object is given meanings beyond itself and this process then becomes invisible, or naturalised.

Negotiating, establishing and changing identities

In this section I discuss three aspects of identities in communities of practice. First, everyone is a member of multiple communities of practice. The multiple identities and the negotiation involved in maintaining these identities are referred to as the nexus of multimembership. Second, members join the practice as peripheral participants and move to greater centrality as they learn the community practice. Finally, members of a community of practice are on identity trajectories. Not all members are on trajectories towards central membership; there are other identity possibilities (Wenger, 1998). I will look at the identity possibilities and trajectories within 4D in chapter 8.

Nexus of multimembership

All community members, whether they are new or longstanding, central or peripheral participants, belong to multiple communities of practice. As a result members of the practice are continually negotiating their membership in and across several communities. Wenger (1998) understands people to have one identity that they perform differently in the different communities of practice of which they are members. I think that it is more useful to consider that people have multiple identities, but that most people seek a coherent sense of self.

> Our various forms of participation delineate pieces of a puzzle we put together rather than sharp boundaries between disconnected parts of ourselves. An identity is thus more than a single trajectory; instead it should be viewed as a nexus of multimembership. (Wenger, 1998, p. 159)

Although people will hold multiple identities, people will generally work to establish a coherent sense of self that incorporates the multiple identities that arise from their membership in different communities. Wenger calls this 'the nexus of multimembership'.

Different communities have different repertoires and indeed some aspects of a repertoire in one community may be unacceptable in another community.

People hold different identities in different communities of practice. For some people their identity may change considerably in different communities, for others much less so. Most people work to construct a coherent sense of self that is legitimate and incorporates the multiple identities that arise from their membership in different communities. Wenger calls this work 'reconciliation'. Reconciliation is not a step to establish a finished and unitary identity. Wenger instead sees the constant work to maintain identities across multiple communities as being at the core of identity itself:

> In other words, by including processes of reconciliation in the very definition of identity, I am suggesting that the maintenance of an identity across boundaries requires work and, moreover, that the work of integrating our various forms of participation is not just a secondary process. This work is not simply an additional concern for an independently defined identity as a unitary object; rather it is at the core of what it means to be a person. Multimembership and the work of reconciliation are intrinsic to the very concept of identity. (Wenger, 1998, pp. 160-161)

In this process of reconciliation the individual will need to engage with the practice of the multiple communities of which they are members. It is important to note that the individual also influences the practice of these multiple communities. The practice within these communities will not be kept separate. Rather, as the individual works to incorporate these multiple practices within their identities, they will bring elements of other practices into all the practices of which they are members. It is through this process that alternative practices are introduced into communities.

Legitimate peripheral participation and central membership

All communities of practice are constantly being re-established by the members' interactions with each other as they work together in the practice. The membership is also constantly changing and being re-established as new members join and become full members through their participation in the practice. When new members join the group they start as peripheral members, who do not fully participate in the practice. These new members are 'legitimate

peripheral participants' (Wenger, 1998); they have sufficient acceptance or 'legitimacy' in the group to be allowed to observe and learn about group processes. Peripheral members are given access to the practice, which enables them to learn aspects of the practice; they also learn how established members talk and present themselves. As peripheral members learn about the practice they participate more fully in the practice and move to participating in more central group activities. Necessary to this move to more central participation is a change in how individuals talk to others and present themselves. This process of learning is intertwined with a change of identity.

> We have claimed that the development of identity is central to the careers of newcomers in communities of practice...learning and a sense of identity are inseparable: They are aspects of the same phenomenon. (Lave & Wenger, 1991, p. 115)

As members become more central they will perform their identity differently. They will have learnt how to talk and behave as central members. This is through, at least in part, a panoptic process of regulation and self-regulation bringing about a change of identity (Foucault, 1977). Peripheral members will respond to central members' acceptance of their performance; they will also regulate their own performance in order to be understood as more central members (Paechter, 2006b, 2007). The self-regulation involved in this performance will bring about permanent changes to the individual. This identity performance will become naturalised as the individual scrutinises their own performance, and this will bring about a change of identity (Foucault, 1977).

As a consequence, the individual will be treated as a more central member; they will also understand themselves to be a more central member. This changed identity will bring with it a change of status within the group, with access to more personal resources, which may support the individual in the mobilisation of power in the community.

Within a community of practice, identity is understood as socially constructed through the participation of members with each other in the practice. These identity constructions are locally specific. That is, identities in one community of practice are different from those in another community, even if those

communities are closely related. These local constructions are influenced by, and influence, constructions in other groups. This is because everyone in a community of practice is a member of multiple communities of practice and transports practices and identities with them between groups, through the process of reconciliation intrinsic to the nexus of multimembership, discussed above (Wenger, 1998).

Trajectories

People are also on identity trajectories within a community and those identity positions are constantly being re-established. Members of a community of practice may hold different identities including: newcomer, established member, or marginal member. Different identities allow different trajectories through the group. A newcomer who is a legitimate peripheral participant may be on trajectory to becoming an established member. However it is necessary that their position in the community, even if peripheral, is legitimated, so that they are included and able to learn about the practice.

> Being included in what matters is a requirement for being engaged in a community's practice, just as engagement is what defines belonging. (Wenger, 1998, p. 74)

Central members are most able to mobilise power and through this grant legitimacy to new members. Central members therefore will determine to a large extent who is legitimate and who is on an inbound trajectory. A marginal member who does not have sufficient legitimacy will remain marginal or be on an outbound trajectory. This may be because they are not in a position to learn sufficiently about the practice. It is also possible that a marginal member chooses not to fully engage with the practice in which case they will also not become a central member. The different membership identities are in power relationships with each other. This indicates that it is important to look at the different possible identities within a group, the power relationships between those identity positions and the consequences for the possible trajectories for people with those identities.

The process of establishment and change of identities within a community of practice is a performative process. Participants' new identities will become naturalised, both to themselves and to other members of the community. The process of establishing identities will become invisible. As part of the performative process of establishing individuals' identities there will also be a performative process of establishing knowledge in the community.

Knowledge and discourses

Local knowledge and discourses are also produced in a community of practice. The local knowledge will include language or jargon. It could also include a shared history of members of the community and knowing how to do things in or for the practice. The local discourses will include how to speak with other members and how to engage with important aspects of the practice. Local knowledge and discourses are produced through the mutual engagement of members of the community. Again this is a performative process, it is linked with the reifications and identities that are established in the community. I will look at knowledge and discourses in 4D in my later chapters. Knowledge and discourses will be part of the shared repertoire that I will investigate in chapter 7. Aspects of knowledge may also be related to reifications that I will discuss in chapter 9.

Knowledge and discourses are produced within the power relations that run throughout a community of practice. The local knowledge established within a community of practice will be the knowledge that is held by central members of a community, it will be power/knowledge (Foucault, 1977). The knowledge held by central members of the community will be what is knowable within the community. Peripheral members will need to gain this knowledge to move to becoming central members with increased resources enabling them to mobilise power. Knowledge within a community of practice will include knowing how to speak and interact with central and peripheral members, as well as outsiders to the community. That is, part of the knowledge that central members will have learnt is how to speak and behave within the discourse of the community of practice.

The changing membership of a community will bring about changes to the knowledge that is held within the community, through the nexus of multi-membership described above. Community members will bring knowledge and identities from the other communities of which they are members. However, new knowledge will need to be established within the community. The new knowledge will need to be absorbed and accepted by the central members in order to become established and naturalised. Central members of the community will be able to use knowledge and language as resources to mobilise power. Through this process they may grant more or less legitimacy to peripheral or marginal members.

Conclusion

I will use a communities of practice framework as it provides tools to look at the processes within a community of practice. Communities of practice have three necessary requirements: mutual engagement, joint enterprise and shared repertoire. I will consider first how 4D meets these requirements in chapter 7. Changing identities is intrinsic to communities of practice with new members moving from peripheral to more central identities as they engage with and learn the practice. These identities are produced within and produce power relations between members of the community. I will consider the power relations and changing identities in 4D in Chapter 8. The engagement of the members of a community of practice produces localised effects; these include local language, knowledge and performances of identity. I will consider these as part of the shared repertoire in 4D in Chapter 7. I will consider reifications and reified events and their relationship to rites of passage within 4D in chapters 9 and 10.

4   Methods and methodology

Introduction

My research is an ethnographic study (Atkinson, 2014; Hammersley, 2007) of 4D, a youth group for young people questioning their gender identity or identifying as trans. I collected data about the young people and their understanding of their identities in two ways. I made 'fieldnotes', ongoing observations and reflections, of 44 sessions at 4D over a period of more than two years (Emerson, Fretz, & Shaw, 2011). I also interviewed 11 young people who had attended 4D at least once. I continued as youth worker for a further two years, and continued to take summer camping trips until August 2015[1]. I carried out both the observations and the interviews between April 2009 and July 2011. In this chapter I describe and discuss my research process. I describe the participants, the workers and facilitators, and the spaces. I describe how I accessed the group and how I carried out my observations, interviews, and analysis. I also discuss the methodological, ethical and epistemological issues posed by my research. The research journey has been a (further) gender journey for me, which I will also discuss, as through engagement with my research I have now become an adult who identifies as genderqueer, as non-binary.

This is an emancipatory and exploratory piece of research. I used a variety of ethnographic tools to investigate the diversity of experiences and views of young people who identify as trans. I wish to value and support their lives, and intend that their perspectives on gender will contribute to a wider understanding of gender for all young people. More widely, I looked at the establishment of new identities and discourses of identity within a community of practice (see chapters 7 to 10) which will contribute to understanding how identities, particularly gender and trans identities, are established and changed.

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[1] In addition I have worked as a facilitator for GIDS young people's groups since 2013.

Choice of methods

I understand the social world to be produced through interactions – that is constructed in the relationships between people. Meanings and understandings are constantly created and recreated as we engage with others. I therefore take a constructivist view of my research. My understandings of the world and my interpretation of my research data will necessarily be influenced by my position and my identity in the world (Scheurich, 1997). Further than this, I see the research itself to be constructed in relation to my presence. My presence as youth worker necessarily affected how the young people engaged with each other as well as with me in youth group sessions. I sought to maintain a constantly reflective engagement with the young people and my research, from my joint role as youth worker and researcher, through my observations and reflections, to my data analysis, and the presentation of my data. Debates still continue about the truth and value of knowledge created through qualitative research. However I consider that all knowledge is situated and partial but that reflective qualitative research is valuable and informative. (Denzin & Lincoln, 2011; Flick, 2014; Silverman, 2013)

I had not originally intended 4D to be my main research focus. However, my involvement from the start was ethnographic. I had little knowledge of young trans people's communities and after my initial sessions with 4D I wished to understand this community of young people and their engagement with gender discourses and identities. My ethnographic practice was well suited to enabling me to understand this community (Flick, 2014; Silverman, 2013). As well as the youth group sessions, I attended family sessions, performances and showcases that involved 4D members; I immersed myself in the group as a semi-participant observer; I wrote reflective fieldnotes. Participation in the group gave me an understanding of the relationships between group members and the functions of the community (Hammersley, 2007). Later I conducted interviews with youth group members to gain an understanding of individual stories and views. These interviews had some narrative elements as I wished to understand the young people's gender trajectories. I also focussed on themes that I had

found significant in my observations and from my wider understandings of trans identities and communities (Flick, 2014).

Alternative methods

All research data, except perhaps data from covert research, is constructed through the interactions of the researcher and the research participants (Scheurich, 1997). It is neither possible to be a neutral observer nor to leave the research participants unaffected. The participants will have an awareness of the researcher's interest and may more or less consciously change their behaviour and interactions. It is more useful to understand the engagement between participants and researcher as two way process of participants trying to explain their views and experiences, and researchers trying to understand them (Hammersley, 2007).

Interviews and observations are fairly traditional research methods. I offered some alternative methods with the intention of giving the young people an opportunity to present what was important to them outside of the two-way linear interaction of the interview. I hoped that, as well as being enjoyable for the participants, I might gain a fuller picture of the young people and their views and experiences (Lambert, Glacken, & McCarron, 2013; Punch, 2002). I offered each participant three alternative methods. The first method was taking pictures with a disposable camera. The participants were told that they should take pictures of things that were important to them, and send or bring the camera back to me to have developed before the interview. Each participant was given one copy of their photographs and a CD from which they could make further copies. I kept a copy of the photographs for reference only. The second alternative method was writing something about themselves. The final method was doing a drawing about themselves.

There was limited take-up of alternative methods. Two of my interview participants wrote something, a further two returned their cameras and had their photos printed, no one did a drawing. Five interviewees took cameras but did not return them; some of these described what they had or would have taken photos of and why. Finally, one person showed me some photos on their

phone. These were photos they had taken for themselves that they wanted to share with me. One of the pieces of writing was about coming out as trans. The other piece of writing was about the participant's attitude to education.

There were some themes that emerged in the discussion of the photos and photographic subjects. Several of the young people said that family was important to them. They also showed this by taking photos of family members, or even photos of photos of family members. One young person took photos of objects they had been given by family members. People photographed or said they would photograph places that were important to them. One person wanted to photograph a park because they had 'done a lot of good thinking there'; another wanted to photograph spaces where they attended queer or trans groups. Another theme was photographing or talking about things they had made. There was not enough uptake of the alternative methods for me to consider them to be worth further analysis. However, discussion of a participant's photos or writing seemed to offer a way in to the interview as the young people used the photos and writing to share something about themselves. This gave me an understanding of the young people's interests beyond 4D. The young people may have felt more at ease with me in the interview as I had shown that I was interested in what they had chosen share of their lives. This made the interview feel more relaxed on both sides.

Trajectory of my research

My original intended PhD focus was young people aged 8-11 who did not gender conform. I was motivated to carry out this research in part by my own identity journey. I had been a gender non-conforming child who became a gender non-conforming adult. I then became a parent of a gender non-conforming child, friend of a family with a non-conforming child and a teacher of another child who did not gender conform. I considered the difficulties these young people encountered as they engaged with others around them, and the strategies they deployed to have their identities recognised. I also considered my own feelings about my own gender non-conformity and the strategies that I had deployed to live as a gender non-conforming young person. I was interested

to find out what might support young people in enabling them think of their identity outside of gender norms, to resist gender norms, and to establish their preferred identities.

My research trajectory was somewhat serendipitous. I changed the focus of my PhD after I became involved with 4D, a youth group for young people who identified as trans or who were questioning their gender identity. I attended an LGBTQ youth conference in February 2009 and was motivated to volunteer with EC (Engendering Change[1]). I volunteered first with an EC drama project, from February 2009. I attended 4D, the EC youth group, for the first time in April 2009. I wrote fieldnotes consistently from the first youth group session I attended, as I was interested in gender construction. I soon became involved as a volunteer youth worker with 4D. Graeme was the paid youth worker; he was a trans man in his mid twenties. He had previously worked as a youth worker for an LGBT youth group. I planned and delivered youth group sessions with Graeme. We reflected after each session on the young people and their engagement, and used this to inform future sessions and support. At this point my PhD supervisor suggested I change my research focus to 4D. There was a developing interest in young trans people and I decided that I would be the most suitable person to research 4D at that time. I had established a good relationship with the young people and the paid youth worker. As someone who had a non-normative experience of gender I felt that I was not an outsider to this marginal group and I hoped that I could avoid pathologising or exoticising the young people. Above all, I was committed to working ethically at all times.

The research setting

4D

4D was a youth group for young people who identified as trans, genderqueer or who were questioning their gender identity. I was involved with 4D from 2009

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[1] Engendering Change (EC) is the organisation that set up and funded 4D, the youth group. EC also ran an LGBTQ young people's drama project, and conducted trans awareness training for other organisations.

until 2014, but my research is based on the data that I collected between 2009 and 2011, rather than any later observations.

4D existed in various guises and places after being established in 2009. I was the established volunteer youth worker throughout the period that I collected my data, and continued to be regularly involved until 2014. The group usually met twice a month and I co-facilitated most sessions from the beginning of 2009. Sometimes 4D ran as a drop-in youth club; at other times activities were structured around ongoing projects, often to meet funding requirements. There was funding for a paid youth worker for most of the period of my research. Graeme, the paid worker, and I were the two consistent youth workers throughout the period of my research.

Graeme identified as male and as trans, and presented as a masculine man. He had transitioned from female to male. His preferred pronouns were he and him. At the start of my involvement with 4D I identified as a masculine lesbian who was often read as male. I started by declaring my preferred pronouns saying 'today I prefer to be called she'. Towards the end of my research I changed to saying 'I don't like pronouns'. I began to identify as genderqueer and would say that I would always be questioning my gender. My appearance did not change and strangers continued to see me as a masculine lesbian or as male. I will discuss my identity and my relationship to the group in more detail later.

The young people

The young people who attended the group while I was youth worker were aged 13-25 with most in the 17-22 age range. Most came from London and the counties around London; some came from further away. They were varied by social class, education, and occupation. Some were in education, some were in employment, and others were unemployed. The young people aged over 16 had very varied educational backgrounds, from high achieving young people doing Masters degrees and PhDs, to young people who had achieved no GCSEs. Many of the young people were still in education, at school or university, including all those under 16. Most were white, with a minority of black and mixed race young people. Very few young people of Asian origin attended 4D during this period.

At the end of my data collection the group had a regular attendance of 12-15 young people from a pool of about 20. There were regularly new members. Most people attended regularly; some members came to every session. Some came intermittently and others just once or twice.

In 2009, the first year of 4D, female-identified and male-identified young people were fairly equally represented. Later, the majority of young people who attended were assigned female at birth and presented within the group as male-identified. Within the group most of the young people presented as moving from one binary gender identity to the other: female to male, or male to female. However, almost all the interview participants presented their identity in their individual interviews in less binary and more complex ways than in the youth group. I will discuss this in more detail later. There were a minority of young people who identified, within the group, as outside the gender binary, for example as genderqueer.

A minority of the members of 4D were transitioning medically, that is with the support of medical interventions: hormones or surgery. Only a few of the young people in the group had had surgery. The most common surgery they had undergone was 'chest surgery', that is double mastectomy and perhaps reshaping of the chest area to give a conventionally male or masculine appearance[1]. Approximately half the young people attending were taking hormones or started taking hormones over the period that I observed the group. Young people whose preferred gender was female might take oestrogen, which redistributes body fat and may cause some breast growth giving a more conventionally female appearance. Those whose preferred gender was male might take testosterone. Again this redistributes body fat, it also encourages the growth of facial hair and a lowering of the voice, all giving a more conventionally male appearance and presentation. At the beginning of my involvement with the group when the balance was fairly evenly male and female there were both young men and young women taking hormones. Later, as the

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[1] One young trans women who attended intermittently had a vaginoplasty.

gender balance changed in the group, most of those taking hormones identified as male.

The young people presented in varied ways. The majority, that is young people assigned female at birth and identifying as male in the group, presented as male. Some would be seen consistently as male, others would usually be seen as younger, prepubescent boys, some were rarely seen as male and would instead be seen as masculine in presentation. Early in my involvement with 4D, one young person assigned female at birth, with short boyish hair and masculine clothing, attended for several months and unusually chose to use their birth name and female pronouns. Again early in my involvement, one young person, assigned female at birth, identified as genderqueer with preferred pronoun ze, attended regularly. Ze had shortish hair and would come to some sessions presenting as an androgynous teenager with baggy clothes and a hoody, and to others in conventional schoolgirl's clothes: skirt, tights, and pumps.

The young people who identified as female, assigned male at birth, mostly came to 4D with chosen female names and pronoun she. Several young (trans) women who attended at the start of 4D had fully socially transitioned and lived as female, although later no young women lived as female. Two young people came identifying as female who presented as very conventionally male in appearance, one of these had long hair but cut in a masculine style.

Those young people who identified outside the gender binary presented in various ways. Some presented as fairly androgynous, others had contradictory aspects to their presentation, and some presented as male and female on different occasions. One young person who was assigned female at birth would 'pass' or be seen as male, but usually chose to declare their identity as trans or genderqueer. Three young people assigned female at birth came with new names and with preferred pronouns other than 'he'. One preferred the pronoun 'ze', one preferred 'gender-neutral pronouns: it or they', and one declared a preference for 'either male or gender-neutral pronouns'.

I was interested by lack of ethnic diversity in 4D and in the EC drama group that I worked with. Graeme also discussed with me how to be a more inclusive

group, both in terms of gender and ethnicity. I commented on this in my observations:

> I am interested in the ethnic mix of the young trans people who are involved in EC. I don't think EC are racist, rather I am interested why some communities identify with their model of trans and not others. Small sample though, may just be chance. (Fieldnote September 2009)

I wondered if the construction of gender non-conformity or possible identities in different communities affected the identities that young people might hold (Roen, 2001). I also thought that the availability or acceptability of medical interventions in some communities might affect possible identities. This was supported by Phoenix in his interview:

> Phoenix: I feel like I've gone through all different phases because I feel like for years I've been looking for somewhere where I fit and I knew that the drinking and all that wasn't me. Then when I tried to dress more comfortably, and then I ended up hanging out with a group of lesbian studs in the gay community, which was weird because they called each other boy and some of them were binding and it opened my eyes a bit to like oh wow, there are people that aren't comfortable with that. And I thought maybe I fit with you. But they all still strongly identified at the same time as being female.
>
> ...
>
> Phoenix: I remember speaking to one of them about changes and she wasn't in full agreement with it. She was like, 'Well, it's OK if that's what you want to do but I wouldn't do that because I like being a woman.' And it was just really strange to hear that coming from somebody who was binding and calling themself boy,

Phoenix was black, and the lesbian studs that he describes were also black. Although many of the studs had chosen male names and pronouns, and passed as men, they identified strongly as female. Phoenix felt they did not understand or approve of his desire to change his body to be more male.

The spaces

4D met in several places over the time that I volunteered as youth worker. The organisation of and relationship with the space affected the identities of the young people and their ability to mobilise power (Allen, 2003; de Montigny & Podmore, 2014). Allen sees within the understanding and scrutiny of spaces a possibility of empowerment, with the prospect of social change (Allen, 2003), this is borne out by research into trans and LGBT youth spaces (de Montigny & Podmore, 2014; Rooke, 2010). I have not explored this in this thesis. However, I will describe briefly the structure of the spaces, and how the spaces were accessed and used as this impacted the relationships within 4D as well as between members of 4D and others outside the community. The location of the youth group, the spatial arrangement of the toilets, the organisation and the young people's engagement with each other and workers to access toilet were all significant in enabling the young people's preferred identities.

The three main spaces used by 4D when I was involved were Space East, where 4D was first held, LSPA (London School of Performing Arts), and the Design Space. Occasionally there would be one off sessions at other spaces such as swimming pools and parks. We also held summer camps first at a public campsite, then at a scout camp. I will now describe the spaces where youth group sessions were held.

Space East

4D started as a regular evening group at Space East, an LGBT space in East London. An LGBT group would meet two or three times weekly and 4D, the trans specific group, would meet once a week. Both the LGBT and the trans specific groups at Space East were run in a large garage space accessed from the street. It was a large room with a few rooms cut into it: a couple of offices, a kitchen with a screen that opened on to the main space and two toilets. There was one working toilet (out of two); it had a small sign that said 'for everyone' placed over the binary sign. New members and visitors would be told in a very matter of fact way that there was 'one toilet and it was for everyone'. This created a space where the binary sexed nature of toilets was actively rejected, in

a way that is significantly different from most public spaces. It created the expectation that people would not gender themselves, that is they would not identify their gender to others, as they approached the toilet.

There was occasional use of a semi-private space near the toilets for people to change their clothes. The clothes changing was always gendered clothes changing, almost always young trans women changing from male to female clothing. This was a way for some young people to assert their preferred gender in addition to the pronoun circle (see chapter 5). Changing clothes was often acknowledged by other young people or workers. This acknowledgment was different when young people changed their presentation to fit their preferred gender; it was an acknowledgment of their identity, perhaps with some approval. When young people changed back there was a different reaction, perhaps an acknowledgement of the fact that they could no longer present as they identified.

LSPA

At LSPA the youth group took place in a room or rooms within a much larger and quite confusing space. The youth group did not have its own toilets. We would have 'toilet breaks' because access to the toilet required a swipe card. Young people who identified as non-binary would choose to use the one accessible toilet which was positioned separately from the other toilets. I would use this toilet if it was free, in part because of my identification within the group as genderqueer, and my desire to be visible as genderqueer. I also felt awkward going with the young people as a group to the toilet as an older adult, and youth worker. I felt this more strongly as the young people had little opportunity to be in spaces without adult facilitators because of the need to be given access to LSPA rooms and toilets.

At LSPA it was highly likely that others, outside the group, would come into the toilets. The youth group members would have to choose whether to go to the men's, women's or accessible toilet and so gender themselves to the other young people. Since they might meet other young people in the toilets they would negotiate these interactions together.

Design Space

The Design Space took up a floor in a shared office building. The building had gendered toilets on different floors. The 'men's' was on the same floor as the Design Space and the 'women's' was one floor up. Before every session we carefully labelled the nearest toilets with 'toilets for everyone' signs. This was a message from the youth workers about both a construction of gender and an occupation of space in a binary gendered world. This toilet contained urinals. We did not label any of the toilets on other floors. The labels would only be arranged in this way for the session, we would do this shortly before the young people arrived. Some of the young trans women would change in the toilets, or put on make up before a session. Young people could leave the youth group space at any time if they told us where they were going. Since the sessions were in the evening or at weekends it felt like we were the only ones in the building, however people unconnected to the Design Space also used the building and toilets when sessions were running. The possibility of someone from outside the group coming into the toilets (which happened on one occasion) meant that the non-binary gendering of the toilets and the trans occupation of space was temporary and unstable.

As 4D functioned as a community of practice[1], youth group participants who were able to share their knowledge about navigating non-trans spaces in their preferred identities became more central members of in the community. Learning to navigate non-trans spaces in their preferred identity enabled the young people to mobilise power, in particular to have their preferred identities recognised in the wider community. This would affect how youth group participants might present their identities and how they might choose to bridge identity layers which I talk about in chapter 9 (Nuru, 2014).

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[1] I describe communities of practice in chapter 3, and look at 4D as a community of practice in chapter 7. In chapter 8 I consider identities within the group.

Negotiating access to the group

When I approached EC as a volunteer I had thought my involvement would inform my PhD. I had not intended 4D to become my sole focus. I was open about my research in my volunteer application and Graeme, the paid youth worker, and Ty, one of the founders of EC, were supportive of my research. A couple of months after I became involved with 4D in April 2009 Graeme encouraged me to interview some of the youth group participants. He was responsible for locking up the building and he organised to stay late to allow me to use the office space out of youth group hours. Around this time I also had a conversation with Graeme about volunteers working with EC and understood that I was a valued and trusted volunteer. I attempted to interview several young people, but only succeeded in interviewing one young person in June 2009. In July 2009 Graeme stopped working at Space East and was employed by EC to coordinate summer workshops for young trans and questioning people. I continued to be involved as volunteer youth worker. There was little opportunity at this point to negotiate further interviews and instead I focussed on fieldnotes. I advertised for interview participants again in November 2010. This was supported by EC and Graeme. I made an announcement at the end of a youth group session, and Graeme added supportive and encouraging information to my announcement. I was also given access to the EC mailing list to circulate my call for interview participants.

My relationship to the group

Semi-participant observer

I could be described as a participant observer in 4D as I was fully involved with all the group processes as well as engaging with the participants. (Flick, 2014; Hammersley, 2007; Silverman, 2013). However, semi-participant observer is perhaps a more useful description, as I was not able to participate fully as a young person would in the group. Not only was I participating as an adult in 4D, but I had a specific role as facilitator that meant that I was not able to participate in the same way as a member of the youth group. I could access and engage with all the group processes, however as a youth worker I had

responsibility for inducting new members into the community and facilitating engagement for the young people. As a youth worker I also had additional access to the workings of 4D: I was involved in planning and evaluating the activities and sessions and reflecting on the young people.

Insider outsider?

In several ways I was an insider to the research. I was involved with 4D for a relatively long period of time and I became more of an insider to 4D as I developed stronger relationships with the young people and with the wider trans community. I was also someone who did not gender conform, although I did not identify as trans or non-binary at the start of my involvement with 4D. However, I was also an outsider to 4D. As well as being a youth worker rather than a young person, I was much older than the young people and Graeme the other youth worker. Although I did not gender conform I was not on a clear gender trajectory. Making observations of 4D also affected my position as insider as reflecting on the young people and my role in the group meant that I positioned myself outside of the group (Hodkinson, 2005). I was therefore neither fully an insider nor an outsider to the youth group, but I was partially both.

I was involved with 4D for a longer period than almost all of the young people. This insider position brought with it benefits of trust and openness from the participants, and my insider knowledge informed my interviews (Acker, 2001; Dwyer & Buckle, 2009). However I was also aware of disadvantages to being seen as an insider by some of the interview participants as they took my knowledge and understanding for granted; I also assumed that I knew what they meant and did not seek a fuller explanation of some things that were said in their interviews (Acker, 2001; Breen, 2007).

My identity trajectory and theirs

I started my involvement with EC identifying as a lesbian who presented as male or masculine and was often read as male. From the start of my involvement I would say I preferred the pronoun 'she', but specify 'today'. As a

youth worker I did not share many of my personal views or experiences of gender, nor did Graeme. This seemed correct in a space that was designed to support young people in developing and exploring their identities. However my fieldnotes have occasional reflections on my identity. On 12th June, some six weeks after my involvement with 4D, I compared my presentation to someone identifying as genderqueer:

> I feel awkward in situations like this about my self-presentation. Astro identifies as genderqueer. I feel I pass better, that my hair is cut in a more masculine style, but I use the pronoun 'she'. I feel I have to consider my pronoun. (Fieldnote June 2009)

At the time, as I would now, I would have challenged someone who associated identity with presentation. Presentation and choice of pronoun or identity are not dependent on each other. However, I clearly desired to move towards identifying as genderqueer and not using 'she' as my pronoun. I also wished to feel 'authentic' as genderqueer and associated authenticity with my physical presentation. It strikes me now that this shows the strength of the discourse constructing gender presentation as indicating authentic gender identity: despite my views on gender, I felt my gender to be authenticated through my physical presentation.

From October 2009 I changed my pronoun declaration in the youth group. I moved to sometimes saying that I didn't want to specify a pronoun, although this was not consistent and I continued to also declare my pronoun as 'she, today'. At least in part this was because I continued to be 'she' in the rest of my life. This changed again in the summer of 2010 following feedback after a youth group project:

> It also came up in the evaluation that some of the young people have felt that the space wasn't genderqueer friendly enough, or genderqueer didn't have a high enough profile. Graeme said he thought it wasn't correct, that they weren't acknowledging who the staff was so: him FTM, but me and Jakob more genderqueer. I said something about that I always said 'she' without really elaborating, that I have a particularly history to my identity but I didn't explain it to them. That all the people close to me called me she so it didn't make sense for them not to. But perhaps I should

say more about being genderqueer. Graeme said I didn't have to, they should open their eyes more. Jakob said it wasn't the staff, it was that genderqueer wasn't visible, highlighted or emphasised enough in discussions. I agreed that was probably true and that I could make an effort to bring it into discussion more. (Fieldnote August 2010)

Following this I changed my pronoun declaration to either 'I don't want to be pronouned', or 'I don't mind he, she or they'. I also said more about my own identity, declaring that I was genderqueer and that I would always be questioning my identity. I have continued to identify as genderqueer since my involvement with 4D, and now prefer the pronoun 'they'.

Observations

I wrote fieldnotes after each session that I attended. These included youth group sessions as well as EC related events including drama presentations and the drama group tour for which I drove the minibus. I had previous experience of observing and participating in a reception class in a primary school when I did my Master's degree. From this experience I knew it was not possible to write observations at the same time as fully engaging with people, children or adults. I decided that I would not make notes in sessions, in part because I wanted to be present in my engagement with the young people in the youth group sessions and I knew that if I was writing observations I would not be engaging with the young people fully. I also felt it would be uncomfortable to make notes during sessions even if the young people and adults were aware of my role as researcher in the room. I decided also that I would not make an effort to remember specific interesting events. Instead after a session I would think through the session and write down all the detail that I could remember. I wrote observations of the young people and their interactions with others as well as with me. I also wrote some comments and reflections. I sometimes included diagrams and drawings. Notes from the very first drama group session were written on my laptop. Thereafter I recorded everything by hand in A4 notebooks which allowed me to make diagrams and drawings. I would write observations on the right hand page and comments, reflections and diagrams on the left hand page.

Many of my reflections were about similarities and differences between myself and the young people and between the young people themselves. I was continually reflective and prepared to be surprised by my observations of the young people. Despite their many similarities to me, I was often struck by the differences from me in their views and experiences of gender.

Interviews

Explanation and consent

Interviewees were recruited through either an explanatory leaflet or an explanatory email[1]. These went to young people who had attended the youth group; they did not specify the age of interviewees. It explained that I wanted to interview trans, genderqueer or gender questioning young people, with the intention of giving professionals, parents and young people a better understanding of their lives and identities from their own perspective. When young people contacted me I emailed them an explanatory letter and consent form. The explanatory letter explained that the interviews were confidential, and asked them to contact me if they were interested. I also sent or gave them a disposable camera and a letter encouraging them to take photos, write or draw something about themselves. Finally at the start of each interview, before the participant signed the consent form, I again explained my research and the intended outcomes. I reiterated their lack of obligation to continue with the interview or to answer any questions they didn't want to answer. I asked for consent to tape the interviews, to which all interviewees agreed. At each point, as well as giving information, I offered the opportunity to ask questions and discuss the process.

Interviews

I carried out interviews with eleven young people who had attended 4D. I interviewed nine of these young people in one-to-one interviews, and I interviewed two young people, Nathan and Tyler who were a couple, together. I

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[1] See appendices for leaflets, letters, and details of interviews.

conducted my first interview in July 2009. I carried out the other interviews between December 2010 and February 2011. Individual interviews took between 50 minutes and 1 hour and 42 minutes. Nathan and Tyler's interview took 2 hours and 26 minutes. All interviews took place in private spaces. The first interview took place at Space East in a private office. Later interviews were mostly carried out at Goldsmiths, although I carried out two at the Design Space. The interviews all took place between 11.30am and 8pm, outside of youth group hours although sometimes before or after a youth group session. The young people would come to the youth group setting directly as it was familiar to them. I would offer them a drink before we started the interview. When I carried out interviews at Goldsmiths I met the young people at the train station and then took them to a café and offered them a drink and a snack before going to the interview room. I paid travel expenses for all the young people.

My first interview was in the office at Space East. This was a familiar place to the young person; it felt unintimidating and that we would not be interrupted. At Goldsmiths the interview room that I mostly used was a resources room. It was a small space used to store books and materials, it had two comfortable chairs. It was fairly intimate as an interview space as it was a small and the comfortable chairs were close to each other. It was a somewhat haphazard space and didn't feel intimidating. It felt private and that interruptions were unlikely. I interviewed two young people at the Design Space in the room used for the youth group sessions; this was outside the session time and felt private and that we would not be interrupted. The interviews felt relaxed and the young people seemed comfortable. Except for two, the interviews came to a natural conclusion when the participant and I had discussed their experiences and views sufficiently. Unfortunately I did not allow enough time for Kieran's interview and it felt unfinished at the time. Nathan and Tyler's interview was very long and we stopped because it felt too tiring to all of us. In these two cases we agreed to meet again, however, when I suggested arranging a further interview, they did not offer any possible dates and I did not pursue this. I do not know the reason for this, but my relationships with these young people

subsequently felt positive as if they had shared what they wished of their experiences.

Sample

I attempted to interview all those who responded to my request for interviews. I did not in the end interview some people as I did not find a suitable interview time before March 2011 by which time I had interviewed 11 young people. The sample included people aged 17 to 23. Only one young person identified as female, and was assigned male at birth. The others had been assigned female at birth, and identified in diverse ways. I attempted to interview another young trans woman, assigned male at birth, without success. When I had carried out 11 interviews I considered whether I should continue to pursue interviewees. I decided that the interviewees were fairly representative of 4D at that time, when the majority of young people were assigned female at birth. I had interviewed Chrissy who was the consistent youth group participant assigned male at birth. Three of the interviewees had been on hormones, one for a few months and the other two for several years. Nine out of the eleven young people had talked to their doctor about their feelings about their gender identity. None of the young people I interviewed had had any surgery.

Interview roles

I chose to tape the interviews with the young people as I wanted to be fully engaged with the young person during their interview, this did not seem to be intrusive. On one occasion the batteries ran out and I replaced them; there were no other technical issues. I would sometimes start the tape and record the explanation of my research, their choice to participate, and the signing of consent forms. All of this recapped the information that had already been given to them on paper or by email. On other occasions I would start the tape after this discussion. If young people seemed to want more information I would offer and explain my personal motivation to carry out the research:

> To Lee: I think that everybody who does PhDs, they have some
> personal investment in it and I didn't gender conform when I was
> a kid … I got involved in EC by chance, but actually I think it is

probably more where my interests lie. I started thinking about younger tomboys and stuff, but actually I'm really interested in how people think about gender identity, and I guess I'd want to change the world, but I don't know if there's any chance of that! (slight laugh)

To Blake: I'm really quite interested in the potential for thinking about gender differently.

I was clearly in a different role from my participants in the interview. The research was motivated by interest in these young people's views and experiences but I had instigated it. Although I did share some information about myself in the interviews, the research was about their identities and experiences and not mine. I felt that I should offer information about myself to the young people which is why I started the interview by asking if they wanted to know about my motivation to carry out the research. I would also sometimes talk further about myself or my views in the interview, although I often felt uncertain of this and would not continue if the young people seemed uninterested. One young person wanted to offer and discuss their opinion on my gender presentation, otherwise no young person wanted to know anything further about me after I had explained my personal interest in the research.

The interviews were fairly unstructured. I started by asking each young person how they had become involved with 4D and the interview developed from there. I had a prompt sheet to remind me of topics I wished to cover which I would check towards the end of the interview. I intended that a general starting point would allow the young people to take the interview in a direction that was interesting to them. I finished the interviews by asking if the interview was how they imagined it to be, if they would have liked to talk about anything else, if I should ask other people about anything else, or if there was anything they would like to know. I hoped that my finishing questions would give them a further opportunity to talk about topics of interest to them and that they might indicate topics that would be interesting to investigate with other young people.

Why they wanted to be interviewed

I did not ask why they had offered to be interviewed, but some of the participants shared something about their motivation. Some participants wanted to contribute to a piece of research that would be helpful to the trans community. Blake wanted the research to inform the wider community:

> Blake: Everyone asks me about my gender all the time. So it gets tiring, you know?... But I don't mind doing it if someone is going to be like actually publishing work on it, and so I'm helping out the trans community.

Mattius was interested in making the variety of trans identities, including non-binary identities more visible:

> [Mattius] asked if I had varied responses and I said yes that was something I was really pleased about that I had such a variety of how people understood trans. He said he hoped that genderqueer would be more visible because people don't know what genderqueer is. (Note written after Mattius's interview)

Some of them hoped to get something for themselves from the interview. Before the interview Nathan and Tyler were clear that they wanted to learn more about each other. At the end of the interview Tyler and Nathan described how they felt about the interview process:

> Tyler: ... as much as we talk to each other, communication is quite good between us, you don't really know what to say until someone asks a question. So it gives us an opportunity to learn more about each other ...

> Nathan: Yeah, most of what we said, we sort of knew, but it's sort of extending, like, what we knew a little bit more ... for example, you're asking the questions so we're telling it to you, and we'll say the little bits that we don't really say to each other.

Kodi and Aidan also hoped to get something for themselves out of the interview process:

> Spoke to Aidan and Kodi after session about interviews. Kodi is completely excited because ze'll be in my PhD. Ze asked very sensible questions: about what the consent letters would say,

> could ze have a copy of my PhD. Aidan less confident but said it would be good for him to do that sort of thing. (Practice talking about his gender identity?) (Fieldnote June 2009)

I did not interview Kodi in the end, but ze seemed to be excited to be of interest and to be included in a published document. It was unclear whether Aidan thought that the interview would develop his confidence to express himself, or whether he hoped to develop some skill in talking about his gender identity which could be useful when he needed to talk about his gender to others, perhaps medical professionals.

For many of the young people it was satisfying to feel that they could be useful to me, as researcher, or to the trans community, or to other trans young people. The interview was also an opportunity to have their identity recognised or validated by me, a member of the wider trans community.

How they presented in interviews for me

The young people were aware of what they presented or thought they should present in the interview. One young person felt they should not refer to anyone in 4D by name. After a long awkward description where they clearly wanted to avoid identifying someone I felt I had to explain my position:

> AM: I'm not going to get a full picture, or you're not going to be able to give me a full picture if you never mention anybody else in the group… I am going to be really, really careful with what I write … someone might make you feel uncomfortable or whatever, and that's not irrelevant … You know, but I'm not going to do anything with that in a bad way.

> Participant: Mmn. I suppose I just, sort of, worry that it might be disrespectful to sort of name names and talk about people in the interview.

The participant then became more open in the interview, describing how another youth group member had introduced them to 4D as well as to another trans group.

Blake suggested that I wanted him to present his identity in a particular way:

> Blake: This might mess your research up a bit! *(slight laugh)*
>
> AM: Why might it mess my research up? What do you think I want? *(slight laugh)*
>
> Blake: I don't know! *(both laugh)* A normal trans person...

Here I explained that I was interested in the possibilities of thinking about gender differently and that I wanted the whole variety of trans people.

Practicing narratives

In line with the interview space as a space for legitimation or validation, people used the space to present their stories. For some young people, for example Blake and Mattius, who understood their identities outside of the traditional cross-binary trans narrative the interview space seemed to be a space where they could practice developing a coherent story for themselves. Other young people, like Lee, who also understood its[1] identity outside of the traditional cross-binary identity, presented a well-developed story about its identity. Aidan, who understood himself to be on a conventional cross-binary path, seemed unconcerned with the contradictions in his story but wanted to use the space to practice and develop his narrative. Brendan presented a coherent linear conventional trans narrative. Nathan also presented a traditional trans narrative, with some queer twists given his change in sexual orientation and his desire to show his physical transformation from female to male to strangers through his presentation of his ID. The young people were not trying to present a fabricated story, rather they were making use of multiple narratives that could be used to explain how they felt about their identities (see chapter 5). The use of the interview space seemed to be similar to the youth group space in that it gave an opportunity to show or develop their knowledge of how to present their narrative, but with more space to develop their story in depth.

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[1] Lee's preferred pronoun was 'it'. See the pen-portraits for descriptions of participants, including their preferred pronouns.

Revealing more complex identities in interviews

I had met all the young people before I interviewed them. All of them had been to at least one youth group session at some point before their interview. After the interviews I realised that I had expectations of how the young people would see their identities and trajectories that I had developed from how they presented in the youth group. Brendan and Aidan were both on a conventional female to male trajectory as I had expected. Chrissy, Nathan and Tyler presented their identities in a less fixed way than I had expected, although they did all wish to be recognised as the other binary gender. I had expected Phoenix and Mattius to identify as male but both saw themselves outside or between binary male and female genders. Blake and Lee I expected to identify as genderqueer or genderfluid, but I had not expected that like all the other interviewees they would also identify as trans. I realised that I had assumed some people saw genderqueer as different from trans rather than seeing trans as an umbrella identity that included non-binary identities. All the young people were more thoughtful and nuanced than I had expected in their thoughts about gender identity.

The young people were confident to present the complexity of their identity to me in their interviews. It was not clear whether they presented their identities differently or whether there was more space for them to present and explain the nuances of their identity in the interviews than in the youth group. It struck me how important it was to consider that pronoun declaration is not a declaration of gender identity (see chapter 6).

Data analysis

I started by transcribing the interviews myself but I found this too time consuming so I paid an experienced transcriber to transcribe the interviews for me. I later also paid them to put my fieldnotes into an electronic version so they could be easily searched and excerpts copied.

My intention was that the themes in my research should emerge from my engagement with the participants (Strauss & Corbin, 1997). The direction and

focus of my interviews developed from my observations and reflections of the youth group over an extended period of 18 months. I then looked at the interviews for emerging themes. I started by using NVivo for my data analysis. I coded the first interviews I transcribed. I found this frustrating as I could not immediately code as I would have liked but had to work out what was possible and useful within NVivo. Following a technical issue with NVivo I used printed copies of the interviews for coding for a few days. I used different coloured felt tip pens to underline different themes and added annotations. When I returned to NVivo I felt that my paper version made it easier for me see wide themes across all the interviews and then look at these in more detail. I therefore continued with this process.

As well as reading the interview transcripts several times in the initial analysis, I also spent time listening to the taped interviews on headphones for example when travelling or doing housework. This was very helpful as it gave me a good sense of the young people's tone and the intention behind their words that was not always evident in the interview transcripts.

The wide themes in the interviews were transferred into the plan for my data chapters. After looking for themes in the paper copies of the transcripts I then transferred quotes and references to each theme to a word document. I looked through all the observations for themes and details too. As I came to write each data chapter I would often go back to the electronic versions of the interviews and observations to see the context of quotes. As I wrote my theory and data chapters the focus of my data chapters changed as I wanted more space to develop ideas of 4D as a community of practice and to consider legitimacy within the group (Lave & Wenger, 1991; Wenger, 1998).

Ethical considerations

I followed BERA (British Educational Research Association, 2011) and BSA (British Sociological Association, 2017) research guidelines, as well as good practice as a volunteer youth worker (National Youth Agency, 2004). BERA requires that in all actions concerning children the best interests of the child must be the primary consideration. This supports the BSA requirement that the

wellbeing of the participants is not adversely affected by the research, and National Youth Agency guidelines that each individual should be valued. BSA and BERA guidelines regard the participants' right to privacy and confidentiality to be of paramount importance. I was more cautious about privacy and confidentiality than all except one of my participants, which I discuss below.

Usual youth work practice applied during youth group sessions: vulnerable or distressed young people would get immediate support and would be referred for appropriate additional support. There was potential in the one-to-one interviews for young people to disclose issues concerning their own or others' wellbeing, or to become distressed. In my introduction to the interviews I explained that if there were any possible concerns about their or others' wellbeing, I would have to share my concerns and would not keep confidentiality. I was also aware of the possible need to refer young people experiencing any difficulties for support. Several young people did discuss issues concerning their well-being, however all were already well supported by appropriate services such as CAMHS (Child and Adolescent Mental Health Services) or GP services.

BERA guidelines require that children and young people should be facilitated to give informed consent if they are capable of forming their own views. BSA also require consent. National Youth Agency require promotion of young people's rights to make their own decisions which would include consenting to research participation. My interviewees were 17-23 and all were able to understand and consent to their involvement in my research. I did not interview anyone below the age of 16. The youth group members were aged 13-25 and were able to consent to their, less active, involvement as participants in youth group activities in which I was a semi-participant observer.

At the start of my involvement with 4D I informed the youth group participants about my research. As I was not taking notes during sessions, it was important that I reminded the group regularly about my researcher role. This ensured that new members were aware of my role, as well as reminding others. The youth

group members were always positive about my research focus and keen for me to understand their experiences and views.

