

**The Construal of Romantic
Relationships in
Transgendered People: a
Personal Construct Approach**

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Abstract:

National Health Service (NHS) statistics show that 4000 people in the United Kingdom are receiving help for gender concerns (DH, 2008). Research has highlighted the importance of romantic relationships during early adulthood and an association with mental health (Fincham and Cui, 2011). The experience of romantic relationships among transgender people in 'emerging adulthood' (Arnett, 2000, 2006) is an under-researched area. The decision making process concerning, and construal of, romantic relationships among this group have yet to be investigated using Personal Construct Theory (PCT). This study uses qualitative and quantitative methods of inquiry from PCT to investigate the experiences of transgender people encountering romantic relationships. Overarching themes emerging from the participants in this study were of identity validation through romantic relationships, having a bi-gendered lens of the world, facilitating greater understanding in society, and learning from past relationships. Participants' experiences are analysed individually, as well as as a group. Clinical significance of this, limitations and future research are also discussed.

Chapter 1. Introduction

“The question of integration of the mind/body in action is the most practical of all questions we can ask in our civilisation. Until this integration is effected in the only place where it can be carried out, in action itself, we shall continue to live in a society in which a soulless and heartless materialism is compensated for by a soulful but futile idealism and spiritualism.”

J. Dewey (1931:299). *Philosophy and Civilization*, New York: Minton, Balch & Co.

This chapter begins by indicating how I came to do this study. Following this, an outline of the current research and theories in the area of transgender research is introduced. A review of the literature is summarised focussing on aetiology, psychological difficulties, and the current debates in this area. Under-researched areas are highlighted, and the use of Personal Construct Theory (PCT) is suggested as a useful framework from which to conduct an investigation. The complexity of how romantic relationships are construed from a transgender perspective is the main focus of the research questions, and these are stated at the end of the chapter.

1.1 How I came to this study

Elliot, Fischer and Rennie (1999, p. 221) state the importance of “owning one’s perspective” in the construction and development of good qualitative research. By being transparent, my aim is that the reader will be able to understand both my personal position, as well as my theoretical position. I acknowledge my own beliefs, values, and assumptions throughout this process, and for this reason I have chosen to write in the first person, as opposed to referring to “the researcher” (Webb, 1992).

1.1.1 *My personal position*

From a relatively young age, I have been curious about the relationship between mind and body. Over the years this has taken many forms, but is likely to have started with my becoming aware of the way in which my father’s health affected

him, and how this indirectly impacted on us as a family. I began to develop an interest in what I saw as a possible relationship between stress and illness. I took a holistic and multifactorial perspective, and this led me to experiment with learning about homeopathic medicine, shiatsu (a traditional Japanese healing massage), and eventually to psychology. My outlook on psychology has been coloured by this holistic view.

When I initially began to think of an area of research I would like to study, I knew that the relationship between mind and body would be an area of interest. However, I believe it was my personal experiences during this time which eventually led me to read about, and develop my research questions around transgender romantic relationships.

I have often felt an outsider in my family. I was raised by my maternal grandmother in Sudan from birth to the age of four. My nuclear family were present for the first three months of my life, and later moved to England to begin establishing a life for us all. When I moved to London to live with my nuclear family, we were strangers to each other, and this is likely to have played a part in my construal of myself as an outsider.

The feeling of not having a place where I fit exists outside of my family as well. Although I lived in London all of my school-age years, I attended an American school for the duration. I and my siblings were the only Sudanese students who attended during this time. More often than not, I was the only black pupil in my year group. Because we did not speak English at home, I learned the language at school. This included learning to speak with an American accent, learning about American foods, television programmes, brands, and cultural nuances that did not apply in England. I was neither English, nor American, nor completely Sudanese. I found that different groups of people often enjoyed pointing out what aspect of me they found to be different. I believe that my identification with not fitting in to a culturally construed category led to my identification with the transgender participant group I chose to study.

Another factor which led to my identification with this sample group is through the experience of having been brought up in a family where gender roles were fixed and rigid. Through the years, I have fought my own battles to push these boundaries. Striving to become a clinical psychologist is an example of this. I believe that romantic relationships are an area where one's own perception of themselves is tested out in relation to others in society. My interest increased through reading about these issues, and through my curiosity about what seemed to be missing from my reading.

1.1.2 *My theoretical position*

The theoretical position taken in this research is one which views personal constructivism and social constructionism as complementary, and not in opposition to each other. I believe that Personal Construct Theory (PCT) as defined by George Kelly (1955/1991) is ideally situated between these two positions, and it has proved to be a useful theoretical tool with which to conduct this research.

Personal Construct Theory envisages the individual as acting as a scientist, testing out, and making sense of the world, within a social context. Kelly (1955/1991) noted the significance of an individual's micro and macro social contexts. He understood the significance of learning about the cultural context from which a person comes, whilst also acknowledging the danger of ignoring the personal meaning and ways of construing that have derived from the individual (Warren, 2004). Many have written about the theoretical position of PCT, stating that the individual is not seen as isolated from their lived social experience (Butt, 1996, 2000; Davidson and Reser, 1996; Epting et al., 1996; Scheer, 2000).

In line with this, the theoretical position taken in this study is that people create individual and personal meanings, and that this cannot be separated from the influence of society, and the historical, economic and political times.

1.2 Terminology

Gender beliefs

Modern sexology differentiates between an individual's gender identity and sexual orientation. Gender identity refers to a sense of being a man or a woman. Sexual orientation is defined as attraction to members of the same sex, other sex, or both sexes (Drescher, 2007). These distinctions come from the subjective experiences of transgendered and gay individuals, and run counter to cultural stereotypes that presuppose, for example, that a gay man must have a feminine identity. This is one of many gender beliefs that stem from the assumption that attraction to men is a female trait. Beliefs about gender are not only related to sexuality. They also define how a culture expects men and women to behave, appear in everyday life, and attribute gendered meanings to behaviour.

One of the most common gender beliefs is that there are only two categories that people can fit into – male or female. In addition to this, a common assumption is that this gender binary distinction expresses all forms of human sexuality. Theories of homosexuality often assume a gender binary (Drescher, 1998). This is even present in Karl Ulrichs (1864/1994) suggesting a “third sex”. This theory suggests that some women were born with the spirit of a man trapped in their body (“Urningins”), and that some men were born with a woman's spirit trapped in their body (“Urnings”). Although this theory constructs a concept of a “third sex”, it has been criticised for ultimately drawing on a binary approach in its conceptualisation. Drescher (2007) argues that this theory of homosexuality makes the assumption that attraction to men is a feminine attribute, and that attraction to women is a male one. Although the acronym LGBT (Lesbian, Gay, Bisexual, Transgender) began to be used in the 1990's to emphasise the diversity in sexuality and gender identity based cultures, some sexual minorities reject this label in favour of terms such as queer, gender queer, pansexual, heteroflexible, homoflexible, fluid, polyamorous, intergender, agendered, and questioning - to name a few (Drescher, 2007).

Transgender

The term transgender will be used here as an umbrella term covering anyone who believes that there is a discrepancy between their gender and biological sex (Stewart, 2009). This relates to a wide variety of people, including heterosexual cross-dressers, people who live permanently in the opposite sex role, people who adopt male and female gender roles, and intersexed people, who are defined by a biological sex that differs from their gender identity.

Transgendered individuals may seek to construct a more congruent sense of self by having Gender Confirmation Surgery (GCS). As a successful surgery would result in a union of gender and sex, the term transgender no longer applies to these individuals, who are often called transsexual at this stage. A transman refers to a biological female who had GCS to become physically male. A transwoman refers to a biological male who had GCS to become physically female. These terms will be used to denote the various experiences of participants who share their histories in this paper.

Cisgender

The term cisgender refers to people whose sex and gender are congruent by the majority cultural standards; i.e. women who have female bodies and men who have male bodies. This term was created and is used to challenge the privileging of the term gender as opposed to transgender, and the notion of what is normative. Cis is a Latin prefix meaning 'to/this the near side'. Thus, cisgender refers to the alignment of gender identity with assigned gender. Grollman (2010) provided an example which highlights the difference in the terms. He said that in referring to 'transmen' (female to male transgender men) and 'men' (cismen), it may seem that transgender men are always a special type of 'man', while men are, without question, 'real men'.

Genderqueer

Genderqueer is a relatively new term referring to people who do not identify or experience their gender as either male or female. They may experience incongruence with majority norms in society using a binary distinction,

preferring to blur the distinction and identify with a type of androgyny rather than one gender or another (Grollman, 2010).

1.3 Historical context and debates of diagnostic definitions

Modern diagnosis of “transsexuality” began within the field of sexology in Germany in the 1880’s. Transsexuality and homosexuality were considered to be related to each other. Men who were attracted to men were seen as being like women, and women who were attracted to women were considered to be similar to men (Krafft-Ebing, 1888). In 1910, Hirschfeld identified the distinction between transvestism and transsexualism, stating that transvestism involved cross-dressing with the knowledge of not being in the opposite sex, whereas transsexualism consisted of people who believed they belonged in the opposite sex category. Transsexualism was otherwise known as *metamorphosis sexualis paranoiac* (as cited in Stryker & Whittle, 2006, p. 33).

In 1966, the term transsexual was made more popular through Harry Benjamin’s publication *The Transsexual Phenomenon*. During this time, transsexualism had shifted from a moral to a medical paradigm. Its presumed aetiology ranged from mental illness, or particular forms of this such as paranoia or psychosis (Kraft-Ebing, 1988; Hirschfeld, 1910 as cited in Stryker & Whittle, 2006, p. 28), genetic predisposition, or adverse childhood events (Cauldwell, 1949) to perversion or repressed homosexuality (Wiedeman, 1953; Socarides, 1969). The medicalization of the term transsexualism led to the development of research communities and gender identity clinics in the 1950s and 1960s in the United States and in the 1970s in the United Kingdom. The clinics provided transsexual people with hormones and performed sex reassignment surgeries (SRS) on them. Although in 1967 a change in the United Kingdom law allowed the performance of SRS, it was not until transsexualism was included in the third edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-III)* in 1980 that medical treatment for transsexual people became more widely available. Genital reassignment surgery was then seen as a legitimate treatment for a mental health concern, rather than for cosmetic purposes (Pauly, 1992, p.3).

The term transsexualism in the DSM-III was defined as a person showing a strong wish to change their physical sex characteristics and gender role continuously for at least two years (American Psychiatric Association [APA], 1980). In addition, transsexualism was sub-coded in terms of sexual orientation, including a separate category for children called gender identity disorder of childhood (GIDC). Treatments suggested included psychotherapy and SRS.

There were a number of controversies surrounding the inclusion of transsexualism as a new diagnostic category. The DSM-III had been the first edition of the manual without homosexuality as a diagnosis. Some argued that the introduction of transsexualism and its relationship to sexual orientation in the DSM-III was a new way to pathologise homosexuality (Richardson, 1999). Another criticism involved the portrayal of gender as a rigid notion. The transsexual diagnosis was based on the assumption that sex and gender consisted of binary categories, with treatment becoming strongly linked to SRS. What manifested from this is that those people who were more gender ambiguous were not seen as 'true transsexuals', and were not deemed eligible for SRS. As a result transsexual people had to exaggerate male or female normed behaviours in their presentation to medical and mental health professionals in order to receive genital surgery (Denny, 1992).

