

STRESS AND RESILIENCE IN GENDER NONBINARY INDIVIDUALS

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July 2019

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ABSTRACT

The purpose of the study is to further understand the meanings associated with and the lived experiences of gender nonbinary individuals related to stress and resilience. Although nonbinary individuals make up as much as one third of the transgender population in the United States (James et al., 2016) and are at risk for higher levels of psychological distress and suicide compared to the general population (James et al., 2016), very little research has been done with nonbinary groups (Matsuno & Budge, 2017). The researcher utilized a descriptive phenomenological research design to explore the experiences of 8 individuals who identify as gender nonbinary (GNB) or gender nonconforming (GNC). In-depth, semi-structured interviews were conducted and analyzed using Colaizzi's (1978) framework. Individuals within this study have complex identities that are realized and expressed in a variety of ways, experience considerable adversity and stigma, cope by relying on social supports, and generally have a sense of freedom and eventual confidence in their gender identity. Therapy experiences within this sample are also explored. In order to decrease discrimination and provide affirmative care to nonbinary individuals, more research must be done with nonbinary identities as a focus (Grzanka & Miles, 2016). Clinical mental health implications are further explored.

STRESS AND RESILIENCE IN GENDER NONBINARY INDIVIDUALS

A Thesis

Presented to the Faculty of the Department of Human Development and Family Science

East Carolina University

In Partial Fulfillment of the Requirements for the Degree

Master of Science in Marriage and Family Therapy

By

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July 2019

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ACKNOWLEDGEMENTS

First, I would like to thank my thesis chair, Dr. Damon Rappleyea for inspiring me to come to ECU and quite literally having a role in altering my path in life. Damon is one of the reasons why I am pursuing higher education in the field of Marriage and Family Therapy. I am also incredibly thankful to Damon for his enthusiasm and encouragement throughout this process. From the first day I spoke to Damon about this research, he helped me refine ideas and was unendingly helpful. I would like to thank him for having faith in me as a student and as a researcher. I also would like to thank Drs. Paige Averett and Archana Hegde for their incredibly motivating enthusiasm, support, encouragement, patience, and thoughtful questions and suggestions.

I would also like to thank my cohort in general for allowing me to talk incessantly about gender in every class, and to my close friends Krista Hein and Claire Webb for listening to me when I did not want to talk about gender ever again. I would also like to thank Krista for thoughtful thesis advice and Claire for helping me process through ideas and, always, for helping me find the right language. I am also grateful to other members of the LGBT+ community for contributing to my understandings, supporting me, participating in my study, and being constant lights of resilience, strength, and love. I would like to thank my fellow community members and other groups that continue to be marginalized for reminding me why I want to continue doing this work.

I would also like to express my thanks to the place I come from and my chosen family who helped raise me. I would like to thank them for growing my roots and allowing me to be the kind of person who questions everything and cares about so much. Lastly, to everyone in my life who has heard me yell ‘gender is a social construct’ a million times this year, thank you.

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CHAPTER 1: INTRODUCTION

Although research with lesbian and gay communities has increased over the last decade and models have been developed to better understand the stress they experience as sexual minority groups (Meyer, 2003), research is still limited when it comes to transgender and gender nonconforming (TGNC) communities. Compared to other populations, transgender individuals experience higher rates of discrimination and stigma, as well as higher rates of anxiety, depression, and other symptoms of distress (Bockting, Miner, Swinburne Romine, Hamilton, & Coleman, 2012). Although gender nonbinary individuals may experience forms of discrimination and stigma that vary from the experiences of binary transgender individuals, they also experience mental health disparities due to stigma (Matsuno & Budge, 2017). It has become increasingly crucial for mental health professionals to understand the experiences of gender nonbinary individuals as well as provide affirmative therapy services to these populations (Singh, 2016).

Within this thesis, current research is explored related to gender identity terminology, gender identity development, trends and concepts related to transgender and gender nonconforming issues, and gender minority stress and resilience. The current literature on TGNC individuals is further explored to examine gender minority stress factors, coping mechanisms, resilience, and social support. The purpose of this study is to further understand the meanings associated with and the lived experiences of gender nonbinary individuals related to stress and resilience. The researchers aim to explore challenges and strengths in a sample of individuals who identify as gender nonbinary.

Need for Study

Although nonbinary individuals make up as much as one third of the transgender population in the United States (James et al., 2016), very little research has been done with

nonbinary groups (Matsuno & Budge, 2017). The lack of research is especially startling considering that some researchers have found that individuals who identify as gender nonbinary may be at risk for higher levels of psychological distress and suicide compared to transgender individuals (James et al., 2016). Nonbinary gender identities are also in stark contrast to the binary views of larger western society and it is important that these identities are understood to lessen the discrimination and stigma nonbinary individuals experience.

Within the limited literature available about transgender individuals, Budge, Rossman, and Howard (2014) found that TGNC individuals experience higher levels of psychological distress than the general population. When compared to sexual minority groups, gender minority groups as a whole have also been found to suffer from more psychological distress (Warren, Smalley, & Barefoot, 2016). Although estimates vary based on the sample, Tebbe and Moradi (2016) found that 68% of the transgender individuals in their sample met the criteria for a diagnosis of depression and 28% in the sample had previously attempted suicide. When specifically surveying a population of gender nonbinary individuals, Harrison et al. (2011) found that they were generally in lower income categories and 43% of them had attempted suicide at least once.

The psychological distress that TGNC individuals experience is not an aspect that is inherent in their gender minority identity (Bockting et al., 2013). Bockting et al. (2013) have suggested that symptoms of psychological distress are directly related to experiences of discrimination, oppression, and the very real influence of stigma on TGNC individuals' social environment. Stigma and discrimination have been shown to contribute to TGNC individuals not being able to openly identify as transgender or gender nonconforming, which often contributes to depressive symptoms and suicidal ideation (Nicolazzo, 2016; Factor & Rothblum, 2008). All of

the previously mentioned contributors to distress also contribute to social isolation and cumulative gender minority stress (Factor & Rothblum, 2008; Hendricks & Testa, 2012). Social isolation is an especially important topic for gender nonbinary individuals because of social accountability to gender and misunderstandings that contribute to stress factors and secrecy (Nicolazzo, 2016). In addition, the involvement of supportive others has been shown to be an incredibly influential protective factor for TGNC individuals (Bockting et al., 2013; Budge et al., 2014; Hendricks & Testa, 2012; Tebbe and Mordai, 2016; Testa et al., 2015).

Research in areas around gender minority issues is also essential when considering issues of cultural humility (APA TFGIGV, 2009). The APA Task Force on Gender Identity and Gender Variance (TFGIGV) found that less than a third of graduate students and psychologists reported being familiar with trans and gender nonconforming issues (APA TFGIGV, 2009). In order to provide affirmative mental health services to gender minority groups, mental health professionals must have knowledge, skills, awareness, and therapeutic sensitivity with these communities (Grzanka & Miles, 2016). Transgender and gender nonconforming individuals are often considered outliers or special cases in research, but in order to truly build cultural humility, these groups must be more centered and included in all of psychological research (Singh, 2016).

Purpose of the Study

In order to provide affirmative and accurate care to nonbinary individuals, more research must be done with nonbinary identities as a focus (Grzanka & Miles, 2016). As previously stated, the purpose of this study is to further explore the lived experiences of gender nonbinary individuals. The researchers aim to explore stress and resilience factors for gender nonbinary people related to gender identity, mental health resources, and concepts around social support. These concepts are explored through both the lens of gender as a social construct and through a

model of the minority stress factors that influence gender minority individual's lives. Generally, the purpose of the study is to create a cultural shift from the traditional positivist understanding of gender that often pathologizes nonbinary definitions of gender and move toward holistic understandings of the experience in people's lives.

CHAPTER 2: LITERATURE REVIEW

The westernized binary concept of two sexes, two genders, and two sexualities is only recently constructed in the history of society, with many societies throughout the world and throughout time utilizing additional terms for lesbian, gay, bisexual, and transgender identities (Hunt, 2016; Nanda, 2000). Some terms in the history of groups native to what is now called North America and the Pacific Islands are: winyanktehca or winkte in Lakota (Zimny, 2016), nadleehi in Navajo (Epple, 1998), and mahu in Hawaiian cultures (Nanda, 2000). A modern, widely accepted term for Native American or Aboriginal people who are gender diverse is two-spirit (Hunt, 2016). Despite binary constructions of gender, many English terms are used by people to identify outside of the western, binary construction of gender (APA, 2015). Genderqueer, gender nonconforming, and gender nonbinary are among the most commonly used terms but related terms include genderfluid, gender neutral, or agender (APA, 2015).

LGBT Terminology

There are many terms pertaining to sex, gender, and sexuality that are continually being redefined and expanded in definition. The American Psychological Association (APA, 2015) has defined sex, or sex assigned at birth, as having to do with the appearance of external genitalia at birth (or sometimes by characteristics such as internal genitalia, hormones, or chromosomes) and how the binary categories are assumed to be congruent with gender identity. Gender identity has been defined as an internal sense of being a man, woman, or alternative gender that may or may not match with the sex assigned at birth (APA, 2015). Gender expression is the way individuals present themselves to others, including behaviors and appearance, which may be different from their gender identity (APA, 2015). Gender roles have been defined as patterns of behavior and

appearance that are associated with the gender identity in a given culture and time period (APA, 2015).

For the purposes of this study, LGBT (lesbian, gay, bisexual, transgender) is used as an umbrella term for sexual and gender minorities. Within this umbrella term, transgender (or trans) is used by some whose gender identity does not conform to societal expectations for their sex assigned at birth (APA, 2015). Gender nonconforming (GNC) is another umbrella term used to describe gender identities or expressions that may be different from norms associated with sex assigned at birth (APA, 2015). In much of the existing research, authors will refer to both transgender and gender nonconforming (TGNC) individuals. Although genderqueer has also been used to describe gender identities that do not conform with binary understandings of gender (APA, 2015), within this paper gender nonbinary (GNB) is used most often to refer to individuals who identify their gender as outside of binary notions of gender or sex assigned at birth. Gender nonconforming (GNC) and gender nonbinary (GNB) are used interchangeably throughout this paper because much of the previous research has used GNC to describe both trans and gender nonbinary individuals.

Gender Identity Development

Doing Gender

Gender as a concept and the development of gender identity has been debated and written about for some time. In a landmark paper written about the social construction of gender, West and Zimmerman (1987) explained assigned sex as a biological determination, while ‘doing gender’ is a psychological and social process. The authors explained that gender is maintained through activities and conduct that correspond to argued-for membership in a particular social category, with the allowable categories often consisting of man or woman. The authors explained

this concept of ‘doing gender’ as being in contrast to how western society dictates membership within a gender category as natural and essential in relation to biological sex. This essentialist understanding of gender does not take into consideration how gender identity effects everyday social interactions and how the gender presentation, or gender role, can be changed and abandoned based upon varying social situations (West & Zimmerman, 1987).

West and Zimmerman (1987) argued that the essentialist interpretation of gender in relation to assigned sex does not account for everyday actions and the societal maintenance of gender. The authors illustrated the attribution of gender in western society with the example of seeing a person in a suit and automatically assuming they were assigned male at birth and have a penis. They also exemplified this idea by bringing to light the different make-up of public restrooms (urinals versus stalls), despite the fact that men and women use the same type of bathrooms within their own homes. The authors argued that these social cues have little, if anything, to do with assigned sex. West and Zimmerman (1987) explained that “gender is not a set of traits, nor a variable, nor a role, but the product of social doings of some sort” (p. 129).

Gergen & Gergen (2004) have proposed that “nothing is real unless people agree that it is” (p. 10). By this statement, they introduce the idea that each person creates, through social communication, a different understanding of the world. Although western society often values objective truth as more valid, many truths we take as transcendental are often subjective (Gergen & Gergen, 2004). Rather than a hierarchical view in which one truth is more ‘correct’, social constructionists explore a more heterarchical view in which truths are understood through conversation and no single truth is above another. Through an exploration of widely held truths, people “become curious about whose traditions in particular are honored or unquestioned, and whose voices are silent or suppressed” (Gergen & Gergen, 2004, p. 26). These ideas of social

constructionist thought become meaningful when attempting to understand the construction of the gender binary and the validity of gender nonbinary identities.

Intersectionality

Another relevant social interaction in terms of gender is how gender is constructed based on varying factors such as race, class, religion, sexual identity, and other identity categories (Robbins & McGowan, 2016). Robbins and McGowan (2016) expand the concept of ‘doing gender’ by West and Zimmerman (1987) in their description of gender identity development as a social interactional process rather than solely a developmental process. The development of gender identity is less of an individual process that occurs in stages throughout development and more of an identity that is highly influenced by social and environmental factors (Robbins & McGowan, 2016). Robbins & McGowan (2016) applied intersectional scholarship to the concept of ‘doing gender’ to better understand the increasing institutional oppression against transgender and gender nonconforming individuals, especially transgender people of color. The negative impact on TGNC individuals, especially trans people of color, illustrates the social rules and social acceptability of gender identities outside of the norm and how these identities are influenced by identity categories (Robbins & McGowan, 2016).

Individual Gender Identity Development

Although it is vital to view gender through the lens of social interaction and construction, it is also important to understand how individuals relate to gender and what components contribute to the development of individual gender identity. Egan and Perry (2001) organized the components of individual gender identity into factors including a sense of belonging to a gender category, the degree of compatibility one feels with the assigned gender, sense of sameness to others in the category, and the impact of conforming to gender roles and rules. The authors

examined adjustment as related to gender in terms of peer acceptance and self-esteem. They found that feelings of belongingness and peace with one's assigned gender were related to better adjustment, while pressure to conform to gender was associated with poorer adjustment. This sense of pressure is lessened and adjustment is improved when individuals felt more able to explore their gender identity and felt more secure in their identity (Egan & Perry, 2001).

Another way to view gender identity development has been described by Darwin (2017), in which they explored how individuals online define and related to their identity as 'genderqueer'. With these self-identified genderqueer individuals, their ways of relating to their gender identity depended a great deal on how they conceptualized gender itself. The author found that some individuals explained that they felt uncomfortable with the binary gender categories, while others had no personal connectedness or relationship to a gender category when asked. Darwin (2017) described these factors as the individuals not having a sense of accountability to gender. This concept of accountability relates to the way Egan and Perry (2001) examined the pressure individuals feel to identify with and conform to the rules of a gender category.