All interview and observation quotes have been anonymised, I have also tried to ensure that no participant might feel uncomfortable if they recognise themselves or others in my study. The young people's feelings about anonymity in the research varied. This seemed related to the young people's feelings about trans visibility: some were happy to be 'out' as trans while others thought that they would be 'stealth' in the future. Only one young person expressed any concern about their family or themselves being identified in research. I had email and telephone conversations with this young person to clarify how I could use their interview. As a result I wrote them a personalised consent letter in which I agreed to change details if necessary to ensure they could not be identified in the research whilst not compromising my integrity as researcher[1]. Following the interview they asked that I did not use some details to which I agreed. In my discussion of the data I have made every effort to preserve their anonymity, even in relation to other research participants.

All the other interviewees seemed unconcerned about the potential for identification following my explanation of the use of pseudonyms and anonymising the research. Following my detailed conversations with the concerned young person I considered that perhaps the others were too trusting of me as researcher. I also considered that they could feel differently about the possibility of identification in five or ten years time when they had moved on in the world to different jobs and relationships. As a result I considered how the young people were presented in the research and how this might be experienced in the future. I had intended that the participants choose their own pseudonyms. However one young person said their preferred pseudonym would be the name of a fictional character that would identify them to other youth group members and to some members of wider queer communities. This

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[1] See appendix 6: the tailored consent letter

would possibly also have made other youth group members identifiable. As a result I decided that I would choose the pseudonyms.

I was aware of the power relations in my relationship with the young people as the interviewer and researcher. This was compounded by my ongoing relationship with them outside the interview space as youth group participants. Since the intention of my research was to make their experiences and views visible as much as possible from their perspective and without pathologising I sought to give them as much space as they wanted to share their views and experiences. I also sought to share some of my experiences and views to make the relationship more equal.

As well as their own interest in participating in the research, all the young people understood my intention to improve knowledge of young trans people in the wider community and make trans lives easier. In this way I think they all felt that I was contributing to the wider trans community, if not to them directly.

Reflections

4D was most likely not representative of young people who identified as trans or were questioning their gender identity at that time in the UK. In particular there were few black and even fewer participants of Asian origin (Roen, 2001). It is possible that young people who could not easily travel to London to 4D would either not come out as trans or might come out through a different route, seeking medical support and interventions before social transition. As such my study is representative of young people with access to London and the freedom to come to 4D. I cannot describe my research data as reaching saturation, that all possible themes had been allowed to surface in the data collection and analysis process (Strauss & Corbin, 1997). However it does represent a range of young trans and non-binary people's experiences, although clearly not the full range of experiences.

The observations and interviews were carried out at a specific point in time. Non-binary identities were becoming more visible in trans communities, but many young people understood themselves on a more traditional cross-binary

trans trajectory. Since the data was collected trans, particular trans male, identities have become more visible in mainstream media. Non-binary identities were not visible in mainstream media at all at the time of my data collection. These are now visible and discussed in mainstream media as well as in some communities of young people, particularly university students. As such my research is something of a historic documentation. It illustrates some strategies and resources that people can use to establish new gender identities and identity categories for themselves. The changes in the naming and visibility of gender identities and identity categories in the wider community shows that identities established in marginal communities of practice can become visible and begin to be established in wider communities.

5   Trans/gender/queer: Multiple discourses and identities

Introduction

Most people do not trouble gender and gender does not trouble them. Their gender performance fits with their assigned sex and also fits with how they understand their gender identity. My research participants, on the other hand, regularly had to negotiate different and sometimes conflicting constructions of gender, and these negotiations took place in several areas of their lives. They had to negotiate four main discourses of gender and transgender identity. I have called these: the medical discourse, the transsexual narrative, queer theory and trans politics. These discourses were negotiated: in the wider community; with medical professionals; with family and friends; in 4D; and in wider LGBTQ communities including online communities. I am particularly interested in how new identities, and new discourses of sex/gender can become viable or established. 4D as a community and the young people as individuals used several understandings of sex and gender and through their engagement had effects on wider understandings of sex and gender. In chapter 6 I look at the performative effect of the pronoun declarations in the introductory circle at the start of each youth group session (Austin, 1976; Butler, 1990/1999). In chapters 7 to 10 I look at production and legitimation of identities within the community of practice of 4D. This chapter looks at participants' engagements with multiple gender and trans discourses to produce, understand, and establish their identities. The effects of the practice within the community, and the effects of the young people's individual practices that I discuss here were multiple, inconsistent, and unstable.

In the next section I explain each of the discourses: medical discourse, transsexual narrative, queer theory, and trans politics as they were generally used. In the subsequent four sections I look at each discourse in turn. First I look at how the discourse was interpreted or reinterpreted by the young people. I then look at how the young people used the discourse, or elements of the discourse to enable them to understand or establish their identities. Each discourse was used in several ways. As I show, the young people used one or

more elements of a discourse to understand and construct their identity for themselves, and to explain their identity to others including family and friends, other LGBT people, and medical professionals. This had many effects, which I also discuss. These included explaining and establishing their identities as legitimate to themselves; they might also establish, or hope to establish, their identities as legitimate to others. This should have enabled them to be treated as their preferred gender by family and friends, or at work or college. It should also have allowed them access to medical interventions to enable them to transition physically to their preferred gender. The young people benefitted in other ways too; they gained access and acceptance within LGBT groups and organisations, they could take pride in their identities, and pleasure in their bodies and relationships. They might also feel they were supporting other individuals, contributing to the trans community, or challenging gender norms.

The medical discourse and the transsexual narrative are closely related, as they are co-constructed. These and the other discourses could be conflicting. However all the young people deployed elements from more than one of the four discourses. Some of the young people managed to synthesise, at least partially, elements from the different discourses that they used. Other young people deployed completely conflicting discourses without any apparent concern.

Four discourses

In this section I explain each of the four discourses: the medical discourse, the trans narrative, queer theory, and trans politics, that the young people used to construct their identities. As I will discuss in later sections the young people used several elements of different discourses. Here I will talk about each discourse, as it is understood in the community that generally uses it. All of the discourses are still evolving. The young people often made use of an older, perhaps even an outdated, version of a discourse that was more established in the wider community than the current one. So I will also talk about relevant earlier versions or elements of each discourse.

In the medical discourse section I will discuss the older diagnoses of transsexualism and gender identity disorder as well as the criteria for diagnosis of gender dysphoria in DSM 5, the latest version. In the transsexual narrative section I will look at the typical form of the narrative established in the 1960s and 1970s, but I will also talk about how there is now more acceptance of deviation from this form. The queer theory section will look at theoretical ideas from the 1990s rather than more recent queer theory. Finally, trans politics is not a coherent politics. It has developed from lesbian and gay identity politics of the 1980s and 1990s, but also from 1990s queer activism. I will outline these in my final section.

The medical discourse

I have outlined the medical understanding of trans in my introductory chapter. The significant documents used by medical professionals in Europe and North America are the DSM (The Diagnostic and Statistical Manual of Mental Disorders) published by the American Psychiatric Association, and the ICD (The International Statistical Classification of Diseases and Related Health Problems published by the World Health Organisation (WHO). WPATH (The World Professional Association for Transgender Health, formerly the Harry Benjamin International Gender Dysphoria Association) is a long established organisation particularly known for their 'standards of care' publications. These publications are used by health professionals alongside DSM criteria as guidance in diagnosis and treatment. Trans people seeking medical interventions also use them to guide their expectations of their treatment. The 5th edition of the DSM was published in May 2013, after my data collection. The DSM, ICD 10, NHS, and Department of Health criteria for diagnosis and treatment of 'gender dysphoria' are very similar (Coleman et al., 2012; Department of Health, 2009; World Health Organisation, 2013).

The current medical understanding of gender dysphoria is 'a clinically significant distress or impairment in functioning associated with gender incongruence'. The description 'gender incongruence' is used in the DSM 5 to avoid pathologising gender non-conformity or cross-gender interests. The intention is that gender incongruence should not be seen as problematic in

itself, so it is necessary for a diagnosis that there is significant distress or impairment in functioning. The main areas of gender incongruence are described as: a strong desire to be or insistence that one is the other gender; presenting or desire to present as the 'other' gender especially in choice of clothes; dislike of one's sexual characteristics or desire for the sexual characteristics of the other sex; cross-sexed interests or belief that one feels or thinks like the 'other' sex. To be diagnosed with gender dysphoria, as well as experiencing significant distress or impairment, people must meet a certain number of the criteria for gender incongruence, and finally the gender incongruence must be longstanding. Suggested treatment of gender dysphoria may or may not include medical interventions intended to align the body with an individual's identity such as hormones or surgery. (American Psychiatric Association, 2011).

The older diagnoses of gender identity disorder and transsexualism in the DSM 4 differed from diagnosis of gender dysphoria in the DSM 5 in two ways that are significant here. The DSM 4 required a rejection of one's primary or secondary sexual characteristics. The DSM 5 allows instead 'a strong desire for the primary and/or secondary sex characteristics that match one's experienced gender'. This allows a trans person to feel very differently about the body they were born with. They may accept or even enjoy the body they were born with, while still strongly desiring a different body. The DSM 5 criteria also include the possibility of desiring to be an 'alternative' gender instead of the 'other' binary gender (American Psychiatric Association, 2011). This means there is a medical recognition of the possibility of non-binary genders, and some medical legitimation of individuals who identify outside of the gender binary.

The 'wrong body' construction is also a medical discourse. Benjamin, Money, and Stoller were all significant in establishing that gender identity was independent of biological sex, and that gender identity could not be changed (Benjamin et al., 1966; R. Green & Money, 1969; Money & Ehrhardt, 1972; Stoller, 1968). This established that the medical treatment of transsexualism and gender identity disorder should be physical rather than psychiatric, achieving harmony between sex and gender by altering the body (Ekins & King,

1996). This explanation is still used in the current WPATH Standards of Care document:

> While many transsexual, transgender, and gender-nonconforming individuals find comfort with their gender identity, role, and expression without surgery, for many others surgery is essential and medically necessary to alleviate their gender dysphoria (Hage & Karim, 2000). For the latter group, relief from gender dysphoria cannot be achieved without modification of their primary and/or secondary sex characteristics to establish greater congruence with their gender identity. (Coleman et al., 2012)

The medical discourse includes several elements that were important to the young people in my research. The constructions of trans in the older versions of the DSM are those generally in circulation outside of specialist medical institutions. These constructions are that: trans people are likely to feel negatively about the body they were born with; and trans people should identify across the gender binary from male to female or female to male. The 'wrong body' construction is very important for two reasons. It constructs the body as problematic; it also constructs gender identity as separate from the body and therefore located in the brain.

The transsexual narrative

We are all familiar with the 'transsexual narrative' as presented in television documentaries and newspaper and magazine stories. This narrative has a typical form. The person has felt 'different' since early childhood. If they were assigned female at birth they were tomboys and dressed as boys; if they were assigned male at birth they had an interest in crossdressing. The person did not feel comfortable in their assigned gender role, or pursuing expected interests. They often felt unhappy or distressed (Whittle, 2006). They often repressed or denied their cross-gender desires. If they presented in their preferred gender they felt comfortable with themselves. After social and medical transition to the opposite gender they became happier and able to lead a 'normal' life. These narratives represent many trans people's feelings and experiences as seen in biographical and autobiographical writing (R. Connell, 2010; J. Green, 2004; Self & Gamble, 2000).

Some aspects of the trans narrative consistently fit many people's description and recollection of their experiences. In Hines' research 'all but one of the people interviewed spoke of transgendered feelings during childhood or puberty' (2007, p. 50). Many people have discussed the problems of retrospective research, but recollections of childhood are important to an individual in understanding and explaining their identity (Gagne et al., 1997). Mason-Schrock (1996) describes the narrative processes of moving to identify as transsexual in a support group for transsexuals and transvestites. The individuals in Mason-Schrock's study spent a considerable amount of time sharing personal experiences. Newer group members listened to others' accounts of how they came to understand themselves as transsexual. Through this new members came to understand the significance of childhood cross-gendered experiences. Importantly they also learnt that childhood experiences of being normatively gendered could in fact be understood as denial of their transsexuality. Mason-Schrock understood that established members modelled the narrative processes needed to understand oneself as transsexual, and guided new members to develop their narratives. Narratives that fitted the transsexual model would be encouraged and supported; anecdotes that didn't fit would be ignored. Through this process new members established a narrative that explained and supported their transition to the 'other' gender. I discuss the use of silence in 4D in relation to the shared repertoire and reifications in chapter 9.

Identifying with the transsexual narrative is important for legitimation in some trans groups (Hines, 2010). Trans groups are designed to be places that people who identify as trans, or are questioning their gender identity can get social support or advice. To function as places of social support people often need to have at least some common experiences. If new people have very different experiences from established members there is likely to be a sense on both parts of being in the wrong place. If new people have similar experiences they will be accepted in the group. However people do not attend trans groups without some prior experiences of gender incongruence or non-conformity. In the process of coming to identify as transgendered, and describing their

childhood experiences of feeling different they will generally have found similarities in the narratives of others. Some trans or gender questioning people will not identify with the medical model of gender dysphoria, but it is important to recognise that 'What trans people are trying to do is find a way of presenting their gender identity in such a way that the rest of the world will understand who they are.' (Whittle, 2000, p. 3). Common narratives are shared with other trans people, but also have a typical form. Consequently they are recognised widely by non-trans people and are extremely important for people in feeling their identity is understood by others.

The medical discourse and the trans narrative are in some ways co-constructed, and so are closely linked. This has been recognised by both trans people and medical professionals, and is in some ways problematic (Hines, 2007, p. 62). The medical criteria for gender dysphoria are developed through meeting with people seeking treatment, as well as through forums such as the panels developing the new DSM and ICD guidelines, which invite contributions. People seeking 'gender confirmation' are seeking medical support to enable their gender identity to be better understood by others. Understanding and acceptance by a medical professional may be extremely important to an individual in their journey to understand themselves or be better understood by others, another route to the individual development of a trans narrative. However it is also well documented that many people choose to tell the story that will give them access to the support they seek (Cromwell, 1999; Hausman, 1995) which may then confirm or solidify particular trans narratives within the medical profession. Neither the trans narrative, nor the medical discourse is static, and both continue to evolve in relation to each other.

Queer theory

> Queer theory offers valuable insights into the ways in which some transgender cultures radically challenge normative taxonomies of gender and sexuality, and it provides a radical vision of deconstructed genders and sexualities. (Hines, 2007, p. 27)

Queer theory arose in the late 1980s and early 1990s in part as a development but also a critique of 1970s and 1980s identity politics (Jagose, 1996). Queer

theory seeks to disrupt ideas of natural, particularly binary and dichotomous identities, by showing that all identities are socially produced (Anzaldúa, 1987; Butler, 1990/1999; Sedgwick, 1990). Butler challenged the understanding of gender as constructed on a natural sexed body, proposing that gender and sex were both discursively produced and naturalised through a process of performativity. This means neither sex nor gender is a natural category instead both require constant reiteration to appear natural. This means that both sex and gender are unstable and are open to resignification.

> That gender reality is created through sustained social performances means that the very notions of an essential sex and a true or abiding masculinity or femininity are also constituted as part of the strategy that conceals gender's performative character and the performative possibilities for proliferating gender configurations outside the restricting frames of masculinist domination and compulsory heterosexuality.
>
> Genders can be neither true nor false, neither real nor apparent, neither original nor derived. (Butler, 1990/1999, p. 193)

Butler and other queer theorists have been very influential in some LGBT and queer communities. Queer theoretical ideas have been reinterpreted and have become established alternative discourses of sex and gender, and sexuality. A very small minority of the members of 4D engaged with queer theory directly. Most, however, engaged with discourses developed from queer theoretical ideas. The quote from Butler above encapsulates many of the important ideas that have become queer discourses of sex and gender. 'Performative possibilities for proliferating gender configurations' becomes the possibility of generating a multiplicity of new identities. 'Genders can be neither true nor false' means that a person's preferred identity is as authentic as a their sex assigned at birth; this identity can also be outside the gender binary. In 4D, these discourses permitted the young people to say how they identified with the expectation that their gender identification was accepted as authentic, even if this identity seemed to contradict their gender presentation or performance.

Trans politics

The idea of trans politics has been around since the early 1990s (Bornstein, 1995; Stone, 1991; Stryker, 1998). Roen (2002) described trans politics as having two strands: liberal and transgressive. Like LGB politics, trans politics still falls into two broad categories. As well as the conflicts between the two areas of trans politics there are conflicts with trans, queer, and LGB politics, which I will not explore here (Namaste, 2000; Stryker, 2004). Liberal transgender politics is concerned with gaining rights and acceptance for transgendered people. Transgressive trans politics seeks to challenge and disrupt gender norms. The liberal discourse demands that trans people should have the same rights as everyone else because they are like everyone else. The liberal discourse therefore constructs trans people to look and behave in normatively gendered ways. The Gender Recognition Act (2005) and the Equality Act (2010) have given trans people significant rights, making it safer for people to disclose their trans status. This has changed the liberal political discourse enabling the possibility of being open about one's trans status, although individuals often prefer to be normatively gendered. Gender transgression requires visible transgressions of gender norms beyond being 'out' as trans or genderqueer. This discourse constructs trans people to look and behave in ways that are contrary to normative gender expectations. These different expectations about behaviour and appearance can make the two strands of politics seem to be opposed to each other, and to create two types of trans individuals. Hines (2010, p. 609) warns that the 'duality of 'transgressive' and 'normative' prevents us from seeing that 'queers' of all genders and sexualities can be decidedly 'normal', and that what (or who) appears to be 'normative' may actually be pretty queer'. In any case, LGBT and queer communities overlap, with individuals moving between and living in multiple communities; individuals are likely to be more or less visible or transgressive in different circumstances. As Roen (2002, p. 521) says 'crossing openly may be necessary and useful in some circumstances (whether or not for reasons of political activism), while passing may be essential in some circumstances.'

Engagement with the four discourses

I have outlined the four main trans and gender discourses that the young people engage with in constructing their identity. In this section I look at how the interview participants talked about their identities in relation to each of the four discourses. The young people engaged with the four discourses in multiple ways that sometimes conflicted. Some of the young people were not concerned about these conflicts. Others tried to synthesise elements of conflicting discourses to produce their identity as coherent.

Medical discourse

Perhaps unsurprisingly the discourse referred to most commonly by the young people was the medical discourse. This discourse was used for legitimation of their identity, particularly as an explanation to themselves. Some of the young people also referred to it explicitly when talking about 'coming out' to their parents. There was also some discussion of interactions with medical professionals, where legitimation is important for an individual's sense of identity. Ultimately the medical discourse is used to legitimate access to medical interventions such as hormones and surgery.

The most common references to the medical discourse were in relation to their bodies, both the 'wrong body' construction, and disidentification with, dislike of, or disgust for their bodies. There were also references to the bodies or bodily experiences that they desired. The young people talked about feelings, interests and presentation as indicators of their identities. There were some interesting reversals of the 'wrong body' discourse. There were also some criticisms of the use of the discourse by the medical profession.

'The wrong body'

The established medical treatment of gender dysphoria is to change the body through hormonal and surgical procedures in order that the body is aligned with the mind. This has been interpreted to mean that 'true' gender is to be found in the brain irrespective of the body. This is extremely well established outside the medical establishment with a wide understanding of the term

'wrong body'. Brendan talked about coming out to his parents and using the 'wrong body' construction to explain his identity:

> Brendan: [I said] that I was trans.
>
> AM: And that was the word you used?
>
> Brendan: Yeah. I think I just put a bit about what it was, …when you feel a different gender to the body you're in or something like that.

Brendan used the 'wrong body' discourse here explicitly to show his parents that being trans is a legitimate identity. Several of the young people used discourses closely related to the 'wrong body' construction. If your gender is in your brain, irrespective of your body, then your gender is the gender you know yourself to be. This then legitimates claiming the other binary gender directly, as Aidan does here, without requiring any explanation of being trans:

> Aidan: [The] first time [I] come here for a trans night I actually called myself female I didn't I never put male down. But now like I just do it because I know what I am inside I know in there I'm a boy.

Similarly James said that he was a man, following the medical discourse of normative binary gender identification:

> James: So I don't specifically identify as a trans man; I identify as a man who has to be trans to be a man…

He saw himself as normatively male, but with the proviso that in order to be that, he also had to be trans.

Blake and Lee were very transgressive in their gendered behaviour, as I discuss later. However both established some legitimacy for their transgressive gender performances, at least for themselves, through an indirect use of the 'wrong body' discourse. They both used an extension of the idea that your gender is the gender you know yourself to be. However both of them described their feelings about themselves as continually changing. This means they didn't have one 'true' gender; instead all their identifications were legitimate. Blake was clear that not only were his feelings legitimate, but that he should show and tell

others about his feelings through his gender presentation rather than 'pretending'.

> Blake: (talking about coming to the youth group) it's just showed me that you can be whatever you feel and just whatever you feel, it's not wrong, it's just what you feel. So, you know, it can't be wrong. Even if, for that split second, I feel like a woman, that's fine. It was true when it was right then, in that moment, but right now, it's not true, you know? And before it used to just annoy me that some days I would feel very feminine, and then I wouldn't and it would be like, well, what the hell's going on! Can I not just make up my mind? It's like, no, that's just what you feel right then and, you know, the worst thing you can do is just pretend that you only feel one thing anyway. So, yeah, I think that's what it's been really good for, and knowing that other people … they're experiencing things, sort of thing, but in different ways.

Lee was also concerned with authentic representations of gender; it said people should present as they preferred. However, Lee also referred to the medical discourse of gender dysphoria to explain and allow 'inauthentic' behaviour, which it refers to as 'faking it'. By 'faking it' Lee meant presenting not as the person desires but in an inauthentic way so they would be treated as they identified, and through this avoid distress.

> Lee: … I mean, in an ideal world, I think everyone should just present how they want to present, regardless of if they think they're going to get read as male or female or whatever, but I mean, that's not always the case because if you're a guy and you want to wear make-up, but you're like pre-T, then you're going to get read as female and that would be really upsetting, and will just bring out so much dysphoria. So you have to like tone it down, and be really butch to avoid feeling crap and stuff. And even if that's faking, you're still protecting yourself from feeling really, really bad.

The medical discourse constructs identity as being internally experienced rather than related to the body. The young people used this to understand, explain, and legitimate their identities, including multiple and fluid identities. The 'wrong body' discourse also enables people's direct understanding of themselves as the other binary gender, rather than as trans.

Discomfort, dislike and disgust

Negative feelings about the body are important in the medical diagnosis of gender dysphoria (and gender identity disorder in the past). The DSM 5 criteria include: 'a strong dislike of one's sexual anatomy'. The DSM 4 includes: 'Persistent discomfort with his or her sex' and 'in boys, assertion that his penis or testes are disgusting'. Phoenix talked about his body as if he was quite detached from it:

> Phoenix: I don't really feel female, like I've got this body, but I don't really feel like I identify with it, and I feel more like a guy than a girl.

As well as feeling he didn't identify with his body Phoenix also said he didn't want breasts. Breasts were the part of the body most talked about in the interviews. All the participants who were assigned female at birth, except Aidan, talked about their breasts. Except Blake and Lee, all of these young people talked about their plans to have their breasts surgically removed. Their dislike of their breasts and their general male identification were reflected in the language they used, which treats this area of the body as masculine. All these participants except Brendan talked of 'my chest' or 'chest surgery'; Brendan talked about 'top surgery'. Mattius was the only participant who referred to their breasts directly, although he also mostly talked about his chest.

> Phoenix: My chest is the main problem for me. It just looks odd on my body for some reason and just doesn't fit. And I'd rather they weren't there, so.

Later in the interview Phoenix talked about wanting surgery, as did Mattius:

> Phoenix: Definitely I'd think of surgery or something because my chest has no use really; it just makes me uncomfortable.

> Mattius: At the moment I would like to have top surgery, because you know I don't like having boobs. And I have no reason to have them, no purpose…

Phoenix and Mattius both said they would like their breasts surgically removed which seems a significant intervention. However, interestingly, they both seemed rather indifferent to their breasts, just saying their breasts were not

useful. Kieran was much more emphatic about the distress his breasts had caused him since they first developed.

> Kieran: Yeah, I had chest angst anyway, like chest anxiety anyway, like as soon as they started growing, … I didn't really know why I just felt that they were huge, … Yeah, so, erm, for me the chest angst did kind of increase a bit but it changed direction a little bit as well. Like, before it was just they were too big and I want them reduced. They caused me pain and, like, discomfort and I just don't like how they look and don't like wearing tight tops, and don't want them being on show. Whereas, like, now it's more I want them gone completely, I don't want them to be seen at all. I don't want people to realise that they're there for instance, so, like, when I'm binding, if I'm not binding completely flat then that can cause anxiety and everything.

Chrissy and Phoenix talked about other negative feelings about their bodies. For Chrissy, the one young trans woman I interviewed, it had been very important that others, particularly boys, did not see her body. This may be because she disliked her body, or that she felt it was an 'inappropriate' body. She emphasised to me how strongly she felt about ensuring her body was not seen through talking about successfully avoiding school showers after PE for the entire time that she was at a boys' school. Phoenix had negative feelings about his body particularly in relation to menstruation and internal examinations:

> Phoenix: The only time that it's a difficulty is the time of the month or to be examined is horrible, really horrible. It's just, yeah, that's the hardest part.

Phoenix was not unhappy with his genitals, as I discuss below. Rather, he found periods and internal examinations unpleasant; these are both intermittent events. My interpretation is that Phoenix was reminded of the unwanted femaleness of his body when he had to deal with these. Given the level of distress Phoenix expressed about these it is interesting that he only said he was interested in chest surgery and that he had little interest in hormones.

Dislike of, or even disgust with, one's body was one of the criteria for diagnosis in the DSM 4, the DSM 5 has dislike of one's body and desire for the 'other' sexed body as separate criteria.

Desired bodies

The interviewees also talked about things they would like or enjoy about the bodies they desired to have. All the young people wanted their voice to change. Most of the trans male, or masculine, participants wanted facial and body hair, or enjoyed the hair they had grown since being on hormones. Unlike the others, Phoenix and Blake were adamant they didn't want facial or body hair, as I discuss in the trans politics section. All those who identified as male or towards male, except Lee and Aidan, talked about their desire or not for a penis. Brendan and Blake both felt they should have a penis.

> Blake: ... the only change I really want is a lower voice... I really do think after that I will feel far more aligned. The only thing really, it doesn't make me feel less of a man, it just feels wrong, that I don't have a penis.

> Brendan: (talking about how he came to identify as trans) I googled, I feel like I should have a penis.

None of the trans male or masculine interviewees were considering genital surgery at the time. One of the main reasons for this was their views on genital surgery for trans men. The view at the time was that the surgical possibilities had poor outcomes. These surgeries still have compromised results, with people having to make choices about their preferred outcomes: sensation, penetrative sex, or urinating standing up (St Peter's Andrology Centre London, 2017). Summed up separately by Blake and James:

> James: it's just crap

> Blake: the technology's shite, that's why

As well as being concerned about the poor outcomes of genital surgery Phoenix, Mattius and Blake saw their current genitals positively and their comments reflected that they did not want to lose what they currently had:

> Mattius: it's quite a valuable part of my body, I don't want to, you know, disfigure it or anything, so ... yeah!

Phoenix also talked about having a penis as unnecessary for him to be accepted socially as male:

Phoenix: ...I'd rather just leave it and know that everything's intact and it's OK. Because what do I really need it for? I don't know. I don't really need it. And the funny thing is I could have hormones and have a flat chest and pass through the world and people will treat me like I did have one, so what would be the purpose of going through that pain?

Phoenix's view accords with Kessler and McKenna's findings. Kessler and McKenna asked participants to make sex attributions to drawings of figures 'with various combinations of typically male and female physical characteristics' (1978, p. 146). They found that, if the genitals in the drawing were covered, the majority of participants attributed 'male' to drawings of figures with both male and female characteristics (Kessler & McKenna, 1978, pp. 146-149).

Phoenix talked about desiring the experience of masculinising hormones, not just the effects. He was the only interview participant that expressed this view. However I heard several references within the youth group to 'second puberty', which was understood as a rite of passage for young trans people to become who they felt themselves to be. Phoenix talked about believing that he needed this experience to feel like an adult:

Phoenix: No. Even though I'm almost 22 I just don't feel very grown up yet. ... I think maybe it's because I haven't experienced puberty that I was supposed to have yet ...

Chrissy, the one trans woman that I interviewed, expressed very different desires for her body from the transmasculine interviewees. She too wanted to change her voice, but to be 'lighter' rather than 'deeper'. Otherwise she wanted to lose her facial hair and not to lose her hair through 'male pattern baldness'.

All her desires were for changes that would mean she was recognised as a woman. In discussing whether she would like surgery or just hormones her desires related to how she would be perceived:

AM: And then you don't know if you'd have to go further than hormones, because it would depend on ...?

Chrissy: It would all depend, depend on how I'm seen.

Lee had been on hormones for some time and its body had a mixture of male and female characteristics. Lee enjoyed having a non-normative body, as I will discuss in the trans politics section.

The young people engaged with both the established medical discourse of disgust or dislike for one's body, as well as the more recent criteria of desire for the body of the other sex. Some of them also talk positively about aspects of their current bodies. These engagements were generally used to explain and legitimate the physical interventions they desired.

Other medical criteria

All the young people I interviewed made connections between their bodies and the medical discourse. Some of them also referred to other criteria for gender dysphoria. Aidan made two links, hating his female identity but also wanting to dress as a boy. Kieran said he must be trans as opposed to genderqueer because he had no feminine interests.

> Aidan: Well I hate being a girl; I don't like being a girl. I want to be a boy because you get more boys' clothes. So it's like I just want to be a boy. I wanna, I hate being a girl. I wish I was born as a boy.

> Kieran: ...I couldn't actually find anything that would make me feminine, like, I couldn't identify much with much, many things that were female-identified or feminine! So I thought how can I be genderqueer, if I can't ... like, I'm not...! Yeah. It's like so, you are trans, aren't you? (slight laugh)

These feelings reflected both the medical discourse and the traditional transsexual narrative with which it is co-constructed.

Reversals of, and challenges to the medical discourse

There were some interesting reversals of the 'wrong body' discourse. The medical construction is that the body should be modified to align with the mind, which gets interpreted into the idea that gender is in your brain irrespective of your body. Phoenix almost reversed this discourse. He felt that if his body reflected how he identified, more male than female, then he would be happy with whatever gender attributions were made about him. He referred to

'passing', which I interpret to mean 'being read'. Although there is also a suggestion that he would be comfortable sometimes presenting as more female and sometimes as more male:

> Phoenix: Because you know what, I don't actually mind passing as both, but it's just my body. If I was passing as both in a body that was more comfortable to me I'd probably be OK. If someone thought I was female I was like OK, well, fine. But as long as I'm comfortable then that's OK and that's all I want really.

This approach was in contrast to both medical discourses and traditional transsexual narratives, both of which assume a desire to be recognised and understood as one's preferred gender.

Medical legitimation

Medical legitimation has been extremely important to the establishment and recognition of trans identities, particularly transsexual identities. For many of the young people the medical diagnosis of their identity was important as it legitimated their feelings and their identities to themselves and to their families. A medical diagnosis would also allow access to any physical interventions they desired. Nathan talked about knowing that he was not a 'weirdo' following his diagnosis:

> Nathan: … At the initial assessment he said, "You're a typical thing I see every day in trans guys, it's the same story, it's the same sort of basis. I'm convinced that you've got genuine dysphoria, transsexualism as they call it, or whatever. I'm very convinced that you've got what I'd (jumbles words) diagnose." So I thought OK, I'm not just thinking in my head I'm a weirdo, or whatever! (slight laugh)

Chrissy at the time of the interview had had several set backs in getting referred for medical support. As a result she often talked as if she was uncertain of her identity, and it felt that medical legitimation was important to her. However she was also critical of the medical criteria, that they did not accept a wide enough understanding of femininity:

Chrissy: ...I doubt I'll ever be like a girly, girly, girly girl. I don't know. I doubt I'd really be like ... you don't really have to be to be a girl, as long as...

AM: No.

Chrissy: And that's the feeling I got they wanted me to be when I saw a local psychiatrist and things, to get the funding to go to Charing Cross.

AM: OK. That they had a sort of specific idea of you should be a very girly girl?

Chrissy: Pretty much.

AM: And, erm...

Chrissy: And they didn't ... I don't know, they just seemed a bit weird about it.

Lee also challenged the medical criteria of cross-gender play:

Lee: ... They just wanted to talk about the toys that I played with, and I was, like, "I played with toys! I don't remember!"

The medical discourse was therefore used by the young people in several ways. They mostly use the 'wrong body' discourse and the more established discourse of dislike of one's body. They also talk about bodies they desired, in reference to a more recent criterion for diagnosing gender dysphoria. There were also some reversals of, and challenges to the medical discourse.

My participants used the 'wrong body' discourse to legitimate their internal identity, both to themselves and to others. It also established their gender without reference to their bodies. The young trans men discussed their dislike of and disidentification with their breasts, and their desires for a penis although they did not consider that to be medically possible at the time.

Transsexual narratives

The transsexual narrative was very commonly referred to. The young people particularly used their feelings or behaviours from early childhood to legitimate their identities, again to themselves, but also to family and friends. They also referred to repressed desires and attempts to be correctly gendered. The idea of

denial was used in two ways. More common than talking directly about denial they professed either justifiable or bizarre ignorance of either the possibility of being trans or of doing gender differently. They also referred to denial through the idea of not being a full person or not being honest with oneself. The techniques of construction of the self described by Mason-Schrock (1996) of looking at others' narratives and testing whether they fitted were also commonly discussed.

Early childhood

Medical criteria include 'long standing gender incongruence'; in the DSM 5 this is specified as being for at least six months. The co-constructed transsexual narrative similarly looks for evidence of transsexuality in the past, but most importantly in early childhood when cross-gendered interests are seen as unreflected and therefore evidence of one's gender identity (Mason-Schrock, 1996). Many of the young people identified with the transsexual narrative and made references to indicators since early childhood. For the transmasculine young people this was usually about being a tomboy:

> Brendan: I always had like friends who were boys, I was like a tomboy in primary school...

> Tyler: ... It's kind of ... I've always worn very masculine clothing, I'm not going to lie, I've always been the tomboy, you know?

It is interesting that Tyler added 'I'm not going to lie'. Tyler knew that I would accept his self-declared identity. He said in the interview that he was trans, that he wanted to be recognised by friends and family as trans, and that he intended to pursue medical interventions. Tyler's statement about 'always being the tomboy' constructed him as trans within both the medical criteria and as part of a transsexual narrative. 'I'm not going to lie' would mean something very different if it were attached to a statement that contradicted Tyler's identification as trans. Here 'I'm not going to lie' suggests I shouldn't question his statement, but in fact made his statement seem less true.

Chrissy talked about her cross-gender play as a young child. She said that she often made cross-gender choices about toys, without any reflection at the time.

She used this to show that her female identity was a natural unchanging part of herself. She talked about putting an electronic toy setting to 'female' without thinking about it:

> Chrissy: ...(slight laugh) even before then, I'd been selecting female and things. I had this, erm ... this is a bit of a girly thing to have, (slight laugh) I can't think what they are ... I remember it had a male and female setting and I set that to female.

Chrissy also talked about having an interest in her mother's 'things', 'trying on her mother's stuff'. In this case she also talked about repressing her cross-gendered interests:

> Chrissy: ... Always seen to be a bad thing. I remember trying on my mum's stuff and playing with my mum's things...I just remember her saying something like, she thinks I might be a transvestite when I'm older, and to me it sounded bad, so I stopped because it just sounded like it was a bad thing.

Mattius talked about trying to be feminine when trying to discover his identity, but constructed himself as naturally masculine when he said it 'felt a bit like playing dress-up with me, it never came naturally':

> Mattius: I don't know if it's particularly a process, but I went through a lot of phases of I guess trying to find myself and I sort of, you know, went through stages of being like a total tomboy. And then there were times when I would sort of, you know, be really girly because I kind of ... I can look at other girls and appreciate, you know, if they're wearing nice clothes and nice make-up, but I kind of tried to get into that but (slight laugh) it kind of always felt a bit like playing dress-up with me, it never came naturally.

Nathan twice talked about his parents' perception of him as differently gendered since early childhood. Through this he established his identity. He also established his pleasure with his parents legitimation of his identity:

> Nathan: My parents, they said they knew when I was ten and at the end of the day, I'm their child, I'm always going to love you.

Interestingly James used the early childhood narrative, while denying its relevance. He still got the benefit of being legitimated in the trans narrative! He also explained his view that it is not early childhood experiences that make you trans, rather your current feelings.

> James: Well, it's not irrelevant, but it's irrelevant just because I've had a "typical"[1] trans childhood in the sense that it's quite common, mine, it doesn't make me any more or less transgender than anyone else. You know, you can be happy with your gender identity until you're 50 and then, you know, transition or whatever, you know?

If evidence of being cross-identified is missing in recollections of early childhood, or there is evidence of being normatively gender then the transsexual narrative demands further explanations.

Denial

The transsexual narrative includes the possibility of denial to explain a normatively gendered childhood. Mason-Schrock (1996) refers to stories of 'self-distraction' as evidence of denial. Many behaviours can be understood as self-distraction, including substance abuse and family problems. Phoenix talked about several different issues that referred to the trans narrative: his early discomfort, depression, and drinking:

> Phoenix: Yeah, I've questioned my own gender, I don't know, since I was about four. I never felt right or comfortable in my own skin, and when I went through puberty it was really horrible because I didn't want any of the changes that were happening. And it led me to become really shy and a complete introvert which is the opposite of what I was before. ... I became really low, quite depressed, very anxious in my teens and was on antidepressants when I was about 19, I was drinking a lot and I just felt completely on my own.

Blake talked about his preoccupations with other people instead of himself as a self-distraction:

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[1] James here says 'bunny ears' to indicate quotation marks.

> Blake:... Well, overall as a kid I think as well, I've always been just really unperceptive, er, everything goes over my head. I do obviously care about other people, because I'm not very self-involved at all, erm, and I don't ... I just don't take much interest in myself and I think that's the reason why I didn't realise until so late, because I never think about myself, like because I do, I just put other people before me, but not on a ... I don't really go around saying that, but I do. I don't think too much about myself and especially gender; I mean, you just don't think about ... who questions their gender? It's just something that apparently is there.

Kieran suggested a denial of his true self through talking about not being fully engaged in the world:

> Kieran: ...before, one of my screen names was F***, and I got that from, like, Phantom Ghost, because the way I felt before was like I wasn't a complete person; it felt like I was kind of transparent and not really here.

Kieran and Mattius both explained an aspect of their childhood behaviour but instead of using the idea of denial they talked of just not knowing:

> Kieran: Before it was I didn't really care so much about my appearance. I had clothes that I'd had for about ten years that I was still wearing, because I found going shopping really awkward and uncomfortable. For some reason, it didn't occur to me that I could buy from the male section if I wanted to; I always thought like, female, go to a female section.

Several participants used ideas of denial or ignorance to explain normative behaviours. Others then talked about how they came to understand they could be trans.

Narrative construction and testing

Mason-Schrock's paper (1996) talks about the techniques of constructing the 'true self', which include talking about childhood experiences and ideas of denial. He also talks about how transsexuals learn from others how to tell the stories that legitimate their identity. Listening to others' stories is not in itself part of the transsexual narrative, but is a technique for exploring and

legitimating one's identity. It was suggested to Kieran that he look at other people's stories to see if they would help him make sense of his identity:

> Kieran: It was kind of all around the same time, like after YQ[1], I was talking to some of the people who were involved in it, and was saying that I was questioning my gender, and they referred me to YT[2] to, like, talk on the boards and to use that as one way of, like, hearing other people's stories and seeing whether it fits. And a way of, like, using male name and pronoun on-line and see if that fits, kind of thing.

Here Kieran also talked about trying out his new identity as a test. Nathan and Tyler referred to similar tests:

> Nathan: on an on-line sort of website for self harm, and I was just chatting to a guy one day, chatting about stuff..., he said something, "Oh, I hate being in this body. It's not my body and I don't feel comfortable in it." And I sort of said, "Oh, what do you mean by that?" and he sent me a private message going, "I used to be female but I'm presenting as male." And I went, "That's exactly how I feel but I'm not presenting as male." And we had this in-depth conversation for about three days in a row about being trans and he just went, "Go out and present as male for one day and see how you feel." And I went out and did it, and I was just like, this is amazing, I feel so much happier.

The transsexual narrative uses recollections of childhood cross-gender experiences, and ideas of denial to explain normative gender experiences. The young people used both these narrative effects. They also talked about learning about their trans identity from others' stories and then testing themselves to see if the identity fitted.

Queer theory

Queer theory was not used directly by most of the young people. Rather they used a discourse of the legitimacy of non-normative gender performances that

[1] YQ: Young Queers was an LGBT youth network

[2] YT, Young Trans was the trans only section of YQ. YQ and YT had separate online forums.

has been established in LGBT and queer communities. This discourse is derived from queer theory. Butler (1990/1999) uncouples normative gender performances and heterosexuality from gender identities through her discussion of the apparent naturalisation of the connection between sex, normative gender and heterosexuality through the heterosexual matrix. The young people used a reinterpretation of this to legitimate their gender identities despite their non-normative presentations or sexualities. Butler (1990/1999) also establishes the performative construction of identity. The young people reinterpreted and used this in two ways. Individuals could claim any identity they wished, as any identity is constructed rather than natural. Individuals could also legitimately hold multiple, fluid and contradictory identities.

The heterosexual matrix is broken

James, Mattius, Brendan, Nathan and Tyler all talked about being male while accepting, or enjoying being effeminate or gay. This was possible because of the uncoupling of gender identity from gender performances and sexual orientation.

Brendan talked about being accepted as male at a new place of work, before he had started hormones or had surgery:

> Brendan: I think they all thought I was a young gay man because of my voice. <chuckles> And I have camp moments I suppose. So they thought I was a … So when I said I had a girlfriend they were like really!? You?! <chuckles> Yeah. But yeah, but at least they're seeing me as male.
>
> AM: Yeah.
>
> Brendan: I don't mind being seen as a gay man.

Mattius talked about understanding that he could still be male even if he chose to do things that didn't conform to binary gendered expectations.

> Mattius: … ever since I started going to the youth group in particular I feel a lot more, erm … well, I guess a lot less that I have to conform to different, you know, gender stereotypes and it's just opened my mind a bit about, you know, the gender spectrum. And I guess it's more support in Graeme and in that in sort of the real

world, like where I'm a college, for instance, I feel that, you know,
if people see that I wear nail varnish, for instance, they'll think,
well, you can't identify as male and wear nail varnish. Whereas,
you know, at the youth group and YQ people don't care about that
stuff and that's the sort of support that I get! (slight laugh)

These young people all saw their non-traditional gender performances as not
threatening their gender identity.

Identity claims

The queer theoretical idea of gender as performative is reinterpreted to allow
an individual to determine their own gender. If all genders are constructed
performatively and no identities are 'real' then an individual can determine
their own gender. Aidan used this reinterpretation of gender as performatively
established and claimed his right to determine his own identity to his mother:

Aidan: I wanted to tell her I wanted to be a boy and I was just like
scared and then I just come out with it. 'Look at the end of the day
I don't want to be a girl no more I want to be a boy.'

…

Aidan: It's up to me what I want to do, if I want to be a boy, I'll be a
boy.

Although Aidan had the confidence to claim his self-determined male identity he
wanted his mother's acceptance to feel legitimately male. His mother showed
her acceptance by using his chosen male name:

Aidan: …and she's happy with it, now she's calling me Aidan.

Here Aidan claimed the other binary gender. He and other young people also
used queer discourses to legitimate alternative gender possibilities.

Identity possibilities

If identities are unstable and constructed then holding different identities in the
past, or having multiple identities now does not threaten one's claim to being
trans. Nathan talked about previously being a lesbian without any sense that
this could put his trans identity into doubt. Rather than saying he misidentified

himself as a lesbian he claimed his former lesbian identity as true. Nathan said that he tested his lesbian identity in a similar way to his test of being trans.

> Nathan: OK. I came out as a lesbian when I was about 15 or 16, I sort of went out with a guy to make sure that I was certain I was a lesbian, (slight laugh) ... and I sort of got there and I was like, yeah, I think I definitely am.

Aidan referred to himself in many different ways throughout the interview. His identity was contextual; he talked about himself as a boy with his mother and at the youth group. He also talked about his identity/ies at college. Aidan's statement needs clarification. His use of 'like' was as a filler; he was saying he wanted to be a boy rather than similar to a boy. Elsewhere Aidan also talked about being sexually interested in women, so his use of gay meant being female, being a lesbian.

> Aidan: ...I only let one of my teachers know what I am. Like she knows about me like I'm gay and everything like that, and I want to be like a boy. But ain't exactly told her that yet, got to, I've got to tell her that.

Later Aidan also said he called himself a tomboy, as well as a boy.

Aidan seemed to have one identity, male, at the youth group and with his mother. However, during the interview, he showed that he thought about himself in multiple ways. He thought that his teacher should know him in two ways, both as gay (and female) and as a boy.

For some of the young people the constructed nature of identity meant that it was possible to have identities outside the gender binary. Mattius talked about the instability of binary gender categories, and about learning the word genderqueer as an alternative possibility:

> Mattius: Yeah, I mean, I identify as FTM but I think that once you start to really look into gender, it's really difficult to say, like, you know, oh, I'm a woman or I'm a man, because ... you start to question what it actually means to be, you know, either, and I think that it's made me sort of it's made me think a lot about gender, like especially going to places like the youth group. So,

yeah, it feels, like, weird to say like, you know, oh, yeah, I'm a guy, when I know that it's such a loose term, and it's just, it's got so many stereotypes attached that, you know, I fit some of them and there's some that I don't fit.

Later in the interview:

Mattius: It was actually a friend of mine that kind of introduced me to the term, because I kind of just said to them, like, "I sort of feel both male and female," and they just said, "Oh, so you're genderqueer?"

Mattius' understanding of himself as feeling both male and female had been legitimated. His friend accepted his identification, and by naming it 'genderqueer' showed that it had legitimacy in wider communities.

James and Blake had tried several identities, including non-binary ones, although they said they had fixed identities when I interviewed them. James elsewhere said that he saw himself as male. I understood that he used gender variant in the quote below to show that he had been on a journey through non-binary identities. He also wanted to give equal legitimacy to binary and non-binary genders. Blake had also thought about several different identities. When I interviewed him he identified as mostly male, rather than fully male. Non-binary and fluid identities are all suggested as possible through the performative nature of identity (Butler, 1990/1999).

James: I'm happy with gender variant, because it's not a specific identity, because, you know, the last year or so has been a sort of learning journey for me and I've experimented with different identities, erm, and I'm pretty settled on this one. But, yeah, I just think gender variant is encompassing all possible non-cis stuff.

Blake: Yeah. It's fixed on that point and it just took a long time to get there, and I don't think it will be male fully, not because I feel disadvantaged not being born a cis male, but just because I know that I'm quite an effeminate male and for that I think the words masculine and feminine tend to slot (sic) around, like, your male and femaleness.

Blake and James used non-binary identities to understand themselves; Mattius and Lee were more active in creating new identities.

Identity creations

Mattius talked about his developing preference for being understood as male. His liking for being male is sufficient for him to make that choice; there is no need to refer to any other evidence in himself or his past:

> Mattius: It was more sort of a gradual thing of like, you know, at first it was just sort of, you know, oh, wouldn't it be cool if people thought, you know, sort of looked at me and sort of mistake me for, like, sir. And just sort of that developed into sort of being, you know, oh, that would be cool, into sort of, well, actually I would much prefer that. So ...