In 1994, the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)* (4th edition) (American Psychiatric Association, (APA)) interchanged the word 'transsexuality', representing a psychiatric condition, with the terms 'Gender Identity Disorder' (GID) and 'Gender Identity Disorder of Childhood' (GIDC) (APA, 1994). The two main features of these diagnoses are 1) a strong and persistent cross-gender identification and 2) constant discomfort with sex assigned gender (or biological sex at birth). As well as this, the diagnosis did not apply to anyone with a 'concurrent intersex condition' and only applied if there was evidence of significant clinical distress or impairment in social, occupational, or other important areas of functioning (APA, 2000). Similarly to the DSM-III, sexual attraction required specification for adults. As such, those who did not fall into specified categories could be identified as having 'Gender Identity Disorder Not Otherwise Specified'.

Although the diagnosis plays an important role in legal recognition of gender variant people in the UK, there are some continuing concerns regarding the current diagnosis. For example, the diagnosis assumes that cross gender identification is itself disordered (Wilson, 2002). In addition, Winters (2000) suggests that the diagnosis lacks reliability and is over-inclusive. For instance, it does not distinguish between distress caused by the 'gender dysphoria' or societal discrimination and prejudice (Winters, 2000).

As well as the DSM, influences of postmodernism and queer theory have provided further reconceptualization of gender. Challenging the essentialist assumptions inherent in the DSM, an increasing number of academics have argued that gender is socially constructed and performative (Burr, 1995; Butler, 2004). In this way gender can be seen as learned cultural expressions, behaviours and performances which we ascribe to a biological sex (Green, 2004, pp. 4-5), a multiplicity of expressions, identities and performances being possible (Bolin, 1994, pp.447 - 448). In the 1970's, these influences resulted in the increased use of the term 'transgender'. Although the term initially described gender variant people who did not want to undergo hormonal or genital reassignment procedures (Cromwell, 1999), it eventually became an umbrella term for people who believed that their gender identity did not match their assigned birth gender. This term allowed for a wide range of idiosyncrasies in gender expressions, such as genderqueer, gender-warrior, bi-gendered etc. It also included transsexual gender identifications (Wilchins, 1997, 2002) within it.

The value of these diagnoses is a much debated issue. There are those who propose that the terms GID and GIDC are a reflection of societal lack of acceptance of individuals, rather than the pathology of an individual him/herself. They suggest that this further serves to stigmatise and alienate people who do not conform to typical gender found in mainstream society (Bartlett, Vasey, and Bukowski, 2000; Langer and Martin, 2004; Wilson, Griffin, and Wren, 2002). On the other hand, Zucker (2005) states that transgender individuals are not in distress because of society's expectations of them, but because of the internal conflict they feel between their physical and psychological genders. As well as this, diagnosis is often essential for those who wish to receive support from health services. Possibly in response to debates like this, the National Health Service (NHS) began using the term 'gender

dysphoria' as a way of describing the unhappiness that transgendered people often feel (DH, 2008).

1.4 Prevalence rates

National Health Service (NHS) statistics show that 4000 people in the United Kingdom are receiving medical help in relation to concerns about gender (DH, 2008). In 2009 the Gender Research Identity and Education Society (GIREs) conducted a prevalence and incidence study commissioned by the Home Office, and found that twenty out of every 100,000 people present with gender related issues. Records also show an upward trend in the growth rate of the number of people seeking medical help for gender related concerns. Research conducted by GIREs in 2010 estimated growth at a rate of 11% a year since 1998. Even with these growing figures, it is generally accepted that records of prevalence are likely to be underestimations due to the nature of the stigma associated with gender related concerns. In addition, research on prevalence rates in the UK only includes those people who have sought medical intervention through the health service. Those who have used private means of obtaining medication or surgery have not been included within the figures and cannot be accounted for.

1.5 Psychological difficulties prevalent among transgender individuals

Being transgendered has been associated with a high suicide risk. This is especially significant in adolescent years and adult years (Grossman and D'Augelli, 2007). Grossman and D'Augelli found that almost half of the transgendered participants taking part in their study had thought about suicide, and a quarter of them had attempted suicide in the past. The factors that were identified to contribute to this included suicidal ideation related to a transgender identity, and past experiences of parental verbal and/or physical abuse. Clements-Nolle's (2006) research study provided evidence that gender based discrimination and victimisation are also predictors for attempted suicide among transgender adults.

Some research suggests high levels of co-morbidity in psychiatric problems among transgendered people (Hepp et al., 2005). However, the nature of being

transgendered was identified as a Gender Identity Disorder (GID) as it is known in DSM-IV (1994), and contributed to a dual diagnosis. Having said this, it does not detract from the other mental health problems that were found to be high in this group. This finding is supported by other studies in Western cultures (Kim et al., 2006). In Samoa, however, where gender roles are not as rigid, no association between transgendered individuals and mental health problems was found (Vasey and Bartlett, 2007). In addition to this, research findings suggest that mental health problems tend to decrease following Gender Confirmation Surgery (GCS) for adolescents and adults across different cultures (Labato et al., 2006; Metokole et al., 1990; Michel et al., 2002; Smith et al., 2001). As these accumulative findings suggest, and as Nutbrock (2002) states, mental wellbeing for transgendered individuals seems to be directly linked with societal acceptance, and familial and social support.

1.5.1 *Discrimination, transphobia and mental health*

The impact of minority stress has been discussed in relation to minority sexualities and ethnicities (Lehavot & Simoni, 2011; Wei et al., 2010), and can also be applied to transgender individuals. A number of studies conducted in the UK and US highlight the incidences of transphobic verbal abuse, threatening behaviour, physical abuse and sexual abuse in public arenas (e.g. GIRES, 2009; Lombardi, Wilchins, Priesing & Malouf, 2001). The results of stigmatisation and discrimination are further visible in the areas of employment, transphobic crime, poverty, social isolation and the impact on mental health (e.g. Minter & Daley, 2003; Nuttbrock et al., 2010; Nemoto, Operario, Keatley & Villegas, 2004). The relationships between poverty, isolation and the development of mental health difficulties are also widely acknowledged in the psychology literature (Gupta & Huston, 2009; Rutter & Smith, 1999).

Several American studies have found a higher prevalence rate of mental health difficulties in transgender than in cisgender individuals. Transgender people presenting in gender identity clinics have been found to show higher levels of depression and anxiety than the general population. Large scale community based surveys also found higher rates of depression. For example, in a study of 515 transgender people, Clements-Nolle, Marx, Guzman and Katz (2001) found that 62% of transgender male to females (MtFs) and 55% of transgender female

to males (FtMs) suffered from depression. Furthermore, one third of the transgender sample reported attempting suicide on at least one occasion. In addition, Nuttbrock et al.'s (2010) large scale study using participatory research and investigating the relationship between gender-related abuse and mental health in MtFs at different life stages, found a strong correlation between gender-related abuse and depression in adolescence and early adulthood. Although this relationship was less pronounced in later life, the impact of gender-related abuse on feeling suicidal was strong throughout the life span. The findings highlight how transgender people can be vulnerable in society, and how this in itself acts as a stressor. Lev (2004) proposes that different relational therapy approaches, such as couple and family therapy, should be used to support transgender people.

1.5.2 *Psychological tasks for transgendered individuals*

Although some gender variant people choose not to transition physically, they are likely to face a number of psychological tasks that they will have to negotiate in order to achieve a more integrated gender identity. Research suggests that the psychological tasks occur in the areas of identity formation and acceptance, choices about physical changes, and disclosure. These are discussed in turn below.

Identity formation and acceptance

Much of the research exploring the topic of identity formation and acceptance is qualitative and suggests that there are a number of psychological processes which transgender individuals often go through in order to integrate and accept their gender identity. Research suggests that many experience a sense of initial confusion and gender dissonance. In particular, research suggests that male to female (MtF) transgender people often learn from an early age that non-conformist gender behaviours (such as cross-dressing) are inappropriate. This often leads them to conceal their gender identity, isolate themselves or take on a hyper-masculine persona (Gagne, Tewksbury & McGaughey, 1997). Devor's (2004) study of mostly female to male (FtM) transgender individuals indicates that this group struggle with managing their anxieties around not fitting in (i.e. not having the same interests as other girls), or feeling socially out of place;

frequently oscillating between conforming their gender expression to fit with social expectations, and their need for self-expression.

With few exceptions (e.g. Devor, 2004; Nuttbrock, Rosenblum & Bluenstein, 2002), models of identity formation of gender variant people are limited. Nuttbrock et al. (2002) propose a conceptual framework of transgender identity formation within the context of social relationships. This consists of the four processes of awareness, performance, congruence and support of identity. The authors suggest that support from other people plays a crucial role in identity acceptance for transgender people. They further suggest that this can have major implications for their mental health.

Devor's (2004) 14 stage model is an adaptation of Cass's (1979, 1984) framework of lesbian and gay identity development. It is based largely on qualitative research on a predominantly female to male transgender sample. Devor emphasises the role of two underlying social processes in identity development. These are what he calls witnessing and mirroring. Witnessing is the process whereby other people see who the transgender person recognises him/herself as. Mirroring refers to the transgender person seeing him/herself in another person who is considered as being similar (Eliason & Schope, 2007). The model suggests that transgender people experience initial anxiety and confusion because other people fail to witness their sense of gender identity. Devor (2004) proposes that the anxiety and confusion eventually become replaced by self-acceptance and identity integration as a result of information seeking, making contact and reality testing gender identity with other trans-identified people who witness and mirror each other accordingly.

One of the strengths of this model is that it draws from already existing theoretical research with transgender people. Mallon (1999) proposed that traditional identity development models, such as Erikson's model of identity formation, are not appropriate for gender variant people. He argued that traditional gender assumptions and biological frameworks inherent within the model stigmatise transgender identity emergence. A limitation of Devor's (2004) model is that it may not be applicable to all transgender people. Transgender people have a range of experiences and idiosyncratic pathways.

Devor's model assumes that the psychological stages of transsexual identity formation follow a similar pathway without consideration of the availability of resources for transgender people to access a group of like-minded others. The model also assumes that the trajectories of FtM's and MtF's are similar, which may not be the case. As the model suggests that interactive processes are important in identity formation, it is also likely that wider issues of privilege, power and socialisation intersect differently with cisgendered males and females. In addition, stage models assume that the final stage is the goal and best outcome. This approach privileges outcome over process, and suggests that there is a 'best identity'. This is another implied assumption in the model.

Choices about physical changes

Although not all transgender people choose to permanently modify their bodies, most investigate and explore possible options of making physical changes (Lev, 2004). Within the medical field gender reassignment surgery refers to all of the surgical interventions a transgendered person will receive in order to present as the desired sex. Sex reassignment surgery, however, is solely concerned with the construction of the genital area (Selvaggi & Bellringer, 2011). In the UK, gender reassignment can be obtained within the National Health Service (NHS), and can involve feminising or masculinising hormone treatment and a range of surgical procedures. These include mammoplasty and/or vaginoplasty for MtFs and chest reduction and/or phalloplasty for FtMs (DoH, 2008; Tacconelli, 2008). In line with standards of care, the World Professional Association for Transgender Health (WPATH) stipulate that no gender surgical procedure should be carried out without prior psychological assessment or evaluation (WPATH, 2001). As such, transgender people often become involved with psychological services at this stage, if they had not been previously. Despite involvement with services, Rachlin's (1999) research demonstrates that FtM clients mostly rely on information from other FtMs when deciding what kind of surgery to have, or whether they want to have surgery at all.