Redoing Gender

Darwin (2017) defines the concept of not identifying with a category of gender as 'redoing gender', which is in contrast to the concept of 'doing gender' by West and Zimmerman (1987). Darwin (2017) described different processes that accompany 'redoing gender'. One process individuals utilized to 'redo gender' was visually representing the ambiguity of their genderqueer identity, such as androgynous presentations, mixing binary gender cues, or altogether not intentionally portraying any particular gender cues (Darwin, 2017). The actions involved in representing gender identity, or 'redoing gender', are also related to the distinct

process of ‘coming out’ for genderqueer individuals (Darwin, 2017). In the process of ‘coming out’ to others, individuals who are genderqueer often have to directly confront their social accountability to an assigned gender, and in this process, they often have to explain the social construction of gender (Darwin, 2017).

TGNC Concepts and Trends

Those who identify as transgender (or trans) do not always also identify as gender nonconforming, and, alternatively, gender nonconforming or gender nonbinary individuals do not always also identify as trans (APA, 2015). As previously mentioned, within social science research with transgender individuals, nonbinary and genderqueer identities encompass a small percentage of the research (Matsuno & Budge, 2017). This is despite the fact that one third of the sample of respondents in the 2015 U.S. Transgender Survey identified as non-binary (James et al., 2016). Gender nonconforming identities are at odds with, or possibly in protest of, the desire of many researchers and of western society at large to define and explain identities (Sullivan, 2003). These concepts of non-definition are accepted within what is termed Queer Theory. Scholars of queer theory also resist categorization and question the assumptions of essentialist identities and binaries (Sullivan, 2003). Overall, queer theory attempts to situate terms and ideas within a contextual view that looks closely at how power differences and structural inequalities come up for different groups of people (Sullivan, 2003).

Although individuals who identify as members of the LGBTQI+ community still experience discrimination in the United States, LGBT research and acceptance of members of the community has progressed a great deal over the last three decades (Moradi et al., 2016). The history of psychology and medicine pathologizing LGBT identities has had lasting effects, although mental health fields are now more committed to training in LGBT affirmative therapy

and research (Grzanka & Miles, 2016). Over the last 10 years, there has been an increase in publications focusing on particular issues in the LGBT community that have not previously been attended to, such as issues surrounding transgender and gender nonbinary identities (Moradi et al., 2016). However, most of the research in mental health fields concerns lesbian and gay individuals, with a small subset of publications devoted to transgender and genderqueer issues (Moradi et al., 2016).

Although it is widely accepted that those who identify as genderqueer or gender nonbinary do not always also identify as transgender, much of the current research includes both transgender and gender nonbinary individuals in the research, with the proportion of individuals who identify as gender nonbinary being much smaller than those who identify as transgender (Moradi et al., 2016). This trend inherently reinforces the binary construction of gender and sexuality. Under the umbrella of psychological research on transgender individuals, Moradi et al. (2016) found that the main topics of empirical articles having to do with transgender issues that were published between 2002-2012 include mental health (252), identity/sociopolitical status (219), and prejudice and discrimination (115), family and social networks (91), counseling and health care (82), and developmental topics (82). In general, the research on transgender issues was steadily increasing in the years between 2002 to 2012 (Moradi et al., 2016). Despite a large body of research, the 2015 U.S. Transgender Survey (USTS), the largest study on the experiences of transgender individuals (N = 27,715), found extreme disparities in daily living and health care, as well as high levels of discrimination and stigma (James et al., 2016).

Minority Stress Model

Minority Stress

The minority stress model was originally based on the work of Meyer (1995) with minority stress in gay men and Meyer (2003) with lesbian, gay, and bisexual (LGB) individuals. Meyer (2003) explored the minority stress that is specific to LGB people and how these factors impact mental health. In the original minority stress model, Meyer (1995) classified distal stressors that result from external, direct experiences of violence or discrimination, and proximal stressors that result from internal fear of victimization, mistrust of others, and the internal stress of concealing one's sexual identity. The impact of these proximal or internal stressors is exacerbated by the constant awareness and vigilance a person must maintain while being on the lookout for instances of external stress (Meyer, 2003). The proximal stressors also involve internalized homophobia or internalized negative attitudes and prejudices, which may be the most damaging stressors (Meyer, 2003).

Resilience

Meyer (2003) also explained the resilience in LGB individuals increasing as the impact of the stressors are mitigated by factors related to connection with supportive communities. This connection to others builds the most resilience when LGB individuals receive emotional and social support from others who share their identity and experience, and build a positive view of themselves that counteracts their minority stressors (Meyer, 2003). Meyer (2003) made a significant argument about being careful not to suggest that individuals who experience minority stress have the responsibility for or ability to control resiliency and coping mechanisms to combat the stress. The author explained that a simple view of individuals in these groups as

‘resilient actors’ may place the responsibility of ‘failing’ to cope or ‘failing’ to be resilient on the individual rather than on harmful societal structures and stigma.

Support for Model

The minority stress model has been applied in many other studies as well as in different population groups (Frost, Lehavot, & Meyer, 2013; Hayes, Chun-Kennedy, Edens, & Locke, 2011). Frost et al. (2013) followed LGB individuals over a year to examine the possible effects of minority stress on the participant’s physical health. The authors found that the more events of prejudice LGB participants experienced, the higher the likelihood of the participants developing health problems. The authors also considered other stress inducing life events not related to being in a sexual minority, and the relationship between minority stressors and health persisted. Hayes et al. (2011) utilized the minority stress model to study discrimination and prejudice in participants who belonged to ethnic and sexual minority identity groups. The authors found that these individuals had greater levels of distress than both heterosexual and European American participants. Hayes et al. (2011) also found that the minority stress being related to distress persisted when comparing LGB participants and LGB participants who were also people of color. The authors findings supported the tenants of minority stress theory.

In conceptualizing the stress and resilience factors that TGNC individuals experience, Valentine & Shepherd (in press) utilized the minority stress model to conduct a systematic review of literature pertaining to TGNC individuals. The authors highlighted the stressors other studies have found as well as experiences of discrimination and stigma that are related to distress for TGNC people. The authors also explained that studies have shown the importance of resilience factors including community connectedness, support, and positive coping strategies. Tebbe and Moradi (2016) also studied the minority stress model and how it relates to transgender

individuals' suicide risk. Tebbe and Moradi (2016) examined the relationships of minority stressors, substance abuse, and social support with suicide risk in transgender participants. The authors found that depressive symptoms were associated with minority stressors (which included fear of stigma and discrimination, internalized transphobia, and experiences of discrimination), and social support lessened some of these risks.

Gender Minority Stress and Resilience

Although the model of minority stress was not originally developed to include transgender and gender nonbinary individuals, others have effectively applied the model to explore the impact of gender minority stress (Hendricks & Testa, 2012; Testa et al., 2015). The Gender Minority Stress and Resilience Model has recently been developed to explore the different life experiences of those who are transgender or gender nonbinary (Hendricks & Testa, 2012; Testa, Habarth, Peta, Balsam, & Bockting, 2015). Testa et al. (2015) explained that transgender individuals may experience even more minority stress (called gender minority stress) due to increased risks for physical and sexual violence and stigma. Hendricks and Testa (2015) also wrote that this gender minority stress model is not meant to pathologize these individuals, but to elucidate common life events and experiences that contribute to mental and physical health outcomes for these individuals. An important concept to note within these models is that gender minority identity itself is not directly related to mental health issues, but the effects of minority stress is the main contributor to mental health struggles (Hendricks & Testa, 2015).

Gender Minority Stress

Arguably the most striking mental health risk experienced by TGNC individuals are increased suicide rates (Hendricks & Testa, 2015). This suicide risk may be especially well explained by the gender minority stress model due to increased social isolation and rejection

(Hendricks & Testa, 2015). These factors are also related to increased levels of homelessness, unemployment, and self-harm in TGNC individuals (Hendricks & Testa, 2015). The unique stressors transgender and gender nonbinary individuals experience include difficulty accessing medical care and legal documents due to stigma and discrimination as well as inability to access bathrooms based on their gender identity presentation (Testa et al., 2015). For transgender and gender nonbinary individuals, there are different issues around gender presentation in terms of concealment due to the fact that physical cues may be more easily determined than behavior or other perceived identity cues (Hendricks & Testa, 2015). TGNC individuals also experience decreased levels of affirmation due to individuals' internal sense of gender identity not corresponding to societal versions of their assigned gender (Testa et al., 2015). Internalized transphobia is also contributed to by self-blame and low self-esteem related to bullying, rejection by family, and discrimination (Hendricks & Testa, 2015).

Gender Minority Resilience

The aspects of resilience in the minority stress model developed by Meyer (2003) have also been applied to trans and gender nonbinary individuals. Resilience factors for TGNC individuals include social and community support, especially witnessing others within their community who are similar to themselves (Hendricks & Testa, 2012). This sense of acceptance and community mitigates the effects of the minority stress that TGNC individuals experience, as well as increases the sense of pride in their identity (Testa et al., 2015). Singh & McKleroy (2010) also explored aspects of resilience in transgender people of color and found that these individuals reported high levels of resilience in dealing with distal and proximal stressors. The authors found that aspects which contribute to resilience include feelings of pride in one's gender identity, increased spirituality and feelings of hope, identifying and coping with oppression,

connecting with activism, accessing resources, and learning to cope with and handle family relationships.

Gender Nonbinary Experiences

Only a few research studies have specifically examined experiences unique to gender nonbinary individuals (Dawin, 2017; Budge, Rossman, & Howard, 2014; Harrison, Grant, & Herman, 2011). However, Warren et al. (2016) found that there are differences in the psychological wellbeing for different gender minority subgroups (transgender women, transgender men, and GNB individuals). Harrison et al. (2011) also wrote that the GNB participants in their study were generally younger and more educated than their binary trans counterparts. Budge, Rossman, & Howard (2014) found that the majority of GNB participants in their study experienced severe depressive and anxiety symptoms. Harrison et al. (2011) also found that GNB individuals experienced more incidents of assault and harassment during their school years than their binary trans counterparts. The authors also reported that 43% of the GNB individuals they studied had attempted suicide.

Nicolazzo (2016) also wrote of agender or GNB participants in their study that did not disclose these identities to others due to the concept of GNB identities being less understandable to others, which may highlight how GNB individuals' experiences may be different from binary transgender individuals. GNB identities may be different in terms of their coming out process, because GNB individuals have to simultaneously identify their gender identity and educate others on the concept of gender social construction and/or the presence of more than two gender categories (Darwin, 2017). The burden of social accountability to their assigned gender that GNB individuals may feel in the process of coming out may contribute to them not presenting

their gender identity to others (Darwin, 2017). The possible responses of secrecy may contribute to feelings of shame and isolation as well as overall distress (Factor & Rothblum, 2008).

Trans and GNB Stress

Within studies that have included both trans and gender nonbinary individuals, researchers have found that, compared to the general population, TGNC individuals experience greater levels of psychosocial distress (Budge et al., 2014). Warren, Smalley, & Barefoot (2016) have also found that TGNC individuals experience more psychosocial distress than sexual minority groups (namely LGB individuals). These higher rates of anxiety, depression, and other symptoms of distress are not primarily from gender dysphoria, but are from systems of oppression, experiences of discrimination, and felt stigma (Bockting et al., 2012). In some samples of binary trans populations, researchers have found that 68% of participants met the diagnosis for depression and 28% have attempted suicide (Tebbe & Moradi, 2016). In another study, Budge et al. (2013) found that 51% of transgender women and 48% of transgender men experienced symptoms of depression, which are both higher than general population estimates.

As previously mentioned, it is essential to note that these depressive symptoms are not inherent to trans populations, on the contrary, psychological distress has been shown to be directly related to social stigma and experiences of discrimination (Bockting et al., 2013). TGNC individuals may experience greater levels of psychological distress due to both internalized stigma and enacted stigma or discrimination (Hendricks & Testa, 2015). Internalized transphobia may manifest in the pressure of passing, which may stand in the way of positive self-conceptions and identity affirmation (Bockting et al., 2013). On the other hand, TGNC individuals whose gender presentations match their gender identity may experience more incidences of discrimination or 'enacted stigma' (Bockting et al., 2013). These experiences of not being able to

present their identities comfortably and safely may contribute to shame, depressive symptoms, and suicidal ideation (Nicolazzo, 2016; Factor & Rothblum, 2008). In addition, not being able to openly identify with their gender identity contributes to social isolation and enacted stigma by some members of TGNC individuals' social network (Nicolazzo, 2016).

TGNC Gender Identity Development

Trans and gender nonbinary individuals experience the effects of oppression, discrimination, and stigma throughout different life stages. Factor and Rothblum (2008) found that many trans individuals experience feelings of being different from their assigned gender around ages 6 to 9. The authors also found that the GNB individuals in their study most commonly first identified as gender nonconforming around the age of 20 and came out to others roughly two years later. TGNC individuals experience lower levels of support from their family compared to cisgender individuals (Factor & Rothblum, 2008). In their study, Factor and Rothblum (2008) also found that 49% of transgender women, 71% of transgender men, and 89% of gender nonbinary individuals experienced discomfort when having to use public restrooms. In educational spheres, TGNC students experience lasting effects of discrimination in the form of transphobic slurs on college campuses. TGNC individuals may also experience discrimination and non-acceptance in certain departments which then contributes to TGNC individuals choosing alternative majors and likely has far-reaching impacts beyond their college education (Nicolazzo, 2016). In addition, Nicolazzo (2016) described participants in their study who experienced great emotional exhaustion due to faculty and students depending on them as the sexual or gender minority to educate others on these topics.

Coping Mechanisms

Some authors have also studied avoidant and facilitative coping mechanisms and how these aspects mediate the psychosocial stressors and resulting psychological distress for TGNC individuals (Budge et al., 2013; Budge et al., 2014). Budge et al. (2014) defines avoidant coping as attempts to remove oneself and separate from the problem by preventing emotional reactions, using substances, and/or minimizing issues. The authors defined facilitative coping, on the other hand, as seeking resources, skills, and positive adaptations to problems. Budge et al. (2014) explained that, typically, higher levels of avoidant coping are associated with higher levels of depressive and anxiety symptoms. Budge et al. (2013) also found that social support was a significant factor when considering these coping mechanisms in TGNC individuals. In fact, when individuals reported less social support, they used more avoidant coping strategies, which contributed to more anxiety and depression. Budge et al. (2014) explained that even when TGNC participants utilized more facilitative coping strategies but had lower levels of social support, they experienced more anxiety. The authors argued that avoidant coping mechanisms must be considered in relation to contextual factors, due to the fact that societal oppression and discrimination may contribute to avoidance.

