

## **Gender, Stage of Transition and Situational Avoidance: A UK study of trans people's experiences**

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## **Abstract**

Most societies are heavily organised around a dichotomous model of gender, and individuals are heavily policed on their conformity (or otherwise) to gender norms. This scrutinisation of gender has a profound impact on the identities and lived experiences of trans people, especially for those whose gender identity (or presentation) does not appear to match social expectations for that gender; or where someone's physical body in some way does not match the body conventionally associated with that gender. This might result in trans people avoiding certain situations to reduce the risk of being exposed. Based on a sample of 889 UK-based participants who self-defined as trans, the current paper explores situational avoidance with particular reference to gender identity and stage of transition. A key finding of this study concerned statistically significant associations between group (gender identity; stage of transition) and avoidance (or not) of certain situations, namely clothing shops, gyms, and public toilets. The implications of these findings for supporting trans people through transition – in particular, the Real Life Experience (RLE) are also discussed.

## **Keywords**

Trans, Real Life Experience (RLE), gender identity, transitioning.

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## **1. Introduction**

The construction of gender rests heavily on the assumption that sex (and therefore gender) is robust, comprising two (and only two) mutually exclusive categories which are fixed (cannot be changed) and are stable (do not vary across time and context). For most people, this assumption is relatively unproblematic in that their gender identity maps directly onto their biological sex. That is, most people assigned female at birth (based on their genitalia conforming unambiguously to this label) identify unequivocally as girls/women and most people assigned male at birth (based on their genitalia conforming unambiguously to this label) identify unequivocally as boys/men. These identities are fixed and stable, and fit neatly into a dichotomous model of sex/gender.

For a sizeable minority of people though, gender does *not* map neatly onto biological sex. A relatively small number of individuals vary in the extent to which they are biologically defined as male or female. For example, some have atypical chromosomal patterns (as in Klinefelter's Syndrome and Turner's syndrome) while others have genitalia which are neither definitively female nor definitively male (i.e. are intersex). However, because of the deeply ingrained belief that people are (and should be) either male or female, the latter are usually surgically sex-reassigned in infancy. The other group – and that to which the present paper primarily attends – is 'trans' people. In the UK the umbrella term 'Trans' is used to encompass the diverse range of people who find their personal experience of gender differs from the way in

which gender is conventionally constructed within society. Whilst some trans people may have a gender identity which conforms to the binary norm (i.e. as men or women, irrespective of assigned sex), others may use alternative labels to define their gender (e.g. 'bigender', 'androgynous', 'polygender') or not define their gender at all (e.g. 'gender-neutral').

Although they may not necessarily use that label, those who might broadly be considered trans would include trans men (people assigned female at birth but who identify as male), trans women (people assigned male at birth but who identify as female), androgynous and polygender people and cross-dressers/transvestites<sup>1</sup>. Some people within these categories may desire to undergo surgery or medical intervention to achieve a body congruent with their gender but many do not. For example, in one study (Yerke & Mitchell, 2011), it was found that it was not uncommon for transmen to undergo 'top surgery' (i.e. mastectomy) but not to undergo 'bottom surgery' (i.e. construction of a penis). Conversely, people who 'fit' within the trans umbrella may not see themselves as trans; in particular (but not exclusively) those who are cross-dressers. Similarly, those who have already transitioned may see themselves as men/women (perhaps with a trans status or history) but not 'trans' as such.

To date, there is no official estimate of the UK trans population. However, we do know that, although relatively small, the trans population has increased significantly in recent years and continues to rise. Reed *et al.* (2009) estimate the number of transsexual people in the UK (i.e. those who undergo gender reassignment) to be in the region of 10,000 and the transgender population, i.e. those who identify as a

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<sup>1</sup> Some intersex people may also identify as Trans.

gender other than that assigned to them at birth, in the region of 300,000. However, a large proportion of this population are relatively invisible, particularly those individuals who are not obviously different from cisgender<sup>2</sup> men and women, and those who live by stealth.

Most societies are heavily organised around a dichotomous model of gender. For example, it is virtually impossible to go about one's daily life without having to complete documentation requesting whether one is 'male' or 'female'. For everyone then, subjectivities (people's opinions/beliefs/judgements about, and the way they experience, themselves and others) are constructed within a framework of gender difference. Therefore, gender becomes the reference point for measuring how we fit, or how we deviate from, gender norms; and the basis on which our gender conformity/difference is policed. This scrutinisation of gender has a profound impact on the identities and lived experiences of trans people. For many trans people there may be some degree of incongruity between the individual's gender identity and the way in which their gender is read by others (Clifford & Orford, 2007; de Vries, 2012). This mismatch has the potential for trans people to be exposed as trans (and therefore 'othered' from the male/female gender binary) or being subject to transphobic discrimination/hostility for deviating gender norms. As indicated by others, this level of stigma/discrimination is detrimental to the wellbeing of trans people, ultimately affecting their quality of life (Pitts et al., 2009; Sjoberg, Walch & Stanny, 2008).