Some transgendered people choose not to have genital surgery, and there is a great variability in gender presentations. For example, transmen often choose to rely on testosterone treatment without genital surgery because surgical procedures for phalloplasty are not as advanced as genital surgeries for transwomen (Lev, 2004). In addition, some transgendered people cannot have

genital surgeries for medical reasons. Testosterone often achieves desired effects for alteration of secondary characteristics of transmen, which allows them to be recognised as men. The goals of transgendered people vary, and some may identify as gender fluid, where flexibility in gender identification is valued. However, if transgendered people have a goal of appearing as male or female, surgical procedures and medical interventions make this easier to achieve for transmen than it is for transwomen (Lev, 2004).

The psychological outcomes of gender confirmation surgeries have been investigated, and research suggests that satisfactory surgical procedures are linked to psychosocial adjustment in transwomen (Rakie, Starcevic, Marie & Kelin, 1996; Ross & Need, 1989). In contrast, a Swedish study found that poor support from families was a risk factor for post-surgical regret (Landen, Walinder, Hambert & Lundstrom, 1998). However, research also suggests that post-surgical regret is very uncommon overall for transmen and women (Carroll, 1999; Lawrence, 2003). Decisions about physical modifications to the body are important aspects in transgender emergence (Lev, 2004). As well as this, gender presentation also involves assimilation of dominant and cultural practices of gender embodiment such as actions, postures or styles of communication (Johnson, 2007).

Disclosure

The existing literature on disclosure of transgender identity is largely based on small scale qualitative studies. Topics investigated include relationship maintenance and challenges for couples, children, family of origin and friends after disclosing one's gender identity to others. Both Gagne et al. (1997) and Lev (2004) found that transgender people found initial disclosure of their gender identity to be frightening and intimidating. Given that transgender identities are not generally well understood in mainstream society and transgender people often suffer from stigmatisation, ridicule and discrimination, these fears are not unfounded (Gagne & Tewksbury, 1998). Lev (2004) found that many transgender people will have reached out to support groups, obtained information or made contact with other transgender people over the internet before coming out to significant others and disclosing their gender identity to friends and family members. Gagne et al.'s (1997) research found that transgender people are particularly fearful about how they would be

treated by others, and how other people would cope with their disclosure. They also found that only a small proportion of people interviewed experienced negative responses from other people following their first disclosure. The authors suggested that this is a result of participants' careful selection of who they disclose to. However, later research indicated that over a period of time, the majority of people experienced loss of relationships with friends and family either through explicit rejection or gradually becoming more distant (Gagne & Tewksbury, 1998).

Other studies have explored the impact of transgender identity disclosure on couple relationships. They have found a number of responses including feelings of shock, anger and betrayal. They have also found that disclosure can lead to attitudes which strengthen the couple relationship (Gurvich, 1991). In another study of 17 couples of MtFs and their cisgender female partners, Alegria (2010) found that disclosure resulted in the cisgendered partners questioning how their transgender partners' identity would impact on their own sexual identity and the future of their relationship. This research also explored the ways in which the couples were able to overcome these challenges following disclosure. These included open communication, engaging with supportive social networks, managing public impressions strategically, cultivating self-talk which framed the relationship in a positive way and social activism (Alegria, 2010). This study had some limitations in that the length of the relationships was an average of 16 years. Cohort effects may factor into the findings, and as such, couples who have not been together as long and who may be younger may use different relationship maintenance strategies or respond differently to disclosure. Joslin-Roher & Wheeler's (2009) study of lesbian relationships indicated that when one partner disclosed FtM identity this can bring up challenges for the lesbian partner in relation to sexuality, the relationship and the future. This study also showed that stresses can arise regarding public presentation and losing support from lesbian communities during transition after disclosure.

These findings suggest that disclosure is generally a time of increased stress for transgender people and those around them, often increasing vulnerability to loss of family or community support.

1.6 Key debates in theories of transgender aetiology

The search for the cause of gender-variant behaviour has been a preoccupation in the clinical and medical community since sexologists began presenting case material about “inverts” in the late nineteenth century (Lev, 2004). The search for the aetiology of transgender behaviour has been broad and multi-faceted. It includes scientific analyses of the human brain and endocrine system, psychoanalytic forays into sex and gender development, cognitive-behavioural explorations into the acquisition of gender and social learning, as well as feminist discourse on socialisation and sex and gender based victimisation. Although these inquiries yield valuable information about gender identity and human diversity, no unified theory can explain or define transgender behaviour in its entirety.

1.6.1 *Essentialism versus Social Constructionism*

An on-going and common debate in theories of transgender aetiology is whether to attribute cause of identity formation to biological essentialism, or to social forces which mould transgender behaviours. Essentialist theories of transgender aetiology view the individual as having an inner state or ‘essence’, which is discovered, denied, accepted or repressed (Kitzinger et al., 1998). Essentialist theories view gender identification as either biologically determined or as a product of experiences in early childhood. Studies of the brain and endocrine system have expanded scientific understanding of the human body and its relationship to psychological forces. Some studies have suggested that the family co-occurrence of “gender dysphoria” is indicative of biological aetiology (Green, 2000a). It is clear that biology sets a blueprint for sexual and gender expression. However, little is known about how this blueprint develops or is impacted on by other variables, in particular environmental, familial and systemic factors (Lev, 2004).

In the mid 1980’s social constructionist theories began to challenge essentialist understandings of gender identity development. The social constructionist position is that people actively construct their identities (Mason-Schrock, 1996). As well as this, the social constructionist view is that these constructed identities are set in a particular historical, cultural and political context (Kitzinger, 1987). Biological factors are indeed influential, but are not

considered to necessarily determine directionality, as they are always mediated within a social context. Bem (1993) stated that a “failure to theorise biology in context” exists (p. 29). The social constructionist debate goes beyond the question of transgender identity development into the analysis of the field in which some gender expressions are viewed as normal and others considered as divergent.

On the one hand, there is a tendency for debate to polarise on the side of biological theories of essentialism or social constructionist theories. On the other, many researchers agree that biology and the social environment are dynamic and interact with each other (De Cecco and Elia, 1993). From the early writings of Freud there was an awareness of the limitations of polarisation in this debate. Freud (1905, 1962, p. 6) stated that “The nature of inversion is explained neither by the hypothesis that it is innate nor by the alternative hypothesis that it is acquired”. Butler (1993, p. 94) highlighted the assumption that if sex and gender identity is “constructed [then] it is in some sense free, and if it is determined, it is in some sense fixed”. This assumption is inaccurate, as socially mediated identities can be severely restricting especially because they are pervasive and universalising. Social constructionism does not describe a type of free process of choosing an identity. It attempts to describe how the social world defines and limits the identities that are possible (Lev, 2004).

It is important to note, as Kitzinger (1995) did, that both social constructionist and essentialist theories of sexuality and gender can be used to support or undermine the rights of LGBTQ (lesbian, gay, bisexual, transgender, and queer) sexual minorities. Both clinical paradigms that are biologically driven and social constructionist perspectives on identity development can be used to pathologise and to “cure” gender variance. Lev (2004) proposes that developing nonpathologising models for transgender identity does not exist in biological or social constructionist aetiological explanations, but in a combination which takes in the factors in and between the mind, body and spirit.

1.7 Theories of transgender aetiology

The following sub-section will focus on the various theories of transgender aetiology. Following this, a summary and conclusion will be provided identifying the position taken in this study.

1.7.1 *Biological research findings on transgender aetiology*

Scientists and researchers have searched genetic and chromosomal determinants, as well as biochemical and neuro-physiological factors contributing to transgender aetiology. Studies have also examined early foetal development. Over the years, studies have linked transgender identity to electroencephalogram (EEG) abnormalities, left-handedness, height in those born male, and polycystic ovarian syndrome in those born female (Lev, 2004; Michel, Mormont and Legros, 2001). Other studies have looked into family history, twin comparisons, and prenatal sex hormones (Ettner and Brown, 1999; Zucher and Bradley, 1995).

In order to understand the biological research findings on transgender aetiology, it is first necessary to discuss typical sex differentiation. The majority of people undergo sex differentiation in external and internal genitalia and the structure and function of the nervous system. Typically, females develop a uterus, fallopian tubes, vagina, and a central nervous system (CNS). In a typical male, the CNS does not cycle in the same way as a typical female, but is rather tonic in relation to the male reproductive system. As well as this, males generally develop a prostate, seminal vesicles, bulbo-urethral glands, a penis and its associated ducts (Wilson et al., 1993).

The formation of external genitalia is not the end point of the sex differentiation process. Dating from the first half of the twentieth century, research on laboratory animals has shown that virilisation of the male brain results in male and female brains developing along differentiated sex pathways, and that this is largely correlated with future sexual and non-sexual behaviours (GIRES et al., 2006).

In the majority of the human population, there are 46 chromosomes arranged in pairs. In females, one pair is composed of two X chromosomes, and in males, a pair is composed of one Y and one X chromosome. The Y chromosome has an important function in that it determines the endocrine system of the foetus, and thus, the sex dimorphic development. Specific genes on the Y chromosome, such as the SRY and ZFY, direct protein production which leads to the presence of hormones that masculinise the foetus. Without these hormones, especially testosterone, the foetus will proceed along a female development pathway (GIRES et al., 2006).

At approximately 6-7 weeks of gestation sex differentiation occurs in the uterus. The assumption that genital appearance is inevitably congruent with other sex/gender characteristics is usually accurate. However, this is not always the case. Research suggests that estimates of incidences of atypical sex differentiation range from 0.1% to 2% (Blackless et al., 2000; Fausto-Sterling, 2000). Many of these occurrences are known as intersex conditions. Some expressions remain undiagnosed until puberty or adulthood, and others remain undiagnosed indefinitely. The range in presentation of these anomalies suggest that this estimate is likely to be an underrepresentation of the actual occurrence (GIRES et al., 2006).

External variations can exist where genitalia appear ambiguous, neither clearly male nor female. These variations can elicit arbitrary sex assignment based on genital appearance. Gender identity may also be inconsistent with chromosomes and/or gonads and/or genitalia, or even with all three sex characteristics (Gooren and Kruijver, 2002).

The GIRES (2006) review proposes that treatment and experiences of those people who have intersex conditions provide helpful insight into the development of gender identity in the general population and in the transgender population. It suggests that “these studies offer opportunities for assessing the relative influences of phenotypical appearance, gender of rearing, and early brain differentiation, in shaping the adult gender identity” (GIRES, 2006, p. 6). For example, conditions of 5 α reductase deficiency (5 α -RD) and 17 β hydroxysteroid dehydrogenase deficiency (17 β -HSD) result in ambiguous

female-like external genitalia in XY infants. Both these conditions are a result of a lack of dihydrotestosterone, which is required for the gestational development of male external genitalia. In a study using a sample group of eighteen people with 5 α -RD, raised unambiguously as girls, it was found that seventeen had rejected the female role and adopted a male gender role during or following puberty (Imperato-McGinley et al., 1974; Imperato-McGinley et al., 1979a). These results were similar to findings recorded by Hurtig (1992) and Wilson et al. (1993). These results were also comparable to studies of individuals with 17 β -HSD (Imperato-McGinley et al., 1979b; Rosler & Kohn, 1983; Kohn et al., 1985; Rosler, 1992). These findings suggest that the biological makeup of these intersex individuals was stronger than their childhood rearing and socialisation processes (Sobel and Imperato-McGinley, 2004).