Resilience

In addition to social support being influential in terms of the effects of coping mechanisms and psychological distress, Bockting et al. (2013) found social support was imperative in decreasing psychological distress in relation to experiences of discrimination. Higher levels of reported social support for gender nonbinary individuals was also found to be related to less anxiety and depressive symptoms (Budge et al., 2014). Tebbe and Mordai (2016) also found that a protective factor for trans individuals was social support in the form of

friendships, which was also related to decreased risk for suicide. Pflum, Testa, Balsam, Goldblum, and Bongar (2015) also wrote about the importance of social support, especially as it relates to TGNC individuals' connection to LGBT communities. The authors explained that this community support may mitigate some negative symptoms by increasing self-esteem and positive feelings about identity, which is in opposition to societal stigma. Bockting et al. (2013) also found social support in the form of family and peers to be associated with lower negative symptoms. Nicolazzo (2016) wrote about these communities, which they call 'kinship networks', as places where TGNC individuals could work to deconstruct systemic oppression and discrimination, feel comfort and safety, and where their identities would be honored.

Doing Resilience

Nicolazzo (2016) explained the resilience of TGNC individuals as 'doing resilience,' which is in contrast to the concept of resilience being a static personality trait. Instead, 'doing resilience' recognizes resilience as something that one continually practices. The author wrote about TGNC individuals continually practicing resilience by constructing spaces where they could express their identity in order to navigate their everyday lives. Harrison et al. (2011) also highlighted gender nonbinary individuals' resilience with their use of different words to describe their gender identity. The author explained that GNB individuals resist gender norms and society's forced gender expectations by using humor and resilience in the way they identify, such as reclaiming queer overall or identifying their gender as 'gender rebel.'

Despite the fact that research has typically focused on risk factors in transgender people, Singh, Hays, and Watson (2011) found common themes in the resiliency of trans participants. One of these themes included community connection, which is crucial for the participants in challenging times when feelings of resiliency are low. The participants also reported that they

developed a sense of identity, which helped them define their gender identity and work against constraining definitions of gender. These self-generated conceptions of identity helped the participants interact with others in more meaningful and connected ways. The participants also reported that they developed positive ways of seeing themselves and beliefs in their own self-worth. These individuals relied on ideas of themselves as valuable and knew that “they had the right to live their lives and exist as transgender people” (Singh et al., 2011, p. 23). Lastly, the authors reported that these individuals constructed thoughts of hope for their future, which was built on over time in order to keep them resilient in the face of discrimination and difficult life experiences.

Current research on trans and gender nonbinary individuals is multi-faceted. As previously stated, trans individuals experience challenges around discrimination and stigma, yet they also have been found to show great resilience. Many articles also highlight the necessity for affirmative mental health services and the importance of social support in terms of family and kinship networks. A variety of theories lay a foundation to better understand the experiences of gender nonbinary individuals. Previous research also guides a path to create deeper understandings of stress and resilience experiences for gender nonbinary individuals.

Based upon this review of the literature on gender nonbinary individuals and gaps within this research, the purpose of the following study is to create a deeper understanding of the experience of some within this population. In order to develop this deeper understanding, more exploratory research must be conducted. This research will explore stress and resilience factors for gender nonbinary people related to gender identity, mental health resources, and social support. The questions that will be addressed include how gender nonbinary individuals define

their gender, what challenges they face, how they cope with these challenges, and what role family or community factors play in their experiences.

CHAPTER 3: METHODOLOGY

The purpose of this qualitative study is to better understand the lived experiences of a sample of adults who identify as gender nonbinary. The researcher aimed to explore stress and resilience factors for gender nonbinary people related to gender identity, mental health resources, and social support. In order to better understand this under-researched topic, the researcher utilized a qualitative approach with phenomenological analysis for the design of this study. The researchers intended to address questions around the meaning of participants' gender identity and how participants' experiences are impacted by identifying as a gender nonbinary person. Information about the specific questions that were asked in the interview can be located in Appendix D.

Study Design

Phenomenological Inquiry

This study utilized a descriptive phenomenological research design. This design is best suited for developing descriptions and related meanings about how some gender nonbinary individuals experience life in their gender identity (Colaizzi, 1978). The assumption of phenomenological research is that phenomena should be observed and studied in their natural environment and knowledge is relative to each participant (Dahl & Boss, 2005). Phenomenological research design allows researchers to ask questions in order to further understand the meaning of a participant's lived experience (Dahl & Boss, 2005). This study design is especially meaningful when attempting to understand the social reality of gender nonbinary individuals, especially as a marginalized population.

Assumptions of phenomenological research. Phenomenological researchers claim that bias is inherent in research and is not negative, but must be made clear (Dahl & Boss, 2005). The

statement of beliefs and values is an important step in phenomenological research (Dahl & Boss, 2005). Therefore, the following values and assumptions of the primary researcher are specifically stated as thus:

- 1) Gender nonbinary individuals experience many challenges due to the pressure to conform to the gender binary.
- 2) Due to these challenges, GNB participants will report many aspects of stress and some may report reduced levels of social support due to their gender identity.
- 3) Due to the importance of the issues around gender identity, their difference from societal messages, and individual resiliency, GNB participants will report creative and strength-filled coping strategies.
- 4) As a personal value, the researcher believes that gender is a fluid but important aspect of identity and nonbinary gender identity should be recognized as valid for the health and wellbeing of gender nonbinary individuals.

Procedures

Participants and Recruitment

Participants were comprised of adults, from the ages of 18 to 31, who identify as gender nonbinary and live in or around a large, rural, college campus in the southeastern United States. Participants were gathered through purposive sampling through the distribution of flyers and emails to local LGBT organizations. Purposive sampling was chosen due to the specific nature of the inclusion criteria (Dahl & Boss, 2005). Participants were also recruited through snowball sampling, in which participants were given flyers about the study to give to other nonbinary individuals in their social network (Dahl & Boss, 2005). The flyers contained information about the study and asked for gender nonbinary, agender, genderqueer, gender fluid, and/or gender

nonconforming participants. Participants were gathered until the primary researcher interviewed at least 8 participants, which Creswell (1998) has suggested as an adequate sample size. Within the scope of this research study, the primary researcher conducted 8 interviews.

Inclusion and Exclusion Criteria

Criteria for inclusion in this study was determined by participants self-identifying as having a nonbinary gender identity. These identities may include gender nonbinary, agender, genderqueer, gender fluid, and/or gender nonconforming. These identities were advertised on the flyer and on any information given about the study. The researcher had participants fill out a brief demographic screener in the initial interview with questions such as “what is your gender identity.” On the demographic survey, participants were also asked the screening question, “do you identify your gender as binary, meaning identifying only as either woman, man, transgender man, or transgender woman?” which was originally used as exclusion criteria if the individual answered yes to this question. The primary researcher later realized that this may be a design flaw as participants might identify as both a binary gender as well as gender nonconforming.

Data Collection

At the beginning of each interview, participants were given information about the study including study purpose, costs and benefits of participating, ability to discontinue at any time, and confidentiality. The participants were then signed the informed consent (Appendix E). Each interview was audio-recorded, which was mentioned in the informed consent. At the end of the interview, participants were given an information sheet with mental health resources (Appendix F), if deemed necessary. At the beginning of each interview, each participant was offered a \$5 gift card as a token of appreciation.

Demographic questionnaire. A questionnaire asking for demographic information was given to each participant before the interview. The survey asked the participant to identify a pseudonym to help insure the anonymity of the participant. This demographic information gathered basic information around gender identity, race or ethnicity, age, religious affiliation, and level of education. This information served to gather the same background information for each participant in order to explore intersectional factors that might impact the participants life experiences. The full demographic questionnaire can be found in Appendix G.

Interview. Data was collected through semi-structured interviews. Individual, semi-structured interviews are considered to be an adequate method of gathering data in a phenomenological research study (Van Teijlingen & Ireland, 2003). The advantage of in-depth interviews is that they allow participants to describe their lived experience in great detail (Creswell, 1998). Each participant was asked questions in a semi-structured interview format that allowed the conversation to continue naturally but also guided the conversation in specific directions (Hesse-Biber & Leavy, 2011). The interviewer was sensitive to what gender identity the participant wrote on the demographic questionnaire and adjusted to replace ‘gender nonbinary’ with this identity when asking the interview questions. Some questions this interview explored include (the full interview guide can be seen in Appendix D):

What does it mean to you to be GNB?

What are some challenges you have faced related to your gender identity?

How have you coped with or recovered from these challenges?

Do you identify yourself as GNB to your friends, family, or community?

Have your relationships changed since letting people in your life know that you identify as GNB?

Informed Consent

Informed consent is a process that was engaged in throughout any contact with participants. The participants were notified of the voluntary nature of the study, that they may withdraw from the study at any point, the purpose of the study, any costs and benefits of participating, and information about confidentiality. The participants were also asked to consent to being audio recorded. The participants were then asked to sign an informed consent form (Appendix E) and were given the opportunity to express any questions or concerns.

Confidentiality

The participants were informed of the researchers attempts at securing confidentiality and the limits of confidentiality. The researchers attempted to ensure participant anonymity and confidentiality through the use of participant chosen pseudonym and an assigned participant code, de-identification of all notes and data, and password protection of all data. The researcher coded data in order to ensure that information that would identify the participant was removed. The data from the demographic information sheets with the name of the participant and their pseudonym were stored on a password-protected computer. All audio files and transcription documents were labeled with the participant code and stored so that only the primary investigator (PI) and research team had access to the information. Each document was password protected. All data will be stored for 6 years from the completion of this study and will then be destroyed.

Data Analysis

In analyzing data in a phenomenological study, the purpose is to understand the lived experience and interpretations of phenomena by the participants (Creswell, 1998). The primary researcher utilized methods described by Colaizzi (1978) to analyze data in a phenomenological study. Although there are many ways to analyze phenomenological data, the researcher chose to

analyze the data through Colaizzi's framework. This framework instructs researchers in a step-by-step process of rigorous analysis in order to create a rich description of participant's experiences. Before beginning the data analysis, the researcher noted the meanings they interpreted of the phenomena by journaling, which helps aid in the bracketing of interpretations and reducing the influence of the researcher bias (Lincoln & Guba, 1985). Bracketing assumptions is especially important in phenomenological research in order to aid in distinguishing researcher assumptions from participants experiences (Lincoln & Guba, 1985).

In the next step, the researcher read through each transcript in order to gain an understanding of each participant's experience as a whole (Colaizzi, 1978). Then, the researcher read each interview transcript multiple times. The researcher then identified and coded significant statements in each interview transcript (Colaizzi, 1978). The researcher then read through the significant statements in the transcripts and assigned formulated meaning statements, or statements that have more meaning beyond simply what is said (Colaizzi, 1978). The identification of formulated meanings is a careful process of the researcher situating each possible meaning of a statement in the context of the phenomena described in the transcript (Colaizzi, 1978).

After analyzing each transcript to find formulated meanings, the researcher then grouped formulated meanings into thematic clusters (Colaizzi, 1978). The process of grouping the formulated meanings also included discerning subthemes that are common among the participants experience and then decided on various thematic clusters (Colaizzi, 1978). In accordance with Colaizzi's (1978) suggestion to return to the transcripts after discerning these themes, the researcher analyzed the transcripts to determine whether there were any significant statements that do not fit the thematic clusters. If found, these statements and themes were

incorporated into the data analysis (Colaizzi, 1978). At this stage, a triangulated researcher also read through the transcripts and made notes of the thematic clusters they found, which the primary researcher and triangulated researcher discussed in order to increase the trustworthiness of the data analysis (Lincoln & Guba, 1985).

The next step involved incorporating all of the thematic clusters into various emergent themes (Colaizzi, 1978). The researcher found that the thematic clusters could be grouped into five emergent themes. The researcher then constructed an exhaustive description of the phenomena (Colaizzi, 1978). The researcher listed the relevant statements and thematic clusters in order to develop this exhaustive description (Colaizzi, 1978). The exhaustive description integrated all formulated meanings, thematic clusters, and emergent themes into the description of the phenomena experienced by these participants (Colaizzi, 1978). Colaizzi (1978) has also suggested that the final step should involve member checking. The researcher contacted each participant to consult the participants about the results and whether they believe these findings are representative of their experiences (Colaizzi, 1978). If the participants contributed any additional information, the researcher incorporated this information into the data analysis (Colaizzi, 1978).

Trustworthiness

Lincoln and Guba (1985) have suggested various methods of establishing trustworthiness and validity. To aid in establishing the validity of this study, the research used reflective journaling and note taking, a triangulated researcher, and member checking (Lincoln & Guba, 1985). Lincoln and Guba (1985) describe a process of journaling and note taking during the interview and transcription process in order to examine biases and collect information. In the beginning of this process, the researcher used self-reflection and journaling in order to fully

describe their own experience of the phenomenon (Creswell, 1998). The process of keeping a journal of interpretations and reactions aids in ensuring the confirmability of the findings (Lincoln & Guba, 1985). Ultimately, the reflections were incorporated with the findings in order to establish whether the reflections and findings are grounded in the data (Lincoln & Guba, 1985).

Lincoln and Guba (1985) described a process of a third party being involved in the data analysis in order to examine what has been found from the research. This process of triangulation aids in establishing the credibility of the findings (Lincoln & Guba, 1985). This credibility is established by involving another researcher in the data analysis in order for them to find themes and check these themes against the findings of the primary researcher (Lincoln & Guba, 1985). The triangulated researcher and primary researcher discussed their separate findings and any additional themes were integrated into the data analysis (Creswell, 1998).

As previously mentioned, the researcher also engaged in member checking in order to increase the trustworthiness of the findings (Lincoln & Guba, 1985). Through this process of member checking, participants were asked whether they would be willing to be contacted at a later date to check the meanings and findings of the data (Dahl & Boss, 2005). All participants agreed to be contacted by the researcher. Lincoln and Guba (1985) have explained that member checking helps the researchers to test the credibility of their findings by directly checking with the constructors of the realities being investigated. Member checking aids in participants being able to correct their intention, correct any errors in findings, and add additional information (Lincoln & Guba, 1985).

CHAPTER 4: PUBLICATION MANUSCRIPT

Generally, the purpose of the study is to create more of a cultural shift from the traditional positivist understanding of gender that often pathologizes nonbinary definitions of gender and move toward holistic understandings of the experience in people's lives. The specific aim of this study is to further understand the meanings associated with and the lived experiences of gender nonbinary individuals related to stress and resilience. Although research with lesbian and gay communities has increased over the last decade and models have been developed to better understand the stress they experience as sexual minority groups (Meyer, 2003), research is still limited when it comes to transgender and gender nonconforming (TGNC) communities. Compared to other populations, transgender individuals experience higher rates of discrimination and stigma, as well as higher rates of anxiety, depression, and other symptoms of distress (Bockting, Miner, Swinburne Romine, Hamilton, & Coleman, 2012). Although gender nonbinary individuals may experience forms of discrimination and stigma that vary from the experiences of binary transgender individuals, they also experience mental health disparities due to stigma (Matsuno & Budge, 2017). It has become increasingly crucial for mental health professionals to understand the experiences of gender nonbinary individuals as well as provide affirmative therapy services to these populations (Singh, 2016).