While transphobic incidences are of concern, transphobia is not just manifest through *actual* acts. As suggested by Kitzinger (1996), one of the ways in which

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<sup>2</sup> People who are not trans and do not have any trans history. That is, people whose gender identity and expression has always been typically associated with the sex they were assigned at birth.

prejudice is manifested is through individuals avoiding situations that might expose them to harassment or discrimination. For example, in referring to homophobia she writes:

In an oppressive society, it is not necessary, most of the time, to beat us up or to murder or torture us to ensure our silence and invisibility. This is because a climate of terror has been created instead in which most gay people voluntarily... stay silent and invisible. (p. 11)

This would seem to hold equally true for trans people. As highlighted by others (e.g. Couch et al., 2007; Speer & Green, 2007); because of past experiences, the experiences of friends, and an awareness of general attitudes towards trans people, many trans people fear for their safety and will modify their behaviour in order to avoid being the subject of that prejudice. Therefore, many trans people adopt strategies of either 'passing' as male or female; or presenting themselves in a fashionable (and therefore acceptable) gender-neutral way to avoid social scrutiny (Couch et al., 2007). Being accepted as the gender with which they identify is extremely important to the trans person. 'Passing' in this sense is therefore not about deception or denial, but rather about reaching a point where one is taken as intended (Speer & Green, 2007). While some trans people clearly present as male/female and therefore are more readily recognised as such, for others – such as those in the process of transitioning; or those who do not unequivocally identify as male/female – the process of passing can be more difficult to accomplish. However, this is not about the trans individual themselves, but rather about the constraints of a socially deified binary construction of gender. Never-the-less, incongruence between internal and external manifestations of gender have been found to relate to significant emotional turmoil and distress, impacting on trans people's social and personal wellbeing (Ainsworth & Spiegel, 2010).

Another strategy – used in isolation or in conjunction with ‘passing’ – is to avoid social situations in which one’s gender might be thrown into the spotlight. While there are potentially a wide range of situations that may be problematic, the most likely candidates are those that involve some level of bodily exposure (e.g. gyms; clothing shops; public toilets). However, due to physiological changes (e.g. change to pitch of voice) that occur during hormone therapy other apparently innocuous situations might also be sensitive for some trans people. For example, as one of our participants reported ‘on public transport I try to minimise talking to anyone due to my voice sounding ambiguous which makes me worry about being harassed or attacked’. It might also be expected that fear of these situations would be more acute where one’s gender identity (and presentation) does not appear to match social expectations for that gender; or where someone’s physical body in some way does not match the body conventionally associated with that gender.

While a limited number of previous studies (e.g. Couch et al., 2007; Lombardi, 2009) have explored incidences of homophobia and have articulated some of the measures that trans people might take to avoid prejudice, to date no study has specifically explored situational avoidance in trans people. Given that some manifestations of trans might involve a non-dichotomous gender identity or physiological variation from standard gender norms, it might be expected that situational avoidance is more acute for those who do not clearly identify as, or appear to be, ‘male’ or ‘female’ including those who are currently transitioning. This is likely to be the case because gender non-conformity and/or internal-external gender incongruence (Clifford & Orford, 2007) makes it more difficult to ‘pass’. The study presented here therefore advances research on transphobia by exploring situational

avoidance among trans people, with particular reference to gender identity and stage of transition.

## **2. Method**

### 2.1 The survey

The survey from which this data was drawn was designed to comprehensively explore mental health and wellbeing in trans people in the UK as part of a larger study (see McNeil, Bailey, Ellis, Morton, & Regan, 2012). As well as including a range of questions designed to capture the gender diversity of the sample (e.g. gender identity; transition status) a variety of demographic questions (e.g. age, country of domicile, ethnic background) were asked in order to define the sample as a whole. The substantive content of the survey, however, comprised questions on life satisfaction, physical changes to the body, experiences of daily life as a trans person, experiences of using health services (e.g. mental health services; gender identity clinics), current/past mental health, and social support. For the purposes of the analysis presented here, just the responses to questions about situational avoidance have been subject to analysis. This comprised the questions 'have you ever avoided any of the following situations because of a fear of being harassed, being read as trans, or being outed?' (for which participants were provided with a number of situations as well as being able to add 'other' situations) and 'do you expect that you will have to avoid any social situations or places in the future because of a fear of being harassed, being read as trans, or being outed?' (for which 'yes', 'no', and 'don't know' forced-choice options were provided).