Furthermore, these findings, in conjunction with the evidence from other findings of conditions involving anomalies of genitalia (Diamond and Watson, 2004; Gooren and Cohen-Kettenis, 1991; Phornphutkul et al., 2000; Reiner, 2004; Reiner and Gearhart, 2004; Slijper et al., 1998; Sobel and Imperato-McGinley, 2004; Stein et al., 1994), suggest that gender identity often resolves independently of genital appearance, even when that appearance and the assigned identity have been modified by medical and social interventions (GIRES, 2006). Therefore, many researchers, such as Diamond (1996, 1997; 1999; 2001) and Reiner and Gearhart (2004), propose that the brain is a stronger factor than societal influences in determining gender identity. The case of 'John/Joan' is understood as having a significant impact on the understanding of gender identity development. This is a case of a biologically born male whose penis was accidentally cut off during his circumcision as a baby. As a result of this, his parents, following the advice of professionals supporting them, decided to raise him as a female, and called him Joan (Money, 1975). Joan then chose to become John during adolescence, had a reconstructed penis, and later married as a man (Diamond and Sigmundson, 1997). This case has been used to indicate an innate sense of gender identity despite psychological treatment to enable more comfort in the female role (Diamond & Sigmundson, 1997; Kipnis & Diamond, 1998). Infants had been previously regarded as psychosexually neutral up to the age of two (Money and Ehrhardt, 1972). The case of John/Joan provided evidence that this was not accurate.

More recent theories of transgender aetiology highlight the influence that hormones have in determining gender identification. Collaer and Hines (1995) used studies on girls with Congenital Adrenal Hyperplasia (CAH) to demonstrate this. CAH is a condition where a genetically female, or XX, foetus has been exposed to high levels of testosterone. Their study showed that girls born with CAH often exhibit typically masculine behaviours. Studies of other conditions such as Complete Androgen Insensitivity Syndrome (CAIS) have also been used as support for theories of biological determination of gender identification. CAIS is a condition where male foetuses are insensitive to the androgen hormone, and are born with female genitalia. Green's (2007) research demonstrated that these biological males often not only look female externally, but also develop a female identity. Other research studies on twins have also been used to support the genetic component of gender identity (Knafo et al., 2005; van Beijsterveldt et al., 2006).

Some researchers, such as Jeffreys (2008), describe being transgendered as a form of neurological intersex. This has been supported by studies which suggest that the endocrine environment has an impact on the neural organisation of areas of the brain which are potentially sexually dimorphic. In turn, this has an influence on male or female gender identification. Zhou, Hofman, Gooren and Swaab (1995) reported research in which they showed that the size of the nucleus bed in the stria terminalis (BST), part of the brain which is usually smaller in females than in males, is similar in transwomen and biologically born females. Their research also showed that the similarity in size was not due to adult sex hormone levels. They suggested that this was a result of the organising action of prenatal sex hormones instead. A number of other studies have supported neuronal sex differences (Coolidge, Thede and Young, 2002; Garcia-Falgueras and Swaab, 2008; Kruijver et al., 2000). These studies indicate that gender identification may have a strong biological component, and may not be a matter of choice or learning from early childhood experiences.

1.7.2 *Psychoanalytic theories*

Psychoanalytic theories of gender identity development have their roots in Freudian based psychoanalytic and object-relations theory. Freud (1905, 1923, 1925, 1931, 1933, 1962) proposed that infants had a "psychic bisexuality". This

was not literally a reference to infants' ability to be attracted to both sexes, but to having both male and female attributes existing within them. Freud believed that children did not begin to differentiate themselves as boys or girls until about the age of three. At this time, boys became aware that some people did not have penises, and this was postulated to provoke a fear of castration. According to Freud, girls did not become aware of their own femaleness until they reached the phallic stage at approximately three to six years of age, when they would notice that some people had penises. Girls were understood as reacting to this discovery with envy. Mitchel (2000, p. 236) explains Freud's hypothesis in these terms:

“Women are missing the male organ, so their longing is fantastic and must be renounced. Men are missing passive feelings vis-à-vis other men, which they dread because these feelings are associated with femininity and castration. Men have all the organs they could possibly want; they need to overcome childlike, illusory fears. Women lack the most valued organ; they need to renounce their impossible striving for it.”

This theory has been heavily criticised (Kleeman, 1971). Freud saw possession of a penis as an added appendage. He did not consider that girls may react with revulsion or pity on discovering that boys have penises. Parents have noted that some boys are equally envious upon realising that girls can become pregnant and give birth. Chodorow (1978) and Horney (1967) suggest that the concept of penis envy is probably less related to a girl's anatomical deprivation than it is to a desire for the power that a penis may represent in a patriarchal society.

Freud suggested that gender identity develops when children begin to identify with the same-sex parent. The mother is said to represent the first love object for both sex children. In order for a boy to develop a “healthy male identity”, he must learn to separate from his mother and identify with his father. Girls, on the other hand, are required to become more like their mothers and develop a desire for their fathers. According to this theory, male and female identity develops in repression of a natural bisexuality. As such, homosexuality and transgender identity are a result of faulty early parenting, particularly with an emphasis on the role of the mother. One of the criticisms of this theory from

feminist analysis is that it does not adequately explain the development of heterosexual women. No explanation is given as to why girls do not separate from their mother in the same way that boys do, even though the mother is the love object of girls and boys alike (Chodorow, 1978; Dinnerstein, 1977; Fast, 1984).

Stroller (1968) and Mayer (1982) proposed psychoanalytic theories of transsexuality as being a psychiatric condition related to dysfunctional parenting. Mayer proposed that a male identifying as female could be a way for the individual to avoid the conflict of having to compete with his father for the attention of his mother. In Stroller's view, male born individuals who experienced a feminine gender identity were typically raised in families with a masculine, enmeshed mother, an effeminate father, and with both parents allowing their son to display typically feminine behaviours. He states:

“The mothers do not permit normal separation to occur, as a result of which the infant cannot adequately tell where his mother ends and he begins. Then ... [because] he does not have a man present as an object for identification ... he is ... left unshielded from the malignant effect of his mother's excessive closeness (Stroller, 1968b, p. 102)”.

Although these and other psychoanalytic theories viewed transgender identity as a result of boys' over-identification with their mothers, Green's (1987) study on “gender dysphoric boys” showed that they were separated more frequently and for longer duration from their mothers. This finding was echoed by Coates (1990) and Coates and Person (1985), who found a strong relationship between losing a mother and transgender identity. In both cases, the issue of mother blaming or “momism” (Wylie, 1942) still exists, whether it is due to their being overbearing, or unavailable.

Psychoanalytic thinking has continued to develop beyond Freud's original ideas. Many clinicians who use this approach acknowledge the need to incorporate both male and female aspects of identity (Fast, 1984; Winnicott, 1965). They also accept the role of wider environmental context in intrapsychic development. Nonetheless, the literature on transgender aetiology is based on out-dated and sexist views of gender identity development. Biological theories

have also largely challenged psychoanalytic theories around transgender development. This is especially demonstrated in studies of psychological adjustment following Gender Confirmation Surgery (GCS) (Meyer and Reter, 1979).

1.7.3 *Cognitive-Behavioural and Social learning theories*

Kohlberg (1966) viewed children's gender identity development as stemming from internal cognitive processes, rather than from the processes of external socialisation. He identified three stages of cognitive development; the first of these he called gender identity, the second, gender stability and the third, gender consistency. The gender identity stage occurs in children around two years old. It is marked by being able to identify themselves and others as boys or girls. This is largely based on stereotypical gendered physical characteristics such as clothing or hair style. Following this, gender stability occurs at around three or four years of age. With this comes an understanding that gender remains the same throughout time even though physical characteristics, such as clothing or hair style, may change. The third stage, gender consistency, is reached at about five years of age, and is marked by an understanding that gender remains the same throughout situations as well as time.

Zucker et al. (1999) examined a "developmental lag" in some children where the gender consistency stage is not reached in the same way as it is in other children. They did not make any assumptions that "gender lag" was related to resistance of accepting a false gender identity. One could easily come to the conclusion that a transgender person might reject the notion of stability or consistency in gender. As such, these children would not be failing to meet the stages of gender identity development, but would be expressing their own understanding of their transgender identification. For a transgender child, developing gender consistency would in essence be a rejection of their own experience of themselves.

The basis of both cognitive-behavioural and social learning theories is that all gender-related behaviours are learnt. The learning process is primarily through modelling the same sex parent. Gender behaviours also become reinforced through social rewards and punishments (Golombok and Fivush, 1994). The

social learning theory of transgender aetiology suggests that learning to identify as transgender can occur in two ways. This can be through a lack of a same sex role model, or through having an opposite sex role model who is overpowering. The theory states that this can occur in families where typical gender behaviours are not reinforced. However, this has been criticised due to lack of support from a number of research studies (Roberts, Green, Williams, and Goodman, 1987; Zucker et al., 1994). The case of 'John/Joan' mentioned above has also been highlighted as one which challenges social learning theory in relation to transgender aetiology.

1.7.4 *Social Constructionist theories of transgender aetiology*

Peter Jackson's (2000) key study on sexual and gender diversity in Thai culture, and 'Queer Theory', a philosophical body of work, are two examples of social constructionist positions in transgender aetiology.

Peter Jackson's (2000) study on the categorisation of sexual and gender diversity in Thai culture is regarded as one of the key investigations exploring this topic in a non-western culture (Clarke, Ellis, Peel and Riggs, 2010). It also provides an example of the social construction of sexuality and gender from the cultural perspective and context in which it occurs. Jackson (2000) highlights the limitations of western theories in explanations of sexuality and gender within same-sex cultures in Thailand.

Thai culture categorises the concept of sexuality as different forms of what is called 'phet'. The meaning of phet is an eroticised gender, as opposed to a sexual identity. Erotic preference is determined by where an individual lies on the scale of phet (from 100 per cent masculine to 100 per cent feminine). As such, it is more important to know how masculine or feminine an individual is, rather than to know what types of bodies or gender performances someone finds to be erotically appealing.

Jackson identified at least seven types of phet described in Thai culture. These were (1) 'man' (as in western terms): 100 per cent masculine and heterosexual, (2) 'gay king' and (3) 'gay queen' (both of which would be considered as gay

men in western terms): kings are said to take a sexually insertive role, and queens take a sexually receptive role, (4) 'kathoey': this is similar to western terms of transsexuality, and was previously used to denote an intermediate or third sex/gender, but is now used to refer to transgender and people with Disorders of Sexual Development (DSD), (5) 'tom' and (6) 'dee' (both terms used to describe what western cultures would call lesbian women): toms are considered to be more masculine and dees to be more feminine, and (7) 'woman' (100 per cent feminine and heterosexual). Jackson described four types of sexual communities in Thailand based on pairing of people of different phets. These were (1) man and woman, (2) gay king and gay queen, (3) kathoey and man, and (4) tom and dee.

Jackson made a distinction between gay and kathoey, and highlighted that these are not to be confused as types of sexuality or gender. Instead, they are forms of phet, and as such many men will describe themselves as 60/40, 70/30 etc. referring to imagined percentages of king (sexually insertive) and queen (sexually receptive). It is understood that masculine and feminine can blend together, meaning that homosexually active men can engage in a variety of sexual behaviours. Another important distinction made in Jackson's research is that Thai culture does not make a clear distinction between gender and sexuality in the way that Western cultures do. He describes that personal identification as a man or a gay king is both an erotic and a gendered identification. He further asserts that whereas many Western cultures privilege sexuality over gender, many non-Western cultures privilege gender over sexuality (Jackson, 2000).