Literature Review

There are many terms pertaining to sex, gender, and sexuality that are routinely redefined and expanded in definition. For the purposes of this study, LGBT (lesbian, gay, bisexual, transgender) is used as an umbrella term for sexual and gender minorities. Within this umbrella term, transgender (or trans) is used by some whose gender identity does not conform to societal expectations for their sex assigned at birth (APA, 2015). The American Psychological

Association (APA, 2015) has defined sex, or sex assigned at birth, as having to do with the appearance of external genitalia at birth (or sometimes by characteristics such as internal genitalia, hormones, or chromosomes) and how the binary categories are assumed to be congruent with gender identity. Gender identity has been defined as an internal sense of being a man, woman, or alternative gender that may or may not match with the sex assigned at birth (APA, 2015). Some estimates place the prevalence of transgender adults to be 0.53% of the population (Crissman, Berger, Graham, & Dalton, 2017), while Meerwijk and Sevelius (2017) estimates in 2016 there were about 390 transgender adults per 100,000 people in the United States. Some studies have estimated that gender nonbinary individuals make up as much as one third of the transgender population in the United States (James et al., 2016).

Gender expression is the way individuals present themselves to others, including behaviors and appearance, which may be different from their gender identity (APA, 2015). Gender roles have been defined as patterns of behavior and appearance that are associated with the gender identity in a given culture and time period (APA, 2015). Gender nonconforming (GNC) is another umbrella term used to describe gender identities or expressions that may be different from norms associated with sex assigned at birth (APA, 2015). In much of the existing research, authors will refer to both transgender and gender nonconforming (TGNC) individuals. Those who identify as transgender (or trans) do not always also identify as gender nonconforming, and, alternatively, gender nonconforming or gender nonbinary individuals do not always also identify as trans (APA, 2015). Although genderqueer has also been used to describe gender identities that do not conform with binary understandings of gender (APA, 2015), within this paper gender nonbinary (GNB) is used most often to refer to individuals who identify their gender as outside of binary notions of gender or sex assigned at birth. Gender

nonconforming (GNC) and gender nonbinary (GNB) are used interchangeably throughout this paper because much of the previous research has used GNC to describe both trans and gender nonbinary individuals.

Gender Identity Development: “Doing Gender”

In a landmark paper written about the social construction of gender, West and Zimmerman (1987) explained assigned sex as a biological determination, while ‘doing gender’ is a psychological and social process. The authors explained that gender is maintained through activities and conduct that correspond to argued-for membership in a particular social category, with the allowable categories often consisting of man or woman. Robbins and McGowan (2016) expand the concept of ‘doing gender’ by West and Zimmerman (1987) in their description of gender identity development as a social interactional process rather than solely a developmental process. The development of gender identity is less of an individual process that occurs in stages throughout development and more of an identity that is highly influenced by social and environmental factors (Robbins & McGowan, 2016). The negative impact on TGNC individuals, especially trans people of color, illustrates the social rules and social acceptability of gender identities outside of the norm and how these identities are influenced by identity categories (Robbins & McGowan, 2016).

Darwin (2017) defines the concept of not identifying with a category of gender as ‘redoing gender’, which is in contrast to the concept of ‘doing gender’ by West and Zimmerman (1987). The actions involved in representing gender identity, or ‘redoing gender’, are also related to the distinct process of ‘coming out’ for genderqueer individuals (Darwin, 2017). In the process of ‘coming out’ to others, individuals who are genderqueer often have to directly confront their social accountability to an assigned gender, and in this process, they often have to explain the

social construction of gender (Darwin, 2017). Egan and Perry (2001) organized the components of individual gender identity into specific factors including a sense of belonging to a gender category, the degree of compatibility one feels with the assigned gender, sense of sameness to others in the category, and the impact of conforming to gender roles and rules. This sense of pressure is lessened and adjustment is improved when individuals felt more able to explore their gender identity, felt more secure in their identity, and felt belongingness and peace with gender (Egan & Perry, 2001).

Gender Minority Stress and Resilience

The minority stress model was originally based on the work of Meyer (1995, 2003) with lesbian, gay, and bisexual (LGB) people and stress factors in minorities impact mental health. The Gender Minority Stress and Resilience Model has more recently been developed to explore the different life experiences of those who are transgender or gender nonbinary (Hendricks & Testa, 2012; Testa, Habarth, Peta, Balsam, & Bockting, 2015). In the minority stress model, Meyer (1995) classified distal stressors that result from external, direct experiences of violence or discrimination, and proximal stressors that result from internal fear of victimization, mistrust of others, and the internal stress of concealing one's sexual identity.

Stress. Testa et al. (2015) explained that transgender individuals may experience even more minority stress (called gender minority stress) than LGB groups due to increased risks for physical and sexual violence and stigma. Hendricks and Testa (2015) also highlight the influence of gender minority stress on suicide rates, which they attribute partially to social isolation and rejection. Within studies that have included both trans and gender nonbinary individuals, researchers have found that, compared to the general population, TGNC individuals experience greater levels of psychosocial distress (Budge et al., 2014). Hendricks and Testa (2015) also

wrote that this gender minority stress model is not meant to pathologize these individuals, but to elucidate common life events and experiences that contribute to mental and physical health outcomes for these individuals.

Resilience. Meyer (2003) also explained the resilience in LGB individuals increasing as the impact of the stressors are mitigated by factors related to connection with supportive communities, where they receive emotional and social support from others who share their identity and experience, and build a positive view of themselves (Meyer, 2003). The minority stress model has been applied in many other studies as well as in different population groups (Frost, Lehavot, & Meyer, 2013; Hayes, Chun-Kennedy, Edens, & Locke, 2011). Resilience factors for TGNC individuals, in particular, include social and community support, especially witnessing others within their community who are similar to themselves (Hendricks & Testa, 2012). This sense of acceptance and community mitigates the effects of the minority stress that TGNC individuals experience, as well as increases the sense of pride in their identity (Testa et al., 2015). Higher levels of reported social support for gender nonbinary individuals was also found to be related to less anxiety and depressive symptoms (Budge et al., 2014). Importantly, Nicolazzo (2016) explained the resilience of TGNC individuals as ‘doing resilience,’ which is in contrast to the concept of resilience being a static personality trait. Instead, ‘doing resilience’ recognizes resilience as something that one continually practices.

Current Study

The purpose of this study is to further understand the meanings associated with and the lived experiences of gender nonbinary individuals related to stress and resilience. The researchers aim to explore challenges and strengths in a sample of individuals who identify as gender nonbinary. Some of the primary research questions in this study include:

What does it mean to be GNB?

What are some challenges participants faced related to your gender identity?

How have they coped with or recovered from these challenges?

Are they out as GNB to their friends, family, or community? Have these relationships changed?

What are their therapy experiences? If none, what would make them comfortable or uncomfortable in therapy?

The statement of beliefs and values as well as any assumptions is an important step in phenomenological research (Dahl & Boss, 2005). Therefore, the following values and assumptions of the primary researcher are specifically stated as thus:

- 1) Gender nonbinary individuals experience many challenges due to the pressure to conform to the gender binary.
- 2) Due to these challenges, GNB participants will report many aspects of stress and some may report reduced levels of social support due to their gender identity.
- 3) Due to the importance of the issues around gender identity, their difference from societal messages, and individual resiliency, GNB participants will report creative and strength-filled coping strategies.
- 4) As a personal value, the researcher believes that gender is a fluid but important aspect of identity and nonbinary gender identity should be recognized as valid for the health and wellbeing of gender nonbinary individuals.

Method

Design

This study utilizes a descriptive phenomenological research design. This design is best suited for developing descriptions and related meanings of how some gender nonbinary individuals experience life in their gender identity (Colaizzi, 1978). Phenomenological research design allows researchers to ask questions in order to further understand the meaning of a participant's lived experience (Dahl & Boss, 2005), which may be especially meaningful when attempting to understand the social reality of gender nonbinary individuals as a marginalized population. An important step in phenomenological research is also bracketing, or naming researcher bias (Colaizzi, 1978). Before analyzing the data, the primary author constructed value and assumption statements, which were made available to the research team. In addition, the primary investigator utilized a reflexive journal, a triangulated researcher, and member checking with the goal of reducing researcher bias (Lincoln & Guba, 1985).

Participants/Recruitment

Participants were recruited through purposive and snowball sampling, due to the specific nature of the inclusion criteria (Dahl & Boss, 2005). Information was given to local LGBT organizations to assist in recruiting participants and each participant was given flyers to give to others that may be interested. Organizations contacted were primarily from a rural community in the southeastern United States. Criteria for inclusion in this study was determined by participants self-identifying as having a nonbinary identity. Once participants contacted the primary researcher with interest, participants were given more information and were offered a \$5 gift card as a token of appreciation at the beginning of each interview. Of 12 individuals who originally reached out with interest to participate, 8 were eventually able to schedule and attend

an interview. This number of participants is consistent with Creswell's (1998) recommendation of 8 to 12 participants in a qualitative research study.

Participants ranged in age from 18 to 31 and all identified as gender nonbinary or gender nonconforming. All participants were assigned female at birth and all live in a rural community in the southeastern United States. All participants were full-time undergraduate students, except 1 participant who had graduated with a bachelor's degree and was employed part-time.

Pertaining to race and ethnicity, 5 participants were white, 2 identified as multiracial or biracial, and one was black. Further demographic information for the participants is located in Table 1.

Data Collection and Analysis

The researcher utilized a qualitative approach with phenomenological analysis for the design of this study. The researcher intended to address questions around the meaning of participants' gender identity and how participants' experiences are impacted by identifying as a gender nonbinary person. Data was collected through over the phone and in-person semi-structured interviews. Information about the interview guide can be found in Table 2. Interviews typically lasted around 45 minutes and each interview was audio-taped and then transcribed.

The data from these interviews were analyzed using Colaizzi's (1978) framework for phenomenological analysis. Although there are many ways to analyze phenomenological data, the researcher chose to analyze the data through Colaizzi's framework. This framework instructs researchers in a step-by-step process of rigorous analysis in order to create a rich description of participant's experiences. Before beginning the data analysis, the researcher noted the meanings they interpreted of the phenomena by journaling, which helps aid in the bracketing of interpretations and reducing the influence of researcher bias (Lincoln & Guba, 1985). The primary researcher read through each interview transcript several times. Significant statements

within each interview were then identified, leading to the primary researcher identifying meaning statements, or statements that have more meaning beyond simply what is said (Colaizzi, 1978). The significant statements were then formed into meaning statements, or formulated meanings, which were then grouped into thematic clusters (Colaizzi, 1978).

To aid in establishing the trustworthiness of this study, the researcher used reflective journaling and note taking, a triangulated researcher, and member checking (Lincoln & Guba, 1985). The triangulated researcher read through the transcripts to find thematic clusters and discussed their separate findings with the primary researcher (Creswell, 1998). The primary researcher also utilized member checking and sent the results to participants for them to look over and correct or add to any interpretations (Creswell, 1998). Information from the triangulated researcher and participants was then integrated into the data analysis (Creswell, 1998). Eventually, the researcher found thirteen thematic clusters and five emergent themes common to all of the participant's experience of being nonbinary (Table 3). Examples of quotations from the participants as well as the corresponding formulated meanings, thematic clusters, and emergent themes can be found in Table 4.

Ethical considerations

The participants were given an informed consent form and were notified of the voluntary nature of the study, that they may withdraw from the study at any point, the purpose of the study, any costs and benefits of participating, and information about confidentiality. At the beginning of the interview, as well as throughout, participants were given an opportunity to express any questions or concerns. All participants were asked to consent to audio recording and all participants agreed. The researchers have attempted to ensure participant anonymity and confidentiality through the use of a participant chosen pseudonym and an assigned participant

number, de-identification of all notes and data, and password protection of all data. All data with identifying information as well as audio files were kept in locked rooms and only the primary researcher and research team had access to the information. A research team of three undergraduate students aided in the transcription of the deidentified and password protected audio files. The research assistants were IRB approved and had training in confidentiality practices.

Results

The data from the interviews revealed 325 significant statements, 132 formulated meaning statements, 13 thematic clusters, and five emergent themes, which demonstrate the lived experiences of stress and resilience for gender nonbinary people related to gender identity, social support, and mental health resources. The emergent themes revealed in this study include: (a) nonbinary identification; (b) adversity; (c) external/ social support; (d) internal resiliency; and (e) therapy experiences. Beneath each emergent theme below, an abridged summary is provided as well as more detailed summaries of each thematic cluster. An outline of the emerging themes and thematic clusters can be found in table 3. An exhaustive description of the phenomena was constructed from the data to highlight the lived experiences of gender nonbinary individuals in this study (Colaizzi, 1978).

Emergent Theme 1: Nonbinary Identification

Participants described a process of coming to the realization over time that they are gender nonbinary, the importance of their presentation, as well as the relatedness of their sexuality and gender identity. The following thematic clusters and descriptions expand on these experiences.

Thematic cluster 1a: Developmental process. All participants discussed a process in realizing they were gender nonbinary over time. Some participants discussed gender non-typical behaviors as children, while more than half of participants explained that the independence found in going to college allowed them to be able to more fully explore their gender identity. For example, Ardin, discussed realizing from a young age that they did not feel similar to others, and how this impacted their interactions with others:

I've just always thought; I don't feel like male or female. Or just never thought I feel like the other females over in the binary gender and there was push it back and they'd say 'no, no, no you're a girl'.

Jude also described realizing from a young age that they did not conform to expectations around gender:

I was super genderqueer before I realized that I was... it's like I was the same person. And I didn't like tell them or reveal anything to them about it so it was just kind of the same as it's always been.

The majority of participants also explained that they wished they would have learned more about gender at a younger age. Andy emphasized the struggle in finding this knowledge and the impact they believe it would have had:

I think emotionally, like anything, coming into myself was healthy and good and it's a little disappointing that we don't get taught about what I now identify as. Because I feel like it would have made things make a lot more sense earlier in my life, and that was definitely hard to deal with.

All participants also described their sense of masculinity and/or femininity not meeting the expectations of their assigned gender. Some identified that they stumbled upon the term

'nonbinary' online, while others explained that they met others who identified as gender nonconforming. The majority of participants explained that they eventually felt more independent and able to deconstruct or reconstruct how they viewed themselves. Andy shared their experience of having short hair and the effect it had on them:

I started to get misgendered a lot and I realized that it wasn't making me upset. And I think that most girls would have gotten upset and in a really weird, roundabout way, that was how I came into my masculinity.

A majority of the participants described having a sense of inner turmoil due to thinking there was something wrong with them and realizing that pronouns or other gendered terms did not fully represent their concepts of themselves. Draco discussed the impact of finding a name that affirmed them:

Then when they called it out, it just felt right. Yeah, it was really great. I kind of sat on it for another month and I had my friends refer to me as that to try it out more. And it never stopped feeling right. It never stopped making me happier than my birth name ever did. It never felt uncomfortable. And so a month later I was like, yeah, I think this is it.

