Thesis

Transwomen’s Memories of Parental Relationships: An Interpretative Phenomenological Analysis Study

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1. Abstract

This project presents an in-depth idiographic study of how a developing Transwoman identity impacts upon parental relationships in childhood and how these relationships impact sense of self and later relationships. Semi-structured interviews were conducted with six Transwomen and Interpretative Phenomenological Analysis applied to the transcripts. Two major themes emerged: the struggle to belong and the complex journey to becoming me. The theme the struggle to belong consists of six superordinate themes: the disappointing feminine me, trying to belong, the unacceptable me, disconnection from others and self, the struggle in new relationships, and the influence of context. The second major theme, the complex journey to becoming me, comprises two superordinate themes: the complexity of realising me and reconnection while still being me. The results are mainly discussed using theories of Parent Child Connectedness (PCC) and psychological autonomy. Areas for future research are highlighted. This study provides a valuable insight into the complex experience of negotiating a transsexual childhood which will be useful for professionals working with people with gender identity issues.
2. Introduction

“I was telling you earlier about the three elements in my morals. They are the refusal to accept as self-evident the things that are proposed to us; the need to analyze and to know, since we can accomplish nothing without reflection and understanding thus, the principle of curiosity; and the principle of innovation: to seek out in our reflection those things that have never been thought or imagined. Thus: refusal, curiosity, innovation.” Foucault (1988) pg 1.

Overview
My position and the position of this research will be elaborated at the beginning of the introduction followed by a review of the literature which will summarise psychological theories on gender and transsexual aetiology and development as well as reviewing treatment for transsexual people and the role of psychology in transsexual research.

2.1 My position
My interest in this project combines my long term interest in working with children and families and how they negotiate complex experiences with my more recent interest triggered by lectures on gender and sexuality about the complex position of people growing up with transsexual feelings. I thought of my own difficulties growing up without these added complications and wondered how people managed to negotiate this experience. At the same time, I felt ignorant as I had not encountered anyone who had had these experiences. A brief review of the literature highlighted the significant stigma attached to the transsexual experience and the associated maltreatment of and violence towards transsexual people. These findings led me to take an empathic position within this research which values the views of the transsexual population and avoids pathologising their experience.

2.2 Research position
In order to facilitate my own research position, this research also takes an empathic position. It draws upon constructivist ideas which prioritise the experience of the individual as a knowing being while recognising the existence of multiple realities (Magoon, 1977; Ponterotto, 2005). The aim of this position is to prioritise the views of the transsexual experience rather than forcing their experiences into preconceived ideas.
2.3 Literature

Gender and sex

Different definitions of gender and sex have been proposed within Western culture. Some theorists propose that sex is the biological gender of female or male depending on anatomical features and gender is the social traits associated with each sex (Deaux, 1985; Newman, 2002). Maccoby (1988) on the other hand proposed that sex and gender should be used interchangeably because biology and social influences interact and are difficult to separate. A distinction is often made between gender identity and gender role (Golombok & Fivush, 1994). Gender identity has been suggested as an individual’s basic sense of female or male. Gender role is considered to be the behaviours, attitudes and characteristics that society proposes are appropriate for a specific gender. Hence, gender role is affected by society’s current dominant discourses. Gender role can be observed through behaviours such as play, dress and personality traits. Within Western culture, it is believed that the majority of individuals have a biological sex that is consistent with their gender identity. Gender identity is also linked to gender role although the extent of the association differs amongst individuals. Gender typicality is the extent that an individual’s behaviour conforms to culturally determined gender roles. The following section will explore theories of gender development.

Biological perspective

The most commonly understood determination of sex and gender is the absence or presence of the Y chromosome, with males having the XY chromosome and females having the XX chromosome. However, biological understandings of sex and gender have developed further suggesting that the relationship between sex and gender is not as simple as previously thought. Firstly, some individuals have different chromosomal combinations to XY or XX. In addition, prenatal androgens have been shown to effect the development of gender via the existence of conditions such as Congenital Adrenal Hyperplasia (CAH) and Complete Androgen Insensitivity Syndrome (CAIS). In CAH, the foetus is exposed to high levels of testosterone during development and subsequently the girls have been found to demonstrate increased “masculine” behaviours. In CAIS, males are unable to utilise androgen and as infants appear to be normal girls and develop a female identity. Recent twin studies have also supported the idea of a genetic component to gender. Van Beijsterveldt, Hudziak & Boomsma (2006) in a study in the Netherlands found that genetic factors explained 70% of
the variance of atypical gender behaviours. However, it is unlikely that biology is the only factor determining gender and research completed on a British twin sample by Knafo, Iervolino & Plomin (2005) showed that gender behaviour was significantly influenced by both genetic and environmental factors.

**Psychodynamic**

Freud (1931/1967) proposed a psychodynamic understanding of psychosexual development which entails a child progressing through three stages: oral, anal and phallic. Each stage involves a conflict between primitive desires and the expectations of society. Chodorow (1978) reformulated Freud’s theories focusing on early experiences of mothering. She proposed that both boys and girls view the mother as the centre of the world and provider of all support and care. During this process, the infant merges and identifies with the mother. As the mother and daughter are female, they mutually identify with each other and maintain a sense of interpersonal integration. However, the son and mother do not have the same sense of shared identity. Therefore males despite initial identification with the mother, classify themselves in terms of difference from females. Development of the female self-concept is linked to these early experiences of interpersonal relatedness. Contrastingly, development of the male self-concept is linked to early experiences of separation from femininity along with the availability of an alternative male ‘model’ with which to identify as well as rival with for maternal affection. The impact of this model was possibly influenced by how Freudian thinking dominated psychological thinking at the time. However, this model has since been criticised for its lack of evidence base as only case studies, which are vulnerable to potential bias, have been provided to support theoretical claims.

**Social learning theory**

Social Learning Theory was developed as an overarching theory to explain social development including gender identity and role development (Bandura, 1977; Mischel, 1966). It proposes that social learning occurs through two processes: reinforcement and modelling. Reinforcement affects learning as positive reinforcement such as praise leads to repetition of desired behaviours and lack of reinforcement leads to behaviour extinction. Modelling suggests that children learn behaviour from available models. A review by Maccoby and Jacklin (1974) and a meta-analysis by Lytton and Romney (1991) support the idea that parents encourage their child’s participation in gender typical behaviour.
Furthermore, research has shown that in Western families where the parents display similar gender roles the children show less typical gender role behaviour than in families which have traditional gender roles (Turner & Gervai, 1995). In addition, as described, UK twin studies have demonstrated the importance of shared environment as well as biology in the development of gender typical behaviour (Iervolino, M., Golombok, Rust, & Plomin, 2005; Knafo et al., 2005). Social leaning theory may be a helpful way to consider the impact of parental influence upon gender behaviour as long as it is recognised that other factors also contribute to gender behaviour. At the same time, social learning theory could be further developed by considering influence as bi-directional with the child also able to influence the parent.

_Cognitive theory_

Kohlberg (1966) applied Piaget’s (1954) model of stages of cognitive development to propose a cognitive developmental approach to gender identity development. He proposed that children’s understanding of gender is affected by their stage of cognitive development. He suggested that children progress through stages until they come to understand gender as constant. By the age of two, children move into the first stage called ‘gender identity’ where children can label themselves and others as female or male based on physical characteristics. Around three years of age, children move to the ‘gender stability’ stage where it is understood that if you are female you will always be female. During this stage, gender is perceived as stable across time but is not stable across situation. At age five, children reach the final ‘gender constancy’ stage where they realise gender is constant over time and place. Kohlberg suggested that the impact of modelling depends on a child’s understanding of gender constancy. Slaby & Frey (1975), in a study of 55 American children, demonstrated that children place more attention on the model they are similar to as constancy increases which they understood as a form of self-identification and self-socialisation. Furthermore, in a study of over 8,000 Dutch twins, Gender Atypical Behaviour (GAB) were shown to decrease as children get older and by the age of six or seven, gender typical behaviours are well established (van Beijsterveldt et al., 2006).

During the 1970’s, gender schema theory proposed that children form gender related schemas of themselves and others and that these schemas influence children’s thinking and behaviour. In contrast to Kohlberg’s cognitive developmental approach, gender-schema theory proposes
that a basic understanding of gender is all that is required to stimulate children’s behaviour. For further information see Martin and Ruble (2004). Although cognitive models can be considered a useful component of a holistic view of gender, they also can be critiqued for suggesting a linear process to gender development and, therefore, excluding any possibility of variations within the gender experience.

**Multi-dimensional model**

Egan and Perry (2001) proposed a multi-dimensional model of gender identity composing the following aspects: “(a) feelings of psychological compatibility with one's gender (i.e., feeling one is a typical member of one's sex and feeling content with one's biological sex), (b) feelings of pressure from parents, peers, and self for conformity to gender stereotypes, and (c) the sentiment that one's own sex is superior to the other (intergroup bias)” pg 451. Egan and Perry’s research demonstrated that by middle childhood children have developed a reasonably stable view of themselves in relation to these aspects of gender identity. Egan and Perry’s model seems theoretically sophisticated in that it allows for a multitude of different factors to be considered in the development of gender including the possibility of incompatibility with anatomical gender. Furthermore, this model has been supported by empirical research on a Western population of 300 school aged children (Carver, Yunger, & Perry, 2003).

In summary, there are various models used to explain gender aetiology and development. Each model appears to have weaknesses and strengths either theoretically or in relation to the evidence base. In line with thinking by Iervolino et al. (2005) who state “there is a consensus that social, cognitive, and biological factors interactively contribute to gender behaviour” pg 826, this researcher takes the position that gender involves various factors and appreciates Egan and Perry’s model which has empirical support and also appears theoretically sophisticated in how it considers that factors may be contradictory.

**Trans definitions**

The term ‘transgender’ is used as an umbrella term relating to anyone who believes their gender is different to their biological sex or natal gender. Broad (2002) states that there is ongoing debate within the transgender community about who the term specifically relates to as the term can also refer to a broad range of different identity expressions which includes
heterosexual cross-dressers, people who live permanently as the opposite sex and those who live variously adopting male and female gender roles. Transgender people who seek to undergo or have undergone surgical treatments to change their gender known as Gender Confirmation Surgery (GCS) or a transition are generally referred to as transsexual people. A Transman is a female to male transsexual person and a Transwoman is a male to female transsexual person. The terms transgender and transsexual can be used interchangeably but as transgender is also used as a broad term and because transsexuals are the focus of the sample within this study the term transsexual will mainly be used in this report.

**Prevalence and incidence**

The National Health Service (NHS) states that one in 4000 people are receiving medical help for gender identity issues (DH, 2008a). Furthermore, in a report on gender prevalence and incidence commissioned by the Home Office, the Gender Research Identity and Education Society (GIRES) proposed that twenty people in every 100,000 present with gender issues (2009). It is important to note that attempts to measure prevalence are likely to be affected by the stigma associated with the experience and therefore figures are likely to be an underestimate. Research has indicated that more people born male experience these gender issues (Green, 2007). However, it has been proposed that this difference is due to society’s tolerance of people who are born female exhibiting “tom boy” behaviour which will be discussed further below. Furthermore, recent research has indicated that the gender difference is gradually lessening (GIRES, 2009). GIRES states that the current growth rate in people presenting with gender issues is 15% hence the population is doubling every five years.

**Diagnoses**

"What is it, to be mad? Who decides? Since when? In the name of what?"

Foucault (2004) pg 82

In 1994, the Diagnostic and Statistical Manual of mental disorders (DSM-IV) (4th edition) (American Psychiatric Association, (APA)) replaced the term ‘transsexuality’ as a psychiatric condition with the term ‘Gender Identity Disorder’ (GID) and ‘Gender Identity Disorder of Childhood’ (GIDC) (APA, 1994). These diagnoses contain two main features: a strong and persistent cross-gender identification and constant discomfort with sex assigned gender.

Debate exists over the value of these diagnoses (Darryl B. Hill, Rozanski, Carfagnini, & Willoughby, 2007). Some theorists suggest that GID and GIDC represent societal difficulties
rather than individual difficulties and that the diagnoses stigmatise and pathologise individuals who do not conform to gender expectations (Bartlett, Vasey, & Bukowski, 2000; Langer & Martin, 2004; Wilson, Griffin, & Wren, 2002). However, Zucker (2005) proposes that the distress experienced by transsexual people is due to the incompatibility between physical sex and psychological gender. In addition, diagnosis is necessary in order to enable transsexual people to obtain assistance for their needs particularly in America. Ellis and Eriksen (2002) propose that not all transsexual people have GID but may experience it at some point in their lives due to the distress caused by their predicament. They are no longer experiencing GID when they are living in their right gender or have experienced GCS. Parallels could be drawn between arguments over these diagnoses and arguments over whether to retain the diagnosis of ‘ego-dystonic homosexuality’ in DSM-III (APA, 1980). The National Health Service (NHS) uses the term “gender dysphoria” to describe the experience of transsexual people employing the term dysphoria as it means unhappiness (DH, 2008b).

Transsexual aetiology
Transsexuality has been understood in line with dominant ideas on gender so there are biological, social learning theory and psychodynamic theory explanations. These theories differ as to whether they propose that transsexuality is the source of a difference or the result of a difficulty. Alternatively, queer theory suggests that transsexuality is a variation along a continuum but that power influences the way that society accepts taken for granted knowledge on subjects such as gender. The different positions of these theories impact what treatment is available to people who are experiencing gender dysphoria which will be reviewed following a more detailed description of theories of aetiology and development.

Biological understandings
Historically, the possibility of a biological component to transsexuality has been neglected due to the view of the certainty of two sexes leading to transsexuality being viewed as a psychological condition (see below). However, recently it has been suggested that biological influences play a significant part in the development of gender and transsexuality. Firstly, Coolidge, Thede and Young (2002) in a US study of 314 twins, 96 monozygotic and 61 dizygotic pairs, concluded that “there is a strong heritable component to GID. The findings may also imply that gender identity may be much less a matter of choice and much more a
matter of biology” pg 251. In addition, as described, the influence of hormones has been demonstrated by conditions such as CAH and CAIS. More recently, results from several post-mortem studies based in the Netherlands provide support for a neurobiological explanation of transsexuality with the findings suggesting that the sexual differentiation of the brain and genitals occur in opposite directions. Zhou, Hofman, Gooren and Swaab (1995) demonstrated that the size of the bed nucleus of the stria terminalis (BSTc), a part of the brain which is different sizes for males and females, in Transwomen was similar to the size of the BSTc in females. They also demonstrated that this was not due to adult sex hormone levels and suggested that it occurs due to the organising action of prenatal sex hormones. Kruijver et al. (2000) completed investigations into the amount of somatostatin neuronal sex differences in BSTc of 42 people. This research found that Transwomen had similar amounts of neurons in the BSTc to females. Similarly, Garcia-Falgueras and Swaab (2008) completed post mortem investigations of the hypothalamic uncinate nucleus brain material of 42 people including male and female controls, transsexuals and people castrated due to prostate cancer. Again, they found that the volume and number of neurons of Transwomen were similar to the control females. Although the clinical status of the patients prior to death may have impacted upon the brain in these studies and the samples are relatively small, it is important to note that this type of research is particularly challenging due to the ethical issues involved and therefore limitations are inevitable. In addition, although the evidence base is relatively small, it appears quite convincing which is reflected in the conclusion by GIRES (2006) in a review on atypical gender development and transsexuality which stated that “scientific evidence supports the paradigm that transsexualism is strongly associated with the neurodevelopment of the brain” pg 13.

Psychodynamic theories
Psychodynamic theorists such as Stoller (1968) and Mayer (1982) proposed that transsexuality was a psychiatric condition associated with dysfunctional parental experiences. Stoller proposed that people born male developed transsexuality in families characterised by a “masculine”, “enmeshed” relationship with the mother, an “effeminate” father and with both parents permitting “effeminacy” to develop. Mayer further suggested that male transsexuality could be a method of avoiding competition with the father. People born female were considered to develop transsexuality as a way to avoid identification with the mother. Psychodynamic theories have lost credibility due to the existence of biological evidence
(described above), research demonstrating psychological adjustment following GCS, (described later), and because psychodynamic theories have not been substantiated with robust empirical evidence. However, the main critique of the psychodynamic model is the position that it presents only two possibilities: healthy gender development and unhealthy gender development without any possibility of variation.

**Social learning theory**

Social learning theory proposes that due to a lack of a gender role model and/or an overpowering opposite gender role model the individual learns to model the opposite gender. It also proposed that in these families gender typicality is not reinforced. The case of ‘John/Joan’ challenged social learning models. During his circumcision, John accidentally had his penis cut off. His parents raised him as a girl ‘Joan’ as recommended by professionals (Money, 1975). During adolescence, Joan became John and later John had his penis reconstructed and married as a man (Diamond & Sigmundson, 1997). In addition, research has hitherto not supported this theory (Roberts, Green, Williams, & Goodman, 1987; K. Zucker et al., 1994). The lack of research evidence and the biological evidence (described earlier) questions the usefulness of social learning theory as a theory to explain the aetiology of transsexuality.

**Sexuality**

The interplay between sexuality and transsexuality is a contentious issue because some theorists, primarily Blanchard, have categorised transsexuals according to their sexuality. Blanchard (1988; 1989) completed several studies on Canadian Transwomen comparing homosexuals and nonhomosexuals (heterosexual, asexual and bisexual) and found that the homosexual group reported significantly more “effeminate” behaviours in childhood and were significantly less sexually aroused from wearing feminine clothes than the nonhomosexual group. From these results, Blanchard proposed that Transwomen could be categorised into either homosexual or nonhomosexual/autogynephelic groups. Although this theory has been criticised by prominent transsexuals as not reflecting their own experience, other theorists such as Michael Bailey state “we believe, however, that in this domain, as in others, people’s own narratives do not always correspond to the true reasons for their choices and behaviours” pg 527. A recent Dutch study by Smith et al. (2005) on a sample of 187 transsexuals provided support for different developmental pathways with homosexual
Transmen exhibiting atypical gender behaviours in childhood without sexual arousal associated with cross dressing whereas non-homosexual transsexuals reported being relatively “masculine” boys and experienced cross dressing as sexually arousing. Although statistically significant differences have been found between the groups, there are individuals from both groups who do not fit the characteristics of their allocated group, questioning the ecological validity of this taxonomy. Furthermore, this theory has been critiqued for considering sexual orientation in relation to biological sex rather than the individual’s sense of gender with the implication being that homosexual transsexuals are actually homosexual males attempting to avoid stigma. It is possible that the quest to categorise the transsexual experience reflects cultural difficulties in accepting “otherness” as a legitimate experience along a continuum of experiences and it would be interesting to complete similar studies in cultures which are more accepting of difference.

**Queer theory**

Queer theory is a philosophical movement which is heavily influenced by the work of Michel Foucault (Foucault, 1981, 1988). Queer theory questions the conventional and challenges the idea of identity as fixed, singular or normal (Hall, 2003). Therefore queer theory views gender as a socially constructed concept rather than a fixed category occurring along a continuum and across many layers. There are many examples from the past and present which challenge the idea of two separate genders such as the Hindu religion which purports a “third sex” (Nanda, 1986), the Samoan culture which recognises the Fa’afafine as a third gender who are born male but chose to live as women (Vasey & Bartlett, 2007) and the existence of various intersex conditions affecting over 1% of people (Blackless et al., 2000). However, empirical evidence is required to substantiate the ideas proposed by queer theory.

Foucault argued that powerful organisations within society prescribe what is appropriate or healthy and that knowledge maintains power. Gender theorists (Blackham, 2006; O’Toole, Schiffman, & Edwards, 2007) propose that gender is a social construct with gender-conforming males at the top of a power hierarchy and that violence aims to maintain the gender hierarchy and punish people who violate gender norms. Violence towards transsexual people is well documented for example in a study of over 400 transsexual people, over 60% had experienced some form of harassment or violence (Lombardi, Wilchins, Priesing, & Malouf, 2001). It could be argued that the Gender Recognition Act reflects society’s
developing recognition and acceptance of gender variability (*Gender Recognition Act*, 2004). However, Ryan & Rivers (2003) have shown that the increased visibility of transsexual people has paralleled increased rates of victimisation of transsexual people. Research has also shown that society continues to hold negative perceptions of people that do not conform to traditional gender categories. In a study of attribution of victim blame for sexual assault from the US, Blackham (2006) found that rape against a transsexual victim was rated as less severe than if the victim’s gender was female or unknown. Male participants compared to female participants had less favourable attitudes toward transsexual victims.

Research position

This research takes the position that the transsexual experience is not pathological but probably stems from biological origins and forms part of a continuum of gender experiences some of which are more or less favoured by Western society.

*Stages models of transsexual identity development*

Theorists have suggested that transsexual identity develops within stages. Gagne, Tewksbury, & McGaughey (1997) conducted semi-structured interviews with 65 masculine to feminine individuals along the spectrum of the trans experience including 41 transsexuals interpreting the transcripts using “analytic-deductive” methods. They categorised the experience within four stages: early transgender experiences, coming out to one’s self, coming out to others, and resolution of identity. However, accounts varied significantly both across the gender experiences and within the same gender experience. Devor (2004) also developed the following 14 stage model based mainly from interviews with Transmen: abiding anxiety, identity confusion about originally assigned gender and sex, identity comparisons about originally assigned gender and sex, discovery of Transsexualism, identity confusion about transsexualism, identity comparisons about Transsexualism, tolerance of Transsexual identity, delay before acceptance of Transsexual identity, acceptance of Transsexualism identity, delay before transition, transition, acceptance of post-transition gender and sex identities, integration, and pride. However, Devor himself notes in his introduction that the model cannot apply to all individuals in the same way as all are unique with some finding they pass through all stages and some through none.