This last statement is an example of the social constructionist view that sex and gender are socially derived concepts. They are not the commonly thought of distinction stating that sex refers to biology and gender refers to culture. In this way, the two-sex model, which states that there are two, and only two, sexes is seen as a lens through which we can view the world (Clarke, Ellis, Peel and Riggs, 2010). Furthermore, it is an example of an ideological perspective that has changed throughout history. Lacquer (1990) highlighted that the two-sex model was invented in the eighteenth century, and that prior to this the dominant theory was of a one-sex model. During this time, women's bodies were seen as inferior versions of men's.

Some theorists, such as Kessler (1998), have stated that dominant theories such as the two-sex model can be held onto despite evidence against them. For instance, rather than take people with DSD who are born with 'sex' chromosomes, external genitalia and/or internal reproductive systems that are not considered as standard or fitting with either female or male as evidence which does not support a two-sex model, those who are born with a DSD are altered in order to maintain the theory. Many infants born with ambiguous genitalia have their phallus reduced in size in order to look like a clitoris, and undergo the surgical construction of a vagina. As well as this, social constructionist theorists argue that the concept of sexuality as heterosexual and homosexual relies on a two-sex model where attraction is defined as either to the same sex or the opposite sex (Clarke, Ellis, Peel and Riggs, 2010).

Queer and feminist theories

Queer theory views gender as a socially constructed concept, and challenges notions of gender identity as fixed or normative (Hall, 2003). Foucault's (1978) *History of Sexuality, vol 1* is considered to be one of the most influential books within the theory (Hegarty and Massey, 2006), arguing that power operates as much through the production of sexuality and sexual categories as it does by their repression. In contrast to gay liberation and lesbian feminist theorists of the time, Foucault offered a model of power that was relational, and not only existing as a repressive tool used to marginalise people.

Minton (1997) used this distinction to suggest that the goal of queer theory is to work against power, as opposed to seeking freedom from it. He also argued that reclaiming the meaning of the word queer was key to understanding the theory. The term queer was historically used as an abusive term for non-heterosexuals. Whereas it was traditionally associated with strangeness and peculiarity, queer activists and theorists began to emphasise a more positive meaning of resistance against heteronormative assumptions. This was often a confrontational and rebellious stance in the sense that being queer meant not wanting to fit in with society and holding the position that people have the right not to do so.

Similarly to Queer theory, feminist theory and the women's liberation movement called into question the role divisions between male and female genders. They viewed the differences between males and females as socially constructed and culturally determined, and not bound by biology or theology. Feminist theory aimed to deconstruct stereotypical notions of gender in favour of building a more egalitarian relationship between the sexes. This was not an easy task. Goldner (1988, p. 17-18) stated that:

“It was no longer a matter of demanding equal access to a man's world, but of asking what the world would be like if women had equal access in creating it ... gender could no longer be conceptualised as simply a barrier to be transcended, because it was itself a metaphysical category, a central organising principle of knowledge and culture.”

Although questioning the dimorphic nature of sex and gender is an obvious natural outgrowth of the feminist movement, it has also been a source of deep resistance and conflict. The transgender liberation movement has been met with great hostility from many feminist theorists. For example, Janice Raymond's 1979 book, *The Transsexual empire: The making of the she-male*, presented transgender identity as a patriarchal plot to encourage traditional and stereotypically rigid gender roles. Butch and femme lesbian identities have also been criticised by feminist theorists for this same reason (Jeffreys, 1994; Harne and Miller, 1996). The main argument is that in the same way that butch and femme lesbian identities do, transgender people reinforce a two-sex model of gender. This is echoed in queer theory as well, and is also a more recent argument of transgender people who identify as gender fluid or “genderqueer”.

Paradoxically, even though transgenderism has been met with resistance in many feminist circles, the questions posed by both “gender studies” are those about the meaning of sex and gender, of gender-role expression and its political ramifications. There is even a branch of feminism called transfeminism which is dedicated to examining these interconnected issues (Koyama, 1999). It is interesting to note that feminist theory, which is based on a philosophy that destiny is not determined by biology, is so antagonistic to a transgender liberation movement, which to a greater or lesser degree is validation of this philosophy.

1.8 *Summary and conclusions*

There are a number of theories in the literature about the aetiology of transgender identity. Each explains the development of transgender identity in its own way.

Biological theories of transgender aetiology suggest that the brain is more powerful in determining gender identity than the influences of society. Biological theories are supported by research on brain development and sex differentiation in gender variant people across a range of presentations.

Psychoanalytic theories of transgender aetiology are based on the assumption that problems in early parenting, specifically related to the role of the mother, result in the development of transgender identity. These theories are based on the writings of Freud, and have been criticised for being out-dated.

Both cognitive-behavioural and social learning theories of transgender identity aetiology propose that all gender-related behaviours are learned, primarily through modelling the same-sex parent. They suggest that atypical gender identity development is likely to result when typical gender behaviours are not reinforced. As with psychoanalytic theories, there is little research evidence for either cognitive-behavioural or social learning theories of transgender aetiology.

Social constructionist theories view gender as a socially derived concept. Thus, transgender aetiology, as a derivative of gender, is also socially constructed. These theories propose that definitions of gender change in accordance with historical and cultural contexts of the time. Queer and feminist theories of transgender aetiology fit under the bracket of social constructionist theories.

Though various theories have been used to explain the development of transgender identity, no one theory is fully comprehensive or free from criticism. While biological factors are clearly relevant, gender differences will

always be subject to personal and social construction. What is more, even biological theories which are based on measurable and observable evidence are based within a sociological, political, cultural and historical context. While these theories add to the knowledge base, it is necessary to establish how and why they are used. Rather than debating for or against polarised theories on aetiology, a more productive use of the various theories is to focus on the needs of transgender people as a marginalised group in society.

One study which demonstrates this was conducted by Lane (2007) investigating the different narratives that two clients and four clinicians in a transgender clinic had regarding biological and social constructionist explanations of transgender identity. The study specifically looked into how participants positioned themselves in relation to biological discourse and how they participated in constructing these discourses. They found that all participants thought that biology played a role in transgender aetiology. However, the participants differed widely on the significance they attributed to this. Two participants (one client and one clinician) viewed the biological role as extremely significant in transgender aetiology. Three participants (clinicians) viewed biological and societal interactions as the most viable aetiological explanation, and one participant (client) viewed aetiology as the wrong focal point. In particular, he took a critical view of the biologically based strategy as one that reinstates transgender people as being 'normal' in a binary system.

Similarly to the GIRES (2006) review discussed above, the conclusions drawn from this study were that it is essential to focus on the needs of transgender people and that this be extended on the basis of human rights, justice and equality. Scientific and medical views are often revised. The emphasis on the rights of transgender individuals to appropriate care and respect remains constant.

One such area where the rights of gender variant people is controversial is in the right to marry. As of 2002, the European Court of Human Rights ruled that the right to marry or enter into civil partnerships extends to transgender people. In line with this, recent legislative acts, such as the UK Gender Recognition Act (2004) advocate the rights of transgender people to be

recognised in the way they identify themselves. However, in order for this type of recognition to occur, a transgender person must go through medical, psychological and legal investigation and authorisation.

Romantic relationships highlight the views of society in relation to transgender people. They also indicate how transgender people might view themselves within society, and the implications this has for their mental health. In addition, the area of romantic relationships brings into focus the intersection of biological and social influences, and is also likely to be a central component of mental health issues in transgender people, who are largely stigmatised in society. As such, the primary concern of the present study will focus on the construal of romantic relationships in transgendered people.

1.9 Transgender research

1.9.1 Literature search strategy

Electronic literature searches were conducted using all the major psychology, social science and medical databases. In addition to this, a search on reference lists of relevant articles and books was conducted using the Google search engine (Google Scholar), or by consulting authors of relevant research in the field. A combination of different search terms was used such as gender identity disorder, gender identity disorder of childhood, gender dysmorphia, gender dysphoria, transgender, transsexual, sexual minority, LGBT, LGBTQ, romantic relationships, relationships, sex, sexuality, love, partners, and couples. Both empirical and conceptual studies were considered.

Transgender research has historically been neglected within mainstream research. Although there are major differences between issues which concern transgender people and those of sexuality, these are often grouped together under the name Lesbian, Gay, Bisexual, Transgender (and sometimes Queer) (LGBTQ) research. As such, some of the literature drawn on for the purposes of this research has come from LGBT(Q) studies. Within this, the main focus of the research has tended to be on aetiology, maintenance or prevalence of 'the disorder' (Sausa, Keatley and Operario, 2007). There has also been research

focussing on risks associated with being transgender (Bockting, Robinson, & Rosser, 1998; Herbst et al., 2008; Kenagy, 2002; Kenagy & Hsieh, 2005).

1.9.2 *Research on transgender relationships*

More recently, more research aims at looking at relational and emotional reasons behind increased risk (Crosby & Pitts, 2007; Melendez & Pinto, 2007). The former study looked into how transgender women can often be forced into having risky sex. The latter study focused on the risk of transgender women becoming infected with HIV. Research on transgender relationships has often been in the areas of familial and peer relationships. As well as this, qualitative approaches have been used to explore the process of transgender identity development. Jones and Tinker (1982) conducted research suggesting that there is a relationship between family dynamics and the development of a transgender identity. More recently, Griffen, Wilson and Wren (2005) conducted a study on the interaction between transgender young people and their peers. This highlighted a frequent occurrence of bullying and difficulties in forming friendships. Wren (2002) also studied transgender familial relationships from the perspective of the parent. This is presented in a paper entitled: "I can accept my child is transsexual but if I ever see him in a dress I'll hit him: Dilemmas in parenting a transgendered adolescent". Qualitative approaches have also been used to explore the process of transgender identity development within the context of relationships (Gagne & McGaughey, 1997; Lee, 2001). The former study looked into the experience of "coming out" into a transgender community. The latter study explored lesbian and female to male transition accounts of identity.

1.9.3 *Research on transgender romantic relationships*

The area of romantic relationships among transgendered people is becoming of growing research interest. This includes studies of the experiences of lesbian partners of transgender men (Brown, 2009; Pfeffer, 2009), and a study on identity development and exploration among sexual minority adolescents (Galliher, Glover and Trenton, 2009), including a sub-group of transgender participants. De Vries (2007) conducted a study on "LGBT couples in later life", which focused on their opportunities and constraints. To my knowledge, no

similar study has been done on the experiences of a younger group of transgender individuals.

1.10 Romantic Relationships in Early Adulthood

Recent research suggests that the time of emerging adulthood, between late teenage years and mid to late twenties, is often an important developmental period where people explore and gain experiences of relationships (Fincham, 2010). This is often a significant time in identifying the nature and significance of forming of romantic relationships. Some have found this time to be significant in informing one's sense of self, and have suggested that it is a period often associated with intense emotional instability (Connolly and Konarski, 1994; Larson, Clore and Wood, 1999).

Arnett (2000, 2006) suggests that 'emerging adulthood' is a distinct developmental period, and that romantic relationships have a quality during this time which differentiates them from adolescence and later adulthood. This has been supported by Collins and van Dulmen's (2006) research documenting the cognitive changes in complexity when thinking about relationships during adolescence and emerging adulthood. However, they also suggest that romantic relationships are built on a foundation of earlier experiences in childhood, and there is often a large degree of continuity in romantic relationships formed during adolescence and emerging adulthood.