All participants described painful moments in coming to the realization that their gender identity did not match the expectations of others. Many of the participants also described peace or satisfaction when they accepted their gender identity. In particular, Faye indicated this process of struggle and acceptance:

It's more of just finding out who I was that helped me to understand. Before I realized what my identity was and became comfortable in that, it was a constant struggle, and I was a mess and I couldn't get myself together. I didn't want to come back to school. I

didn't know what to do with life. And then it took finding me and realizing who I was and being okay with that.

Thematic cluster 1b: Presentation. All participants described the connectedness of their outward presentation to their internal sense of gender. In particular, Jude described the differences between their personal experience of gender and public interpretation, “gender is such a thing that's very social and public. But for me I guess specifically, and probably for a lot of nonbinary people, it's very personal.”

All but one participant explained that they feel as though they have to continually preform or wear certain clothing to signal to others that they are gender nonbinary. Many also expressed difficulty in picking clothing and difficulty in expressing their gender through clothing. Some participants articulated the difficulty they felt in there being no societally accepted way to present as gender nonbinary. Andy expressed, “I know that the best way to get people to acknowledge that I'm nonbinary would be to either present masculinely or just be as androgynous as possible every single day which is just very tiring.” Phoenix added to this concept with their description of the way they typically present to others, with gender-full clothing:

It just depends on how gender-full it is. Like if one day I'm not feeling like dressing up in all this, I'll just have a t-shirt, jeans, and a jacket with a flannel underneath this or something like that. And that's pretty neutral and not so gender-full, but if it's like a fun party or special occasion or something like that I'll be like okay so I'm just going to put this together with this and I'll put together some funky thing that goes everywhere gender-wise and it is sort of more gender-full.

There was variation in the balance of masculinity, femininity, and androgyny that each participant wished to convey. Jon described a desire to present in androgynous ways:

I think sometimes my goal in my appearance is to look androgynous in a way where someone can look at me and they don't know like, oh, and I think it does have to do with being nonbinary is that, you know, when it comes to most of the time with men and women, people look at them and they can say, oh! But then a lot of the time, I guess I want to be able to... in a way notify that, hey, I'm not one of those.

Irwin expressed that others question their gender identity because Irwin typically does not present themselves in an androgynous way. Multiple participants expressed comfort with dressing in more masculine clothing, but also described others encouraging them to dress more feminine in order to look 'nicer'. Jude explained the impact of their gender expression:

I already had kind of an androgynous presentation and I started being read as masculine a lot more and I wasn't even trying but it didn't bother me. And then I think because it didn't bother me, then I kind of got into this space where I didn't want to be read as feminine and that started bothering me.

Three participants expressed that they are happy with their body type, while three expressed that they would like a more 'masculine' or androgynous body shape. Pheonix shared their self-concept about their body, "I'm perfectly fine with the body I have, it doesn't really affect who I am as a person. I mean maybe because I'm short, I have a big personality."

Alternatively, Ardin commented on the aspects they were uncomfortable with:

I look in the mirror and see my breasts or like you know with the waist and the hips and I don't like that. So seeing that in the mirror, seeing something you don't like in the mirror. I wish I was more flat chested, more narrow hips something like that. I guess mentally

with gender dysphoria; not liking to lean more towards looking more like one gender than the other.

Multiple participants also mentioned chest binding and three described short hair as an important aspect of their presentation. Draco contributed that they bind and have short hair, “I think my ideal presentation is linked pretty heavily to my gender. I like to be more androgynous and wear a chest binder like I’m wearing now and have short hair.”

Thematic cluster 1c: Intersection of sexuality and gender. Six of the participants explicitly mentioned the importance of the intersection of sexuality and gender in making up their identity. Some described a connection between the two, or a similarity in the way they came to understand these identities. For example, Draco commented on this process:

I am kind of between that and questioning again which at this point in my life, I know is not too big of a deal and it’s not wrong to feel that way because sexuality and orientations and gender can all kind of change throughout life for a person and for a lot of people.

Irwin also described a mixture of sexuality and gender that constructs their identities:

For myself, you know, there's a really connected relationship between my gender and my sexuality. So I identify as a femme lesbian, but then I also identify as nonbinary. There's kind of this fine line where I'm presenting myself as a femme and nonbinary person without being a woman.

Jude related their nonbinary identity to a similar grey area they feel about their sexuality and the embracing of discord between various identities:

When I interact with guys, I think of myself as more masculine in that interaction, in order to not be dysphoric. And then that's queer. And then when I interact with women, I do prefer women, but I think of myself as not having to be as masculine.

Other participants described the fluidity of sexuality and gender and how they continually re-examine both identities. The majority of participants also described how the balance of masculinity and femininity may change in relationships with people of different genders.

Phoenix discussed this intersection of gender and sexuality:

For me, also it does kind of have to do with who I'm attracted to and that sort of thing because if I'm into a girl that's gay, if I'm into a guy that's gay, if I'm into another nonbinary person that's definitely gay. So that's like triple gay kind of thing.

Multiple participants also commented on the added stress or various factors involved in having to disclose their sexuality to others and then coming out a second time with their gender identity.

Emergent Theme 2: Adversity

All participants described varying degrees of adversity in terms of physical constraints, stigma and discrimination, low social support, and the impact of multiple identities on gender. The following thematic clusters describe the participants' experiences of adversity.

Thematic cluster 2a: Constraints/ stigma. Participants described physical constraints, the commonality of others dismissing their gender identity, as well as others not accepting or reacting negatively to their gender identity. Within physical constraints, some participants described discomfort around choosing a bathroom or others reacting negatively to them in bathrooms. Some participants described being hesitant to pursue any type of medical treatment while others identified discomfort with having to choose a gender on official documents. Participants expressed frustration and discomfort with others misgendering them or having to choose a binary gender to conform to. Draco explained the constraints of paperwork:

I think nonbinary genders as a whole need to be more understood and also be accessible to be identified as on paperwork. Like with school paperwork or other paperwork, there's

usually just two options and it's like I have to choose one that makes me uncomfortable because it's not me.

Two participants reported not pursuing career or job opportunities due to constraints around being gender nonbinary. Phoenix described not having roles for them in their chosen field of work. Jude described gendered housing and gendered restrooms preventing them from applying to certain jobs.

Many participants also described common situations in which others dismissed the participant's gender, either through not addressing them or seeming to accept the identity and then continuing to use the wrong name and pronouns. Participants described the process of others using the wrong pronouns and name as invalidating to both their autonomy and individual identity. They also described being confused when others use gendered terms directed at them. For example, Draco shared the experience of being addressed as 'ma'am', "it just feels... like I get confused, sometimes I don't even know who they're referring to for a second. I'm like oh wait they're talking about me but that's wrong."

Participants also expressed that in certain situations, they do not disclose their gender identity because they believe that others will not understand them, consider them abnormal, or it would take too much energy to explain. Ardin identified their concerns around disclosing:

If we're just regular friends that I hang out with and we're not really all that close emotionally, I don't usually tell them and they usually use she/her pronouns and my birth name. I don't want people to be like 'they're weird'. I just get so tired of explaining it to them after a while.

Some participants described their families not understanding their gender identity and not actively discussing it. Many participants described the response of others as typically passing

tolerance. Others feel that if they did disclose their gender to others, they would be rejected or negatively judged. Participants also expressed that others consider their gender identity to be illegitimate, a trend, or asking for attention. For example, Jude explained:

If I were to tell people, just other people, they would probably be confused or kind of like immediately put off or condescending or something like that. Cause I see that kind of attitude and so that's why I don't tell people.

Andy also shared a concern about how others interpret their gender identity, “a lot of people, especially older people, find me hard to read, just think I’m playing it at an angle and don’t really get that it’s just me.”

Some participants also expressed that they have received negative religious messages from their family about belonging to the LGBT community. Ardin mentioned the impact of this unacceptance:

I don't really go to church anymore, which is something that I grew up doing... it was a big part of my life... I think a lot of that had to do with just not knowing if I'd be accepted in the church. So I guess that was kind of a big change but I think it was one of those instances where I kind of left before someone could say something to hurt me.

Thematic cluster 2b: Low social support. Many participants described not being out to people in their life due to the participant’s belief that their identity would not be accepted. Participants described being surprised that family or friends accepted them when they disclosed their sexuality, and feeling like they would not be understood in their gender identity. Andy contributed, “I mean I just told my best friend ever. I mean, I’ve mentioned it to her, but we had our first real conversation and I could tell to a certain extent, she doesn’t get it.” About

disclosing to their family, Ardin added, “I feel like I just barely got by with me telling them my sexual orientation.”

Some participants also explained that they did not trust their family or had previous negative interactions with their family that made them reluctant to share sensitive information. Multiple participants explained that their family had previously made comments about other’s gender presentation, which influences their decision not to disclose their own gender identity.

Jon explained:

One of our neighbors back home, one of their kids is older than me, but is transgender. And hearing what they say about them and stuff like that. They're not saying it to me but it's like, you might as well be, because the only thing you're commenting about is this thing we have in common.

Participants also described the negative effect of their friends misgendering them.

Phoenix shared this impact:

It does bother me when people who know me but they might keep messing up my pronouns and it's like do they not really see me as who I am? But most of the time as long as people are making the effort then I don't mind so much.

Other participants reported others judging them, making them feel unsafe, or making jokes about them. Faye shared a recent negative experience:

I use that single stall restroom and no one ever has an issue with it, because normally in the morning there's like four people there... And as I'm leaving, I have my headphones in, and this couple, she says to the guy, ‘um, do you think that they know that that is a handicap stall and not an ‘f word’ stall?’ And so that was the most recent... like, are you

kidding me? I didn't say anything because I had my headphones in and she, I'm assuming, thought I was listening to music.

Many participants described the balance between correcting others on their pronouns and name with the amount of energy they will expend in the process. Irwin mentioned an example in correcting others:

If someone uses the wrong pronouns for me, I'll be like no, it's they. I feel like... and trying to balance being stern enough to where they know they're not just going to be able to just keep getting away with it, but also not so defensive that they feel like they're being attacked.

Thematic cluster 2c: Education. All participants discussed the process of education necessary in coming out as gender nonbinary. In particular, participants expressed wishing that others had more education about gender identity. For example, Faye mentioned the belief that misunderstanding is often caused by lack of education rather than lack of acceptance:

My poor experiences have only been with individuals who needed to be educated in the area. I'm not even going to say that they were just bigoted because they just... I truly believe that there was just some education that needed to occur for them to fully understand what I was going through.

Participants described situations in which they have to make decisions about correcting pronouns or gendered terms based on many factors in their relationships with others, including openness, closeness of relationship, and how much time and energy they have to devote. For example, Jon explained, “outside of the LGBTQ community, I think most people just kind of like, ‘what now?’ The way I've described it is, it's like having to describe a new thing that doesn't exist in this other person's mind.”

A couple participants explained that in different roles in their lives, they struggle with how others perceive them and whether to correct assumptions, especially in work atmospheres and interviews. Andy commented, “I think it goes back to if people were educated about it at a younger age then it would not have to be something that you have to teach and get into people’s heads.”

Thematic cluster 2d: Intersectionality. Participants described various identities that influence their experience of being gender nonbinary. Phoenix mentioned struggling with executive functioning and attention concerns, which has affected how they behave in the world and influenced how they conceptualize their identity. Phoenix contributed, “I guess with my ADHD and gender, they’re both pretty integral to who I am as a person. I’m not sure if I can distinguish them from each other.”

Some participants described dealing with social anxiety and depression, which they explained makes it more difficult to speak up and express themselves to others. They also described the difficulty in advocating for themselves with the added weight of depression and anxiety. Irwin identified this concern:

With my social anxiety and depression, I feel like that makes it more difficult sometimes to express myself, especially to other people and kind of making it known when something upsets me, or when something doesn't sit right with me when it comes to like how people are referring to me.

Draco explained that having been diagnosed with autism, they feel that others do not understand this diagnosis and the impact on how they interact with others around their gender identity. In addition, multiple participants described living with chronic illnesses that cause them to present to others differently or deal with doctors very often, making their gender identity

disclosure different and more complex in each situation. Jude described the intersection of being a gender nonbinary person, a southerner, and a person who will one day work in social service. Jude describes the sense that everything they do is a statement within society, “I believe that personal is political, so literally I won't be working [directly] with queer populations but when you're visibly queer then, especially within [this field], then you can't help that from being a statement.”

Ardin also discussed the difficulties in being a person of color who also identifies as gender nonbinary, especially with many in their community being less accepting of LGBT people:

I feel like being a person of color makes it like a whole nother level because the families with a lot of people of color, mixed people, anyone who doesn't have white privilege, if you're anything but white, you're going to have some difficulties somewhere.

Emergent Theme 3: External/ Social Support

All participants described the importance and positive effects of having supportive people in their lives as well as larger communities of support. The following thematic clusters illustrate the importance of social support for these participants.

Thematic cluster 3a: Supportive others. Participants shared that they cope with negative experiences by spending quality time with supportive others who help them feel accepted. Participants described actively choosing to rely on supportive, affirming relationships. For example, Draco related the concepts of being proud and others supporting them, “I am not scared of coming out to people anymore and I'm more proud of it. Especially now that people have been more supporting.” Participants expressed an appreciation for others believing and understanding their gender identity. In particular, Irwin expressed the belief that understanding

and respect around gender identity is important in supportive relationships; “to have someone, especially close family and friends understand how I feel and respecting that is crucial to my relationships.”

Many participants also spoke about the importance of others using their preferred name and pronouns. Participants explained that they felt validated and understood when others use the correct pronouns and name, as well as when their friends correct others on these aspects. Draco expressed the effect of others using their correct pronouns, “it gives me a little bit of glow in my chest whenever anybody uses my pronouns. It's so nice. I get happy, it just feels more right, like yea! That's me! It's a 'that's me' moment.” Ardin expanded on this by speaking of times when others correct pronouns, “a lot of times if somebody uses the wrong pronouns for someone, somebody will say ‘oh, these are their correct pronouns’ or they’ll like whisper it to you on the side. I really like that.”

Participants also described feeling authentic and safe around those who are willing to understand their gender identity. They identified it as especially affirming when supportive friends or family have accepted participants identity and have continued to see the participant as who they are. Jon shared experiencing this affirmation with a friend:

I did recently come out to a friend who lives far away and we grew up together and he was like, ‘That’s chill... You’ve just always been Jon to me, and Jon is Jon. That's it, I love Jon, so whatever makes you happy.’