## 2.2 Procedure

The survey was compiled by the immediate research team, some of whom work closely with trans people in their professional lives. It was developed through extensive engagement with both published and unpublished literature around mental health and wellbeing in trans people, and partially drew on existing questions used in related studies (e.g. the Canadian TransPULSE project, 2009; see <http://transpulseproject.ca>). We also consulted with key stakeholders, including an advisory group of trans community representatives, professionals and researchers (many with trans identities or histories).

The finalised version of the survey was disseminated through a wide range of organisations and key individuals. Dissemination took the form of a briefing about the study and a direct link to the electronic survey (hosted by Survey Monkey), which we circulated to key organisations throughout the UK via their social networking sites (where access was easy to obtain) or through the main contact listed on their webpages. Those approached included trans or LGBT organisations and networks based nationally (e.g. The National LGB&T Partnership; the National Trans police Association; Mermaids), regionally (e.g. TREC; Scottish Transgender Alliance; Yorkshire MESMAC), or locally (e.g. Norfolk Trans Forum; FTM Nottingham) and projects/organisations with a remit around improving the lives of trans people (e.g. GIRES; GENDYS) as well as those with more tangential links with the trans community such as professional networks (e.g. BPS Psychology of Sexualities Section) and LGBT-friendly organisations (e.g. The Metropolitan Community Church). The survey was distributed through more than 70 organisations/groups. Close to

1500 trans people at least partially completed the survey. Prior to analysing the data, we removed from the data set responses from participants who were not UK-based. In addition, responses from participants who completed very little of the survey were also removed. This resulted in a final sample of 889 participants on which the analyses presented here are based.

The data for the entire survey was imported into SPSS from Survey Monkey and, where necessary, recoded to facilitate analysis. The data on situational avoidance presented here has been statistically analysed; in some instances supported by (qualitative) anecdotal evidence. In addition to the use of descriptive statistics, the quantitative data has also been analysed using chi-square tests to explore whether or not there was an association between gender identity or stage of transition and avoidance or not of specific situations. It is acknowledged that this approach does not – in most instances – provide a detailed understanding of *why* individual participants do or do not avoid specific situations. However, it is important to have some understanding of the interaction between factors such as gender identity or stage of transition and the situations where these factors might be salient in the adjustment of trans people to a social world in which they may feel ‘othered’.

### 2.3 Participants

The total sample for the UK Trans Mental Health Survey (McNeil et al., 2012) comprised 889 UK-based participants who self-defined as trans. However, because not all participants answered all questions, some of the analyses presented here are based on a subset of the sample. So, while overall analyses may include responses from up to the full 889 respondents, analyses exploring gender identity differences are based on just the 769 respondents who provided an indication of their gender

identity. Similarly, analyses exploring differences as a function of stage of transition are based on the 800 participants who indicated their current status with regard to stage of transition.

The sample on which the analyses here are based represented trans people with a range of gender identities and at various stages of transition. The majority of respondents reported having a constant and clear binary gender identity as either female (39.9%) or male (24.8%); a comparatively small number having a constant and clear non-binary gender identity (7.9%); and a sizeable minority having a variable or fluid gender identity, no gender identity or who were unsure about their gender identity (24.2%). In terms of transition status, just 12.5% of respondents had not undergone and did not propose undergoing any part of a process of gender reassignment or transition while 71.9% were either proposing, undergoing, or had undergone a process (or part of a process) of gender reassignment or transition. For full details of the breakdown of participants by gender identity and transition status, see table 1.

Due to non-completion of the demographic questions by a number of respondents, the complete profile of the sample is not known. However, of those who did complete this section (N=518 participants) their ages ranged from 18-78 years; they were predominantly white British/Northern Irish/Scottish/Welsh or English (86%) with fewer than 8% being from other white backgrounds, and less than 7% from other ethnic groups. With reference to geographical location (N=518), the majority of respondents lived in England (around 84%), with the remainder living in Scotland (11%), Wales (4%), and Northern Ireland (less than 1%).

It is recognised that the data presented here is based on a self-selecting sample, and consequently may not be as representative as would be desirable for statistical analyses such as those presented here. However, there *is* no means of definitively identifying the trans population in its entirety in order to draw a random (and therefore representative) sample. Nevertheless, given the high response rate to our survey, we are confident that data collected represents the views and experiences of a sizeable proportion of the trans community. Although we cast our net wide in recruiting participants, there are undoubtedly some sub-groups of the trans population that we have not been able to reach and whose views /experiences are therefore underrepresented here.