Arnett (2000, 2004) suggests that in comparison to previous generations in contemporary Western society, adolescence begins earlier and adulthood (associated with tasks such as getting married, and becoming a parent) is more delayed. He further proposes that this period of emerging adulthood is characterised by distinctive features. Firstly, this stage is associated with continued identity exploration where an individual might ask him or herself such questions as "What kind of person am I?" and "What kind of person should I find as a partner through life?" Secondly, this is often a time of instability where emerging adults negotiate choices in love and work, as well as moving from one place of residence to another. Thirdly, emerging adulthood is often a time of self-focus. As opposed to the adolescent age in modern Western

societies, this is not a time associated with being closely monitored by parental figures. It is also typically a time when spousal and/or parental responsibilities have not yet arisen. Arnett viewed the fourth feature during this time as a feeling of being in between adolescence and young adulthood, and considered that it is a stage of freedom to explore options or opportunities. Arnett (2004) further elaborates one of the important tasks associated with this time as that of exploring romance and love, often testing out different relationships before settling down with a more permanent partner.

As well as this, a growing body of research has highlighted the importance of romantic relationships during this time and an association with mental health (Fincham and Cui, 2011). Obviously, one can only claim that the nature of this relationship is reciprocal. As such, poor mental health will have an impact upon interpersonal functioning, and poor interpersonal functioning can also lead to an increase in mental health problems. Recent research suggests that committed romantic relationships are a significant protective factor for the development of mental health problems among college students (Braithwaite, Delevi, & Fincham, 2010).

1.10.1 *Theories of Romantic Relationships*

A number of theories of romantic relationships have been proposed, none of which can be taken as comprehensive explanations of emerging adult sexuality within relationships (Fincham and Cui, 2011). Social exchange theory, proposed by Kelley and Thibaut (1978), Laursen and Jensen-Campbell (1999), and Thibaut and Kelley (1959), focused on both the cost – benefit analysis in interpersonal relationships, as well as interdependence between members of a romantic couple. The theory suggests that individuals weigh up the pros and cons of their decisions within a romantic relationship, for example whether or not to use contraception with a partner one is sexually active with. Laursen and Jensen-Campbell (1999) acknowledged that this theory may rely too heavily on logical thinking, at the expense of factoring in the momentary emotional responses that may influence these types of relationships.

Attachment theory has also informed theories of romantic relationships. Hazan and Shaver (1987) propose that people often choose romantic partners where the quality of the relationship can resemble that bond they experienced as children from their own parents. Although attachment theory does not explain the development of sexual feelings expressed in romantic relationships, sexual selection theory emphasises this aspect of interpersonal relationships as a major factor in choosing a romantic partner (Buss, 1995). This theory also highlights differences in sex, stating that the adaptive tasks of men and women are different in relation to their approach to reproduction and mating. Although sexual selection theory attempts an explanation of sexual behaviour, and understands it within the context of gender, the theory makes no attempt to explain variables of individual differences such as ethnicity, race, social status, class and/or life experiences (Fincham and Cui, 2011).

Furman and Wehner (1997) proposed a developmental theory of romantic relationships which focused on the adolescent years. They suggested that as adolescents become more experienced in having romantic relationships, they become more skilled at getting their needs met through their romantic partners. They suggest that romantic partners play a key role in the areas of attachment, caregiving, affiliative and sexual behavioural systems.

Following Furman and Wehner's (1997) theory, other developmental theories of romantic relationships concerning adolescents began to arise in the literature. Brown (1999) proposed that there are four developmental phases in romantic relationships during adolescence. The initial phase consists of being focused on the self as a romantic being. The second phase consists of a move toward satisfying the critical eye of peers with the romantic relationship. The third phase is that of developing a deep affection toward a partner, and the final phase consists of having thoughts of lifelong commitment.

In the same year, Connolly and Goldberg (1999) also proposed a developmental theory of romantic relationships in adolescence. Their theory also consisted of stages. They proposed that the first stage was characterised by physical attraction, or "crushes". The second phase in their model was moving on to dating within the context of the peer group. The third and final stage was that

of developing a more intimate relationship with a partner, and deciding whether or not they would like to continue with the relationship.

All three developmental models (Furman and Wehner (1997), Brown (1999) and Connolly and Goldberg (1999)) emphasise intimacy and some form of commitment toward the final stages of development of a romantic relationship. The models also include the role of physical and sexual attraction within the context of these relationships. However, due to their focus on adolescent relationships, they do not allow us to assume that the same applies to romantic relationships later in life. Carroll et al. (2007) argued that their research suggests that love relationships in emerging adulthood take on a different trajectory than they did in previous years. They propose that emerging adulthood is characterised by the social context of more and more peers getting married. They found that on average, men and women in emerging adulthood believed that getting married at twenty-five years of age was the ideal time. As such they propose that this time may be associated less with physical attraction, and more with long term commitment and marriage.

According to Fincham and Cui (2011), although most theories in the areas of romantic and/or sexual relationships acknowledge the co-existence of romantic and sexual aspects, most empirical research focuses on either sexual or romantic relationships. They suggest that most researchers in the area of sexuality tend to examine multiple aspects of sexual behaviours, attitudes and motives, but reduce romantic relationships to variables such as being in a relationship or not, length of the relationship, or to an aspect of the quality of relationship (i.e. power). They further suggest that researchers in the area of romantic relationships often investigate domains of the relationship, such as intimacy, communication, conflict, representations of the relationship and experienced emotions, yet fail to investigate sexuality to the same degree. Fincham and Cui (2011, pp. 216) specifically state that “studies that address both romantic relationships and sexuality rarely include multiple measures of each construct”.

Personal Construct Theory is well situated to investigate a multiplicity of constructs in regard to sexuality and romantic relationships, including

participants' personal constructs and the meaning of these. Further justification for use of Personal Construct Theory as an investigative tool in this area is given in the following section.

1.11 Theoretical position and Rationale

As discussed in section 1.1.2, Personal Construct Theory regards individual personal meaning and the context in which they occur as complementary. This position does not deny biological factors. Kelly (1991, pp. 254) states that “the person under observation just goes on being himself and we can look at him through our psychologist’s spectacles, or through our physiologist’s spectacles, or if our eyes will stand the eclectic strain, through both”. This demonstrates the flexibility of using this approach to investigate the multifaceted area of transgender romantic relationships within a psychological context.

Personal Construct Theory (PCT) offers both theoretical concepts, and research tools which enable an understanding of an individual’s experiences. In Kelly’s description of the ‘fundamental postulate’ in PCT, he states that “a person’s processes are psychologically channelized by the ways in which he anticipates events” (Kelly, 1955/1991, p. 46/32). This postulate relates to what Kelly described as the ‘Experience Cycle’ (1970). He described this as the phases an individual goes through in his or her ‘scientific’ pursuit of experimentation. This process consists of various phases. The *anticipation phase* is the stage in which a person makes a prediction about a particular event. Following this is the *investment phase*, where the person involves him/herself in the anticipation of the event. The *encounter phase* is the actual experience of the event. This is followed by the *confirmation and disconfirmation phase*. This is an assessment of the event in relation to how it was anticipated. The final phase of the experience cycle is the *constructive revision phase*. At this stage, the person may reconstrue his or her experience of the event based on the evidence obtained in going through the cycle. S/he may then further anticipate and go through a further experience cycle.

As well as the ‘fundamental postulate’, Kelly further specified 11 corollaries of the fundamental postulate that stipulate and describe the process and social context of construing as well as the structure and content of construct systems

and the development and modification of personal constructs. For the purposes of this study, four corollaries will be described here.

One of the 11 corollaries Kelly identified in his theory is the 'choice corollary'. This states that "A person chooses for himself that alternative in a dichotomized construct through which he anticipates the greater possibility for the extension and definition of his system" (Kelly, 1955/1991a, p.64/p.45). This means that people actively seek out and choose the alternative they think will provide them the maximum capacity to be able to anticipate their worlds, rather than choosing what may be more pleasurable. This is particularly relevant in understanding why a transgendered person may or may not choose to explore having a romantic relationship. Understanding their construct system is an essential part of this.

Another important feature of Kelly's theory is outlined in his understanding of the decision making process. He saw this as cyclical in nature and called this process the circumspection – pre-emption – control (CPC) cycle. In the circumspection stage, the individual considers a decision from a variety of different angles propositionally. In the pre-emption phase, a selection of the most critical issue leads to the final control phase. This involves making a choice in the direction which allows for a greater level of extension or definition of a construct system (Kelly, 1955). The decision of whether or not to engage in a romantic relationship, and/or to continue to do so may be better understood using the CPC cycle as an explanation of the process.

Kelly's (1955) individuality corollary explains that people have different ways of construing their experiences. The commonality corollary states that the extent to which people construe their experiences in a similar way determines the extent to which their psychological processes are more or less similar (Kelly, 1955). Both these corollaries may provide useful theoretical concepts for understanding of relationships between people, as well as how they view their relationships.

The sociality corollary in PCT describes a particular way of understanding relations between people, and one which Kelly considered to be one of the most important in determining the quality of a relationship. The sociality corollary states that “To the extent that one person construes the construction processes of another, he may play a role in a social process involving the other” (Kelly, 1955, p. 95). Kelly’s sociality corollary describes this process by which an individual attempts to understand how another construes, and the social interaction that can occur between people as a result. The sociality corollary has great implications for any dynamic between people, and may be especially significant to the way in which we understand a romantic relationship.

In this way, PCT can elucidate the interconnected nature between self and social context, and the complexity of dynamics in romantic relationships. As such, PCT will be used in order to contribute to understanding the decision making process of a transgendered individual negotiating romantic relationships.

1.11.1 *A Personal Construct Theory perspective on romantic relationships*

Kelly (1955) believed that social experiences enable people to test out predictions of the world. Through social interaction, a person is able to develop theories which can allow a greater degree of control and explanation of one’s environment. The relationship between social context and understanding of the world is highlighted in what Kelly called role relations. These concern the roles occupied by people, often following a regular pattern of behaviour which is defined by how people see each other. Kelly viewed an individual’s identity as being linked to the more personally fundamental roles he or she occupies, and used the term core role structure to describe this. Bannister and Agnew (1977, p. 99) contributed to the thinking about personal identity in relation to interpersonal relationships by explaining that “the way in which we elaborate the construing of the self must be essentially those ways in which we elaborate our construing of others, for we have not a concept of self, but a bipolar construct of self – not self”.

Past research has suggested that intimate relationships often consist of mutual validation through a process of comparing constructions of social interaction

with a partner who construes in a similar way (Neimeyer and Neimeyer, 1985, 1981b, 1984, 1983; Duck, 1973, 1975; Lea, 1979). Relationships experienced as being more positive have been found to support and extend each other's core role structures and personal identities. From a PCT perspective, this allows members of a relationship to better predict their worlds through the experience of their social environment. McCoy (1981) proposed that positive emotions follow from validation of personal construing, and that negative emotions are associated with invalidation or unsuccessful construing.

More recent research exploring love relationships from a personal construct theory perspective highlights the differences between construal of platonic relationships, as opposed to the ways in which love relationships are construed. Winter, Duncan, and Summerfield (2008) found a greater degree of conflict (and therefore, invalidation) in love relationships, as opposed to platonic relationships, which had a greater degree of mutual validation. Constructions of love in transgender people, and the relevance of these to their thinking about romantic relationships, have yet to be studied.

As well as this, PCT has been used to further elaborate current understanding of the classic sexual response cycle proposed by Masters and Johnson (1966). Sewell (2005) used PCT as a framework for understanding sexual response, desire, and dysfunction. Specifically, he mapped Masters and Johnson's (1966) sexual response cycle onto Kelly's "Experience Cycle" (1970). By doing so, he looked into how people anticipated, encountered, and evaluated their sexual experiences with each other. He also highlighted how the experience cycle can be used in clinical settings to improve various types of sexual dissatisfaction.