Jude also described an experience they had with a mentor who did a simple act to show their support:

I was very insecure about my tie tying skills because I should've been insecure because it wasn't good. So I had a very poorly tied tie, and [my mentor] was just... like it was no

big deal... he gave me literally a 15 minute tutorial on how to do it right and I was just like... it kind of struck me how that's such a dad thing to do and my dad never would have done that and also I'm not his son either, so it's a father son thing to do, but like a father queer person thing to do.

Thematic cluster 3b: Community. Participants described the support of a community as an especially important aspect in their lives. Many participants identified being in spaces with other LGBT people as a helpful coping strategy. They also described feeling safe and understood in these spaces. Participants reported that their communities are constructed of accepting others and are safe, supportive environments. In response to a question about coping strategies, Jon responded:

Just being with other people in the community, sometimes I'll say 'I need to go hang out with some queer people right now'. It's been awhile... but I still come over to the LGBT office every now and then. Because it's just like I just need to talk to people who get it and I don't have to explain myself.

Emergent Theme 4: Internal Resiliency

Each participant described aspects of freedom in identifying as gender nonbinary. In addition, participants expressed a sense of confidence and self-assuredness, especially as it relates to their gender identity. The following thematic clusters expand on these experiences of internal resiliency.

Thematic cluster 4a: Freedom. All participants described the freedom of expression and self-exploration they have found at some point in their gender identity development. Participants identified feeling outside of or free from the constraints of the gender binary. Multiple participants described being free from the demands of gender and social norms. They described

being able to express themselves in a truly authentic way by defying gendered expectations. Jude describes the constraints of gender and strength in being outside the binary:

I find gender to be very oppressive for pretty much everyone. So not necessarily being subject to that and having a certain level of freedom. I mean obviously nonbinary people are also forced into gender but internally being able to... I feel like there's a sort of mental freedom.

Many participants described a process of realizing what aspects of gender matched their sense of self and which ones did not match their identity. Faye mentioned believing that there are a many different ways to perform gender, "to me, there shouldn't have to be levels of the type of woman, the type of man, the type of person." Participants felt able to critically question aspects of gender and consider how they connect with their gender identity. For example, Andy shared:

I think that being gender nonbinary has really allowed me to assess what gender means to me, and what it means to society, and then even more specially, what it means to the community I am in and the people I'm around. I think that being nonbinary has allowed me a bigger space to figure out who I am.

Many participants also described feeling peace with the unknowns around the spectrum of gender. Phoenix explained, "I don't have to live by any gender standards, so I think that's freeing. Just because I don't have to worry about being too masculine or feminine. Just because I do what I want with that." In addition, many participants expressed that they felt as though gender is viewed in extremes or is a set of strict rules that others have to adhere to. Irwin described this complexity with their personal meaning of gender nonbinary:

To me, it means essentially kind of bare bones, like identifying outside of the gender binary. But not necessarily like excluding yourself from it, if that makes sense. You can

be in between the lines in certain ways. Like instead of it being like a line, it's almost a...
I guess you could say, a sphere.

Ardin also explained this complexity:

Especially because in western culture, masculine and feminine are such different extremes and the concepts behind them are very extreme that like you don't see people breaking those norms. So being gender non binary, I can break those norms and I'm comfortable with it. And even though other people may be uncomfortable with it, I don't really care because it's for me.

Participants' process of gender identity development involved being able to explore identity, independence from gender, and their connection to self-determination. Faye described one of the strengths she has found through this exploration, "for me personally, it's been finding who I am that fits in both of those roles. And so it's been like an identity adventure for me." Jude also explained that they believe gender involves power dynamics, and nonbinary identities challenge those, "gender... has to do with power and hierarchies as well as challenging that in that way."

Thematic cluster 4b: Confidence. At a certain level of development, participants reported assuredness in their personal identity. Faye illustrated this assuredness through a visually loaded statement:

I've said often that I can't wait until I'm the old lady walking around Walmart who doesn't care what anybody thinks. And as I get older, I'm starting to become that person. And so I think it's more of like a... I developed that thick skin and what you say really isn't a problem to me anymore.

Participants also expressed the continuity of gender nonbinary feelings, which have felt inseparable from the peace they have found in their identity. Jon explained, “it’s important for me for others to know it because it’s just like a little part of me and you know, that’s kind of like your name, you know? I want to be called what I am.”

Participants discussed finding self-acceptance with their gender nonbinary identity, which contributed to a positive self-concept. Many participants described becoming more secure in their identity despite identity threats. Participants continued to strive for authenticity and courage in dealing with difficult circumstances. Draco expressed a belief that they have a place of belonging and are now more open in their identity:

This is the place in the world for me and I have fought hard to get here and it is my place and I’m not letting anybody else take it away from me and I’m going to be loud and proud in this place.

Many participants also identified the strengths that accompany being nonbinary as empathy, understanding, openness to others, and a desire to advocate for others. For example, Jon commented:

I think with being nonbinary naturally, at least here [in the southeast] comes with strength because you kind of have to...because you’re going to have to defend yourself or, you know, have that courage and sometimes I have it, sometimes I don’t, depends on the day and the situation.

Faye added the strengths in understanding that come with being gender nonconforming:

Understanding and just being a good listener and acceptance. Because regardless of what walk of life that person is coming to you with... because you’re nonconforming and because you have accepted your lifestyle being spread throughout this spectrum, you find

ways to identify with these individuals that can relate you to them and help them through whatever it is... you have great empathy for people.

Phoenix emphasized this confidence in their identity through a strong metaphor:

They're not really used to... like they just have men and women boxes and not really nonbinary, so they might take it as an ideological thing... like gender is a social construct so that means that nobody really has a gender. But it is a social construct, but it exists in a tangible way that affects people in everyday life. Like money is a social construct, but people die because they don't have enough of it.

Emergent Theme 5: Therapy Experiences

All participants reported having attended therapy at some point in their lives, with varying degrees of length and involvement. Participants reported both negative conceptions or experiences as well as positive aspects such as improvements or affirming experiences. The following thematic clusters and descriptions expand on participants' experiences with therapy.

Thematic cluster 5a: Negative aspects. While three participants reported having negative experiences with mental health services, many participants also reported having difficulty accessing therapy services. For example, Faye explained, "I've done therapy in the past. But I've even had medical professionals and mental health professionals say things like our ideals are different so I don't know that we can help each other." Multiple participants reported having a difficult time finding LGBT friendly mental health providers. Participants were either limited by choice in provider, therapists not accepting new clients, wait time, or lack of sufficient resources.

Ardin described the intersection between stigma in their community and mental health services:

I am a person of color and it's such a stigma in our community, like it's really hard and we tend not to get help. And then you know, around my family it was always like I don't want to say it was frowned upon, but it was like a taboo to have some type of mental illness.

Overall, participants felt that therapists who are not familiar with LGBT issues might get information incorrect or generally not understand their experiences. Andy suggested, "you could definitely tell when someone thinks about it straight out of textbooks. And also people who more like support LGBT in theory rather than in practice, it's pretty obvious." Participants expressed a desire for therapists to have more than common knowledge about LGBT issues. For example, Draco commented about the type of therapist they would be most comfortable with:

Probably just somebody who knew more about the LGBT community than like a typical person that you see walking down the street. Somebody who was knowledgeable in those topics and knew about gender nonbinary people, like gender queer and gender fluid. Somebody who knew about pansexual, asexual.

Some participants expressed concern that they have had to spend a significant amount of time educating therapists on nonbinary identities. For example, Phoenix expressed, "with the therapist that I saw later she was pretty in the dark with it, so I felt like a lot of the sessions was just me explaining what my gender was." Additionally, Andy commented that therapists should be aware of when problems are related to gender and sexuality and when they are not:

There also needs to be a certain point where you stop talking about it just as LGBT or you stop tying it to sexuality and relationships and think about it more as the individual. I think the individuality of it gets lost a lot.

Thematic cluster 5b: Positive aspects. Many participants reported that they would pursue therapy for the simple purpose of desiring someone to process their concerns with. Irwin indicated this aspect in their description of therapy, “I was in an environment where you're kind of playing around with speaking up for yourself or even speaking up for other people.”

Participants also appreciated feeling as though their therapist shared common experiences with them or could truly understand them. Participants explained that they most benefited from therapy when they were able to speak openly and express themselves in an accepting atmosphere. Andy explained that tone was an important component in a therapist authentically conveying understanding. Irwin emphasized the importance of therapist understanding and experience:

For me, it was definitely seeing on the therapist’s website that they have experience working with LGBT clients... Seeing that the therapist had... it was some LGBT related thing that she had done that was prominent enough for her to put it on her webpage. Seeing that sort of stuff really made me feel comfortable talking about anything.

Jon also expressed that they would appreciate therapists prompting them for pronouns and their preferred name; “The fact that right off the beginning of a form, I can tell you my gender and pronouns makes me comfortable because if not, then I've got to be the one to confront you about it. Which is awkward.”

Exhaustive Description

Individuals within this study who identify as gender nonbinary have complex identities that are realized in a variety of ways and are informed by their gender expression as well as sexuality. Gender nonbinary individuals experience considerable adversity in the form of stigma, discrimination, low social support, and having to educating others, while being impacted by

various intersecting identities. Individuals who identify as gender nonbinary rely on social supports in the form of individual others and community. Gender nonbinary individuals described an aspect of freedom in identifying as gender nonbinary as well as a sense of confidence and self-assuredness. All participants had experienced some form of therapy services but varied in their difficulty in access to services, negative experiences, and positive, affirming experiences.

Discussion

This study aimed to further explore the lived experiences of gender nonbinary individuals through stress and resilience factors related to gender identity, mental health resources, and concepts around social support. Prior to this study, very little research had been done with gender nonbinary groups specifically (Matsuno & Budge, 2017). The lack of research is especially startling considering that some researchers have found that individuals who identify as gender nonbinary may be at risk for higher levels of psychological distress and suicide compared to transgender individuals (James et al., 2016). This study explored some of these stress and resilience factors.

Presentation and Development

Gender presentation was found to be an emergent theme in this study, which is similar to what has also been considered gender expression in past research. In particular, APA (2015) defined gender expression as how individuals present themselves to others through behavior and appearance. Consistent with previous research, many participants mentioned feeling social accountability to their gender identity and having to go through a process of ‘doing gender’ (West & Zimmerman, 1987). Many participants mentioned the far-reaching effect of their gender expression or presentation. Consistent with how Robbins and McGowan (2016) discussed gender as

a social interactional process, participants abandoned or altered their gender presentation based on various intersectional factors. The participants seemed very cognizant of the fact that their gender expression affects their daily social interactions (West & Zimmerman, 1987). Coinciding with Darwin's (2017) concept of 'redoing gender', many participants expressed a desire to represent their gender nonbinary identity through visual representations of the ambiguity of gender. As Darwin (2017) mentioned in their study, participants in this study expressed their gender through mixing binary gender expression cues as well as striving for androgynous presentations.

The participants in this study also mentioned many aspects of gender identity development that had been previously been referred to in past research. In particular, some participants mentioned having experience feelings of being different from their assigned gender at a very young age, which is consistent with what Factor and Rothblum (2008) found with binary trans individuals experiencing gender incongruent feelings around 6 to 9 years old. In addition, the same authors found that their participants typically described themselves as gender nonconforming around the age of 20 and came out to others as transgender a couple years later. The participants in this study seemed to share a similar path, with many participants identifying as gender nonbinary around the time they began college (likely age 18-20). The participants were also either in the process of disclosing their gender identity to others or had disclosed their gender identity to others recently.

The way in which participants in this study relate to their gender identity also fits well within the framework of how Egan and Perry (2001) described the components of individual gender identity. More specifically, Egan and Perry discussed feeling of compatibility with assigned gender and a sense of sameness to others in their gender category. Within this study,

participants mentioned feelings of discomfort and incompatibility with the expectations of their assigned gender as well as a sense of being different from others within this category.

Participants also described the positive impacts of being able to not conform to gender rules and the negative impact of having others refer to them in binary gender terms and with incorrect pronouns.

This study has contributed to current research on the meaning some individuals make out of their gender nonbinary identity, which aids in understanding these identities as a whole. In the area of gender nonbinary identity presentation, past research has not sufficiently explored the interactional process of participants' desires to express their gender. In particular, the participants in this study continually mentioned visual cues and the importance of aspects such as chest binding, hair style, and clothing. This research begins to delve deeper into these aspects to further understand how these stylistic choices are important in gender nonbinary expression. Within gender identity development, this research expands the meaning that others make of their gender nonbinary or nonconforming identity, while also exploring concepts of development with a nonbinary population rather than TGNC populations.

Adversity and Stress Factors

Many aspects of adversity participants mentioned in this study have also been found in past research about TGNC populations. Many of the adverse events that individuals in this study discussed can be classified within Meyer's (1995) framework of distal and proximal stressors. Participants described distal stressors as experiences with discrimination in others making jokes or negative comments about their gender identity or in situations where they are not able to pursue certain jobs or comfortably use public bathrooms due to their gender nonbinary identity. Participants also mentioned proximal stressors in their reasonings for not disclosing their gender

identity. In addition, they experienced internal stress from concealing their identity, especially when this caused others to refer to them with the wrong name or pronouns. Participants described this process as exhausting and having to choose what issues they devote their energy to.

In addition, previous research has mentioned unique stressors for TGNC individuals, particularly in their access to medical care, documents, and access to bathrooms. Some participants in this study mentioned the stressors of accessing medical care, having to choose either male or female on forms, as well as having to choose gendered bathrooms. Many participants in this study also discussed their struggles with having to educate others about gender and gender nonconforming identities. In confronting their accountability to gender, Darwin (2017) wrote about gender nonconforming participants having to explain the social construction of gender. In addition, Nicolazzo (2016) discussed gender nonbinary participants who did not disclose their identity due to feeling as though others would not understand. These concepts were mentioned many times by participants in this study. Participants described education and having to explain themselves as being a barrier to connection and understanding with others.

In concurrence with previous research, the participants in this study spoke about the intersection of their identities and how the combination of these identities might alter their experience of gender. Robbins and McGowan (2016) mentioned this in their discussion of gender identity development as a social interactional process. These authors mentioned that gender may be constructed differently based on race, class, religion, sexual identity, and other identity categories (Robbins & McGowan, 2016). Some participants in this study mentioned how being a person of color impacts their identity disclosure as well as sense of social support. Others

mentioned religion or sexual identity as factors that influence how they interact with others. However, the current study further explores the intersection of sexual identity and gender and sheds light on that relationship for participants in this study.