Lee no longer saw itself as having a fixed identity. Lee understood trans to mean it had made a move, a transition between labels. Lee felt it could create words to express its feelings about itself. There was clearly a lot of enjoyment for Lee in this creative process:

> AM: And do you still identify as trans?
>
> Lee: Yeah. Yeah.
>
> AM: Do you want to say more about that?
>
> Lee: Yeah, well, I mean, socially I've transitioned from FTM. Er ... yeah. So that's like my outwards transition, but I'm transitioning again from ... to something else I don't know. So I think I do identify as trans, because there's always a trans, transitioning, whether you transition forwards or backwards, or whatever way. Yeah.
>
> AM: So you're saying you identify as trans because you're transitioning?
>
> Lee: Yeah. And I have transitioned, but then you don't have to identify as trans, so ... But, yeah, I identify as trans.
>
> AM: Yes. Yes. Do you identify as anything else? Would you use any other word?
>
> Lee: Genderqueer. Usually that's what I identify, FTMTF – female to male to femme.
>
> AM: (slight laugh) Female to male to femme?

Lee: I identify as femme, so ... androgynous, androgyne – third gender, I don't know. Non-binary! I think the safest thing is genderqueer and non-binary.

AM: Genderqueer and non-binary?

Lee: Yeah. Non-binary, genderqueer person, so ... sometimes.

AM: And why attach the non-binary to that?

Lee: No, it's just a lot of words I use.

AM: No, I mean, I'm quite interested in the words.

Lee: Yeah.

AM: You don't...?

Lee: It's just another word I use, non-binary.

AM: Yeah, OK. It's not...?

Lee: Or gender variant, or ... it's not solely how I identify.

Queer theory establishes identities as unstable and open to resignification. LGB and trans communities have reinterpreted this understanding in several ways. Gender performance and sexual orientation do not need to follow normative expectations based on gender identity. So being effeminate or gay does not make your male identity any less legitimate. Because identities are unstable there is no inherent contradiction in having several identities in the present or in the past. So the young people felt they could identify differently in different contexts. They did not need to reinterpret former identities as mistaken or evidence of denial. Queer theory was also used to establish 'new' and non-binary gender categories.

Trans politics

The young people's identity constructions and behaviours would have effects in the world, and some of the young people may even have understood their gender work as political. However, none of them talked about being political and I am not concerned with their political effects or understandings here. Rather, I am interested in their identities and presentations of themselves that are constructed in relation to the two (overlapping) trans political discourses,

which I have previously discussed. Liberal trans politics seeks rights and acceptance, and constructs trans people as normatively gendered, with a right to decide whether to be 'out' as trans or 'stealth'. For most of the young people this was translated into being normatively gendered and then deciding whether or not to be visible as trans in the wider community through coming out. Almost all of the young people saw being out as trans as the norm. Several understood this as beneficial to other people who might identify trans. There was some blurring with transgressive gender politics as some of the young people were proud of their identity and their physical transformation, and chose to come out in ways that were unintentionally transgressive (Hines, 2010). The politics of gender transgression allowed two of the young people to be very transgressive in their gendered behaviour.

Visibility or invisibility

Liberal trans politics is similar to assimilation politics, it seeks acceptance of trans identities without seeking to change discourses of gender. The trans person constructed through the discourse of liberal trans politics is normatively gendered and is not transgressive. The young people mostly conformed to the model of a liberal trans person. They were normatively gendered. Some understood themselves within a more traditional trans liberal model: they would become their 'new' gender, no longer be trans and would not reveal their trans history. Others, concerned with acceptance rather than transgression, considered the benefits of being open about being trans. Lee, as I discuss later, was very transgressive of gender norms and Lee could not imagine being stealth:

> Lee: I could never be stealth!? Oh, my gosh! *(slight laugh)*

Lee did not talk about itself as political. However this comment and Lee's continual disruption of gender norms reflected a political position which could be seen as oppositional to the liberal position of many of the other young people.

The following young people's comments about their decisions about how open they would be about being trans come from the liberal position:

Aidan seemed to unquestioningly expect to be open about once having been female, and did not seem to have any concerns about any repercussions.

> Aidan: I want to get my surgery done and everything like that. Then I'll say to them I was a girl and now I'm a boy I'll try to explain it to them.

Nathan and Mattius both thought it should be acceptable, or even beneficial for people to know they were trans but also had different reasons for not being out. Historically transsexuals sought to live their lives in their new gender role, and living in one's preferred identity without declaring one's trans history is still common among trans people. As Doen (2002) clarifies it is not necessarily safe or liveable to be out in some contexts. Nathan had been on testosterone for several years and was never read as trans or female. He imagined that he would be happy being out at work, but was concerned about discriminatory attitudes at work:

> Nathan: I think if I knew everyone at work was more accepting of it, I'd probably be quite happily out. But because a lot of the people I work with, they're not very LGBT friendly as such.

Mattius was trans male but was generally read as female and was accepted as male in only a few places. His reasons for wanting to be stealth were related to this, and he recognised that might change in the future:

> Mattius: I really don't know at the moment, because it's, like, at the moment, I would really love to be stealth, but I don't know if that's just because I can't be, sort of thing; that maybe, you know, it's sort of wanting what I can't have, you know? (slight laugh) I'm not sure if maybe once I'm on T, I'll start to feel a bit more comfortable that I won't mind as much people knowing that I'm trans. Whereas obviously now it's a bit more of a sensitive subject, because I don't like being read as female, erm, but I don't know.

Lee and Nathan both saw the visibility of trans to have benefits for other people. Lee's comment was a general one, that trans visibility helps other people to comfortably identify as trans male.

> Lee: Yeah. I don't know. Well, maybe like it's becoming more recognised and people are like starting to put names to what

they've been feeling and then identify as FTM, whereas before maybe with less recognition, they would have just thought they were like a butch woman, or just weird in some way.

Nathan had a lot of facial and body hair; he also had male pattern baldness. He was never read as trans or female. Nathan had photo identification (ID) that had a photograph of him before he was on testosterone when he had long hair and looked very conventionally female. Nathan originally talked about his ID as causing embarrassment. I ask Nathan several times in the interview why he still had this ID. Eventually Nathan described an occasion when he came out and showed his ID to explain his transition and his identity, which made it easier for someone else to explain that they were trans.

> Nathan: …it's sort of helpful because our friend Alex when he came out, his friend decided she was going to come to a YQ meeting and (corrects himself) he wasn't expecting her to turn up. And she said to Alex something about, "You look different." And at that meet he'd come out as being trans to the whole group and he was saying, "I don't know what to say!" and then he turned round and said, "Can't you show her your ID to sort of explain to her?" And I thought, I can get my ID out and let people physically look at it and look at me and go, fucking hell, that's amazing!

There is some blurring here with a gender transgressive identity (Hines, 2010). Nathan made no claims to being transgressive, but in the quote above he showed that he was proud of being trans and of his physical transformation. His reasons for showing his still female ID were not just to help his friend but also to make his transformation visible. Nathan described another incident with his ID; he seemed more ambivalent about this occasion.

> Nathan:… Because I get ID'd and because I haven't got my ID done, they just laugh at me, like, yeah, that's your sister, isn't it?
>
> AM: (slight laugh)
>
> Nathan: And I've got to explain to them! I mean … I was in Costcutter the other day …
>
> Tyler: And why haven't you had it done?

Nathan: Cash. Cash, and can't be bothered! (slight laugh) I mean I was in Costcutter and I was buying cigarettes and the woman ID'd me. And I explained to her... I was explaining to her that I used to be female and now I'm a male, I'm transgender and she just kept smiling at me, like, I don't get it, I don't believe you.

Tyler: She was practically laughing at you, wasn't she?

Nathan: There were two bin men came in, and I didn't want to do it, but I went, "Do you mean what transgender means?" and they went, "Yeah, you know, like transsexual?" and I went, "Yeah." And I said, "Can you explain to the woman that this is me but, you know, I'm now male." And he went, "Yeah, yeah, that's him. That's him, you know?" And he turned round and went, "So you're Natalie now" because he'd read my name on my driving licence, and I went, "No, I'm Nathan now." And he was like, "Are you happy?" and I went, "Yeah, I don't want to kill myself!", took my change, took my cigarettes and just walked out of the shop! (slight laugh) I went, I'm not discussing this any more! (slight laugh).

The effects of Nathan's use of his ID were very different in these two situations. In one case the effect was to gain acceptance of trans as an identity for his friend. In the second case the effect seems to have been unintentionally more transgressive with some destabilising of normative gender identities.

Active gender transgressions

The politics of gender transgression allowed several of the young people to be transgressive in their gendered behaviour. Nathan and Tyler were originally in a lesbian relationship; when I interviewed them they identified as gay men. Tyler clearly enjoyed his and Nathan's transgression of moving from lesbians to gay men, describing it as amusing:

Tyler: We've gone from kind of one end of the gay spectrum to the other (slight laugh) which is quite amusing.

Phoenix talked about being proud of his androgynous appearance:

Phoenix: I think what I want is just a more masculine appearance. I think to look more male than I do now, but it doesn't necessarily mean I'd want to look 100 percent male 100 percent of the time. I don't desire a lot of things that a lot of trans guys want, like hair

everywhere and hair all over here and then losing some hair. I don't want all of that. I don't want a ridiculously low voice, I'd like it to be a bit deeper, but when I think about it I still want to remain androgynous to an extent, because I'm quite proud of being androgynous, I quite like being in-between, but I still want to look a bit more masculine.

Lee and Blake were much more actively transgressive in their behaviour and appearance. Lee talked about its behaviour:

Lee: And I just like confusing people and shaking them up with everything I do really.

Lee then talked about how it wanted to be in the future, when working in the music industry:

Lee: Fabulous. Genderless. Being what confuses bands. Tricks them. "Come to my bed," says I. "What is it?" says you. "Do you really mind," says I?

Lee's enjoyment of gender transgression went beyond its gender presentation. Lee had been on testosterone for several years, but had not had any surgery so its body had both male and female sexual characteristics. Lee had lots of facial hair and breasts. Lee talked of its enjoyment of having a non-normative body:

Lee:... Yeah, it's like a different body. It's like really weird. It's like you see yourself like naked in a mirror, and you're like what? What's going on here! (slight laugh) Everything is just a mix of genders! (slight laugh) Yeah, it's cool.

Blake understood his identity and presentation as completely disconnected. He claimed a male identity whatever his presentation, even if he presented in very feminine clothing and with visible breasts, and expected people to refer to him as male. Blake had become involved with his boyfriend before coming out as trans, his boyfriend was heterosexual, although identified himself as 'heterobendable'. Blake talked about giving *Gender Trouble* (Butler, 1990/1999) to his boyfriend and demanding that his boyfriend refer to him as male:

Blake: ... And I think, he didn't read the whole thing – he just hates reading! (slight laugh) – and I just like highlighted the important bits, and yeah, it resounded with him quite a lot and after that ...

Because I said to him, "You can call me he or she, your girlfriend or your boyfriend, once you are comfortable with using them both equally." …

Blake also talked about how he would present in the future to his friends who still understood him as transitioning from binary female to binary male:

Blake: … but they just see the process as going from female to male; they don't know that, yeah, I'm going to turn up in a skirt afterwards! (slight laugh) …

For Blake his internal sense of himself was the source of his identity. His breasts, and feminine clothing did not affect his sense of identity and so he believed that they should not alter other people's acceptance of his identity.

Blake: Ah, you know what, yeah, but I don't … like since coming out, I think the worst sort of … well, I don't know if it's the worst, but a lot of people seem to be fine with it, because they say I've not changed at all. It's like, well, of course I've not changed; I've just been more honest with you, (slight laugh) because I've realised something about myself! So I guess they're just waiting – I don't know – for me to act manly or something! I don't know what they're waiting for.

So like last night when I was at my friends, I wasn't binding at all and I was wearing quite a low cut top, actually, but I don't at all see that as a reason to … that doesn't make me feel … my chest doesn't make me feel more like a woman, at all.

He continued:

Blake:… Why can't I just be like a guy who crossdresses? What's wrong with that!? And I think, yeah, that's why people get confused, but it still shouldn't, in my opinion, invalidate me who is standing right here telling them I'm not a girl.

… I tend to dress more masculine, but not act more masculine if I go out in public in certain places, and especially if I know I might use public bathrooms or something, you know? But around my friends and stuff, I don't feel the need to do it and I don't expect them to expect me to do it either.

Later he also made it clear that his physical transition should be his choice and not related to other people's gender expectations:

> Blake And if, you know, society's ideas of sexuality, if it was a gay
> male saying this, there'd be no problem, because they're seen as
> effeminate and, yeah, they don't need hair, or any of the
> secondary male characteristics. I'm like, yeah, well, neither do I!

Blake also challenged the gender norms in the youth group:

> Blake: But it was like even at the youth group Christmas party, I
> didn't bind there, again because I was around people that I knew I
> was comfortable, and that it didn't matter how I looked, they'd
> pronoun me properly, which they did, so that's great. But I still got
> asked why; I still got, "Oh, so you're not binding today!" you
> know? So I was like, "Well, I don't have to. I know you guys see me
> for who I say I am, so I don't feel the need to … yeah. I'll just do
> what I want, you know?"

There are two strands of trans politics that have influenced discourses of trans identity. The liberal politics of acceptance into society without changing it produces trans people as normatively gendered. Gender transgressive politics produces people who actively transgress gender norms. These two strands overlap for example when people seeking acceptance reveal they are trans in ways that are in fact transgressive.

Conclusion

I have looked at four discourses that the young people engaged with in understanding and legitimating their identities: the medical discourse, the transsexual narrative, queer theory and trans politics. The young people engaged with and used particular elements of the four discourses. The discourses were reinterpreted, sometimes by individuals, often by a wider group such as 4D or in an online forum. These elements were often used directly in the construction of the young people's identities, but sometimes they were reversed and sometimes they were actively challenged.

The medical discourse comes from the medical criteria used for diagnosis of people with gender dysphoria, but also from earlier diagnoses of transsexualism and gender identity disorder. The young people particularly used a reinterpretation of the medical discourse which I have called the 'wrong body' discourse. They understood their identity as their internally experienced

identity. This allowed legitimation, to themselves and others, of their identity on the basis of their feelings and not their body. This allowed the young people to expect to be treated as their preferred gender and to gain access to medical interventions to change their bodies.

The transsexual narrative is closely related to the medical discourse, as the two discourses are co-constructed. Individuals tell their stories to medical professionals to gain access to medical interventions. The medical professionals construct their diagnostic criteria from the histories of gender dysphoric individuals who have sought treatment. Individuals benefit from medical diagnoses through their feelings and identities being legitimated by professionals. They may consciously or unconsciously construct their stories to fit the medical expectations. These narratives further consolidate medical professionals view of gender dysphoria. The young people talked about early childhood cross-gender experiences, an important element of the transsexual narrative. They also used the idea of denial to explain their recent identification as trans. Sometimes they used the traditional forms of denial: they drank; were depressed or didn't feel fully themselves. Many of them used ignorance instead of denial; it didn't occur to them they could be trans. The transsexual narrative, like the medical discourse, explained and legitimated their trans identities.

Queer theorists have theorised that identity categories are not natural but constructed performatively. Butler (1990/1999, 1993) is particularly relevant to the young people; she theorised that sex as well as gender were performatively constructed. The performative nature of identity categories means identities are unstable and open to resignification. LGB and trans communities have reinterpreted this early queer theoretical understanding in several ways. Gender performance and sexuality do not need to follow normative expectations based on gender identity. So being effeminate or gay does not make your male identity any less legitimate. Because identities are unstable there is no inherent contradiction in having several identities in the present or in the past. This meant the young people in 4D could identify differently in different contexts. They also did not need to reinterpret former

identities as mistaken or evidence of denial. Queer theory was also used to establish new and non-binary gender categories.

The liberal and gender transgressive strands of trans politics result in two different constructions of trans identities. The trans person constructed through the liberal political discourse is someone who crosses the gender binary and is gender normative in their preferred identity. Traditionally gender normative individuals would not have chosen to disclose their trans history. Trans people are now better protected through the Equality Act and the GRA and gender normative individuals now consider whether or not to be open about their trans history. The transgressive political discourse legitimates non-normative gender and trans identities. Although these two strands can seem oppositional in fact there is a blurring between the two. Individuals may see themselves as gender normative but in fact transgress gender norms through revealing their trans history.

The young people understood themselves within these different identity discourses. Some of the young people were not concerned that they understand themselves in conflicting ways. Others tried to synthesise elements of conflicting discourses to produce their identity as coherent.

6 May the illocutionary force be with you: Pronoun declarations in 4D

> A youth group session is about to start. Eleven young people and two youth workers sit in a circle on closely arranged chairs. Graeme, the youth worker, says the session will start with 'names and pronouns' and asks for a volunteer. A young person offers to start and says 'I am Jack and I identify as he'. The person sitting next to Jack says 'I am Ben and I am he'. The next person looks awkward and hesitates before saying 'I am Jo, and I am not sure about pronouns'. This continues around the circle until everyone has made a declaration about their name and pronoun.

In this chapter I explore the processes and effects of young people making declarations of a chosen pronoun that is, generally, other than the pronoun linked to the identity they were assigned at birth. I look at the pronoun declarations within 4D, the structure within which those statements were made and the effects of making those statements.

Using J.L. Austin's ideas[1], I consider the pronoun statements made within 4D as 'illocutionary acts' with 'illocutionary force'. In *How to Do Things with Words* (1976) Austin looks in detail at effects brought about through speaking. He establishes that the context in which speech-acts are made, including associated physical acts, is necessary to bringing about those effects. I have discussed in chapter 2, Butler's understanding of the performative effects of performative utterances and physical acts on understandings of the body in relation to sex and gender (Butler, 1990/1999, 1993, 2004). Butler also considers the iteration necessary to performativity to allow the possible resignification of norms (Butler, 1997; Loxley, 2006; Salih, 2007). However, in this chapter I have returned to Austin to make a detailed examination of the pronoun declarations as speech-acts which bring about effects.

I set the context by describing the 'names and pronouns' circle that is the focus of this paper. I then outline Austin's ideas of performative utterances and

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[1] Developed from a series of lectures about speech acts given in 1955

illocutionary force before using his ideas to understand the effects of the young people's pronoun declarations.

4D was extremely tightly structured in some ways. We always had opening and closing circles and made a working agreement. This was vital as it created a safe space for the young people particularly in relation to their gender identity. The pronoun circle established an alternative gender discourse within 4D, establishing gender as self-identified. This discourse had liberatory effects, but inevitably also had its own disciplinary effects which might limit possible gender identities. As someone who identifies outside the gender binary, I wish to legitimate the multiplicity of gender identities that exist now and may exist in the future. My detailed examination of the performative process enacted through the names and pronouns circle gives an understanding of how new or alternative discourses may become established.

'Names and pronouns'

We started all youth group sessions with an opening circle 'names and pronouns'. For this we usually sat in a circle with perhaps one or two spare chairs. The circle was fairly round and people sat close together, chairs almost touching. If we were outside we stood in a circle. Graeme often said something about 4D and the ongoing project. Then he would say we are going to do 'names and pronouns'. I might also say something in the introduction to encourage the possibility of trying out new names or pronouns. Graeme would ask for a volunteer to start. They would say their name and their chosen pronoun: for example 'I am Tanya and I go by she'. This continued round the circle which, as well as the young people, included all workers, volunteers and facilitators for the session.

Following 'names and pronouns' we established a working agreement for the session, either making a new one, or referring to a previous one if the session was part of an ongoing project. The working agreement was written on a large piece of paper which was stuck on the wall throughout the session; it was folded at the end of the session and kept for follow-on sessions. The items included in the working agreement changed little. Young people were asked to contribute

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and invariably the same items were brought up by young people who had been to 4D before. Occasionally either Graeme or I would add something, based either on our observations or young people's feedback from a previous session. Items included the use of mobile phones, listening to others, and trying new activities.

The use of pronouns was always one of the first items to be included in the working agreement. It was agreed that people should be referred to by their chosen pronoun, but also what to do when the wrong pronoun was used. It was explained that 'we all make mistakes, if you make a mistake apologise and move on', but 'ask if you have forgotten or are unsure' to avoid this situation. Sometime after my involvement with 4D explicit permission to challenge people was included if they used the wrong pronoun, and to involve a youth worker if necessary. This was established after a visiting facilitator used the wrong pronoun for a young person. This established that, at least within 4D, gender identity was entirely to be based on how an individual said they identified, not on legal documents or personal presentation. This was so strongly the case that people were expected to check and monitor the pronouns they used about others, and people had a right to challenge people who pronouned them incorrectly. Reference was consistently and frequently made to 'how you identify', rather than any other basis for pronoun preference. I interpret this as relating pronoun choice to internally experienced identity rather than a role chosen on that occasion.

As well as being supported by the working agreement the 'names and pronouns' circle was framed by new members' access and introduction to 4D. When new members came to the group they came 15 minutes before the session to meet Graeme and to be introduced to me and any other workers. Graeme explained the understanding of sex and gender within 4D to the newcomer: sex is what you have between your legs and gender is what you have between your ears. This is a view held widely about sex and gender, including in the NHS booklets for young trans people and their families published in 2007 and 2008 (Department of Health, 2007, 2008a). Graeme often explained to newcomers that people's appearance might be different from how you'd expect given the

pronoun they chose. Following this he would say 'it's how you identify that is important and we go with that'.

The explanation of 'names and pronouns' and the working agreement established that within the youth group:

- Sex, (as assigned at birth) and gender are not linked, that gender is the identity the individual experiences themselves to be.

- Pronouns represent gender identity, not any other identity

- The individual's chosen pronoun represents the individual's experienced gender identity

- An individual can declare a pronoun and it need bear no relationship to their presentation.

- The declared pronoun is an expression of identity, not of a role that someone is choosing on that occasion.

The relationship between preferred pronoun and identity needs clarification. Pronouns could not represent the nuance of gender identity; declaring one of binary pronouns 'he' and 'she' did not mean the individual identified as one of the binary genders male and female. Rather they might identify as transmasculine or transfeminine, or on a gender spectrum towards male or female.

The final point, that declared pronoun represents identity rather than a role, also needs some consideration. Both Graeme and I said regularly that 4D is a space where people can try new names and pronouns. However Graeme said that many trans people tried out names before they decided. This implied that there was a trajectory to making a final decision. This suggested that any 'trying out' must be purposeful, that it must be intended to help the young person clarify their identity. (I discuss gender trajectories and legitimation in detail in chapter 8).

The majority of young people who attended during my observations identified trans male or transmasculine and were assigned female at birth and came to the group with a new chosen name and using the pronoun 'he'. These young people almost always came to the group presenting as conventionally male or masculine. The young people identified as female, who were assigned male at birth, also generally came to the sessions with a new chosen name, and used the pronoun she. They might present as male or female, and this did not affect their pronoun choice. Young people assigned male at birth were more likely than those assigned female at birth to attend one or more youth group sessions where they used their birth name and pronouns before changing their name and pronoun. The young people who identified as genderqueer or outside the gender binary were the most varied. They generally came to the group with a chosen name and specified that they preferred gender-neutral pronouns; these include 'ze', 'they' and 'it'. Some changed their preferred name and pronoun from session to session.

We also ended all youth group sessions with a closing circle where people again gave their name and pronoun and made some comment about the session. Those people who identified themselves differently from their birth identity at the start of the session always gave the same name and pronoun at the end of the session. This included the genderqueer young people and those identifying across the gender binary. Sometimes young people who came identifying by their 'birth name and pronoun' identified differently at the end of the session; sometimes they identified differently when they came to another session. The new identification was always across the gender binary so if they were assigned male at birth they chose a female name and 'she', the reverse for those assigned female at birth. Young people who identified as genderqueer generally brought this identification to their first session. Young people who had chosen not to speak, or had been uncertain about their pronoun in the opening 'names and pronouns' circle often gave a name and pronoun at the end of the session, although for some it might be one or two sessions before they gave a name and pronoun. These young people again always chose names and pronouns across the gender binary.

Performative utterances and illocutionary acts

Austin (1976) starts his enquiry by considering explicit performatives, and their difference from constatives. Constative utterances such as 'the cat sat on the mat' are statements and are true or false. Performative utterances are speech acts that perform an action, for example saying 'I do' in a marriage ceremony. These, he says, are not true or false but rather happy or unhappy depending on whether the circumstances are appropriate for the act to be performed.

> The name is derived, of course, from 'perform', the usual verb with the noun 'action': it indicates that the issuing of the utterance is the performing of an action – it is not normally thought of as just saying something. (Austin, 1976, pp. 6-7)

Austin then lists the requirements for a performative to be happy, that is to bring about the intended effect.

> (A.1) There must exist an accepted conventional procedure having a certain conventional effect, that procedure to include the uttering of certain words by certain persons in certain circumstances, and further,
>
> (A.2) the particular persons and circumstances in a given case must be appropriate for the invocation of the particular procedure invoked.
>
> (B.1) The procedure must be executed by all the participants both correctly and
>
> (B.2) completely.
>
> (Γ.1) Where, as often, the procedure is designed for use by persons having certain thoughts or feelings, or for the inauguration of certain consequential conduct on the part of any participant, then a person participating in and so invoking the procedure must in fact have those thoughts or feelings, and the participants must intend so to conduct themselves, and further
>
> (Γ.2) must actually so conduct themselves subsequently.
>
> Now if we sin against any one (or more) of these six rules, our performative utterance will be (in one way or another) unhappy. (Austin, 1976, pp. 14-15)

Austin moves to looking beyond single utterances. He clarifies that the 'speech-situation' is crucial to understanding the effect of a speech act. He then returns to his original enquiry into the difference between constative and performative utterances and argues that statements are also performative:

> ... if I have stated something, then that commits me to other statements: other statements made by me will be in order or out of order. Also some statements or remarks made by you will be henceforth contradicting me or not contradicting me, rebutting me or not rebutting me, and so forth. (Austin, 1976, p. 139)

My interest is the performative effect of pronoun declarations in the youth group, not their truth or falsity. Austin concludes that all utterances are performative. Statements have effects and so can be regarded as happy or unhappy. Utterances such as 'it is raining' are clearly true or false but they also have effects. If the person uttering the statement is sincere they will be then be expected to behave in an appropriate way, for example shutting open windows or checking the weather before they go out.

> ... we find that statements are liable to every kind of infelicity to which performatives are liable. (Austin, 1976, p. 136)

More importantly for my argument is Austin's discussion of illocutionary acts. Because they follow conventions illocutionary acts have illocutionary force, and, although they may or may not be successfully brought off, the illocutionary force means that subsequent acts may be deemed 'out of order'. My argument is that the effect of the young people's pronoun declarations is that they follow conventions and so are illocutionary acts with illocutionary force.

Austin explains three effects of illocutionary acts:

> (1) ...An effect must be achieved on the audience if the illocutionary act is to be carried out...Generally the effect amounts to bringing about the understanding of the meaning and of the force of the locution. So the performance of an illocutionary act involves the securing of an *uptake.*

> (2) The illocutionary act 'takes effect' in certain ways, as distinguished from producing consequences in the sense of

bringing about states of affairs in the 'normal' way, i.e. changes in the natural course of events. Thus 'name this ship the *Queen Elizabeth*' has the effect of naming or christening the ship; then certain subsequent acts such as referring to it as the *Generalissimo Stalin* will be out of order.

(3) … many illocutionary acts invite by convention a response or sequel. Thus an order invites the response of obedience and a promise that of fulfilment.

So here there are three ways, securing uptake, taking effect, and inviting a response, in which illocutionary acts are bound up with effects; (Austin, 1976, pp. 116-118)

The illocutionary force of pronoun declarations

I first want to establish that the young people's pronoun declarations had the effects associated with illocutionary acts. I will then consider how the 'doctrine of infelicities' applies and their illocutionary force. Returning to Austin:

…there are three ways, securing uptake, taking effect, and inviting a response, in which illocutionary acts are bound up with effects…(Austin, 1976, p. 118)

Everyone in a session had to join the circle and listen attentively: it was certain that everyone heard and understood the other people's pronoun declarations. So the first effect occured: uptake was secured. If uptake wasn't secured among all those attending the group the conventional effects could not be expected and so the 'new' or alternative gender identities would not be established.

The working agreement ensured that, however they might present, young people were not referred to by their 'birth' pronouns particularly, but also by other wrongly gendered pronouns. Although occasionally an individual might be mispronouned and the procedure might be 'unhappy' in that one instance, more importantly mispronouning was established as 'out of order' (Austin, 1976). So the pronoun declarations took effect for each individual, and the alternative gender discourse of identity as self-declared was established within 4D. The effect of inviting a response or a sequel is not a requirement, but I will look at expectations later on.

It is vital to look at the whole speech situation, as Austin argues (1976). The speech acts made in the pronoun circle were framed by two other events in addition to the working agreement. First, Graeme's introductory comments to new members, described earlier, explained the alternative gender discourse within 4D. Then, attending the group was itself illocutionary act with a performative effect that I consider below.

Like many LGBT youth groups the location was not advertised; the time and location of 4D sessions were made available through contacting Graeme, although sometimes young people told others. The act of attending 4D was another illocutionary act and established an effect. The effect was to bring about an understanding of the gender identity of a new member. Here the uptake was secured by attending 4D. Attending the group was only expected of young people who identified as trans or who were questioning their gender identity; so the meaning of attending the group was that the young person was trans, genderqueer or questioning their gender identity. It was a conventional act; it followed an accepted convention whose meaning was understood without further explanation. The act then took effect in the same way as the pronoun declarations: it was out of order to use young people's 'birth' pronouns.

Graeme structured 'names and pronouns' by saying that people should give their chosen name and how they identified. I regularly suggested that it was a space where people could try different names and pronouns. Graeme always supported this by saying that it was a safe space to try things out, that many trans people, including him, had tried out several names. However the implication of attending a session at 4D was that the young person felt some level of uncertainty about, or unhappiness with, their assigned gender and that they were seeking some support or resolution for this. In line with stages of trans identity development (Devor, 2004; Gagne et al., 1997; Lev, 2004), this established an expected trajectory within 4D: from being unhappy with the gender as assigned at birth, through a state of some uncertainty, to a resolution with one preferred name and identity. The working agreement and introductory comments from Graeme established the idea that gender is how someone feels, that may be different from their sex as assigned at birth, and their body or how

they present does not affect this identification. All discussion was of gender identity rather than any experimentation with gender presentation. So declaring a name and pronoun was presenting an identity that was understood as an experienced identity or an exploration to find one's identity. It was not a performance or an experiment.

Now I will look at the 'doctrine of infelicities' in relation to making of gender statements in this way. The doctrine of infelicities states:

> (A.1) There must exist an accepted conventional procedure having a certain conventional effect, that procedure to include the uttering of certain words by certain persons in certain circumstances, (Austin, 1976, p. 14)

There was a conventional procedure which included the uttering of certain words in certain circumstances: all those attending a session had to sit in the circle and state their name and pronoun in turn (newcomers could choose not to speak) and it happened at the start and end of all youth group sessions. People stated their own name and pronoun. There were no interruptions, questions or discussion. This procedure was accepted: everyone who had previously come to 4D expected to perform this procedure, and newcomers had to participate by joining the circle, although they could choose not to speak in the circle. This procedure had a conventional effect that within that session people would, when referring to a person, use their declared name and pronoun or be seen as 'out of order'. Other effects, established through the working agreement, were to establish procedures for dealing with mistakes and for avoiding mistakes. These effects established a alternative discourse of gender identity as individually experienced and unrelated to presentation.

The procedure allowed for non-binary gender identifications and for changing identification. Unlike in the wider community, everyone had to establish or reiterate their gender identity, even if they were not changing or questioning their gender identity. For young people who did not speak in the circle they established their disidentification with their 'birth' identity through attending the youth group. The conventional procedure was being continually re-established by the youth workers and the young people who had been before,

through the reiteration of the names and pronouns procedure as well as the working agreement. As with marriage ceremonies not only the two people who are married are affected but the other people are then expected to treat them differently. The reiteration of the pronoun process, at the start and the end of every session, allowed changes of gender identity. These effects did not require a different procedure to undo their effects (for marriage this is divorce): their effects were changed if a new pronoun was declared.

There were also expectations about what would happen in the future. A young person who attended 4D might or might not choose the pronoun that corresponded to their sex assigned at birth. For young people who did not choose their 'birth' pronoun there was an expectation that they would continue to make the same pronoun declaration. If they did choose their birth pronoun the expectation was that they would change their preferred pronoun in the future.

In accordance with this if a young person had declared a pronoun other than their birth pronoun others would refer to them using this declared pronoun. However no one referred to a young person by their birth pronoun, that I ever heard, even if that was the pronoun they had declared. Outside the group Graeme sometimes referred to people by the pronoun that he believed they would choose in the future. For example someone assigned male at birth might state their pronoun as he in the pronoun circle. However on at least two occasions I was aware that Graeme referred to people in this situation by she (or he for someone assigned female at birth) in any discussions that involved them before or after the session.

> (A.2) the particular persons and circumstances in a given case must be appropriate for the invocation of the particular procedure invoked. (Austin, 1976, p. 15)

The persons who were appropriate were individuals talking about themselves. The circumstances were within the introductory and closing circles at 4D. Everyone was required to join in and the circle was repeated if newcomers arrived late, after the names and pronouns circle. It was explicitly stated that 4D

was a safe place for this procedure, with a suggestion that there would be sanctions if people did not respect people's chosen pronouns. There was also reference to the fact that outside 4D it might not be the same. This was done by positioning the gender discourse in the wider culture as incorrect in the introductory discussion about gender identification in the group.

> (B.1) The procedure must be executed by all the participants both correctly and
>
> (B.2) completely. (Austin, 1976, p. 15)

People might choose not to speak but they could not choose not to participate. They were not allowed to leave before the closing circle except with prearranged permission to leave the session early. No one could, or did, speak for someone else. For the procedure to be executed correctly everyone had to be in the circle, everyone had to be silent, except when it was their turn, and attentive. The declarations had to go in order round the circle from the person who chose to start and finish at the person next to them. There was no comment allowed during or afterwards on what was said. Pronouns could not be left to assumption. Occasionally people would say their name but not a pronoun and didn't say they were uncertain. I, or sometimes Graeme, would then prompt the person to give a pronoun.

People were allowed to change pronoun and name from the opening circle to the closing circle or, if they were newcomers, to pass or express some uncertainty about their pronoun.

> (Γ.1) Where, as often, the procedure is designed for use by persons having certain thoughts or feelings, or for the inauguration of certain consequential conduct on the part of any participant, then a person participating in and so invoking the procedure must in fact have those thoughts or feelings, and the participants must intend so to conduct themselves, (Austin, 1976, p. 15)

Clearly the procedure was designed for people whose gender identity did not conform to their sex assigned at birth. However facilitators, who were always

included in the pronoun circle[1], could have an identity that corresponded to their sex as assigned at birth, so it was important that the procedure also worked for people whose identified as assigned at birth. I look at these two groups separately. The consequential conduct that was inaugurated was at two levels: in relation to others' identity and in relation to an individual's own identity, I will discuss both.

4D members, through the illocutionary act of attending the group, established that they did not identify with, or were questioning, their gender as assigned at birth. Graeme and I, the longstanding youth workers, had established that this was the case for us too. Facilitators and other temporary volunteers needed to make a pronoun declaration as it was not acceptable to make assumptions about someone's gender identity. Parents, partners, friends and siblings who came to family events might be assumed to identify with their sex assigned at birth, but would still be expected to make a declaration in the pronoun circle.

Young people attending the youth group were understood to not identify, or have some uncertainty about identifying, with the gender they were assigned at birth. For them, the procedure inaugurated the consequential conduct of not having their birth pronoun used. As explained above, this was the case even if the youth group member had not made a pronoun declaration or had made a pronoun declaration in alignment with their birth assignment. If someone declared a pronoun other than that assigned at birth, it inaugurated that their chosen, non-birth pronoun, should be used, and that other pronouns, birth or non-birth, should not. There was no basis on which to gender or pronoun someone who chose not to speak in the pronoun circle, therefore others did not refer to their gender or use any pronoun to refer to them. Youth group members who declared their preferred pronoun to be their birth pronoun would also not be pronouned as they were assumed, from their attendance at the group, to be uncertain about their gender identity. Facilitators and family members and

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[1] Two youth workers were always present at youth group sessions, sometimes there were additional facilitators.

friends were assumed to be sincere if they made a pronoun declaration in alignment with their birth assignment and were pronouned correspondingly.

The procedure also inaugurated some other effects. People were expected to talk about themselves in the present as their preferred gender. However, they might refer to themselves when younger either as their preferred gender or their gender as assigned at birth.

(Γ.2) must actually so conduct themselves subsequently. (Austin, 1976, p. 15)

As I have said earlier, group members had to show their (assumed sincere) respect for others preferred identity through correct pronouning.

As I have described, it was acceptable for young people to declare the pronoun associated with their gender as assigned at birth, even though it was assumed from their presence at 4D that they were at least questioning this identity. However young people could not deny their uncertainty later. No one ever came back to the group and said they had questioned their gender and had decided they were happy with their birth assignment. Some people did come for only one or two sessions and then not return to the group – but the reason was not given. Lee, whose preferred pronoun was usually it, started to sometimes use its/her birth pronoun as well as gender-neutral pronouns but her/its stated identity even when using female pronouns was that it/she was trans and genderqueer. She/it had transitioned from its/her birth identity to another identity, and so identified as trans. Her/its position was not that it/she had changed her/its mind and decided it/she was happy with her/its birth assigned gender. Even so Lee's trajectory was not treated as fully legitimate, as I discuss in chapter 8.

Young people who chose their birth pronoun were not seen to be insincere in choosing to attend 4D, any more than the young people who stated a pronoun other than their birth pronoun. Their choice was understood to come from a lack of certainty about their gender identity. In line with ideas of future trajectories it was expected that they were likely to move from their birth

identity to another or other gender identity/ies, possibly to fully identifying as the other binary gender.

Conclusion

I have looked in detail at the pronoun ritual within 4D using Austin's (1976) ideas about the performative effects of illocutionary acts. This gives an understanding of how the pronoun circle enabled an alternative gender discourse to be established and legitimated within 4D. The youth group was very tightly structured at the start and end of sessions by the 'names and pronouns' circle and the working agreement. This established how people were allowed to talk about each other and themselves in the youth group. This established alternative gender identifications as possible within 4D by establishing an alternative gender discourse. This counter discourse unavoidably also brought with it certain constrictions in gender possibilities.

Hines found, in a change from earlier findings (M. Wilson, 2002), that people are increasingly holding less binary identities (Hines, 2006b). I found that young people were also holding less binary identities. Gender identities also did not need to be legitimated through presentation or performance within the group, at least temporarily (Hines, 2006b). However some identities were more fully legitimated within the group, with consequent problems of legitimacy for other identities. Trans male was the most visible and legitimated identity, trans female was less visible and less legitimated. Genderqueer and fluid identities were legitimated through some of the youth group processes but this was in tension with the visible transitions of most of the young people across the gender binary. Although trans can include identities such as butch lesbian or crossdresser, identities associated with gender expression rather than internally experienced gender identity were not seen at 4D. It is possible that this was because of the emphasis on authenticity of experienced identity. It is certainly the case that people who preferred their gender as assigned at birth, although with alternative gender expressions, like people with other less central identities, would not be fully legitimated as central members within the community of practice. I discuss this further in chapter 8. The possibility of

refusing a gender, or thinking beyond gender categories also did not seem possible. As I discuss in chapter 8 reversing one's gender trajectory was also not legitimate within 4D.

I think that it could be useful for many groups to consider how declarations in opening and closing circles may allow for movements of identity and alternative identities and discourses of identity to be established. A detailed analysis of the authentication of identification in groups where possible identifications remain intransigent may help to understand how the performative nature of gender in wider culture is established.

7   4D as a community of practice

In this chapter I look at how 4D fulfils the three requirements for a community of practice. In the next three chapters I discuss the products and processes of 4D as a community of practice. In chapter 8, I discuss identities, identity trajectories and legitimacy within 4D. In chapters 9 and 10, my final two data chapters, I look at reified events and reified objects within 4D.

As I have discussed in chapter 3, a group or community must fulfil three criteria in order to be a community of practice. These are: mutual engagement, joint enterprise and shared repertoire (Wenger, 1998). These three criteria can only be decided by interpretation from data, and may be difficult or impossible to determine for someone who is not a community member (Davies, 2005). Different aspects of the three criteria will be more or less significant at different times in the community. Members' engagement will also depend in part on their position in the community. A 'legitimate peripheral participant', a new member who is allowed to participate at least partially in the group practice, will engage differently from a longstanding central member. A legitimate peripheral participant will watch or ask questions, while a central member will explain or show aspects of the practice to a less central member. The contents of the mutual engagement, that is those aspects of the practice that the members are motivated to negotiate, indicate the joint enterprise of the community. The shared repertoire is also closely related to the mutual engagement. The shared repertoire is produced through the engagement of the community members but, in turn, facilitates that engagement. Finally, trajectories and identities within a community of practice will depend on the individual's relationship with these three requirements. For example, a central member will make substantial use of the shared repertoire and show a commitment to central aspects of the joint enterprise. However, this is a circular process: a member who negotiates the joint enterprise will also develop the shared repertoire and this will mean they will be on a trajectory to becoming a central member. Neither the requirements, nor the identity trajectories, are primary in this process; all feed back into each other.

In this chapter I will first discuss the concept of 'authenticity' in relation to the establishment of identity as this underpins all the significant processes and products within 4D. I will then establish that 4D was a community of practice. I will look at: mutual engagement, joint enterprise and shared repertoire. As I have said, the processes and products in a community of practice are not connected linearly but feed back into each other in a circular way. The joint enterprise influences the participants' engagement with aspects of the practice. The shared repertoire will be seen in the examples of mutual engagement. Some examples of mutual engagement will also show the legitimation of identities. Individuals' use of the shared repertoire will link to their identities and trajectories in the group.

As I have discussed in chapter 5, 4D members seek to establish their trans and gender identities as 'authentic' through the mobilisation of discourses related to trans and gender identities. In this chapter I look at the processes and resources within 4D that support the establishment of 'authentic' trans and gender identities. I will first discuss the concept of 'authenticity' in relation to trans and gender identities.

Authenticity

'Authenticity' underpins all the processes and products of the community of practice of 4D. The significant processes and products within 4D all supported the establishment of 'authentic' identities; they were also produced in the process of establishing identities as 'authentic'. 'Authenticity' was necessary to the full legitimation of identities in 4D: it was part of the shared repertoire and it was also reified. I will discuss reification in detail in chapters 9 and 10.

Authenticity is widely reified in the Western world. Authenticity is reified in relation to, among other things, architecture and merchandise as well as identities. In relation to architecture, houses, for example, may be marketed as 'period' houses with 'original features' as indicators of authenticity. In terms of merchandise there is a concept of 'fake', so a watch is considered differently if it is a 'genuine' as opposed to a 'fake' Rolex. In both these cases the idea of the authentic has been reified. The value of a house or a watch is not solely based on

the quality of the manufacture and ease of use. There is value that comes from their authenticity. The meaning of authenticity as adding value in these cases is above and beyond the meaning of the house or watch being a 'true' example. This meaning of added value associated with authenticity is taken for granted. Authenticity has become reified in these cases.

In this thesis I am concerned with identities. Authenticity in relation to identities is reified in the wider community; it is further reified within 4D. The concept of 'authentic' identity is related to the performative process through which identities and discourses surrounding those identities are established. The performative process of establishing identities 'naturalises' those identities. They are seen as natural, they become taken-for-granted as 'true', 'real' or 'authentic'.

Value of authenticity

The value associated with authentic identity is, in part, related to legitimacy. If one's identity is not authentic then one may be seen as making claims, to benefits or rights, that are not legitimate. Historically there were serious consequences, and associated legislation in many countries, for example the US and South Africa, for people who 'passed' as 'white' when they were understood to be 'black'. There were also consequences historically for people who lived as male who were discovered to have conventionally female bodies (Faderman, 1981; Halberstam, 1998). Rachel Dolezal, in 2012, provoked considerable controversy when she was seen to be claiming to be black when her parents were white. This provoked comparisons between 'transracial' and 'transsexual' identities which are complex, and I will not consider here (Brubaker, 2016a, 2016b; Tuvel, 2017).

Authenticity is often important when people are seeking friendships or relationships with people that are based on shared identities. Having a shared identity is likely to mean that one has shared or similar experiences. It is also associated with legitimacy in a community of practice. This may be related to an understanding of shared experiences and therefore a shared purpose in the

community. People who are discovered not to hold the identity that they claim will be seen as illegitimate in the community of practice.

Gender authenticity is understood differently by different people. Within some communities self-identity is accepted irrespective of presentation, as it was, at least initially, in 4D. Other people have, and continue, to refuse to accept people as 'real' women if they were assigned male at birth, irrespective of presentation or medical procedures (Greer, 2007; Jeffreys, 2014; Raymond, 1980; Tucker, 2018). This is highly contested; it also fails to recognise identities that have both medical and legal legitimacy (Elliot, 2016; Hines, 2017). The reasons given for this are often related to legitimacy in women only spaces, or lack of shared experiences with other women with fears of potential violence or disenfranchisement (BBC News, 2018; The Peter Tatchell Foundation, 2018). However most people understand a 'new' identity as authentic when there has been a process of establishing that identity. For those people who identify as a gender other than that assigned at birth their gender is generally seen to need to be established as authentic.

Establishing an 'authentic' trans identity, beyond questioning one's gender, was important to most, if not all, participants in 4D. As I have discussed in chapter 5, it enabled them to have their identity accepted by others beyond 4D. The medical discourse and the transsexual narrative both require 'authenticity', as seen through long-standing cross-gender desires or behaviours. As a result being seen as authentic was necessary to access medical interventions as well gain social acceptance of one's social identity. The concept of innate or fixed gender identity was reified within 4D as, through both the medical discourse and trans narrative, it gave authenticity to an individual's trans identity, before any changes to their presentation.

Establishment of authentic gender identity

Consistency and continuity

As I have discussed in chapter 2, identity refers to several things. To claim and establish one's gender identity as different from that assigned at birth depends on several ideas of what constitutes an authentic identity. The first relates to the

broad idea of an authentic identity as consistent and continuous. This is important for individuals to feel authentic to themselves, as well to establish their identity as authentic to others. It is easier for others to accept someone's identity as different from that assigned at birth if they are consistent in saying how they now identify as well as consistent in how they present, ideally in alignment with the identity they declare. It is easiest for an individual to be seen as authentically gendered in wider society if they conform to gender norms, that is they present conventionally or pass in their 'new' identity. As one would expect from this understanding of authenticity, trans people who are seen to conform to binary gender norms have gained more legitimacy in the wider community, while other trans identities remain less legitimate (Roche, 2018).

Innateness of identity

Another sense in which identity is seen to be authentic is in relation to aspects of identity that have been constructed as innate. These include sex and 'race'. As I have discussed in chapter 2, the 'commonsense' understanding of sex is that it is derived from one's body at birth. Gender is seen to constructed on 'natural' sex, and many gender differences in behaviours or interests are widely held to be 'hard-wired' (Fine, 2010). Race is widely understood to be a social construction with scientific findings of greater diversity within 'races' than between 'races' (Cohen, 2005). However, like gender, some scientists continue to look for scientific support for separate races with innate genetic differences (Sarich & Miele, 2018). In the wider world people are expected to behave authentically in relation to those aspects of identity that are seen to be natural and innate.