Other theorists have used theories of sexuality identity development to develop theories of transsexual identity development. One example is Bockting & Coleman’s (2007) theory
based on their own theory of homosexual identity development. Their theory consists of five stages: pre-coming out, coming out, exploration, intimacy, and identity integration. Apart from the obvious issues in transferring a theory of sexuality identity development into a theory of transsexuality development, this theory requires research to determine its validity.

The use of stage models to understand transsexuality development may be appealing as they offer a clear way to understand an experience. However, no empirical research has been completed to substantiate the models presented and each model described variation for participants within stages or in the order of stages questioning the legitimacy of a stage like process. In addition, Transsexual identity development is a more socially affected, potentially complicated issue (Eliason & Schope, 2007) which cannot be equated with other developmental processes that follow certain paths. Furthermore, the risk of stage models is that they may simplify and categorise a significantly complex psychological process.

**Childhood**

Not all transsexual people experience their transsexual feelings early in life but those who do have described complicated childhoods. In Gagne et al.’s (1998; 1997) study of 65 masculine to feminine individuals, participants described that although early comments about desiring to be the opposite gender may be tolerated, as the child grows up there are considerable pressures to conform to gender typical norms from parents, peers and society. Participants reported that if they did not conform, they risked interpersonal relations resulting in a temptation to try to repress their feelings leading to a conflict between the authentic self and the self known to others. Bockting & Coleman suggested that these early experiences prior to coming out are fraught with anxiety, some awareness of difference and confusion about natal gender. These theories are supported by empirical evidence from a range of samples and methodologies. For example, Heller (1997) completed an internet survey on a sample of 221 male transvestites, male-to-female transsexuals, non-gender dysphoric male homosexuals, and non-gender dysphoric male heterosexuals and found that regardless of group, men reporting high levels of childhood GAB reported low levels of parental warmth and support and high levels of parental overprotection, rejection, and dependency. Men reporting high levels of GAB in childhood also reported higher levels of abuse (physical and emotional) than their low GAB comparison group. In addition, in an Australian study with 80 young adults, McConaghy & Silove (1992) showed that GAB in men correlated most strongly with
current negative parental relationships as well as with negative paternal relationships in childhood. Furthermore, Alanko et al. (2008) conducted a postal study of 1767 twins in Finland and found that individuals who recalled exhibiting more GAB in childhood reported more psychiatric symptoms in adulthood and that this association was moderated by parenting style so a positive parenting style consisting of warmth and care reduced the association and a negative parenting style consisting of indifference, coldness and abuse strengthened the association.

Research has also supported the idea that peers respond negatively to GAB. Young and Sweeting (2004) in a study of 2,194 Scottish adolescents demonstrated that boys exhibiting GAB were bullied and victimised significantly more by peers and also experienced significant more psychological distress. Interestingly, this research also demonstrated that the negative response was directed towards boys exhibiting GAB rather than girls exhibiting GAB. Other studies have also supported this idea. For example, Cohen-Kettenis et al. (2003) in an international study on 488 children referred to GIDC clinics in Canada and the Netherlands also found that girls with GID had better peer relations than boys with GID despite often exhibiting more GAB. Furthermore, Lee (2001) in a qualitative study of 12 British and North American Transmen found participants reported being able to participate in GAB without notable difficulty during childhood. These studies suggest that GAB appears to be more accepted in girls than boys with “effeminate” boys experiencing more disapproval and rejection from parents and peers and pressure to conform than the ‘tom-boy’ behaviour expressed by girls.

**Research into family response to a transsexual child**

The evidence described suggests that parents find GAB difficult to manage, impacting on how they treat their children. A few qualitative researchers have explored the family’s response to their child’s transsexual identity development. Emerson and Rosenfeld (1996) from interviews with parents of transgendered clients developed a five stage model of family response based on Kubler-Ross’ stages of grief (1969) which consists of denial followed by anger then bargaining with the final stages being depression and acceptance. However, the authors highlighted that these stages are not linear and can be experienced in diverse ways by different people questioning the validity of the stage model. Lev (2004) developed a four stage family response model which starts with discovery and disclosure of the transsexual
identity leading to a stage of turmoil in the family. Again there is a stage of negotiation which
ends when a balance is found. Zamboni (2006) has suggested that the family models should
have a “secret” or “latent” stage which “reflects the family secret—absent or partial
awareness of the transgender identity without open acknowledgement of the gender variance”
pg 177. Although the descriptions within this research of the individuals’ experiences are
rich, the proposal of a stage like process can again be critiqued as being too simplistic for
such a complicated experience. Furthermore, both models are descriptive and lack an
empirical evidence base.

Wren (2002) researched the experience from the perspectives of eleven white British parents
of children, seven biological females and four biological males, presenting at a specialist
GIDC service. She used a semi-structured interview format and grounded theory analysis was
applied. Families described experiencing conflicts such as attempting to be openly
communicative with their children but not wanting to further establish the identity. Another
prominent theme was the sense of loss experienced by family members such as the loss of
expectations for and loved aspects of their child. This research also highlighted the
importance of reflective self-awareness of both the parents and the child for good adjustment
to gender questioning. However, it is worth noting that this sample was already receiving
assistance from professionals and had offered to participate in the project perhaps reflecting a
more willing, articulate or stable sample rather than reflecting the general experience of
parents of children with these difficulties.

Jones and Tinker (1982) completed a qualitative study in the US where they interviewed ten
families and the individual aiming to reveal the role of parental reactions in the development
of gender dysphoria. The authors proposed an “interactionalist” understanding of the
development of transsexual identity where the individual’s development is affected by the
response to the reaction of the family. Although a small sample, this interesting study seems
to be the first and only attempt to consider the dynamic aspect of transsexual identity
development demonstrating a need for further research into the experiences and significant
impact of family relationships upon transsexuals. A typical quote from the study highlights
the complexity and difficulties of growing up in this predicament:
'They (my parents) never really knew me as a person – what I was or what I wanted to be. I wasn’t close to them, no not at all. I had so many secrets – I wasn’t close to anyone’”

Attachment theory

Recently research has started considering the impact of GAB upon parent child attachment and as this project is interested in transsexuals experiences of early parental relationships, a brief overview of relevant attachment based research is indicated. However, it is beyond the scope of this project to be able to provide an adequate review of attachment theory so what follows is a brief summary before describing research which has investigated links between attachment and GIDC as well as between attachment and GAB for more detailed information on attachment see Bowlby (1970, 1977a, 1977b, 1979, 1982). Attachment theory has been proposed as an “organisational framework for research on close relationships” (Hazan & Shaver, 1994, pg 1). According to attachment theory, humans are biologically engineered to seek out proximity and warmth from caregivers during times of stress to ensure survival. The role of the caregiver is to protect and provide prompt affect and physiological regulation. A parent who is responsive and reflexive towards their child enables the child to develop a sense of security whereas a parent who is unresponsive or abusive provides the child with a sense that the world is not safe. These attachment patterns are described as secure or insecure. Within the insecure category, there are anxious ambivalent, anxious avoidant and disorganised styles (Ainsworth & Bell, 1970). Bowlby purported that these relational experiences become internal working representations impacting upon relationships throughout life because attachment styles act as self fulfilling prophecies due to the reactions they evoke in others. Adult attachment researchers have demonstrated that some stability exists between child and adult attachment patterns but that changes can occur also (Carnelley, Israel, & Brennan, 2007; Hazan & Kirkpatrick, 1994; Kirkpatrick & Davis, 1994).

Recent developments within attachment theory have highlighted the dynamic aspect of the attachment relationship where attachment relations remain stable if the care giving environment remains stable but change if adaptation requires it. Adaptations can have positive aspects such as in studies of Romanian orphans who experienced severe deprivation in early childhood followed by increased care following adoption (O’Connor, Bredenkamp, & Rutter, 1999). However, research has also demonstrated that attachment styles can change during childhood and adolescence in response to maltreatment, maternal life stress, family
interaction quality and negative life events affecting availability and responsiveness of the caregiver (Ammaniti, van Ijzendoorn, Speranza, & Tambelli, 2000; Waters, Weinfield, & Hamilton, 2000; Weinfield, Sroufe, & Egeland, 2000; Weinfield, Whaley, & Egeland, 2004). Research has found attachment difficulties are associated with various mental health problems such as eating disorders and depression (B. Murphy & Bates, 1997) as well as enduring relationship problems (Gallo & Smith, 2001).

Attachment theory has been considered in relation to the impact of GAB on relationships. Landolt, Bartholomew, Saffrey, Oram and Perlman (2004) in a Canadian study of 191 homosexual men found that GAB was associated with paternal and maternal rejection in childhood and that paternal rejection predicted and mediated the association between GAB and attachment anxiety. However, there are some limitations in relation to these findings such as being a retrospective study the participants may have experienced recall bias and as participants offered to participate in the study there is the possibility of also self-selection bias limiting generalisation claims. Birkenfeld-Adams (1999) tested the hypothesis that children with GIDC would have similar insecure attachments with their mothers as children with other clinical disorders and would be more likely to have insecure attachments with their mothers than a control group of children. Her comparison between these three groups of Canadian children demonstrated that although 73% of the children with GIDC had insecure attachments, this was not significantly more than the non-clinical sample. More research is required in this area to tease apart the possible interplay between parent-child relationships and GAB.

Treatment
“...if you are not like everybody else, then you are abnormal, if you are abnormal, then you are sick. These three categories, not being like everybody else, not being normal and being sick are in fact very different but have been reduced to the same thing” Foucault (2004) pg 95.

As mentioned, transsexual people have received treatment in relation to the current dominant understanding of their experience. Therefore, historically, individuals who questioned their gender were provided with therapeutic input to assist with their emotional difficulties relating to their relationships with their parents. In the 1960s, hospitals gradually started performing GCS. However, a study by Meyer & Reter (1979) questioned the outcomes of the surgeries leading to debate over the use of surgical procedures with certain hospitals such as the John
Hopkins Hospital in America halting their surgeries. Meyer & Reter’s research has since been critiqued (Friedemann & Junge, 1998). The NHS has published guidance on clinical care for gender variant people which emphasises greater autonomy, flexibility and choice for service users (GIRES, 2008). Treatment includes counselling, family work, hormone treatment and if gender dysphoria persists for over two years then the person can be considered for GCS to physically change their gender permanently. However, research has shown that treatment varies throughout Great Britain (Murjan, Shepherd, & Ferguson, 2002).

*Treatment in childhood*

As transsexual feelings can start early in childhood, children can be referred for treatment. Zucker et al. (1997) state that most children referred to gender identity clinics do not develop into transsexual people but develop into people with a homosexual sexual orientation. Zucker (1997; 2008) promotes individual case formulation for each client but generally proposes a behavioural approach for GIDC comprising of support of same-sex peer relations, encouragement of gender-typical activities, limiting atypical gender behaviour expression and developing conversations on gender between parent and child. However, Wilson et al. (2002) suggest that if the majority of children who attend GIDC clinics are homosexual then it is unethical to apply a behavioural approach to try and change sexuality development.

The Portman clinic in the United Kingdom aims to consider the developmental processes that have been negatively affected in the child while assisting the family in negotiating this complex situation (Di Ceglie, 2000; Di Ceglie & Thummel, 2006; B. Wren, 2002). They propose that a non-judgmental acceptance of GIDC emphasising that the child’s experience is not the result of the child’s conscious choice as crucially important otherwise the child can experience rejection.

Group interventions have also been developed as a way to support parents and children (Menvielle & Tuerk, 2002; Rosenberg, 2002). Menvielle & Turk (2002) run groups for parents to assist the parents in supporting their child adjusting to their experience rather than to change the child’s behaviour. They propose that if parents are supported to work through their own processes then they will be less likely to be critical or punitive and more likely to be tolerant. Rosenberg (2002) reported on a group intervention for adolescents with GID and their parents based on self acceptance and reducing feelings of isolation via various strategies

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including psycho-education and peer support. Interestingly, this approach led some participants to discard their desire to become the opposite gender while maintaining atypical gender interests.

Recently, puberty delaying and cross sex hormone treatment as well as GCS have been used as interventions for adolescents. This form of treatment is another area of significant contention due to the ethical issues raised in case young people change their mind or experience regret (Bernadette Wren, 2000). At the same time, Giordano has proposed that it is unethical to not provide puberty suspension hormones due to the irreversible impact of some puberty hormones (2008). Cohen-Kettenis and van Goozen (1997) in a study of 22 adolescents who had completed GCS found that post surgery the participants scored in the normal range in relation to a range of psychological measures and reported increased social ability and no gender dysphoria. GCS did lead to some difficulties such as difficulties within sexual encounters. However, none of the participants described regret over their decision. Longer-term follow up studies are required to assess the overall outcome of adolescent GCS.

**Is there a correct intervention?**

The debate within theories of transsexuality and treatments of GID reflect a critical issue about whether “GID is an accident of biology (of organic origin), a disorder (in response to intra-psychic conflict), or a discourse of intolerance?” pg 67 (Manners, 2009). The dispute is further complicated by the ethical implications of the different positions. Moreover, these differing positions are further polarised by the current evidence based culture within Western medicine. Manners (2009) proposes that each individual requires a different approach depending on their experience and that no single therapeutic intervention is going to be suitable for every adolescent presenting with GID. However, she also feels that therapeutic input should emphasise self acceptance despite social non-conformity rather than trying to force the individual to conform.

**Mental Health**

There is some debate as to whether individuals with GID have a higher lifetime psychiatric co-morbidity than the general population (Nuttbrock, 2002). Hepp et al. (2005), in a study of 31 Swiss people with GID, found high levels of co-morbidity in individuals with GID. Furthermore, Kim et al. (2006) have found high levels of co-morbidity in non-Western
cultures. However, in other cultures where gender variation is accepted such as the Samoan culture, gender variant individuals do not experience associated mental health difficulties (Vasey & Bartlett, 2007). Children with GID have been shown to demonstrate more clinical problems than average (K. J. Zucker, 2005). However, Wallien, Swaab and Cohen-Kettenis (2007) propose that psychopathology is not a requirement for the development of GIDC but may be a consequence. Research has also shown that mental health problems decrease following completion of GCS for both adolescents and adults across cultures (Lobato et al., 2006; Matekole, Freschi, & Robin, 1990; Michel, Ansseau, Legros, Pitchot, & Mormont, 2002; Y. L. S. Smith, van Goozen, & Cohen-Kettenis, 2001). Nuttbrock (2002) proposes that mental well being for transgender people is linked to the disclosure to, acceptance by and support of family and friends in relation to the individual’s identity.

Suicide risk

High rates of suicide have been found for adolescent and adult transsexuals. Grossman & D’Augelli (2007) in a US study with transsexual adolescents found that nearly half of the sample thought about suicide and one quarter reported suicide attempts. Related factors in suicide attempts included suicidal ideation related to transsexual identity and experiences of past parental verbal and physical abuse. Gender based discrimination and victimisation have also been shown to be predictors for attempted suicide in transsexual adults (Clements-Nolle, 2006).

Impact of GAB upon mental health

Egan and Perry (2001) propose that it is not the view of oneself as gender atypical that affects psychological adjustment but the experience of felt pressure to conform. As described, Alanko et al. (2008) found that individuals who recalled exhibiting more GAB in childhood reported more adult psychiatric symptoms which were mediated by parental behaviour. Gender contentedness has been demonstrated to be positively associated with adjustment and felt pressure to conform to be negatively correlated with global self worth in school aged children (Carver et al., 2003). Furthermore, Van Beijsterveldt et al. (2006) demonstrated a link between GAB and more internalised and externalised problems in a sample of Dutch children at ages seven and ten.
Role of psychology for transsexual people

Transsexual people may be seen by psychologists as part of their transition process or separately for assistance with mental health concerns.

GCS

Research has questioned the role of psychology in GCS as potentially counter-therapeutic due to the inevitable large power differential inherent in a gate keeping role (Poxon, 2000; Reicherzer, 2006). Reicherzer (2006) found in a US study that transsexual people believe that the process of GCS and the diagnosis of GID compound the idea that gender non-conformity is disordered and are concerned that professionals will use their own biases to pathologise gender non-conformity. This research also found that transgender individuals appreciate clinical environments where they feel supported and accepted within their gender diversity and not treated as mentally sick.

Mental health settings

Transsexual people may be seen in therapy for assistance with mental health problems. Rachlin (2002) researched 93 American transsexual individuals experience of psychotherapy and found that they were likely to have therapy for general growth earlier in life followed by more gender specific therapy later in life. She found that therapists who had experience of working with gender issues were associated with higher patient satisfaction and a higher number of positive changes including progress in personal growth and gender related issues. Her participants consistently expressed appreciation for therapists who were flexible in their treatment approach and demonstrated respect for the patient's gender identity. Manners (2009) states that clinical work requires careful exploration of the individual’s experience in order to facilitate self acceptance. Raj (2002) has proposed a “transpositive therapeutic model” based on trans-affirmative approaches. Nine major guidelines are proposed including clinical orientation/treatment philosophy, assessment considerations, treatment considerations (including psychotherapy, diversified subpopulations and marginalized subpopulations), the therapeutic relationship, comprehensive case management, accountability/quality assurance, advocacy/alliance building, knowledge base/professional development and research.
**Therapeutic challenges**

It is important to note that clinical work with transsexual clients presents significant personal challenges for the therapist. Goethal and Schwiebert (2005) state that groups that are considered as “other” present therapists with a challenge as the responsibility to “do no harm” is far more complex due to the influences of therapists’ own deeply entrenched assumptions about gender. However, it is also important to note that some therapists may also identify as LGBT and therefore the issue of “other” may not present the same challenges. Research completed by Willging, Salvador and Kano (2006) on mental health care for sexual and gender minorities found that mental health providers despite explicit evidence that Lesbian Gay Bisexual and Transgender (LGBT) service users were receiving anti LGBT bias when accessing services purported that the local LGBT population received equal treatment. This research worryingly proposed that mental health practitioners were inappropriately using terms such as therapeutic neutrality, respect and being non judgemental to present an outward appearance of acceptance without having to challenge their own preconceptions or lack of knowledge about LGBT mental health difficulties. Goethal and Schwiebert (2005) highlight the importance of self-reflection in order to avoid contributing to pathologising the transsexual experience.

**Summary of key findings**

- The aetiology and development of transsexuality is not clearly understood, current understandings imply a strong biological component with development affected by social relations.
- Development of a transsexual identity is a difficult process as GAB is generally not tolerated by family, peers and society.
- Transsexual people can experience mental health problems. Mental well being seems to improve following GCS.

**Transsexual research**

Transsexual research historically has been neglected within mainstream research. Despite the differences between transgender issues and issues of sexuality, often they are considered together most commonly in the acronym LGBT. Even within this literature review, I have occasionally had to draw upon LGBT studies, due to the limited number of transgender and transsexual studies. Furthermore, research with the transsexual population has historically
focused on the aetiology, maintenance or prevalence of the ‘disorder’ (Sausa, Keatley, & Operario, 2007) and much research has also focused on the associated risks for the transsexual population (Bockting, Robinson, & Rosser, 1998; Herbst et al., 2008; Kenagy, 2002; Kenagy & Hsieh, 2005). However, recently research has started to look at the relational and emotional reasons behind increased risk (Crosby & Pitts, 2007; Melendez & Pinto, 2007). Furthermore, as described, some research has employed qualitative approaches to explore the process of transsexual identity development.

Trans groups (e.g. TransLondon) and researchers (Sausa et al., 2007) emphasise the importance of employing a qualitative approach to research with this group of people as it can provide rich descriptions of complex phenomena where established theories may not apply. Although research has started to reflect this emphasis on qualitative and affirmative approaches to understanding the needs of transsexual people, this type of research is still minimal. From discussions with transsexual people about their narratives and identities, Hill (1997) suggests that psychologists must reconceptualise theories on sex, gender and transsexual identity as well as methods of study in order to respect the gender diversity within society. He suggests involving people previously marginalised within gender theory in research will assist the alteration of assumptions underlying established psychological gender theory. Furthermore, Stryker (2006) highlights the difference between transgender studies and studying the transgender phenomenon. She states that transgender studies value the experience of the speaking subject to be an essential component of the analysis of the transgender phenomenon with the aim of enabling the “insurrection of subjugated knowledges” pg 12.

How can clinical psychology research be useful for transgender people?

Clinical psychology research aims to improve our understanding so that clinicians can be of maximum assistance to clients. Tacconelli (2008) highlights the importance of transsexuality awareness amongst psychologists and emphasises the importance of gender training in postgraduate courses. Carroll and Gilroy (2002) propose that educators and supervisors need to model a transpositive approach in counselling and that discussions about gender identity should be integrated throughout counselling courses. In addition, Maguen, Shipherd and Harris (2005) highlight the importance of knowledge of transgender issues when employing cognitive behavioural therapy. However, research by McFadden (2003) demonstrated
although some clinical psychology training courses provide some teaching on these issues, students do not feel adequately prepared to work with this population. Therefore, research into the experience of transsexual people should aim to educate psychologists assisting those negotiating this complex situation. Moreover, findings should contribute to informing psychologists better about the transsexual experience as well as depathologising the area. Manners (2009) states that “clinical psychology could have a prominent position in the GID debate because it can offer a contextual perspective appreciating the complex interplay between biological, social and cultural factors as well as a dimensional understanding of gender identity” pg 66.