### **3. Results**

In our survey we asked 'have you ever avoided any of the following situations because of a fear of being harassed, being read as trans, or being outed'. 67.9% of our respondents reported having to pass as non-trans on multiple occasions to be accepted. For the whole sample, 38.8% reported avoiding public toilet facilities and 38.4% reported avoiding gyms. Similarly, over a quarter of respondents reported avoiding clothing shops (29.8%), other leisure facilities (29.6%), and clubs or social groups (26.7%); and just under a quarter reported avoiding public transport (24%). A sizeable minority also reported avoiding travel abroad (22.2%) and restaurants and bars (19.2%) while for some, other situations (e.g. supermarket, pharmacy, schools) were also seen as problematic. When asked 'do you expect that you will have to avoid any social situations or places in the future because of a fear of being harassed, being read as trans, or being 'outed' just over half (51.5%) responded

'yes'. This would seem to suggest that adopting avoidance strategies is relatively common among trans people.

As physical manifestations of gender can make a substantial difference to both self-confidence and to others' perceptions of trans people, we have also looked at these responses by gender identity group and also by transition status. This gives a more nuanced understanding of how transphobia might be manifested in each of these situations. A full breakdown of responses can be found in table 2 (for gender identity) and table 3 (for transition status).

[Insert table 2 about here]

When broken down by gender identity, a statistically significant association was observed between group and social situation (e.g. clothing shops, gyms, public toilets, etc).

Those with a constant and clear gender identity as a man more often reported avoiding clothing shops (40.1%) than did those with a clear and constant identity as a woman (22.4%). However, reported avoidance was highest for those with a clear and constant non-binary gender identity (55.6%) and those who identified as 'other' (56%). An overall analysis of all gender identity categories for avoidance (or not) of clothes shops yielded a  $\chi^2$  value of 29.9 (DF=6) and was found to have an associated probability of <0.001. This suggests that there are significant differences in responses by gender identity group. A series of 2x2  $\chi^2$  tests comparing pairs of gender identities with avoidance (or not) of social situations indicates that for clothes

shops there are highly significant associations between gender pairings and avoidance (or not) of going into the shops in responses between respondents with a constant gender identity as a woman and those with a constant gender identity as a man ( $\chi^2 = 5.2$ ,  $DF=1$ ,  $p=0.022$ ), those with a constant non-binary gender identity ( $\chi^2 = 14.8$ ,  $DF=1$ ,  $p<0.001$ ) and those identifying as 'other' ( $\chi^2 = 14.8$ ,  $DF=1$ ,  $p<0.001$ ). Statistically significant differences were also identified between those with a constant non-binary gender identity and those who have no gender identity (12.800,  $DF=1$ ,  $p<0.001$ ) and those who are unsure of their gender identity (5.944,  $DF=1$ ,  $p=0.015$ ). These findings indicate that trans people who firmly identify as men, or who identify as 'other' are significantly more likely to avoid clothing shops than those with a firm identity as women; and that trans people with a firm non-binary gender identity are significantly more likely to avoid clothing shops than those who firmly identify as women, have no gender identity or who are unsure of their gender identity.

For gyms, reported avoidance was highest for those with a constant and clear gender identity as a man (58.9%), but almost as high for those with a constant and clear non-binary gender identity (52.4%) and for those who self-defined as 'other' (56.0%). An overall analysis of all gender identity categories for avoidance (or not) of gyms yielded a  $\chi^2$  value of 27.8 ( $DF=6$ ) with an associated probability of  $p<0.001$ . A series of 2x2  $\chi^2$  tests indicates that for gyms there are highly significant associations between gender pairings and avoidance (or not) of gyms between those with a constant gender identity as a woman and those with a constant gender identity as a man ( $\chi^2 = 7.3$ ,  $DF=1$ ,  $p=0.007$ ), those with a constant non-binary gender identity ( $\chi^2 = 4.2$ ,  $DF=1$ ,  $p=0.039$ ), those with no gender identity ( $\chi^2 = 3.8$ ,  $DF=1$ ,  $p=0.052$ ), and those identifying as 'other' ( $\chi^2 = 5.9$ ,  $DF=1$ ,  $p=0.015$ ). This seems to suggest that

within the trans population those who identify as women are significantly less likely to avoid gyms than are most other gender identity groups. Similarly, there were statistically significant differences in the responses of those with no gender identity and those with a constant identity as a man ( $\chi^2 = 20.5$ ,  $DF=1$ ,  $p < 0.001$ ), those with a constant non-binary gender identity ( $\chi^2 = 15.3$ ,  $DF=1$ ,  $p < 0.001$ ) and those with a variable or fluid non-binary gender identity ( $\chi^2 = 6.9$ ,  $DF=1$ ,  $p = 0.009$ ). Those with no gender identity would therefore appear to be significantly less likely to avoid gyms than those identifying as men and those with a non-binary gender identity (constant or variable/fluid).