Resiliency

Many aspects of resiliency in this study are harmonious with previous research concerning resiliency in TGNC populations. Previous researchers have explored the feelings of belongingness and peace individuals experience when they adjust to their gender identity and are able to explore and feel secure in this identity (Egan & Perry, 2001). Participants in this study spoke about feelings of confidence and the positive self-concept they have achieved through peace and acceptance of their gender nonbinary identity. As in previous research, participants in this study described feelings of pride and freedom in their identity, being able to identify themselves as gender nonbinary despite when others discriminating or not being educated, and connecting with activism (Singh & McKleroy, 2010). Participants also described fighting certain battles, while letting other struggles go and how they continually make choices to surround themselves with supportive others and practice resiliency, which is consistent with Nicolazzo's (2016) concept of 'doing resilience'.

Another theme found in this study that has been mentioned in past research is the importance of social support. Meyer (2003) wrote about the impact of stressors being mitigated by connection to supportive communities and receiving support from others, which aids in constructing a positive view of self. A theme found in this study was participants coping through social support and the positive impact of supportive others. This theme was also important with many participants mentioning spending time with other LGBT people, which Hendricks and Testa (2012) had written about in terms of resilience factors in seeing others in their community

who are similar to them. Singh, Hays, and Watson (2011) also found resiliency themes having to do with community connection and participants development of identity. Social support in the form of supportive others and community was an important factor for participants in the current study.

An important theme found in the current study is also the validity and necessity of others referring to participants with their preferred name and pronouns. Participants continually mentioned the affirmation and positive sense of self resulting from others using their correct name and pronouns. Participants spoke of the importance of words and ways of referring to others, and the current study highlights the positive impact of referring to the participants in ways that are consistent with their gender nonbinary identity. In addition, the theme of freedom in this study furthers research on the social statement inherent in gender nonbinary identities as well as the positive feelings resulting from not being constrained by gender.

Limitations

All participants in this study were assigned female at birth, were relatively young, and college educated. Along with the small sample size, the findings within this study cannot be reliably applied to all people who identify as gender nonbinary or gender nonconforming. In addition, the primary researcher had previously decided to use the terms gender nonconforming and gender nonbinary interchangeably, which may be a flaw in the research design. These separate identities may have varying levels of accountability to the gender binary or they may simply refer to individuals who use binary language to describe themselves while not feeling accountable to the gender binary. After speaking with a participant who identified as gender nonconforming, the primary researcher reconsidered the exclusion criteria of those who identify

with a binary gender. Although the path to understanding gender nonbinary identities is still not altogether clear, this continues to be a limitation in understanding within this research.

Implications

This study highlights themes around therapy experiences and the desires of nonbinary participants within therapy. With a call to increase awareness and understanding around TGNC mental health (Singh, 2016), these themes become important in future clinical practice and understanding. In particular, participants in this study mentioned being more comfortable with a therapist who has more than common knowledge about LGBT issues, especially as it concerns the participant having to educate the therapist on these issues. In addition, participants mentioned therapists showing their support of LGBT identities through their online presence or aspects in their office, which contributed to participant's feeling understood and comfortable. The knowledge gathered from these participants, as a whole, may aid in therapist's understanding of the experiences of some gender nonbinary individuals. In addition, the participants statements about their positive and negative experiences with therapy are incredibly important to take into consideration, especially due to discrimination and mental health risks within this population (Matsuno & Budge, 2017).

Public Implications

Education. As many of the participants reported in this study, access to terminology that fit their gender identity and other's knowledge about gender are important factors in the stress and support they experience. Education around gender neutral language and LGBT identities and terminology is especially important whenever feasible. When taking into consideration gendered language, Sarrasin, Gabriel, and Gyax (2012) found that sexist attitudes and beliefs were related to negative perceptions of gender-neutral language. This finding may be related to gendered

language and ideas reinforcing stereotypes about binary language. In fact, Sendén, Bäck, and Lindqvist (2015) studied the use of a gender-neutral pronoun in Sweden over four years and found that while the majority of the population had negative attitudes towards the pronoun in the beginning, over time attitudes shifted to be more positive and the use of the language increased. In particular, other authors have advocated for the use of the plural pronoun ‘they’ as commonplace and have argued that this typically simplifies sentences (Kabba, 2011).

Education around the use of ‘they’ as a singular pronoun as well as around the social construction of gender is very important. Leaders in many fields may begin this cultural shift by replacing ‘he or she’ with ‘they’ in their writings and presentations. The use of they as a singular pronoun in common language can best be explained through example. As a specific example, if someone is following this author, it is dark, and the individual’s gender expression is not readily apparent, when reporting back to a friend about the incidence, this author would say ‘they were following me,’ in reference to one stranger. Increasing the use of gender neutral pronouns and language may help to decenter the importance and reinforcing of binary gender assumptions in everyday interactions. As can be inferred from the current study, one of the simplest, yet most meaningful, implications from this study is the use of correct pronouns and names. Use of gender neutral terms in many arenas may help gender nonbinary individual’s feel more understood and affirmed.

Some researchers have also suggested that building a relationship with how gender has influenced the readers own life and experiences may be helpful (Singh, 2016). Singh (2016) emphasized the importance of a deeper understanding of one’s own experiences related to gender and ways in which societal expectations and structures around gender have affected them. This may be an important component of educating individuals about gender by asking questions such

as “what are moments in your life when you have conformed in gender typical ways?” or “what are moments in your life where you have felt discomfort with the roles and actions assigned to you due to your gender?” Questions asking individuals to explore their own relationship to the social construction of gender may be incredibly helpful. It is important that these realizations are also then related to education around social constructionism and gender minority identities.

Clinical Implications

Within the realm of therapy, there have been recent shifts in thought about how best to understand and provide mental health services to LGBT individuals. Grzanka and Miles (2016) examined these changes in LGBT affirmative therapy through feminist, queer, and intersectional lenses. The participants in the current study spoke about desiring supportive others to have more than a passive tolerance for their identities. In accordance with these ideas, Grzanka and Miles (2016) explained that the way in which mental health fields have conceptualized LGBT individuals has moved from pathologization to incorporation, and more recently to affirmation. This focus has encouraged professionals to push for ‘multiculturalism’ in structure and practice, which some have noted only advocates for inclusion of diverse individuals while still maintaining the same social structures that may harm minority individuals (Grzanka & Miles, 2016). The inclusion of individuals in minority groups in organizations and research has sometimes framed them as outliers or special examples, rather than transforming the way power and resources are unequal for those individuals (Grzanka & Miles, 2016).

Multicultural education and practice in mental health fields has typically focused on teaching and gaining knowledge, skills, and awareness (Grzanka & Miles, 2016). In terms of knowledge, mental health providers may be educated about specific experiences LGBT individuals go through or ways in which oppression is present in LGBT individual’s lives

(Grzanka & Miles, 2016). Skills are typically meant to instruct providers on how to work in appropriate and empowering ways, and awareness typically denotes the provider being cognizant of the ways in which their privilege and bias might affect others (Grzanka & Miles, 2016). Grzanka and Miles (2016) have suggested that another necessary factor is therapeutic sensitivity wherein therapists have the capability to respond to client's needs in appropriate, yet dynamic ways. This therapeutic sensitivity also comes about with knowledge of intersectionality, also mentioned within this study, which is more complex than simply considering separate identity categories that clients may belong to (Grzanka & Miles, 2016). LGBT affirmative therapy can truly be affirmative when providers understand the societal context of individuals lives and how their lived experience, connectedness of identities, and privilege and oppression interact (Grzanka & Miles, 2016).

The structural context and intersectionality of the experiences of LGBT individuals is important in providing LGBT affirmative therapy, but it is not enough. More specifically with trans and gender nonconforming individuals, Singh (2016) has suggested that more than affirmation, service providers must consider issues surrounding gender more deeply. Singh (2016) suggested that there is a disconnection when mental health providers are educated about best practices with TGNC individuals. In the process of providers' development as an ally, they typically move from areas of self-interest in knowing one person who is TGNC, to areas of altruism in beliefs about discrimination and oppression, and finally to an area of social justice in which they more fully understand the structures that contribute to all gender issues and how they impact each person, including the ally themselves (Singh, 2016).

In moving beyond affirmative practice with TGNC individuals, Singh (2016) explained that providers must critically examine the lines that separate genderqueer and cisgender people

into binary categories of men and women, but also the essentialist separation of genderqueer and cisgender people themselves. Mental healthcare providers can examine gender in their own lives by personally reflecting on how expectations around gender have influenced their wellbeing, how stereotypes have influenced their relationship to their gender, and how instances of powerlessness have shown up for them in relation to their gender (Singh, 2016). Singh (2016) challenged providers to work against the oppression of TGNC individuals by outrightly addressing the history and tradition of oppression in research and practice, so that TGNC individuals may be more able to create a new life narrative. Explicitly naming histories of oppression, especially within mental health professions also creates room for trust between TGNC clients and their providers (Singh, 2016).

Future Directions

There are many directions in which research around gender minority identities may lead. In particular, it may be helpful for future research to explore the ways in which gender nonconforming adolescents relate to gender. More information about how gender nonbinary individuals come to a realization of their gender identity as well as a relationship to certain terminology, may be helpful. In addition, it would be helpful to further explore the connection between sexuality and gender identity, especially for gender minority individuals. This study only mentions the relationship participants, but further research about how changes around internal sense of gender, gender expression, and sexual or romantic attraction may be important. It also seems necessary to further explore the influence of gender in all people's lives, as well as effective ways to educate others about the influence of gendered expectations as well as gendered stereotypes.

Conclusion

In summary, gender nonbinary individuals' experiences of the phenomena of being gender nonbinary, through the lens of adversity, social support, and resiliency is varied and complex. Overall, it appears that these individual's experiences correspond with many concepts of social support and resiliency discussed in previous research. However, the experiences of the participants within this study and the information gathered from them is unique and important for mental health providers to consider. Participants desired further understanding as well as acceptance, rather than simply tolerance, from others. The presence of the voices of these participants in research around LGBT identities is especially important, especially concerning providing education to others as well as mental health services to gender minority populations.

Table 1

Participant Demographics

	Andy	Phoenix	Ardin	Draco	Jon	Faye	Jude	Irwin
Preferred Term for Gender	Gender nonbinary	Gender nonbinary	Gender nonbinary	Gender nonbinary	Gender nonbinary	Gender nonconforming woman	Nonbinary transmasculine	Gender nonbinary
Age	20	20	18	21	24	31	20	20
Race/Ethnicity	White	White	Multiracial/Biracial	White	White	White/Hispanic/Latinx	Black or African American	White
Relationship Status	Committed Relationship	Single	Single	Committed Relationship	Committed Relationship	Married	Single	Committed Relationship
Employment	Full-Time Student & Employed Part-Time	Full-Time Student & Employed Part-Time	Full-Time Student	Full-Time Student	Employed Part-Time (Bachelor's degree)	Full-Time Student & Employed Part-Time	Full-Time Student	Full-Time Student

Table 2

Interview Questions

Category	Question
Grand Tour Question	What is your life like as a gender nonbinary person?
Probing Questions	What does it mean to you to be gender nonbinary? How does your presentation (hair, clothes, etc) intersect with your gender identity? What was involved in coming to the realization that you are gender nonbinary? What challenges do you face as a GNB person? How have you coped with or recovered from these challenges? What strengths accompany being gender nonbinary? Have you previously sought mental health services? If so, what either made you feel comfortable or uncomfortable in that environment? If not, what do you imagine would make you feel more comfortable when finding a therapist, or when seeing a therapist? Do you identify yourself as GNB to your friends, family, or community? What other identities and characteristics might intersect with your gender identity?

Table 3

Emergent Themes & Thematic Clusters

Emergent Themes	Thematic Clusters
Nonbinary Identification	Developmental process Presentation Intersection of sexuality and gender
Adversity	Constraints/ Stigma Low social support Education Intersectionality
External/ Social Support	Supportive others Community
Internal Resiliency	Freedom Confidence
Therapy Experiences	Negative aspects Positive aspects

Table 4

Selected Examples of Emergent Theme Formation

Significant Statements	Formulated Meanings	Thematic Clusters	Emergent Themes
<p>“I do feel like that is a big part of my life because every day I have to be like ‘well if I put on this blouse, everyone’s gonna be like ‘oh, ya feminine now?’ But if I bind every single day of my life, people are going to misgender me or think that I’m transgender and there’s just no specific way that a nonbinary person should present themselves even though people do think that androgynous would be the answer, it’s just not.” (Andy)</p>	<p>Participant balances presenting masculine, feminine, or androgynous aspects to signal gender identity to others.</p>	<p>Presentation</p>	<p>Nonbinary Identification</p>
<p>“I feel like I just barely got by with me telling them my sexual orientation. And the response, I don’t want to say it was negative but it wasn’t good either, it was kind of neutral. So I feel like there is no way I could ever come out with my gender to my family.” (Ardin)</p>	<p>Participant feels dismissed by family and does not feel understood in their identity.</p>	<p>Low Social Support</p>	<p>Adversity</p>
<p>76 “My grandma has been like surprisingly accepting. Which kind of threw me off. Around Christmas we would always get... these little envelopes with a Christmas card and a gift certificate, and she started putting my preferred name on like all of my stuff now. And I don't think we've really had the conversation.” (Irwin)</p>	<p>Participant feels validated and affirmed when people use the correct pronouns and name.</p>	<p>Supportive Others</p>	<p>External/Social Support</p>
<p>“[Gender nonbinary] means pretty much just like being me. Like, I don’t fit into boxes that other people put me in and it’s weird to me that other people can even see me as anything other than nonbinary.” (Draco)</p>	<p>Participants self-concept does not include strict rules around gender.</p>	<p>Freedom</p>	<p>Internal Resiliency</p>
<p>“This psychologist is actually somebody who is more trained to work with LGBT plus people and I really like that because like for the first time she was like what are your pronouns, do you have any preferred names and that made me like really comfortable and like really happy and I really liked that.” (Ardin)</p>	<p>Participant values when therapist prompts for pronouns and preferred name.</p>	<p>Positive</p>	<p>Therapy Experiences</p>

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APPENDIX A: IRB APPROVAL

6/19/2019

<https://epirate.ecu.edu/App/sd/Doc/0/4092J472KCL4R6FJ0E4FH2DPD6/fromString.html>



EAST CAROLINA UNIVERSITY
University & Medical Center Institutional Review Board
4N-64 Brody Medical Sciences Building- Mail Stop 682
600 Moye Boulevard · Greenville, NC 27834
Office 252-744-2914 · Fax 252-744-2284
www.ecu.edu/ORIC/irb

Notification of Initial Approval: Expedited

From: Social/Behavioral IRB
To: [Kristen Puckett](#)
CC: [Damon Rapolevas](#)
Date: 12/21/2018
Re: [UMCIRB 18-002523](#)
Stress and Resilience in Gender Nonbinary Individuals

I am pleased to inform you that your Expedited Application was approved. Approval of the study and any consent form(s) is for the period of 12/20/2018 to 12/19/2019. The research study is eligible for review under expedited category #6&7. The Chairperson (or designee) deemed this study no more than minimal risk.