Authentic trans identity as 'innate'

'Authentic' trans identity as is based on the idea of gender as innate: if an individual has experienced themselves as their preferred gender since birth or early childhood, their identity can be seen as authentic as it is 'innate'. This corresponds to the transsexual narrative and the medical discourse, discussed in chapter 5. The 'wrong body' discourse includes the idea that one's 'true'

gender is innate and determined by how one identifies rather than by one's sexed body. This identitification must be permanent.

The references by many of the young people to early childhood or 'subconsciously' motivated behaviours are also used to establish their trans identity as authentic. To establish their identity as authentic to others they describe their experience of their trans identity as being within them from early childhood, either evident in their early childhood behaviour or in their 'subconscious'. These young people establish both that they experience their identity as authentic and that their identity is longstanding, if not innate.

Consistency and innateness

These two concepts of authentic identity: consistency as well as innateness, may be used to construct one's gender as authentic to individuals one is known to. They do not depend on the individual changing their presentation initially, although this is required for continuing authenticity. Nor do they depend on the individual 'passing' in their preferred identity, that is presenting in their new identity in a way that is unquestioned in wider society. An individual will most likely be seen as authentic in their trans identity if they are understood to experience their identity as authentic, and they perform or seek to perform their identity accordingly. So, a young trans person who says they know they have always been trans, and are changing their name, pronoun, and appearance is likely be seen as 'authentic' by others.

Failures of authenticity

This discussion of authenticity in 4D fits with those young people whose trajectories conform to the expected trajectories in 4D, that I discuss in chapter 8. 'Authenticity' is complicated for young people who do not follow the expected group trajectory. Young people, often those who identify outside the gender binary, who do not follow the expected gender trajectory will not be authenticated easily or as strongly, if at all. Their declarations about their identity, perhaps their choice of pronoun in the introductory circle, may be different at different times, so they may fail to establish that they have a consistent sense of identity. Their presentation will also vary, and may be

interpreted as failing to move forward, or even as moving backwards along a gender trajectory.

Authenticity within 4D as a community of practice

As I have discussed, authenticity of identity was reified in 4D as it is in wider gender communities. I discuss reifications in chapters 9 and 10. Authenticity was also necessary to the other aspects of 4D as a community of practice that I discuss in this chapter. It was first necessary to mutual engagement: people were understood to be engaging with others in their 'true' identities. It was part of the shared repertoire: people moved to presenting as their 'true' selves, in line with their preferred identities. Authenticity is very closely associated to the legitimation of identities, which I discuss in chapter 8. As people presented in line with their preferred identities they gained legitimacy and became more central in the community. The joint enterprise accepted all new members of 4D as 'authentic' as gender questioning or as their preferred identity. I will now look in detail at how 4D fulfilled the three requirements for a community of practice. In the next section I look at mutual engagement. I first look at the working agreement which was itself a product of mutual engagement, but also framed all engagement in the community.

Mutual engagement

> Members of a community of practice must all be actively involved with each other in the practice of the community, through social engagement either of words or actions. This is mutual engagement (Wenger, 1998). The meaning of aspects of the practice, for example routines, objects and language is negotiated through this social interaction. Mutual engagement goes beyond conversation and carrying out set tasks; it involves an active engagement with the meanings of those tasks. (Wenger, 1998)

The young people were most evidently mutually engaged with each other in two scenarios. The first was when the young people were involved in an organised discussion about a specific topic. The second was during an organised activity, such as a sport or craft activity, where there were opportunities for informal discussion unrelated to the activity. I will also discuss other situations where

the young people were engaged in less explicit ways, through the use of body language or behaviour rather than words.

Mutual engagement and the working agreement

Engagement between members of 4D was structured by the working agreement, which was established regularly and agreed at most sessions. The working agreement is discussed in more detail in chapter 6. The working agreement was itself a product of mutual engagement; it was established by the young people through group discussion. The working agreement detailed how members of 4D should relate to each other in a constructive and respectful manner. Regular participants knew what had been included in previous agreements, and therefore what other participants expected to be included, as well as what they themselves would like included. The regular participants, and others, would suggest what should be included in the working agreement. However, the workers wanted certain things to be included, and on the rare occasions when they felt that something had been missed one of the workers would prompt the participants to include it. There were sometimes additional requirements that were suggested and included by the young people. These might come out of a planned activity that was different or new: when swimming was first planned a young person suggested that the working agreement should include the requirement that young people should not comment on others' bodies, which would be more visible than usual. Sometimes an individual wished to add a requirement because of their own concerns. At one point the working agreement included the explicit possibility of making an announcement about your preferred name and pronoun at any time during a session, rather than only making such statements in the pronoun circle at the beginning and end of the session. This was suggested by Lee who at that time wanted to establish that gender identity, its own as well as others', could be very fluid.

The working agreement framed all aspects of the mutual engagement during discussions. However, the working agreement, although fairly static, was influenced and re-established by the mutual engagement at other times in the group. The working agreement was not a set of rules that were imposed; it was

always remade through the contributions of the young people. Through this process the young people had the opportunity to have elements clarified or elaborated. As I have said, new elements were also occasionally added. This happened through the young people's engagement with each other. Members needed to engage with the group to understand the working agreement; they also needed to understand the requirements of the working agreement to engage with the group. New members might not fully engage with discussing the working agreement, however all participants engaged sufficiently with the community to give at least tacit agreement to the contents of the working agreement. This took the form of listening while other contributed. Some participants, both newer and older, engaged more fully than others by making contributions to the agreement.

The working agreement required absolute respect of others' preferred pronouns and identities. An individual's preferred pronouns or identity could not be challenged, although they could be questioned in an enquiring interested way, as people were understood to be 'authentic' in their declaration of identity. A further idea of respect required people to challenge views rather than the individuals expressing those views. The working agreement applied to all activities at 4D. It was not apparent that people challenged others' opinions more or less during organised discussions than during informal conversations. Whether opinions or contributions were challenged depended more on the subject and purpose of the engagement than the context, as I will discuss later in this chapter.

Mutual engagement in 4D

I will now discuss some examples of mutual engagement in the group. The following is an observation of an informal discussion that took place at 4D during an art project that was organised over several sessions. There were opportunities for informal discussion between participants while they were working in small groups on parts of the project.

> I am with the bubble-making group to start with. Sam has already
> said something to me about not presenting how they want, not

choosing the pronoun they wanted in the circle. They (he?)[1] starts talking to me again. He wants to know how you know. I say that I've decided my life will all be not knowing. He says if he could have chosen, he'd have been born a girl. But in a way that suggests he's not sure now. I say that he wasn't born a girl and he will have had certain experiences and that we all like masculine and feminine aspects of ourselves. I say he should chat to some of the young people. I get Reese[2] to come over … Sam says he wants to move to London because 'I don't want to sound rude but I live in social housing so people won't understand.' He says he wants to move to London and transition. He says everyone knows him as Sam, gay Sam, and he's dropped hints. Chrissy is listening and butts in with it doesn't work to drop hints. And I elaborate that if you say something they're not going to ask you about it: 'Oh, do you still feel the same way you did a year ago' they're going to expect you to do something about it. Noah says he doesn't want to give advice, he's no good at giving other people advice …

Reese listens to Sam and says he identified as genderqueer for about a year and then tried male pronouns and so it was a slow process for him. He suggests Sam talk to his friends, that his friends will probably understand better than he thinks. Sam says he lives in a little place and his friends all talk so everyone will know. And he doesn't know if they'll understand. Reese says his friends were 'all this lot,' that he went to YQ where everyone changes pronouns all the time. Sam's a bit interested in this and asks about YQ. He also says he doesn't want to tell his friends or his mum and then change his mind. Reese says he won't want people to know when he's fully transitioned. Sam thinks he'd want his friends to know. Noah says when he was in Sheffield, he was involved in LGBT things and he's not here, and that he thought he'd feel the same as Reese but he doesn't. Reese says it isn't something he'd be proud of, although he knows some people

[1] I slip between he and they in this observation. Sam was assigned male at birth and had presented as 'he' to the wider youth group in the pronoun circle, but had separately confided to me that they hadn't presented as they wanted.

[2] Reese started at 4D identifying as genderqueer and preferring pronouns they or he. He moved to identifying as male and preferring he. This observation is from a point when Reese identified as male.

are proud of being trans. Lee comes over and says that it[1] has so many gender identities and that's not going to change. Reese (I think) asks it if they like people being surprised and it says yes in an amused way. It also say it's a first time they're presenting as she. I ask to check, are you she today, she says yes. I am aware the conversation continues when I go away. (Fieldnote February 2011)

This is a fairly typical example of the young people engaging with each other informally about trans identities. This was not a structured discussion organised by the youth workers, but was happening while we were engaged in another activity, here a joint art project. It was sometimes easier for young people to engage with me initially as a worker when they wanted to talk about something. In this case Sam wanted to talk about 'how you know', that is how you come to have a fixed understanding of your gender identity, understood to be 'authentic'. I said something to Sam and then involved another young person: Reese. Other young people joined in the conversation: Chrissy, Noah and Lee all contributed. They engaged with each other as well as with Sam in the discussion. They did not present uniform views or experiences. Chrissy challenged Sam's strategy of 'dropping hints'. Noah, although he originally said he wouldn't give advice, positioned himself as different from Reese; he no longer wished to be stealth following his transition. Reese presented his gender identity journey to Sam, but then involved Lee to present a different journey. The mutual engagement that is seen here included some challenging of others' views. It also included people positioning themselves differently from others and shows an acceptance or tolerance of diversity within the group. Disagreements as well as agreements are necessary to the process of negotiating meaning and as a result diversity is accommodated within the practice of 4D (Wenger, 1998).

The following two examples show mutual engagement during organised discussions at 4D. The first observation is from part of a discussion about using public toilets.

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[1] I used Lee's usual pronoun 'it' in the fieldnote, although Lee said 'she' was her preferred pronoun on that day.

Discussion earlier of using disabled loos. Lee as if it is a right for trans people. Reese perhaps even saying just because they can't see your disability so there are problems with using disabled toilets. Then Kieran about trans people aren't disabled and also acknowledgement I think from Lee and Reese that if you came out and a physically disabled person was waiting, how embarrassed you'd be. (Fieldnote October 2010)

This is an example of mutual engagement in an organised group discussion about using toilets in public places. Here the young people were actively engaging with each other's perspectives. Lee implied that trans people are disabled, and Reese made this construction explicit when he said 'they can't see your disability'. This was challenged by Kieran who said that trans people weren't disabled. Lee and Reese then withdrew somewhat from their position saying how embarrassed they would be coming out of 'disabled' toilets if a physically disabled person were waiting. If they had felt that their position was tenable they would instead have talked about strategies for dealing with other people's reactions when they came out of a 'disabled' toilet. There was a difference of opinion here: Reese and Lee started by suggesting that trans people were disabled while Kieran was definite that they were not. Reese and Lee's position changed through their mutual engagement with Kieran and they became less definite.

The second example is from an organised discussion about legal rights. The young people talk about changing names. As well as mutual engagement, this fieldnote illustrates Reese positioning himself as a central member in the community through his expert knowledge.

Willow said that they hadn't done anything legal about changing their name (which doesn't involve a gender change) that you just tell people. Kieran and Zak or John have paid on-line for Deed Poll and certified copies. I think it's John (not Zak) who says they also paid extra for changing title. Sylvia also has changed her name, and when I say it doesn't cost much to do at a solicitor she agrees. There is an interesting dynamic going on with Reese who somehow wants to position themselves here as an expert. So they say they know a trans-advisor (or something – I didn't catch it properly and didn't want to ask) who said you can change it

yourself, you just print the wording, get two witnesses and you can even buy a stamp so it looks official. There is an awkwardness in the group. I think Kieran and John feel they need to justify having paid quite a lot, Kieran saying that it is registered somewhere if anyone wants to phone and check. Sylvia I feel is just information sharing and says she paid £20 or something. I ask Kieran directly how much he paid and he says £100 after a short pause that I read as reluctance to disclose. Reese then repeats that you can do it yourself, get two witnesses and get a stamp. (Fieldnote July 2010)

The discussions about the use of accessible toilets and name changes had a different style from sharing stories about trans identities. Differing opinions were challenged in the discussions about toilets and legal name changes, while people's presentation and interpretation of their identities were not. Respect for individual feelings and experiences is required by the working agreement so these are not open to challenge in the same way as knowledge of the law. I will look at styles of engagement further when I discuss the joint enterprise. I will now give some examples of mutual engagement which take a form other than group discussion.

New participants came to the group either through contacting Graeme or through introduction by another member of 4D. Several new participants did not speak when they first attended the group. However Abel was the participant who most clearly showed that they[1] were only going to participate at a minimal level. Abel did not speak at all during the whole of the first session they attended. This is an observation from the first youth group session that Abel attended.

Abel arrives as we are about to start the film. They (haven't specified pronoun) look very, very nervous and don't pass through the door into the meeting room where the film will be. Everyone else is just chatting. I say we should do a quick circle, as I feel that otherwise Abel has no chance of feeling included. Me, Niamh and Indica get the circle organised. I direct Abel to sit down and sit in the chair next to them. They look visibly very

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[1] Later Abel chose the pronoun he

> nervous. We do names and pronouns. I make a point of saying
> that it is a space where people can try names and pronouns …
> Abel doesn't speak in the circle. People then put the chairs ready
> for watching the film. Some young people are discussing sitting
> together. I suggest Kieran should sit near Abel which he does but
> Abel makes it clear from their body language they are not going to
> be included. (Fieldnote January 2011)

Not only did Abel not speak, but they showed through their body language that they were not going to join in with the other participants. The next observation was later in the same session. Lee had brought cake to share for Mattius's birthday. When the cake was being shared Abel continued to participate very minimally.

> At cake point Abel sits outside the meeting room on the sofa. I
> invite them back to eat cake. They even lean against the doorway
> but won't go back in. They accept a piece of cake but don't eat it.
> (Fieldnote January 2011)

After the film the other young people stayed in the meeting room. Abel moved out of the meeting room putting themselves in a physically peripheral position to the rest of the group. They could see the youth group activity from the sofa that was positioned outside the room through the meeting room glass doors. Although they accepted a piece of cake they did not eat it at the session and took it away.

Although Abel's participation was minimal, and they made themselves physically peripheral to the group, they were engaged with the other members. They sat in the introductory circle and were silent when others spoke, so complied with the requirements of the circle. Later they were physically peripheral to the group but positioned themselves so they could observe the group activity. They also accepted the piece of cake, but would not participate with the other members in eating it at the session. The other members engaged with Abel in that they allowed them to see and understand the group processes and participate at the level they wished to. Abel experienced the introductory circle and was told of its significance as an opportunity to test or establish an

identity. They chose not to declare an identity which positioned them as participating at the most minimal level required.

Although Graeme generally granted access to 4D, the community of practice was formed by the young people in the group, sometimes in opposition to the youth workers. The following observation is an example of non-verbal mutual engagement; the young people did not discuss their views but reaffirmed a group practice through their actions, despite being challenged by me. Kieran and Chrissy had both arrived early for the youth group session. Kieran arrived early because he was an older member of the youth group and had a volunteer role, taking some responsibility for organisation of sessions. Chrissy often arrived early. To give them something constructive to do, I went shopping with them both to get snacks for the session. This describes what happened after I had paid for the shopping:

> Kieran and I have put the stuff in three bags. I want Chrissy to take a bag. She doesn't offer. As Kieran is taking two bags I say to him let Chrissy take one, neither react. I directly say to both of them Chrissy will you take a bag. Kieran says the two bags aren't heavy he'll be fine, so Chrissy still does nothing. She starts eating her cookies she's bought. (Fieldnote February 2011)

I regularly observed that the male and masculine young people sought to construct themselves as 'masculine' through carrying things. Female young people sought to be 'feminine' and, although none of them actively constructed themselves as weak, they showed no desire to be helpful by carrying things and would always have to be asked to help with any carrying. In this situation I, as the youth worker, wanted both Kieran and Chrissy to take equal responsibility for carrying shopping. Kieran, trans male, followed the group practice of showing initiative to carry things. Chrissy, trans female, actively showed that she had no interest in carrying things by not responding to my request. Kieran and Chrissy's behaviour also shows how they understood the other's gender and the relationship they wanted to construct between male and female identities. Kieran showed that he understood Chrissy as female and that he wanted to preserve the construction of men as strong and helpful towards women, who are perhaps weaker. Chrissy showed that she understood Kieran

as male and that she would accept his wish to carry things for women. Chrissy and Kieran both resisted my desire for equality and so reaffirmed their gender constructions. The mutual engagement of these young people was a sufficient mobilisation of power to override my desire for equality.

Here are two examples of 4D members working together in more public situations. The first occasion was when a group of young trans men, and myself, were looking for men's toilets during a break in a session. The session was held at LSPA and access to the toilets was by using a swipe card in to the main building. The main building was also used by other people, outsiders to 4D; this included the toilets. We had scheduled toilet breaks when a worker would give the young people access to the building. Workers would often accompany young people to the toilets as the building was unfamiliar to many of the young people. Sometimes young people would be nervous about being challenged about their choice of gendered toilet and wanted to go with other people or a worker.

> Three of them go to the lift and I go with them. James, Owen and Brendan … James is generally quite confident. I ask if they know where they are going. James says no not really but in a way that it can't be difficult. They look on the lift buttons and Owen I think says floor 9, and James says in a confident knowledgeable way, yes level 4½ … We all go up … We get to level 4½ and it is just showers and no toilets, so we walk down. James or Brendan had previously said it didn't look right. We walk down and there is a men's toilet sign. We go through the doors to the area outside the toilet. It stinks of shit. Someone asks if it's right, and someone says it smells right. (Fieldnote November 2010)

Although I was accompanying the young people, I had chosen to let the young people work out how to navigate the building. They worked together to find and use the men's toilet. On another occasion we had been to a kayaking session and I was walking with some young people to the tube after the session. One of the young women wanted to go to a women's hairdresser.

> We leave the park and walk to the tube. Kim says she's going to have her hair done, pleased with herself … A bit awkward … As we're walking we walk past a salon and Sylvia and Kim disappear into it. Good for them, I like it. (Fieldnote August 2009)

In both these examples the young people wanted to make use of a gendered space, first the men's toilets and then a women's hairdresser. The young men worked together to find and make use of the space. Between them they constructed that they had a shared knowledge of men's toilets as smelling unpleasant. They also constructed that their male identity was significant enough to them, or even beyond question, that they would unquestioningly use the men's toilets even if they were unpleasantly smelly. They indeed confirmed that the toilets were men's by the smelliness. The young women worked together to construct themselves as entitled to go into the female gendered space of the women's hairdressers.

Negotiation of meaning

The style of engagement in the examples above depended on the subject of the engagement; this was also intertwined with the meanings that were produced. When the young people were sharing experiences with Sam, and the subject was the individual understanding and development of gender or trans identity, the mutual engagement took the form of listening and being supportive of diversity. Differences were accommodated; producing or reinforcing shared understandings of gender identities as diverse. On the shopping trip with Kieran and Chrissy, when the subject was gender roles and their mutual relationship, the engagement took the form of a non-verbal co-construction of binary male and female identities. Here the mutual engagement constructed male and female identities as oppositional and confirmed Kieran and Chrissy's preferred identities. However, in the case of legal name changes differing views were less acceptable. The legal process and cost were understood to have a correct or better answer. The young people were mutually engaged but people's contributions to the discussion had implications for people's status in the group. People could position themselves as more knowledgeable and therefore as more central members of the group. These interactions all constructed or reaffirmed meanings of practices and identities within the community. I look now at how these examples of mutual engagement produce or give evidence of the joint enterprise in the community.

Joint enterprise

Out of the three requirements for a community of practice, the joint enterprise may be the most difficult to determine as it is not explicitly stated (Davies, 2005). The joint enterprise is the shared purpose that community members have negotiated and established through their engagement with other community members. Some groups, including 4D, have a stated purpose or intention for their members, which may or may not be closely related to the joint enterprise of the community. For example a school might have a stated purpose of promoting academic achievement for all, but the joint enterprise established by the staff could in fact be to maintain discipline in the classroom. In the case of 4D the following was stated in leaflets about the group:

> 4D is open to all young trans people - whether you're brand new to identifying as trans, still questioning your identity, or if you consider yourself to be post-transition or as having a trans history. We strive to be fully inclusive of individuals who identify as non-binary/other, as well as male or female.
>
> At 4D you can:
>
> - Meet other young transgender, transsexual or gender questioning people, socialise, make friends and get some support.
>
> - Find out information about coming out/disclosing, transitioning, your rights as a trans teenager or young adult, how to negotiate life post-transition, and more.
>
> - Have a safe and supportive space to explore your gender identity if you're questioning, be yourself if you're not out, or have an opportunity to chat about trans stuff if you're stealth.

These stated provisions and opportunities were similar to other trans groups, except of course the references to trans teenager or young adult. These related well to what I consider to be the joint enterprise, which was broadly that the young people, participants in the community, learned and established how to be and live as trans young people. However, the joint enterprise of 4D was more specific than this and can be broken down into following aspects:

- The young people, who are members of 4D, will have their preferred identities as trans or questioning young people within the youth group legitimated. This includes trans identities where there is little change in the individuals' presentation.

- The young people will develop a shared knowledge of transition possibilities, this will include identity possibilities as well as legal and medical possibilities.

- The young people will determine how they as individuals wish to transition. This will be through engagement with and knowledge of others' transitions and transition possibilities.

- The young people will learn how they may have their preferred identities accepted or legitimated outside group.

I will illustrate these with reference to my previous examples of mutual engagement and some further observations that indicate the joint enterprise.

The discussion with Sam that I discussed earlier showed several aspects of the joint enterprise. Individuals shared their different feelings about their identities and their identity trajectories. Everyone engaged in a supportive way with the diverse identities that were presented. All the diverse identities were recognised and legitimated through this process. This included Sam's identity. Sam was assigned male at birth and was presenting conventionally as a young man. They said they would have chosen to be born as a girl. Reese suggested that Sam's 'friends will probably understand better than you think' which showed that Sam's trans or questioning identity was accepted, and therefore legitimate, within 4D despite the fact that Sam was not presenting as conventionally feminine. This fits with the first aspect of the joint enterprise that people's diverse identities were legitimated in the group, and required little or no change in presentation. Sam wanted to know how to move forward from questioning their identity. The other contributors shared details of their identity trajectories. Reese said that he identified as genderqueer for a long time before trying male pronouns and that it was a slow process. Noah shared that he

expected that he would want to be stealth after his medical transition, but that was not the case. Lee shared that she[1] had many gender identities and that wasn't going to change. All these people had developed more certainty about their identities and trajectories. Together with Sam's desire for more certainty this shows that it was important in the joint enterprise for people to decide how they would transition, and that this was through engagement with others' choices.

There were often anecdotes about young people having their identity misrecognised outside the youth group. These anecdotes were always told with the expectation that other group members would feel it was wrong or frustrating to have one's identity misrecognised. There was never any suggestion that there was any failure on the part of the individual, that they had not presented themselves correctly for their preferred identity. The following observation describes of one of these occasions. Owen and James went to a shop in the break from a session.

> [Owen and James] popped to the shop and when they came back they were looking a bit grumpy. I think I ask, or they tell me, perhaps just James tells me that the shop person pronouned him 'she' but Owen 'he' in the shop and they are both put out by this. (Fieldnote December 2010)

Although the person in the shop has called James 'she', Owen and James did not behave as if they thought that James's identity was in question. They were deliberately looking unhappy because they wanted to be asked what had happened so that James's male identity could be reaffirmed in 4D.

I gave two examples earlier of the young people working together to access gendered spaces outside 4D. These demonstrate the final aspect of the joint enterprise: that young people will learn how to have their identity legitimated or accepted outside the group.

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[1] As described earlier, 'she' was Lee's preferred pronoun on this occasion.

The legitimation of identities was not always verbal. In the following observation the young people's performance of their identities was legitimated by acceptance within the group activity rather than verbal acknowledgement. This might have been even more powerful as it is suggested that a young person's presented identity wasn't questionable and did not need legitimating. This observation is from 'sports day'. The young people, and invited friends and family, played games in the park including rounders and football, as well as doing a 'three legged race', and an 'egg and spoon race'.

> Comment in end circle from Kieran (? or his friend) about being good to know you can spend time with other trans people just doing things not talking about gender. (Fieldnote June 2010)

My interpretation of this was that everyone was performing their preferred genders, some people had made little or no changes to their presentation. The lack of conversation about this suggested that accepting individuals' declared identities had become established, in a performative process (Butler, 1990/1999, 1993, 2004).

I have shared some observations of discussion about transition possibilities as examples of mutual engagement. Here I consider learning about transition possibilities as part of the joint enterprise, this includes learning about the different social, legal and medical possibilities. This observation describes a session when the young people used the internet and hand-outs to find out about medical interventions as transition possibilities. They were split into groups and fed back their findings at the end of the session. This describes the groups giving their feedback. As well as developing the joint enterprise this shows Sylvia and Lee trying to gain status by positioning themselves as experts in the group.

> The young people present back from their groups about their findings. There is a bit of wanting to get medical words right. Sylvia particularly does this but I think Lee wants to have control over the words they use. And why not? Good! Graeme is uncertain of some words and spellings. Oliver feeds back from my group, hard to give detail of the discussion in a short time so feels like he's skipping through but touching on the main points and

questions. Kieran feeds back about chest reconstruction. Those feel fairly straightforward groups, and related very much to where people are in considering their choices. Lee feeds back about penis/testicles. They clearly enjoy the possibility of exploring these options and the language ... Finally Sylvia and Charlie, Sylvia feeds back, very technical about using the scrotum and electrolysis to avoid a hairy vagina. I think there is a lot of enjoyment from the young people in general about contemplating future bodies and choices. (Fieldnote July 2010)

Here again, as in the discussion about identity journeys, people were very accepting of the diversity of possibilities. They seemed to actively enjoy the wide choices they had about medical transitions. This shows two aspects of the joint enterprise: the legitimation of diverse identities as well as the development of knowledge about transition possibilities.

The style of discussion seems to be related to the topic rather than the type of session. The medical interventions session was an organised discussion like the legal session, but did not cause controversy; no one challenged what any one else said. The discourse that was constructed was that social and medical transitions are a matter for individual choice. Identities are legitimate whether the individual changes their presentation or their body to fit their declared identity or not. The young people understood their identities were legitimate in 4D, and that their identities should be accepted beyond the group. Most of the young people would have experienced their preferred identity not being recognised in the wider community. The issue for the young people was how to have their identities legitimated beyond the group. The wider community generally understands trans people as wishing to move from one binary gender to the other, and that their presentation and body will conform to their identity post transition, which is not always the case. I believe this is why the legal discussion was so contentious. The young people wanted to make best use of the legal possibilities to literally legitimate their preferred identities, especially if they identified outside the gender binary with little social legitimation in the wider community.

As I have just discussed, the joint enterprise accepted as legitimate anyone who claimed they were questioning their gender identity, and a particular form of presentation was not necessary for legitimation within the group. However, this changed as the young person attended the group more regularly. As I discuss in chapter 8, to continue to be accepted as legitimate and to gain further legitimacy a young person had to change presentation. They also needed to be on a consistent trajectory away from their identity as assigned at birth. The consistent movement along a gender trajectory established an individual's identity as 'authentic'. Movement along a gender trajectory had most legitimacy if the change was in accordance with the shared repertoire, but it had certainly to be different from their previous identity to maintain legitimacy within 4D.

Shared repertoire

The shared repertoire consists of the shared resources the group has developed through its practice. The shared repertoire can include local language, jokes and stories, but also routines and significant objects among other things. The shared repertoire develops through the mutual engagement of the community and consists of resources that support the group practice. The shared repertoire is a product of the group practice but then becomes a resource for members to engage with each other within the community. Shared language, for example, gives individuals readily available ways of communicating.

I look at three aspects of the shared repertoire of 4D: knowledge, language and presentation. As I have said earlier, the joint enterprise included developing a shared knowledge of transition possibilities; this included identity possibilities as well as legal and medical possibilities. The shared repertoire also included individuals determining their own preferred transition.

Showing knowledge of engaging with medical practitioners and possible medical interventions was an important part of the shared repertoire in 4D as it had developed alongside the joint enterprise. Showing that one had knowledge of legal rights and processes was also part of the shared repertoire. Use of language was related to demonstrating knowledge. Formal medical and legal terms showed that one had a good grasp of medical and legal processes. Using

local language, developed in the group from wider trans and queer communities, demonstrated one's engagement with medical and legal processes as an informed trans person making use of formal processes. Local language also makes communication easier in a community of practice because it refers to understandings that have already been established within the group. Another aspect of the joint enterprise in 4D was to develop a shared knowledge of identity possibilities, this was usually shown by using identity descriptions, for example trans man or genderqueer. A further aspect of the shared repertoire in 4D was gender presentation. Gender presentation was important as a source of pleasure, it also communicated changing identity, and where an individual was in that process. The shared repertoire also indicates group membership, both to other group members and to outsiders. In 4D, demonstrating relevant knowledge, using local language and presenting one's gender appropriately all signalled membership of the community.

Knowledge

Status and identity within any community of practice are closely related to knowledge. I look at this in more detail when I discuss identity trajectories in 4D in chapter 8. Participants had opportunities to show their knowledge during formal discussions within the group as well as informally during breaks. Although knowledge was linked to status, the sharing of knowledge seemed generous. This supports my understanding of the joint enterprise as developing a shared knowledge of transition possibilities. It was important to the community that knowledge was shared and the young people were active in seeking to share their knowledge with others. Not only having knowledge, but also sharing that knowledge, gave individuals status and identity within the group. As a result the young people seemed to enjoy sharing their knowledge, and sharing knowledge did not generally seem to be competitive. There was a desire on the part of many of the young people to be supportive to other trans people[1]. This is also common in wider trans communities. Hines (2007) found

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[1] Many of the young people were involved in a volunteer group, set up alongside the youth group. The volunteer group did fundraising and ran a clothing project to redistribute clothes to people who wanted differently gendered clothes.

many of the participants in her study of trans adults to be active in giving support to others in their community.

I first look at knowledge as part of the shared repertoire. I start with an observation made during a project to produce a trans specific sexual health booklet. 4D members worked on producing the sexual health booklet over several sessions and different people were involved on different occasions. This quote is from my fieldnotes made after the first session:

> We then actually start the work on the sexual health booklet. Zoe asks about what genderqueer means, and Kodi defines that people can sometimes feel male and sometimes female. Jacky says that's bi-gendered. Also that they may feel in the middle of male and female. (Fieldnote July 2009)

Zoe at this point had joined the group fairly recently. She was assigned female at birth and at this stage was using her birth name and the pronoun 'she'[1]. Zoe had at this point only attended a few youth group sessions, but it appears that she understood that knowledge was part of the shared repertoire. If knowledge is part of the shared repertoire and you are a newcomer then you can show your understanding of the group practice by seeking knowledge as Zoe did here. So, although Zoe positioned herself as a new member by asking a gender related question, she also showed that she knew that knowledge was an aspect of the shared repertoire which gave her increased legitimacy in the group. Kodi and Jacky positioned themselves as established members through their knowledge of the meaning of the word genderqueer, perhaps with Jacky wanting to establish greater expertise.

The young people often demonstrated knowledge of medical interventions. Knowledge was important as it gave them status within the group. However knowledge was useful beyond this; it enabled the young people to make choices about their treatment by the medical profession, or at least have information

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[1] Zoe at this point may internally have identified as male, or desired to identify to others as male. I do not know. I do know that Zoe at this point chose to be identified as female. I always refer to the young people by their pronoun of choice at the time.

about what to expect. Trans was being constructed within the community not as a medical condition to be treated but as an identity related to choices about body modifications. The young people were positioning themselves not as patients but as people able to make informed decisions about their bodies and identities.

There were frequent discussions between group members about hormones and surgery during youth group sessions. These discussions were sometimes organised and sometimes informal. The young people also shared information about medical interventions in other situations. This was a discussion that took place between Jacky, who was androgynous, and two young trans women publicly in a station while we were waiting for other group members to arrive before going on a trip:

> I realize Chilotam and Jacky are advising Kim on how to take her hormones. Chilotam doesn't understand (what she says) why Kim doesn't phone Dr (?), they must have the same doctor, or his secretary and ask whether to take three all at once or spread through the day. Jacky advises that she'll be more likely to have mood swings. Kim says perhaps people have noticed it seems to change mood during the day. (Fieldnote August 2009)

Here Jacky and Chilotam shared their knowledge about taking hormones with Kim. Jacky shared its knowledge of the process but also possible side-effects. Chilotam demonstrated her knowledge of how to get advice from the doctor. Through encouraging Kim to contact the doctor Chilotam was encouraging her to be a trans person who was actively engaged in making informed decisions about transition. It is also interesting that this discussion took place in a public space. If it had been overheard by members of the public it could have 'outed' members of the group, that is made their trans identity visible to outsiders.

All the young people I interviewed, except Aidan, shared an opinion about their medical transition related to their knowledge of possibilities. Several of the young people that I interviewed gave me quite detailed information about medical possibilities. This use of the shared repertoire is related to the joint enterprise showing their knowledge of transition possibilities as well as

showing that they were making informed decisions about their personal transition.

Kieran talked about the reasons for the decision about how his prescribed testosterone was administered:

> Kieran: … he gives me Nebido which is the one you have every three months … my doctor's in London and I'm not in London, and that makes it quite awkward to go every two weeks to have an injection. And also I don't like injections, I don't like needles, so the less of them the better *(slight laugh)* is my thinking. And so and also, like, the other options are patch or gel and that involves putting them on every single day, and I just can't … I'm rubbish at stuff like that, that involves, like that involves you doing something every single day, I forget and won't do it and I know I would be rubbish at doing it! *(slight laugh)* And the patch, for instance, also can affect … like, it can give you a rash and stuff if you've got a sensitive skin. Or even if you don't, it gives a little irritation on 60% of people that use it, so that's not really a great option. So I went for Nebido because, yeah, it was every three months, although it hurts, but although it hurts it's better than having it every two weeks! *(slight laugh)*

Later Kieran talked about what was likely to happen when he was seen by an NHS practitioner:

> Kieran: But, yeah, they should hopefully prescribe me hormones on the NHS because it will get expensive if not! *(slight laugh)* They might want me to change what I'm taking though, because they don't like to start people off on Nebido; they like to ease people in like. Sustanon's the cheapest so they often try and make people start off on Sustanon and then change it later on.

Kieran showed his knowledge of the options relating to the prescription of testosterone, a masculinising hormone. He used two brand names: Nebido and Sustanon. He also mentioned three different methods of administering teststerone: injection, gel, patch, and some side effects. Kieran talked about his different expectations of NHS and private practitioners. This included giving possible reasons for NHS views on treatments: 'they like to ease people in' and cost. Kieran used the shared repertoire to show himself not only as

knowledgeable but also that he was in a position to make choices about his medical interventions. His knowledge and decision making about his transition also positioned him as an inbound or more central member of the community rather than new member, a legitimate peripheral participant.

I have said elsewhere that none of the young trans men that I interviewed were considering genital surgery at the time. Nathan discussed possible genital surgery but also made it clear that it was a low priority for him, to be considered in several years time, after he had had chest surgery, and that had fully healed. The choice of procedures and a high probability of a good outcome were extremely important factors for him:

> Nathan: The first sort of six months, I didn't want lower surgery because I'd heard all the horror stories about it and I was, like, oh, I don't want to do that. And then about six or seven months on T, I started looking back into it, and then, saying, I sort of, I really want phalloplasty. And then sort of, a friend I watched on YouTube, he got the other – is it metoidioplasty I think it's called. He got that and I was looking at that saying, it's good results but it's not the results I'd want personally. So I went back then to phalloplasty.

> AM: It's different, isn't it? Yeah.

> Nathan: I definitely want phalloplasty now, but I don't want it done in London, because the UK results aren't fantastic at all; the person I want to go to is in Belgium, but then I'll need to find either the funds or a way to convince the PCT that it's easier and better for them to send me to Belgium to get it done than it is for me to be in London. But whether they're going to take my plea on board, I don't know.

Nathan shared his knowledge of the correct medical names for the two most common types of genital surgery that trans men choose to have and knowledge of the success of surgery in the UK and Belgium. Again Nathan used the shared repertoire and constructed himself as a trans person able to make knowledgeable choices about his body.

Tyler and Nathan told me about the effects of hormones on another trans male friend and their advice to him. Tyler used knowledge of hormones as part of the

shared repertoire to position himself as a more knowledgeable member of the group than would be expected given that he was a newcomer.

> Tyler: ... his sexual drive, etc., is changing dramatically at the moment, and we've got to be understanding of that... Because I've experienced it, not myself, but because I've been with Nathan through his transition also, I kind of know what I'm looking at, if you know what I mean? *(slight laugh)*

> AM: Mmn.

> Tyler: And it's like that behaviour could actually be explained by the fact that he's just had his shot. Even though I don't like it, and even though I don't think it's acceptable ...

> Nathan: He's toned it down, because you, you had a sort of quiet word with him on Facebook.

> Tyler: Oh, yeah, I had a quiet word with him, I said, "Man it's just not good! Please can you just hold back!" And he's still a bit kind of like ... when he went back for his second shot, he, it came racing back in there again and I'm like, no, no-o-o! *(slight laugh)* But at the same time, it's like, OK, that's not acceptable behaviour and it's not OK if you continue with that after having been told, but at the same time, I do know that big things are changing and hormones are a big deal.

> Nathan: Yeah.

> Tyler: They do change. I mean, even natural self produced hormones, you know?

> AM: If you think of teenagers, you know? *(slight laugh)*

> Tyler: Yeah, exactly! If you think of a teenager or even, you know, a woman at her time of the month, or whatever, you know? It's, oh, hormones are a bitch! *(slight laugh)* And it's like, come on, I've got to give him a little bit of leeway there and being a bit older, and having experienced transition from start to three years, before, not personally, but seeing it.

> Nathan: Seeing it through me, yeah.

> Tyler: I can see it again in the same light, and it's like, OK, I don't find this nice but I can, not write it off, but attribute it to the fact that I know you're on quite strong hormones at the moment.

> Because I don't personally agree with Nebido for a fresh starter
> but there we go; I think it's too much to have a three-monthly shot
> for a fresh starter.

Tyler said twice that he'd experienced the effects of hormones, but then added that his experience was through Nathan: 'I've experienced it, not myself' and 'having experienced transition from start to three years, before, not personally, but seeing it'. He also gave his opinion about appropriate ways to administer testosterone at the start of someone's transition. Tyler used knowledge of hormones as part of the shared repertoire to position himself in the group. He was claiming to be able to advise someone who was on hormones, and thus positioned himself as more central to the group practice than would be expected, as he had only fairly recently come out as trans.

I have focussed here on medical knowledge. Legal knowledge was also important in the shared repertoire, as well as to the joint enterprise as I have discussed earlier. Demonstrating legal knowledge, like medical knowledge, positioned an individual as central or centre-bound in the community of practice.

Language

Language was a very important part of the shared repertoire in 4D. Formal medical language was used to demonstrate knowledge of medical possibilities. My examples in the previous knowledge section included many examples of medical language including drug names and names for surgical procedures. Local language, that is language that is used only or more commonly within a community, is perhaps even more important than medical language. The young people often used local language for medical terms. This showed that the young people were engaging with and making their own decisions about medical processes that were informed by the trans community, rather than being recipients of medical interventions over which they had no control. Most local language came from wider trans and queer communities to express new concepts, or concepts that had not yet been named in the wider community. Using this language could establish people as experts through their experience of wider trans and queer communities.

Local language was established within the community through the mutual engagement of the participants. Not all language from wider trans communities was incorporated into the shared repertoire, only the language that was useful or necessary to 4D participants, as it enabled them to communicate easily with other group members about things that were important to them. Local language made it easier to discuss ideas, and could be a shortcut to communication. However these new terms were more than just short cuts. They established a new discourse around gender and trans identities, for example legitimating different identities first within 4D, and subsequently in the wider community[1]. The shared repertoire of language and its associated gender discourse should be understood as power/knowledge (Foucault, 2000). This new language enabled the legitimation of new identities and concepts and became a resource for the young people to enable their identities and experiences to be legitimated beyond 4D. Language use as part of the shared repertoire is important in two others ways. Using local language positions someone as a group member both to other members of the community and to outsiders. Using local language is also needed for a participant to move to a more central member of the community of practice; it is necessary to learn to 'talk the talk' if one is to become a full participant:

> '...learning to become a legitimate participant in a community involves learning how to talk (and be silent) in the manner of full participants.' (Lave & Wenger, 1991, p. 105)

Although knowledge of language might position the speaker as a central member of 4D, the joint enterprise meant that sharing knowledge was also important to status with the result that people were generous in explaining local language. In my earlier discussion of mutual engagement I considered how Kodi and Jacky positioned themselves as established community members in relation to Zoe's legitimate peripheral participant status when they explained

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[1] New words, for example non-binary and genderqueer, have become more common in the wider community, and with this there has been some legitimation of these identities in the wider community.

the meaning of 'genderqueer'. These are some further examples of the use of local language by participants in 4D:

> Lee: But like if I present a certain way, I won't mind being pronouned a certain way because ... so if I present more feminine, I won't mind masculine pronouns, and if I present male, I won't mind female pronouns, which is ... I don't know. Maybe I'm feeling comfortable in my appearance that I'm OK with people using other pronouns for me, and it's good, because it's like a balance.

> Blake: The people who react OK tend to accept it, but not put any effort into things like pronouning.

These are two examples of the local use of 'pronoun' as a verb. This is a local use of the word pronoun. To pronoun someone 'she' simply means to refer to them as 'she'. However, it is understood to reflect how one's gender is perceived and therefore whether one's preferred gender is recognised. Both Lee and Blake wanted people to use the pronouns they had chosen and for people to use their chosen pronouns even if these were 'oppositional' to the gender they were presenting. It was understood that one could be correctly or incorrectly 'pronouned', this established that one's identity was not the identity that was perceived or presented. Through this, the use of the word 'pronoun' as part of the shared repertoire indicated the group tenet that one's preferred identity was legitimate however one presented.

'Birth' name was another example of local language use. Here are two examples:

> There is a jokey discussion around cyber bullying on ... a website where you can ask people questions ... James says he had a question 'James or birth name?' which he just deleted. (Fieldnote November 2010)

> Tyler:... it was in the stint when I was eight that my name was changed to their name, even though they hadn't adopted me. Then I changed my name again, I shortened my birth name, like so that I was legally known by the shorter version of my birth name. Erm. Because it was easier for me. I didn't ... I've struggled with my birth name always, so I shortened it so it was still the same but shorter. Myself, I did that in 2006.

James and Tyler both use the term 'birth name' as it was commonly used. In fact it was unusual for people to ever speak the name they were given at birth. James's comment is clearly shorthand. If he had used his former name it would then have required an explanation of what the name signified. It was clear to community members that he was being questioned about his current and former identity. 'Birth name' was often used to signify that one did not identify with and felt distaste for the identity suggested by the name. Tyler used the term 'birth name' three times in this short extract, and several more times subsequently in the conversation. It would have been easier for Tyler to use his former name, but when Tyler says he has struggled with his 'birth name always' it suggests both that he does not identify with his gender as assigned at birth and that the identity is unpleasant for him. Tyler's also gives a year '2006' reaffirming his longstanding feelings and further authenticating his trans identity. Distaste about one's birth name referenced the medical discourse (see chapter 5) and also showed the strength of feelings about one's identity as assigned at birth. These both worked to authenticate an individual's trans identity.

Some other examples of the local language refer to reifications and reified objects, including binder, packer, and hormones which I discuss in more detail in chapter 10. Binder and packer both have meanings in the wider community that have no relation to gender or trans identities. In 4D, as in wider trans communities, they referred to objects that could be worn to enable trans men to present as having conventionally male bodies. Hormones are often understood in the wider community to relate to sex, for example oestrogen is understood to be a female hormone given to cis women as a contraceptive or during menopause. In 4D 'hormones' referred to hormones which may be used to masculinise or feminise trans people bodies to align with their preferred gender identity. I will discuss these in chapter 9.

Presentation

Many of the significant aspects of shared presentation have become reified, that is they have taken on significance beyond themselves and come to represent a concept within 4D. (I discuss reification in detail in chapters 9 and 10.)

Declaring a pronoun and a new name were both aspects of presentation that were part of the shared repertoire. These two processes, usually linked, had high levels of significance in 4D, as in the wider trans community, as they indicated that a person had begun a process of gender transition. As a result they were reified. I discuss choosing names and pronouns in chapter 9. I also discuss the performative effects of declaring names and pronouns in chapter 6. Many other aspects of presentation were also reified.

4D participants all identified as trans, or were questioning their gender identity. Their gendered appearance was important both for themselves and in their relationship with others. Most of them sought to present as their preferred gender for their own comfort or enjoyment, they also wanted to communicate to others how they identified. Most of the young people conformed to gender expectations and aspired to present in ways that were consistent and conventional for their preferred gender. Conventionally gendered clothing and hairstyles were part of the shared repertoire, as they are in many wider trans and cis gender communities. Having one's hair cut or styled according to one's preferred gender was reified, as was buying and choosing clothes according to one's preferred gender. Both of these were understood to signify an individual's commitment to a new gender identity, and therefore the 'authenticity' of their preferred identity. I will discuss these in more detail in chapter 10. Changing one's gender presentation was part of the shared repertoire as it indicated that an individual was on a gender trajectory, but it did not have the same level of legitimacy as moving to conventional gender presentation for the 'other' binary gender. Non-binary, inconsistent, or unconventional gender presentations were not part of the shared repertoire in 4D. Fluid and unconventional presentations of identity were less easily understood as 'authentic' as they were less continuous and consistent than normative cross-gender presentations. This meant that people who preferred to present fluid or genderqueer identities had less legitimacy in the community as they could not use this aspect of the shared repertoire to gain legitimacy. I discuss legitimacy in chapter 8.

The shared repertoire was not the same for female/feminine and male/masculine young people. 4D participants were predominantly young trans

men or transmasculine; very few young trans women attended, perhaps one or sometimes two at each session. Chrissy talked about how she felt about being the only woman at a session:

> Chrissy: It's OK. But most of the time when another male to female comes in I feel quite of jealous of them actually, because they're usually more confident than me and *(slight laugh)* better with clothes than me.

In fact over the period of my observations several young trans women, and people assigned male at birth who were questioning their gender, attended 4D for one or more sessions presenting as male (although they did not continue to do so). In the wider community it is less acceptable for young men to wear female or feminine clothing than it is for young women to wear male or masculine clothing, so this aspect of the shared repertoire can be seen to reflect gender norms beyond 4D: both young men and young women came to 4D presenting in a way that was acceptable outside the group for their identity as assigned at birth. I have only recorded one person assigned female at birth, Kodi, who attended presenting as female. This is observation from that occasion.