As might be predicted, public toilets were the most problematic situation and therefore for some groups elicited the very highest levels of avoidance. There was a large difference in levels of avoidance reported by those with a constant gender identity as a woman (24.3%) compared with those with a constant gender identity as a man (64.5%) and those with a constant non-binary gender identity (66.7%) in particular. For this item, an analysis of all gender categories for avoidance (or not) of public toilets yielded a  $\chi^2$  value of 41.7 ( $DF=6$ ) with an associated probability of  $p < 0.001$ . A series of 2x2  $\chi^2$  tests indicated that for public toilets there are highly statistically significant associations between gender pairings and avoidance (or not) of public toilets between those with a constant gender identity as a woman and those with a constant gender identity as a man ( $\chi^2 = 18.8$ ,  $DF=1$ ,  $p < 0.001$ ), those with a constant non-binary gender identity ( $\chi^2 = 20.3$ ,  $DF=1$ ,  $p < 0.001$ ), those with a variable or fluid non-binary gender identity ( $\chi^2 = 7.5$ ,  $DF=1$ ,  $p = 0.006$ ), and those identifying as 'other' ( $\chi^2 = 12.8$ ,  $DF=1$ ,  $p < 0.001$ ). There were also significant differences for this item between those with no gender identity and those identifying as men ( $\chi^2 = 18.9$ ,

DF=1,  $p < 0.001$ ), those with a constant non-binary gender identity ( $\chi^2 = 20.3$ , DF=1,  $p < 0.001$ ), and those with a variable or fluid non-binary gender identity ( $\chi^2 = 7.4$ , DF=1,  $p = 0.006$ ). These findings indicate that those identifying as women and those with no gender identity were least likely to avoid public toilets. However, this is not entirely surprising in that for trans men, being (usually) someone with a vagina in a space with penises marks one out as different and presents a safety risk. There have often been reports of trans men being raped in toilets when 'discovered' which creates a climate of fear for trans men in these situations.

No statistically significant association was found between group and avoidance or not of other situations (e.g. supermarkets, schools, travel) for gender identity.

[insert Table 3 about here]

When analysed by stage of transition, there were statistically significant associations between group and avoidance or not of clothing shops, gyms, other leisure facilities, and public toilets. As might be expected, levels of avoidance were highest for those proposing to undergo, and those currently undergoing, a process (or part of a process) of gender reassignment or transition. For example, 46.0% of those proposing to undergo gender reassignment or transition and 37.5% of those currently undergoing gender reassignment or transition reported avoiding clothing shops. An overall analysis of all categories yielded a  $\chi^2$  value of 12.1 (DF= 4) with an associated probability of 0.017 suggesting a weak, but statistically significant relationship between stage of transition and avoidance of clothing shops. A series of



2x2  $\chi^2$  tests indicates that for clothes shops there are significant associations between stage of transition pairings and avoidance or not of clothing shops indicating that those who are proposing to undergo gender reassignment or transition are significantly more likely to avoid clothing shops than those who have not undergone any process of gender reassignment or transition and do not wish to ( $\chi^2 = 7.7$ , DF=1, p=0.006) or those who have undergone gender reassignment or transition ( $\chi^2 = 7.7$ , DF=1, p=0.006).

Similarly, for gyms and other leisure facilities levels of avoidance were also highest for those proposing to undergo, and those currently undergoing, a process (or part of a process) of gender reassignment or transition. For example, 46.8% of those proposing to undergo gender reassignment or transition reported avoiding gyms while 32.4% reported avoiding other leisure facilities. For those currently undergoing gender reassignment or transition, 50.4% reported avoiding gyms and 44.1% reported avoiding other leisure facilities. For both items there were statistically significant differences in the responses depending on stage of transition. In relation to gyms, an overall analysis of all stage of transition categories yielded a  $\chi^2$  value of 9.7 (DF= 4) with an associated probability of 0.047 indicating a weak but significant association between stage of transition and avoidance of gyms. For other leisure facilities an overall analysis of stage of transition categories yielded a  $\chi^2$  value of 14.5 (DF= 4) and was found to have an associated probability of 0.006 suggesting a moderately strong significant association in responses based on stage of transition. Those not having undergone and not proposing to undergo gender reassignment or transition were significantly less likely to avoid gyms than those proposing to undergo ( $\chi^2 = 5.6$ , DF=1, p=0.018) and those currently undergoing ( $\chi^2 = 7.58$ , DF=1, p=0.006) gender reassignment or transition. For other leisure facilities the response

pattern was a little different. Here, those currently undergoing gender reassignment or transition were significantly more likely to avoid leisure facilities than those who had not undergone and did not propose to undergo gender reassignment or transition ( $\chi^2=9.9$ , DF=1, p=0.002) and those who were unsure of their stage of transition ( $\chi^2=9.0$ , DF=1, p=0.003).