The current study will also use PCT, including Kelly's (1970) experience cycle, to examine intimate relationships. As transgender romantic relationships have not been investigated using PCT, this will add an original investigative approach to this area.

1.12 Research aims and questions

The significance of romantic relationships is generally accepted within society and among mental health professionals. However, the importance of these relationships is generally not considered within psychology research for those individuals who do not conform to majority gender expectations. The need to reconstrue oneself in relation to society can be a major task for any minority group member. Transgender individuals may also experience shame and fear about their identities both in relation to society, as well as with individuals with whom they are intimate, such as family members and friends (Jones & Tinker, 1982; Wilson et al., 2005). A limited number of psychological studies have investigated issues related to being transgendered. However, none of the research at present discusses the construal of romantic relationships in this group, the decision to enter into a romantic relationship, and the way in which it is encountered.

An investigation of this kind has potential use in psychosexual counselling, affirmative psychological approaches, and in developing greater gender diversity awareness. Further insight into the construal processes of transgendered people regarding entering into romantic relationships may be of value to clinicians working with transgendered clients presenting for psychological therapy because of problems in this area. With this in mind, this research aims to investigate the following questions.

1.12.1 Research Questions

1. How do transgendered people approach the decision to have a romantic relationship?
2. How do transgendered people construe the process of making this decision?
3. Are the outcomes of this decision validating or invalidating?
4. Does reconstrual depend upon the outcomes of the decision making process?

5. Are the major considerations in making the decision to do with the mechanics of a physical relationship, the sense of self as transgender, the social pressures of what male and female roles are, or any other reasons?
6. How do transgendered people construe their level of comfort within their biologically determined sex (the sex they were born into)?

Chapter 2. Method

This chapter provides an outline of the research methodology and design used in this study. A rationale for choice of method, recruitment and data collection strategy, as well as the analytic procedures which followed, are also presented.

2.1 Design

The present study employed a qualitative approach as its central method of inquiry. Qualitative approaches have been said to provide a vehicle for achieving an in-depth understanding of a range of human experiences, particularly where a rich description of an under-researched phenomenon is sought (Barker, Pistrang, & Elliott, 2002). A qualitative method of analysis was also selected to explore the above research questions because it was deemed most appropriate with the group under study. Transgender support groups such as TransLondon, and Gendered Intelligence, as well as researchers such as Sausa et al. (2007), advocate the employment of qualitative research approaches for improved understanding of the needs of transgender people.

Qualitative methods were used in conjunction with a mixed qualitative/quantitative method in this investigation, in order to gain a more in depth understanding of the data. Using a variety of methods to collect data, often called triangulation, is suggested to reduce the effects of limitations inherent in any one method (Barker, Pistrang, & Elliott, 2002).

2.2 Participants and recruitment strategy

Six participants aged 20-31 years old took part in this study, one self-identified as genderqueer, one as pre-transition transmale, and four as transmen. They were recruited from transgender support groups in the United Kingdom. Although they were not recruited through Mental Health Services, they had all previously been seen for mental health support either privately or through National Health Service (NHS) provision. A number of transgender support groups were contacted with information about the study, and flyers were distributed in conferences where transgender issues were discussed. One

support group which caters specifically to teenagers declined to inform their users about the study because it was felt that most of them were in the beginning processes of coming to terms with their transgender identity. Two potential participants expressed interest, but then decided they were not emotionally ready to discuss their experiences due to the complications associated with transitioning and sexual intimacy. All six participants expressed interest in finding out the results, and all agreed to be contacted in relation to future research.

2.2.1 *Inclusion and exclusion criteria*

The nature of the research required a purposive sampling approach. Participants were selected for inclusion in the study if they were between the ages of 18-35, identified as transgender and had contemplated, experienced, or were currently involved in a romantic relationship. Participants needed to feel that they had considered this, regardless of the outcome of their decision. The sample was not restricted to any particular category defined in the literature, and it was deemed more important that the participants self-identified and defined the relevant terms using their own personal constructs.

2.3 **Measures Used**

2.3.1 *Experience Cycle Methodology*

The interview method selected was in keeping with the personal construct psychology approach underlying this project as the fundamental theoretical framework. Oades and Viney (2000) developed a semi-structured interview method based on Kelly's 'Experience Cycle' (1970) (section 1.9). Winter (1992) described this cycle as the process of construing. He regarded this process as a person's active and ongoing attempts to make sense of the world, and anticipate future events.

The Experience Cycle Methodology (ECM) has been used to demonstrate the relationships between the phases of the experience cycle as they relate to construct change. It outlines what Oades and Viney (2000) call a 'construct

change pathway', which can be followed at each phase of the cycle to provide a quantitative representation of the process. Each phase of the cycle with the exception of the encounter phase can produce a coding. The anticipation phase can receive a score for a loose or tight prediction. A tight prediction suggests a fixed idea of what the person expects in encountering an event. In the investment phase, a person may have a high or low investment. This is a measure of what it means for the person to encounter the event in the way it was anticipated, in other words, the degree to which it mattered if the prediction came true or not. The confirmation/disconfirmation phase can produce a score in relation to the validation or invalidation experienced during the event, and the construct revision phase can produce a score of significant or minimal revision of the event (see Table 1 below). Previous studies using the ECM assert that change in constructs follows invalidation, tight predictions with high investment, or both (Lamiell, 1995; Oades & Viney, 2000). Oades and Viney (1997) used the ECM to investigate adolescent risk taking. This study also provided support for the construct change pathway hypothesis. They found that out of the 121 participants who completed the ECM, 80.17 % reported significant revision. Of the 95 participants who reported significant construct revision, 77 (79.38%) were rated as making tight predications with high investment and/or experiencing invalidation. The study also showed that of the 24 (19.83%) participants who showed minimal construct revision, only 6 (25%) reported experiencing invalidation, and 8 participants (33.33%) reported making tight predictions with high investment. Of those who reported minimal construct revision, only 2 (0.083%) reported making tight predictions with high investment and invalidation. Although there have been few reported uses of the ECM, it has been used recently by Gucciardi et al. (2010) to investigate "choking", or suboptimal performance, in golfers.

Experience Cycle Methodology Interview Questions

The ECM provides a framework which can be adapted to the research questions of a particular study. The questions used in the Experience Cycle Methodology interview in the present study were as follows: (See Appendix 1).

Anticipation phase

- What are the main factors you consider when thinking about a romantic relationship?

- What predictions or expectations have you had when thinking about a romantic relationship?
- What options did you feel were open to you?
- What were your main concerns?

Investment phase

- What did your expectations mean to you?
- How much did it matter to you at the time?

Encounter phase

- What has your experience(s) of romantic relationships been?

Confirmation/Disconfirmation phase

- How did things go compared to what you thought would happen?
- How do you feel about this?

Constructive revision phase

- What did you learn from this experience?

Next time

- If there is a next time, would you change as a result of your experiences?

- Will you change the way you view things or how you behave?
- Is there anything else you would change?
- What options do you see open to you now if you were in a similar situation?
- How do you now see the advantages and disadvantages of being in a similar situation in the future?

2.3.2 *ABC technique of Tschudi (1977)*

The Experience Cycle Methodology (ECM) also includes Tschudi's (1977) ABC technique to examine the future advantages and disadvantages of repeating or not repeating the action. This involves asking for the advantages and disadvantages of each pole of a construct, as in the following example.

A1 Not having romantic relationships (RR)

A2 Having a RR

Which of these is preferred?

B1 Disadvantage of not having RR

B2 Advantage of having a RR

C2 Advantage of not having a RR

C1 Disadvantage of having a RR

- Do you have any other comments about that experience?

The Tschudi (1977) technique has been used in a number of previous studies (Anderson, 1999; Cummins, 2006; Hardman, 2001; Tschudi and Winter, 2011). It is a technique often used due to its simplicity and ease, whilst simultaneously providing a great deal of depth into dilemmas and processes of decision making, often clarifying what might be at a lower level of one's awareness.

As a semi-structured interview, the questions were covered exhaustively but in a free flowing fashion, and were not asked if the information was volunteered spontaneously. As suggested by Oades and Viney (2000), the interview method allowed flexibility in the questions, and began with questions about how the participant described the actual experience (the encounter phase), and then followed the sequence of questions relating to the anticipation of the event and so on. This interview method also allowed for the exploration of particularly interesting avenues that emerged during the interview process and followed the interests and/or concerns of the interviewee.

2.3.3 *Repertory grid technique*

George Kelly (1955/1991) created the repertory grid as a means of exploring personal construct systems. We create internal theoretical frameworks or 'personal construct systems' based on our construal of our experiences. These systems also serve as the framework from which we evaluate outcomes, elaborate changes, and integrate them into our systems. The repertory grid provides us with a window that allows us to look directly into our personal construct systems, and has been used before with this sample group (Skrapec & MacKenzie, 1981). While the interview was more concerned with the content of a person's construing at a relatively high level of awareness, the use of the repertory grid provided an indication of the structure of the construct system. The grid technique could also be expected to access constructions at a lower level of awareness. Other studies have combined the use of repertory grids and qualitative interviews (Smith, 1999; Turpin et al., 2009). Neimeyer and Neimeyer (1985) found this to be a useful method in investigating relationships. They stated that "grid methods could prove extremely valuable to investigators wishing to study the stabilities underlying impression formation and their impact on the development of relationships" (Neimeyer and Neimeyer, 1985, pg. 331).

The repertory grid involved the participant rating a set of elements (referring to aspects of the self and others) on a 7-point scale on a set of constructs elicited from him/her. The elements were chosen to allow an in-depth investigation of the research questions, and were as follows:

Elements

- Self
- Ideal self
- Self in a romantic relationship
- Self not in a romantic relationship
- Self as seen by romantic partner
- Self as seen by others when in romantic relationship
- Self as seen by others when not in a romantic relationship
- Actual or perceived partner
- Ideal partner
- A typical male
- A typical female
- Self in preferred gender role
- Self in non-preferred gender role
- Stereotype trans person

Thirteen constructs were elicited from each participant by using Kelly's (1955/1991) original method, and one construct, 'comfortable in biological sex – uncomfortable in biological sex' was supplied by the researcher. Constructs were elicited by asking the participants, for successive triads of elements, to "tell me some important way in which two of the people are alike, and different from the third". Each triad of elements was taken in turn and constructs were elicited using the same order of elements for each participant. An adapted construct elicitation method was used for those participants who struggled with using a triadic method. Landfield (1971) suggested that the use of two elements for eliciting constructs can be less confusing, and found this useful with his participants in psychotherapy research. In the present study, participants were given the option of eliciting constructs using dyads of elements, following an attempt at using triads. Participants who used the dyadic method were asked to "tell me an important way in which the two people differ from each other". The contrast pole was then elicited by asking the participant for the opposite of this difference. This method has been used in a number of other studies (Baillie-Grohman, 1975; Barton, Walton and Rowe, 1976; Salmon, 1976). Both the triadic and dyadic elicitation methods provided bi-polar constructs from each participant. Participants were then asked to specify their preferred pole, and these were aligned so that elements received a high rating if applied to the

preferred pole. Participants then provided a rating for each of the elements on every construct. The construct poles represented the ends of a seven-point scale. The preferred pole was on the left side of the construct and had a rating score of seven, and the non-preferred pole was on the right side and had a score of one.