Current research demonstrates confusion about the aetiology and development of the transsexual experience. However, it is clear that this uniquely varying developmental experience involves an intricate interaction between the individual and the world around them as Newman (2002) states “GID is a condition placed at the interface of culture and nature” pg 358. This complicated process possibly leaves the transsexual person vulnerable to psychological difficulties. As described, psychological theories present some opportunities to make sense of this experience. The importance of the relationship with primary caregivers is accepted within society and psychology and some research has started to consider relationship issues for people who do not conform to gender expectations. However, no research has focused on asking transsexual people about their experiences of these relationships and the impact of these relationships upon themselves and other relationship experiences. This type of qualitative research involving transsexual people may provide the information required to inform psychological theories on gender to include the unique experiences of transsexual people which are contrary to dominant societal beliefs. This type of research may also potentially provide a retrospective appraisal of social-familial experiences that may aid therapeutic psychological endeavours around the processing of clients’ transsexual experiences.
2. 4 Aims and research questions

The main aim of this research project is to gain an insight into the experiences of parental relationships of transsexual people specifically Transwomen. This research is particularly interested in the perceived effect of a developing Transwoman identity upon early relationships and how these relationships were perceived to impact upon the Transwoman as well as their further relationships. It therefore aims to explore the following areas:

1. What were the Transwomen’s experiences of their early relationships with their parents?
2. What was the impact of a developing Transwoman identity on relationships with parents?
3. What was the impact of these relationships on the individual?
4. What was the impact of these early experiences upon other relationships?
3. Methodology

3.1 Service user led research
Several British Psychological Society (BPS) guidelines emphasise a service user led approach. The BPS good practice in research guidance (BPS, 2005) highlights the importance of involving service users throughout any research process. In addition, the BPS Code of Conduct Respect principle (BPS, 2006) states that psychologists should “respect the knowledge, insight, experience and expertise of clients, relevant third parties, and members of the general public” pg 9. The Department of Health (DH) also requires service user involvement in research projects (DH., 2004).

In line with these ideas on the importance of service user involvement, transsexual individuals and groups were involved in the process of this research from the beginning. Initially a quantitative approach was considered for this project. However, discussions with members of the Trans community highlighted the potential dangers of pathologising the transsexual experience when using quantitative approaches. Furthermore, as described in the introduction Trans groups (e.g. TransLondon) and researchers (Sausa et al., 2007) emphasise the importance of employing a qualitative approach to research with this group of people as it can provide rich descriptions of complex phenomena where established theories may not be directly applicable. Qualitative approaches prioritise the individual experience over the value of generalisation and as Barker, Pistrang and Elliot (2002) state “qualitative approaches avoid the oversimplification imposed by quantification since some things cannot be easily expressed numerically” pg 74. Furthermore, qualitative approaches are useful for exploring relatively new and under-developed areas of research. Therefore, a qualitative approach seemed most useful for exploring the subject of transsexual parental relationships.

3.2 Which qualitative approach?
Barker et al. (2002) state that qualitative approaches can be broadly separated into the phenomenological or the social constructionist traditions. However, they also acknowledge that there is considerable overlap as well as diversity within the various qualitative approaches. Simplistically phenomenological approaches prioritise the individual’s view and experiences of the world whereas social constructionist approaches tend to challenge taken for granted assumptions of the world and reality often focusing on language as a social
product. A social constructionist approach would have been useful for this project as the transsexual experience opposes the taken for granted assumption of a binary view of gender which is prevalent in Western society. However, a phenomenological approach was considered most useful as it prioritises the experiences of the individual which is in line with the constructivist position of this research. When considering possible methodologies within the phenomenological approach, Interpretative Phenomenological Analysis (IPA) was considered most useful as IPA prioritises the view of the participant therefore avoiding pathologising the transsexual experience. Furthermore, IPA has been suggested as a particularly useful methodology when researching complex phenomenon (J. A. Smith & Osborn, 2008). Grounded theory was a possible alternative phenomenological approach. However, grounded theory prioritises the development of theory over the view of the individual which was not the priority of this project.

3.3 Interpretative Phenomenological Analysis

According to Barker et al. (2002) phenomenological approaches work from three main assumptions, firstly there is the emphasis on the sense making of experience, secondly that multiple perspectives are possible and thirdly that understanding is the aim of science. IPA is a qualitative approach proposed by Smith which attempts to explore how individuals make sense of their world and the meaning that individuals make of certain experiences (J. A. Smith, Jarman, & Osborn, 1999; J. A. Smith & Osborn, 2003).

3.3.1 Philosophical underpinnings

IPA draws upon ideas from phenomenology and hermeneutics primarily through the works of Husserl and Heidegger and although it is beyond the scope of this research to provide detailed information on these ideas nevertheless a brief description of their influences on IPA is useful in understanding the IPA approach. Phenomenology is the study of phenomena i.e. people’s experiences and views of the world. According to Smith, Flowers and Larkin (2009) the philosopher Husserl proposed that the subjective experience was worth investigation and examination as common features will exist for people who have had the same experience and therefore close inspection of an individual’s experience can highlight universal commonalities (Lopez & Willis, 2004). Husserl also gave close consideration to the role of intentionality within experiences i.e. how individuals decide to place attention on aspects of an experience. In order to be able to focus on another’s perception and experience of their
world, Husserl suggested that “bracketing” or setting aside taken for granted assumptions of the world is necessary (J. A. Smith et al., 2009).

Heidegger, a student of Husserl, was influenced by the study of hermeneutics or interpretation and emphasised the interpretative aspect of conscious experience. He proposed that this interpretative experience is grounded in and influenced by the experienced world of relationships, culture, language and people (J. A. Smith et al., 2009). Heidegger proposed a multifaceted relationship between the interpreter and the interpreted consisting of many layers, levels and influences. He also suggested that interpretation occurs in relation to the interpreters’ preconceptions and contrary to Husserl’s ideas, Heidegger felt that bracketing could not stop the influence of preconceptions on interpretation. He suggested that in order to ascertain the influence of preconceptions upon interpretation ongoing acknowledgement and attention to preconceptions is required. For more information see Smith, Flowers and Larkin, (2009), Heidegger (1962) and Husserl (1970).

IPA draws upon ideas from phenomenology and hermeneutics. From phenomenology, IPA focuses on the subjective experience of an individual and how that person makes sense of their experience. It draws upon the hermeneutic tradition by recognising the role of interpretation within the process highlighting a double hermeneutic where the interviewee is making sense of their experience and the researcher is making sense of the interviewee’s interpretation. IPA recognises that this process is complex and that the interviewer is not able to avoid bringing preconceptions into their interpretation. This dynamic is present throughout the research process in the construction of interview questions and probes as well as the analysis of the text. Although IPA proposes that assumptions have an inevitable impact, it also recognises ways to manage the influence of the interpreter which will be reviewed in the reliability and validity section below. It is also important to note that there are various different possible interpretative positions and that IPA combines a questioning and empathic hermeneutic (J. A. Smith et al., 2009).

3.4 Design

Smith and Osborn (2003) state that “there is no single, definitive way to do IPA” pg 52. However, they provide guidance for the stages of the IPA process which were used in the planning and designing of this research project and will be covered in the following section.
3.4.1 Participants

3.4.1.1 Sample size

Generally sample sizes within qualitative research are smaller than quantitative research. IPA similarly suggests the use of small sample sizes (J. A. Smith et al., 2009; J. A. Smith & Osborn, 2003). Research using IPA methodology has been published with a sample of one participant (Eatough & Smith, 2006; Glasscoe & Smith, 2008) as well as samples of between three and seven participants (Hunt & Smith, 2004; Osborn & Smith, 2006a, 2006b; J. A. Smith, 1999; J. A. Smith, Michie, Stephenson, & Quarrell, 2002; J. A. Smith & Osborn, 2007; Thompson, Kent, & Smith, 2002). In line with IPA methodology which proposes a small sample size and anticipating that this sample may be difficult to access due to the stigma associated with the transsexual experience, it was decided that a sample size of six was appropriate for this project.

3.4.1.2 Inclusion and exclusion criteria

Smith and Osborn (2003) state that IPA requires a “fairly homogenous sample” pg 54 so it was decided that adult post-transition Transwomen would be recruited to participate in this study. Transwomen were chosen over Transmen as there is some evidence, described above, that the Transwoman experience occurs more frequently or perhaps presents more frequently and therefore targeting this part of the population would assist the recruitment process. As this study was interested in the potential impact of a developing transsexual identity on parental relationships, a second inclusion criterion was proposed that participants needed to have experienced their transsexual feelings early in life. Also, in order to assist homogeneity a third inclusion criterion was included that participants needed to be post-transition.

3.4.1.3 Recruitment

Participants were recruited through Trans community groups such as TransLondon, the Beaumont society, Spectrum Haringey and FTM London. Furthermore, recruitment occurred through online Transgender forums. Depending upon the organisation, potential participants were either contacted via membership email lists or through adverts on websites. In addition, some participants found out about the project via word of mouth. Seven potential participants volunteered for the study. Six were accepted with the seventh excluded as she was pre-transition and therefore did not meet our inclusion criteria.
3.4.1.4 Sample characteristics

Although it is important to situate the sample so that readers can make judgements in relation to the generalisability of the research, at the same time providing participant information potentially compromises confidentiality therefore the following description of the sample’s characteristics attempts to provide enough information so that the reader can have a reasonable knowledge of the participants while some information such as occupation has been excluded in order to avoid compromising confidentiality. Table 2 contains information about the characteristics of the participants. The participants’ ages ranged from 39-60. Participants described themselves as coming from a range of White ethnic backgrounds. The participants’ self-described gender varied with four of the six participants describing themselves as female, one describing herself as trans-female and another as female/variable. This information was collected using a background participant information sheet (Appendix 1).

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Ethnicity</th>
<th>Unspecified responses to question of ethnicity</th>
<th>Post transition</th>
<th>Self described gender</th>
<th>Sexuality</th>
<th>Education level</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1: Laura</td>
<td>39</td>
<td>Caucasian</td>
<td>Yes</td>
<td>Trans-female</td>
<td>Not sure. Used to call myself straight but now in fairly serious relationship with a girl.</td>
<td>MA</td>
<td></td>
</tr>
<tr>
<td>P2: Sarah</td>
<td>60</td>
<td>White</td>
<td>Yes</td>
<td>Female/Variable</td>
<td>Bi</td>
<td>HND</td>
<td></td>
</tr>
<tr>
<td>P3: Kate</td>
<td>56</td>
<td>White British</td>
<td>Yes</td>
<td>Female</td>
<td>Monogamous heterosexual</td>
<td>MSc</td>
<td></td>
</tr>
<tr>
<td>P4: Sophie</td>
<td>46</td>
<td>British White</td>
<td>Yes</td>
<td>Female</td>
<td>Queer</td>
<td>Degree</td>
<td></td>
</tr>
<tr>
<td>P5: Claire</td>
<td>59</td>
<td>British of Irish and Scots descent</td>
<td>Yes</td>
<td>Female</td>
<td>Lesbian</td>
<td>BA</td>
<td></td>
</tr>
<tr>
<td>P6: Tanya</td>
<td>51</td>
<td>Welsh</td>
<td>Yes</td>
<td>Female</td>
<td>Heterosexual</td>
<td>BSc</td>
<td></td>
</tr>
</tbody>
</table>

Table 2: Table of participant characteristics
3.5 Ethical considerations

3.5.1 Informed consent
Following initial contact, all participants were provided with information about the project (Appendix 2) and an opportunity to ask questions. Participants were left to contact the main researcher if they continued to be interested in the project. Once the participants agreed to participate, consent forms (Appendix 3) were sent and received before arrangements were made for interviews. During the research process, participants were frequently informed about their right to withdraw both in writing and verbally. In addition, prior to the interview commencing the main researcher reviewed this issue again with participants.

3.5.2 Potential Distress
Prior to the beginning of the interview, confidentiality was discussed and the participants were informed that distressing experiences would be handled sensitively. In addition, a “Sources of comfort” sheet was prepared to be given to all interviewees after the interview (Appendix 4). The initial interview was highly emotional and this led the principal researcher to review how to manage distress in an ethical way. In agreement with supervisors, the researcher discussed with each participant prior to the interview about the potential emotional content of the interviews and enquired whether the participants had sources of support available to them. It felt ethically important to respect that the participants wanted to share their stories but also to make sure that they were prepared with support if this process left them feeling emotionally vulnerable.

3.5.3 Confidentiality
Participants were assured that anonymity would be maintained as much as possible. All names of the participants have been replaced with pseudonyms which, when possible, have been agreed with the participants. Furthermore, locations have been deleted in order to maintain the highest possible level of confidentiality.

3.5.4 Unique ethical considerations for the transsexual population
The transsexual population is a population that is marginalised, victimised and persecuted. Completing research with this population requires high levels of sensitivity and awareness of the struggles experienced. I attempted to make the project transsexual sensitive by involving transsexual people in the development and review of the project as well as holding an
empathic research position. Participants were informed of the project’s research position when they initially showed interest in participating in the project. In addition, measures were taken to make the participants feel as comfortable as possible within the process such as offering three venues for the interview and by careful consideration of the interview schedule so that questions were worded sensitively and were ordered to facilitate the development of a supportive interview relationship before raising potentially painful subjects.

3.6 Data Collection

3.6.1 Semi–structured interviews
IPA purports the use of semi-structured interviews as the ideal method of data collection (J. A. Smith et al., 2009; J. A. Smith & Osborn, 2003). Semi-structured interviews enable the flexibility required to respond to the individual experience while ensuring that the discussion remains closely connected to the research question.

3.6.1.1 Construction of the semi-structured interview
Smith and Osborn (2003) suggest consideration of the following factors when developing the semi-structured interview.

1) Consideration of the broad areas the interview aims to cover.
2) Awareness of the most appropriate sequence. Balancing a logical order of questions with a sensitive ordering of questions starting with gentler questions in order to make the participant feel comfortable before discussing difficult topics.
3) Develop appropriate questions relating to each specific area needing to be covered.
4) Consider probes and prompts to follow up questions.

For this project, the construction of the semi-structured interview schedule involved an initial interview schedule which was revised several times in consultation with all three supervisors (Appendix 5). In addition, as recommended at the IPA conference 2008, questions were included at the end of the interview in order to assist reflections on the interviewing process.

3.6.1.2 Interview process
Participants were offered three venues for the interview either at their home, at the University or at rented rooms in London. Participants were offered these locations in order facilitate a
safe and supportive environment to talk in depth about this sensitive topic. In addition, this flexibility was thought to encourage participation. At the end of the interviews, in addition to the “Sources of comfort” sheet participants were provided with a sheet debriefing the topic (Appendix 6) and a sheet asking them whether they would be interested in the findings of the study (Appendix 7). Interviews were recorded and transcribed.

3.6.1.3 Challenges of interviewing
IPA interviewing is not a simple or easy process particularly for someone new to IPA. Throughout the interviews I attempted to remain aware of Smith and Osborn’s (2003) tips for interviewing:

- Avoid rushing in too quickly
- Minimise use of probes
- Ask one question at a time
- Monitor the impact of the conversation on the participant

3.6.1.4 Practice interviews
In order to improve my researcher interviewing skills I completed four practice interviews, two with training colleagues and two with my IPA supervisor. I recorded the two practice interviews with colleagues so that I could review my own interviewing style. The practice with my supervisor enabled me to have feedback from a highly experienced IPA researcher. In addition, he practiced interviewing me providing me with an interviewing model.

3.6.1.5 Pilot interview
The pilot interview was used as an opportunity to review my interviewing style and the semi-structured interview format. The pilot interview was therefore shared with my IPA supervisor in order to receive feedback. It was agreed that my approach was quite tentative possibly reflecting my IPA inexperience and as a result holding too closely to Smith’s interviewing suggestions such as avoiding rushing in too quickly. Therefore it was suggested that in the remaining interviews I needed to remain mindful of keeping the focus of the conversation on the research area while allowing flexibility within the discussions.
3.6.1.6 Remaining interviews
Five more interviews were conducted over a three month period. All interviews were conducted before starting the analysis. Hopefully this increased the likelihood that each participant’s interview was valued in its own right to try and minimise the influence of earlier interviews on later interviews. However, as described, it is recognised that researchers are unable to participate in an interview without bringing their own preconceptions to the process based on their experiences which would inevitably include experience of prior interviews.

3.6.1.7 Interview difficulties
Due to the nature of the topic under exploration, at times, the interviews contained high levels of distress. At all times the wellbeing of the participant remained paramount and the conversation was stopped while the participant’s emotional state was assessed. In some ways the principle researcher’s background as a Trainee Clinical Psychologist was useful in that it enabled a sensitive, empathic response to these emotional experiences while being able to check potential risk with the client. However, this background also provoked an interviewing dilemma between the different positions of interviewing as a therapist and interviewing as a researcher.

3.6.1.8 Recording and transcription
All interviews were recorded and transcribed. The initial two interviews were transcribed by the main researcher with the following interviews transcribed by a confidential transcription service. All transcripts completed by this service were reviewed by the main researcher for accuracy before analysis commenced.

3.7 Data Analysis
3.7.1 The analytical process
Although Smith et al. (1999) provide guidelines on analysis they state that “there is no single definitive way to do qualitative analysis” pg 4. Furthermore, as described, analysis is coloured by the researcher’s assumptions highlighting the need for reflection about one’s own position. Data analysis within IPA aims at all times to keep meaning as central. The process is idiographic in that it involves a case by case analysis and is inductive in that it is flexible enough to allow unanticipated themes to emerge during analysis (J. A. Smith, 2004). It moves
“from the particular to the shared, and from the descriptive to the interpretative” J. A. Smith et al. (2009) pg 79.

3.7.1.1 Stages of analysis

Analysis involves a number of stages within each interview followed by analysis across the interviews (J. A. Smith et al., 1999).

**Interview Analysis**

Initial analysis involves the analyst attempting to immerse him/herself in the participant’s data by reading and rereading the transcript. The researcher underlines participant’s statements that seem highly relevant and then gradually begins to code important words down the side of the transcript. At this stage the coding remains very descriptive i.e. close to the word of the text generally using paraphrasing to summarise the participant’s experience. The second stage of analysis involves developing a higher order of analysis by summarising the prior level of coding with an added level of interpretation including psychological concepts and abstractions. This level of coding also includes linguistic comments on the use of language by the interviewee.

As described, IPA combines questioning and empathic hermeneutics. Smith (2004) suggests that initial analysis takes an empathic position followed by a more critical stance within the second stage of analysis. He highlights that this second form of interpretation may not be available to the participant as they may be unwilling or unlikely to see but that this form of interpretation provides a fuller version of the participant’s lived experience. In line with these ideas, my initial analysis maintained an empathic position by remaining close to the text with the second stage of analysis employing a more critical perspective in the form of highlighting contradictions, what was unsaid, emotional content or lack of, metaphors and descriptive imagery. This more sophisticated analysis enabled a valid higher level of interpretation while remaining mindful of the complexity and often contradictory nature of experiential data. However, as always within IPA, there was a tension to ensure that higher levels of analysis remained grounded in the text. Appendix 8 provides an example of analysis of an interview transcript with comments on the right hand side and emerging themes on the left hand side (this transcript will be removed in the final version in order to maintain confidentiality as the
thesis will be made publicly available). To facilitate the audit trail, the emerging themes are also listed in Appendix 9.

During supervision, we used different ways to consider and connect with the data. Appendix 10 shows the process of trying to make connections across themes in order to cluster themes into groups of similar constructs. Smith and Osborn (2003) describe this process like a “magnet with some themes pulling others in” pg 71. The final groupings of similar constructs can be seen in Appendix 11. At all times this process is iterative with frequent reference to the transcript to ensure that the themes reflect the experience described by the interviewee. This iterative process is ensured by accompanying each theme with a supporting quote from the text (Appendix 12). All interviews were analysed in the same way in order to maximise validity.

Themes across interviews
As described, IPA is idiographic in that each interview is examined closely and analysis is completed before moving onto the next interview. Following the analysis of all the interviews, a cross case analysis occurred to look for divergent and convergent themes in order to identify major themes. Smith states that this part of IPA analysis contains a dual quality where cases demonstrate unique particular experiences but also share higher order qualities (J. A. Smith et al., 2009).

Experience of the analysis process
I experienced the analysis as a long process requiring patience and perseverance. In addition, initially, I found the analysis process paradoxical by simultaneously prioritising the rich individual experience while moving away from the data because of analysis and comparison requirements. However, through discussions in supervision I realised that this tension could be sustained and actually lends itself to results which are rich and multifaceted accurately reflecting the complexity of the human experience.

3.7.2 The writing process
The writing up process (seen in the results section) aimed to develop a narrative argument interspersed with verbatim supporting extracts from the text as suggested by Smith and Osborn (2003). In addition, the write up planned to enable two stories to develop, the
narrative of the themes shared by participants but experienced in unique ways and the individual narrative of the participants (J. A. Smith, 2004).

3.8 Validity and reliability

The requirements for validity and reliability differ between quantitative and qualitative research methods. However, Elliot, Fischer and Rennie (1999) developed “Guidelines for Publication of Qualitative Research Studies in Psychology and Related Fields” suggesting ways that qualitative research can increase its validity and reliability (Appendix 13). These guidelines as well as Yardley’s emphasis on transparency (2000) were used as a framework to maximise validity and reliability in the research process and will be discussed in the following section.

3.8.1 Providing credibility checks

Credibility checks are used in qualitative research to assist transparency within the process as well as to increase validity. This project used peer review, supervision and member checking as credibility checks.

3.8.1.1 Peer review

Throughout the process of this research project I participated in a regular IPA group of training colleagues. In addition to discussing the complexities of IPA methodology and analysis, the meetings consisted of an opportunity for several colleagues to analyse interviews providing verification of the analysis process by providing opportunities for disagreement and discussion.

3.8.1.2 Supervision

Three of the six transcripts were shared with the IPA supervisor and meetings were arranged to discuss ideas on analysis. Both the supervisor and the main researcher developed ideas on the emerging themes prior to these meetings in order to allow for disagreement and discussion therefore providing verification of the analysis process. Supervision also provided an opportunity to discuss the reflexive aspects of the process. After completing three transcripts to the level of super ordinate themes, the remaining transcripts were completed without input. Later meetings involved reviewing the super ordinate and major themes as well as the write up.