Changes to this approved research may not be initiated without UMCIRB review except when necessary to eliminate an apparent immediate hazard to the participant. All unanticipated problems involving risks to participants and others must be promptly reported to the UMCIRB. The investigator must submit a continuing review/closure application to the UMCIRB prior to the date of study expiration. The Investigator must adhere to all reporting requirements for this study.

Approved consent documents with the IRB approval date stamped on the document should be used to consent participants (consent documents with the IRB approval date stamp are found under the Documents tab in the study workspace).

The approval includes the following items:

Name	Description
Demographic Questionnaire KP	Surveys and Questionnaires
Email Script	Recruitment Documents/Scripts
GNB Thesis Proposal KP	Study Protocol or Grant Application
Informed-Consent-Documents	Consent Forms
Thesis Flyer	Recruitment Documents/Scripts
Thesis Interview Guide	Interview/Focus Group Scripts/Questions

The Chairperson (or designee) does not have a potential for conflict of interest on this study.

IRB00000705 East Carolina U IRB #1 (Biomedical) 30R00009418
IRB00000781 East Carolina U IRB #2 (Behavioral/SS) 30R00000418

APPENDIX B: AMENDMENT APPROVAL

6/19/2019

<https://epirate.ecu.edu/App/sd/Doc/0/GM52ESGPCST4J6NGS7OPCJT220/fromString.html>



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Notification of Amendment Approval

From: Social/Behavioral IRB
To: [Kristen Puckett](#)
CC: [Damon Rapolava](#)
Date: 4/11/2019
Re: [Ama2_UMCIRB_18-002523](#)
[UMCIRB_18-002523](#)
Stress and Resilience in Gender Nonbinary Individuals

Your Amendment has been reviewed and approved using expedited review for the period of 4/10/2019 to 12/19/2019. It was the determination of the UMCIRB Chairperson (or designee) that this revision does not impact the overall risk/benefit ratio of the study and is appropriate for the population and procedures proposed.

Please note that any further changes to this approved research may not be initiated without UMCIRB review except when necessary to eliminate an apparent immediate hazard to the participant. All unanticipated problems involving risks to participants and others must be promptly reported to the UMCIRB. A continuing or final review must be submitted to the UMCIRB prior to the date of study expiration. The investigator must adhere to all reporting requirements for this study.

Approved consent documents with the IRB approval date stamped on the document should be used to consent participants (consent documents with the IRB approval date stamp are found under the Documents tab in the study workspace).

The approval includes the following items:

Document	Description
Demographic Questionnaire KP(0.02)	Surveys and Questionnaires
Email Script(0.02)	Recruitment Documents/Scripts
Thesis Interview Guide(0.02)	Interview/Focus Group Scripts/Questions
Other Study Staff Added: Lee & Mckoy	

The Chairperson (or designee) does not have a potential for conflict of interest on this study.

IRB00000705 East Carolina U IRB #1 (Biomedical) IORG0000418
IRB00000781 East Carolina U IRB #2 (Behavior/SES) IORG0000418

APPENDIX C: AMENDMENT 2 APPROVAL

6/19/2019

<https://epirate.ecu.edu/App/sd/Doc/D/N23GULO7S104J2NEJGCHM687ED/fromString.html>



EAST CAROLINA UNIVERSITY
University & Medical Center Institutional Review Board
4N-64 Brody Medical Sciences Building - Mail Stop 682
600 Moye Boulevard - Greenville, NC 27834
Office 252-744-2914 - Fax 252-744-2284
www.ecu.edu/ORIC/irb

Notification of Amendment Approval

From: Social/Behavioral IRB
To: [Kristen Puckett](#)
CC: [Damon Rucoleva](#)
Date: 5/17/2019
Re: [Ama3 UMCIRB 18-002523](#)
[UMCIRB 18-002523](#)
Stress and Resilience in Gender Nonbinary Individuals

Your Amendment has been reviewed and approved using expedited review for the period of 5/17/2019 to 12/19/2019. It was the determination of the UMCIRB Chairperson (or designee) that this revision does not impact the overall risk/benefit ratio of the study and is appropriate for the population and procedures proposed.

Please note that any further changes to this approved research may not be initiated without UMCIRB review except when necessary to eliminate an apparent immediate hazard to the participant. All unanticipated problems involving risks to participants and others must be promptly reported to the UMCIRB. A continuing or final review must be submitted to the UMCIRB prior to the date of study expiration. The investigator must adhere to all reporting requirements for this study.

Approved consent documents with the IRB approval date stamped on the document should be used to consent participants (consent documents with the IRB approval date stamp are found under the Documents tab in the study workspace).

The approval includes the following items:

Document	Description
Other Study Staff Added: Wolk.	

The Chairperson (or designee) does not have a potential for conflict of interest on this study.

IRB00000705 East Carolina U IRB #1 (Biomedical) IORG0000418
IRB00000781 East Carolina U IRB #2 (Behavioral/SES) IORG0000418

APPENDIX D: INTERVIEW GUIDE

Introduction

Thank you so much for meeting with me today. I am working on this thesis to better understand the experiences of people who identify as gender nonbinary. I am meeting with you because I am interested in the mental health services and social support for people who identify outside of the gender binary.

Please share any information that comes to mind for you. What you share will only be used for this thesis project and any published work or presentations stemming from the work. All of your information will be de-identified as much as possible. I will not use your name or identifying information within the paper. We can identify a pseudonym that I will use throughout any writings. The consent you signed serves as your agreement to be interviewed today. The interview will take about an hour and will be recorded through audio. You may stop the interview, decide not to continue the interview, or skip any question. Please let me know if you would like to stop or move on from a question.

(GNB= gender nonbinary or other gender identity the participant listed)

Grand tour question: What is your life like as a GNB person?

Rapport Building Questions

- Tell me a little about you – your hometown, year/major, your hobbies/interests?

What does it mean to you to be GNB?

- How do you think people interpret it when you say you are GNB?
- How does your presentation (hair, clothes, etc) intersect with your gender identity?
- In what ways is it important to you that your gender identity is understood by others?
- What was involved in coming to the realization that you are gender nonbinary?

What challenges do you face as a GNB person?

- Social, Emotional, Biological/medical, & spiritual/religious challenges

How have you coped with or recovered from these challenges? (For example- hobbies, coping mechanisms, social supports, community resources)

What strengths accompany being gender nonbinary?

Have you previously sought mental health services?

- If so, what either made you feel comfortable or uncomfortable in that environment?
- What do you think you needed but did not receive with a therapist?
- If not, what do you imagine would make you feel more comfortable when finding a therapist, or when seeing a therapist?
- What do you think you would need to feel supported by a therapist?

Do you identify yourself as GNB to your friends, family, or community?

- What has this process of identification been like?
- Have your relationships changed since letting people in your life know that you identify as GNB?
- Can you tell me about the experiences you have had with people who have not been supportive? What about people who have been supportive?

What other identities and characteristics might intersect with your gender identity?

Do you think there are questions that are important that I am missing?

APPENDIX E: INFORMED CONSENT



Informed Consent to Participate in Research Information to consider before taking part in research that has no more than minimal risk.

Title of Research Study: Stress and Resilience in Gender Nonbinary Individuals

Principal Investigator: Kristen Puckett (Person in Charge of this Study)

Institution, Department or Division: ECU College of Health and Human Performance, Department of Human Development and Family Science

Address: Redditt Research Academy 612 E. Tenth Street, Mailstop 505, Greenville, NC 27858

Telephone #: 252-737-1415

Participant Full Name: _____ Date of Birth: _____

Please PRINT clearly

Researchers at East Carolina University (ECU) and ECU's Family Therapy Clinic study issues related to society, health problems, environmental problems, behavior problems and the human condition. To do this, we need the help of volunteers who are willing to take part in research.

Why am I being invited to take part in this research?

The purpose of this research is to better understand the lived experiences of adults who identify as gender nonbinary. You are being invited to take part in this research because you indicated that you identify as gender nonconforming, gender nonbinary, agender, or genderqueer. The decision to take part in this research is yours to make. By doing this research, we hope to learn how gender nonbinary individuals define their gender, what challenges they face, how they deal with these challenges, and what how family and community impact their experiences. If you volunteer to take part in this research, you will be one of about 10 people to do so.

Are there reasons I should not take part in this research?

This study is completely voluntary and you may choose to opt out of it at any point or not take part in it from the beginning. Reasons you should not take part in this research could include being under the age of 18, and not identifying in a gender nonbinary identity category.

What other choices do I have if I do not take part in this research?

Participation in this research project is voluntary. You may choose not to participate at any time.

Where is the research going to take place and how long will it last?

The research will be conducted in a location to be determined by you and the principal investigator. You will need to come to this location one time during the study. The total amount of time you will be asked to volunteer for this study is 2 hours over the next two months.

What will I be asked to do?

You will be asked to do the following:

- Complete a short demographic survey that will ask about basic information such as age, gender identity, and ethnicity.
- Complete an in-depth interview that will be audio recorded. The interview will include questions about what your gender identity means to you, what challenges you face, how you cope with the challenges, if you have previously sought mental health services, and how you interact with your family and community. We will type up your audio-recorded interview for analysis and it will be kept in a password-protected file on a data encrypted flash drive along with the audio file. Only those involved in the research study (the principal investigator and the faculty investigator) will have access to the documents. The tapes and documents will be kept for, at most, five years and they will be deleted at the end of this time period. Any accompanying documents will also be shredded at that time.
 - The in-depth interview will include questions
- If you are willing to be involved in the process of double checking the results (“member checking”), we will contact you and give you a summary of the results. This will give you an opportunity to share additional information or help us make corrections.

What might I experience if I take part in the research?

We don't know of any risks (the chance of harm) associated with this research. Any risks that may occur with this research are no more than what you would experience in everyday life. Potential risks may include, but are not limited to, recalling or disclosing information such as harmful relationships, experiences of discrimination, or life events that may cause you to become emotionally distressed. We don't know if you will benefit from taking part in this study. There may not be any personal benefit to you but the information gained by doing this research may help others in the future. In the instance that you experience distress while taking part in the study, you will be provided contact information about mental health services to receive further support.

Will I be paid for taking part in this research?

We will not be able to pay you for the time you volunteer while being in this study. However, each participant will be given a \$5 gift card as a token of appreciation.

Will it cost me to take part in this research?

It will not cost you any money to be part of the research.

Who will know that I took part in this research and learn personal information about me?

ECU and the people and organizations listed below may know that you took part in this research and may see information about you that is normally kept private. With your permission, these people may use your private information to do this research:

- The University & Medical Center Institutional Review Board (UMCIRB) and its staff have responsibility for overseeing your welfare during this research and may need to see research records that identify you.

How will you keep the information you collect about me secure? How long will you keep it?

The information from all participants will be unidentifiable through the use of pseudonyms and participant codes. All documents and audio files will be stored on a data encrypted flash drive and each document will be password protected. Data will be kept for 6 years following the study when it will be deleted and any accompanying documents will be destroyed.

What if I decide I don't want to continue in this research?

You can stop at any time after it has already started. There will be no consequences if you stop and you will not be criticized. You will not lose any benefits that you normally receive.

Who should I contact if I have questions?

The people conducting this study will be able to answer any questions concerning this research, now or in the future. You may contact the Principal Investigator at (252) 737-1415 (Wednesdays and Thursdays between 1pm and 8pm).

If you have questions about your rights as someone taking part in research, you may call the Office of Research Integrity & Compliance (ORIC) at phone number 252-744-2914 (days, 8:00 am-5:00 pm). If you would like to report a complaint or concern about this research study, you may call the Director of the ORIC, at 252-744-1971.

I have decided I want to take part in this research. What should I do now?

The person obtaining informed consent will ask you to read the following and if you agree, you should sign this form:

- I have read (or had read to me) all of the above information.
- I have had an opportunity to ask questions about things in this research I did not understand and have received satisfactory answers.
- I know that I can stop taking part in this study at any time.
- By signing this informed consent form, I am not giving up any of my rights.
- I have been given a copy of this consent document, and it is mine to keep.

Participant's Name (PRINT)	Signature	Date
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Person Obtaining Informed Consent: I have conducted the initial informed consent process. I have orally reviewed the contents of the consent document with the person who has signed above, and answered all of the person's questions about the research.

Person Obtaining Consent (PRINT)	Signature	Date
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APPENDIX F: RESOURCES FOR PARTICIPANTS

Thank you so much for your participation in my project. Here are a few resources that you may contact if you feel you need more support.

If you are an ECU Student, you may contact the
ECU Center for Counseling and Student Development
(252) 328-6661
137 Umstead Hall
East Carolina University
Greenville, NC 27858

ECU PASS Clinic
Provides therapy for individuals on a sliding-fee scale.
(252) 737-4180
311 Rawl Building
East Carolina University
Greenville, NC 27858

PORT Health Services
Provides individual, couple, family, and group therapy for those with a mental health and/or substance abuse diagnosis.
(252) 830-7540
4300-110 Sapphire Court
Greenville, NC 27834

ECU Family Therapy Clinic
Provides therapy for individuals, couples, and families on a sliding-fee scale.
(252) 737-1415
612 East Tenth St.
Greenville, NC 27858

If you ever feel you are in crisis and need help immediately, here are some important contacts:

- REAL Crisis Intervention (252) 758-4357. 24/7 crisis line. Provides over-the-phone counseling and referrals.
- Call 911 or go to your nearest emergency room.

APPENDIX G: DEMOGRAPHIC QUESTIONNAIRE

Pseudonym _____

Code _____

The purpose of this questionnaire is to allow me to describe participants in more detail. Please read and answer each of the following items. Do not include your name on this document. Please ask any questions that you might have and check all boxes that apply to you.

Do you identify your gender as a binary gender, meaning identifying only as either woman, man, transgender man, or transgender woman? Yes No

Gender Identity _____

Assigned sex at birth – Female Male

What is your current age? _____ years

How do you define your race/ethnicity?

- Black or African American
- White
- Hispanic/ Latinx
- Asian
- Native American/ Alaska Native/ First Nations
- Native Hawaiian or Pacific Islander
- Multiracial/ Biracial
- Other (specify): _____

How would you describe your current relationship status? _____

What is your religious or spiritual affiliation?

- Catholic
- Protestant
- Non-denominational
- Latter-Day Saint (Mormon)
- Jewish
- Muslim
- None
- Other (specify): _____

How would you describe your current employment?

- Employed full time
- Employed part time
- Self-employed
- Out of work

- Homemaker
- Student
- Retired
- Unable to work

Which of the following describes your student status?

- Part-time undergraduate student
- Full-time undergraduate student
- Part-time graduate student
- Full-time graduate student
- None of the above

Major area of study: _____