> Kodi[1] arrived in zir school uniform: short hair in little bunches at the back, flat pumps, skirt. Ze apologised to Emily for not having been able to change…Emily suggested Kodi could change now, Kodi said ze hadn't got any clothes. Kodi was acting in quite a "girly" giggly way today, not how I remember zir last time … Emily again looks just like a young man. Doesn't apologise. (Fieldnote May 2009)

This anecdote shows very clearly the difference in shared repertoire for people who were assigned male at birth and those who were assigned female at birth. Emily was assigned male at birth, and Kodi was assigned female at birth. Kodi and Emily had become friends through meeting at 4D. I do not know if they were in contact outside 4D, but they engaged with each other as friends when

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[1] Kodi identified as genderqueer and had preferred pronoun ze. I do not know if ze preferred zir or per as possessive pronoun. Here I use zir.

they were at the youth group. Until this point Kodi had presented as masculine, rather than conforming to norms for zir gender, assigned female at birth. Emily on the other hand had consistently presented looking conventionally like a young man, which aligned with her assigned gender, male at birth, rather than her female identity. On this occasion both Kodi and Emily were presenting according to their gender assigned at birth. Kodi, unlike on previous occasions, presented as conventionally female: wearing a skirt and having zir hair in bunches. There are two notable things about this observation. Although Kodi and Emily were equivalent in their gender presentation: both presented in conformity with their gender as assigned at birth, Kodi apologised for zir presentation to Emily whereas Emily did not say anything about her own presentation. It would seem that Kodi felt that zir presentation did not meet community norms whereas Emily did not see her own presentation as an issue. This is reinforced by Emily's answer suggesting Kodi could 'change now'. Clearly Emily did not feel her appearance was worth commenting on. She also seemed to think that Kodi's apology about zir presentation was appropriate. However it is also possible that part of the issue was that Kodi's presentation was less masculine than usual, so Kodi could be seen to be moving 'the wrong way' on zir gender trajectory.

Because of this difference in the shared repertoire, young people assigned male at birth had initial advantages in the group over those who were assigned female at birth. Comparing newcomers to 4D who presented according their gender assigned at birth, those assigned male at birth had greater initial legitimacy in the group than those assigned female. They also did not lose legitimacy as quickly if they continued to present according to their gender as assigned at birth. However these advantages did not continue; those assigned male at birth could not become central members of the community as I discuss in chapter 8.

Conclusion

In this chapter I have discussed 'authenticity' of identity, as this was significant to all the processes with 4D. I have also established that 4D functioned as a

community of practice. The youth group met the three criteria necessary for a community of practice: mutual engagement, joint enterprise and shared repertoire. The members of 4D were mutually engaged with each other; they discussed, negotiated and disagreed with each other about trans identities and trajectories. They shared and boasted and argued about how to navigate the world in a liminal identity as they moved along their gender trajectories towards their preferred identities. Through this they established the joint enterprise of legitimating and developing trans identities within the youth group.

The mutual engagement and the joint enterprise legitimated, at least initially, the identities of all the youth group participants. The participants' identities as trans, genderqueer or questioning were legitimated within the community. This supported the establishment of the participants' preferred identities. As well as establishing the preferred identities of individual participants, an alternative gender discourse was established. This counter discourse established that gender or trans identity is self-defined and, at least initially, unrelated to gender expression.

The shared repertoire included local, community specific, language and knowledge, as well as presentation, indicating its importance to membership of the community. Demonstrating the use of the shared repertoire is necessary for individuals to gain legitimacy within a community of practice, and with this move towards central membership of the community. The shared repertoire enabled individuals to be seen as authentically trans both within 4D and the wider community. However, the shared repertoire supported central identities more than marginal identities with implications for their legitimacy within the community. In the next chapter I will look at central and marginal identities, identity trajectories and legitimation in 4D.

8   Legitimacy, identities and trajectories in 4D

In order to participate in a community of practice a new member must be accepted as a legitimate peripheral participant. A legitimate peripheral participant must both have legitimacy and a level of participation, which is not yet full participation. As we saw in chapter 7, a new member might have a very low level of participation: sitting silently in the introductory and closing circles was sufficient. In order to participate, even at the most minimal level, as a member of a community of practice, a new member must be given sufficient legitimacy (Wenger, 1998). I will discuss the process by which new members were legitimated below. I will also look at the trajectories that participants might take in and through the community.

There were several possible identities within the youth group, as in any community of practice. Following Wenger (1998), I have used spatial language to describe identities within a community. The language that I have used describes a newcomer as a legitimate peripheral participant. Peripheral participants are on the edge of the important practices within the community. However their legitimacy means that they are not excluded from significant practices within the community and able to see how central members engage in the practice. Peripheral here only refers to a new member's current identity and position within the community. The most significant identities within 4D in addition to legitimate peripheral participant were central member and marginal member. These identities had different degrees of centrality and legitimation in the community.

There were several possible identity trajectories in 4D. The language for trajectories as well as identity positions is spatial, although identity trajectories are not usually spatial trajectories. There is a temporal path rather than a spatial path associated with identity changes. Participants must spend time engaging with the community in order to change their identities within the community. However the spatial metaphor is a useful way to visualise changes in identity within the community. The identity of legitimate peripheral participant does not imply or suggest any future identity for a new member or

any trajectory to a new identity. The most straightforward trajectory is from legitimate peripheral participant to central member.

At the time of my observations, in order to become a fully central member of 4D a participant had to be on a trajectory across the binary from assigned female at birth to male. Their gender presentation and performance also had to conform to this trajectory. That is, as well as declaring themselves to be he, and male, they had to be seen to be moving towards presenting consistently and conventionally as male. Those whose identity trajectories were other than moving from assigned female to male across the gender binary were unable to move to becoming fully central members. It is important to say that 4D was not a youth group for young trans men. Other identities such as genderqueer and trans female were legitimate and accepted in the group. The youth workers and many of the youth group members desired that all identities, including fluid and non-binary identities, had equal legitimacy. However, as I will consider further below, the structure and membership of the group vitiated this.

The joint enterprise included the legitimation of all participants' identities as trans or questioning. This included those identities where there was little change in the individuals' presentation. However this was not the full legitimation needed for a participant to become a central member. Specifically, as I will discuss, those who were non-binary and those who were on a binary trajectory from assigned male to female could not become central members of the community. Those who were non-binary whose transition conformed more closely to a trans male trajectory were able to move to more central membership than those whose transition was not. I will discuss trajectory possibilities in detail below.

Legitimate peripheral participation

For a new member's participation to be legitimated, so that they became a legitimate peripheral participant in 4D, required three things: they were trans or questioning their gender, they understood gender as self-defined and unrelated to appearance, and they accepted the working agreement.

In a community of practive, legitimacy must be given by the other members of the community, in the case of 4D that was the young people rather than the youth workers. However Graeme, the youth worker, played a role in the initial legitimation of new members. A young person had to satisfy Graeme (usually) as gatekeeper, that they were trans or questioning their gender identity in order for him to allow them access to the youth group. New members usually contacted Graeme about joining 4D, although sometimes they were introduced by a young person who already attended. Established group members would contact Graeme rather than bring a new person directly to the group as they understood that new members should meet Graeme first as they had themselves. The new member, or someone acting on their behalf, would have said that they were trans or that they were questioning their gender, but this needed confirmation before they could access the youth group. The first step towards legitimation was for them to meet and satisfy Graeme that they were trans or questioning their gender before they were accepted into 4D.

At the initial meeting Graeme would explain the understanding within 4D of gender identity: individuals determine their own gender identity, gender identity is not based on appearance and people may not present conventionally in line with their identity. This explanation was also necessary to the process of legitimation. Current members would expect new members to respect their self-identification however they were seen to present, and this would be assumed from their meeting with Graeme. This meeting can be seen as a legitimation ceremony: after this meeting the new member would be admitted to their first youth group session. Being allowed to attend a youth group session by Graeme confirmed for other members that the new person was trans or gender questioning and that they understood gender as self-defined, the first two requirements for legitimacy in the group.

The final step to legitimation as a peripheral participant was for the new member to be present at the discussion of the working agreement. The working agreement was discussed at the start of all sessions, and reinforced that an individual's identity was to be respected, irrespective of their appearance. Participants were understood to accept the working agreement, although this

could be tacit as they did not have to say that they accepted it, being present at the discussion was sufficient. The working agreement was seen to offer protection to the group. New participants' access to and participation in the group could, at least in theory, be revoked if they did not abide by the working agreement[1]. Members of 4D would grant initial legitimacy to new members, at least provisionally, on the basis of these three requirements: they were trans or gender questioning, that they understood gender as self-identified and unrelated to appearance, and that they accepted the working agreement. The first two requirements were assumed because Graeme had allowed them access to 4D.

There was a related process of temporary legitimation for friends and family at SOFFA sessions[2]. These also started with a pronoun circle, and a discussion of the working agreement. Those who were not trans or questioning had to declare their identity in the pronoun circle, thereby denaturalising the link between appearance and identity (see chapter 6). The working agreement was discussed and it was expected that everyone should comply. Most important was that everyone comply in respecting others' declared identity. Again this can be seen as a ceremony of legitimation, although here it is temporary. In addition, the participation of others, who were not youth group members, in the pronoun circle contributed to the legitimation of gender identity as self-determined. This was a performative process naturalising gender as self-identified within 4D. It also contributed to increased legitimation and naturalisation of gender as self-identified in the wider community.

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[1] The young people felt they could complain to the youth workers about people who did not respect the working agreement. In fact members never raised the question of access or behaviour in relation to new participants. On one occasion members complained about an external facilitator not being careful about pronouns.

[2] SOFFA stands for significant others, friends, family and allies. SOFFA sessions were occasionally held in addition to youth group sessions. They were an opportunity for friends and family to meet and get information and support in relation to trans and gender questioning young people.

Following the process of legitimation in 4D, a young person had to participate in order to be accepted as a new member. As we have seen in the section on mutual engagement, participation for a new member involved at least sitting silently and appearing engaged in the introductory and closing circles. No one was ever deemed not to participate in the pronoun circle once they had been accepted to attend a youth group session. However, given the minimal participation required it is worth considering what would count as non-participation. I suggest that if an individual would not sit in the introductory circle when asked, or if they were not attentive when others spoke in the circle, or when the working agreement was discussed, they would be seen not be participating and their presence would no longer be legitimated. The pronoun circles were the parts of the session when all participants sat together. It is in these circles that new participants were seen, and they had to be seen to participate in order to be accepted as a legitimate peripheral participants. Legitimate peripheral participation is the first step to more central community membership.

Increasing legitimation in the youth group

The most straightforward and easily recognised trajectory is from legitimate peripheral participant to central member. Moving from legitimate peripheral participant to central member has several stages. As I have said in chapter 3, to become a more central member of a community an individual must change how they talk to and present themselves to other members of the community (Wenger, 1998). In order for a legitimate peripheral participant to move towards central membership they must become a more active participant in the community and have their change in participation legitimated. A legitimate peripheral participant has a minimal level of legitimacy. That legitimacy means that they are not excluded from significant practices within the community and are able to see how central members engage in the practice. Participants do not move in one step from peripheral to central member, their change in identity will be phased. Participants will move from peripheral to central membership through degrees of increasing centrality associated with increasing expertise. As a participant changes their identity and position within the community, at each

stage of the process, they will have changed their participation and had their changed participation and associated identity legitimated. A community member who is becoming more central will change their participation in the three keys aspects of the community of practice: mutual engagement, joint enterprise and shared repertoire. They will show through their participation that they are developing their expertise within the practice. As a member moves towards centrality they will change their engagement with other group members. In 4D, members on a central trajectory increasingly asked fewer questions of more central members. They participated more actively in discussions and negotiations of important elements of the practice and were more authoritative in sharing information with newer members, for example about legal and medical choices. They showed that they were committed to the joint enterprise through engaging with transition possibilities and demonstrating that they were making decisions about how they wished to transition. Their gender performance and presentation demonstrated increasingly more of the shared repertoire. Other members of the community also had to legitimate these changes in participation for an individual to be accepted as a more central member.

Legitimation and participation are not linear but feed into each other. Increased participation in the form of engaging with the group practice will lead to further legitimation. Further legitimation will allow participation in more central activities in the community. Participants will change and regulate their performance in order to be understood and legitimated as central members (Paechter, 2006b, 2007). This change in presentation within the group is intertwined with a change of identity (Wenger, 1998).

I will now look at legitimation and identity trajectories in 4D. The young people in 4D were both moving on a trajectory within the community of practice, and moving on a gender trajectory. I will consider the relationship between these two identity trajectories.

Everyone attending a youth group session participated in the introductory circle, so changing one's participation in the circle was the most visible change

in engagement a member could make. For someone who had participated at the most minimal level and been silent in the introductory circle, the easiest way to increase their participation was by speaking in the introductory circle. Speaking in the circle also showed that a new member had an understanding of the shared repertoire. A new member showed that they understood that they could choose a preferred pronoun, and that the local meaning of pronouns was as indicators of preferred gender identity. The other common change in participation in the introductory circle was for a participant to move from declaring their 'birth' name and pronoun to a chosen name and pronoun indicating their preferred gender identity. This showed a participant's engagement with the joint enterprise as they were demonstrating that they were making choices about their transition. These are fieldnotes from the introductory and closing circles of one session:

> At the start: We do names and pronouns. Mia and Abel say nothing. Noah – he. Chrissy – she. Nathan, Tyler, Mattius, Jayden, Brendan – he. Lee – they or it. Naomi – she. Miles says very definitely Miles but that they aren't sure about pronoun …

> At the end: Finally names and pronouns … I sit next to Graeme in the circle. All as before except Miles now says he, and Mia and Abel speak loudly and say Mia – she, Abel – he. Every time Graeme nudges my leg. (Fieldnote February 2011)

On this occasion Mia and Abel, who had both attended sessions previously, and had always been silent in the introductory circles, both declared a chosen name and pronoun. It was Miles's first session and he moved from saying he was unsure about pronouns to saying 'he' at the end. Declaring a new pronoun in the introductory circle was a powerful way to engage with the group. These pronoun declarations would have been noticed by the other young people, as they were by Graeme and me. As I discuss in detail in chapter 6, the name and pronoun declarations that were made in the circle were performative. Pronoun declarations established a member's preferred identity for other members of the group. Pronoun declarations also showed a new member's engagement with the joint enterprise, as they showed that the new member was making decisions about their transition with support from the community. In addition to this, as a

result of the performative nature of pronoun declarations, declaring a new pronoun reinforced the process of being able to choose one's gender identity which legitimated the discourse of self-declaration of gender identity as well as legitimating other members' self-declared identities.

It always felt a positive step for a young person when they first chose a new name and pronoun. The young person would seem happier and more confident (Russell et al., 2018). Here I describe Mia and Abel as speaking loudly, an indication of their changing self-confidence. As youth workers both Graeme and I were often moved by new pronoun declarations. On this occasion Graeme wanted to share his pleasure with me by nudging my leg. Mia and Abel had both appeared to be very anxious young people and this change in self-confidence was striking.

Other changes in declaration in the pronoun circle included people moving from non-binary declarations to cross-binary declarations. For example Reese declared quite formally in the first four sessions they attended (July to August 2010): 'I identify as genderqueer and like male or gender-neutral pronouns.'

On his fifth session (September 2010) he just said 'Reese, he', the usual declaration for those established members who identified as male. For all these young people, their changed engagement in the introductory circles was linked to more central participation in 4D, and legitimation by other group members. These processes are not linear and it is not possible to say that participation causes legitimation, or that legitimation allows participation. It was noticeable that Reese's changes in pronoun declaration coincided with more active participation in the group in other ways and more acceptance by other group members. For Reese the change in identity from genderqueer to male was related to moving to a more centre-bound trajectory. It seemed that a male identity was necessary to central membership. After Reese's change to identifying as male, with a corresponding changed pronoun declaration, he moved to position himself as an established member. We can see that Reese positioned himself as a more central member, confident and able to advise Sam about exploring his gender identity.

> Reese listens to Sam and says he identified as genderqueer for about a year and then tried male pronouns and so it was a slow process for him. He suggests Sam talk to his friends, that his friends will probably understand better than he thinks. (Fieldnote February 2011)[1]

On another occasion I noted: 'Reese and Lee are absolutely the most vociferous about toilets'. On this occasion as well, Reese positioned himself as a more central member of 4D and was accepted by other established members which legitimated his more central position. Immediately after Mia and Abel's pronoun and name declarations they both participated more fully in the group activities, other youth group members also engaged with them more. This is a fieldnote from the team meeting after that session. Niamh was one of the facilitators at the session.

> Niamh said that Mia and Abel had completely changed and couldn't shut up. (Fieldnote February 2011)

Both Mia and Abel were visibly participating more fully in wider group activities. This participation was accepted by the other group members, legitimating Mia and Abel's more central membership.

As well as changing participation in the introductory circle people would also change their clothing and haircuts to conform to conventional gender presentation of their preferred identity. Although this change in presentation was not required for one's identity to be legitimated within the group, as I discussed earlier, it was needed to move from the position of legitimate peripheral participant towards more central membership with further legitimation within the community. This fieldnote describes Reese's reaction to his earlier less masculine presentation. This is from the Christmas party when there was a slide show of photographs from group activities.

> There are some camping photos. Reese is very visible in one with his hair back in a ponytail. That is the most significant change

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[1] I have used a longer extract from this fieldnote in chapter 7 to illustrate mutual engagement.

about his appearance. He now has hair that is very short at the sides, a bit punky and dyed much more brightly. Reese comments on his appearance in the photo in a 'I'll be open about being slightly embarrassed' way. I do not know if it is thought out but it avoids people commenting about his appearance. He says something like 'look how I had my hair in the summer,' ... No one comments at all. (Fieldnote December 2010)

Reese was seeking to maintain his more central position in the group by distancing himself from his older and less masculine haircut. Reese was unusual in commenting on his previous appearance in an embarrassed way. It is worth speculating here whether this was more necessary for Reese than it would have been for other members of 4D. Unusually Reese had declared himself to be genderqueer before moving to a male identity. Perhaps he had to distance himself from his previous appearance because it was a presentation as genderqueer rather than an early stage of transition from female to male. Reese also sought to mitigate his previous genderqueer identity to Sam (and perhaps to me), saying that for him the trajectory to male was 'a slow process' (see quote above). This is similar to identity trajectories in Mason-Schrock's study of a transgender support group (Mason-Schrock, 1996). Transsexual was a more authentic identity in the group than transvestite, and those who had previously identified as transvestites sought to explain their earlier identification as due to denial.

Trajectories in the youth group

Most new participants who attended more than four or five sessions would move towards becoming more central members. However, this was not always the case, and I will discuss alternative trajectories below. Group members were aware of the common trajectory from peripheral to central participant in the group. Brendan in his interview with me described his view of trajectories through 4D:

> Brendan: OK. This is how I stage it in my mind, ... <chuckles> You have the people who've literally just come out and they often go to the youth group also to ... who haven't come out yet and they're questioning and all that. And then you have people like me who

are pre-hormones, still the beginning of all the doctor stuff. And then you have the people who are the first year of hormones, so not all the physical stuff has completely happened to them yet. Then you have the people who have been on hormones for ages, but they're still pre-op and stuff, but they'll pass all the time and everything. And then you have the people who are hormones for ages, post-op, and feel like they're the helper people who you can ask anything, and they've been down the road, <chuckles> they know. But I don't know, but I don't think I'd still go to a youth group when I was that far, because I think when I get to a certain point I won't see myself as trans, but they obviously really have that ... They want to keep that, but I don't think I will, so that's a ... it's like a period of my life...

Brendan described the trajectory of someone who becomes a central member and stays a member[1]. Perhaps most significant was that the participant's gender transition process, that is their gender trajectory, ran alongside their membership trajectory within 4D. That is, as a participant moved further with their gender transition they also become more central in the youth group. Central members, 'helper people who you can ask anything' were also those people who had been on 'hormones for ages and had surgery'. My view of central members was similar to that described by Brendan. Their gender trajectory was strongly tied to their position in the community. People who had completed their social transition, including legal name change, and most of their desired medical transition could be described as 'living' as their preferred gender. Someone who had moved significantly along their gender trajectory to the point where they 'lived' as their preferred gender would also demonstrate their full engagement with the community of practice and be legitimated as a central member. At this point they would talk correctly, have significant knowledge and present themselves in line with the shared repertoire. They would be able to do this in a large part because of their experience of gender transition. In addition, supporting newer members showed the commitment of

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[1] It is worth noting that participants often trajectoried out of the group after they had had made social and some medical transitions, as Brendan suggested he would.

central members to the shared enterprise as well as positioning them as more central within the community.

Brendan described the most straightforward trajectory through 4D. Many people's trajectories was not in fact so linear. However, before starting hormones, all central members had done three things, although not necessarily in a specific order. They had changed their hair and clothes, in line with the shared repertoire. They had chosen a name and pronoun in line with their preferred gender. They had 'come out', that is declared themselves as trans, beyond the group, including to medical professionals. For young trans women choosing a name and pronoun would come before changing their hair and clothes. For young trans men it would generally be the other way round. In general these steps would come before engaging with medical professionals, although not always.[1] Zoe, for example, was engaged with the medical profession before coming to 4D and changing name and pronoun. These three steps were all reified, as they had become established as significant steps towards a further stage along the gender trajectory, as well as the membership trajectory in 4D. I will look at these in more detail in chapters 9 and 10 on reifications.

The change in hair and clothes necessary to an inbound trajectory was conventionally across the gender binary. In part, this was perhaps because changing presentation across the gender binary was the most visible and unequivocal way to represent a change in identity. However, because of the centrality of cross-binary trans male identity trajectories in 4D the shared repertoire was most strongly one of cross-binary presentation, and knowledge of trans male medical transitions. The joint enterprise included more understanding of how to follow a cross-binary transition, particularly assigned female to male. This meant that participants with other identities could not become fully legitimated and could not become central members. I discuss this further in the next section.

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[1] Those with non-binary identities did not become central members and their trajectories were diverse.

Brendan described the final stage on the trajectory to central membership in 4D as: being on hormones and having surgery and being a 'helper person'. In fact most participants stopped attending the youth group regularly at the point when they were passing all the time. Almost none would continue to attend the group once they had had surgery. Zak was an example of this. I will discuss Zak's position and relationship to the other participants in the youth group in some detail as it shows other possible identities and trajectories in 4D and the power relations between people with different identities.

Central members, marginal members and power relations

The different identities within a community of practice are situated in power relations with each other. Central participants are most able to mobilise power in the community. This power will enable a central participant to change or solidify practices and identities within the community. Legitimate peripheral participants are able to mobilise relatively little power in the community. Any power newcomers are able to mobilise will only enable further legitimation of identities and practices already established within the community. Newcomers will not be able to make changes to the practice. All trajectories within the community are subject to the power relations between the members of the community. This is because legitimation within a community of practice takes place through a mobilisation of power between community members. Central participants will legitimate new members' changing identities and participation. In 4D newcomers were given a low level of legitimacy when the more established members accepted their minimal participation at a youth group session. The established members were able to mobilise power within the youth group to accept the further participation of others, including newcomers, and legitimate them as members of 4D. This allowed new, and more established members, to move along an inbound trajectory towards more central membership. Central members could also put into question the legitimacy of less central members of the community. They might even be able to delegitimate them by questioning or challenging the nature of their participation or, perhaps equally powerfully, ignoring their contributions (Lave & Wenger, 1991; Mason-Schrock, 1996).

Newcomers and regular members also have a role in legitimating the position of others in the community although they are not able to mobilise power as easily and to such effect as central members. Newcomers may add to the legitimacy of more central members. For example, if a new member looks towards an established member as a role model they are showing that they understand the established member has a more central position within the community than they do, reinforcing their central position. Newcomers also add to the legitimation of practices and identities within a community, through their acceptance of these practices and identities. These processes are related to the performative nature of identities. The acceptance of identities, by people other than those immediately performing those identities, naturalises those identities, and makes their constructed nature invisible. Alongside the naturalising of identities is an establishment and naturalisation of discourses including practices within a community.

Another significant identity within 4D was that of marginal member. Marginal members join a community as legitimate peripheral participants but will not be on an inbound trajectory. Marginal members in 4D were those who identified as genderqueer or trans female rather than having the central identity of trans male. In order to be on an inbound trajectory new members must participate in established ways within the community. Newer members will not be able to mobilise sufficient power to have alternative identities or modes of participation legitimated. Alternative identities and modes of participation will not be fully legitimated by those members who are already established in the community. New members whose mode of participation is not established within the community will at most be partially legitimated. This partial legitimation will mean that they will not be on an inbound trajectory but will instead remain on the margins of the community and they will be marginal participants on a marginal trajectory. It is also possible to start on an inbound trajectory but for this to change or even be reversed with a change in participation.

Communities of practice are always evolving, and accepted identities and discourses can change. However because of the power relations within a

community it is much easier to reinforce established practices and identities than it is to bring about change. One person cannot bring about change unless central members also support that change. Within 4D, assigned female to male binary gender change was the established gender trajectory. Those members who were on an assigned female to male cross-binary trajectory were also likely to be on a trajectory to central membership. As I have said above, to be on an inbound trajectory these members had to change their presentation in line with the shared repertoire, and move towards presenting as conventionally male, as they identified. A trajectory from male, as assigned at birth, to female, did not have the same legitimacy as a trajectory from assigned female to male, nor did a trajectory towards a non-binary identity. I will consider reasons for this below.

I will now discuss Zak's trajectory through 4D as it illustrates the relationship between central and other members and the power relations involved. Zak did not attend 4D for very long, but he moved quickly from legitimate peripheral participant through central membership and out of the community. He transitioned medically and socially. He attended only one session after his chest surgery. Zak was 19 or 20 when he first attended 4D. He had already come out to his family and had chosen a male name and pronoun, but at that point had the appearance of a young teenage boy, pre-puberty, as he had not started hormones. After attending a few sessions, he started on hormones and had chest surgery privately. He did not carry on attending the youth group after surgery, even though he had not been on hormones for long and would most likely still be seen as a young teenager outside 4D. He did continue to be in contact with 4D members outside the group. Even though he only attended for a short period, he was clearly seen as a significant member by other group members and I would claim he was a central participant for the short time that he attended the youth group. I will first discuss a fieldnote from the session he attended when he had just had surgery, his last session.

> Slightly earlier Zak has made it clear he's had surgery by saying to keep away. He is also explicit about the stitches aren't dissolving ones so they are poking into him. Nathan makes a comment about Zak making too much of a fuss … Zak is making quite a big thing, but is Nathan letting himself get wound up? Nathan passes really

well. Is there some concern that Zak is now further on than him? (Fieldnote November 2010)

Nathan, like Zak, identified as male. Nathan had been on hormones for a long period, and his appearance was very conventionally male: receding hairline, strong beard growth and masculine hair and clothes. He had attended the youth group for several sessions and due to his gender transition and willingness to share knowledge was accepted as one of the more central members. Unlike Nathan who would pass as an adult man, when Zak had surgery he had only recently started hormones and would still have passed as a teenage boy. However Zak's surgery changed his position in relation to Nathan. Nathan's comment and behaviour suggested that Zak's surgery put into question both Nathan's identity and legitimacy as one of the more central members of the group. Genital surgery was not seen as a viable option for the trans men, as I have discussed in chapter 5, so chest surgery was the most irreversible change an individual could make. This was a medical intervention that Zak had undergone and Nathan had not. Zak's surgery put into question Nathan's authenticity as it showed it was possible for Nathan to have made an even bigger commitment to gender transition.

Both Blake and Lee mentioned Zak in their interviews. Blake and Lee's relationship with Zak was very different from Nathan's. Blake and Lee both identified outside the gender binary and both enjoyed being transgressive in their gender presentation (see chapter 5). The following extract is from my interview with Blake. Blake discussed the reaction in 4D to his gender-fluid presentation and his identity as 'non-op', that is that he didn't want surgery as part of his transition. In the discussion he talked about Zak. Zak had lent him a binder, but also Zak probably knew that he didn't want surgery. The binder was significant here as people usually use a binder to conceal their breasts until they have surgery.

> Blake: But I still got asked why; I still got, "Oh, so you're not binding today!" you know? So I was like, "Well, I don't have to. I know that you guys see me for who I say I am, so I don't feel the need to ... yeah. I just do what I want, you know?" And I guess they

were OK with it. I mean, if they are bitching behind my back, I don't know. *(slight laugh)* I don't think they are, to be honest.

AM: But to you they were ...? What was their reaction to you?

Blake: Well, they were just a bit like, "Oh, you know, you're not binding today?" sort of thing, but, yeah, they were fine with it ... I don't know if any of them actually know about my transition plans or if any of them know. I think I spoke to Zak a little bit because I was just asking him about stuff like hormones and stuff, and about which doctors to go to. So, yeah, he might know a little bit, but for the most part, I think most of them know that I'm non-op ... But, yeah, also I mean Zak is really cool like because I thought he might be a bit, I don't know, mad at me a little bit, but he wasn't, because he gave me his old binder, because I really needed it when I was going on a field trip, for an emergency ... So, yeah, he really, really helped me out, so I felt a little bad, like, shit does he think I just use it as recreation!? Because I don't, you know, but he was fine; it doesn't like at all bother him ...

AM: In terms of ... his ... reaction to you not binding at the Christmas party or just when you talk to him, or when you've talked to him about your transition plans?

Blake: Yeah, he seems fine with it. I mean, at the Christmas party he was fine anyway, but I was talking to him about transitioning, yeah, I was just saying about I don't want, you know, to have any sort of surgery, and, yeah, he was fine with it, because for a lot of people, they do see binders as premeditative – is that the word? – to operations, and for me that's not what it is. And, yeah, when I said that, he was fine about that, he didn't see it in that way; just because that's the way he used it doesn't mean that everyone is like that.

There are several strands to this discussion. Blake was clearly not a central member of the group, and recognised this. His position in 4D was not secure: the other members might be bitching behind his back. He was clearly a marginal member. Blake seemed to be somewhat in awe of Zak: 'Zak is really cool'. Blake was also concerned that Zak should see his identity as authentic; he didn't want his use of a binder to be seen as playful because he didn't want surgery: 'I felt a little bad, like shit, does he think I just use it as recreation!?'. It seems that Blake was really pleased that Zak seemed to accept his identity and presentation.

However Blake was clearly not certain that Zak did fully accept him, as he felt it necessary to say several times that Zak was fine with some aspect of his identity or presentation.

This is from my interview with Lee:

> Lee: I do know like quite a few people who found out about my situation and were like, "That's how I feel!" And then started to transition. One of my friends [Zak] ... he's already had top surgery ... He found out about me and then said, "I'm trans now." And he's already had top surgery and hormones, and ... just wow!

Lee identified as non-binary. Again it seems to be impressed with Zak: 'just wow!'. Lee saw Zak as on a more central trajectory in terms of his transition than it was. However Lee less clearly wanted approval from Zak, rather it wanted to feel that it had helped Zak, and others, with their gender transitions.

The relationships that Nathan, Blake and Lee had to Zak show the power relations between different identity positions in the community. Blake clearly positioned Zak as more central than himself. As a result Zak was able to mobilise power in the group. The ability to mobilise power is linked to the ability to legitimate or delegitimate others' identities within a community of practice; so Zak granted some legitimacy to Blake through, at least partially, accepting his gender fluidity. Zak's movement to even greater centrality in the group after his surgery threatened Nathan's legitimacy and position as central member by putting his authenticity in question.

I will now look at the identities and trajectories of marginal members in 4D. Lee was a marginal member in the community and its trajectory was particularly interesting. Lee started at 4D identifying as 'it'. It had been on hormones for some time, and would consistently be read as male, although it would declare itself to be genderqueer. Later Lee moved to sometimes presenting in a more conventionally feminine way and using the feminine pronoun 'she'. Lee's identity move from masculine presenting non-binary with gender-neutral pronouns towards a more feminine presentation meant that Lee's identity

became less legitimate within 4D. This is illustrated by another quote from Blake:

> Blake: A lot of people are coming down hard on them because they think that they're[1] – what's the word? – going back, reverting back to what they were, and I know for a fact they're not, they're just doing what they want to do, and I just don't understand why ... Yeah, they were assigned female at birth, and they transitioned to male and now they are identifying more with genderqueer, but also sometimes on occasion using female pronouns, which a lot of people have been like really outraged about, and I just ... because I would expect ... well, before this particular person, I would expect the trans community to be very open of gender fluidity, you know? And because I saw that, I was just like, why? Maybe they're just jealous because that person was able to go through the transition they really, really need and now they feel like that person's throwing it away. You know, they're not obviously; they're just being happy with who they are and I don't see why people should be mad at them.

Blake's comments illustrate how negatively Lee's identity change was perceived by others in 4D. Blake used the expression 'coming down hard on' as well as the words 'outraged', 'jealous', and 'mad'. The reason that Blake gave for this was that Lee was perceived to be moving back on its gender trajectory. Although the joint enterprise in theory legitimated all preferred identities, reversing one's gender trajectory was not in fact a legitimate gender trajectory within 4D. Only trajectories that moved away from one's identity as assigned at birth were legitimate. Blake expressed surprise at the lack of support for gender fluidity, and the lack of support for Lee's preferred identities within 4D.

Members of 4D with non-binary and fluid identities were always marginal members of the group. Looking at Lee's example it is interesting to consider why this was the case. Lee's original transition, before coming to 4D had been a traditional cross-binary female to male transition. Lee had chosen a male name: Leon, and male pronouns, and changed presentation with the help of hormones to passing well as male. Leon met all the usual criteria for central membership:

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[1] Blake used the non-binary pronoun 'they' instead of 'it' for Lee.

legal and medical knowledge and presentation. However Lee then began to identify as non-binary. Its gender presentation was often gender transgressive: pronoun 'it', and contradictory physical presentations such as: beard and make-up, or beard and dress. These contradicted significant aspects of the shared repertoire of presenting as male, or masculine. Lee's transgressive views on gender could also be seen to challenge or destabilise others' traditional trajectories. It seemed that to become a central member of 4D, as well as legal and medical knowledge, required a consistent and conventional male presentation and identification.

Young trans women also were more marginal in 4D. At the very start of my involvement in the youth group there was balance of young trans women and young trans men and young trans women were not clearly more marginal at that point. Soon after I started the balance changed and there were more trans male than trans female members. The shared repertoire at the start could be seen to include knowledge of cross-binary transitions, that is moving from assigned male to female or assigned female to male. However, the knowledge developed by young trans women was not the knowledge that was important to those who soon became central members of the group as it related to assigned male to female transition. In addition, because of the larger representation of young trans men in the group, the knowledge of assigned female to male transitions was more often discussed and was more detailed than the knowledge of assigned male to female transitions. Sylvia was the only trans woman who continued to attend 4D with some regularity after being on hormones and living as female. Her attendance was intermittent and she generally positioned herself as a visiting expert rather than as a central member. The expertise that she shared was generally about legal changes and trans politics rather than medical transition.

Similarly the shared repertoire of appearance, which included hair and clothes of the 'other' binary identity, again was in fact predominantly to present as male or masculine for young trans men. The shared repertoire of presentation is further complicated because it is easier for young people assigned female to present as male or masculine than it is for young people assigned male to

present as female or feminine in the wider community. So this presentation was not available in the same way to those who identified as female. In the wider community, the sanctions for presenting as feminine or female for those assigned male at birth are much greater than for presenting as masculine or male for those assigned female at birth. These sanctions include more bullying and harassment as well as violence. A consequence of this was that young trans men could more easily dress as male at home and come to 4D presenting as young men; young trans women who did not, yet, pass well could feel vulnerable and might choose to change at the youth group or not to change their presentation at all. This meant that the repertoire was already different for young trans women and young trans men, as young trans women were more likely to be seen not to have changed their presentation in the same time frame as young trans men at 4D. As a result young trans women would be seen as less far along an identity trajectory towards their preferred identity, which would be linked to a more marginal identity within the community.

I also think that young trans women, in a similar way to participants with non-binary identities, could not be expected to become central in the group given that they were in the minority. The naturalisation of identities and identity trajectories, as a result of their performative nature, cannot happen in the same way for minority identities. Central members of the group, although they may partially legitimate other identities, will most effectively legitimate and naturalise the identities that they hold themselves.

There was an ongoing effect in 4D due to the lack of legitimation of identities other than trans male. New members who preferred other identities would not see themselves represented in the group. They would not see the possibility of becoming central members in the group and they would be less likely to continue attending the group. My feeling is that they would seek support elsewhere from other trans communities with more trans female or non-binary members. This was borne out by my observations. Young people who identified as trans male attended more sessions on average than those who identified otherwise.

Conclusion

All communities of practice include processes of establishing and changing identities within the community, with participants moving from peripheral participation to central or marginal membership. In 4D these identity trajectories were intertwined with the young people's gender trajectories. Indeed they were different aspects of substantially the same process. The process that established young people as legitimate peripheral participants in 4D was one and the same process that initially legitimated the young people's trans and questioning identities. Their participation in the group authenticated their identities as trans or questioning their gender. The declaration, either verbally or through silent participation, of a trans or questioning identity legitimated them as peripheral participants in 4D.

Following this initial legitimation, members of 4D moved on identity trajectories within the group as well as gender trajectories. In 4D the process of legitimating peripheral participants on a trajectory to becoming central members was intertwined with movement along a traditional trans trajectory from assigned female at birth to male across the gender binary. The shared repertoire of knowledge and presentation supported this trajectory more than the trajectories from assigned male to female, or to fluid or non-binary identities. Power relations within 4D also supported assigned male to female trajectories. Central members were those on a trans male cross-binary trajectory, and their engagement with other participants gave increased legitimacy to identities that were like their own. Contradictory identity discourses also influenced the possible legitimation of gender identities in the group. The joint enterprise established a counter discourse that gender identities are self-determined, which gave some legitimacy to questioning, fluid and non-binary identities. However, as I have discussed in chapter 5, other discourses were also used by the young people to authenticate their individual identities. Some of these discourses worked against the joint enterprise. In particular the medical and trans narrative supported traditional cross-gender trajectories more than non-binary, fluid or questioning identities. As a result those young people on gender trajectories to fluid or non-binary identities

became marginal rather than central members of the community. It is unclear why central membership was not available to young trans women on a cross-gender trajectory from assigned male to female. It may be that the shared repertoire did not encompass the medical knowledge or presentation that supported these identities. There may also be an effect from the wider community of valuing masculine and male over feminine and female identities and presentation.

The legitimation of gender identities and trajectories is closely related to authentication. For an identity to be seen as authentic it must be legitimated by others. In order to experience one's own identity as authentic it will most probably also be recognised as a legitimate identity. The process of authentication is a performative process. If someone is seen to have an authentic identity that identity must be seen as consistent to that individual, but also that identity must be seen as coherent in the community. The individual must have established the consistency of their identity performatively. It is not seen as role play or acting, but intrinsic to that person. The construction of identity is no longer visible but has become naturalised. The identity must also have become established as 'real', and again this will have been naturalised. It is interesting to consider how this naturalisation applies to trans identities. Once an individual has finished their transition it is clear that a naturalisation process taken place. The individual is now their preferred identity and that is authentic and natural to them. Within 4D gender transitions were also established as authentic. The process of transition, that is moving along a gender trajectory had been naturalised. This allowed the authentication of identity at all stages of a gender trajectory.

In the next two chapters I will look at reifications within 4D. These are events and objects that have taken-for-granted meanings within the community. The reified events within 4D can be seen as rites of passage, marking movements along individuals' gender trajectories.

9 Reifications: reified events

Introduction

In this chapter I consider reified events in 4D. I consider reified events, like all significant processes in 4D, to support the establishment of 'authentic' trans and gender identities. I start by discussing the nature of reification in a community of practice, and its relationship to the joint enterprise and the shared repertoire. I then discuss two further concepts relating to the establishment of identities: bridging gaps between layers of identities, and rites of passage. Bridging identity gaps and rites of passage can be seen as different aspects of the same reified events in 4D, all of which support the establishment of authentic trans identities. I then discuss specific events that were reified within 4D.

Reification, identity gaps, and rites of passage

Reification

Reification is a process through which a material object comes to represent an abstract concept. A reified object is an object that has come to represent a concept (Tusting, 2005; Wenger, 1998). For example a red rose may be understood to represent romantic love. As well as objects, symbols, stories and events can also come to represent concepts through reification; they have become reifications. In the process of reification the reified object, or event, comes to mean something beyond its everyday use or significance as an object. For example, knickers are a reified object; the wearing of knickers is a reification. In the wider community knickers are never just an item of clothing worn for reasons of hygiene or modesty. Instead they are understood to hold meanings about that person's gender and sexuality, meanings beyond the fabric of the underwear.

All human activity leaves traces in the world which may become reified. These traces include objects and stories and processes. These traces may be unmarked or disappear, or they may be seen as significant and get used or referred to in the negotiation of meaning. It is through this process that they may become reified (Wenger, 1998). An example a friend shared with me was making beigels

with cream cheese to eat on a journey. On the first occasion she prepared the beigels as a snack for a journey with her partner, it had no significance beyond that. However she prepared the same snack for the next journey with her partner. Somehow at that point it became significant to her and her partner and both understood the beigels and cream cheese to represent a safe journey. This became sufficiently established over several occasions that on one occasion when she could not prepare the same snack she became anxious about bad luck for the journey. The beigels had become reified. Their meaning was more than the substance of the beigel. It would also have been possible for the beigels not be reified and to have remained as a memory of a nice snack. In the process of reification the object or event takes on meaning beyond the object or event itself. Particularly important is that this meaning is taken-for-granted, it is not discussed directly. The style of women's knickers is understood to communicate something about the wearer. Large plain unadorned knickers generally represent practicality and a lack of interest in sex, whereas lacy see-through knickers represent an active sexuality and some disregard for practicality. These meanings are taken for granted by the observer as well as the wearer. Although there are generally accepted meanings for these objects these meanings are not discussed. There may be slight or even significant differences in the taken-for-granted meanings of reifications. This means that there are also, sometimes significant, possibilities for misinterpretation (Tusting, 2005).

Reifications, the joint enterprise and the shared repertoire

All aspects of a community of practice inform each other, and develop in relation to each other. The development of reifications within 4D was related to the development of the joint enterprise and the shared repertoire. All three were products of negotiation of meaning produced through the mutual engagement of the youth group members. The form that this negotiation took was different in each case, and had different effects.

A community of practice accommodates diversity, as I have discussed in chapter 3 (Mills, 2011; Wenger, 1998). Members are diverse to start with and the mutual engagement produces disagreements as well as agreements, and both must be accommodated within the practice. However the joint enterprise,

shared repertoire and reifications have different levels of negotiability and fluidity because of the different forms of engagement though which they are established. As a result they were inclusive or representative of different parts of the community of 4D.

Joint enterprise

The joint enterprise was the most negotiable as well as the most inclusive of these three products of the 4D community. It was constantly produced and reproduced as the practice members engaged with each other in legitimating others' identities and determining gender trajectories. The negotiation was verbal (Tusting, 2005) and therefore visible and open to alternative perspectives and challenges. The negotiation was also framed by the working agreement, which required all identities to be respected, as I discussed in chapter 6. This meant that when individual trajectories were discussed everyone was supportive. In this way the joint enterprise legitimated all gender identities, irrespective of presentation. As a result the joint enterprise was widely inclusive of young people who identified as trans or were questioning their gender identity.

Young people who expressed uncertainty about the next step in their transition, perhaps changing their name or coming out to parents, were encouraged to take the step. So the joint enterprise also encouraged movement away from one's gender as assigned at birth rather than back to previously held identities, as I discussed in chapter 8.

Shared repertoire

The shared repertoire was established in part through verbal interactions in 4D. Two aspects of the shared repertoire, language and knowledge, were both established verbally. The language was for social and medical processes such as 'birth name' and 'chest surgery'. The knowledge was knowledge of legal and medical processes, such as legal name changes, and choices of surgery. Other aspects of the shared repertoire were established through the use of silence rather than words. This is common to other communities of practice where members are developing 'new' identities. Lave and Wenger (1991) describe the

use of silence in an alcoholics anonymous group; Mason-Schrock (1996) describes the use of silence in a transgender support group. In both these cases silence was used to indicate that an individual's narrative did not fit the shared repertoire. In 4D, the most evident aspects of the shared repertoire that were developed through the use of silence were related to presentation, particularly clothing and haircuts. Presentation that did not conform to the shared repertoire was ignored.

The shared repertoire was less negotiable than the joint enterprise as it was developed in part through silence. It was also less inclusive: more approval was given to presentation that fitted the cross-binary trans male trajectory, which was required for central membership, as I have discussed in chapters 7 and 8. Although, as I have said in chapter 7, those assigned male at birth more easily acquired initial legitimacy as they did not need to conform to a cross-binary presentation at least initially.

Reifications

Reifications are even less open to negotiation than the shared repertoire. Reifications are established through repetition over a period of time; the meaning of an event or object becomes solidified as it is reified. Reifications are used as shorthand to communicate concepts, and the meanings of reified objects or events are rarely discussed or negotiated. They will not represent the negotiations of current practice, as they will only represent concepts that have become solidified through ongoing negotiation. It is therefore possible for reifications to be out-dated if the practice is changing. For these reasons reifications are double-edged. They enable ideas to be easily and quickly understood. But these ideas are established as more solid than they actually are, and they may in fact misrepresent what is happening.

Reifications will only be representative of the identities of central members and centre-bound trajectories (Wenger, 1998). Unlike the shared repertoire and the joint enterprise, reifications do not represent the diversity of the community at all. The reifications in 4D did not represent the full variety of discourses and trajectories within the community. They only represented the most central

concepts within the community and were thus exclusive of peripheral and marginal identities. The objects and events that were most reified were those that represented movements towards central membership. As I have discussed in chapter 8, this trajectory was a trans male trajectory from binary female to binary male. Events and objects that were significant to young trans women but not to young trans men were not reified in 4D. For example bras, used to show a conventionally female shaped chest (with breasts), were not reified, unlike binders used to present a conventionally male shaped chest (without breasts). Bras were not discussed in the main group, unlike binders which would be discussed by young trans men. It was of course possible that these objects were reified by the trans female members amongst themselves, but this was not the case in the wider group.

Reifications and gender trajectories in 4D

It is often objects as reifications that are discussed in relation to communities of practice. However, I will discuss events as well as objects that have been reified. The events and objects that were reified within 4D marked movement along a gender trajectory. Movement along a gender trajectory was the result of investment and a matter of pride for the young person as they progressed towards presenting in their preferred identity. As they moved along a gender trajectory their identity within 4D was increasingly legitimated and as a result they moved further towards central membership within 4D, which also enabled them to mobilise power more easily within the group. A young person's gender trajectory was therefore multiply important. Because of the high level of significance of gender trajectories within 4D, events and objects that showed movement along a gender trajectory became reified in the community.

Related to models of trans identity development (Devor, 2004; Lev, 2004; Pollock & Eyre, 2012) I see four phases in the traditional trajectory across the gender binary that were reified in 4D. Some or all of these phases also applied to those who were not following a traditional gender trajectory across the gender binary. These are: coming out to oneself; coming out to family and friends; successfully navigating the world in a new or ambiguous identity; and finally

undergoing medical interventions to support transition to one's preferred identity. These phases were not necessarily sequential, although coming out to oneself came before the other phases. Nor would everyone have all the four phases in their trajectory; for example some people would choose only to transition socially and would not have any medical interventions.

In this chapter I will discuss reified events that were associated with the first two phases of movement along a gender trajectory in 4D: coming out to oneself and coming out to close others. I will also consider an example of navigating the world in an ambiguous identity. In the next chapter I will consider reified objects. These were associated with the later phases of movement along a gender trajectory: navigating the world in an ambiguous identity, and moving to living in one's preferred identity. Some reified objects were also associated with reified events. For example, haircuts were reified within 4D, and the event of getting one's hair cut in a style appropriate to one's preferred gender was also reified. I will consider clothing, haircuts and medical interventions, all of which were reified objects with associated events, in the next chapter.