3.8.1.3 To member check or not member check

Member checking involves reviewing the analysis with interviewees and has been proposed as a method of increasing face validity in qualitative research (Barker et al., 2002; Elliott et al., 1999). Member checking has also been suggested as potentially useful within IPA (J. A. Smith et al., 2009). However, some IPA researchers feel that member checking is not appropriate as the analysis is about the researcher’s interpretation of the interview. Therefore within IPA research some projects have decided to member check by sending summaries to participants inviting comments (Alexander & Clare, 2004; Whittington & Burns, 2005) or by checking categories with participants (Rhodes, Jakes, & Robinson, 2005) whereas others have not (Colton & Pistrang, 2004; Hunt & Smith, 2004).

I deliberated over whether to include member checking within this project as I was conscious that the results reflect my interpretation of the participants’ experience. However, all participants asked to be involved in all aspects of the project including member checking. Therefore, I decided to share my ideas on the interviews with the participant by providing brief summaries of the interviews similar to the method used in research by Alexander and Clare (2004) and Whittington and Burns (2005). I wrote the summaries from an empathic perspective and included the participants’ words in the text an example can be seen in Appendix 14. The summaries included a space for participants to comment upon my ideas providing an opportunity for disagreement with the research acting as a credibility check as well as an opportunity to gain additional useful information to stimulate my thinking further.

Five out of the six participants chose to participate in this part of the project. I received three written responses in relation to the summaries. The responses generally provided short feedback on the accuracy of the summary. One participant provided some extra information and another reminded me of the importance of maintaining a non pathologising position. In order to assist the audit trail while maintaining confidentiality, I have included one response in the Appendices section (Appendix 15).

3.8.3 Transparency

This project attempted to maintain high levels of transparency by situating the sample, providing an audit trail and being reflexive (Elliott et al., 1999). Situating the sample involves providing sample descriptors so that the project highlights generalisation limitations
for readers even though generalisation is not an aim of this methodology. An audit trail provides the reader with the ability to view the analytic process by clearly explaining the analytic process and by providing examples to support the audit trail process via information contained in the Appendices section (Appendix 8, 9, 10, 11, 13, 14 & 15). Grounding the results in examples (in the results section) provides another aspect to the audit trail by providing the reader with an opportunity to check whether the conclusions are logical and coherent. Reflexivity will be discussed below.

3.8.4 Reflexivity

As described, reflexivity is an important aspect of qualitative and IPA research. It is used to assist transparency and to highlight the researcher’s position and the influences upon their analysis. This research has attempted to be transparent about its perspective from the outset by positioning both the principle researcher and research. In addition, a section within the discussion further comments upon reflexive ideas. To assist this process, reflexive issues were discussed in supervision. In addition, I maintained a reflective journal throughout the research and following interviews recorded my own experience of the interviewing process. Below are the main themes that I experienced during the development of the project, the interviews and the analysis process.

Uncertainty

Uncertainty was a frequent experience for me throughout this project. This theme had many layers. From a methodological perspective, this was my first experience of IPA and so I did not feel confident in the methodology. From a personal perspective, I come from a family with a traditional view on gender which I had previously not thought to question as I had not had personal experience of people with gender issues. This experience helped me challenge my family narratives on gender but initially I felt uncertain due to my lack of personal experience. Furthermore, the idea of participating in research with this population made me anxious as I was concerned about the risks involved in “outsiders” completing research on minority populations particularly as my literature review highlighted a history of maltreatment and prejudice in which I did not want to participate.

Goffman (1972) stated that many obstacles exist within conversations with those that are “stigmatised”. There are many potential sources of discomfort due to the different
experiences including awareness of these differences as well as awareness of this state of awareness. This discomfort can lead to avoidance or explicit direction. Goffman stated that “the wise” recognise that in spite of his “failing” the stigmatised individual is seen as an ordinary other and therefore the individual does not need to feel shame or exert self-control in his presence. This “wise” person could be considered a “courtesy member”. My field supervisor could be considered a “courtesy member” of the transgender community. He is involved in the Trans movement, has jointly set up a transgender group and works in the field. In order to increase my personal knowledge, he brought me to several transgender events which provided me with an opportunity to be introduced to the community and to discuss potential areas for research. This process was anxiety provoking for me as I was concerned about how I would come across and was concerned with the idea of “outsider” research. However, the response I received was that these people did not see such a divide and did not consider me to be an “outsider” as they did not see their brothers, sisters and family members as outsiders just people with different experiences. These meetings helped lessen my anxiety and uncertainty during the interview process.

*Expectations of the research process*

Prior to the interviews, I considered what I expected to find from the interviews. Based upon the literature and also from my experience of working with children and families who have negotiated difficult experiences, I expected that the participants would have difficulties in their early relationships and would have difficulties being close to their parents. At the same time, I wondered whether all parents would have difficulties with GAB or whether some would be more supportive in line with the research by Alanko et al. (2008). I expected that parents that were more supportive would have a positive effect upon the individual. I think my background in quantitative research affected this process as my expectations seemed similar to hypotheses based on the previous research rather than rich expectations, reflecting a more quantitative approach.

*Experience of the research interviews*

My experience of the research interviews was like a journey with different stages, hills and troughs. I think I swung from being extremely tentative with any answer being useful to being more directive thinking there was a right answer to obtain and then finally to finding a balance between being questioning and recognising that how participants responded reflected
part of their experience rather than purely my ability as an interviewer. For example, in one
interview a participant described highly emotional experiences but could not recall emotional
content. I came to understand that this was not a reflection of my inability to connect with
the participant’s true experience but was a reflection of the impact of their experience,
another layer of their story. In some ways, this seems a developmental process where with
time and practice, I gradually learned to find a balance between involvement and observation.
4. Results

Overview

The analysis developed two major themes with eight corresponding super ordinate themes seen in Table 3. The first major theme was titled “the struggle to belong” and the corresponding super ordinate themes were “the disappointing feminine me”, “trying to belong”, “the unacceptable me”, “disconnection from others and self”, “the struggle in new relationships” and “the influence of context”. The second major theme was titled “the complex journey to becoming me” with two corresponding super ordinate themes “the complexity of realising me” and “reconnection while still being me”. Within all the themes there were similarities and differences between participants which will be explored within this section. Themes will be described by using quotes from the transcripts as well as higher forms of analysis such as the participants’ use of imagery and metaphors as well as micro-textual interpretation to elucidate concepts further. Due to space constraints line numbers have been excluded except for Sarah whose line numbers have been included to assist the audit trail. Numbers in brackets refer to length of silences as well as audible non-verbal communication such as sighing and laughing. Identifying information has been removed in order to maintain confidentiality.
<table>
<thead>
<tr>
<th>The struggle to belong</th>
<th>The complex journey to becoming me</th>
</tr>
</thead>
<tbody>
<tr>
<td>The disappointing feminine me</td>
<td>The unacceptable me</td>
</tr>
<tr>
<td>Trying to belong</td>
<td>Disconnection from others and self</td>
</tr>
<tr>
<td>The struggle in new relationships</td>
<td>The influence of context</td>
</tr>
<tr>
<td>The complexity of realising me</td>
<td>Reconnection while still being me</td>
</tr>
</tbody>
</table>

*Table 3: Table of major and super ordinate themes*
Major theme one: The struggle to belong

“The struggle to belong” is a complex concept involving many aspects and tensions. Despite some participants describing a “sense of belonging” and “freedom” to express themselves as young children, all participants struggled to belong once there were “expectations of the masculine” on them and experiences of “doing it wrong” leading to a sense of being a disappointment to their parents. In order to negate these disappointing moments, the participants described making various attempts to connect with their parents but for some this process was impossible as they would accidentally express gender atypical behaviours or because some parents were unreachable. These negative experiences elicited a sense of being unacceptable and of disconnection. These struggles appeared to recur within participants other relationship experiences. In addition, the participants’ experiences seemed to be mediated by their parents’ own family experiences of parenting and the social context in relation to society’s expectations of gender.

The disappointing feminine me

All participants spoke of receiving the message from their parents that their gender atypical behaviours were not appropriate. Different participants received this message in different ways. Sophie and Sarah spoke of frequent experiences of receiving clear messages that their behaviour was wrong.

* I got told you know “you mustn’t do that you mustn’t play like that”
  Sophie

* I remember my parents turning to me and saying “don’t act like that”
  Sarah 611

Claire stated that her father “was worried” about her atypical gender behaviour and frequently made comments such as:

* you’re walking like a pregnant tart
  Claire

This statement had multiple meanings for Claire. Firstly, commenting about walking like a woman was a significant insult as her father was “very much a man’s man”. In addition,
Claire grew up in a strongly religious family so “a pregnant tart” implied sinful behaviour of sex outside of marriage as well as stupidity for getting pregnant. Claire described that although her parents made comments like the one above; in general they did not explain her mistakes but rather showed “displeasure by withdrawing affection”.

Kate’s atypical gender behaviour was also a problem for her parents.

[Sighs] it was a it was a problem

Kate

The sigh at the beginning of Kate’s description gives an indication of the heaviness of her experience. The repetition of words could suggest an impossible search for a sufficient word to describe her experience. The eventual use of the word “problem” within the heaviness of the beginning of the statement seems an understatement perhaps reflecting a sense of powerlessness within her experience. Her gender atypical behaviour was a significant problem for her parents as they took her to a doctor for being a “delicate lad”.

my parents dis tried to discourage me from playing with soft toys

Tanya

Tanya’s correction from parents discouraged to “tried to discourage” could indicate the futility of her parents’ attempts to discourage her from playing with soft toys as well as their own difficulties attempting to negotiate this aspect of their relationship with their child.

Most of the participants reported receiving this message from both parents whereas for Laura the message mainly came from her mother by for example her mother “steering” her away from gender stereotypes. However, Laura described growing up in a “cradle of support” and retrospectively, considered that her mother may have attempted to redirect her from feminine areas as a way to protect her.

...mum especially was um anxious to um suppress this thing in me because maybe she saw that it was confusing me

Laura
The parental reactions to their feminine tendencies instilled in the participants a sense of being a disappointment to their parents. Tanya stated

*um and the fact that I wanted to have dolls was clearly a disappointment to him the fact that I played with these stuffed animals was a disappointment to him*

*Tanya*

The way Tanya lists her disappointing behaviours provides a sense of endless disappointments as if she was a never ending disappointment. Similarly Claire’s description below of being a disappointment to her parents includes both a general sense of being a disappointment as well as specific ways of being a disappointment indicating the pervasiveness of the experience of being a disappointment.

*there was always that sense of me being a disappointment in all sorts of ways*

*Claire*

Sarah received the following response when she informed her mother of her desire to transition.

*...“you’ve been a disappointment to me all your life” right “you have never been what I wanted you to be” that’s what she said “you have never been” so they were forever trying to push me into being something I wasn’t*

*Sarah 538-540*

Sarah’s mother’s words are clear, unambiguous and painful. The word “push” conjures up an image of a physical struggle between Sarah and her parents. However, the last part of the sentence reflects the complexity of trying to push someone into being.

For some of the participants disappointment was accompanied by a sense of fear. Laura described that her gender atypical behaviour “*inculcated a sense of um danger*” and spoke of her concern about risking relationships with people that she depended upon.
at the same time you you know a figure of authority if you like this adult figure is somebody who you know you really rely on because they feed you they clothe you they provide for you and you don’t want to you know piss them off

Laura

Tanya recognised an imminent danger and spoke about being “smart enough to not actually put” herself at risk.

I knew that if I told anybody about what I felt inside I was gonna be in deep shit

Tanya

Sarah’s description below gives the impression that she congratulates herself for surviving the oppression of her youth implying that survival was not a guaranteed achievement.

you know just the oppression of my childhood and my teenage years like I say the survival I did I survived I did it was good not bad

Sarah 763–764

Kate provided a mixed view on her experience. In some of her descriptions, she stated that she “never regarded it as being a problem either way” and that she was happy holding her position at the top of the “normal distribution” of gender. However, as described, she mentioned that her parents had problems with her gender atypical behaviour and as well upon hearing about April Ashley (a prominent Transwoman of the 1960s) described:

I think “well okay I’ll I’ll survive now”

Kate

In some ways there were very clear dangers for the participants. For example, Sarah knew of a contemporary of hers who received horrific treatment in a psychiatric hospital after stating that she was a girl. In addition, Tanya stated that when she was a child, transvestites were put on the sex offenders register.
Trying to belong

The participants described employing different methods to re-establish their relationships with their parents. However, this was not easy as some participants would accidentally express themselves and then have to re-establish their relationships. Some participants spoke about the negative impact of this position upon their relationships and themselves.

Tanya, Claire and Sophie spoke of feigning interest in activities in order to foster a relationship even if these activities held no interest for them. Tanya reported that her mother was preoccupied with her sibling therefore Tanya recognised that the only possible source of “parental attention” was her father and fostering his attention “meant doing things that he was interested in” so she participated in stamp collecting and model railway making. Similarly, Sophie feigned interest in sports to connect with her father but described the activities as “mechanical” and “entirely unemotional”. With her mother, she tried to support her emotionally in order to re-foster her bond.

*I thought oh great if I can give her some support you know there might be a bit more sort of re-bonding*

*Sophie*

Claire described endless attempts to find a way to have a relationship with her father.

*I was constantly trying to find ways in which we could have a relationship where those issues didn’t come up so much*

*Claire*

The repetition of the word “find” strengthens the idea of the repetitive nature of Claire’s experience of trying to connect with her father. In addition the comment “didn’t come up so much” indicates that the gender issues were always present just in varying degrees

Claire and Kate spoke about developing characteristics to assist developing their relationships. Claire spoke of being “determined to be liked” and developed the ability to be “charming” as a way to re-connect to her parents. Her self correction from using compensating to over compensating perhaps reflects the excessive need to reconnect.
...because I’d acquired that habit of compensating by being charming

Claire

Kate described participating in activities with her father such as spending time with him while he developed a set of bedroom furniture. With her mother, it was “very difficult to actually have a relationship” with her as she had an “incredibly volatile temper”. Kate attempted to facilitate her relationship with her mother by using a rational approach when her mother lost her temper. However, she eventually recognised that she was “getting no support from” her parents which made her “devalue them” and obtain support from elsewhere. Like Claire with her parents, Kate described developing her gregarious characteristics to try and foster support from outside her family.

it made me get relationships elsewhere definitely absolutely there is no doubt at all that the reason that I was very gregarious um loquacious you could say is because I found my support outside

Kate

Kate also described that she “hovered” around the centre of the “normal distribution” of gender in that she was “happy to be either side” and was able to “play both roles” and be a gender “chameleon” which enabled her to foster support. At the same time, this performance was highly controlled as Kate’s relationship with her mother made her “over control” her emotions. She described experiencing distress in situations such as being asked to play a female in the school play or when her sister’s friends made her dress up as she felt these situations were “too close to the truth” affecting her ability to control her emotions.

Like Kate, all the participants spoke of performing in order to be accepted. Sarah’s description below highlights the difficulties and dangers of performance. The term “tap dancing” rather than meaning actual dancing, could be viewed as Sarah needing to be able to perform being male in public situations. Tap dancing is a complex skill perhaps indicating the complexity involved in Sarah’s performance of being male. At the same time, the use of the words “bull shitting” suggests deception and the possibility of exposure perhaps indicating that Sarah’s performance of being male was always at risk of being exposed as false. Sarah linked these skills of performance and deception to survival.

Volume I
Georgina Eleanor Mary Dearden
you know I once defined my life as tap dancing and bull shitting my way through it
I: mm
yeah really it’s true and I think I did but it’s a way of survival it’s a way of surviving you see
Sarah 788-792

Tanya spoke about always feeling like she was “acting” when she was living as a man. Despite these difficulties performing being a man, there was no safe alternative.

*I had to learn to be a boy otherwise my life was gonna be a disaster*

* Tanya

Laura also acknowledged the inherent difficulty trying to be “normal” by trying not to be yourself.

...*I’ll just try and uh be be normal in inverted commas but of course trying to be normal is um is very difficult*

* Laura

Concealment and suppression of their gender atypical behaviours was also part of all the participants’ performances.

*that was quite quickly um suppressed*

* Laura

*I was willing to conceal*

* Sophie

By using the word “willing” Sophie’s language indicates an eagerness and desire to please implying that concealing herself was worth sustaining her parental relationships.

*I learned how I could live with that suppression*

* Sarah 703*
Sarah’s language in the sentence above indicates that suppression was a struggle perhaps acknowledging the conflict in surviving by suppressing herself. Later in her story, Sarah explained that “along with my femininity I suppressed an awful lot more of myself that to me is absolutely critical” and below indicates the consequence of suppressing her feelings.

P2: well I was already you know one of the great talents of trans people is the suppression of feelings it’s what we are good at you know is suppression and um so I began to practice that and um but of course it would affect me outside I’d go angry or difficult I was difficult you know I wasn’t um horrible I was just difficult right Sarah 275-279

Participants’ performances were also affected by their ability to understand gender “rules”. Sophie, Claire and Laura (’s removed) described confusion in relation to understanding the standard gender expectations that everyone else seemed to know automatically. Explanations either were lacking or related to gender which did not make sense for the participants.

you know and the sort of cause you’re a boy meant nothing to me
Sophie

about the way I walked or the way I used my hands too much uh that were sort of forbidden and odd without being things that anyone explained to me
Claire

Laura also described not understanding the reasoning but developed a system of learning based on each time she was redirected from a behaviour or experience.

...therefore you just learn every time you just sort of learnt that uh that’s a closing off of a door
Laura

However, despite attempts to suppress themselves participants spoke about accidental expression.

...but I mean I think I just I would forget
Claire

Volume I
Georgina Eleanor Mary Dearden
you know because I would you know if I didn’t know any better I would find myself straying into that sort of behaviour

Sarah 613-614

Sarah’s comment illustrates the impossible sustainability of the position of permanent suppression of being. Similarly, Claire stated that she was “just incapable of not showing” her “vulnerability”. This vulnerable position was easily revealed as her parents had experienced an ectopic pregnancy prior to Claire’s birth and so her gender behaviour was viewed “in the context of my parent (‘s removed) having developed the habit of constantly monitoring me to see if there was anything wrong”.

Despite every participant describing concealing some of their behaviours, some participants participated in cross gender experiences in private.

I know that I used to dress up in my mother’s clothes and I knew that I did that in secret

Tanya

Although for Laura this always contained the fear of being caught as she had been “caught” previously and had experienced “shame” and “embarrassment”.

... there was always the danger of being caught again like I say being caught out or um (5) you know somebody saying no you cannot do that that’s wrong um

Laura

For some participants like Sophie, participation in gender atypical behaviour was too dangerous.

um so I kind of yeah I was willing to conceal so I wasn’t one of those kids who does the cross dressing stuff

I:  mm

cause the sort of environment that I was in...

I:  mm

...was quite hostile

Sophie
Although all participants attempted to connect with their parents, some on a continual basis, some participants also acknowledged that their attempts to connect were impossible.

... always wanting to somehow reach him which I never could I never did

Sarah 828

I could never engage with him to to it never happened

Sophie

Claire spoke of the realisation that she would always be a disappointment because she could not be what her father wanted.

... there was a point at which I realised that no matter what I did I could never live up to what he wanted of me and that I was always going to disappoint him

Claire

Sarah highlighted how pleasing a parent was a central aspect of her experience as a child and therefore failing to please her parents was experienced as a lack of belonging in the world.

I just wanted to please my parents and then felt bad cause I couldn’t and I couldn’t see a place for me in the world

Sarah 543--545

The unacceptable me

The response of parents described and the position that the participants found themselves in led most to believe there was something unacceptable and wrong about them.

from my parents specifically you know that’s a sort of a learned thing that I got throughout my life that the kind of way I was was not acceptable

Sophie

um (sigh) (7) you know acceptance is great if you can get it um (4) but there was clearly no way that I was going to get that as I was growing up

Tanya

Volume I
Georgina Eleanor Mary Dearden
Sarah frequently referred to this sense of being “wrong” and “unacceptable”. The language of the first two quotes below provides a sense of how Sarah’s experiences led her to feel that there was something wrong “in” her. The use of the word “centre” suggests the core of Sarah’s identity. The way she states “mad wrong” could suggest that she linked the experience of being wrong in her “centre” to being “mad” or that her predicament led her to feel mad.

*wrong again what I am in my centre is mad wrong*

Sarah 618

*what it comes down to is the unacceptable in me*

Sarah 690

*which is “hey please listen to me and see who I am” “no listen you’re just doing it wrong you are wrong” so that is the feeling I got all the time is you’re wrong I just felt wrong*

Sarah 666-668

Sarah’s last statement highlights her attempts for her identity to be recognised by others but that these requests were denied. She described feeling like she had been “cursed” and linked her unacceptability to a significant experience of “not belonging in the world”. She described that these identity struggles made her relationships with her parents “more and more difficult” because she would be “difficult moody moody moody and impossible to talk to”.

In addition to describing memories of receiving message that they were unacceptable, participants’ use of language throughout their interviews provided information on the way they were viewed and how they viewed themselves. The terminology used by Claire and Laura throughout their interviews implied a sense of being unacceptable. Claire used words such as “sinful” and “wrong” to describe ideas about herself. Laura used terms such as “wrong”, “forbidden” and “dangerous” about participating in feminine behaviours. She described an associated sense of shame due to her desire for acceptance from important others.