Public toilet facilities were also frequently avoided by these same groups. 54.7% of those proposing and 50.7% of those currently undergoing gender reassignment or transition reported avoiding public toilets. An overall analysis of all stage of transition categories for avoidance or not of public toilets yielded a  $\chi^2$  value of 13.5 (DF= 4) with an associated probability of 0.009 suggesting a moderately strong significant association between avoidance of public toilets and stage of transition. Those who had not undergone, and were not proposing to undergo, gender reassignment or transition were significantly less likely to avoid public toilets than those proposing to undergo ( $=9.6$ , DF=1, p=0.002) and those currently undergoing ( $=7.4$ , DF=1, p=0.007) gender reassignment or transition. Those proposing to undergo gender reassignment or transition were also found to be significantly more likely to avoid public toilets than those who had already undergone gender reassignment or transition ( $=4.4$ , DF=1, p=0.035) and those who were unsure of their transition status ( $=4.0$ , DF=1, p=0.046).

In the western world being able to pee standing up is seen as a signifier of manhood, and trans men in the early stages of transition often report feeling exposed because not having a penis means having to pee sitting down. They report worrying that they will be 'discovered' because people can see under the cubicle door that their feet are not facing the 'right' way. We therefore also undertook an analysis by group (stage of

transition) and avoidance (or not) of public toilets, of just participants who had 'a constant and clear gender identity as a man'. An overall analysis for this subgroup based on stage of transition yielded a  $\chi^2$  value of 18.4 (DF= 4) with an associated probability of 0.001, indicating a strong association between stage of transition and avoidance (or not) of public toilets for those with 'a constant and clear gender identity as a man'. Those having not undergone or not proposing to undergo gender reassignment or transition were significantly more likely to avoid public toilets than those who were proposing to undergo ( $\chi^2=15.7$ , DF=1,  $p<0.001$ ), those currently undergoing ( $\chi^2=11.5$ , DF=1,  $p=0.01$ ) and those who have undergone ( $\chi^2=9.9$ , Df=1,  $p=0.002$ ) gender reassignment or transition. However, as the numbers in some groups were quite small, caution should be exercised in drawing firm conclusions from these findings.

No statistically significant associations were found between group and avoidance or not of other situations (e.g. supermarkets, schools, travel) on a basis of stage of transition.

Despite there not being significant associations between group and avoidance (or not) of other social situations, situational avoidance was by no means restricted to the specific situations reported here. A number of respondents provided additional information which would suggest that other situations (e.g. air travel; football stadiums; social groups) were also problematic for them. Although fear of harassment/discrimination was considered an issue, the most commonly reported reason for avoiding specific situations was a fear of not being able to successfully 'pass' as male/female and/or of being 'outed' as trans: 'I am still a bit conscious that my voice is not yet acceptably female', 'If I fear being outed, I just go as a masculine

female (tom-boy) rather than transman', 'not comfortable enough in body to use these facilities'. Anecdotal evidence also suggested that this was compounded by gender identity – e.g. 'I only travel to most...countries with male appearance because I am not allowed a passport which reflects my bigender nature'; 'I am only very rarely gendered correctly (as male or agender), being up-front about my gender identity is the only way I can hope to be treated as the correct gender' – and stage of transition – e.g. 'I stopped using public swimming pools when I was no longer presenting as 'female' but had not had surgery. I swim happily now'; 'avoided most public places when I began my transition because I got abuse, stares and comments from going to such places. Now that I appear male I do not get any abuse, stares or comments so it is easier to use public spaces'.

#### **4. Discussion**

The purpose of the present study was to explore situational avoidance among trans people with particular reference to gender identity and stage of transition. Although a fear of discrimination was a consideration in the decision whether or not to avoid various social situations, those surveyed more commonly reported avoiding specific situations due to a fear of not being able to successfully 'pass' as male/female and/or of being 'outed' as trans. Furthermore, just over half of respondents indicated that they expected that they would have to avoid some social situations or places in the future because of a fear of being harassed, being read as trans, or being 'outed'. This would seem to suggest that being seen as a gender other than the one they identify as is of greatest concern to trans people, particularly because they fear that the core identity of who they are is at risk of being challenged or invalidated.

A key finding of this study concerned statistically significant associations between group (gender identity; stage of transition) and avoidance (or not) of certain situations, namely clothing shops, gyms, and public toilets (and for stage of transition, leisure facilities). In particular, those with a 'constant and clear gender identity as a man' or with a 'non-binary gender identity' were significantly more likely to avoid these situations than were those with 'a constant and clear gender identity as a woman'. A possible explanation for this is that the majority of trans men and people with a non-binary gender identity do not undergo genital surgery, and therefore may *feel* (or actually be) more vulnerable in settings like these. All of these situations involve undressing, and/or revealing the body in some way, therefore potentially exposing a genital incongruence compared to what an observer would expect to see. It is therefore more difficult for these subgroups to be confident that they can 'pass' in these situations; and for this reason, the risk of exposure and potential retribution, is much greater.