I will now consider the relationship between reifications, the joint enterprise and the shared repertoire: products of mutual engagement in a community of practice.

Identity gaps and gender trajectories

I will consider here Nuru's discussion of trans identities and 'idenity gaps' as they relate to gender trajectories. Nuru (2014) considers trans identities and transition using Hecht's Communication Theory of Identity (1993; 2005). In the Communication Theory of Identity, identity is understood as experienced personally as well as constructed in social and community interactions. Identity is understood to have four layers: personal, enacted, relational and communal. 'Personal' identity is the individual's internal sense of identity. 'Enacted' identity corresponds to the individual's performance of their identity, as well as their presentation or declaration of their identity. 'Relational' identity corresponds to the performative process of establishing your identity in relationships with others. Finally 'communal' identity corresponds to discourses of identity

developed within a group or community. Identities have different aspects that are continually constructed and reconstructed in relationship to each other, rather than as layers that are built on each other. The process of development or establishing identities is performative, so the constructed nature of identities and the relationships between the different aspects of identity are not visible, and become naturalised (Butler, 1990/1999, 1993, 2004). Nuru's interest in the dissonance between layers of identity, called 'identity gaps' in the Communication Theory of Identity, and strategies for overcoming these gaps is useful to consider in relation to identity trajectories in 4D. Nuru argues that the gaps between identity layers are sources of tension for individuals, which they seek to bridge. I relate the bridging of gaps to movements along an individual's gender trajectory. Most people seek to be understood by others in the identity they experience themselves to be. They therefore want a correspondence between how they feel, how they are seen, how they talk about themselves, how others see them, and finally how their identity is seen in the wider community. The changes that an individual makes to have their identity understood and recognised can be seen as movements along a gender trajectory as well as strategies to bridge identity gaps.

Nuru (2014) considers three gaps: personal-enacted, enacted-relational and personal-relational. The personal-enacted gap corresponds to a difference between an individual's 'personal' identity and their 'enacted' identity: that is they experience their identity in a different way from how they perform or present their identity. This could be a common gap for people who have not come out to others as trans or who are not presenting in their preferred identity. The enacted-relational gap corresponds to a difference between an individual's presentation and how others relate to them, perhaps when close others do not accepting a trans person's declared or presented identity. The personal-relational gap corresponds to a difference between an individual's preferred identity and how they are treated by others. This gap is likely to be experienced by people who are not out in the wider community, for example at school, so they are not treated appropriately for their preferred identity. An

individual's gender trajectory can be seen to correspond to bridging identity gaps.

The identity gaps identified by Nuru correspond to the events that were considered significant in 4D. Coming out at school, college, or work and managing oneself in public gendered spaces could be seen as bridging the personal-enacted gap and/or the personal-relational gap. Coming out to extended family could be seen as bridging the personal-enacted gap. All of these events were significant markers of a young person's gender trajectory. These fitted into two of the reified stages of a gender trajectory that I have identified: coming out to family and friends, and navigating the world in a 'new' or ambiguous identity.

The existence and management of gaps between different layers of identity are also interesting for other reasons. The existence and nature of the gaps shows something about the discourse of gender that is understood in the wider community. For example the personal-enacted gap exists because performance of gender, 'enacted' identity, is assumed to match experienced identity, the 'personal' layer of identity. When these layers do not match individuals experience a 'gap'. Managing the gaps will also contribute to the process of establishing different understandings of gender including trans. As individuals (and groups) have their preferred gender identity recognised by others, understandings of gender, gender discourse, will be changed in the wider community. This is a performative process. The discourse of gender is constantly being produced and reproduced through interactions between individuals and groups. It is co-created: an individual may seek to establish their identity but others in the community must accept that identity for it to be established. The process of changing discourses of identity takes place in the 'relational' and 'community' layers of identity.

The personal-relational gap and the personal-enacted gap are both reduced by coming out and changing names and pronouns. Coming out and changing names and pronouns work as verbal explanations of identity which reduce the personal-relational gap. They can also be understood as 'enactments' of identity,

which reduce or remove the personal-enacted identity gap. The personal-relational gap and the personal-enacted gap are also both influenced by changes to the physical presentation of the body, another form of enactment of identity. Changing physical presentation to conform to one's verbal presentation will help to reduce the personal-enacted and personal-relational gaps.

Gender trajectories in 4D and bridging identity gaps were closely related: at the same time as people moved towards their preferred gender identity they bridged identity gaps. Reifications, both events and objects, could be seen to bridge identity gaps as well as marking movement along a gender trajectory.

I will now consider rites of passage and their relationship to reified events within a community of practice.

Rites of passage

Rite of passage is now a well-developed term understood in anthropology as well as in wider society. The term rite of passage is a translation of 'rite de passage' a French term developed by the ethnographer van Gennep in his work *Les rites de passage* in 1909 (van Gennep, 1977). Van Gennep includes many life changes in his study. These include pregnancy, childbirth and marriage. Other studies have included events such as toilet training and first kiss. Rites of passage are reified events. They are events that have become established, and are understood to signify a change of status. They have a taken-for-granted meaning, a meaning which is no longer discussed or negotiated. Rites of passage mark a change of status in society. Perhaps the most commonly considered rite of passage is coming of age, or moving from the status of child to adult. Rites of passage are often associated with initiation ceremonies. In the Western world the rite of passage to becoming an adult does not have one social ritual or initiation ceremony. There are legal events that mark the change to adulthood, such as the right to change one's name, get married, have sexual intercourse, and refuse medical treatment. For some communities there are cultural or religious rituals to mark becoming an adult, such as bar and bat mitzvah in the Jewish religion. Van Gennep (1977) understood most rites of passage to include three stages: separation, liminality, and incorporation. Separation is the process

of moving away or cutting away from a previous identity by ritual or symbolic actions. The liminal phase is the phase of ambiguous identity, when the person is between old and new identities. Finally incorporation or aggregation is when someone is reunited into the group as a member with a new identity (Durel, 1993).

Like Bolin (1988), I will compare gender transition as a whole to a rite of passage. Bolin described her participants as 'male transsexuals becoming women' (1988, p. xi) though a 'rite of transition'. Bolin's ethnography was significant at that time, but Bolin did not consider her participants to be women until they had transitioned medically as well as socially. I consider the stages of the rite of passage to include different events from Bolin.

Significant individual events of gender transition can be seen to fit into the three stages of a rite of passage. In 4D, significant legal, social and medical events in the process of gender transition were reified as they signified movement along a chosen gender trajectory. In 4D the separation phase could be seen to include early events in a gender transition, such as coming out, changing clothing and haircut, as well as starting to attend 4D. These events showed the individual was moving away from their former identity. The liminal phase could include legal and medical changes as well as navigating work or school. Legal and medical changes should legitimate one's identity and make it less ambiguous. However, the process of making those changes indicates that an individual is in a liminal phase, moving between identities. 4D could be seen as a liminal space where people had transitional identities. Once people had finished their transition they would be in the final phase of incorporation. This transition could be social or include some medical interventions. This corresponds with the gender trajectory for most members of 4D. When participants had finished their transition they, generally, left 4D, and were incorporated back into groups in wider society. These events could be seen as rites of passage in an individual's gender trajectory. The events were reified as they were understood to mark movement along a gender trajectory. As rites of passage they were similarly reified. I argue that all rites of passage are necessarily reifications as they have taken-for-granted meanings marking identity changes.

Benefits and risks associated with transition as a rite of passage

Rites of passage involve an element of risk. Some rites of passage are associated with initiation ceremonies that are unpleasant or scary, such as hazing to become a fraternity or sorority member in a US university. In other rites of passage the participant is supported and prepared for the event. For example to pass through a religious ceremony a person must show publicly that they have learnt the appropriate ritual, this may include learning texts or leading a service. These will involve a risk even though the young person will be well prepared and supported. The element of risk taking, whether alleviated or exacerbated, is necessary to the benefits of passing through a rite of passage (Larson & Martin, 2012). In 4D, events in a gender trajectory involved risks as well as marking a change of identity.

Risk-taking strengthened the benefits in 4D of passing through the rites of passage that were reified events in the group. The reified events in 4D all showed movement along a gender trajectory and passing through them showed determination and commitment to establishing one's preferred identity despite the associated risks. This commitment despite adversity supported one's identity as 'authentic', as this commitment was seen to come from a deep-seated sense of oneself. 'Authenticity' is closely related to reification as it is a taken-for-granted quality.

Moving along one's gender trajectory towards one's preferred identity meant increasing recognition as one's preferred identity by others. However, directly in relation to this new recognition was the loss of recognition of one's previously held identity, and associated status in other communities, with risks of losing friends and relationships. Some reified events in 4D, such as legally or formally changing one's name, required negotiation with people and institutions. The risks associated with these events were possible denial of one's identity or humiliation at having one's request refused. A young person's success in navigating these situations demonstrated knowledge of their legal rights and skills in navigating the wider world. For members of 4D, surviving the risks was a source of pride as it showed both knowledge and commitment.

Their identity was further supported as authentic as the benefit of having their identity recognised outweighed the risks (Mulready, 2018).

Reifications are performative

Reifications can be seen as the products of a performative process. The process through which objects and events become reified, like the process of performatively establishing identities and discourses, is a process that becomes invisible. As identities and discourses become naturalised, their construction is no longer visible. In a similar way, reifications become 'solidified'; the meaning of a reified object is understood to be intrinsic to that object. The process of reification becomes invisible. Through this process the meaning of a reification becomes taken-for-granted.

The transsexual narrative and authentic identity

In 4D, the first stage of gender transition that was reified was the point of 'recognition' that one felt differently about one's gender, that one was not comfortable with one's assigned gender. To support that one is 'authentically' trans this 'recognition' had to be a discovery, or an uncovering of one's innate or long-standing gender. The modes of discovery had become reified; they did not require explanation of their meaning. They might even lose some of their meaning if they were discussed.

There was no necessity that one should have felt differently about one's gender as a small child in order to be legitimated in 4D. However this was still reified, as it is in the transsexual narrative (Mason-Schrock, 1996), see chapter 5. In the traditional version of the transsexual narrative, as seen in Mason-Schrock (1996), the individual is born with an identity different to the identity assigned to them at birth and their 'true' identity can be seen in early childhood behaviours. Early childhood cross-sex behaviours can thus be seen to show an individual's 'authentic' trans identity. This was also understood to be the case in 4D. In the traditional version of the transsexual narrative the concept of denial can be used to explain the absence of cross-sex behaviour in early childhood; it can also be used to explain the delay in self-recognition as trans. In 4D, people talked about denial, through alcohol use or depression, to explain a delay in

recognising themselves as trans. The traditional understanding of denial to explain sex-consistent, as opposed to cross-sex, behaviour was not used. Instead people understood their unreflected behaviour to show their identity. There was a suggestion that 'unconscious' or 'subconscious' processes revealed the individual's identity.

Many of the young people used the construction of the transsexual narrative and referred to early childhood behaviours, such as being a tomboy, as evidence of their 'authentic' trans identity. I suggested in chapter 5 that the reason for this is that these behaviours are understood to happen without reflection and therefore show the individual's 'true' identity. The young people use these narratives to explain their identity as 'authentic' both to themselves and to others. James talked about coming out to himself:

> James: I find it really hard to put a date to it, because obviously there's like stuff in my childhood, but when I actually ... I started questioning my gender November 2009.

and then to his parents:

> James: I gave them a letter, basically explained what gender identity disorder is and then explained how I'd been feeling. And I sort ... and I said in it, you know, I can give you loads of examples from my childhood and you could probably give me examples from my childhood, but that's irrelevant, because this is how I identify now. And they were like, oh, OK!

James said here and at another point in the interview that childhood behaviours are irrelevant, that current feelings are what matter. However his other comments show that his childhood behaviours were significant to him. The comment 'obviously there's like stuff in my childhood' does several things. The word 'obviously' indicates that James would expect all trans people to have a history of early childhood cross-gendered behaviour. It therefore constructs a correspondence between gender or trans identity and childhood behaviours. In this construction, cross-sex childhood behaviours give 'authenticity' to trans identity. The comment also constructed James as 'authentically' trans, as his cross-gendered childhood behaviour gives his trans identity 'authenticity'.

Finally, this construction could put into question others' identities if they did not have a history of childhood cross-gendered behaviour.

Rather than talking about early childhood behaviours, some young people referred to doing things without any awareness of the gender implications. This may be because they did not have a childhood history of cross-gendered behaviour and so wished to establish their identity as 'authentic' in another way. This was a variation on using cross-gendered behaviours in early childhood to establish 'authenticity' as trans. In the following quotes, Chrissy, Tyler, and Blake suggest that they have been 'driven' by their 'subconscious' to do things that are associated with a gender identity different from their identity as assigned at birth. The behaviour is significant because it is 'driven' by the 'subconscious', rather than because it happened in early childhood. In chapter 5 I discussed Chrissy's deliberate choice of a female setting on an electronic toy which she used to establish a conscious longstanding female identity. Here Chrissy refers to an unconscious behaviour: setting the Gameboy camera to female through not understanding the settings. This further authenticated her identity through the idea of the subconscious showing her 'true' identity:

> Chrissy: I mean, I remember, like, things like the Gameboy camera ... there were two gender symbols, I didn't know what each one was. I picked the female one, unknowing, but when I did find out it was female, I just left it like that.

Blake talked about changing his name before he realised he was trans:

> Blake: Changing my name? I, er ... it's weird actually because that's the first thing I done, before I even realised that I was trans, I changed my name first, and I wondered why ... like I really wanted to change my name, but I didn't know why, erm, and I mean I've never had a like of my birth name, but I've not really disliked it either; it's just been, you know, what you're called I suppose.

In chapter 7, I quoted Tyler who also talked about changing his name before coming out as trans. I repeat part of the quote as his comment suggests longstanding 'subconscious' processes at work:

> Tyler: I've struggled with my birth name always, so I shortened it
> so it was still the same but shorter. Myself, I did that in 2006.

All three young people used words to signify that their behaviour was not in their conscious control. Chrissy used the word 'unknowing', and then showed that she recognised or accepted her 'true' identity because she 'just left it like that'. Blake said it was 'weird actually' suggesting some 'internal' force that later became visible as his trans identity. Tyler's comment is the most complex. He said 'struggled' to suggest that the issue wasn't clear to him, that there was a subconscious process at work. The use of the word 'myself' also adds significance, as it shows that Tyler changed his name without the support of the trans community, that he was 'internally' driven rather than encouraged by others. He added further weight by the use of the word 'always' and the date; both establish that his trans identity was longstanding and therefore authentic.

The reifications that I have discussed here are events or behaviours that show that one has always felt differently about one's gender. These include early childhood behaviours, and unreflected or 'subconscious' behaviours. These have been reified as indicators of 'authentic' trans identity in line with an alternative version of the transsexual narrative. Their meaning is taken-for-granted, and is rarely discussed. This is the case even though their reified meaning contradicts the joint enterprise, which gives legitimacy to an individual's self-declared trans identity.

Naming oneself as trans

The next stage of gender transition that was reified in 4D was to name or come out to oneself as trans. For some young people, it was a significant event to discover there was a word to describe their feeling, or a name for a recognised identity. This gave them a word or a name to describe themselves. Lee, Brendan and Phoenix all gave significance to knowing a word or having a name for how they felt. This changed or influenced how they identified. Lee and Brendan indicated the significance of the moment when they found a word by giving an idea of the time when it happened, 2008 for Lee and Year 11 for Brendan. Lee's

use of the word 'label' is important. It indicates a change of identity for Lee. It also showed that Lee understood gender categories to be constructed.

> Lee*: (giving the year)* 2008. That's when I first found out about the word trans … and I put the label on me.

> Brendan: I didn't know what it was until year 11; OK 15, 16? But like that's when I like found the name for it … I googled, I feel like I should have a penis, and somewhere it came up on Google, and something FTM.

> Phoenix: the only way I could find out anything was through the internet. So I googled how I felt, I didn't know there was a name for it, and I didn't know anyone going through that. I think I googled boy in a girl's body or something like that, because that's the only way I knew how to describe it.

All three of these young people used the idea of ignorance, or not knowing, to explain a delay in self-identifying as trans. Again this is an alternative version of denial to that seen in the traditional trans narrative. The young people understood that 'not knowing' was a legitimate reason for not being able to name or label their 'true' identity. Brendan, Lee and Phoenix all referred to not knowing there was a name or word, which meant they were unable to name how they felt or identified. There were other ways of 'not knowing' as well as not having a word or name. Phoenix referred to this idea several times in one comment, and covered several aspects of not knowing. Phoenix suggested that knowledge about trans identities was not widely available, certainly to young people, when he said 'the only way I could find out anything'. Again 'that's the only way I knew how to describe it' showed the lack of language to talk about his feeling in addition to not being able to name it. Phoenix also said: 'I didn't know anyone going through it'. As well as having no vocabulary to name his feeling, the lack of knowledge included social knowledge: not knowing other people who shared the feeling.

For some young people the idea of 'unreflected' or 'subconscious' processes, related to the local construction of the trans narrative, were relevant to the process of naming themselves as trans. Several of them use the word 'epiphany' to describe coming out to themselves as trans. Since an epiphany is a moment of

revelation this suggests that the young person had been unaware of something that was significant for them. The suggestion was that a 'subconscious' process was at work culminating in a revelatory moment. Kieran and Lee both described an epiphany in their interviews. Kieran described how he became involved in a drama group that included trans young people; the play he was involved in also had some trans themes. This brought about a realisation that he also was trans:

> Kieran: ... well, the epiphany day kind of was we were in Bristol and we'd done three plays and three workshops and ... It's like so, you are trans, aren't you? *(slight laugh)* Yeah.

Lee also described its epiphany when it was trying to visualise what it would look like in the future.

> Lee: And, yeah, I sort of had an epiphany one day and that was like, oh, I can't see myself as like a cis woman in my future, and so I wondered what I might be in my future, and I drew a picture of myself, how I wanted to like look in the future. And like I kept on scribbling out my face and I covered it with hair because I wanted to look like really androgynous.

Lee's description of scribbling and drawing its face covered in hair additionally suggests an 'accidental' or 'subconsciously motivated' activity that proved revelatory.

The reification of these indicators of 'authenticity' is interesting. Indicators of innate or fixed gender identity were reified within 4D. Innate or fixed gender identity was understood to show 'authenticity', and was demonstrated by subconscious or early childhood behaviours. This was in contradiction to the joint enterprise which included legitimating young people's identities on the basis of their self-identification, which might not be fixed or longstanding.

The reification of indicators of an innate gender identity demonstrates two versions of the discourse of trans identity within the youth group. Both versions had validity. Self-identification as trans was legitimate within 4D, through the joint enterprise, and was legitimated by other youth group members. However, as demonstrated in chapter 8, this was not sufficient to enable a community member to become a central member. The 'authenticity' of identity that fits with

the transsexual narrative also had currency within 4D and gave young people further legitimacy enabling movement towards more central membership in the community.

It is possible that the reification of 'true' gender as innate was an older version of the gender discourse within 4D. It is in any case the discourse that is established within the wider community. The discourse of gender as self-declared, established in the joint enterprise, had validity within 4D but was not, yet, reified, as it had not, yet, become taken for granted in 4D. James's juxtaposition of his childhood feelings with his current feelings suggests that he understood gender not to require longstanding feelings, but that this discourse had not yet superseded the older discourse of the trans narrative and become taken-for-granted.

There is little public risk associated with identifying to oneself as trans. It is at the point that one comes out to others that there is a significant level of risk attached to identifying as trans. I will now discuss coming out to close others.

Coming out to close others

For members of 4D, after coming out to themselves, the next stage in their trans identity journey was usually to come out to someone else. Coming out to others was a reified event, and could be seen as a rite of passage for the young people. Coming out to others as trans is very significant for several reasons. It bridges the gap between internal and described identity, which was a source of pleasure for the youth group participants, as for many other trans people, even before changing presentation to match one's identity (Riggle et al., 2011). Coming out also marks a significant step in an individual's gender journey as they can be seen to be making a commitment to moving along a gender trajectory towards establishing a trans or gender identity. Like many other reified events it also involves risks which I discuss below. The idea of coming out to others is clearly reified in the following quotes. Blake sees the moment of coming out to others as a significant point in time:

> Blake: And I think I'm a year out as trans ... ish, nearly a year. But I
> think for the previous six months before that, I guess I was

coming out and very, very, very unconsciously to myself, just in certain behaviours and stuff.

Blake indicates how long it is since he came out 'I'm a year out as trans'. The suggestion is that there is a progression along a trajectory. Blake also uses the idea of 'unconscious' behaviours to show longer-standing cross-gendered behaviour, with its association of 'authenticity'. When I ask Kieran about his degree and what he wanted to do in the future he referred to coming out. He also saw coming out as a significant event, affecting how he saw his future. He said that before he came out he didn't have much self-confidence, there was an implication that coming out as trans would make one more self-confident.

> Kieran: I'm not doing much at the moment, just kind of finishing, trying to finish my degree and trying to get a job, but since coming out and transitioning, what I want to do as a career, whereas I had some idea before, I now don't really have an idea of what I want to do, because before I was sort of very carer, care-worker orientated, and I didn't really have a lot of self-esteem or self-confidence so I didn't think that I could do much else.

Masculinity is associated with confidence and assertiveness (Jackson, 2006), but Kieran, Nathan, and Tyler all relate their growing self-confidence to moving towards their preferred identities. Nathan talked separately about both himself and Tyler becoming more confident after coming out as trans:

> Nathan: Mentally my confidence rocketed, I've become more confident, I'm more happy with myself.

And about Tyler:

> Nathan: He's the same person but confidence wise, he's completely different. Like, he's going out, he's being himself, he's...

The inclusion of 'he's the same person' reinforces Tyler's trans identity as long-standing.

Risk of coming out to others

Coming out as trans to one's family will change family relationships, as coming out changes the relationships trans adults have with their significant others (Platt & Bolland, 2017). For young people the relationships with parents and

siblings is likely to be more important than partner relationships as many young people will not have long term partner relationships established. Coming out to parents and siblings both have risks, but I talk here about relationships with parents.

The risk of coming out to intimate others: partner, family, or close friends is the risk of being rejected by them. This is a real risk for some young people, as for trans adults (Platt & Bolland, 2017; Twist, Barker, Nel, & Horley, 2017). The biggest risks for a young person in coming out to a parent would generally be that their parent would reject them, or would refuse to recognise them in their preferred identity. The concern about rejection was a real one for some young people. Some of the young people who came to 4D had been made homeless, or had felt unable to continue living with their parents.

Young people were also concerned that their parent would not support their preferred identity. Parents could often be concerned that their child was moving towards an identity that was a negatively perceived, with risks of social exclusion or even violence. Parents might see medical transition as physically risky, and want their children to avoid making irreversible decisions that they might later regret about changing their bodies through hormones and surgery. Almost all parents understood transitioning as an emotionally difficult process that might require renegotiating one's relationships with family and friends, with potential for loss and difficulty. Parents had varying relationships to their children's identities. Some desired their children to make considered decisions to avoid regret. This could be frustrating for young people who were clear about their identity. Other parents wished their child would make a binary transition as soon as possible to avoid having an uncertain identity and move on in their preferred identity. This could be difficult for young people who did not identify across the binary, or did not wish to follow a traditional transition (Halberstam, 2018; Richards et al., 2017).

The young people could also be concerned about coming out to partners and other relatives or friends. The following quote is from Tyler's interview describing his feelings about coming out to his partner Nathan. Tyler and

Nathan became involved as lesbians. Nathan transitioned to male while Tyler still identified to others as female, so they were in a relationship that could be understood as heterosexual. Tyler then decided to come out to Nathan as trans.

> Tyler: Yeah, I was very, very scared actually, because I was concerned that Nathan was looking for a very heterosexual relationship as a result of transitioning, you know, having the normal part of your life from, coming from something that's traditionally not normal, you know? And I was just freaking out a little bit which is why I'd not said anything before because I'd experienced a huge amount of rejection after coming out or attempting to come out to my foster parents when I was younger, and I was just absolutely terrified of losing the one person in my life that meant everything.

Tyler was quite clear about his fear of rejection by the person he saw as closest to him. Mattius suffered some rejection after coming out to his mother, and felt unable to continue living at home. He feared rejection by other family members. He said that he had not come out extended family in Europe:

> Mattius: So I haven't come out to them yet, because I'm just really scared that they're not going to want to *(slight laugh)* still, you know, be in contact.

Brendan, below, also described being afraid of coming out as trans. Brendan transitioned from assigned female to male after a long period of feeling that he was trans but not telling anyone how he felt. He finally came out to his parents after a serious emotional crisis when he felt that his life as female was unliveable. Brendan said he was afraid of not being understood:

> Brendan: I don't know, I didn't think people would understand it. It seems to me if you come out as gay or lesbian people will at least know what it is. If you come out as a trans you have to tell them, and then you have to explain it to them, that's all pretty scary.

Brendan said that he would have to tell people he was trans and then have to explain it. The suggestion was that most people would not know what it meant to be trans, at which point he would have to explain what trans means. This fits with a rite of passage such as a bar or bat mitzvah where one has to

demonstrate one's knowledge, and there is a risk that one doesn't do this sufficiently well. The reason that this is perceived as a risk is the potential for not having one's new or changed identity recognised. Brendan described being scared of explaining what trans means. However, Brendan's unspoken fear was undoubtedly that he would not be accepted as trans or male.

Negotiating the wider world

There are many other events that are reified after coming out as trans. These include changing one's name and pronoun, which are perhaps the most definite social indicators of a change of gender identity. These are commonly reified in the wider trans community, and have vocabulary specific to the trans and queer communities associated with them. I have discussed in chapter 7 the use in 4D of the expression 'birth name' and the use of 'pronoun' as a verb. Here Tyler uses the expression 'name change', like 'birth name' and 'pronoun' this has a taken-for-granted meaning. The significance of the taken-for-granted language shows that changing one's name and pronoun have been reified (Tusting, 2005). These are rites of passage on a gender trajectory, and signify moving towards one's preferred identity and leaving one's 'old' identity behind.

Several people talked about the significance of their new name as representing their identity. Tyler and Nathan's comments show the taken-for-granted significance of changing one's name.

> Nathan: See, you've not come out to any of my family at the minute, but my aunty's added ...
>
> Tyler: Your aunty knows!
>
> Nathan: She's added him to Facebook. The day we got engaged, she added him to Facebook.
>
> Tyler: Because my name change is on there anyway.
>
> Nathan: And she likes everything.
>
> Tyler: She liked the picture of my name change! *(slight laugh)*
>
> Nathan: Yeah.

'Name change' has a taken-for-granted meaning. Nathan and Tyler were both clear that Tyler's name change signified that he was now identifying as male, and that I would understand this. In fact they also believed that Nathan's aunt would understand that Tyler identified as male. It is evident from this discussion that changing one's name was reified: it held meaning beyond having a new name, it meant that one identified as other than one's gender as assigned at birth.

Nathan tried several names before he involved his friends in choosing his new name:

> Nathan: I tried Max because when I first came out, I wanted a male name and then I'd been watching, lo and behold, the bloody L Word. And the trans character in it's called Max. I liked it but wasn't really me to be truthful! ... I sat down with a couple of friends in a bar one night and I said, "What name shall I pick?" and they kept looking at me and trying names. And then they went "Nathan! Nathan suits you!" and my two friends both agreed that Nathan suited me.

For Nathan it was important that his name was seen to represent his identity. He said the name Max wasn't really him: he felt the name didn't represent his identity. It was important that his two friends felt his final choice of Nathan 'suited' him, that it represented his identity as they saw him.

Legally changing one's name was also reified in 4D. Legally changing one's name showed that one had certainty about one's preferred identity. Like other trans people (Nuru, 2014) Aidan felt that changing his name legally would mean that he could ask that people in the wider community call him by his preferred name:

> Aidan: I like when people call me Aidan. I love when people call me Aidan.
>
> AM: How does that make you feel?
>
> Aidan: Happier...I been trying to get my name changed by deed poll, like Aidan Jonathan Baker so I'll ask people call me Aidan and I'll be more happy.

Aidan was clear about his preferred name, and enjoyed being called by it. However it was also significant for him that if he changed it legally he would be entitled to ask people to call him Aidan. Finally Brendan talked about the process for him of changing his name legally:

> Brendan: I did a deed poll with a lawyer.
>
> AM: And did you say to your parents, 'This is what I'm going to do' or ...
>
> Brendan: Yes. They paid for it! <chuckles> It's so expensive, ridiculous! They paid for it, yeah...
>
> AM: Yes, and did you go with your parents to that?
>
> Brendan: Yes.

Brendan's name change was a legal rite of passage. He had a new name legally as well as socially. In Brendan's case his parents enabled this rite of passage by paying for it, indicating their acceptance of his identity. Brendan's parents came with him to the solicitor to witness his name change. He also showed the significance to him and his parents when he talked about the cost: 'It's so expensive ... they paid for it'. The taken-for-granted meaning shows the reified nature of changing one's name in 4D.

Social transition in the wider world

Most people want their identity to be to be recognised by others in the world, not just family and friends. Many of the young people in 4D, as in wider trans communities, chose to transition socially, that is they chose to present themselves in the wider community as their preferred identity. This could be how they described themselves, or how they presented themselves or both. I will discuss changing one's physical presentation and passing as ways to navigate the wider world in more detail in the next chapter, and the reifications associated with this in the next chapter. Here I discuss reifications associated with navigating and gaining recognition in the outside world in other ways, without passing.

Navigating gendered spaces is highly significant to many trans people, including 4D members. These include public toilets, changing rooms and hairdressers. If people pass, that is they are consistently read as their preferred gender, then, in addition to being correctly recognised, using public toilets and changing rooms is less problematic, as is having one's hair cut.

Navigating toilets is very significant in the trans community, as well as for people who do not gender conform. It is a situation where one has to choose a binary gendered space and one is seen by others to have made that choice. It is also associated with often well-founded fears of harassment or even violence if one is perceived to be in the wrong space (Bender-Baird, 2016; Browne, 2004; Halberstam, 1998). This can still be the case in LGB venues as well as in the wider community where toilet use is based on perceived binary gender (P. L. Doan, 2010). Navigating gendered toilets was a reified event in 4D. It was a source of pleasure for many of the young people to have passed (or accepted in their preferred gender) when using the toilet appropriate for their preferred gender. For other young people the significance of successfully using their preferred toilet was that they had demonstrated they had sufficient knowledge to navigate the world as a visibly trans person.

I have examined a discussion in 4D about using public toilets in chapter 7. This concerned strategies for using gendered toilets, and justifications for using accessible toilets as a trans person. The taken-for-granted meaning for most people if they have not been challenged using public toilets is that they have successfully 'passed'. The discussion of using the accessible toilets showed another reified meaning of using public toilets: it was a demonstration of knowledge of how to navigate the gendered world as a trans person. The following quotes show further the significance of navigating public toilets.

Reese contributed a lot in the group discussion about toilet use. He felt that his identity as trans should have been recognised in GAY, a large well-known gay club. He was partially successful in navigating this space as he was allowed to go in to the toilets, but he needed to be accompanied by his friend, who passed as male.

Reese talked a lot about toilets. He had been to GAY with Nathan (and perhaps others) and had been refused to go in the men's toilet. He was very vociferous about 'what was the guy's problem, after all, you're just going in to piss'. Then that he'd been allowed to go in the toilet but only if Nathan came too. (Fieldnote October 2010)

Reese negotiated access to the men's toilets, although it was conditional. He was partly proud of his success. Reese's story shows that navigating public toilets was not only reified because one had 'passed'; it might also be reified because one had negotiated access as a trans person. In Reese's case he showed that he had the knowledge to navigate the world as a visibly trans person. In his interview Blake talked about navigating toilets as someone with an ambiguous identity. Blake described using the toilets during a university exam:

Blake: I needed to use the bathroom in the exam, so the woman looked really confused and then eventually she just sent me with the man that was bringing the other guy, who I know but I'm not out to, and I thought, OK, I'm just going to use the accessible ones anyway, because on that floor there were three and they were right next to each other. So, the boy went into the bathroom and I just waited and said, OK, I need to use the accessible ones. And he just pointed to the female. I was like, "I'm not female." You see, I'm very careful, I don't say, "I'm male." I just say, "I'm not female."

Blake pointed out that he had a strategy for negotiating his ambiguous identity, by saying "I'm very careful, I don't say I'm male".

Reese and Blake were navigating the world in liminal or ambiguous gender identities. They were seeking to use their preferred toilets, often very problematic for people with ambiguous gender presentation. They both described situations where a person in authority wanted to prevent them using their toilets of choice. For Reese these were the men's toilets and for Blake they were the 'accessible' toilets. Neither were seeking to be recognised in a cross-binary identity, instead they both want to be recognised in their liminal identity and allowed to access the toilet space accordingly. They both had strategies: Reese's was one of persistence, while Blake established himself as 'not female'.

Conclusion

Gender transition can be seen as an overarching rite of passage that is made up of smaller rites of passage. These smaller rites of passage are events that have been reified within 4D. The process of reification is a performative process. The events that have been reified in 4D have developed 'taken-for-granted' meanings; the reified events signify movement along an individual's gender trajectory. I have discussed coming out to oneself, coming out to others, and navigating the world in a liminal identity.

The joint enterprise and reifications are products of the practice of the community. However the joint enterprise is continually open to negotiation as community members work towards a shared aim. Reifications are rarely discussed and as such are taken-for-granted. Within 4D, there are contradictions between the joint enterprise and the reification of coming out as trans. The mode of coming out as trans conforms to a traditional trans narrative with references to innate gender. On the other hand, the joint enterprise legitimates identities as declared. I suggest that this contradiction indicates a changing discourse around identity, with gender as self-declared not, yet, naturalised in 4D.

In the next chapter I will look at reified objects and reifications associated with the body.

10   Reified objects: changing bodies

In the last chapter, I discussed events that were reified in 4D. The events that were reified are those that marked movement along a gender trajectory. These events could also be seen as individual rites of passage as they marked stages of transition in the overarching rite of passage of gender transition. The process of transition for trans people can usefully be considered a rite of passage consisting of a series of events that are individual rites of passage. The gender trajectory for an individual is the liminal phase in the overarching rite of passage that is transition (Dentice & Dietert, 2015; Thomassen, 2009; M. Wilson, 2002). Although Thomassen (2009) considers transgender people to remain liminal as they are on the edge of normal social structures, I consider that many trans people are incorporated into wider social groups. If gender transition is considered the overarching rite of passage in 4D, the final stage of 'incorporation' was when a young person moved back into wider society in their preferred identity (van Gennep, 1977). Although the term incorporation refers to moving back into the social body, many trans people are also incorporated into their own transformed body.

The reified objects that I look at in this chapter are transformations to the presentation of the body and the body itself. Like the reified events that I considered in the last chapter, these 'objects' were reified because they marked movement through rites of passage in a gender trajectory.

The reified events that I discussed in the last chapter were mostly associated with the first two phases of movement along a gender trajectory: coming out to oneself and coming out to close others. In this chapter I consider reified objects; these reifications are associated with the last phases of movement along a gender trajectory: navigating the world in an ambiguous identity, and moving to establish a preferred identity and navigating the world in that identity.

Reifications used to establish authentic identity

The reified events that I discussed in the previous chapter related mostly to establishing one's identity as 'authentic' to others, which required establishing

that one's identity is 'authentic' to oneself. These events were generally verbal declarations and negotiations of identity. The objects that I discuss in this chapter also marked identities as 'authentic' and were therefore reified.

I use the term 'objects' to include things that are physically manifested, such as haircuts. The objects that were reified in 4D all related to the presentation or modification of bodies. Identities are formed in relationships between people, and recognition by others of an individual's identity will be significant, as it will reinforce that individual's sense of their own identity. Conversely, if someone's identity is not recognised it may put their sense of identity into question. In 4D, changes to the body or presentation of the body helped to bridge several of the 'identity gaps' described by Nuru (2014). They helped to manage the 'personal-enacted gap' (between personal identity and presentation) as young people presented their bodies in greater alignment with their preferred identity. Changes to the body also helped to manage the 'personal-relational gap' (between personal identity and how they are treated by others) as people may pass, or be otherwise recognised from their physical presentation as their preferred identity. People's non-binary or changing identities might be recognised through their non-traditional gender presentation.

The reified objects that I consider range from haircuts and clothing, through binders and packers, which change the appearance of the body, to medical interventions which change the physical body. The aspects of bodies and body presentation that were reified in 4D all related to the young people's gender identity. These reified objects signified 'authenticity'. Many of these objects were associated with reified events. A reified event could hold more significance than the associated reified object as it marked a rite of passage showing movement along a gender trajectory (see chapter 9). For example, an appropriately gendered haircut was reified within wider society as well as in 4D as it represented one's gender identity. However, for some people the event of having their first haircut appropriate to their preferred gender carried greater significance as it marked a change in gender presentation and therefore movement along their gender trajectory.

Changes in appearance indicated movement along a gender trajectory for an individual and marked stages in a gender journey. Changing one's clothes in the youth group space to those of one's preferred gender showed the individual's commitment, of time and money, to being seen in their preferred identity at 4D. Changing one's haircut is more public, and was therefore a greater indicator of 'authentic' identity as there was a commitment to being seen in a different or changing identity to family and friends and in the wider community, and a commitment to managing the risks associated with having an ambiguous or changing gender presentation.

The events that I have discussed in chapter 9, that were reified within 4D, were events that were common to trans male as well as trans female trajectories. However many of the objects, and associated events, that I discuss in this chapter indicated movement along a traditional gender trajectory for young trans men. Their reification within 4D was shown by their naming (Tusting, 2005): 'binders', 'T' and 'chest surgery'. There was no equivalent naming within 4D for trans female identified objects such as breast-forms. It is worth considering the reasons for this. It is likely that the local language reflected the majority identity, as I have discussed in chapter 7, so this may simply have been a reflection of the identities that were in the majority in 4D. From personal conversation in 2018, the gender balance in 4D corresponded to the gender balance of referrals to GIDS so this also reflected trans young people's identities more broadly. However, it is possible that because of the patriarchal dividend trans male identified objects were reified in the group, as trajectories towards male identities were more valued than trajectories towards female identities. Perhaps the status of women in society was replicated in 4D and the young trans women could not be central participants in the community.

The body is already a reified object

The body in wider society is already a reified object in that it refers to gender (Paechter, 2003). The absence or presence of a penis at birth, with some further complication for those bodies understood as intersex, will determine which of the two binary sexes babies are assigned to. Most people will then be treated as

male or female and come to understand themselves as 'naturally' male or female in a performative process (Butler, 1990/1999, 1993, 2004). The body is reified in 4D, as well as in wider communities. The body is 'taken-for-granted' as representing an individual's gender identity; the body also gives legitimacy in gendered communities of practice. Changes to the presentation of the body as well as to the physical body were also reified in 4D. They represented authenticity in one's preferred identity; they also represented movement towards legitimacy in one's preferred gender community.

The body and 'authentic' identity

As I have discussed in chapter 2, gender is performatively constructed as binary, based on binary sexed bodies. This construction has become 'taken-for-granted', naturalised and invisible (Butler, 1990/1999, 1993, 2004). The alignment of gender performance, identity, and sex has become naturalised and invisible; it determines how people understand their own as well as others' gendered behaviour and gender identities in relation to their performance of gender and their sexed bodies. People are expected to have a gender identity that is aligned to their sexed body. The performative construction of gender means that most, or many, people will indeed have an alignment of gender identity and performance with their sexed body (Steensma et al., 2013). The performativity of sex and gender works in the other direction too. People will assume that binary gendered appearance and behaviour aligns with a binary sexed body, and therefore assume an individual's sex from their appearance. As a result many people experience sexed bodies, their own and others', to represent gender identity.

Most people want their gender to be recognised and accepted as 'authentic'. One's body is seen to represent one's gender identity, this includes masculinity and femininity, as well as maleness and femaleness. There are stereotypes attached to bodies, these are reifications or taken-for-granted meanings. A tall muscular man may be seen as more 'masculine' than a smaller man, not necessarily correctly. Penis size and breast size also have reified meanings. People choose clothes and presentation to change the appearance of their bodies to represent their identity. People also seek to change their bodies,

through diet, exercise, and possibly surgery, to represent how they feel about their identity. The experience of one's body misrepresenting one's identity may be acutely experienced by people who do not identify with their gender as assigned at birth. Gender presentation and the body are already reified within wider gender communities as well as 4D. Changes to presentation and the body were further reified within 4D as they enabled recognition of preferred gender identity.

The understanding of the relationship between gender identity and sexed bodies is complicated and contradictory. There has been an unlinking of sex and gender, seen in the medical construction of trans identities and in the trans narrative through the 'wrong body' construction. It was accepted within the joint enterprise of 4D, as in wider trans and queer communities, that gender identity is the gender experienced by the individual, and is not based on the physical sexed body. However, 'authentic' identity is an embodied experience, and many people, cis and trans, including members of 4D, desire a body that reflects their preferred gender, in order to feel fully 'authentic' (Ekins & King, 2006), rather than seeking an unlinking of the sexed body from identity altogether.

Many trans people would describe their body as misaligned with their gender (Beemyn & Rankin, 2011). Other trans people would prefer or feel more comfortable in a different body (Chu, 2017). Yet others do not seek to change their bodies through medical interventions but are satisfied with living in their preferred identity and changing their gender presentation (Bouman et al., 2016). However in all these cases the body itself, its presentation or both, is important for people to feel satisfied with their social identities and to alleviate any feelings of gender incongruence or body dysphoria. For these reasons, many trans people, including the young people in my study, seek congruence between their identity and their presentation. Physical changes to the body are highly significant to many trans people, and were reified in 4D.

Legitimacy in gendered communities of practice

Once a baby is assigned as either male or female at birth, they will be legitimately male or female with all the gendered expectations and requirements that are related to their assigned sex. They will be members of a gendered community of practice. The requirement for participation in the broad community of practice of men and boys is that one has a male body; similarly participation in the community of practice of women and girls requires a female body. People will also be members of narrower gendered communities of practice such as a community of practice of primary school boys. These also require that members have the correct bodily configuration (Paechter, 2003, 2007).

Legitimacy and the sexed body

The body is the original 'authentic' object required for legitimate membership of a gendered community of practice. Although legitimacy in these communities is based on having the correct body, in fact, since people's genitals are not generally visible, other indicators are generally used to determine legitimacy. In social situations, because of the assumed alignment of binary sex and gender, one is considered to be a legitimate member of a gendered community of practice on the basis of one's gender presentation, which is assumed to correspond to the configuration of one's genitals. Although in much of everyday life genitals are not visible, there are situations where they may be, for example it is possible that one's genitals or chest, with or without breasts, may be seen in a sports club. The correct body is required to be accepted as legitimate in sex-segregated spaces, such as changing rooms, as well as heterosexual sexual encounters, with possible negative repercussions if one is seen not to be legitimate (Schilt & Westbrook, 2009; Westbrook & Schilt, 2014).

Legitimacy needs to be constantly reaffirmed

Legitimacy in a gendered community of practice, as in all communities of practice, needs to be constantly reaffirmed; this requires members to present themselves according to expected norms for the community, including their reified body. Someone who does not conform to gendered expectations, or

whose body does not conform to the physical norms for that sex will lose legitimacy. Members of a community of practice who lose legitimacy may no longer be accepted as members of the community, or they may become marginal members. For example, in a community of practice of primary school boys, nail varnish may be a reified object associated within femininity, and a boy who wears nail varnish may lose legitimacy if it is not accepted within the gender norms for that group. Consequences may be exclusion from the group of boys, or teasing or bullying. (Grossman & D'Augelli, 2006; Singh et al., 2013)

Loss of legitimacy

The consequences of loss or lack of legitimation in a community of practice may be marginalisation or ejection from the community. Loss of legitimation in a gendered community of practice can have very serious consequences beyond marginalisation. These include teasing, humiliation, and violence. The loss of legitimation in a gendered community of practice is usually because one's gendered performance is seen not to conform to norms in the community (Schilt & Westbrook, 2009; Westbrook & Schilt, 2014). Trans people may choose to present or perform within gender norms as they are at risk if their gender presentation or performance is seen not to conform (Roen, 2002).

Legitimacy may also be at risk if one's sexed body is seen not conform. This could be due to the shape of the body under clothes, perhaps suggesting breasts or a penis where there should be none. If one's genitals become visible they may be seen not conform to normative expectations for one's presented sex. The risks for trans people who fail to pass are different for men and women, and in mixed-sex and sex-segregated spaces. The risks and the consequences of loss of legitimation may be more extreme if one's body rather than one's presentation is seen not to conform. (Schilt & Westbrook, 2009; Westbrook & Schilt, 2014). The physical body and its presentation are reified both in wider communities and in 4D as they give legitimacy in gendered communities, with possible repercussions if it is lost.

Recognition of identity

Trans people on a gender trajectory are seeking to have their gender or trans identity recognised. The events of coming out and establishing one's trans identity as 'authentic', first to oneself and then to close others, are early stages in gender transition. Following this people want to have their gender identity recognised by others in the wider community. One's sense of identity is bound tightly to feelings of authenticity. The body is significant to having one's identity recognised and seen as authentic as it is the original authentic sexed object, and is therefore reified.

The current discourse of 'authentic' gender is built on the physical sexed body, which is likely to be assumed from gender presentation and performance. For a trans person to gain or maintain legitimacy in a gendered community of practice in the wider community their gender presentation and performance must overwrite any presentation of the body and performance of gender associated with their originally assigned sex. Gender attribution by strangers and less close others is usually based on physical presentation including clothing, haircuts and use of the body. As a result changing one's bodily presentation to 'pass' will be the most straightforward way to have one's identity recognised in the outside world, but will require legal knowledge and skills to navigate the world.

It has been established as legitimate, through the transsexual narrative and the medical discourse, for people who identify other than as assigned at birth to claim a gender identity other than that associated with their sexed body. However this is an alternative discourse rather than the mainstream discourse associating gender identity with one's sex as assigned at birth. To establish one's preferred gender through this alternative discourse, even if one's presentation aligns with one's preferred identity, requires persistence and a demonstration of knowledge, as one has to explain one's changed identity to some people, for example employers and banks. Establishing authenticity if one's presentation is ambiguous or does not conform to gender norms is further complicated. This will require legal knowledge of trans rights, for example to use toilets and changing facilities. As a result, a trans person may prefer to present within gender norms because they want their identity accepted as

authentic. Establishing authenticity as a non-binary person is even more complicated, there are no gender norms for non-binary people, and non-binary people do not have a way of physically 'passing'. To establish any level of authenticity one will have to explain that one's identity is fluid, or non-binary and have that unconventional gender identity accepted.

Recognition of one's identity by close others works differently. Close others, following a 'natural' understanding of gender (Ekins & King, 2006), are likely to continue to understand a trans person's identity as that assigned at birth even if they change their presentation. A change of appearance that is congruent to their preferred identity is likely make it easier to accept an individual's identity, but family and friends are more likely to recognise someone's identity if they change names and pronouns as well as how they present (Nuru, 2014). Changing presentation will also be interpreted as a commitment to changing identity, especially if it is sustained. Changes to gender presentation support recognition of gender identity by close as well as less close others, as well as being a source of pleasure or comfort for the individual. For these reasons changes to presentation were reified in 4D.

All the young people in my study 'came out' as trans, including non-binary identities, and moved along their gender trajectory with a social transition. However, given naturalised assumptions about sexed bodies and gender, they also considered their presentation and their physical bodies as important to their transition. As a result, almost all of the young people who attended 4D were seen to make, or had made, changes to their appearance. Most discussed the physical changes they desired for their body.