*I felt ashamed I suppose*

Laura
somebody saying no you cannot do that that’s wrong um

Laura

people that are close to you um you want their acceptance

Laura

Participants also used words which provoked images of something non human. For example, Tanya used the word “monster” in the description below proposing this as the view of society and the risks associated with this view.

its very hard knowing that most of society thinks you’re a monster and that there are plenty of people out there who if they knew what you were would beat you black and blue or kill you

Tanya

Sarah used words such as “creature”. In addition, she described a particular instance when she found some boys at her school looking at a newspaper article about a Transwoman.

and um so what they are doing is they are crowded round an open newspaper I kind of come down and what I hear is I remember the words you know and it was something like this “what does he mean he wants to be a girl he wants to have periods and things he wants to have periods does he”
I: mm
right that being the lowest form of slime life you can imagine so I am looking at this and it is a picture of um a very attractive young Transwoman who looks completely like beautiful just like a young woman like any woman would
I: mm
and so brrr the bells go so time for classes so he gets this piece of thing and crumples it up and throws it under the lockers and they all like a sort of herd of stampeding wildebeests wo wo wo wo up the stairs and they’re gone leaving me in silence
I: yep

to go back under there and take this out and spread it out all crumpled up and unpick it and
I: what were you
but you see the thing is it isn’t thinking it is feeling ok because I had absolutely no idea what all this meant or what was going on you know very very isolated right deeply deeply isolated in this place and um I don’t know what was going on but I looked at this and I remember thinking is that what I am but it seems so remote

Sarah 299-320

The image of the boys gathered around this newspaper article implies a sense of fascination while their comments indicate scorn and disgust. Sarah summarises their views as “the lowest form of slime life” implying that this experience is non human, not even animal but slime contrasting significantly with Sarah’s view that this person is a beautiful woman. The article could be viewed to represent Sarah’s identity evocative of fascination, scorn and disgust in others. Furthermore, how they discard the article crumpling it up and throwing it under the lockers could reflect how Sarah expects she would be treated, crumpled up and thrown away if she disclosed her experience. This example highlights the isolation of Sarah’s experience as only when she is alone can she risk to “unpick” the article and think about herself at the same time the safety and protection of isolation means that there is no one that she can speak with about this confusing experience.

Tanya suggested that the experience of non-acceptance is why validation is so important for “Trans people”.

...Trans people in many cases have a desperate need for validation they they want to believe that that there’s a good reason for the way they feel they do and there are way too many ways in which their thoughts and feelings are repudiated...

Tanya

Kate was the only participant not to link the negative experiences she had in relation to her gender atypical behaviour with a negative view of herself. Although she stated that these behaviours were a “problem” for her parents, she spoke of negating her parents’ comments choosing instead to listen to positive feedback she received from friends. However, she also described controlling her gender atypical behaviour perhaps implying some recognition that parts of her self could not be disclosed.
**Disconnection from others and self**

The theme of “disconnection from others and self” is a complex concept. On one level, it reflects how the struggle to belong led all participants to feel disconnected and isolated from their families. On another level, disconnection was used by some participants to assist survival. For some this meant the development of a “fantasy world” where they could be themselves while others disconnected from their emotions to survive rejection. Most participants protected themselves by concealing their real self leading to a disconnection between their internal self and the self shown to others. This internal/external disconnection also reflects participants’ sense of a split between their physical self i.e. male body and mental self i.e. feminine mind.

*gender identity is a diabolically isolating experience and (4) you know it um I suppose that’s why so many people have breakdowns and kill themselves and all the rest of it*  
*Laura*

Although Laura described being raised in a “cradle of support” this statement reflects the isolating power of specifically her gender experience. She indicates the intensity of the experience by linking isolation with suicide and in her use of the word diabolical which originated as a description of experiences containing hellish levels of cruelty.

Sarah’s story contained continuous references to her sense of isolation. She spoke about having “no one to turn to” on the subject of gender. Her repetition of words in the statement below could be viewed as a way to emphasise the extent of her experience of isolation.

*very very isolated right deeply deeply isolated in this place*  
*Sarah 317-318*

As described, Claire constantly attempted to connect with her parents while growing up. However, she also described “deep resentments” about her parents’ constant monitoring which she did not consciously acknowledge at the time but retrospectively were evident by some of the “bad thoughts” she had that her parents were imposters which could be viewed as
a process of disconnection. However, Claire’s resentments became fully realised when she recognised that her parents would not protect her from serious bullying at school.

P5: ...uh [6] [sighs] they’d say oh bullies are always cowards just fight back yeah hello it’s not a bully it’s twelve people jumping me [laughs] but they wouldn’t get you know they didn’t want to get it they didn’t want to deal with it and so I resented the hell out of them and became very grumpy and alienated from them

Claire

Furthermore, Claire described that at around the same time, she had started to read around “Trans people” and found out that most people were rejected by their parents so she decided to “disinvest” from her parents as she could see they would probably reject her.

I could see that side of them I could see the side of them that might well have rejected me they probably would have done if I’d talked if I’d been honest with them at that age

Claire

As described, Kate recognised that she was not getting any support from her parents and that she was on her “own” with her gender experience. Although she felt able to use some of her gender atypical behaviours to elicit support from others, her tendency to “over control” her emotions indicates a tension between her internal self and the self she chose to show to others. The tension in this position was reflected in distressing experiences such as being asked to play a female part in the school play or being asked to dress up by her sister’s friends. Kate felt that these experiences were “too close to the truth” in that she did not feel “equipped at the time to handle that step” and so did not feel able to handle her reactions in public.

Sophie’s narrative also contained many examples of being alone. She described always being on the “outside track” and never being “part of kind of sort of society”. Sometimes Sophie framed her being alone as a positive skill that she developed.

I kind of learned to sort of be on my own and do things

Sophie
However, as her story unfolded it became clear that Sophie had had a very difficult upbringing and that her experience of isolation was not purely about her gender identity but was also due to her difficult experiences with her parents. She described disconnecting with her emotions as a way to protect herself from the rejection she experienced in her childhood.

[crying] so I kind of learn more stuff you know like keep your emotions inside and not engage
I: mm
[crying] and I just kind of you know I internalise things or kind of went on with the flow and kind of stopped being emotional cause I hate rejection

Sophie

Tanya reported that her mother was preoccupied with Tanya’s sibling and her father was emotionally unavailable so Tanya pleased her parents by spending time on her own. Tanya like Sophie was able to put a positive angle on her isolation. She described herself as “very good at playing” on her own and felt that it enabled her “to be more self reliant” allowing her time to follow her feminine interests. However, a few of the words in the following statements such as “awful” and “survive” provide a glimpse of the potential pain of this isolation and perhaps that being good at being isolated was a useful survival strategy but came at a cost.

...I remember an awful lot of time spent playing on my own

Tanya

...in many ways it’s it’s been very useful in that I’ve I’ve learned to survive on my own

Tanya

Tanya attempted to gauge her parents’ ability to support her gender issues by doing an “experiment” where she wore theatrical make up which she had been given as a present. Her parents’ reactions indicated that they were “clearly deeply uncomfortable about it”. Tanya was “too scared of hurting them” and realised that she knew she would have to deal with her gender issue alone.

I knew this was something I was going to have to deal with on my own I wasn’t gonna get any support from anybody

Tanya
Tanya described developing a “home fantasy world” as a way to provide her with an opportunity to be herself. This home world seemed to have the additional purpose of assisting her survival as it provided a balance to spending the day “surviving with the boys”.

*um not really no I mean I I think basically I was building a fantasy world to live in uh I didn’t have really many friends um there were the um the local boys didn’t want to play with me much because I was a sissy*

Tanya

Although Tanya described a significantly isolated childhood experience, she was unable to recall any emotional experience associated with this period possibly indicating emotional disconnection.

*yeah I mean did I can’t remember a lot of emotion*

Tanya

*clearly there were there were a couple of issues but I can’t remember a lot of emotion*

Tanya

*I mean I don’t recall being deeply upset I mean obviously I I spent a lot of time worrying about it um but I don’t know may I have just shut it out I don’t know*

Tanya

Throughout her interview, Sarah spoke frequently about different levels of disconnection. She felt that adolescence affected her relationship with herself in that she “couldn’t handle the person” she was becoming because as she “grew older the further” she grew from her “own inner being”. Below she speaks about the absurdity of the disconnection between her physical self and her inner self.

*yes so but the thing is that in those occasions you see there is that sense of it just seems so remote it just seems to me to be completely absurd that I could be this I felt like that inside that it would be good but I couldn’t handle the feelings of what it was because it was just ridiculous because I wasn’t I would look in the mirror you know and there would be the boy with the short back and sides and you know*

Sarah 323-328
Sarah stated that her experience meant that she “never connected with the world the word is engaged I never engaged with the world” and linked her sense of disconnection with holding this deep secret that could not be shared with anyone.

"I felt with this the deep dark secret you know I: mm that um I felt very remote and distant I had a sense of distance from pretty much anything going on well not always but you know as a sort of an underlying theme was one of distance"

Sarah 340–344

In the sentence below Sarah describes her difficulties obtaining an integrated experience. Her use of a word that does not exist could reflect her experience of alienation in that even language the tool used to describe human experiences does not include her experience.

"...there was this sort of unintegrated what’s the word not integrated there is no word is there"

Sarah 518-520

The struggle in new relationships

The struggle in new relationships relates to the difficulties that participants experienced in later relationships. Despite some participants initially attempting to avoid relationships in order to avoid rejection, all participants described having intimate relationships. These relationships seemed to contain a struggle for participants in that they desired acceptance but expected rejection. The desire for acceptance often occurred through relationships legitimising their place in the world and in participants’ willingness to suppress their feminine tendencies and prioritise the needs of others in order to be in a relationship. Expected rejection was shown through the participants’ willingness to conceal their feminine selves and their acceptance that they were a reasonable explanation for relationship endings. Transition for some brought more balanced, supportive relationships. However, for others the fear of explanation was magnified alongside an increased fear of rejection.
Tanya spoke of attempting to get a girlfriend as a teenager to fit in but that these difficult experiences led her to avoid relationships.

*but nobody wanted to date me and I made a complete ass of myself*

* Tanya

Despite her decision to avoid relationships, a relationship developed when she was in her twenties prior to her transition. Her descriptions below convey how this relationship represented many important things to her such as safety, success and normality.

*...for a short while I got it into my head very stupidly that I was cured that finally I’ve been a success as a bloke uh and that life would be alright from then on big mistake*

* Tanya

* uh it meant that I I had a possibility to put all this weird stuff behind me and I could have a normal happy life without having to put myself at risk cause I was only too aware of how society felt about Trans people*

* Tanya

Claire and Sarah also felt that their first relationship provided them with a way to be normal and a way to be accepted by another person and by society. Their descriptions below suggest that the relationships provided them with protection from the dangers present in society and for Claire, from herself. Claire’s use of the word “*classic*” indicates that she feels that this is a common experience for Transwomen.

* so that at least fitted me into the world in that way*

* Sarah 854

* I had the classic trying to save me from myself messed up relationship with my my best with my closest woman friend*

* Claire

Sarah and Tanya informed their partners of their feminine interests prior to their weddings. The fact that Tanya’s disclosure was accompanied with an offer to end the relationship suggests that she felt that the revelation would be a reasonable reason for rejection.
I explained to her everything about my life and said to her this is what I do this is me...
I: mm
...uh you can change your mind if you want
Tanya
she knew I mean I told her early on what I was in some ways and she didn’t really get it as you don’t it seems a bit unreal you know what and um it wasn’t a major thing cause I soon swallowed it
Sarah 854–857

The use of the word swallow in Sarah’s description conjures up a physical image of her swallowing her Transwoman identity perhaps indicating how Sarah kept her identity deep within and on occasion allowed it to come out but then swallowed it again. This experience seemed similar to Sarah suppressing her identity in her childhood perhaps highlighting an ongoing theme where her true identity is worth swallowing for the experience of relationships. Sarah spoke of recognising that she denied herself because she had “learned that from society and was very unwilling to break social codes”. She commented how the same “forces” which complicated her relationships in childhood contributed to the continuation of her marriage.

the thing is the whole force keeping that together was the same force that was working against me during my adolescence
Sarah 1048-1049

She described experiencing “a sort of moral debt to keep in the male role”. Therefore it took her wife’s “betrayal of trust” i.e. having an affair to enable Sarah to have the “moral permission” to transition without experiencing what Sarah described as “trans guilt”. Sarah explained that “trans guilt” occurs because transsexual people feel guilty for being what they are and always return to themselves as wrong. She described a common experience where transsexual people give everything to the spouse because they feel guilty for transitioning.
and so that kind of gave me moral permission I felt I needed it you know the
whole trans guilt thing the guilty the guilt about being what you are so that’s
what happened with that so then I just sort of pressed go
Sarah 1006-1008
trans guilt which is that we will always come back to ourselves as wrong
Sarah 1028-1029

Tanya described being very submissive in her marriage possibly indicating the sacrifices she
was willing to make to be “normal” and to finally fit into the world. At the same time, her
acceptance that her unsuitability as a father was a reasonable reason for a divorce and for her
to not have any contact with her children suggests an expectation of rejection. Furthermore,
Tanya’s acknowledgement that there was “something wrong about” her implies that Tanya
had come to believe and accept that there was something wrong with her.

I would not be a proper father everybody would know there was something wrong
about me
Tanya

Tanya highlighted that her way of being was not acceptable not just as a father but within
society in that transvestites were considered sex offenders.

but at that time um it simply wasn’t socially acceptable you know we’re talking um
early nineties and at the time you could get put on the sex offender register for being a
transvestite
Tanya

Following transition, Tanya described having a more balanced relationship which provides
her with a “supportive environment” she contrasts this relationships with her marriage where
she held a submissive position.

... with my current partner it is very much a partnership that that we are together we
understand each other we do things together we care about each other and try not to
Tanya

Claire ended her “trying to save me from myself messed up relationship with my my best with my closest woman friend” after fifteen months and described being in her current relationship for over twenty years. She described recognising that she still has “very obvious buttons” that are “almost too easy to press” within this relationship for example she stated that the way to get her to do things is still to tell her how “disappointing” she is. She links her later relationship experiences with her relationship experiences with her parents. For example, she explained that her partner “has picked up on too many of the cues” her mother left installed and

cause my parents were very good at making me feel guilty and my partner is very good at making [laughs] me feel guilty

Claire

Claire also described recognising that her early experiences had developed into “elements of neediness as an adult” and stated that as an adult she continues to use her ability to be “charming” to be liked and described a “touchstone” which she has lived by since the age of eleven called the “duties of a jester”.

In this poem, Claire compares her gender atypical behaviours with adultery an act negatively perceived by Western society and robbery an illegal act with the implication being that gender atypical behaviours are as negatively construed. However, the overall message is that humour is powerful enough to salvage any situation. Claire’s use of such a light hearted method to describe her life experience is indicative of her role of the jester using a humorous way to describe a difficult experience. This poem also highlights the role of performance as well as the potential dangers of performance as the lives of jesters were dependent upon
being funny. Claire needed to be a good jester with the risks of poor performance being isolation and alienation.

Sophie spoke about learning which relationships to avoid based upon her early relationships.

...I suppose you sort of you learn you’ve got to model relationships on ones that are good
I: mm
or you avoid ones that are bad

Sophie

At the same time Sophie commented about the similarities in her relationships in that her partner “took over where” her mum “had been” and recognised that she held onto her relationship as it provided her with an “attachment” that had been “broken” when she was a child.

I’d had so few [crying] sort of emotionally rich relationships it’s very precious to me

Sophie

Sophie described a struggle between her main relationship and her sexual attractions towards men. Her main relationship provided her with an important emotional attachment but she was attracted to men leading her to develop crushes. As her main relationship had enabled to reconnect with her emotions going from “thick skinned” to “thin skin”, these small hidden crushes felt hugely painful for Sophie.

so I attached myself really closely to xxx and we did a lot of stuff but it didn’t actually stop me falling in love with other people

Sophie

Sophie explained that it was her fear of “social rejection” that prevented her from transitioning as she did not want to lose those important emotional bonds. She described feeling “sad about hurting” her partner and for being “a source of disappointment” to her partner by not being who her partner wanted her to be when she eventually admitted her transsexual feelings.
Laura described experimenting with different relationships during her teenage years and had longer term relationships as she got older but following transition resigned herself “to being single” linked to a fear and experience of rejection around informing people about herself.

I think there is always this sense of what I’m getting round to saying there’s always this sense of you’ve got to come out to somebody

Laura

I have aspects of myself which are not easy to deal with and some girlfriends had big problems and were unable to deal with it

Laura

Laura described noting a connection between her experiences of being honest with her parents and being honest with partners and the inevitability of rejection.

...with my parents there was a sense of you know embarrassment anxiety with being that honest so similarly with relationships there’s a sense of embarrassment and wanting to be accepted and yet understanding that really um it aint gonna happen...

Laura

Kate described that her relationship with her mother “demonstrated what not to be” in that she did not want to be like her “an unattractive person”. Kate felt that her feminine tendencies as a teenager enabled her to get girlfriends. However, she also described how she “over handled” relationships and attempted to solve problems in order to “keep a balance” in relationships.

...both my marriages um I took the sort of um role of sort of trying to sort the problem out

Kate

Her acceptance of the end of her first marriage due to the reason that her wife would have a better life with another person possibly reflected Kate’s recognition of the complications involved in being in a relationship with her.
“the reason I didn’t fight is that I knew I’d love xxx” I said “I knew her life would be better with xxx”

Kate

The diagnosis of an illness triggered Kate’s transition and she reported that in her current relationship they “share everything” and that she has “thrown away” her “emotional shield at last”.

The influence of context

For each participant the many layers of context that they grew up within impacted significantly upon their relationships and their experience. All participants referred to their parents’ own upbringing and how that had impacted upon how they parented. In addition, reference was made to the influence of the social context and how the lack of available discourses to explain their experiences added to the participants’ experience of alienation.

Sophie linked her parents’ “hard childhoods” with their lack of skill at “bringing up children”. Similarly, Tanya felt that her parents’ childhood impacted upon their parenting style.

uh my father because he was generally fairly distant didn’t really have too much to do with bringing up young children
I: mm
uh and also because he had um I think he’d had a very bad relationship with his mother and his father had died when he was fairly young uh he idolised his father uh you know once his father died he had this very distant relationship with his mother and had been shipped off to boarding school and stuff like that

Tanya

Laura described a supportive family environment and how this impacted upon her development.
...it was a good childhood because it was formed in that cradle of support so that there were these moments which made things difficult for me um on the whole it was within that context

Laura

Her supportive parental environment was also reflected in Laura’s parents’ accepting response when she informed them about her transgender identity.

*I mean both mum and dad just said well just you know we love you and we just want you to be happy*

Laura

At the same time, her mother’s comments below indicate that being told earlier would have had a different impact possibly indicating that her parents’ views had developed and become more accepting over time.

“I would have I probably would have felt very differently if you had said this to us at 17 or 18 years of age”

Laura

Claire’s experience was significantly impacted by her family’s religious culture and her parents’ immediate family experience. The family’s religious culture emphasised acknowledging sinful behaviour influencing Claire’s experience because she was forced to constantly find something wrong with herself. In addition, Claire’s parents were constantly monitoring her moral standards. Furthermore, as her parents had had an ectopic pregnancy prior to Claire’s birth, her parents were also constantly monitoring her to see if there was anything physically wrong with her.

*I mean I’m stressing all of this because it puts the various gender issues in the context of my parent’s having developed the habit of constantly monitoring me to see if there was anything wrong*

Claire
The family context and parental responses also seemed heavily influenced by the social context of the time. Sarah spoke of memories of her father telling her to “be real” and understood her parents’ reaction as reflecting a lack of available discourse for explaining her behaviour. In addition, Sarah commented upon the influence of the context in inhibiting her development of self and stated that “the important parts weren’t gender it was the suppression of a social force that was the problem”. Sarah recognised the power of these contextual factors.

*do you know what I mean so for me to go against that it took me a long time for me to get the place where I had the strength or the certainty enough to be able to move and you see it’s quite interesting that the focus is gender but it’s not really it’s the container the context you know as um Cousteau said “the bacteria are nothing the culture is everything” (laughing)*

_Sarah 1053-1057_

The lack of available discourses affected the participant’s own ability to make sense of their experience for example Sophie thought she was homosexual as that was the only way she could make sense of her experience. For Tanya, this lack of information meant she could not be certain of her experience. These experiences imply that the participants’ context impeded the development of a coherent sense of self by not providing the linguistic experience to scaffold their gender development with participants being unable to initially locate and describe the authentically felt self.

*I didn’t really have any sort of name for for what was happening at all*

_Tanya_

*uh and you know I I was never a hundred percent certain what I was...*_

_Tanya_

*I didn’t see that in terms of gender identification or anything uh because it would never have you know it doesn’t occur*

_Claire_
However, as times changed Sophie, Sarah, Tanya and Kate spoke about finding ways of expressing their identity as fashion changed and diversity became more socially acceptable which could be viewed as a developmental transition for themselves and society.

so it was kind of socially acceptable in the kind of you know the world of young people...

Sophie

luckily towards the end of the 60s you could be whatever gender you wanted

Kate

Sarah and Laura spoke about the powerful influence of society’s views upon the experience of the individual by reflecting upon different views in different societies.

...it is in some cultures celebrated and in others condemned and it is both a curse and a blessing

Laura

and um so it’s a question of suppressing this all that time with a whole range of stuff around that core gender identity maybe not around it parallel with it you know and yet in another society another time and place it could have been just fine so it was really the whole problem was social

Sarah 1161-1164

Major theme two: The complex journey to becoming me

“The complex journey to becoming me” reflects the journey participants underwent to become themselves starting with some form of self realisation and continuing beyond the transition process. The participants spoke of different experiences of self realisation. For some there was a clear moment of self realisation which contained excitement and pride but was also accompanied by the negative associated implications. For others, their ability to even conceptualise their experience was significantly inhibited by the impossibility of the implications. Participants commented that their journey to themselves involved their inner selves becoming congruent with their outer selves but that this process contained a complex
paradox in that there was a change but they were still the same people and yet they had finally become themselves.