Similarly, those 'proposing to undergo' or who were 'currently undergoing' a process of gender reassignment or transition were significantly more likely to avoid these situations than those who have 'not undergone and do not propose undergoing' or who 'have undergone' a process of gender reassignment or transition. Again, this is likely to be explained by how easy it is for an individual to 'pass' in situations which involve undressing and/or revealing the body in some way. However, it could simply be about confidence, in particular, not yet feeling happy with the body that they have and therefore being more aware of how others perceive them. For example, those undergoing gender reassignment are more likely to be *visibly* trans and therefore potentially subject to more ridicule compared to those who are read as their birth sex or preferred gender. Similarly, those who want to undergo gender reassignment or

transition are likely to be more obviously different, particularly if they are in the 'real life experience' (RLE) stage of pre-transition. Living as one's preferred gender during the RLE stage means that one's body will be more obviously different from those who have undergone all possible medical interventions, or who have no intention of physically changing their body. Revealing a body that is 'other' than that expected for the gender one is living is likely to put one at higher risk of harassment (and in some situations, transphobic violence), particularly in gender-delineated spaces.

The findings from this study raise important questions about the way in which trans people who transition are supported, as well as having implications for the RLE. The RLE assumes that people are living fully as the gender they identify with, however this study suggests that in reality, people are avoiding many situations they would otherwise be taking part in. The utility of the RLE in enforcing engagement in these situations is therefore problematic as it places people at risk of emotional and physical harm. In addition to this, many trans people who transition do so without adequate social or psychological support – indeed they may be required to show that they can cope robustly with life in their identified gender and so avoid discussing these difficulties. These findings show that services need to be actively geared towards supporting people transitioning in coping with and finding solutions to some of these issues. Continued avoidance perpetuates social isolation and thus decreased wellbeing, so it is in all health service providers' interests, both those actively involved in gender treatment and generic services, to provide active help during what is an extremely difficult and isolating time for many trans people.

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**Table 1: Breakdown of participants by gender identity and transition status**

	<b>Response category</b>	<b>% Respondents (N)</b>
Gender Identity:	I have a constant and clear gender identity as a woman	39.9% (317)
	I have a constant and clear gender identity as a man	24.8% (197)
	I have a constant and clear non-binary gender identity	7.9% (63)
	I have a variable or fluid non-binary gender identity	15.4% (122)
	I have no gender identity	2.6% (21)
	I am unsure of my gender identity	6.2% (49)
Transition Status:	I have not undergone and do not propose to undergo any part of a process of gender reassignment or transition	12.5% (100)
	I am proposing to undergo a process (or part of a process) of gender reassignment or transition	17.4% (139)
	I am currently undergoing a process (or part of a process) of gender reassignment or transition	34.0% (272)
	I have undergone a process (or part of a process) of gender reassignment or transition	28.5% (228)
	Unsure	5.6% (45)
	Other	2.0% (16)