The sequence of coming out and changing presentation was not the same for everyone. Some of the young people told parents and friends before making changes to their appearance or body. Others made some changes to their appearance before coming out. Physical changes are often very important to trans people as they enable recognition of their preferred identity. However, all of the young people at 4D told close others about their identity rather than simply changing their presentation as a way to indicate their preferred identity.

This may have been necessary as close others will continue to attribute sex assigned at birth even if there is a change in presentation (Ekins & King, 2006; Nuru, 2014).

Recognition: passing or not passing

The youth group members had different relationships to passing. Some of the young people passed all the time in their preferred identity. The young trans men often passed as younger boys rather than as young men of the same age, if they were not (yet) on masculinising hormones. Some group members would pass successfully in their preferred identity some of the time. Others felt their current presentation meant they were unlikely to pass and desired to pass in the future. Others did not seek to pass: some did not identify as the 'other' binary gender; others they were happy to be, or desired to be, visibly trans. For those who had non-binary or fluid identities, or were early in their desired physical transition, recognition was more complicated. Some of these young people enjoyed being recognised as trans rather than their gender as assigned at birth, as this was a recognition of their preferred identity.

Body presentation was important to all 4D members, and most did change their gender presentation. An ongoing change to presentation was a desired outcome in terms of moving along a gender trajectory for all the young people, whether this was towards a cross-binary, fluid, or non-binary identity. It also enabled recognition by others of their preferred gender. The underlying physical body supports how one presents one's body, as a result many young people considered changing their bodies through medical interventions. Both changes to bodily presentation and to physical bodies were reified as they represented movements along gender trajectories in 4D.

Some young people on a cross-binary trajectory as well as desiring to pass also desired to be recognised only as their preferred gender; they did not want to recognised as trans. Of these, some wanted to be stealth, that is they intended not to disclose their previous gender or trans history in the future. Others chose to reveal their trans history to show their achievement in being seen as their preferred gender. They took pride in the changes to their appearance and

physical bodies; this was often linked to their ability to pass. Like other trans people, many of the young people took pleasure for themselves in their changed and changing bodies as they went through medical transitions. This was in addition to the pleasure gained from having their gender identity recognised, or the pleasure from having a physical body that aligned with their gender.

Visibly trans and passing

Some of the young people were pleased to be recognised as trans if there was also a recognition of their preferred identity. In my fieldnotes Haley, a young trans woman who did not always get read as female, recounted an incident when she had been recognised as trans. It was acknowledged that she would want to use the women's toilets in a public place because it was clear that she identified as female:

> Haley talked about incident where someone had recognised that she would want to use the women's toilet "look at how she is". (Fieldnote May 2009)

Haley was pleased about this incident. Haley had not successfully 'passed', but her identity as female, even if trans, had been recognised by strangers in a public place.

People were often pleased when they 'passed' for the first time, and the changes to presentation that supported this were reified. As I discussed in chapter 5, Nathan was advised online to try presenting as male for a day as a test to understand whether he was trans. Nathan described passing for the first time:

> AM: So that day that you went out and presented as male ...
>
> Nathan: I got, worst thing ever, I bought duct tape and I bound my chest down and when I was taking it off, I was just like ... *(gasp!)* But I went into a card shop and, to buy a birthday card, and the woman behind the desk said to a lass that was stacking the shelf, she went "Can you help this gentleman find a card?" and I was just like broad beaming. The lass stood up, she looked me straight in the eye, I went to school with her and she was like ... *(whispers)* you're joking! *(laughter)* So, you could see her eyes and her face going, but you are that lass I went to school with! *(slight laugh)*

But you know, she got on with it, she got me the card I was looking for and I left the shop happy as Larry like, I just passed, yay!!

…

AM: So you went out, you presented as a guy. You had your moment of, erm …

Nathan: Passing.

AM: … of passing and, yeah, it sounds like that felt great.

Nathan: Yeah.

AM: What did that feel like?

Nathan: I don't know. It was sort of a cross between, wow, I can actually do it! And sort of, where do I go from here, sort of. Because I was like, it's amazing that I'm passing, but at the same time I'm like, but what do I do now?

Nathan's story has several important elements. He was proud that he had successfully passed, and saw this a confirmation of his trans identity. It is uncertain whether he successfully passed for the young woman he had been to school with as well for the woman behind the counter. Perhaps he did pass, but she was puzzled about his resemblance to a girl from school. It is also possible that Nathan was recognised, but that the young woman accepted him in his male persona. In either case Nathan demonstrated his knowledge and skills as he had successfully navigated the outside world in his preferred gender. Nathan clearly felt the risk associated with not passing, and pride in having passed successfully. He was also proud of enduring the pain that he subjected himself to in binding with duct tape. It is interesting that he talked about duct tape as 'the worst thing ever'. Although he had sufficient knowledge of binding to pass successfully, his lack of thought about his choice of tape indicates urgency or desperation, which helped to construct his trans identity as authentic. The comment 'where do I go from here? What do I do now?' further constructed Nathan's trans identity as authentic; the act of passing showed him his true identity and he needed to do something about it.

As well as presentation of the body, other aspects of Nathan's experience are reified. Passing for the first time is reified; it is a rite of passage along his gender trajectory. Binding is a reified activity as I discuss later.

Hair and clothes

Aspects of the shared repertoire were clearly reified, in particular having one's hair cut according to one's preferred gender and wearing clothes bought in the correctly gendered section of a shop. Gendered haircuts and clothes are already reified in the wider community; they are understood to represent a person's gender. These were further reified within 4D, in part because they had multiple meanings. They showed that one had successfully negotiated a gendered public space: hairdresser or barber, or clothes shop. They showed a commitment to changing one's presentation across the gender binary. In particular, having a gendered haircut could be seen as a commitment to presenting in one's preferred identity all the time.

Haircuts

All the young people that I interviewed except Aidan talked about having their hair cut according to their preferred gender. These quotes from Nathan show the significance to him of having his hair cut in a male cut. Not only was a correctly gendered haircut reified within 4D, but having one's 'first haircut', that is first haircut appropriate to one's preferred gender, was reified; it was a reified event.

Nathan talked about his appointments with a gender specialist. He wanted to have his trans identity confirmed and to be prescribed testosterone. At his initial meeting he had not changed his appearance fully:

> Nathan: Basically, I wasn't completely living full time, I'd only sort of been living full time for about a month, if that, not even properly full time, and I hadn't changed my name legally yet. I hadn't bought a binder properly, I was just using tape still. I hadn't really ... I'd sort of cut my hair short, but it was still quite a feminine cut...

Nathan detailed several things that he hadn't done that showed he hadn't moved far along a cross-gender trajectory: legal name change, wearing a binder and having one's hair cut. He said the doctor's response was:

> "You've moved on from there, starting steps … come back in three months and we'll see where you are."

Nathan went back to see Dr X after four or five months. He described:

> Nathan: And the day before I went back to see him, I went and got my hair cut, my first ever haircut, male haircut. I went into a barbershop and I was just like my ears are cold, my head's cold, I want a hat! *(slight laugh)* And I went in and he just looked at me, one look at me and sort of gave me that nod of, yeah, I'm happy to give you your hormones, sort of thing …

Having one's hair cut is shown to be reified in several ways in this excerpt, within 4D and beyond. Initially Nathan said 'my first ever haircut' indicating that it was so significant that all previous haircuts did not count. He then qualified this by saying 'male haircut'. He then described the doctor's reaction to his haircut: 'he just looked at me, one look at me and sort of gave me that nod…'; Nathan implied that the meaning of his haircut needed no explanation either to him or the doctor. Its meaning had become reified to stand for full-time commitment to moving along a gender trajectory. Although both legal name changes and binders are reified, here it is Nathan's haircut that he interprets as most significant in giving him access to hormones.

There are risks associated with having one's hair cut and with buying gendered clothes. Many clothes shops will tell people they must use a gendered changing room. For example, a trans man risks be told to use the women's changing room to try on clothing they have chosen in the men's department. This risk can be successfully overcome in two clear ways: 'passing' as one's preferred gender, or negotiating with staff to claim one's rights as a trans person. The risks with barbers and hairdressers are that one will have one's hair cut in a way that is not appropriate for one's gender. These quotes from Chrissy show the risk for her associated with getting her hair cut. Chrissy started by telling me about a

Facebook picture she liked of herself and how she'd like to change her appearance:

> Chrissy: I'd like to have my hair done.
>
> AM: Uh huh.
>
> Chrissy: But I feel too nervous to actually go in, because ... I mean, the place I would go, it was a unisex hair salon which has now merged with a barbers.
>
> AM: OK.
>
> Chrissy: And I know what will happen if I go in now!
>
> AM: Yes, they'll ...?
>
> Chrissy: Obviously they're barbers! (slight laugh and starts examining mobile phone?)

The reification of 'having one's hair done' is shown by what is unspoken here. Chrissy said 'I know what'll happen... Obviously they're barbers' suggesting that I was also expected to know what would happen. Chrissy did not elaborate even when I prompted her with my question 'yes, they'll...?'. The risk that Chrissy implies is having her hair cut in a male style rather than simply not being recognised as her preferred identity.

It is worth noting the differently gendered language used here by Nathan and Chrissy. Nathan talks about his first haircut and Chrissy about having her hair done. 'Having your hair done' is a feminised term, and suggests making someone look attractive rather than just a haircut. Both are making their identities clear through their use of gendered language. Chrissy is making her preferred feminine identity clear. Nathan however uses the neutral term 'haircut' suggesting practicality conventionally associated with masculinity.

Clothing

Clothing, like haircuts, is already reified in the wider community. Almost all clothing is gendered in many ways. Men's and women's clothes are sold in separate, labelled, sections of shops. The clothing itself comes in a different range of colours, patterns and shapes; buttons and zips are attached on opposite

sides. Many items of clothing have small indicators attached to ensure that the gendering is clear, for instance small ribbons at the top of women's pants. In the wider community most people conform to gender norms wearing appropriately gendered clothing. There are exceptions, but most people will dress overwhelmingly in a style that is normatively gendered. In 4D clothing had additional layers of reification. Clothing had to be authentically gendered: it must have been marketed to one's preferred gender. There were associated reified events: shopping in one's preferred gendered clothing section and successfully using the correctly gendered changing room. Both using the changing room and being seen to shop in the preferred section required knowledge of how to navigate the wider world and might be seen as rites of passage and mark movement along a gender trajectory.

The significance of correctly gendered clothing is shown in the following quotes from James and Kieran's interviews. During James's interview, he brought up going shopping, I shared that I had recently had a birthday, and that I had bought a shirt for the party. Although James asked if it was a nice shirt his main interest was whether it was a 'men's' shirt:

> AM: ... I went and bought a shirt for my party.

> James: Good. Was it a nice shirt? Was it a men's shirt?

James's question about whether it was a nice shirt was immediately followed by asking whether it was a men's shirt. For James it was most significant that my shirt was a men's shirt. We did not discuss the significance of this. I understood James to be affirming our identities as similar. James wanted to make a link with my gender choices. He understood us both to be assigned female at birth and presenting as male. He, correctly, expected that for me as well as for him that it was important to wear men's clothing[1]. Both of us understood the reified meaning of choosing to wear men's clothing within 4D, including for me as

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[1] I have discussed the participants' relationship with me and my identity in Methods and Methodology (chapter 4)

youth worker. It represented the concept of understanding one's identity as male or partly male and wanting to understood by others as male.

The following extracts are from Kieran's interview. He described his appearance before he identified as trans, and how his appearance had changed since coming out as trans. He referred to his personal hygiene as well as his hair and clothing:

> Kieran: Yeah, before it was I didn't really care so much about my appearance … Very rarely went to the hairdressers either, because that was just one the worst, of the worst experiences … *(slight laugh)* Yeah, it was just really uncomfortable.
>
> AM: And so what was your hair like?
>
> Kieran: It was, like, long and down to probably about here, like my elbow almost, because I just didn't go to the hairdressers often at all, I just let it grow and most of the time I would just have it up in a ponytail as well … So, yeah, whereas now I do take care of my personal hygiene and I do care about what my hair looks like and spend a lot more time getting ready in the morning. And I dress more masculine and like wearing more male clothes and shirts and t-shirts and stuff. *(slight laugh)*

Later I summarised back some of the things I understood Kieran to have said:

> AM: And, yeah, do you want to talk about your transition? You know, what you … so you've cut your hair?
>
> Kieran: Yeah.
>
> AM: You've got some different clothes that are a bit more masculine?
>
> Kieran: Yeah.
>
> AM: Or that are masculine rather than alternative or …?
>
> Kieran: Yeah, that are male as well, like, rather than just masculine looking, they are like from the men's section, they're for …
>
> AM: OK, yeah.
>
> Kieran: … like, for men rather than female people …female bodied people who want to look more masculine.

Earlier in the discussion Kieran had said 'I dress more masculine and like wearing more male clothes and shirts and t-shirts and stuff'. As he had used the word 'masculine' I was careful that I also used it when I summarised what he said. Kieran then clarified that his clothes were male rather than masculine. It appeared that I had not given the correct significance to his comment when he said 'more male' to describe his new clothes. As a reification with a commonly understood meaning in 4D he felt his meaning should have been clear to me. Kieran elaborated to make sure I understand the important distinction between male and masculine clothes, and that his clothes were male. Male clothes are 'for … men rather than female people …female bodied people who want to look more masculine'. He continued to elaborate further that there are 'boyfriend' clothes that look masculine but are intended for women. He wanted to be very clear that he wore male clothes so that I understood that his identity was male and not masculine. The reference to Kieran's personal hygiene suggests that he was unhappy or not engaged with his bodily presentation before his transition. This suggests a dislike of his conventionally female embodiment, giving authenticity to his trans identity.

Chrissy shared her feelings about shopping in the women's clothes section. Chrissy felt that she did not pass well as a woman, and that she would be seen as a man shopping in the women's section:

> Chrissy: I mean, when I've finished, like, in the women's section I always think, people must be looking at me. You look around and nobody's actually looking at you but you think somebody must be! *(slight laugh)* Just waiting to … you know, "What are you doing!!?" and call you a pervert or something.

Chrissy was aware that it is acceptable for men to shop in the women's section to buy clothes for other people who are women. However she was strongly aware of the possible consequences for a man of being known to wear women's clothing. This made Chrissy vigilant about whether people were looking at her shopping for women's clothing. More than just being watched she was also anxious that she might be seen as deviant and be harassed.

These all illustrate the reification in 4D, beyond the reification in the wider community, of gendered clothing and haircuts, including gendered clothes shops and hairdressers.

Binding and packing

Binders

I will now consider the reification of the binder. A binder is similar to a compression vest. Compression vests are more commonly used by cis men with some breast growth; they are used to compress the chest to create a more conventional male shape. Binder is a term used in the trans community. Binders are commercially produced for people with conventionally female bodies who want to compress their breasts to give a more conventionally male shaped chest. Most young trans men in 4D wore binders. All of my interview participants who were assigned female at birth, except Aidan, discussed using a binder occasionally or all the time. Binding is significant in a male-identified individual's gender trajectory as it conceals breasts and gives a more conventionally male chest shape. Binders are very tight on one's chest, they are often uncomfortable, even painful, and may restrict one's breathing. Both the choice to bind, and the associated discomfort, show a commitment to having a more male appearance. Binding also enables a conventionally female-bodied person to pass more consistently as male. It is possible to use tape or bandages to give the same effect as wearing a binder. However, choosing to buy and wear a binder is additionally significant: there is more financial commitment and binders are specifically associated with being trans. The following interview excerpts show the significance of binders. The first excerpt is from Tyler and Nathan's interview. They described Tyler wearing his binder as a way to come out as trans to Nathan:

> Tyler: I picked you up from the station and you were like, "Are you binding?" *(slight laugh)* Yes!! *(slight laugh)*

> Nathan: Next I looked at his chest, like, and "Did I leave a binder here?" And he went, "No, it's mine." And I was just sort of ...

> Tyler: "How long have you had that then?" "Ages!" *(both laugh)*

Nathan: I was just like, "Is there something you want to tell me?"
and he was like, "Yeah!" *(slight laugh)* And he sort of went ...

Tyler: Maybe! *(slight laugh)*

Nathan and Tyler both understood wearing a binder as a way of communicating that one identified as trans. However, it had added significance as Tyler had bought his own binder rather than wearing Nathan's binder. The discussion shows the taken-for-granted meaning of wearing the binder. Tyler wore the binder to come out to Nathan; Nathan asked 'is there something you want to tell me?'. For both the binder held the reified meaning of Tyler's trans identity.

James also talked about wearing a binder. For him it was not about coming out as trans but presenting in accordance with his trans identity.

AM: And there are certain situations you bind in?

James: It hurts, it hurts my back, so I don't bind that much.

AM: OK. And when do you bind?

James: Erm, when I'm trangsting.

AM: When you're trangsting?

James: Yeah, trans angst, or ...

AM: Which is when? Are there particular situations?

James: No, just sort of general. If I feel rubbish I wear my binder, or if I'm going to see people that I'm out as trans to.

AM: OK.

James, like many of the other young people, preferred or felt more confident with their appearance when they were binding. Although James preferred to bind he did not bind much because it hurt his back. The word 'trangst' means general unhappiness with the trans or transition experience. However it was often used specifically about body or gender dysphoria. As well as saying he bound when he was 'trangsting', James also said that he wore his binder when he saw people he was out as trans to. It was important that James was seen to be consistent in his identity, and not going backwards and no longer wearing a binder. This was important as legitimacy in 4D was linked to moving forward on

a cross-gender binary trajectory. The meaning of wearing a binder is shown to be reified as it is assumed to represent James's gender identity. Nathan, unlike James, talked about wearing his binder excessively even though it caused him health problems:

> Nathan: ... at the minute, my main aim is to get my top surgery done, because I can live with my bottom part for god knows how many more years, until I get really frustrated with it. Whereas with my chest, it's every day I've got to put my binder on. In the past, what, six months, I've had two, three chest infections, my asthma has got worse. Smoking doesn't help, but it's been predominantly ... my chest is getting worse and deteriorating and I think because ...
>
> AM: Because of being restrained in that way?
>
> Nathan: I've been wearing my binder for three and a half years now and it's not healthy to wear it for more than eight hours a day. Well, I'm wearing mine for 12 or 13; I'm at work, it takes me an hour to get to work, takes me an hour to get from work, I'm doing 8, 9, or 10 hours shifts, or whatever, and I'm travelling back and forward. Generally, a lot of days I can get up in the morning and I'll take one look in the mirror and I can't bear not to wear my binder! I've not got any plans that day, I'm just going to be laying around the house all day, but I can't not wear my binder.

For Nathan binding was not only about how he appeared to other people. He was unhappy with his appearance in the mirror and 'couldn't bear' not to wear his binder. This emphasises the reification of the body in relation to gender identity, as presented to oneself not just to others.

Tyler talked about wearing a long binder that changed the shape of his hips as well as his chest:

> Tyler: ... and also my hips are a big source of dysphoria for me because they are epic! *(slight laugh)* I'm not even going to lie, I've got, I've just got a brand new binder which I love because it's four inches longer and it pulls my hips in a little bit which is really working for me.
>
> AM: Right, right.

> Tyler: Really working for me because I can wear clothes more comfortably. I get read as male more I've found actually, even though I've only had it a couple of days, it's been like a big confidence boost for me. Erm, and, erm, yeah, but that's helpful and I know the hormones will help on that front to redistribute fat and the like.

Tyler gave a practical reason for wearing his new longer binder, that he could wear clothes more comfortably. However, he then made two references to being read as male, suggesting further significance to him. He was pleased with the binder reshaping his body as he was more often read as male. He linked this to the future effect of hormones on his body. One of the accepted effects of testosterone is to masculinise conventionally female bodies by redistributing body fat. Tyler implied that he intended to use hormones to masculinise his body in the future. He showed that he was on a trajectory from masculinising his body with his binder to using hormones, there is a suggestion this is a taken-for-granted trajectory. I will discuss Tyler's intended gender trajectory further below. In the interview, Tyler expected that I understand the significance of being read as male, and the desire for changing the fat distribution of his body. He shows the reification of changing the appearance of one's body shape as well as changing one's physical body to a more masculine shape. These link to the reification of the body as representing gender identity.

As I have discussed in chapter 5, Blake and Lee were gender transgressive and their attitude to their breasts and binding was different from the other interview participants assigned female at birth. They did not talk about dislike or indifference to their breasts, and they did not discuss their plans for 'chest surgery'. They both talked about feeling comfortable or enjoying not wearing a binder. Blake felt that however he presented he should be understood as male, so he would wear whatever was comfortable:

> Blake: … my chest doesn't make me feel more like a woman, at all, which I'm very glad about because I know a lot of trans guys really, really feel shit about like their chests. So in that way I feel lucky, but at the same time, I don't need my friends commenting on that, or saying, "Oh, so why do you look more feminine today?" I'm like, "Well, I don't look more feminine, that's your opinion. I

don't feel more feminine. I feel exactly the same as I do when I'm binding or when I'm not wearing any clothes, you know?" So I guess sometimes I do and sometimes I don't. I tend to just wear like whatever makes me comfortable,

Lee had given its binders away, perhaps to position itself as gender transgressive, perhaps to be seen to help others who were on a more normative gender trajectory:

> Lee: I don't know if I'm going to get top surgery, or any sort of surgery, because it's more irreversible than perhaps hormones are. And if you would want to reverse it then you'd have to ... it's more dangerous, and ... yeah. And I don't know, I don't really ... like, there are some days when I want like a flatter chest, but then I just wish I hadn't given my two binders away! *(slight laugh)* Because I have, to people who were actually ...
>
> AM: Binders are replaceable!
>
> Lee: Yeah.
>
> AM: *(slight laugh)* They might cost you a bit of money.
>
> Lee: But tits aren't, so ...! Yeah. And then like because I put this on, I was just like, oh, maybe I should get my old Underworks[1] out of the drawer. And then I was like, meh! Like if I had like felt more dysphoric about my chest I would have like felt really bad and wanted to wear a binder and stuff, but now I'm just like, meh! They're OK. And like some days, I really, really, really like them. No most of the time I like them. It's like a quirk.

Lee showed several things here. It mentioned wanting a flatter chest, some days, as well as liking 'them', its breasts, most of the time. It positioned itself as different from some other people in relation to its body or breasts when it said it has given its binders away 'to people who were actually' even though this comment is unfinished. It showed enjoyment of the transgressive nature of its body 'it's like a quirk', and later in the interview, as I quoted in chapter 5, 'it's cool'. It was also clear that it didn't see itself on a clear gender trajectory: it didn't know if it would have 'top surgery'.

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[1] Underworks are a brand of binder

Like Tyler, Blake made a link between binding and medical interventions. Tyler suggested a trajectory from binding to hormones. Blake understood binders, within 4D and perhaps the wider trans community, to signify a gender trajectory from using a binder to end with chest surgery. I have discussed a fuller version of this quote in chapter 8 in relation to Blake's identity being seen as authentic by Zak.

> Blake: ... I was just saying about I don't want, you know, to have any sort of surgery, and, ... a lot of people, they do see binders as premeditative – is that the word? – to operations, and for me that's not what it is. And, yeah, when I said that, [Zak] was fine about that, he didn't see it in that way; just because that's the way he used it doesn't mean that everyone is like that.

Blake understood there to be a commonly assumed trajectory from wearing a binder to chest surgery. Blake said Zak didn't assume that Blake would have chest surgery and that Zak was 'fine' that he wasn't. However Blake's need to clarify his own trajectory with Zak and his insistence that Zak was 'fine with it' in fact suggest that both Zak and Blake saw the trajectory from binding to surgery as the usual one; other trajectories needed to be explained to be visible possibilities. Blake suggested that the trajectory from binding to surgery was deeply embedded when he used the word 'premeditative'. Wearing a binder was not a trial process before deciding whether or not to have surgery; instead people would start binding with the intention of having surgery. The reification of binding is shown here to have additional taken-for-granted meanings of intended medical interventions to the body as well as showing a male identity.

Packers

As well as binding, some members of 4D also used a packer. A packer is an object that is worn to simulate the appearance of having a penis. Packers can be homemade, for example sponges, socks, or filled condoms, or they can be commercially produced prosthetic penises. Commercially produced packers range in functionality from simply giving the appearance through clothes of having a penis to enabling the wearer to have penetrative sex or to urinate standing up. Five of my participants discussed the use of packers. James, Nathan

and Tyler did at least sometimes use packers; Phoenix and Mattius did not. Mattius's position was the most straightforward; he felt that packing would not make any difference to whether he was read as male or female. This quote is from Mattius:

> AM: ... you've said a little bit about you don't think your appearance, what you wear has changed, but have you done anything else? You know, do you bind? Do you want to say anything about that?
>
> Mattius: Yeah. I do bind. I have quite small boobs naturally, that it's not sort of a big necessity, luckily! *(slight laugh)* But I just do it for my own comfort because I prefer to sort of be like completely flat-chested. But that's sort of I guess where it ends; I don't use a packer or anything, because I don't really see the need.
>
> AM: You don't see the need ...?
>
> Mattius: I think it's a bit pointless because I don't think ... I think people do notice if you have boobs or not, but people very rarely look for if you have a bulge or not. You know, I think if people aren't really sure about, you know, if you're male or female, I personally I will sort of look for boobs and say, oh, does that person have boobs or not. But I will never think, oh, well, look between their legs and see what's there, because, you know, that's not really what first comes to mind ! So ... yeah.

Mattius was informed by his own process of gendering people when he was unsure whether they were male or female. He said he would check whether people had breasts but would not look to see whether they appeared to have a penis. For this reason he felt that there was no benefit to packing. James did think that packing helped him pass, because it made him feel more male.

> James: ... binding is like a necessity to pass for me. Packing is more of a personal thing, like for myself, erm, I feel like I pass better when I pack because I feel more masculine and more ... I feel more male when I pack ...

As Kieran had in his discussion of clothing, James distinguished between male and masculine, further emphasising his male identity. Phoenix saw no necessity to pack, although he had when he was much younger.

AM: And you don't have a packer, you don't …

Phoenix: No.

AM: Why?

Phoenix: Because I think that would get on my nerves to walk around with that all the time. It's weird, because when I was younger I used to do that, I used to just stuff anything in there, just to create that effect.

AM: And go out like that?

Phoenix: I did actually, when I was about eight. But now I kind of … again, it just doesn't feel that important to me. I mean there are bioguys that walk around and you can't see anything, so why do I have to go out of my way to …

AM: Well, and I think your question of what makes people read you a certain way, actually I think …

Phoenix: It starts here.

AM: Yeah.

Phoenix: I watch people's eyes and they look here, then look here, then look back, and it's like if that's there then they're like, 'Oh, you're a girl!'… They hardly ever go that far down, it's always here, the lowest so. Yeah, I don't really feel like it's a need. I mean I think again I don't have that kind of dysphoria where I feel like … it's comforting to have it though. When I was really small it was, but not now.

Phoenix did not see any benefit to packing to enable him to be read as male. Phoenix described being gendered by others in a similar way to Mattius. In the interview Phoenix indicated people looking at his face and then his chest to decide whether he was male or female. He said that 'bioguys', people who are born with conventionally male bodies, often did not have a visible bulge in their trousers indicating they had a penis. He felt that it would be irritating to wear a packer, and suggested that it might be childish, saying that he did it all the time when he was much younger. However Phoenix also understood that it would be a comfort if he felt dysphoric about that part of his body.

The reification of medical interventions

The previous categories of reification all hold meaning and risk. However all of them can be reversed. The final category of reifications that I will look at is medical interventions, which are mostly irreversible. Knowledge of medical interventions is part of the shared repertoire, as I have discussed in chapter 7. Surgery as well as hormones are reified. At this point I will discuss the reification of hormones. Hormones are reified objects, and first hormone use is a reified event, like 'first haircut'.

Hormones

I have earlier quoted Nathan describing his engagement with a medical professional. In his description he described the meaning of the look the doctor gave him:

> Nathan: ... And I went in and he just looked at me, one look at me and sort of gave me that nod of, yeah, I'm happy to give you your hormones, sort of thing ...

His reference to hormones 'you your hormones' was considered not to need any explanation, as the meaning was considered self-evident. The hormones did not need to be named as the only hormones of significance in 4D were 'sex' hormones used to masculinise or feminise people's bodies to align with their identity; the meaning of 'hormones' has become taken-for-granted. Taking hormones was often assumed to mean that one was moving on a forward trajectory to a cross-gender identity, although this was not always the case.

Taking hormones was a source of significant pleasure for the young people and unpleasant side-effects were seen positively. Pain and side-effects were seen positively as they were an indicator that one's body was changing, but also tolerating these indicated one's commitment to one's gender trajectory. Nathan described the first effects of testosterone:

> Nathan: I got my first shot, went home for Christmas, I was getting a bit flushed in the face, getting the break-out in acne. My mum said, "Are you all right? You look a bit red in the face!" And I'm like, "Yeah, I'm fine, just a bit hot and flustered!"

This a quote from my fieldnotes, used in chapter 7. Jacky was advising Kim on the use and effects of hormones:

> Jacky advises that [Kim] will be more likely to have mood swings. Kim says perhaps people have noticed she seems to change mood during the day. (Fieldnote August 2009)

I have quoted Kieran in chapter 7 saying testosterone injections hurt. When asked he elaborated:

> AM: Does it hurt more than other injections?
>
> Kieran: It's 1,000 mg…!
>
> AM: Or it just hurts! Does it hurt more?
>
> Kieran: It hurts more. It's 1,000 mg into your buttock! *(slight laugh)*
>
> AM: Yes, OK.
>
> Kieran: They have to do it into the largest muscle of your body, obviously, and, yeah, it's quite sore for a few days afterwards. It's kind of like you've bruised the muscle, and the first time that I had it was really, really painful in the sense that I couldn't actually sit down or bend over, or crouch for about seven, about six seven hours after I'd had it done. So I had to stand up all the way home from London, which is, like, two hours! *(slight laugh)*

There was a lot of sharing both with me and with each other in the youth group about enduring pain and side effects associated with hormones: hormones were reified objects, and taking hormones was a rite of passage in a gender trajectory towards one's preferred gender.

Tyler talked about hormones in relation to passing:

> Tyler: And my big tell at the moment, I can walk out as confident as day and pass relatively well, but my tell is my voice and it does my head in, it really does, and I hate listening to myself, I really hate it! *(slight laugh)* I really hate it! Like even when I'm talking, I'm like, oh, will you shut up! *(slight laugh)* Erm, I hate it. So that is a big issue for me and it causes me a lot of dysphoria and I want to … like, you know, you can cover up with a binder, you can pack, you can do all of those, but you can't just tweak your voice. So the

> hormones is a big deal for me, plus it will help not to look like a 15
> year old boy all the bloody time! *(laughter)* It really would!

Tyler said he passed relatively well, although he looked like a 15-year-old boy. As a result Tyler was looking forward to hormones to deepen his voice so that he would not be heard as female, and change his appearance so he would be seen as a man rather than a boy.

Hormones were reified in 4D for multiple reasons. They indicated commitment to moving along a gender trajectory towards one's preferred gender. They changed one's gender presentation which enabled recognition of one's preferred gender. Finally hormones changed one's body so it was better aligned with one's gender identity. This established one's identity as authentic, but also brought pleasure or relief through having a body that was more closely aligned with one's gender.

Surgery

Surgery is reified widely in both the trans community and the medical community. It is commonly called SRS, sex reassignment surgery, or preferably GCS, gender confirmation surgery (The Huffington Post, 2018). Historically 'sex change' surgery was highly signified as the final transition step, within both the medical and the trans communities (Bolin, 1988). There is still a suggestion in the name that the surgery confirms (or reassigns) one's gender, even though surgery is not required by the GRA to have one's gender recognised. For many trans people surgery is still seen as highly significant in their gender trajectory, perhaps the last stage before living fully as one's preferred gender. The intended trajectory of most of the young people at 4D included some surgery. Lee and Blake were again those young people who felt differently from most other group members. Blake described himself as 'non-op' and was fairly certain he did not want surgery; Lee was unsure. Chrissie said she knew 'you have to do more' but just wanted to start hormones at the time. All the rest of my interviewees talked about their plans for surgery.

Aidan's view fits most with a traditional transsexual view of surgery as 'sex reassignment surgery', the process through which he will become a 'boy'. He

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talks about surgery as if it is assumed in his gender trajectory. The following quotes both refer to surgery. In the first quote he talked about moving to live somewhere that was safer for him as trans man before having surgery. In the second quote he talked about telling people about his identity after surgery:

> Aidan: … so before I do have surgery and turn into a boy I got to get out of there before anything does happen to me

And elsewhere:

> Aidan: I want to get my surgery done and everything like that. Then I'll say to them I was a girl and now I'm a boy I'll try to explain it to them.

As I discussed in chapter 5, Aidan held multiple and contradictory understandings of his identity. In the interview he talked about himself as male, gay female, and a tomboy. Although elsewhere in Aidan's interview he said he was male inside, these quotes show that Aidan also saw surgery as the process through which he would become fully male.

I now quote Brendan again (see chapter 8) about the expected gender trajectory within 4D:

> Brendan: … Then you have the people who have been on hormones for ages, but they're still pre-op and stuff, but they'll pass all the time and everything. And then you have the people who are hormones for ages, post-op, and feel like they're the helper people who you can ask anything, and they've been down the road, <chuckles> they know.

Brendan saw the standard trajectory within 4D to finish with surgery: people who were on hormones and passed all the time were 'pre-op'. Being recognised by others all the time in one's preferred identity was not their final transition step, surgery was. Brendan also gave his reason for wanting surgery: he would prefer a body without breasts:

> Brendan: If binding was completely fine and it didn't hurt and whatever I would still get top surgery, because it's not … to make it just more comfy. It's not just to make it more comfy. If binding

didn't affect health and was really comfy I still would get top surgery, just because I would prefer it with my body. <chuckles>

Several other interview participants explained or suggested that the reason that they wanted surgery was for their own satisfaction with their bodies as they did not want breasts. Kieran, as I quoted earlier said he'd like his breasts 'gone completely, I don't want them to be seen at all. I don't want people to realise that they're there'. He added:

Kieran: But top surgery is a priority and has been all the way since before I ... well, since puberty *(slight laugh)* first time round!

Mattius also wanted top surgery:

Mattius: At the moment I would like to have top surgery, because you know I don't like having boobs.

James added that the standard of the surgery was important to him passing 'properly', I assume this means when topless:

James: ... it does matter to me how my chest looks afterwards, because that ... that affects how I pass, you know, properly in future.

It is clear that Kieran, Mattius and James all want chest surgery for satisfaction with their bodies. Kieran and Phoenix are both concerned with how their chest is seen by others, while Mattius says he does not 'like having boobs'.

Finally I will look at Phoenix's discussion of his body. As I have discussed in chapter 5, Phoenix said he didn't identify with his body, that he felt more like a guy than a girl. He also said that his 'chest' looked odd, didn't fit and had no use, so he definitely wanted surgery. Below, he said that he wanted surgery and disliked wearing a binder. However he also said that his body satisfaction was more important to him that being recognised as male:

Phoenix: Because you know what, I don't actually mind passing as both, but it's just my body. If I was passing as both in a body that was more comfortable to me I'd probably be OK. If someone thought I was female I was like OK, well, fine. But as long as I'm comfortable with it then that's OK and that's all I want really...

Phoenix: Definitely surgery. I'm tired of the ... it's just horrible, it's really horrible being the ... Even wearing a binder feels restricted, I feel like I can't breathe. I think not just because of the tightness, but it's just the general restriction of feeling trapped and imprisoned all the time, that's what's driving me crazy at the moment. So yeah, that's definitely something I'd do for my own comfort.

AM: And do you wear a binder ... when do you wear a binder?

Phoenix: If I'm just wearing a t-shirt. It's really annoying because when I want to bind the most is when it's really hot, because that's when I wear the least amount of layers. Like today I've got four layers on, so I'm not binding. But in the summer it's just oh, it's horrible, being on the Tube with ... oh, it's horrible, it's just sweaty and horrible. But yeah, that's ...

AM: And it has that feeling of ...

Phoenix: Restriction ... Yeah, always stuck

AM: And yeah, so in the future what do you imagine for yourself?

Phoenix: See, this is where I get confused, because whenever I imagine myself in the future I instantly look like a man really. But maybe that isn't my future, I don't know. It's just, yeah, I just imagine myself living comfortably, just finally feeling comfortable.

AM: And your picture that you have is of a guy, a man.

Phoenix: Me with a flat chest ...

AM: Using that word man.

Phoenix: ... with a bit of muscle. Yeah.

AM: And yeah, so you're quite confused because actually in your everyday life it's more your body that you've got an issue with, you're quite happy to be pronouned he or she and that's quite liveable for you?

Phoenix: Yeah, because really someone could call my brothers she, but it doesn't change the fact that they are boys. If I know what I am then I don't really care what people call me. It doesn't bother me so much, it did bother me for a little while but now it's like well, I can't help how people read me. And that is all there is to offer as far as pronouns go. So I can't really expect them to call

me anything other than he or she. I mean the newer pronouns, they're not really in the dictionary, they've not been circulated yet, so.

It is unclear if Phoenix had contradictory feelings about his body and identity, or if his feelings were just quite complex. In terms of identity he said at different points: that he felt more male than female, that he didn't mind passing as male and female, that he couldn't help how people read him, and that he couldn't expect to be called anything other than he or she. It seems that he had an internal sense of himself as 'more male' but accepts that people may see him differently from how he feels.

There were several interesting things that Phoenix said. He said he was happy to 'pass' as male or female as long as he was comfortable in his body. Later he said that he didn't mind what people called him if he knew what he was. The suggestion is that chest surgery will make Phoenix comfortable in his own body, and with his experienced identity. For Phoenix, this was not related to how other people perceived him: if someone saw him as female that would be fine. Later he added 'If I know what I am then I don't really care what people call me'. It seems that having chest surgery would make Phoenix comfortable in his body and that his identity, through his body, was authentic. If this were the case he wouldn't feel there was an issue with being called he or she. Comfort with his own body, as it related to his experienced identity, seemed to be his main desire.

Conclusion

The objects that were reified in 4D were all related to presentation or modification of bodies. I have looked at haircuts, clothing, binders, and packers, objects that change the gendered presentation of the body. I have also looked at hormones and surgery, objects that change the physical sexed body. These objects were reified for several reasons. Like the reified events considered in chapter 9, they signified movement along an individual's gender trajectory. The sexed body and, presentation of the body through haircuts and clothing, are already reified in the wider community. The physical body and its presentation are understood to represent one's gender identity. Despite the understanding in

4D that gender is self-identified and not determined by one's sexed body, most members of 4D, like most people, cis and trans, experienced their gender identity as embodied. Changes to the body, and its presentation, were further reified in 4D as they were experienced as supporting or aligning with an individual's preferred identity.

11   Conclusion

My thesis examines the establishment of the individual identities and discourses of identity within a youth group for young trans people. It provides an in-depth examination of a trans youth community of practice, of how it operated, and how identities were constructed within it. As the first ethnography of a group of young trans people and the first ethnography of a transition community since 1996, my research has implications for theory, policy and practice. It is particularly important that this study focuses on younger people, who have grown up at a time when ideas about gender, and gender identities and transition have been proliferated over the internet. This is reflected in their openness to a variety of trans identities and discourses, something not seen in earlier work on trans people and communities in the Western World.

My thesis contributes to theorisations of gender and trans as constructed, and discourses of gender and trans as open to change. In particular I found that an alternative gender discourse of gender as fluid and non-binary was becoming established, with individuals holding fluid and non-binary identities and those identities being recognised as authentic by others. I also develop a theorisation of gender and gender discourses as established in communities of gender practice, and broaden this theorisation to communities of practice of gender transition. I show how practices contributed to community formation, changes in discourses around gender in general and trans identities in particular, and to the construction of individual trans identities. These practices included name and pronoun change; mutual gender legitimation; and the reification of bodies, as well as body and identity related objects and practices. Finally I show in detail the performative effect of gender declarations, demonstrating the establishment of new and alternative identities through performative utterances, which contributes to a development of speech act theory.

My findings are also significant to policy, in particular to the recently proposed amendments to the Gender Recognition Act (2004). They show importance of listening to youth voice in relation to gender identification and gender

transition. They also show the need to de-medicalise the recognition of gender identity for both young people and adults.

Finally my thesis has implications for practice in groups that are formed around shared alternative identities. This applies particularly to trans identities, but could also apply more widely to LGBTQ identities, and other non-normative identities. My findings show that group processes are significant to the development and recognition of new and alternative identities. The reification of bodies, and objects and practices relating to body and identity are especially significant. It is important to note that as well as opening up identity possibilities, group processes may foreclose the development of some identities. Groups and communities should maintain awareness of group processes to support the legitimation of wider gender and trans identities.

My detailed enquiry into the development of young trans people's identities has enabled a theorisation about the processes through which identities and discourses of identity may be changed, established and legitimated. I found that the identity processes within a community of practice are performative; that is the processes of establishing identities within a community legitimates and naturalises those identities and the associated identity trajectories.

I found the community processes within 4D were of paramount importance to the establishment of identities, and understandings of gender and trans within the group. Individual participants' preferred identities were established as authentic. Trans identities, and the process of gender transition as a gender trajectory, were naturalised within 4D. The community processes were performative: self-identified gender identities were established as natural in 4D as was the discourse of gender as self-identified.

Identity trajectories in 4D

Transitions and outbound trajectories

4D functioned as a community of practice: the youth group members were engaged with each other in a shared practice, working together towards shared objectives (Lave & Wenger, 1991; Wenger, 1998). However, 4D was an unusual

community of practice: it was a community of identity transition, and a marker of full membership was leaving the community. All communities of practice produce changes in identities as members gain expertise and become more central in the community. However, identity change is rarely the shared purpose of a community of practice as it was in 4D. Most unusually in 4D the identity development was one of transition from an established identity to a different preferred identity; and those identities were often constructed as oppositional: female to male or vice-versa. Most members of 4D were on trajectories from their gender as assigned at birth to the 'opposite' binary gender. Fewer young people were on trajectories to fluid or non-binary identities and those identities were marginal rather than central in the community. However all the young people in 4D were on transition trajectories from their gender as assigned at birth to another gender identity. In most communities of practice, members who have developed their expertise remain as central members in the community. In 4D, once participants had become experts or central members they would stop attending the youth group. Once members had reached a desired stage in their gender transition they would leave the group and be incorporated in the wider community. Leaving the community of practice was a marker of full membership in 4D.

Resources in the community of practice

The functioning of 4D, as a community of practice, produced resources that enabled the establishment of identities for the youth group participants. These included the joint enterprise, the shared repertoire, and reified objects and events. The joint enterprise, the shared objectives of the community, included the legitimation of self-identities and gender trajectories. The joint enterprise legitimated individuals' identities within the community but also provided tools that enabled the young people to negotiate and establish their preferred identities beyond 4D. The shared repertoire of the community included trans-specific language, and medical and legal knowledge relating to medical and legal gender transitions. Deploying the shared knowledge and language enabled young people to have their identities and trajectories recognised as legitimate within 4D. The shared knowledge supported the young people to navigate the

wider community in their preferred or liminal identities. The legal and medical knowledge enabled legitimation in the wider community and access to medical interventions.

The identity processes in 4D were performative. They established individuals' trans identities as natural. They also established the process of transition, that is staged movement along a gender trajectory, as natural. Reifications were particularly important to the performative process as they have taken-for-granted meanings. The 'pronoun circle' was a reified event that took place inside the youth group. The 'pronoun circle' was a ritual that took place at the start and end of each youth group session, in which individuals declared their preferred name and pronoun. This was directly performative: it established the individual's preferred identity for that session; it also legitimated self-identification of gender within the group and hence all members declared identities. Participants were assumed to have initial legitimacy through their attendance at the group, and the declaration of a pronoun other than that associated with one's gender as assigned at birth established further legitimacy. This legitimated their gender trajectory, and importantly indicated movement along that trajectory.

Other objects and events that were reified included gendered clothing and haircuts, and choosing names in line with one's preferred gender. These marked the successful passage through individual stages of transition along a gender trajectory. These individual stages could be seen as rites of passage in an overarching rite of passage of gender transition. Since each stage of transition, and the corresponding gender identity, were legitimated, this legitimated the process of gender transition itself. This normalised the concept of a gender trajectory in 4D. Most significant was that trans identities, which could be seen as liminal, were established as 'authentic' at every stage of a gender trajectory.

There were constraints on the legitimacy of gender trajectories within 4D. Individuals could not be stationary on their gender trajectory, and in particular they could not be seen to be going backwards along their trajectory. This was most evident in the reaction to Lee, who moved from identifying as non-binary

to sometimes identifying as 'she' in alignment with its/her gender as assigned at birth. This was not accepted as legitimate within the community.

Identities and trajectories

The young people who were members of 4D understood their identities in multiple ways. This varied from understanding their identity within the traditional construction of transsexual and seeking medical interventions to align their body to their gender identity, to being gender transgressive and seeking to challenge and subvert gender norms in the wider community. All my interview participants understood themselves to be on gender trajectories. Some young people were certain about their gender identity and trajectory, including medical interventions. Others understood themselves to be in a process of transition; they were unclear of their gender trajectory or what medical interventions they would choose, if any. Authenticity to themselves and recognition as authentic in their gender identities was highly significant for all the young people. For every young person, their body, the presentation of their body, and possible interventions to their body, was intrinsic to the process of seeking recognition of their gender as 'authentic'. It was important for some young people that they felt authentically gendered through their body, others desired to feel that their body aligned with their gender identity.

The identity trajectories within the community of practice of 4D were one and the same as the gender trajectories. The identity trajectories within a community of practice are from newcomer with legitimacy as a peripheral participant to central member with full expertise in the community. In 4D the central trajectory from newcomer to central member was the same trajectory as a cross-binary gender trajectory. Individuals joined the community as peripheral participants with initial legitimacy established through questioning their gender identity; this was the beginning of their gender trajectory. They developed expertise and moved to centrality in the community, this was at the same time movement along their gender trajectory to authenticity and legitimacy in their preferred gender.

4D could be seen as a liminal space with youth group participants holding liminal identities in a rite of passage of gender transition (van Gennep, 1977). Movement along a gender trajectory was enabled by successfully passing through the rites of passage marking the changes of identity. These rites of passage were the reified events that had been established in 4D. The rites of passage established as 'authentic' individual trans identities at each stage along the gender trajectory.

The uses of a community of practice model

I have shown that the community of practice model enabled an understanding of how marginal identities could become performatively established in a subcultural group. In this thesis it has enabled an understanding of how trans identities became established as authentic in a youth group for young trans people. It has also enabled an understanding of how new identity discourses may be established in communities of practice. In the case of 4D, self-identity, trans identities and gender trajectories were naturalised.

Once discourses and identities have been established within a subcultural group they will be transported beyond that community of practice through the 'nexus of multimembership'. Everyone is a member of multiple communities of practice and they will take their changing understanding of identities and discourses with them to other communities of practice. The resources developed within the subcultural group may enable these identities and discourses to gain legitimacy in other communities of practice. In my study language and knowledge, as well as a new discourse of self-identity, enabled youth group members to mobilise power in the wider community to have their identities and changing gender discourses accepted beyond the youth group. Although the people were often unsuccessful or partially successful in their identity claims in the wider community, at least in the early stages of their transition, it is evident from the changing visibility of trans and non-binary identities that changes to discourses of gender have taken place in the wider community and I would suggest that individual mobilisations of power

demanding recognition in wider gender communities have contributed to this change.