**The complexity of realising me**

Each participant experienced their self realisation differently. For some it contained excitement and for others self realisation was a complex experience often due to the difficult and seemingly impossible implications. Laura described a “sudden sense of belonging” and thinking “oh right that’s the penny’s are all dropping now I get it I get it.” However, simultaneously Laura described a state of ambivalence as she recognised that avoidance of the implications was no longer possible.

> at the same time it’s a pardon my language it’s a head fuck it really is cause the moment the curtains are drawn back and the light is brought back in you suddenly have to see everything and you have to deal with it
> Laura

This complex predicament led Laura to believe that her experience was “a blessing and a curse” highlighted further in her description below.

> ...I mean there were times when I was (4) quite you know um ecstatic to be aware of this desire to be female
> I: mm
> and yet same time you know the flip side was the just do your head in cause how could you achieve that
> Laura

Tanya also describes the positive aspects of her self realisation.

> I wasn’t ashamed of being a girl I was actually quite proud of it
> Tanya

Claire spoke about experiencing “exile” when girls and boys were separated at school and spent breaks at the end of the school yard talking to her friends “through the wire”. However,
she did not describe having a clear realisation of her experience rather a sense of alienation and excitement.

...and I didn’t know what it was and it was the feeling of alienation the feel of there being something more exciting

Claire

Although Sarah described spending half her time “on the fence looking over into girl world”, she also spoke about not linking her gender issue with her sense that there was something deeply wrong.

I sort of knew there was something deeply wrong and I knew I had this profound gender issue which I could just not go near it terrified me so greatly but I never put the two together for a long time kind of interesting

Sarah 218-220

She explained her confusion as stemming from a lack of available “words” to explain her experience as well as the remoteness of her experience.

so it seemed completely remote from my whole experience totally impossible

Sarah 331

Sophie did not have a clear idea of herself and, as described, mistook her experience as being homosexual. During university, she recognised that she enjoyed “looking female” and that she “passed without trying” but it was not until her mid twenties that she realised:

I really really really was a girl wanted to be a girl Sophie

Kate described recognising that her feminine tendencies enabled her to be a “chameleon” providing benefits by increasing her friendships and as she grew older she described allowing herself to be the “honorary girl” when there was a “gender split” in teams. She did not describe a strong urge to transition and spoke of a lost “opportunity” when she went into another relationship following the end of her marriage. Although Kate stated she “never
regarded it as being a problem either way”, she also used words such as “fixable and “survive” indicating that there were some difficult aspects of her experience as well as some aspects that she wanted to change. These contradictions meant it was difficult to gain a clear understanding of Kate’s journey but perhaps these contradictions reflect her ambivalent relationship with her gender experience highlighted in the analogy that she provided below.

there’s an analogy which is playing golf I don’t play golf I think it’s a stupid game sorry I hope you don’t...
I: [Laughs]

um the trouble is the reason I don’t play is golf is I know I’d love it

Kate

It is possible that due to Kate’s need to find support from outside of her family, she had to prioritise the needs of others over her own. Being transsexual might have compromised those areas of support and therefore might have led her to minimise her transsexual needs. Kate’s “trigger” for transition was the diagnosis of a significant illness and that she recognised that she would “much rather die a happy woman … than a miserable old git”.

Reconnection while still remaining me
This theme reflects the participants’ reconnection between their internal and external selves. Participants spoke about “inner becoming outer” and “freedom integration”. At the same time, participants did not feel that they had changed but had just stopped denying themselves enabling them to become themselves. This process involved some costs and some validation.

As described, Sarah struggled during childhood with how her external self was moving away from her internal self. She felt that her transition reconnected her inner self with her outer self and provided her with a sense of “freedom integration” and “integration and um completion of happiness”.

so all this is all this Sarah thing what’s here all this is the inner becoming outer you know

Sarah 1158-1159
At the same time, Sarah explained that her experience did not involve change rather simply involved her stopping denying herself.

*I didn’t trans anything*  
*I: mm*  
*I didn’t cross anything right*  
*I: unuh*  
*I just stopped denying myself that’s all*  

*Sarah 955-959*

Similarly, Kate described the paradoxical position of finally becoming herself while still being herself highlighted in the two comments below.

*um and um in a way it’s like I’ve actually arrived I would say I was very it sounds very like a cliché but you know I’ve actually become the person I was born to be*  
*Kate*  

*and the thing is I mean my life effectively as I said I’m me*  
*I: yeah*  
*I’m still me*  

*Kate*

Kate also used the metaphor of a cave below to describe her journey.

*I likened it to stumbling around in a dark cave...*  
*I: mm*  

...rocky hard, chunky place um and you just get a hint of a glint of light from somewhere and you think “where was that?” or a breath of of some fresh air you think there’s something out there  
*I: mm*  

there’s something better than this cave  
*I: yeah*  

uh and then you you find this hole and you actually see through it again a brief glimpse
I: mm
and you see this thing and then you’ve lost it again um and then when you start taking
the hormones the sharp jaggedy bits start to get smoother uh the hole gets a little bit
bigger
I: mm
light starts to come through um I mean you know timing wise um probably three or
four months down
I: yeah
um the hole gets bigger and you suddenly get a sight and you think “wow this is
great”
I: unhuh
then after six to eight months you’re now outside you know the hole’s got so big you
just wander out
I: yeah
and it’s great and then you look back and you can’t find the way back

Kate

The description of the cave as dark, hard and rocky conjures up an image of a dangerous,
unfamiliar place which is difficult to negotiate forcing Kate to stumble. These ideas could
reflect Kate’s struggle in childhood to negotiate life where she did not fit with the common
view of gender and so might have been ill equipped to negotiate the terrain such as gender
rules and “masculine” expectations. Stumbling implies that her movements had the potential
to put her in a position of being at risk of being hurt. The first “glint of light” and “breath of
some fresh air” comes as a surprise perhaps indicating that an alternative life was not
comprehensible until information was provided about an alternative (hearing about April
Ashley) providing a fresh possibility from the cave of her current existence. The fact that the
hole is tantalisingly glimpsed but is then lost again could reflect Kate’s contemplation of the
idea of being a girl but that this idea is dismissed or lost when the associated implications are
considered. In addition, the fluctuating presence of the hole possibly reflects the ambivalence
of wanting something different and also not wanting to leave the safety of the familiar.

Searching for the hole indicates a new intention of wanting to be outside of the cave and could
reflect Kate’s active role in trying to find herself and a better position for herself in life.
Within a rocky, dark cave searching and movement has potential dangers possibly reflecting the difficulties that Kate had to go through in order to be herself. This is further reinforced by the description of the “jaggedy bits” of the hole in that the process of escape contains some danger. Hormones help smoothen the “jaggedy bits” potentially reflecting how inner and outer are becoming aligned facilitating the move through the hole and into her identity. The arrival of light into the cave could reflect the increased motivation that Kate experienced when the hormones started taking affect as the light enabled her to be able to see even while still in the cave assisting the route out. Gaining a glimpse of outside could reflect gaining a glimpse of what life could be like when transition is completed. It is interesting that her eventual departure from the cave is relaxed reflected in the description of “you just wander out” which is in stark contrast to the “stumbling” beginning possibly reflecting that once the transition process is started then the journey becomes easier or that the beginning of the journey is the hardest part.

Once out of the cave, the fact that the way back to the hole and the cave can no longer be found could reflect that following transition life can never return to how it was before. Or it could reflect that life before is cut off including some of the things familiar with that part of her life experience. For Kate, following transition her relationship with her wife ended and her relationships with her children became estranged. On another level this metaphor reflects a movement from being trapped to being freed. The position of being trapped within the dark cave could reflect society forcing transsexual people to remain trapped in their position despite desiring to be different. It could also reflect the idea of the male body trapping the individual’s feminine sense of self.

Despite the pain of the journey experienced by most participants, some participants spoke of benefits. Sarah spoke of the level of insight gained during the journey as well as the child who she cherishes. Laura spoke about her strong mixed feelings about her life journey.

*I remember thinking I wouldn’t wish this on my worst enemy but at the same time it’s something that is quite precious because it has involved such such analysis of myself*

Laura
Laura’s decision to transition was supported by her parents, for example her father stated “whatever happens I just like you I you know like being around you”. This recognition that she was still the same person provided Laura with a strong sense of validation.

*so um it didn’t really matter what I wore it was still just me inside*

Laura

Tanya also recognised that she was finally able to be herself

*but I’ve also been able to be myself at last um yeah*

Tanya

*um yeah and I now have a whole pile of friends who are very happy with me as I am*

Tanya

Having friends following transition is a significantly validating experience for Tanya not only because of the need for validation from a transsexual perspective but also because of the isolation that Tanya experienced growing up. The words “who are very happy with me as I am” poignantly contrast with the participants experiences growing up where they needed to be someone other than who they were in order for others to be happy with them.

Sophie’s move to transition was difficult as her first attempt to discuss this with her friends received a negative response and so she tried to deny herself again. However, it became clear to her that transitioning was inevitable and that this would allow her to be herself. Her realisation was linked to recognising that she did “not have to be something or someone” that she was not.

*...which was later cause it was all kind of you know concealed and that until that point when I started to realise that that I couldn’t go on any more did I not it just kind of happened I just realised there was something that I gave me great was it pleasure or was it I think it was a way I could express myself and just be me*

Sophie
5. Discussion

*Other things may change us, but we start and end with the family.*

*Anthony Brandt (1984)*

**Overview**

The discussion section will summarise the findings in relation to the research questions and current theories on transsexuality. Theoretical, clinical and training implications of the study will be considered and the strengths and limitations of the study reviewed. The final section will propose areas for future research. The main aim of this research project was to gain an insight into the experiences of parental relationships of Transwomen. Specifically this research was interested in exploring how a developing Transwoman identity was perceived to impact upon parental relationships and how this in turn was perceived to impact on their continuing development and the development of further relationships. In line with IPA methodology, the results will be reviewed from an interrogative position so in relation to existing psychological literature (J. A. Smith, 2004). At the same time, it is recognised that this discussion is limited in its applicability only to the small sample of Transwoman who participated in the study and so any suggestions for generalisation to the wider Transwoman or transsexual experience will be tentative.

1. What were these Transwomen’s experiences of their early relationships with their parents?

The participants’ accounts of their relationships differed significantly. Some spoke of families with significant marital, emotional and relational difficulties whereas others spoke of families which generally provided a supportive environment. Although generalisations are not possible due to the small size of the sample, these experiences do not support psychodynamic and social learning theories of transsexuality which suggest that transsexuality is due to common dysfunctional parental environments or parental processes. On the contrary, this research tentatively supports the idea that transsexual people develop within a qualitative variety of perceived parental relationships.
2. What was the impact of a developing Transwoman identity on relationships with parents?
This research demonstrated that for this group of Transwomen a developing transsexual identity demonstrated by GAB impacted significantly upon their relationships with their parents. All participants described receiving the message that their GAB was wrong and that there was an emotional, relational or physical risk associated with this behaviour. The impact of this message had complex results for all participants in relation to their relationships and their sense of self. The participants reported recognising the need to change their behaviour to please their parents. In addition, participants remembered participating in an array of behaviours and activities in order to foster relationships to compensate for these expressions of self. These attempts to please parents demonstrated the importance of parental relationships for these Transwomen when they were children. However, this process of concealment and performance was difficult to sustain leading to unanticipated GAB expressions which compromised relationships. As Claire said

*I think I was just incapable of not showing my vulnerability*

In addition, there were occasions when the participants despite valiant attempts felt they could not “reach” their parents. An important distinction developed between individuals who grew up in a supportive loving environment and those who developed within difficult family situations. However, even within supportive family environments, participants described needing to conceal themselves in order to have relationships with their parents. These findings are in line with quantitative research which has shown that GAB is associated with negative parental experiences (Alanko et al., 2008; Heller, 1997; McConaghy & Silove, 1992), but adds to this by detailing some of the strategies these Transwomen used as children, in order to negotiate these difficulties. The strategies described above and other processes described below were highlighted by the first major theme, “the struggle to belong”.

3. What was the impact of these relationships on the individual?
The participants spoke of several ways that these relationships affected them as individuals. The negative response of parents towards their GAB was understood as them being “unacceptable” or “wrong” and being a “disappointment” to their parents. In order to try and maintain their relationships, they had to conceal their feminine tendencies and suppress parts
of their being. All experienced a sense of isolation within their gender experience. Some described disconnection between the different parts of their self and some experienced emotional disconnection in order to protect themselves from their experiences of rejection. The process of transition seemed to enable these Transwomen to reconnect with the selves they had suppressed, denied and disconnected from during childhood. Participants highlighted the paradoxical nature of transitioning where a change occurred so that they could be themselves while still being the person they always were. This paradoxical process was highlighted in the second major theme “the complex journey to becoming me” which is reflected in Kate’s two comments below.

um and um in a way it’s like I’ve actually arrived I would say I was very it sounds very like a cliché but you know I’ve actually become the person I was born to be

and the thing is I mean my life effectively as I said I’m me
I: yeah
I’m still me

4. What was the impact of these early experiences upon other relationships?
The participants’ experience of parental relationships and their difficulties in belonging impacted later relationships. This influence was highlighted in the theme “the struggle in new relationships” where participants seemed to develop an expectation of rejection while desiring acceptance. Most participants felt they continued to search for belonging until transition. Transition seemed to enable participants to finally be themselves and for most participants, this reconnection with self seemed to facilitate their ability to connect properly with others. However, for others such as Laura transitioning led to additional relationship complications such as the need for explanations as well as increased opportunities for rejection.

While this research is grounded in phenomenological hermeneutics which stresses the importance and variable uniqueness of individual pathways and in some ways resists theoretical generalisations, as described IPA is also interrogative so the results will be tentatively considered within existing theories on relationships while bearing in mind the uniqueness of the experiences of these six Transwomen.

Volume I
Georgina Eleanor Mary Dearden
As described, attachment theory states that human beings are biologically driven to seek out proximity from caregivers to ensure survival during times of stress. Children participate in care-eliciting behaviours such as crying to provoke care responses from parents. The role of the caregiver is to protect and provide prompt affect and physiological regulation. A parent who is responsive and reflexive towards their child enables the child to develop a sense of security whereas a parent who is unresponsive or abusive provides the child with a sense that the world is not safe. These experiences develop into internalised models of relationships. However, attachment relations are dynamic and can change depending upon changes in the care environment.

A recent development within the attachment field is the area of Parent-Child Connectedness (PCC) which is a concept that focuses specifically on the emotional bond between child and parent. According to Lezin, Rolleri, Bean, and Taylor (2004) PCC is characterized by the “quality of the emotional bond between parents and their children, and by the degree to which this bond is both mutual and sustained over time” pg 8. Families with high PCC experience trust, open communication, affection, satisfaction and minimal conflict. Families when PCC is low experience hostility, anger, unresolved conflicts and lack communication and understanding. Low PCC families experience a sense of mutual detachment rather than mutual attachment. Research has highlighted the protective value of high PCC in that high PCC is associated with positive emotional functioning in adolescents (Ackard, Neumark-Sztainer, Story, & Perry, 2006; Boutelle, Eisenberg, Gregory, & Neumark-Sztainer, 2009) and pro-social behaviour and positive peer relations in children (Clark & Ladd, 2000) and that low PCC is associated with depression (Difilippo & Overholser, 2002; Hammen, Brennan, & Shih, 2004) and suicide (Wagner, Silverman, & Martin, 2003).

Lezin at al. (2004) developed a PCC model shown in Figure 1 below where PCC develops within a climate of trust and open communication characterised by support, encouragement, protection and openness. Structure and time together also contribute to the overall PCC experience.
PCC seems a useful concept when considering the experiences described by the Transwomen because of its emphasis on “connection” which seemed to be an important theme for these Transwomen. As described for high PCC to develop a climate of trust needs to be engendered through communication via openness, support, protection and encouragement. For the Transwomen in this research, even for families who were supportive and caring, their developing transsexual identity indicated by the participants’ gender atypical behaviours was not a topic that could be discussed openly rather it was a subject where concealment was supported. In addition, these Transwomen when they were children seemed to have a self monitoring aspect to try and maximise the connection with parents via self concealment. The participants’ willingness to self-conceal could be viewed as care-eliciting behaviour to foster PCC with the perceived hope that alternative, perhaps more acceptable, versions of the self would enhance relationship connections with parents. However, at the same time, the process of concealment led the participants to feel isolated with their gender dilemmas. Barber (1999) states that connection is influenced by parental acceptance of the child and although some participants grew up in a loving environment, all participants received the message that their GAB was unacceptable which led them to believe that they were also unacceptable potentially influencing their ability to connect with their parents.

Lezin et al. (2004) emphasise two other important features for PCC: sustainability and mutuality. For these Transwomen, although some experienced periods of PCC while a young child when GAB was acceptable, as soon as GAB was unacceptable then mutual PCC appeared to be dependent upon suppressing these behaviours. However, this position was
unsustainable for participants as they were unable to recognise their gender atypical behaviours or would unwittingly express them.

It therefore seems that these Transwomen experienced inevitable obstacles in connecting with their parents due to their parents’ views of GAB and that attempts to connect occurred via the expression of their gendered selves at a cost of denying themselves. It is important to note that for some families GAB was the main area of difficulty that the participants spoke about within an otherwise caring parental experience. However, for other participants there were additional aspects of parental relationships which were not GAB related which seemed more linked to the parents’ own difficulties and which seemed to contribute to lower PCC. An example of this is Sophie describing a hostile home environment where she could not trust her parents. Attachment theory proposes that when a child experiences a hostile environment he/she tends to develop an insecure attachment pattern characterised by clinginess or withdrawal or both and Sophie described how her hostile home environment led her to try to please her parents, before disconnecting from her emotions and withdrawing into herself.

To summarise, this research when considered within a PCC framework could suggest that the participants’ level of PCC was affected by their developing Transwoman identity which was expressed through GAB. However, for some participants their PCC levels were additionally affected by the overall perceived negative parental environment in which they grew up.

Barber (1999) states that within Western culture psychological autonomy is required alongside PCC for healthy child development. Psychological autonomy emphasises the role of the parent in supporting the child’s self development by providing opportunities for the child to express their thoughts, feelings and ideas, without the parent attempting to change or minimise these or by making the acceptance of the child dependent upon the child pleasing the parent. The process of fostering psychological autonomy is similar to the notion of “unconditional positive regard” which carries with it an implicit permission that all forms of self-expression are good. Psychological control involves parents constraining, invalidating or behaving in an emotionally manipulative way towards a child which impedes the child’s development of self expression. Barber (1996) describes psychological control as “parental behaviour that, for example, appeals to pride and guilt, expresses disappointment, withdraws love, isolates the child, and involves shaming” pg 3297. Likewise conditional positive regard
refers to love that is conditional upon pleasing parents. Psychological control has been demonstrated to be associated with internalising problems, such as depression as well as externalising problems such as delinquency (B. K. Barber, 1996) and parental conditional positive regard has been found to be related to introjection internalisation, behavioural enactment, fluctuations in self esteem, perceived parental disapproval and resentment of parents (Assor, Roth, & Deci, 2004).

All participants described experiencing what could be viewed as psychological control in relation to their developing transsexual identity. Participants described feeling ashamed, disappointing, guilty, unacceptable, and isolated by the responses of their parents to their self expression of their developing transsexual identity i.e. their gender atypical behaviours. These experiences developed a sense that their parents’ love was conditional on the child pleasing the parent by concealing their feminine tendencies. For some of the participants, this was the only form of psychological control that they experienced from their parents while generally receiving a significant amount of support. However, for these participants, this sole experience of psychological control was sufficient to make them conceal their identity. For other participants such as Sophie, Claire and Tanya, psychological control seemed to be the main method of parenting. Their experiences varied but similarly contained a high level of the participants trying to please their parents as well as some form of eventual detachment from their relationship experiences.

In summary, these findings tentatively suggest that these Transwomen at the least experienced psychological control in relation to their gender atypical behaviours and at the most experienced psychological control for an array of other behaviours too.

*The influence of parents’ own context*

Lezin et al. (2004) highlight that the ability of the parent to provide a high PCC environment is affected by the parents’ personal characteristics, their own childhood experience and their parenting style. Conditional parental regard has also been shown to be transmitted between generations (Assor et al., 2004). Furthermore, Barber (1996) suggests that psychologically controlling parental behaviour is probably best understood by considering the parents’ own parental experiences rather than any specific interaction that precedes the psychological control. The experiences of these Transwomen support both ideas. All participants described...
the influence of their parents own upbringing on their ability to parent. It seemed that the participants whose parents exhibited a high level of psychological control had all experienced significantly difficult childhoods themselves and participants felt this was the reason they struggled to raise their own children. However, in all families the event or interaction where the child demonstrated atypical gender behaviours was sufficient to evoke psychologically controlling behaviour.

**Influence of society**

The response of the participants’ parents to GAB seemed to also be influenced by current societal views. Ecological systems theory (Bronfenbrenner, 1994) emphasises the multiple influences upon a person’s behaviour and the reciprocal relationships among them. Simplistically, the microsystem involves the self, the family and extra familial systems i.e. the systems directly accessible to the child at various developmental points and the macrosystem is the overarching characteristics of a given culture including belief systems, hazards and life course options that are embedded in this system. Several participants spoke about lacking any way to understand their experience as it was outside the realms of their knowledge and the parents’ expressed knowledge, apart from their implicit indications that GAB was somehow “wrong”. It seemed that society’s lack of language and definition of the participants’ experience inhibited the participants from being able to make sense of their experience perhaps indicating the powerful influence of the macrosystem on the experience of these six Transwomen. Participants also made reference to other cultures where this experience is viewed differently by the macrosystem affecting how the person is treated.