**Table 2: Avoidance of situations (by gender identity)**

Have you ever avoided any of the following situations because of a fear of being harassed, being read as trans or being outed?	I have a constant and clear gender identity as a woman (N=317) %	I have a constant and clear gender identity as a man (N=197) %	I have a constant and clear non-binary gender identity (N=63) %	I have a variable or fluid non-binary gender identity (N=122) %	I have no gender identity (N=21) %	I am unsure of my gender identity (N=49) %	Other (e.g. androgynous, genderqueer, variable, gender-neutral) (N=25) %
Public transport	28.7 (N=91)	22.3 (N=44)	23.8 (N=15)	27.0 (N=33)	9.5 (N=2)	32.7 (N=16)	40.0 (N=10)
Supermarket	17.4 (N=55)	14.2 (N=28)	17.5 (N=11)	19.7 (N=24)	4.8 (N=1)	24.5 (N=12)	20.0 (N=5)
Pharmacy	9.1 (N=29)	12.7 (N=25)	20.6 (N=13)	13.1 (N=16)	4.8 (N=1)	18.4 (N=9)	16.0 (N=4)
Clothing shops	22.4 (N=71)	40.1 (N=79)	55.6 (N=35)	35.2 (N=43)	23.8 (N=5)	32.7 (N=16)	56.0 (N=14)
Travel abroad	21.1 (N=67)	27.4 (N=54)	33.3 (N=21)	21.3 (N=26)	9.5 (N=2)	32.7 (N=16)	36.0 (N=9)
Clubs or social groups	23.3 (N=74)	38.6 (N=76)	33.3 (N=21)	30.3 (N=37)	4.8 (N=1)	26.5 (N=13)	52.0 (N=13)
Gyms	32.5 (N=103)	58.9 (N=116)	52.4 (N=33)	38.5 (N=47)	19.0 (N=4)	44.9 (N=22)	56.0 (N=14)
Other leisure facilities	29.3 (N=93)	39.1 (N=77)	47.6 (N=30)	29.5 (N=36)	9.5 (N=2)	34.7 (N=17)	20.0 (N=5)
Cinema	7.6 (N=24)	6.6 (N=13)	9.5 (N=6)	6.6 (N=8)	4.8 (N=1)	16.3 (N=8)	12.0 (N=3)
Schools	17.7 (N=56)	15.7 (N=31)	17.5 (N=11)	21.3 (N=26)	4.8 (N=1)	20.4 (N=10)	20.0 (N=5)
Church/religious organisations	15.8 (N=50)	20.8 (N=41)	23.8 (N=15)	16.4 (N=20)	14.3 (N=3)	14.3 (N=7)	8.0 (N=2)
Public toilets	24.3 (N=77)	64.5 (N=127)	66.7 (N=42)	46.7 (N=57)	23.8 (N=5)	38.8 (N=19)	56.0 (N=14)
Public spaces	13.6 (N=43)	14.2 (N=28)	14.3 (N=9)	11.5 (N=14)	0.0 (N=0)	14.3 (N=7)	20.0 (N=5)
Restaurants/bars	20.8 (N=66)	22.8 (N=45)	25.4 (N=16)	17.2 (N=21)	9.5 (N=2)	22.4 (N=11)	28.0 (N=7)
Cultural/community centres	12.3 (N=39)	13.2 (N=26)	14.3 (N=9)	14.8 (N=18)	9.5 (N=2)	12.2 (N=6)	8.0 (N=2)

**Table 3: Avoidance of situations (by transition status)**

Have you ever avoided any of the following situations because of a fear of being harassed, being read as trans or being outed?	<b>Have not undergone and do not propose to undergo any part of a process of gender reassignment or transition (N=100)</b>	<b>Proposing to undergo a process (or part of a process) of gender reassignment or transition (N=140)</b>	<b>Currently undergoing a process (or part of a process) of gender reassignment or transition (N=272)</b>	<b>Have undergone a process (or part of a process) of gender reassignment or transition (N=227)</b>	Unsure (N=45)
	%	%	%	%	%
Public transport	24.0 (N=24)	32.1 (N=45)	31.6 (N=86)	18.1 (N=41)	24.4 (N=11)
Supermarket	18.0 (N=18)	17.1 (N=24)	20.6 (N=56)	11.5 (N=26)	20.0 (N=9)
Pharmacy	11.0 (N=11)	15.0 (N=21)	14.3 (N=39)	7.0 (N=16)	13.3 (N=6)
Clothing shops	23.0 (N=23)	45.7 (N=64)	37.5 (N=102)	23.3 (N=53)	33.3 (N=15)
Travel abroad	19.0 (N=19)	27.1 (N=38)	28.7 (N=78)	21.1 (N=48)	20.0 (N=9)
Clubs or social groups	19.0 (N=19)	36.4 (N=51)	34.9 (N=95)	26.0 (N=59)	17.8 (N=8)
Gyms	26.0 (N=26)	46.4 (N=65)	50.4 (N=137)	39.2 (N=89)	33.3 (N=15)
Other leisure facilities	19.0 (N=19)	32.1 (N=45)	44.1 (N=120)	27.8 (N=63)	20.0 (N=9)
Cinema	10.0 (N=10)	10.0 (N=14)	7.0 (N=19)	5.7 (N=13)	13.3 (N=6)
Schools	15.0 (N=15)	24.3 (N=34)	18.4 (N=50)	12.8 (N=29)	20.0 (N=9)
Church/religious organisations	18.0 (N=18)	19.3 (N=46)	21.0 (N=57)	12.8 (N=29)	11.1 (N=5)
Public toilets	27.0 (N=27)	54.7 (N=76)	50.7 (N=138)	34.8 (N=79)	35.6 (N=16)
Public spaces	9.0 (N=9)	12.1 (N=17)	15.8 (N=43)	13.2 (N=30)	13.3 (N=6)
Restaurants/bars	13.0 (N=13)	22.9 (N=32)	26.8 (N=73)	17.6 (N=40)	17.8 (N=8)
Cultural/community centres	11.0 (N=11)	15.0 (N=21)	12.9 (N=35)	11.9 (N=27)	13.3 (N=6)