The trans identities that became fully established within 4D were central identities in the community. Those identities that were marginal in the community, that is assigned male to female, non-binary and fluid identities, were not fully legitimated within the youth group. Lee who identified as non-binary and whose identity was fluid did not have its identity fully established within 4D. The young people who identified as female also did not have their identities fully legitimated within the group. Although their preferred identities were not fully legitimated they were fully legitimated as being on a gender trajectory, and they remained on a gender trajectory while they attended 4D. In Lee's case it moved on from 4D to establish a non-binary group where perhaps its identity as well as its identity trajectory could be fully legitimated. The young women who came to the group were often intermittent attenders, suggesting that their identities were perhaps legitimated elsewhere. Sylvia returned to 4D after a long absence having completed her medical transition. This was for only one session and she positioned herself as an expert rather than a community member. Chrissy was the one trans woman who attended regularly. Once she reached the age of 25 she became a youth group facilitator. She has remained a marginal member of the youth group and her identity is still liminal. She still talks about progressing her cross-binary transition, but has not achieved this after a period of several years.[1]

For the future

Broader trans, non-binary and fluid gender identities are becoming more visible and more accepted among young people (Bragg, Renold, Ringrose, & Jackson, 2018; Renold, Bragg, Jackson, & Ringrose, 2017). However research is needed to

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[1] I have not discussed Chrissy's gender trajectory in detail with her recently. It may be that she is content with her transition, but positions herself as wanting to medically transition when this is not entirely the case. Perhaps the position of being on a gender trajectory is more legitimate within 4D than having an ambiguous identity.

understand how these identities may be supported within different communities and spaces. Using a communities of practice framework will enable an understanding of how better to legitimate marginal identities within a community of practice, giving an understanding of how marginal gendered identities may be supported in local communities. A communities of practice framework may also help to understand how marginal gender identities may become more accepted and move towards legitimacy in wider communities, through the nexus of multimembership. These understandings may also inform how marginal identities other than gendered identities may become accepted in local communities of practice.

In 4D only the most central identities, the cross-binary female to male identities, were fully legitimated, and a communities of practice framework may enable an understanding of how marginal gender identities in a community fail to be established. Do local communities require a certain structure to enable a range of identities to be fully legitimated, or are communities only able to fully legitimate their most central members?

Limitations

Within 4D, the community of practice processes were hugely important, if not necessary to the establishment of authentic identities. However 4D was an unusual community of practice as the shared aim was to establish 'new', often 'oppositional', identities with a focus on legitimating identities and identity trajectories. These processes may not have the same significance in a community of practice where the joint enterprise is not one of identity establishment. For example a group campaigning for equal rights for trans people might not enable identities, or establish alternative discourses of identity in the same way as 4D.

Within 4D only cross-binary female to male identities were fully legitimated; these were the central identities within the community. It is possible that the identities of the youth workers had a significant influence on the legitimation of identities within the group, although I have considered us to be outside the practice of the community. The identity of the youth workers during the period

of my observations was (trans) male and transmasculine: Graeme the consistent youth worker was trans male who had medically and socially transitioned; Jakob, who was involved over a period of months, was also a trans man but had not medically transitioned; I presented as male or masculine, and identified as genderqueer, partly rather than fully male. Some 4D participants complained that genderqueer identities were not sufficiently visible in the group suggesting that alternative identities might need validation by staff. It would be interesting to observe a trans youth group with differently identified youth workers, for example predominantly trans female or non-binary.

Questions

The identity processes that were legitimated within 4D were significantly cross-binary identities. The young people desired their identities to be recognised within the wider community and understood the presentation of their bodies as necessary to this recognition. Their bodies were also significant to their sense of authentic identity and comfort with that identity.

Trans identities have become more acceptable within the wider community, however the identities that are accepted or legitimated are limited. We continue to need to support individuals whose preferred gender is other than as assigned at birth, who may desire to transition socially and perhaps medically. Cross-gender trans identities have some authenticity particularly if the individuals pass 'well', that is they don't look trans (Roche, 2018). However, identities and bodies that do not conform to conventional gender norms are less accepted.

We cannot know how genders or identities will change, whether gender will become insignificant, or less oppressive. However if we want to change the world so that those who do not gender conform, particularly those who are seen not to conform, have liveable lives, lives that are recognised and valued, then we must look for possibilities for change. We must look to understand how gender is established. We must also look for moments of failure, moments when gender norms are challenged. These will be opportunities for alternative possibilities to become visible and established.

> ...it is important not only to understand how the terms of gender are instituted, naturalized, and established as presuppositional but to trace the moments where the binary system of gender is disputed and challenged, where the very social life of gender turns out to be malleable and transformable (Butler, 2004, p. 216)

Can we move forward to a world where it is not necessary to conform to normative presentations of gender for one's gender or trans identity to be legitimate? Do we want to move to a world where the concept of gender transition is meaningless, where individuals can choose alternative genders without needing to 'transition'?

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Glossary

Many of these terms are relatively new and their meanings are changing and developing, and have no universally agreed meaning. My intention is to provide respectful, non-pathologising, emancipatory definitions that reflect my understanding accurately.

Androgyne: simultaneously feminine and masculine, although not necessarily in equal amounts.

As assigned at birth: refers to sex as categorised at birth, and the gender associated with that sex. It is used to differentiate between assigned sex or gender and gender as self-identified.

Assigned male/female at birth: see *as assigned at birth*.

Binders: similar to compression vests which are more commonly used by cis men with some breast growth; they are used to compress the chest to create a more conventional male shape. Binder is a term used in the trans community. Binders are commercially produced for people with conventionally female bodies who want to compress their breasts to give a more conventionally masculine shaped chest.

Binding: compressing the chest to create a more conventionally masculine shape, this may be using a commercially produced *binder*, or alternatives such as tape or bandages.

Bioguy: informal, a man born with a conventionally male body, as opposed to a trans man.

Birth name: name given at birth, used to distinguish from 'chosen' or 'preferred' name that aligns with one's gender identity. In 2018 'dead name' rather than 'birth name' has become commonly used.

Blockers: blockers are a type of medication which temporarily stop the production of the natural hormones which progress puberty. They are a physically reversible intervention: if the young person stops taking the blocker their body will continue to develop as it was previously.

Bottom surgery: genital *surgery*, also called *lower surgery*.

Butch: masculine in presentation regardless of gender or sexuality, more commonly used for masculine women.

Chest surgery: double mastectomy and possibly reshaping of the chest area to give a conventionally male or masculine appearance for those with a conventionally female body, also called *top surgery*.

Cis: is oppositional to *trans* and means that one's *gender identity* and *presentation* are aligned with one's *gender as assigned at birth*.

Closeted: an adjective for a person who has not disclosed their LGBTQ sexual orientation or gender. Cis gendered heterosexual people do not generally disclose their gender or sexual orientation as they are assumed to be cis and heterosexual!

Come out: self-disclosure of LGBTQ gender identity or sexual orientation.

Cross-binary: I have used cross-binary to refer to transitions or identities that are moving from one binary gender category to the other, male to female, or female to male, rather than between or towards any other gender categories.

Cross-sex hormones: see *sex hormones* and *hormones*, refers to hormones used to masculinise conventionally female bodies and feminise conventionally male bodies. Cross-sex hormones suggests a transition from one binary gender to the other, which may not be the case. The prefix cross-sex also suggests a dichotomy between male and female bodies. In fact testosterone and oestrogen are both present in most bodies, it is the balance of testosterone and oestrogen that differs, statistically, between conventionally bodied men and women. This difference has been interpreted as a dichotomy, or an opposition rather than a difference of degree. This has been compounded by the way that testosterone is referred to as a 'male' hormone and oestrogen a 'female' hormone.

Crossdress: to wears clothes conventionally associated with the 'other' binary sex.

DSM: Diagnostic and Statistical Manual of Mental Disorders, published by the American Psychiatric Association.

Female-identified: someone who identifies as female.

Femme: Originally a conventionally feminine lesbian, more commonly now a person who is conventionally feminine regardless of their gender or sexuality.

Fluid: or *genderfluid,* someone whose *gender identity* moves between two or more genders.

FTM: acronym for female-to-male someone is on a male to female trajectory, who lives as male, or identifies as male, but was *assigned female at birth*, they may or may not have had or intend to have any *medical* interventions. Trans male has become more common in 2018.

GCS: gender confirmation surgery.

Gender assigned at birth: refers to the gender associated with sex as categorised at birth. It is used to differentiate between assigned sex and gender and gender as self-identified.

Gender confirmation surgery: see *surgery*, medical term for surgery that supports an individual's gender identity or presentation. Can be seen as problematic as it implies that preferred gender, if other than that assigned at birth, requires surgical confirmation rather than being self-defined.

Gender dysphoria: medical term for the experience of discomfort or distress due to having a gender identity that does not align with one's sex as assigned at birth. It has been excluded from *ICD* 11, the latest version, as pathologising.

Gender expansive: used as a positive version of *gender variant.*

Gender expression: the way a person expresses their gender identity, typically through their appearance, dress, and behaviour, see also *gender performance* or *presentation.*

Gender Identity Clinics: NHS clinics that provide support around gender identity to people over 18. (People may be referred from the age of 17.) They are able to provide speech and language therapy, counselling psychology and hormones. They will also make referrals for some surgeries.

Gender Identity Development Service: NHS service that provides support around gender identity people for people under 18. They explore a young person's gender choices, and offer support for emotional and relationship difficulties associated with a young person's gender identification. They can provide hormones depending on the stage of puberty that a young person has reached. These include 'blockers' which halt the changes made to the body by hormones during puberty. Masculinising or feminising hormones may be prescribed after a year of blockers if the person is over 16.

Gender identity disorder: medical term for the experience of discomfort or distress due to having a gender identity that does not align with one's sex as assigned at birth. It has been excluded from the latest versions of the *DSM* and *ICD* as pathologising.

Gender identity: usually refers to an individual's internal experience of their gender, although identity is constructed in one's relationships with others which will influence one's internally experienced identity.

Gender non-conforming: does not conform to socially accepted gender norms, less medicalised than *gender variant.*

Gender performance or *presentation:* see also *gender expression,* the way in which a person expresses their gender identity, typically through their appearance, dress, and behaviour.

Gender role: social role including behaviours and attitudes that are conventional for that gender.

Gender trajectory: trajectory between gender identities.

Gender transition: see *transition*, *medical* and *social transition.*

Gender variant: does not conform to socially accepted gender norms. More medicalised than *gender non-conforming.*

Genderfluid: see *fluid.*

Genderqueer: often used to mean the same as *non-binary*; it was more commonly used than non-binary at the time of my data collection. May also refer to someone who seeks to *queer* gender.

GIDS: Gender Identity Development Service.

GRA: Gender Recognition Act.

Hormones: commonly testosterone and oestrogen, used to change aspects of the body including fat distribution, hair growth, and voice with masculinising or feminising effects. Some effects are reversible, others less so. Hormones traditionally were taken indefinitely, but this is not necessary and depends on individual preference. Some people may take hormones to support a non-binary rather than conventionally masculine or feminine presentation.

ICD: International Classification of Diseases, published by the World Health Organisation.

LGB: stands for 'lesbian, gay and bisexual'.

LGBT: stands for 'lesbian, gay, bisexual and trans'.

LGBTQ: stands for 'lesbian, gay, bisexual, trans and queer'.

Lower surgery: genital *surgery,* also called *bottom surgery.*

Male-identified: someone who identifies as male. (In the past this commonly had a different meaning and referred to cis women who identified with conventional 'masculine' or 'male' values, or wanted male affirmation).

Medical interventions: hormones and/or *surgery* that may be used to support an individual's gender identity or transition.

Medical transition: medical changes made as part of an individual's *transition,* may include *hormones* and/or *surgery.*

Metoidioplasty: a *surgical* procedure that results in the construction of a small penis from the clitoris after enlargement from testosterone, may be chosen by trans men, or transmasculine people to support their identity, and/or their presentation or performance of their identity. See *phalloplasty.*

Mispronoun: use a pronoun other than someone's preferred pronoun. Understood to mean someone's identity has not been recognised.

MTF: acronym for *male-to-female,* someone who now lives or identifies as female but was *assigned male at birth*, they may or may not have had *medical* interventions. Trans female has become more common in 2018.

Name and pronoun: 'preferred or chosen' name and pronoun, are understood to correspond to preferred gender identity. This reflects an understanding of gender as self-identified.

Name and pronoun circle: an introductory circle where people declare their preferred *name* and *pronoun.*

Non-binary: not fitting neatly and exclusively into one of the binary gender categories: male or female. A non-binary person may have a single fixed gender position other than male or female, no gender, a combination of male and female or other genders, or move between male, female and other genders; they may disagree with the concept of gender entirely.

Non-op: describes a *trans* person who does not intend to have any surgery to support their gender identity or presentation.

Oestrogen: a feminising *hormone* which may be taken by *trans* women or *transfeminine* people to feminise their bodies. The effects are a redistribution of body fat, less muscle, less body and facial hair, the penis and testicles getting smaller, breasts becoming lumpy and increasing in size slightly.

Out: open about one's LGBTQ identity.

Outed: reveal someone's LGBTQ identity without their consent.

Packer: an object that is worn to simulate the appearance of having a penis. Packers can be homemade, for example sponges, socks, or filled condoms, or they can be commercially produced prosthetic penises. Commercially produced packers range in functionality from simply giving the appearance through clothes of having a penis to enabling the wearer to have penetrative sex or to urinate standing up.

Pack: wear a *packer.*

Pass: has a specific meaning in relation to gender, and means to be *read* by others as the gender one intends. The idea of 'passing' is quite contested; many trans people want to pass as cis in their preferred gender, others do not mind if they are recognised as trans, yet others are transgressive in their gender presentation and wish to read as trans. Passing has a complicated history with suggestions of deception; this is not the case: trans people want to have their identity recognised.

Per: non-binary possessive pronoun.

Phalloplasty: a *surgical* procedure that results in the construction of a penis using tissue from other parts of the body in addition to the clitoris after enlargement from testosterone, may be chosen by trans men, or transmasculine people to support their identity, and/or their presentation or performance of their identity. This results in a larger penis than *metoidioplasty.*

Post-op: describes a *trans* person, or a person with a *trans history,* who has had surgery/surgeries to support their gender identity or presentation.

Pre-hormones: describes a person who intends, but has not started to take hormones. They will not yet have the desired changes to their body.

Pre-op: describes a *trans* person, or person with a *trans history,* who intends to have, but has not had, any surgery/surgeries to support their gender identity or presentation.

Pre-T: describes a person who intends, but has not started to take masculinising hormones. They will not yet have the desired masculinising changes to their body.

Preferred gender/identity: the gender/identity that someone wishes to move towards, is moving towards, or has moved to. This may be movement in how they identify, and/or how they are recognised by others.

Pronoun, verb*:* to use a *pronoun* to refer to someone. See *mispronoun.*

Pronouns: third person pronouns that may be gendered or gender-neutral, they include he/she/they/it/ze. Self-declared pronouns indicate how someone identifies. Pronouns used by others are generally understood to show how someone's identity is perceived.

Pronoun circle: see *names and pronoun circle.*

Queer: has several meanings. It can be applied all non-cis non-straight identities. It can also be used for people who do not have fixed identities or who seek to

destabilise the fixing of identities. Similarly, queer applied to activism or politics may describe claims for rights for non-cis or non-straight identities, or moves to destabilise the fixing of identities. Queer theory seeks to disrupt ideas of natural, particularly binary and dichotomous identities, showing that all identities are socially produced or constructed.

Read as: perceived as. May refer to sex/gender or trans identity depending on the context.

'Sex' hormones: see *hormones*, and *cross-sex hormones*, the hormones that regulate the development of the genitals, ovaries/testicles and also the secondary sex characteristics that typically develop at puberty including facial and body hair, bone growth, breast growth, voice changes. They can be taken to support a trans person's gender identity through feminising or masculinising their body.

Sex reassignment surgery: see *gender confirmation surgery* (a preferable term). Medical term for surgery that supports an individual's gender identity or presentation. It is seen as problematic as it implies that identity is not self-determined but requires surgery; it also suggests that 'reassignment' will be from one binary gender to the other.

Social transition: the social changes that someone may choose as part of their *transition,* may include coming out, changing one's names and pronouns, using differently gendered changing rooms, changing one's performance and presentation other than through medical interventions: hormones or surgery.

Stealth: generally refers to someone who *passes* as *cis* as their *preferred gender* and who does not to disclose their previous gender or trans history.

Surgery: used to mean any surgery that is chosen to support an individual's gender identity or presentation including non-binary identities. Trans people, including non-binary people, choose to have surgery for many reasons including: pleasure from their changed body, feeling that their body is aligned with their identity, and greater recognition of their identity by others.

T: is short for *testosterone*, see also *pre-T*.

Testosterone: a masculinising hormone that may be taken by trans men or transmasculine people to masculinise their bodies. The effects may include a redistribution of body fat, increased muscle, growth of the clitoris, stopping of periods, increased libido, a lowering of the voice, the growth of body and facial hair and sometimes the development of 'male pattern' baldness. Some of these effects will stop if the testosterone is stopped.

Third gender: can be used to mean a gender that is not male or female, can also refer to a gender in a gender system that has more than two genders.

Top surgery: see *chest surgery.*

Trans: is an inclusive adjective and can include anyone who feels differently from the binary gender, male or female, they were assigned at birth. This can include discomfort with gender role expectations, a desire to present sometimes or always in ways that don't conform to binary gender norms, and living part or full-time as a different gender from the one assigned at birth. Some trans people will choose to *transition*. Can be used on it's own: 'they are *trans'* or applied to a noun: 'he is a *trans* man'. It is oppositional to *cis*.

Trans history: may be used by someone who has transitioned but who may not identify as trans, for example a woman with a trans history.

Trans trajectory: trajectory between gender identities, towards identities that may be *trans*, or on a trajectory across the gender binary. See *gender trajectory.*

Transfeminine: describes someone *assigned male at birth*, who identifies as female or feminine to a greater extent than male or masculine; they may also identify as *trans*.

Transgender: describes someone whose gender identity or gender performance or presentation differs from their assigned sex. Seen as less inclusive than trans.

Transition: the process of changing one's gender performance and/or presentation, which may include changes to the physical body. Transition can include social, legal and medical changes such as: *coming out* to one's family, friends, and/or others; changing one's name and/or sex on legal documents; *hormones* and/or *surgery*. Transition is often expected to be from conventionally female to male or conventionally male to female, but can be from or to any *gender identity*, or none, or to a *fluid* identity.

Transitioning: in the process of *transition.*

Transmasculine: describes someone *assigned female at birth*, who identifies as male or masculine to a greater extent than as female or feminine; they often also identify as trans*.*

Transsexual: someone who wishes to change sex from male to female or female to male socially, legally and medically. It remains a current identity although it can be seen as a historic and medicalised term..

Transvestite: someone who wears clothes conventionally associated with the 'other' binary sex. It is a historic medical term, *crossdresser* is more commonly used.

Vaginoplasty: a *surgical* procedure that results in the construction of a vagina, may be chosen by trans women, or transfeminine people to support their identity, and/or their presentation or performance of their identity.

Ze/zir: gender neutral pronouns (among many others).

Pen portraits and spaces:

Interview participants:

In each case I have used their descriptions of themselves from their interviews.

I have included the number of youth group sessions at which I saw them.

Aidan 19, white British, lived in east London. His preferred pronouns were he/him/his. He lived with his unemployed mother and many pets: dogs, cats, a hamster, and fishes. He was part of a large family including siblings, half siblings, and nieces and nephews, who all lived nearby. He attended a 6th form college; he had some learning difficulties and described himself as 'special needs'. In the future he wanted to work in a nursery and to foster children, later he wanted to get married. He described himself as gay (female attracted to women), wanting to be a boy, a boy, a tomboy and male. He hated being a girl and wished he'd been born a boy. He said people thought he was a boy. He was planning a full medical transition: hormones and surgery. He said he would explain to people in the future that he had been a girl and was now a boy .

Seen at 16 sessions, 15 at Space East and 1 at the Design Space.

Blake 20, white of Irish heritage, lived in east London. His preferred pronouns were he/him/his for cis people especially; he was happy for others to just use his name. He lived with his mother and siblings in a Catholic household. He had boyfriend who identified as heterosexual that he'd been with for two years. He was in his last year of university. In the future he wanted to have a motorbike. He described himself as trans, FTM, trans male, not female, and said that he didn't feel like a woman, or a girl, or female. He said that when he had children in the future they would know him as dad. He would be happy to be pregnant but only once his body had changed following hormones, not as a woman. He had a fixed identity as a male-ish person with fluid expression: wearing male attire and female attire. He asked 'why can't I be a guy that cross-dresses?'. If he could choose he'd rather be cisgendered, but a cisgendered guy. He wanted to have hormones – a low dose of testosterone – but not necessarily for the rest of his life. He described himself as non-op: he did not want surgery. At work in the future, he wanted to be seen as a male rather than female, although he did not mind being seen as a man who was trans or feminine.

Seen at 3 sessions at LSPA.

Brendan: 18, white British, lived in a city in south-west England. His preferred pronouns were he/him/his. He was an only child, lived with his parents and their dog. He had a girlfriend. He was in his gap year before going to university; he had been working and planned to travel. He described himself as male, FTM,

trans, and transgender. He described himself as straight, and said he had always being straight: attracted to boys when he identified as a girl. He was seen as male, but said strangers assumed he was a 15-year-old boy. He planned to have hormones and top surgery; he did not want any other surgery. He thought he'd get to a point when he wouldn't see himself as trans, that this was just a transition stage.

Seen at 7 sessions at LSPA and the Design Space.

Chrissy was 23, white British, and lived near south-east London. Her preferred pronouns were she and her. She lived by herself in her own flat. She had three siblings, a mother, father, and stepmother, as well as other extended family she saw occasionally. She was unemployed and had never had a job. She described herself as trans, MTF, male to female, and female. She had always, and still wanted to be a girl, to be female. She doubted she'd ever be a girly, girly, girly girl; she wanted to be a girl that liked gaming. She would have liked to just be perceived as female; sometimes people did see her as girl. She wanted to start with hormones, but her decision about other physical interventions depended on what the hormones did.

Seen at 16 sessions at LSPA and the Design Space; came on the camping trip.

James: 17, white British, from a working class background[33]. His preferred pronouns were he/him/his. An only child, he lived at home with his parents and his dog. Owen, one of the other participants, was his boyfriend. He attended 6th form at an all girls' school, worked as a children's entertainer. He described himself as male, a man who has to be trans to be a man, transgendered, gender variant, and non-cis. In the future he would like to have a family and imagined being with a man; he wanted to adopt children. He had previously identified as genderqueer to male, and gay or lesbian, although he didn't feel comfortable with the word lesbian. He said he 'didn't care' or identified as pansexual, and was attracted to more masculine people. He presented as female at work and at school. He passed inconsistently, and wanted to pass 'properly'. He planned to have hormones and top surgery.

Seen at 6 sessions at LSPA and the Design Space.

Kieran: was 24, white British, and lived north of London. His preferred pronouns were he/him/his. He lived with his mum and their dog. He was finishing his degree, looking for a job, and volunteering as an intern with Engendering Change. He described himself as trans, a guy. He had moved from female identified to male identified, and identified for a short period as gender

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[33] He was the only participant to comment on his class background.

queer before identifying as male. He had previously had a long term relationship with a man although had identified as bicurious or bisexual. He had socially transitioned. He passed as male most of the time. He had been on hormones for a few months and had an appointment for top surgery in another two months. He was not interested in any other surgery.

Seen at 17 sessions at LSPA and the Design Space; came on the camping trip.

Lee: was 18, mixed race British, lived in south-east London. Its preferred pronouns were it/its; in last sessions that I attended Lee sometimes said that its/her preferred pronoun was she. It was an only child and lived with its mother and their cats. It was working as a volunteer for an LGBT organisation doing admin and supporting an under-18s youth group. It was also involved in a queer drama project and was writing an autobiographical book about its transition. It wanted to work in the music industry, and adopt children. It said it would like to marry and that it always imagined marrying a man even though it identified as pansexual. It described itself as a metal head and an internet addict, as well as trans, genderqueer, FTMTF (female to male to femme), femme, non-binary, androgyne, third gender, but said it didn't have a gender most of the time. In the past it had identified as a bi-ish lesbian, FTM, and a guy. It was read as male 'pretty much 100%' but would have liked to confuse people more. Sometimes it wore women's clothes and lingerie. It had socially transitioned 'from FTM', and was transitioning again to something else it didn't know, it would have liked to be genderless. It had been on hormones for three years, and was unsure but thinking about top surgery. It said it would never be stealth.

Seen at 16 sessions at LSPA and the Design Space; came on the camping trip.

Mattius: 20 male, white central European origin, lived in London. His preferred pronouns were he/him/his. He had a mother and a brother but felt unable to live with them, as his preferred identity was not recognised. He had moved to supported housing for young LGBT people. He attended an FE college and wanted to be a freelance web-designer in the future, and to adopt children. He described himself as trans, a trans guy, FTM, and assigned female at birth. He felt both male and female. He had identified for a time as genderqueer. He was read as female most of the time, as a tomboy. He didn't want people to look at him and think 'that's a woman'. He intended to be stealth, but thought that might change once he was on hormones. He identified as pansexual and had previously identified as a lesbian. He was planning hormones and top surgery.

Seen at 14 sessions at LSPA and the Design Space, came on the camping trip.

Nathan: 22, white British, originally from the north of England, lived in a city in the south-east of England. His preferred pronouns were he/him/his. He was in regular contact with his parents who lived in his home town. He was in a

relationship with Tyler, they have become engaged after four years together and he planned to move in to Tyler's flat near south London. He lived in a shared flat with his older sister and another woman. He worked for a large supermarket. In the future he wanted to be an LGBT youth worker, and was working towards this through volunteering as an intern with Engendering Change, the parent organisation of 4D. He described himself as trans, and 'used to be female now male: transgender'. He also described himself as pansexual. In the past he identified as a butch lesbian. He had been on hormones for over three years, and passed all the time as male. He was stealth at work, although he planned to be open about being trans when he became a youth worker. He was planning top surgery, and bottom surgery at a later date.

Seen at 16 sessions at LSPA and the Design Space; came on the camping trip.

Interviewed with Tyler.

Phoenix: 21, black British, lived in London. He felt that he could only expect people to call him either he or she; given this, his preferred pronouns were he/him/his. He lived with his mother and two brothers, and had a girlfriend. He was a second year university student and wanted to be a teacher. He was a feminist. He said 'I'm just whoever, so it feels like I'm all different people'. He described himself as 'doesn't feel female', female to male, 'feels more like a guy than a girl', a boy or a guy, not ready to be a man. He liked girls and had never been attracted to men. He had identified in the past as gay, but never as a lesbian.

He said he didn't mind passing as both male and female. He wanted to remain androgynous but more male; he wanted chest surgery but was unsure about hormones. In the future he wanted to be open about being trans, but was also scared and felt it would make his life more complicated.

Seen at the SOFFAs session and the Christmas party.

Tyler: was 22, white British, lived close to south London. His preferred pronouns were he/him/his. He was a care leaver and lived in his own flat, he planned to live with Nathan. He was engaged to Nathan after four years together. He was starting work at a sexual health service for young people, and was involved in a queer drama project. In the future he wanted to be a youth worker, marry Nathan and have children with him. He had come out a few months before as trans; he had previously tried unsuccessfully to come out as trans when he was 13 to his carers. He felt that he should not have to explain himself to anyone, that he was just being himself. He described himself as presenting as male rather than female, but said he looked like a 15-year-old boy. He was planning hormones and top surgery. He had been open about being

trans with new employer as he said this would mean he didn't have to worry about passing as male before he had been on hormones.

Seen at 7 sessions at LSPA.

Interviewed with Nathan.

Youth workers/ facilitators

Graeme: 26, white British, lived in London. His preferred pronouns were he/him/his. He identified as a trans male, and had socially and medically transitioned.

Jakob: 23, white central European, lived in London temporarily. His preferred pronouns were he/him/his. He identified as trans, queer, and a faggot. He had socially transitioned; he had no medical interventions.

Andolie (me): 50, white British, lived in London. My preferred pronouns changed through the research process: she today, no pronouns, she or he, they. I presented as male or masculine; I had no medical interventions.

Youth group participants:

In my fieldnotes I refer to 64 young people, including the 11 young people I interviewed. The following 23 are people I refer to in my thesis:

Abel: 18 or 19, black British, lived in London. His preferred pronouns were he/him/his, he was at the start of his social transition.

Seen at 6 sessions at LSPA Design Space

Alex: was a trans man referred to by Nathan and Tyler in their interview.

Charlie: 14, mixed race, lived near London. Her preferred pronouns were she/her/hers; she had fully socially transitioned to female,.

Seen at three sessions at LSPA

Chilotam: 18, mixed race British, lived in London. Her preferred pronouns were she/her/hers. She had socially transitioned to female while at school. She had been on a low dose of hormones and was soon starting an adult dose of hormones. She had a place to study at a university in east England.

Seen at 6 sessions at LSPA.

Emily: aged 18-20, was white and northern American. Her preferred pronouns she/her/hers; she was at an early stage in her social transition and presented as conventionally male.

Seen at three sessions at Space East

Haley: aged 23, black British, lived in east London. Her preferred pronouns she/her/hers; she had socially transitioned and started on hormones. She was unemployed.

Seen at 12 sessions at Space East

Jacky: aged 24, white British, lived in London. Its preferred pronouns were it/its. Jacky had fully medically and socially transitioned from male to female, and had moved to identifying as genderqueer with preferred pronoun it. It worked in a bar.

Seen at 8 sessions at Space East, and LSPA.

Jayden: aged 18, white British, lived near London. His preferred pronouns were he/him/his; he had socially transitioned.

Seen at 3 sessions at the Design Space including swimming.

John: 18-21, white British man. His preferred pronouns were he/him/his, he had socially and medically transitioned.

Seen at 1 session at the Design Space

Kim: 19 or 20, white British, lived in London, studied at a university in west England. Her preferred pronouns were she/her/hers; she had socially transitioned and had recently started hormones.

Seen at 6 sessions at LSPA.

Mia: 13, white British, lived in a city in south west England. Her preferred pronouns were she/her/hers, after 2 sessions declaring birth name and pronouns. She was starting her social transition. She was a school student.

Seen at 6 sessions at the Design Space including swimming.

Miles: 14, mixed race British, lived in London. His preferred pronouns were he/him/his; he had socially transitioned to male. He was a school student.

Seen at 4 sessions ongoing Design Space and LSPA

Naomi: 18, British Turkish, lived near London. Her preferred pronouns were she/her/hers; she was at an early stage in her social transition and presented as conventionally male.

Seen at 4 sessions at LSPA and the Design Space.

Noah: 23 or 24, studying for a PGCE in London. His preferred pronouns were he/him/his; he had socially and medically transitioned.

Seen at 6 sessions in London Design Space

Oliver: white British, lived in London. His preferred pronouns were he/him/his; he had socially transitioned.

Seen at 1 session at the Design Space.

Owen: 21 or 22, white British, studied at university in south England. He was James's boyfriend. His preferred pronouns were he/him/his. He had socially transitioned, and was on hormones.

Seen at 4 sessions LSPA

Reese: 19, white British, lived in London. Reese started at 4D identifying as genderqueer with preferred pronouns he or they. He then identified as male with were preferred pronouns he/him/his. At my last observation he had changed his name to Tom. He had socially transitioned.

Seen at 12 sessions at LSPA, and the Design Space; came on the camping trip.

Sam: 18 or 19, mixed race British, lived in the west of England. Sam's declared preferred pronouns were he/him/his. Sam also said 'they' hadn't presented as 'they' wanted. Sam said 'they' were a gay man questioning 'their' gender identity.

Seen at 2 sessions at the Design Space.

Kodi: 15, white British, preferred pronoun ze, lived in east London. Ze was a school student and identified as genderqueer.

Seen at 10 sessions at Space East

Sylvia: 23 or 24, white, lived in London. Her preferred pronouns were she/her/hers. She was studying for a master's degree. She attended 4D intermittently and moved from social through medical transition over the time of my observations and then stopped attending 4D.

Seen at 9 sessions at LSPA and the Design Space.

Willow: 20 or 21 white, was a student in London. Her preferred pronouns she/her/hers. She was a cis young woman. She attended one session at the Design Space to support another youth group participant.

Zak: 18 or 19, white British and northern European, lived in London. His preferred pronouns were he/him/his. He moved from having social

transitioned through medical transition over a period of a few months and then left 4D.

Seen at 7 sessions at LSPA, and the Design Space.

Zoe/Luke: 17 or 18, white British, lived in north London. Zoe attended regularly for 12 sessions, with preferred pronouns she/her/hers. He then transitioned socially to Luke with preferred pronouns he/him/his, and attended 3 sessions.

Seen at 15 sessions at Space East, LSPA, and the Design Space; also came on the camping trip.

Spaces

Space East: an LGBT space in East London. An LGBT youth group would meet two or three times weekly and 4D, the trans specific group, would meet once a week.

The Design Space: occupied a floor in a shared office building.

LSPA: London School of Performing Arts, a performing arts school incorporated in the University of London.

Appendix 1: invitation to participate - flyer

INVITATION:

TO PARTICIPATE IN A RESEARCH STUDY

I would like to invite you to be interviewed as part of my research into the identities and experiences of young people who are trans or genderqueer, or who are questioning their gender identity.

My intention is to make better knowledge available to professionals (for example teachers and doctors), parents, families and other young people about trans, genderqueer or gender-questioning young people so that their lives may become easier.

My research is part of a PhD in Educational Studies at Goldsmiths, University of London. Details of the interviews will be kept strictly confidential, and all information will be anonymised to protect the identities of all the young people and of the youth group.

If you are interested in learning more or being interviewed please email me. All enquiries and discussions will be confidential.

Thanks, Andolie

Andolie Marguerite

a.marguerite@gold.ac.uk

Appendix 2: Invitation to participate - email

Are you trans or genderqueer (or identify outside of the gender binary in other ways) or are you questioning your gender identity?

If so, I would like to talk to you about your experiences and your thoughts about your gender identity

My name is Andolie Marguerite. I have been volunteering with the GI youth group for nearly 2 years. Those of you who have been to the youth group will know me as the long-term volunteer youth worker.

I am doing a PhD at Goldsmiths, University of London about the identities and experiences of young people who identify as trans or genderqueer (or in other ways outside the gender binary!) or who are questioning their gender identity or identities. As part of my research I am interviewing young people about their lives and how they think about themselves.

There is very little research that has been done from the perspective of young trans/genderqueer/gender-questioning people (your perspective!). I want to change that. My research aims to give professionals (teachers and doctors), as well as parents, young people and others a better understanding of trans, genderqueer and gender-questioning young people.

At this stage of my research I would like to talk to young people who have been to the GI youth group. This includes people who have only been to one or two sessions in the past or more recently, as well as people who have been to lots of sessions. In the future I will interview people who have not been to the GI youth group, who may or may not be involved in any other groups or organisations.

If you think you may be willing to talk to me in complete confidence, or just want to know more about my project, please email me. I will be happy to ring you if you would like talk to me, please include your number and suggest times for me to ring. I am also happy to reply by email.

All discussions and interviews will be strictly confidential. I will not share any information with GI staff or other young people. I will anonymise all information in my findings to protect the identities of all the young people and the youth group.

Appendix 3 – camera letter

<div align="right">

Department of Educational Studies

Goldsmiths

University of London

New Cross

London

SE14 6NW

</div>

January 31st 2009

Dear young person,

I am looking forward to interviewing you as part of my research.

I think it would be interesting if you took some photos for me and so I am giving you a camera.

Would you take photos of people, places and things that are important to you (good or bad)?

If you want you could also draw a picture or write a story about yourself (or both if you want). I could be about when you were little, about growing up, or about when you will be older in the future; it could be real or made up.

Thankyou,

Andolie Marguerite
PhD Candidate,
Educational Studies Department
Goldsmiths
University of London

Appendix 4: explanation of participation

What does participation in the study mean?

You will have contacted the researcher after having seen a flyer or advertisement about the study, or heard about the study from someone else. You will have said that you were interested in receiving more information about the study, and the researcher will have explained the study to you already. We would now like to invite you to participate in a one-to-one interview with the lead researcher of this project.

- The interview will take about to an hour and a half
- The interview will be audio-recorded, with your permission, so that a written transcript of the interview can be analysed by the researcher
- Anything you tell the researcher in the interview will remain anonymous and confidential; in other words, nobody else will be told what you have said, unless you tell the researcher that your health, safety or welfare, or that of someone else, is at grave risk. If this does happen, the researcher may have to discuss this with someone else but will discuss this with you if this is deemed necessary.
- You do not have to tell the researcher any personal information about yourself if you do not want to, or answer any questions in the interview that you feel uncomfortable about, and you can leave or terminate the interview at any time
- We are unable to pay you for your time but we hope that you enjoy the interview and the opportunity to reflect on your life and gender identity
- You may find discussing some of the personal matters in the interview embarrassing or upsetting: if this happens you can ask the researcher to pause the interview or you can ask for the interview to be stopped. You may wish to discuss your feelings with the researcher and/or a counsellor or other organisation or individual who can offer you help and support with your feelings.

What will happen if I decide I do not wish to participate in the study?

It is up to you to decide whether you wish to take part in this study or not. If you choose not to participate there will be no penalty of any kind. If you do decide you want to take part, you will be given this information sheet to keep and will be asked to read and sign a consent form. If you do take part, you are still free to withdraw at any time and without giving a reason.

What will happen to the information collected in the interview?

Information collected will be primarily used in the researcher's PhD thesis which is investigating the experiences and identities of young people who identify as trans, genderqueer or who are questioning their gender identity.

The interview will be audio recorded, with your permission, and then transcribed by the researcher carrying out the interview into an accurate written record of exactly what you said. This transcript can only be identified as yours by a code that only the researcher will

have access to and which is securely stored. Anything you say will not be attributed to you in this project report or at any time in the future: a pseudonym will be used at all times.

Any written records or notes will be securely stored, as will any audio recordings, computer files or photographs and will only be accessed by the researcher. This is in accordance with The Data Protection Act 1998 and Goldsmiths University of London guidelines.

Any electronic records will be kept on a password-protected computer, accessible only by the researcher. Any records about you will be anonymised: this means that any interviews or records about you will be stored under a code number and not your name.

Any identifiable data including contact details, consent forms, the key to the codes and all audio recordings will be kept for 10 years after the study has ended and then destroyed. Any paperwork containing any information which may identify you will be shredded after those 10 years. Any computer files containing any information which may identify you will be deleted but any electronic, anonymised transcripts will be kept. All audio recordings of the interviews will be deleted from the audio recorder.

Appendix 5: consent letter

<div align="right">
Department of Educational Studies
Goldsmiths
University of London
New Cross
London
SE14 6NW
</div>

January 7th 2010

Dear young person,

As you know, I have been attending youth group sessions for many months as a volunteer youth worker. This is in cooperation with the paid staff, who have verified my police security clearance. Interviews and observations form part of my research into the views and experiences of young people who identify as trans, genderqueer or who are questioning their gender identity.

The research forms the basis of a PhD in Educational Studies at Goldsmiths, University of London and the findings of the study will contribute both to my PhD thesis and to further academic publications. The identities of all the young people and of the youth group will be kept strictly confidential and the detailed content of the interviews will only be available to myself and to my PhD supervisors (two members of faculty at Goldsmiths).

I would like to carry out an interview with you, as well as with some of the other young people.

If you have any questions or concerns about the study or the interviews, please address these either to me or to my PhD supervisor, Professor Carrie Paechter. I can be contacted by email at: a.marguerite@gold.ac.uk. Professor Paechter can be contacted on 020 7919 7355 or by email: c.paechter@gold.ac.uk.

I may also wish to carry out further interviews over the next one or two years, but not more than one or two interviews each year.

Yours sincerely,

Andolie Marguerite
PhD Candidate,
Educational Studies Department
Goldsmiths
University of London

To give your permission, please sign one copy of this letter and give it to me, Andolie Marguerite

I _____ (name)

consent to be interviewed by Andolie Marguerite as part of this study on the views and experiences of young people who identify as trans, genderqueer or who are questioning their gender identity.

Signed: _____

_____ (date)

_____ (contact number and/or email)

_____ (name)

Appendix 6: tailored consent letter

<div align="right">

Department of Educational Studies

Goldsmiths

University of London

New Cross

London

SE14 6NW

</div>

xxxx xxth 2010

Dear xxxx,

As you know, I have been attending youth group sessions for many months as a volunteer youth worker. This is in cooperation with the paid staff, who have verified my police security clearance. Interviews and observations form part of my research into the views and experiences of young people who identify as trans, genderqueer or who are questioning their gender identity.

The research forms the basis of a PhD in Educational Studies at Goldsmiths, University of London and the findings of the study will contribute both to my PhD thesis and to further academic publications. The identities of all the young people and of the youth group will be kept strictly confidential and the detailed content of the interviews will only be available to myself and to my PhD supervisors (two members of faculty at Goldsmiths).

I would like to carry out an interview with you, as well as with some of the other young people. I may also wish to carry out further interviews over the next one or two years, but not more than one or two interviews each year.

If you have any questions or concerns about the study or the interviews, please address these either to me or to my PhD supervisor, Professor Carrie Paechter. I can be contacted by email at: a.marguerite@gold.ac.uk. Professor Paechter can be contacted on 020 7919 7355 or by email: c.paechter@gold.ac.uk.

To protect your identity I will not use your name in my thesis or any publications and I will change your initial in interview transcripts, I will alter details of your personal appearance if I make any detailed descriptions of you, and I will alter or omit other information, for example place names, that may lead to your identification. When I

have transcribed your interview I will arrange to meet you so that you can read and comment on the interview and you will have the opportunity to elaborate on or alter what you have said. I will also seek your views on how you hope my research will be used.

Yours sincerely,

Andolie Marguerite

PhD Candidate, Educational Studies Department, Goldsmiths

To give your permission, please sign one copy of this letter and give it to me, Andolie Marguerite

I _____ (name)

consent to be interviewed by Andolie Marguerite as part of this study on the views and experiences of young people who identify as trans, genderqueer or who are questioning their gender identity.

Signed: _____

_____ (date)

_____ (contact number and/or email)

_____ (name)

Appendix 7: introduction and conclusion to interviews

Introduction to interviews

I am doing some research, finding out about, children and young people who do not gender conform. That is who are not conventionally masculine or feminine.

I will be interviewing young people to find out about their experiences, and how they think about themselves. I hope to find out more about young people like you so that professionals, teachers and doctors, and parents can understand them better, and perhaps make it a bit easier for them.

When I have finished my research I will write a thesis, which is like a book, and parts of my thesis may be published in journals, which are specialist magazines. So that people won't know who I am writing about I will change everyone's names. If you want you can choose the name I use for you in my thesis.

I would like to interview you, to ask you some questions, because I think you will be very helpful but you don't have to be interviewed if you don't want to be. If you agree to be interviewed and you don't want to answer a question or several questions you don't have to. If you change your mind you can tell me that. You can even just walk out of the interview.

The interview is 'confidential', that is I won't tell anybody the things you say to me in the interview, not even your family. It is very unlikely, but if you tell me something that I think means you or someone else have been badly hurt or are in danger I will have to tell someone about that. If I am worried about something you say I will tell you, and I will tell you what I am going to do.

Do you think you are happy for me to interview you? Can I record our conversation so that I don't forget things that you have said when I go home?

Please ask me if you don't understand any of my questions. Please tell me about things you think are important or interesting even if I haven't asked, as I may have forgotten or not thought about those things.

At the end: Letting them ask questions

When we started the discussion, or before the discussion, what did you think it was going to be like, what did you think we would ask you? Or was it what you expected?

Do you think there's anything else I should have asked you? Or anything else you would have liked to talk about?

Are there things you wonder about? Is there maybe something you'd like to find out more about?

I'm also going to interview some other young people, older and younger. What do you think I should discuss with them? What should I ask them? Any suggestions.

Appendix 8: interview prompts

Outline

I want to know a bit of background, how you became involved with GI. What it is like being involved with GI and if it's changed anything for you. And how you see the future.

Background

Can you give me a bit of background about yourself?

Age

Occupation now

Do you go to school/college/university/work/volunteer/are unemployed/have caring responsibilities?

Where do you live, is that your permanent place of residence? Who do you live with?

How did you get to where you are now?

Will you start by telling me about yourself when you were younger.

What other things did you used to do? What communities were you part of?

Can you describe how you used to think about your gender, and your sexuality, did those 2 go together?

Was this different in different places?

How did other people think about your gender and sexuality?

Was this different in different places?

And how did you present yourself? Appearance: clothes, makeup, haircut, depilation, binding, packing, falsies? And identity: pronouns and labels

Was this different in different places?

Can you talk about how other people in different places communities/ institutions related to you? and what effect did that have on you?

Can you describe how you came to join the GI youth group?

Trajectories in

Significant moments

Good and bad things/people

Significant people

Other groups they were involved in

How they felt about themselves

Reactions from people around them

How they developed awareness of themselves

Understanding of possible identities

Attraction/repulsion factors

Identity

Relationships

Clothes

Underwear

Legal changes

Surgery

Hormones

Pronouns

Types of masculinity/femininity

Labelling

What is it like for you now?

What it's like for you at GI?

How does being involved with the GI youth group affect other parts of your life?

Can you tell me about yourself now?

What other things do you do? What other groups or communities are you involved with?

Can you describe how you think about your gender, and your sexuality, do these 2 go together?

Is this different in different places?

How do other people think about your gender and sexuality?

Is this different in different places?

And how do you present yourself? Appearance: clothes, makeup, haircut, depilation, binding, packing, falsies? And identity: pronouns and labels

Is this different in different places?

Can you talk about how other people in different places communities/ institutions relate to you? and what effect does this have on you?

Why you come to the GI youth group?

Are there things you find difficult about the group?

If you don't come to every session what are the reasons for that?

Being there

Has your sense of your identity changed?

Other communities they are part of

Sense of comfort/liveableness

How does attending GI help

Are there things that are difficult?

Others' understanding of your identity

Possibilities to establish/affirm/experiment with identity

Significant group members

Other discourses they have to negotiate with

- Medical
- Established trans identities
- Parents/family/school views

Effects on other communities

Reactions to go to GI from others

Identity

Relationships

Clothes

Underwear

Legal changes

Surgery

Hormones

Pronouns

Types of masculinity/femininity

Labelling

What are your hopes and fears for the future?

What other things would you like to do? What communities would you like to be part of?

Can you describe how you hope you will think about your gender, and your sexuality, do those 2 go together?

Will this be different in different places?

How do you hope other people will think about your gender and sexuality?

Will this be different in different places?

And how will you present yourself? Appearance: clothes, makeup, haircut, depilation, binding, packing, falsies? And identity: pronouns and labels

Will this be different in different places?

Can you talk about how you imagine other people in different places communities/ institutions will relate to you? and what effect this will have on you?

And fears?

Trajectories out

Planned trajectory

What do you imagine for the future/ for the next few years/ later on

Identity

Relationships

Clothes

Underwear

Legal changes

Surgery

Hormones

Pronouns

Types of masculinity/femininity

Labelling