...it is in some cultures celebrated and in others condemned and it is both a curse and a blessing Laura

**The role of performance**

Goffman (1971) suggested that people are expected to fit with stereotypes and that all humans perform to create impressions about themselves in social situations. People who are stigmatised learn that their experience is not aligned with norms of society. Difference is undesirable leading to an individual being “disqualified from full social acceptance” (Goffman, 1974) pg 9. Individuals who possess a stigma decide how to manage this situation. A difference exists between those who are discredited and those who are
discreditable. Discredited are those where there is an obvious sign of the stigma, discreditable are those whose stigma is not overtly obvious. In order to avoid the devaluation associated with a stigma, if a stigma is not obviously visible one option is to create a discrepancy between “actual social identity” and “virtual social identity” and to “pass” by concealing information about oneself and if required to cover up discreditable information. However, this concealment always has the associated risk of exposure. Stigma symbols are symbols which draw attention to this identity discrepancy potentially revealing the stigma. If the discrepancy is revealed the individual risks being ostracised from society leaving him/her as a discredited person facing an unaccepting world.

Goffman’s framework has been used to consider the psychological, emotional and sexual impact of gender atypical sexual development (Chadwick, Liao, & Boyle, 2005) and seems particularly relevant for the experiences described by these Transwomen not only because of their frequent reference to the performance aspect of their experiences but also because of the stigma associated with the transsexual experience. For these Transwomen, the discrepancy between actual and virtual social identity was significant during childhood with participants describing various methods to assist them in “passing”. However, their GAB could be viewed as potential stigma symbols. These Transwomen described attempting to hide or inhibit these behaviours possibly to try and avoid being discredited with some participants speaking of needing to compensate for accidental expression. Participants described that performance assisted survival implying the significant costs of becoming discredited. Transitioning could be viewed as aligning the virtual and the actual roles or could be viewed as the individual aligning with an accepted stereotype within society’s gender discourse.

Later relationships
As described in the introduction, research has demonstrated some stability of attachment patterns as well as the self perpetuating nature of attachment styles in relationships (Carnelley et al., 2007; Hazan & Kirkpatrick, 1994; Kirkpatrick & Davis, 1994). Although this research did not investigate attachment patterns specifically, as described, attachment theory has been proposed as an overarching framework for organising research on close relationships (Hazan & Shaver, 1994). The experiences of these Transwomen suggest that their interaction patterns with their parents repeated within later relationships as indicated by the super ordinate theme
the “struggle in new relationship”. It seems that these Transwomen continued suppressing themselves in order to maintain later relationships, akin to their earlier relationships.

Hazan and Shaver (1987) state that people base their ideas on how others will respond depending on prior experiences that they have had. However, they recognise that attachment styles can change. Two different positions have been proposed to explain the changes, the revisionist perspective and the prototype perspective (Fraley, 2002). The revisionist perspective suggests that attachment styles are open to revision depending upon experiences and the prototype position proposes that although individuals develop relational workings based upon new experiences, the original prototype remains unchanged and continues to impact upon relationship experiences. From a meta-analysis of adult attachment studies, Fraley (2002) proposed that the prototype model provides the best fit.

The experiences of the Transwomen in this research could be interpreted to indicate that they developed a prototype of rejection based on their parents’ response to their gender atypical behaviours and that acceptance was based on concealment. Transition seemed to enable all participants to reconnect with themselves by encouraging them to stop denying their identities, as indicated in the second major theme, “the complex journey to becoming me”. For all participants, this process involved a sense of integration and reconnection between their external and internal selves. For some this process was sufficient to significantly impact their relationship patterns, for others it led to additional relationship dilemmas in terms of self explanation and the increased possibility of rejection. Recent research focusing on the relationships with partners following GCS found that 67% of participants reported that initiating and maintaining a relationship after GCS had become easier (Lobato et al., 2006). An interesting future study could focus specifically on the impact of transitioning upon reconnecting with the self and how this impacts on attachment patterns and subsequent relationship interactions.

**Impact upon mental health**

This research is interesting in light of findings which indicate that people who have gender issues have increased mental health difficulties. As described, research has shown that GAB, low PCC and psychological control are linked to adult psychiatric problems and Alanko (2008) found that parental style mediated the impact of GAB on adult psychiatric problems.
demonstrating that parents who expressed less negative responses to GAB led to fewer adult psychiatric problems. Furthermore, Goffman stated that the psychological costs of secrecy and “passing” are high. In particular, high levels of anxiety are experienced relating to the recognition that the secret could be revealed which suggests that there are significant emotional consequences of needing to perform while growing up.

The experiences described by these Transwomen provide some ways to conceptualise the processes which may lead to mental health difficulties. For example the participants’ development of coping strategies such as disconnection, concealment and isolation to foster relationships and/or to assist survival in the long term may negatively impact upon mental health. The constant fear of exposure could contribute to anxiety issues. Furthermore, the impact of these relationships upon the self such as viewing oneself as unacceptable and wrong, feeling guilty and a disappointment could have significant mental health implications. As Laura stated

*gender identity is a diabolically isolating experience and (4) you know it um I suppose that’s why so many people have breakdowns and kill themselves and all the rest of it*

5.1 Clinical implications

This research has several clinical implications. It provides a useful insight into the complexities of the Transwoman experience which will be useful for clinicians when working with families who are negotiating this experience, perhaps with children exhibiting GAB, or for working with adults who have had similar experiences.

This research can help clinicians to incorporate relational concepts and experiential understandings into their formulations when working with children with gender problems in a family context. In addition, the links drawn between how these Transwomen’s developing identity may have elicited parental psychological control and possibly impacted upon PCC can inform interventions models. Furthermore, this research also highlights that clinicians need to be mindful that demonstrating GAB generally elicits negative responses from parents and that this can be strongly compounded if the parental environment is already experiencing difficulties. In addition, although this is small study, it found that for these Transwomen, early acceptance of their developing identity would potentially have had a positive impact for
them and forcing them to deny themselves had significant negative outcomes. This finding, combined with the research described before, should inform clinicians working with children and families who are experiencing gender identity difficulties, in order to emphasise an accepting approach (Di Ceglie, 2000; Menvielle & Tuerk, 2002; Rosenberg, 2002; B. Wren, 2002) rather than an approach where the aim is to change the child’s behaviour (K. J. Zucker, 2008). As Tanya stated:

if kids can grow up in a supportive environment that actually recognises their gender and takes it seriously I think they will grow up to be perfectly well adjusted adults

Adult clients may be seen as part of the GCS process or referred within more generic adult services. For those wishing to complete GCS, this research should assist clinicians in recognising that growing up with gender identity issues is inevitably complicated and therefore difficulties should be normalised rather than pathologised. For clients receiving help in generic adult services, this research highlights the benefits of helping clients retrospectively with their parental experiences and how they negotiated gender as children.

For all clinicians this research draws attention to the crucial importance of positive unconditional regard when working with this population. This research also highlights the complexity of the transsexual experience, highlighting the value of flexibility rather than broad treatment models, as flexibility can help tease apart the unique experience of each individual. As Tanya stated:

what is right for one kid is not necessarily right for another all I know is that it would have been right for me if I’d somehow been able to grow up as a girl

5.2 Theoretical implications
This study is limited in being able to claim significant theoretical implications due to the small sample size but by gaining an in depth insight into these Transwomen’s experiences of parental relationship, it provides a valuable contribution to the knowledge of the transsexual experience. Although this research is not generalisable, the results do question simplistic explanations of the transsexual experience, such as theories which propose that parental interactions cause transsexuality. It further highlights the complexity of this experience
hopefully providing support for the creation of more complex theories of transsexual aetiology and development that truly reflect the varied and multi-faceted experience of transsexual people. As Laura stated

\[\text{oh I am a woman trapped in a male body what have you those are the common uh definition or something that people use as it is an easy image}\]

Manners (2009) in a review of research on adolescents with gender difficulties proposes that the demand for GCS surgery is “a tragic reflection of our un-accepting society” pg 65 which will not permit more than two explicit categories of gender. She proposes that being unable to conform to society’s expectations is the cause of the distress experienced by transgender people. Interestingly in Rosenberg’s (2002) research an accepting approach led the individuals to experience less extreme gender views, while still maintaining gender variant interests. Goffman (1974) states that people who are stigmatised may attempt to change the basis for his failing. One possibility is that the forced suppression of self requires the individual to take a position where they can only fit into society by changing gender. Gagne et al. (1997) propose that transitioning reinforces the binary system despite beliefs that it is challenging it. It is possible that GCS provided these participants with a way to fit within the boundaries that society has agreed are acceptable.

5.3 Training implications
I found this research process highlighted my feelings of ignorance in relation to issues of gender variance and gender questioning and that I experienced anxiety in relation to this ignorance. In a clinical encounter, this anxiety would inevitably impact upon a clinician’s ability to develop a sound therapeutic relationship. In addition, due to the powerful societal influences that dictate accepted understandings of gender, it is important for clinicians to have considered their own assumptions prior to participating in this work so clinical work is not negatively affected. The complexity of this issue both clinically and personally presents clinicians with a challenging clinical situation and highlights the need for training institutions to recognise their responsibility in equipping clinical psychologists with the appropriate skills to be able to assist people negotiating this experience so that clinicians do not feel inadequate and can be of use to clients (Tacconelli, 2008). Furthermore, clinical psychology holds a unique position to assist in the development of multifaceted theories which can involve
scientific ideas while being open to the complexity of the human experience. Therefore training needs to highlight these issues so that clinical psychologists can become involved in this complex but important clinical area.

5.4 Reflexive considerations
As described, reflexivity is considered an important part of qualitative research as it assists transparency and allows the reader to view how personal, cultural and political values influence the researcher and their interpretation of the analysis so that the reader can position the research and the findings. In addition, reflection should consider the needs of the participants to put across versions of their accounts (Elliott et al., 1999). There have been ongoing reflexive sections throughout this report and this final section will consider influences on the researcher and the participants including the interaction between the two.

The empathic position
One of the main reflexive considerations in relation to this project was the empathic positioning of the research and whether this impacted upon the inclusion of a questioning perspective within the analysis. I think initially I experienced a tension between empathic and questioning hermeneutics within IPA. I felt that these positions were contrary which I think was due to my confusing questioning with being critical. However, through reflection and supervision, I realised that a questioning approach does not mean being critical and that these positions were complementary where the questioning approach enriches the empathic approach leading to a richer understanding of the individual’s experience.

I think the results reflect an analysis which combines both approaches as there are aspects which are closely connected to the descriptions in the text as well as higher order analysis. In addition, I think the major themes reflect ideas that the participants may not have considered themselves such as the theme “the struggle to belong”. However, I still feel I was more conscious of the impact of the research upon participants than people researching other topics. As described, to some extent this anxiety was managed by my attendance at transsexual community groups which helped me feel less likely to cause harm to this population allowing me to not need to be excessively sympathetic towards the “stigmatised” (Goffman, 1974). I suppose that by acknowledging this position and being transparent about
the tensions I experienced, readers can make their own interpretations about the level of influence of this tension.

The influence of expectation on the results of the project
Although in some ways the results reflect my expectations in that I expected that the participants would experience difficulties in their parental relationships because of their developing transsexual identity, I did not anticipate the level of richness and complexity described within the themes such as the participants’ frequent attempts as children to connect with their parents or their self awareness of their behaviour and their desire to change it in order to please their parents. Furthermore, there were some unanticipated aspects that emerged from the data such as the internal/external disconnection, the power of culture and the reconnection of self through transition.

Participant influences
Due to the historical treatment of transsexual people and the long transition process which involves proving that you are genuine and not pathological, it is inevitable that participants were eager to ensure that their experience was not pathologised and that they did not express themselves as pathological. These wider factors possibly influenced participants’ contribution to the research process. In addition, many participants spoke about participating in the research in order to help others who might have similar experiences in the future, which also possibly affected the narratives they presented. As Tanya stated

my life hasn’t always been easy but if I can do things like this for people who come after me it will be easier

The space in between
As described in the methods section, I asked each participant what it was like for them to speak with me. Some commented upon my age and my background but stated that they had felt it did not impact upon the process. Others described that they had found the process comfortable and that I had “rode” the interview with them. At the same time, it must have been difficult for the participants to speak with a younger person about painful and personal issues particularly as I was obviously not part of the Trans community and so had not experienced anything similar to their experience. In addition, as a Trainee Clinical
Psychologist it is possible that the participants were reminded of the gate keeping role that psychology often plays in the transition process, possibly affecting the content of their interviews.

5.5 Strengths and limitations

As described in the methodological section, this study has attempted to adhere closely to qualitative methodology guidelines in order to ensure credibility (Elliott et al., 1999). Although it is important to note that a limitation of this study is that the sample was small in size and therefore there is limited generalisability, it is also important to remember that generalisability is not an aim of this methodology. In fact, contrasting to quantitative methodology, purposive sampling is a traditional sampling technique within IPA with a view to exploring experiences within a relatively homogeneous albeit small group. However, although inclusion criteria were used as a way to increase homogeneity and therefore to limit limitations, the people who chose to participate in this project varied in age which meant the group was not quite as homogenous as would be ideal. The ages of the participants also perhaps questions the relevance of the study for children today, given societal changes over time and possible cohort differences. However, as described the transsexual population continues to be a stigmatised and victimised part of society, indicating an ongoing difficulty with broader social acceptance of gender variety, so these findings should still be broadly useful across the age spectrum.

As the youngest person in the sample was 39 and the eldest 60, all participants relied on recalling memories from a significant time in the past within quantitative research the unreliability of memory would be a significant problem. However, within IPA the emphasis is on the individual’s account and their sense making of that account. Furthermore, the ages of the participants might reflect the importance of timing for the participants in discussing this highly emotional topic and as Laura stated at the end of her interview:

...if we’d had this conversation 10 years ago it might have been very different

This study could be critiqued for its lack of emphasis on the sexuality of the participants. However, the aim of the study was to find out about the relationship experiences of the participants primarily with parents but also in later relationships therefore, the development
of the semi-structured interview schedule reflected this emphasis in order to focus the participants’ descriptions on these areas. In addition, categorising participants based on their sexuality, although this may have improved the homogeneity of the sample, was not in line with the ethos of this research and the view of gender as a continuum of experiences. Perhaps if sexuality had been asked about specifically, then it would have been more prominent within the research but in the end sexuality did not emerge as a key theme within the discussions of these participants.

A final strength of the study is that it achieved its aim of obtaining an insight into the parental relationships of Transwomen, highlighting variations and similarities amongst participants’ experiences, which will hopefully provide a useful contribution to future theory and practice.
6. Future research

This research highlights many areas for future research. In the future, a similar longitudinal study could explore whether individual’s way of sense making is influenced by cultural and societal contexts and whether the timing of the individual in relation to the transition process impacts their perception of their experiences. Future research could also involve conducting a similar study with children experiencing GIDC to find out their experiences of the impact of GAB on relationships with parents and the impact upon the self. Although there may be great variety within a group of children experiencing various levels of gender dysphoria and exhibiting differing levels of GAB, talking with children directly about their experiences, would perhaps enable stronger implications for potentially improving treatment initiatives with children. Although some exploratory studies have asked children with GIDC about their peer experience (Wilson, Griffin, & Wren, 2005), no studies have directly asked children their views about their early experiences which is surprising considering the controversies within the treatment of children with GIDC. Obviously this research would need to be carried out sensitively due to the ethical considerations of completing research with children but this type of research could provide useful information.

Future quantitative research could investigate associations between psychological control/psychological autonomy, transsexuality development and adult psychiatric symptoms, to see whether the links proposed are substantiated. Likewise, a quantitative study investigating the associations between PCC, transsexuality development and adult psychiatric symptoms would also be useful. Longitudinal research which explores the importance of gender acceptance for this population in order to substantiate or refute the idea that acceptance is a prerequisite for healthy development would also be a useful future research project.
7. Conclusion

*Call it a clan, call it a network, call it a tribe, call it a family. Whatever you call it, whoever you are, you need one* Jane Howard (1978)

The Transwomen in this study described that their gender atypical behaviour elicited negative responses from their parents which made participants conceal themselves to some extent. For some participants, their experiences were worsened due to the difficult family environment to which they were exposed. This research suggests that negative responses to GAB leads Transwomen to feel isolated, alone and disconnected from their families and possibly this could go some way to explaining the emotional difficulties that many transsexuals experience as they grow older. As a result, an emphasis on a broad – including societal - acceptance of gender atypical behaviours and gender variance may lead to increased connection between children and families with hopefully less emotional difficulties at a later stage. This affirmative approach will enable children to feel supported, accepted and more able to make balanced decisions about the value of GCS. This is an approach that should ideally be modelled in therapy too, given the enduring value of displaying “unconditional positive regard”.

References


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Georgina Eleanor Mary Dearden


## Appendices

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Appendix 1

Participant Information Sheet

1. Age

2. How would you describe your ethnicity?

3. What is your religion?

4. What is your current job?

5. What is your educational level?

6. What are your parents’ occupations?

7. Do you have any siblings? If yes, how many?

8. How would you describe your gender?

9. How would you describe your sexuality?
Appendix 2

Information sheet for Participants

University of Hertfordshire

Doctorate in Clinical Psychology

Research Title: Transwomen’s memories of parental relationships: An Interpretative Phenomenological study.

Introduction
You are invited to take part in a research study exploring transgender experiences of early relationships. Before you decide whether you would like to give consent to take part, please take the time to read the following information which aims to help you understand why the research is being carried out and what it will involve.

The researchers
The study is being carried out by Georgina de Lacy Staunton, Trainee Clinical Psychologist, as part of a Doctoral qualification in Clinical Psychology. The study is supervised by Dr Nick Wood, Research Tutor and Chartered Clinical Psychologist; John Rhodes, Academic Tutor and Chartered Clinical Psychologist and Erasmo Tacconelli, Chartered Clinical Psychologist.

What is the purpose of the study?
This research is interested in finding out about transgender peoples’ experiences of early relationships.

Research with transgender people has historically focused on investigating the causes of transgenderism. This type of research has been criticised for pathologising the transgender experience and not involving transgender peoples’ views. This piece of work aims to explore transgender people’s views on the impact of developing a transgender identity on early relationships through the eyes of the transgender person. The research will help clinical psychologists and other health care professionals to better understand the early experiences of transgender people. Furthermore, this exploratory study will contribute to the growing understanding of the transgender experience which can inform theory as well as services providing assistance in negotiating this complex situation.

What is involved?
If you decide that you would like to take part you will be asked to sign a consent form and complete a brief information sheet about yourself. You will be invited to participate in no more than an hour long in-depth semi-structured interview [the interview will be guided by a number of topics, but few set questions]. This will be carried out in your own home or at Hertfordshire University (travel expenses will be paid) which ever feels most comfortable for you. During this time we will discuss your memories of your childhood. We may talk about your relationships with your parents and how these relationships were affected in your view, by your early transgender experiences. We may also discuss how these early relationships...
affected you as an individual as well as your future relationships. All interviews will be tape recorded and later transcribed verbatim.

**Who is taking part?**
This study will include transwomen aged 18 years and above. A maximum of 10 people are required. All participants must remember experiencing transgender feelings early in life.

**Do I have to take part?**
No. If you do not want to take part, or you change your mind *at any time* during your participation in this study, you do not need to give a reason. Participation is entirely voluntary and you can withdraw at any time.

**What do I have to do?**
If after reading this information sheet you would like to take part in the research, you will be given a consent form to sign as well as a background information sheet to complete. When I receive the consent form, I will contact you to arrange a suitable time and place to meet.

**Will taking part be confidential?**
Yes. If you agree to take part in the study your information will be stored in a safe locked location which will only be accessible by the researchers. The overall findings of the project may be published in a research paper, if your stories are used in the research your identities will be anonymised by changing names and recognisable details. If during the interview I have serious concerns about harm to yourself or the safety of others I am compelled by my duty of care to inform others.

**What are the benefits of taking part?**
This research will give you an opportunity to speak openly and honestly about your experiences. It is hoped that this research will help to contribute to the understanding of early experiences of transgender people.

**What are the potential difficulties that taking part may cause?**
Talking about early experiences can be very emotive and may cause some discomfort and distress. If this does occur you can take a break and you can stop the interview at anytime. Despite these potential difficulties, some researchers suggest that people taking part in research interviews can find the process of talking through their experiences therapeutic and beneficial. You will be given a number of contact details following the study, should you feel that you require support.

**What if I have questions or concerns?**
If you have any further questions about the research, please feel free to contact me via email, telephone or post, details of which are below.

**Who has reviewed this study?**
This study was reviewed by University of Hertfordshire Research Ethics Committee and was given ethical approval.

Thank you for taking time to read this.

**Contact details of the researcher:**
Georgina de Lacy Staunton
Email address: G.De-Lacy-Staunton@herts.ac.uk
Telephone number: 01707 286 322
Postal address: Doctor of Clinical Psychology Training Course, University of Hertfordshire, Hatfield, Herts., AL10 9AB
Appendix 3

Participant consent form

University of Hertfordshire

Doctorate in Clinical Psychology

Participant Consent Form

Title of Project: Transwomen’s memories of parental relationships: An Interpretative Phenomenological study.

Researcher: Georgina de Lacy Staunton, Trainee Clinical Psychologist

1) I confirm that I have read and understand the information sheet dated (     ) for the above study. I have had the opportunity to consider the information and if needed ask questions that were satisfactorily answered.

2) I understand that participation is voluntary and that I am free to withdraw at any time, without giving any reason.

3) I understand that my information will be filed in a locked cabinet and the information I provide will be anonymised for the use of the study.

Name of participant ___________________________ Date __________ Signature ___________________________

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Georgina Eleanor Mary Dearden
Appendix 4
Sources of comfort and help sheet

Talking about your experiences may have left you feeling low or upset, this is quite normal and often passes after a few days. However, if these feelings persist there are local sources of support and comfort which may already be familiar to you.

1. The most immediate sources of comfort and help are likely to be your own family and friends.

2. Another valuable source of support is your local Trans organisation.

3. If you feel this conversation has raised issues that you feel may benefit from more psychological support your GP may be able to refer you for more specialised local support services.

The following national organisations offer support:

4. The Gender Trust
   National helpline on 0845 231 0505
   www.gendertrust.org.uk

   The Gender Trust provides confidential care and the helpline offers help to anyone who has enquiries about gender identity issues.

5. The Samaritans
   Telephone: 08457 909090
   www.samaritans.org

   The Samaritans is a helpline which is open 24 hours a day for anyone in need. It is staffed by trained volunteers who will listen sympathetically.
Appendix 5
Interview schedule

1) Tell me about your family when you were young? (Possible prompt if more information required: who was in your family?)

2) Could you tell me how you experienced your gender as a young child?

3) How did you express your gender?

4) How would you describe your relationship with your mother as a child?

Prompt if needed: Can you tell me how your gender expression may have affected that relationship?
Follow up: How did that affect how you thought/felt about yourself?

5) How would you describe your relationship with your father (n.b. if no father then ask whether there was a father figure)

Prompt if needed: Can you tell me how your gender expression may have affected that relationship?
Follow up: How did that affect how you thought/felt about yourself?

6) Can you tell me about your relationships as you got older?

7) Do you think your early experiences have had an influence upon these relationships in any way? If so, in what ways?

8) Ok that is the end of the interview. How was that for you?

9) Is there anything else you would like to add?
10) Were there any questions that I did not ask that you thought I was going to ask?

11) What was it like talking to me?

12) Do you have any questions?
Appendix 6
Debriefing sheet

University of Hertfordshire
Doctorate in Clinical Psychology

DEBRIEFING INFORMATION SHEET

Thank you very much for making this study possible.

This study aimed to explore transgender experiences of early relationships. I was interested in:

- How you constructed your story about this experience
- How you experienced your developing transgender identity impacted upon your early relationships
- How these relationships impacted upon you as well as other relationships

Early relationships are considered significantly influential in child development. They provide a source of support and comfort and form the basis of self esteem and confidence. Furthermore, difficult early relationships are associated with difficulties throughout the lifespan. Research has shown that transgender people often experience pressures to conform to gender typical roles during childhood often at the expense of their true self but little research has focused on the impact of developing a transgender identity on early relationships. It is hoped that this exploratory research will help us to gain an insight into your experiences and provide ideas about how psychological theory on early relationships can be adapted to incorporate this unique and complex situation.
Appendix 7
Findings of the study form

Title of project: Transwomen’s memories of parental relationships: An Interpretative Phenomenological study

Would you like to know the findings of this study?

If so, please write your name together with either your email address or postal address in the space below, and the findings will be sent to you when the project is completed

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Appendix 8

Example of interview transcript

(Removed from published version to maintain participant confidentiality)
Appendix 9

List of emerging themes

1. Acceptance in a different world
2. Freedom and happiness because of broad expectations of childhood
3. Relationship between happiness, acceptance and expectations
4. Freedom of childhood
5. Isolation
6. Language enables/determines experience
7. Suppression feelings
8. Non human
9. Isolation
10. Confusion because of impossibility of real self
11. Disconnection between internal and external selves
12. Restricted culture restricts own understanding
13. Lack of fit
14. Disconnection because disconnected
15. Suppression
16. Trapped within culture
17. Restricted understanding due to cultural understanding
18. Separated from both worlds
19. Goal of survival from parents and self
20. Suppression of more than just the femininity
21. Experience not fitting world’s views
22. Freedom of the femininity
23. Unintegrated
24. Social expectations develop with age
25. Parental pressure and disappointment
26. Impossibility of pleasing and connecting with parents
27. Impossibility of belonging
28. Suppression of self
29. Limitations of culture
30. Wrong self+
31. Isolation
32. Language enables definition of experience
33. Isolated
34. Accepted self in different world of childhood
35. Denial of desire to connect with parents
36. Unacceptable in me
37. Needing to live with suppressed self
38. Suppression = survival
39. External behaviour vs internal feelings
40. Cursed - not belonging in the world
41. External belonging vs internal isolation
42. Survival of childhood and adolescence
43. Unable to connect because disconnected
44. Performance for survival
45. Eternal attempts to reach parents - unreachable
46. Increasing expectations with age
47. Relationship provided fit with world
48. Repeating theme of suppression
49. Avoidance of expectation in adulthood
50. Similarities with relationship in childhood - freedom
51. Freedom integration
52. Stopped denying self
53. Positives of the journey
54. Moral debt to keep in male role vs moral permission to be self
55. Always blame self always see self as wrong
56. Moral freedom
57. The power of context, the force of social suppression
58. External/internal: Internal sense of being vs person that we live
59. Growing away from self vs inner becoming outer
60. Eternal desire to connect with parents
61. Denial of being denial of self
62. Integration and happiness (self acceptance?)
63. Denial of entire way of being
64. Power of society
65. Beyond world’s understanding
Appendix 10

Developing the Analysis
Appendix 11

Super ordinate themes

Alienation of uncommon discourse
1) Lack of available discourse
2) Expectations of a social model
3) Restricted understanding due to restrictions of cultural understandings
4) Language enables definition of experience
5) Experiences not fitting accepted ideas

Eternal quest to connect with parents
1) Impossibility of conforming to parental expectations
2) Disappointment
3) The wrong self
4) Suppression of self
5) Lack of belonging
6) Isolation

Disconnection, disconnecting, disconnected
1) Contradiction between internal and external self
2) Conflict between parental expectations and own experiences
3) Unacceptable self
4) Suppression of self and feelings
5) Denial of self
6) Unintegrated
7) Lack of belonging in the world
8) Disconnection
9) The goal of survival

Integration and connection
1) Moral permission to be self
2) Stopped denying self
3) Freedom integration
4) Integration happiness
5) Freedom of the femininity
6) Inner becoming outer
The impossibility of belonging

1) Acceptance in a world without expectations
2) Expectations and lack of acceptance
3) Unsuccessful attempts to fit in
4) Perform to survive
5) Sitting on the fence
6) Not belonging in the world

Parental influence on later relationships

1) Avoidance of expectations
2) Attempt to fit
3) Similarities with childhood
4) Moral debt to keep in the male role
5) Betrayal permitted internal to become external
## Appendix 12

Table of super ordinate themes with supporting quotes

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<tr>
<th>Theme</th>
<th>Supporting quote</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Alienation of uncommon discourse</strong></td>
<td></td>
</tr>
<tr>
<td>Lack of available discourse</td>
<td><em>I simply didn’t have the freedoms to think that way it wasn’t in the mix that I was given to work with 387-388</em></td>
</tr>
<tr>
<td></td>
<td><em>so that 50s 60s stuff is key to this to understanding that there was nothing in my um nothing in my understanding could handle it you know 398-399</em></td>
</tr>
<tr>
<td>Expectations of a social model</td>
<td><em>expectations of the masculine upon me 840</em></td>
</tr>
<tr>
<td></td>
<td><em>suppression of a social force 1066</em></td>
</tr>
<tr>
<td>Restricted understanding due to restrictions of cultural understandings</td>
<td><em>I think its a lot to do with the kind of cultural way I was brought up you know what I mean I: mm</em></td>
</tr>
<tr>
<td></td>
<td><em>P2: I simply didn’t have the freedoms to think that way it wasn’t in the mix that I was given to work with I: mm P2: it didn’t exist do you know what I mean 384-390</em></td>
</tr>
<tr>
<td></td>
<td><em>there was my school and my parents and they thought the same it wasn’t their fault I: mm P2: you know that is just simply how it was and they just couldn’t simply see beyond that you know 558-562</em></td>
</tr>
<tr>
<td></td>
<td><em>you see its quite interesting that the focus is gender but its not really is the container the context you as um Cousteau said “the bacteria are nothing the culture is everything” (laughing) 1053-1057</em></td>
</tr>
<tr>
<td>Language enables definition of experience</td>
<td><em>no I didn’t even have I didn’t have these words or these terms which is something very different from me now very very different indeed 246–247</em></td>
</tr>
</tbody>
</table>
## Experiences not fitting accepted ideas

*in my world that I lived in there was no place for a person like me you know* 547

*and so that made it I couldn’t relate to being anything other than I was even though that made me was completely um didn’t fit you know what I mean* 333-334

## 2. The eternal quest to connect with parents

### Impossibility of conforming to parental expectations

*from my parents very much about a certain way I should be* 532

*always wanting to somehow reach him which I never could I never did* 828

### Disappointment

*“you have been a disappointment to me all your life” right “you have never been what I wanted you to be”* 538-539

### Wrong self

*wrong again what I am in my centre is mad wrong* 618

*“hey please listen to me and see who I am” “no listen you’re just doing it wrong you are wrong” so that is the feeling I got all the time is you’re wrong I just felt wrong* 666-668

### Suppression of self

*I learned how I could live with that suppression* 703

### Lack of belonging

*I just wanted to please my parents and then felt bad cause I couldn’t and I couldn’t see a place for me in the world* 542-545

### Isolation

*I was completely isolated with this* 227

*very very isolated right deeply deeply isolated in this place* 317-318

*I remember that there was nobody to talk about it* 222
### 3. Disconnection, disconnecting, disconnected

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contradiction between internal and external self</td>
<td>The sense of not belonging I think is the hugest one and you know I had a place and a name this boy called this and it was just like oh and I couldn’t see any way out of this. And so that made it I couldn’t relate to being anything other than I was even though that made me was completely um didn’t fit you know what I mean.</td>
</tr>
<tr>
<td>Conflict between parental expectations and own experiences</td>
<td>I wasn’t sophisticated in my understanding or thinking at all I just wanted to please my parents and then felt bad cause I couldn’t and I couldn’t see a place for me in the world.</td>
</tr>
<tr>
<td>Unacceptable self</td>
<td>But you see the thing is what it comes down to is the unacceptable in me. These are the lowest forms of slime life you can imagine.</td>
</tr>
<tr>
<td>Suppression of self and feelings</td>
<td>One of the great talents of trans people is the suppression of feelings it’s what we are good at you know is suppression and um so I began to practice that and um but of course it would affect me.</td>
</tr>
<tr>
<td>Denial of self</td>
<td>Yes a lot of anger and that’s about denial of being you can’t be what you are.</td>
</tr>
<tr>
<td>Unintegrated</td>
<td>Unintegrated what the word not integrated there is no word is there and um.</td>
</tr>
<tr>
<td>Lack of belonging in the world</td>
<td>I mean the sense of not belonging in the world I think is a big one huge.</td>
</tr>
<tr>
<td>Disconnection</td>
<td>Socially and I didn’t I never connected with the world the word is engaged I never engaged with the world and so I spent a good deal of my time just you know floating by. Sort of an underlying theme was one of distance.</td>
</tr>
</tbody>
</table>
### The goal of survival

*I counted that um survival was the main attainment of my teenage years (whistles) 445*  
*you know just the oppression of my childhood and my teenage years like I say the survival I did I survived I did it was good not bad 763-764*

### 4. Integration and connection

#### Moral permission to be self

*well the thing is that I wouldn’t (exhale) I felt then that if I owed I had a sort of moral debt to keep in the male role*  
*I: yep*  
*P2: to um fulfil the family expectations and hers to me coming out of the family that has been Karen and David who was just a little kid at the time and um so there was that but once the sort of the moral trust of the triangle had been broken then I wouldn’t be breaking I wouldn’t be the one that was taking the first step to break up the family do you know what I mean 1019-1026*  
*I think it was a bit like that the sense of moral freedom 1032-1033*

#### Stopped denying self

*I need to integrate myself by becoming real I didn’t trans anything*  
*I: mm*  
*P2: I didn’t cross anything right*  
*I: unhuh*  
*I just stopped denying myself that’s all 954-959*

#### Freedom integration

*this is what it’s about its a kind of freedom integration 953*

#### Integration happiness

*what it’s about you know is an integration and um completion of happiness (laughing) 1219-1220*

#### Freedom of the femininity

*the freedom of the femininity where I could be and live and express all this stuff and you know 516-518*

#### Inner becoming outer

*the inner becoming outer you know 1159*
### 5. The impossibility of belonging

| **Acceptance in a world without expectations** | you know I think it was because I was a very very little child and that was ok 154  
and I think simply just because it was fine little kids do these things 163  
through the hole in the hedge aha you know this was completely fine 119-120 |
| **Expectations and lack of acceptance** | no but you see the thing is that as you develop so the expectations start to be that you fall into a social model 524-525 |
| **Unsuccessful attempts to fit in** | and at the same time I was deeply locked into this I sort of felt I should be and I wasn’t sophisticated in my understanding or thinking at all I just wanted to please my parents and then felt bad cause I couldn’t and I couldn’t see a place for me in the world 542-545 |
| **Perform to survive** | P2: you know I once defined my life as tap dancing and bull shitting my way through it  
I: mm  
P2: yeah really it’s true and I think I did but it’s a way of survival it’s a way of surviving you see 788-792 |
| **Sitting on the fence** | I spent half of my time on the fence looking over into girl world 404-405 |
| **Not belonging in the world** | I just felt I had been cursed you know what I mean the sense of not belonging in the world I think is a big one huge  
I don’t belong in this world what am I doing here you know what does a creature like me doing here you know |

### 6. Parental influence on later relationships

<p>| <strong>Avoidance of expectations</strong> | what immediately comes to mind is this sense of authority figures in my life that is how I am seeing my parents as the authority about I guess I avoided having them (laughing) 881-883 |
| <strong>Attempt to fit</strong> | so that at least fitted me into the world in that way 854 |</p>
<table>
<thead>
<tr>
<th>Similarities with childhood</th>
<th>she didn’t symbolise either parent to me she was kind of like me 915-916</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moral debt to keep in male role</td>
<td>well the thing is that I wouldn’t (exhale) I felt then that if I owed I had a sort of moral debt to keep in the male role I: yep P2: to um fulfil the family expectations and hers to me coming out of the family that has been Karen and David who was just a little kid at the time and um so there was that but once the sort of the moral trust of the triangle had been broken then I wouldn’t be breaking I wouldn’t be the one that was taking the first step to break up the family do you know what I mean 1019-1026</td>
</tr>
<tr>
<td>Betrayal permitted internal to become external</td>
<td>and so that kind of gave me moral permission I felt I needed it you know the whole trans guilt thing the guilty the guilt about being what you are so that’s what happened with that so then I just sort of pressed go 1006-1008</td>
</tr>
</tbody>
</table>
### Appendix 13

**Publishability guidelines (Elliott et al., 1999)**

<table>
<thead>
<tr>
<th>A. Publishability guidelines Shared by Both Qualitative &amp; Quantitative Approaches</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Explicit scientific context and purpose</td>
</tr>
<tr>
<td>2. Appropriate methods</td>
</tr>
<tr>
<td>3. Respect for participants</td>
</tr>
<tr>
<td>4. Specification of methods</td>
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<tr>
<td>5. Appropriate discussion</td>
</tr>
<tr>
<td>6. Clarity of presentation</td>
</tr>
<tr>
<td>7. Contribution to knowledge</td>
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<th>B. Publishability guidelines Especially Pertinent to Qualitative Research</th>
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<td>2. Situating the sample – describe participants</td>
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Appendix 14

Member checking letter and summary

Georgina de Lacy Staunton, Trainee Clinical Psychologist
Clinical Psychology Doctorate Programme
College Lane Campus
University of Hertfordshire
Hatfield
AL10 9AB

XXX

21st April 2009

Dear xxx,

Re: Research on Transwomen’s memories of parental relationships

Thanks again for meeting with me to participate in my research project. As I mentioned in the email, enclosed are some of my ideas on some of the main topics that we talked about in the interview. If you have any comments about my ideas, or about the interview in general please note them down and return them in the stamped, addressed envelope.

Thank you again for your involvement in this project,

Yours sincerely,

Georgina de Lacy Staunton
Trainee Clinical Psychologist
University of Hertfordshire
Early relationships

xxx early childhood was characterised by a sense of “freedom” to express herself as she wanted. However, as she grew older so did the expectations for her to fit into the masculine role. Although xxx did not have any language for her experience, she was strongly drawn to the female world but knew that this was “wrong”. She felt like she had been “cursed”, there was no one to talk with and she felt “deeply, deeply isolated”. She desperately wanted to belong but could not connect with her parents as they would critique any expression of femininity giving xxx the message that she was “wrong” and “unacceptable”. She stated that she considers “survival to be the main attainment” of her teenage years. She survived by suppressing her feminine feelings however, this suppression and “denial of being” combined with the experience of deep isolation and lack of belonging, gave xxx a sense of “distance” and being “unintegrated” with the world.

Later relationships

xxx felt her early experiences led her to avoid authority within later relationships. She commented that her first relationship provided her with a sense of fitting with the world and despite informing her partner of her feminine tendencies they married with xxx continuing to suppress her feminine side. When xxx’s partner betrayed her “trust”, xxx felt that she had been given the “moral permission” to be herself. She speaks of “inner becoming outer” via the “freedom of femininity”. At the same time, xxx highlights that “by becoming real” she did “not trans anything” she just stopped denying herself.

My thoughts or reactions to Georgina’s interview summary

Please put this in the SAE and post.

Thank you for your time

Georgina
Appendix 15

Example of member checking response

Early relationships

experienced a difficult childhood. Her mother was unpredictable and capable of significant hostility. Her father was “emotionally absent”. She described her family as “remote”. Although both parents discouraged her feminine interests, due to their behaviour towards her, she valued her parents and their opinions. She recognised that she was “on her own” and that her support systems needed to be outside of her family. In order to foster those support systems, it was important for her to be likeable so she developed charisma and learned to control her emotions. She used her feminine tendencies to work as a “chameleon” enabling her to foster support from many sources by being able to play both gender roles. However, there were a few informal occasions when the activities were “too close to the truth” where she felt “restricted by relaxing” and feared she would not be able to control her emotions.

Later relationships

felt that her early relationships with her parents have influenced her behaviour in later relationships. In particular, she has always been conscious of not wanting to be like her mother so learned to control her emotions. However, she stated that she probably over controls them. She also tends to be a “problem solver” and described trying to keep a “balance” in relationships. Following the end of her first marriage, she felt excited that she would start her transition but soon another relationship developed and another opportunity to transition had “gone”. The trigger for transition was a diagnosis of and this resulted in the end of her second marriage. She feels that although she is “still the same person”, her transition has enabled her to become the person she was “born to be”.

My thoughts or reactions to Georgina’s interview summary

I have been their person for nearly six years now and worms everything so I have been out my emotional

Please put this in the SAE and post.

Thank you for your time

Georgina
Appendix 16

Local Research Ethics Committee approval letter

SCHOOL OF PSYCHOLOGY ETHICS COMMITTEE APPROVAL

Student Investigator: Georgina de Lacy Staunton

Title of project: Transgender memories of relationships in early childhood: An exploratory study.

Supervisor: Nick Wood

Registration Protocol Number: PSY/08/08/GDLS

The approval for the above research project was granted on 20 August 2008 by the Psychology Ethics Committee under delegated authority from the Ethics Committee of the University of Hertfordshire.

Signed: [Signature]

Date: 20 August 2008

Dr. Liav Kavilashvili
Chair
Psychology Ethics Committee

STATEMENT OF THE SUPERVISOR:

From my discussions with the above student, as far as I can ascertain, s/he has followed the ethics protocol approved for this project.

Signed (supervisor): [Signature]

Date: 6th July 2007
Appendix 17

Ethics approval for minor modification

SCHOOL OF PSYCHOLOGY ETHICS APPLICATION FORM - 3
For minor modifications to an existing protocol approval.

Status: Doctorate in Clinical Psychology

Course code (if student):

Title of project: Transgender memories of relationships in early childhood: An exploratory study.

Name of researcher(s): Georgina de Lacy Staunton
Contact Tel. no: 07056432184
Contact Email: G.De-Lacy-Staunton@herts.ac.uk
Name of supervisor: Dr Nick Wood, Research tutor, University of Hertfordshire &
Dr John Rhodes, Academic tutor, University of Hertfordshire

Start Date of Study (if the end date of the existing approval has expired): July 2008
End Date of Study: July 2009

Details of modification:

Change the title of the project from:

Transgender memories of relationships in early childhood: An exploratory study

To:

Transgender memories of relationships in early childhood: An Interpretative Phenomenological Analysis Study

Does the modification present additional hazards to the participant/investigator?
(delete an inappropriate option category)

NO

If yes, please provide a clear but concise statement of the ethical considerations raised by the project and how you intend to deal with them.

This form should be submitted (via your Supervisor for MSc/BSc students) to the Psychology Ethics Committee, psys@herts.ac.uk where it will be reviewed before being approved by chair's action.

PLEASE ATTACH COPY OF ORIGINAL PROTOCOL APPLICATION

Name: [Redacted]
Date: 21.9.08
(Researcher(s))

Name:............................Date:...24th September 2008
(Supervisor)

APPROVAL OF PROTOCOL APPLICATION FOR MODIFICATION

We support the approval of modification of the above protocol

We do not support the modification of the above protocol for the following reasons:

..............................................

Signature: ........................... Date: 8 September, 2008

Chair of Ethics Committee

Ethics LK/Chi/2006
Created: 19/09/06