2.4 Procedure

Participants were seen individually, and were given a choice of having the interview conducted in an appropriate location of their choice, or at the University of Hertfordshire. Participants were informed that the interview would last approximately one and a half to two hours, including breaks. All participants had been provided with an information sheet prior to the interview (Appendix 2), and had been informed that the interview would be recorded on audio tape, and transcribed. They were also made aware that pseudonyms would be used to protect their confidentiality. Participants were asked to fill in a consent form, and a demographic information sheet (Appendices 3 and 4). The ECM interview was then recorded. Breaks were negotiated between the researcher and participants during this first stage of data collection. Another break was offered prior to the start of the structured interview using the repertory grid. Participants were then debriefed verbally, and given an opportunity to discuss the interview and research process. They were invited to comment and to ask for feedback following the analysis of results. Participants were also given a written debrief (Appendix 5), as well as an information sheet on sources of support (Appendix 6). The latter included my contact details, as well as transgender support groups in the UK.

2.5 Methods of analyses

2.5.1 Idiogrid version 2.4 (Grice, 2008) analysis of repertory grids

Each repertory grid was analysed using the grid analysis software IDIOGRID (see Appendix 7). Analysis involved conducting a Slater analysis (Slater, 1977) for each grid. The following measures were taken into account:

Percentage of variance accounted for by the components

The percentage of variance accounted for by the first principal component was noted for each participant. Winter (1992) explained the use of this as a measurement of cognitive complexity. High percentages of variance demonstrated that the participant's construing tended to be more simplistic, indicating a tight construct system. Lower scores indicated a greater degree of differentiation and complexity, and suggested a looser way of construing (Winter, 1992). Ryle & Breen's (1972) study on "neurotic" patients compared with a "normal" group indicated that a percentage of variance of 70 or above is regarded as high.

Plot of elements in construct space

The principal component analysis plot provides a two-dimensional illustration of how the participant construes the elements used in the repertory grid, and how the constructs are interrelated. The Slater method makes use of the "singular-value decomposition", a theorem proposed by Eckart and Young in 1936 (cited in Fransella, Bell and Bannister, 2004). The theorem shows that a matrix, or a grid in this case, could be used to approximate the product of two other matrices. In the case of a repertory grid, the matrix corresponding to the rows is that of the construct component loadings, and the matrix corresponding to the columns indicates the element component loadings. The constructs are symbolised as vectors on the plot, and elements are shown as points (Watson and Winter, 2000). The plot is divided into four quadrants, and elements that lie within the same quadrant are regarded as being similar to each other. Those elements that lie in opposite quadrants tend to be the most dissimilar, and elements that lie close to the origin of the plot are not as significant to the participant as those that are further from the origin (Grice, 2006; Watson and Winter, 2000).

Salience of elements

Loadings of elements on the first principal component give a measure of the meaningfulness of elements to each participant (Winter, 1992), a high score being indicative of a greater degree of meaning. This study compared the component loadings for the elements 'self in/not in a romantic relationship', and 'self as seen by others when in/not in a romantic relationship' for each

participant. An alternative measure of element salience was also derived by calculating the number of extreme ratings (1 and 7) of the element concerned in each repertory grid, and the number of midpoint ratings (4), the former indicating that the element is salient and the latter that it is not (Winter, 1992).

Distances between elements

The distances between the following pairs of elements were considered for each participant, using the standardised Element Euclidean Distances (Grice, 2006):

- Self in a romantic relationship & Self not in a romantic relationship
- Self in a romantic relationship & Ideal self
- Self not in a romantic relationship & ideal self
- Self (now) & a typical male
- Ideal self & a typical male
- Self (now) & a typical female
- Ideal self & a typical female
- Self (now) & a stereotypical trans person
- Ideal self & a stereotypical trans person

Distances between the element pairs give a measurement of how similarly or differently they were construed. Winter (1992) indicated that a distance of less than 0.5 indicated that the element pairs were construed in a similar way, and a distance of more than 1.5 indicated that the pairs of elements were construed as being different. A distance of 1 is considered to be the expected value between the elements, that neither indicates a highly similar, nor dissimilar way of construing. The measurement of distance between the elements self (now) and ideal self is used to give an indication of level of self-esteem.

Construct superordinacy

Hinkle (1965, p.23, cited in Fransella et al. 2004) defines superordinate and subordinate constructs in this way:

In an implicative relationship between two constructs, that construct which implies polar positions on the other construct is called the *subordinate construct*; that construct whose polar positions are implied by other construct is called the *superordinate construct*.

This definition suggests that if one construct is subordinate to another, then elements in both poles of the subordinate construct will be subsumed under those of the superordinate construct. This has been supported in Chiari et al.'s (1990) theoretical paper. Superordinate constructs are, therefore, overarching constructs which contain subordinate constructs within them. The percentage sum of squares accounted for by each construct has been used here as a measure of superordinacy (Bannister and Salmon, 1967).

Construct correlations

Correlations were calculated between the supplied construct, 'comfortable/uncomfortable in biological sex', and the other elicited constructs in each grid. Correlations were calculated using Pearson's r (Grice, 2006). The constructs which correlated most highly with 'comfortable/uncomfortable in biological sex' were indicative of the meaning of this construct for each participant.

Implicative dilemma analysis

Implicative dilemma was a term coined by Hinkle (1965, cited in Winter, 1992). As elaborated by Feixas and Saul (2005), it denotes a wish to change from self to ideal self along a specific construct (the discrepant construct) where the change is construed as having an undesired effect on an associated congruent construct. Discrepant constructs are those where the elements self and ideal self are rated at opposite poles, whereas in congruent constructs they are rated at the same poles. Discrepant constructs therefore indicate an area of dissatisfaction, whereas a congruent construct indicates an area of satisfaction. Fernandes (2007) noted that dilemmas can indicate possible barriers to change, that the participant may be unaware of.

2.5.2 *Conflict analysis; Gridstat version 5 (Bell, 2009)*

Gridstat computer software for analysing repertory grids was also used. This produced a measure of conflict for each construct and element. Using the "element/construct triangular inequalities" measure on Gridstat allowed for identification of elements which were similar or close to two construct poles, which themselves differed or were distant from each other (Bell, 2009). This

measure also indicated conflicts where an element was similar or close to one construct pole and at the same time different to or distant from another construct pole, “where the two construct poles are similar or close” (Bell, 2009, p. 3).

2.5.3 *Content analysis of repertory grid constructs (Feixas et al., 2002)*

Following Landfield’s (1971) system of categorising constructs, Feixas et al. (2002) built upon the previously existing method to develop a classification system for personal constructs. The Feixas et al. system improved upon the Landfield system in the following five ways; 1) the use of exclusive categories in order to avoid any overlap; 2) the introduction of a comprehensive category system where those categories with a 62% consensus rate or lower among the judges were eliminated; 3) the introduction of a system where both construct poles were considered to be a complete dimension of meaning; 4) the elimination of the mixed use of related categories at different levels of abstraction (such as morality and egoism); and 5) the elimination of the unsystematic blending of formal and content aspects (Feixas et al., 2002). This was used in the present study as a method of content analysis of personal constructs. The Feixas et al. (2002) system uses 45 content categories, with six basic areas. These are moral, emotional, relational, personal, intellectual/operational, and values/interests. They also include two supplemental areas of existential and concrete descriptors. The total percentage of agreement among judges using the Feixas et al. system was found to be 87.3% (Feixas et al., 2002; Harter et al., 2004). All categories were used in the present study focusing on the constructs which correlated at a 5% significance level or below with the supplied construct: ‘comfortable/uncomfortable in biological sex’. The cut off point for a significant correlation using fourteen elements was 0.497 (Snedecore, 1989). A reliability check of the content categories was conducted by two independent raters.

2.5.4 *Construct change pathway analysis from Experience Cycle Methodology (ECM)*

The researcher and an independent rater coded participants’ interviews into the experience cycle phase category groupings listed in Table 1. To ensure inter-rater reliability, the phases were coded according to the written protocol specified by Oades (1999).

Table 1: Category Groupings of Experience Cycle Methodology Data

Phases	Groups	
Anticipation Phase	(1) Tight Prediction	(2) Loose Prediction
Investment Phase	(1) High Investment	(2) Low Investment
(Dis)Confirmation Phase	(1) Validation	(2) Invalidation
Construct Revision	(1) Significant Revision	(2) Minimal Revision

2.5.5 *Qualitative thematic content analysis*

Thematic content analysis (TCA) was selected as the most appropriate additional method for analysing the semi-structured interview data. A number of options were considered as alternative methods. Both Interpretative Phenomenological Analysis (IPA) and TCA aim to provide descriptions of the meaning of an individual’s lived experience of a particular phenomenon. However, IPA was discounted because it comes with a specific interpretative, hermeneutic and idiographic tradition attached to it (Smith, 2004), whereas thematic analysis is an atheoretical approach (Braun and Clarke, 2006; Boyatzis, 1998) and can be used flexibly within different frameworks. As the theoretical framework of this study is PCT, it was appropriate to use a method of qualitative analysis that could be used in conjunction with this. The position taken in this research project is of a contextualist method. This is characterised by approaches such as critical realism, and lies between essentialism and constructionism (Willig, 1999 cited in Braun & Clarke, 2006). This position acknowledges the ways in which “individuals make meaning of their experience, and, in turn, the ways the broader social context impinges on those meanings, while retaining focus on the material and other limits of ‘reality” (Braun & Clarke, 2006, p. 81). This position is complementary to the theoretical underpinnings of PCT, as well as other post-modern theories, with which TCA is consistent because it aims to extract the thematic content that emerges naturally from the data (Burr, 2003).

Thematic content analysis procedure

Braun and Clarke (2006) provide a systematic procedure for detecting patterns, developing codes, and extracting themes from data. These guidelines were followed in analysing the data from the semi-structured interviews. Four stages of analysis were carried out. The first stage, “familiarisation with the data”, consists of reading and re-reading the interview transcripts (see Appendix 17). Both manifest and latent levels of data were coded into categories on a paragraph by paragraph basis. Manifest levels of data refer to what was observable and stated by the participant, and latent levels of data refer to implicit (non-stated) content in the data. An inductive coding method was used, meaning that the themes arising were strongly linked to the raw data, and not heavily influenced by existing theories or research. Inductive coding was considered more suitable in order to better explore the experience of participants, particularly as this is an under-researched area.

The second stage of TCA, “generating initial codes”, consisted of writing the initial codes from each paragraph, or every couple of sentences in the transcripts (Appendix 8). At this stage, it became apparent that some of the codes had a degree of overlap, and merged to form overarching themes. These were typed with examples alongside them, and potential themes were identified. This involved a process of encapsulating the rich content in the data, whilst extracting identifiable examples that embodied the shared meaning of a larger theme. This stage also highlighted divergent content, which could be split into sub-groups, or sub-themes. Stage three of the analysis, “searching for themes”, involved generating an initial thematic map. This was used to illustrate the main themes extracted from the data. The relationships between the codes were then reconsidered and revised in order to create a more cohesive understanding of the emerging theme. A set of candidate themes were then drawn out and given provisional labels (Appendix 9). Different levels of themes were identified at this stage, and this allowed for the creation of sub-themes and overarching themes. Data that did not appear to fit with the emerging themes were put under the bracket of a miscellaneous theme.

The fourth stage, “reviewing themes”, began by refining the candidate themes elicited in stage three. Themes were set aside if they did not have much support evident from the data set. Other themes which had similar meanings

were integrated, and renamed, in order to refine a candidate thematic map. Extracts were read, re-read, and revised in order to establish how well they described each theme. A new theme was constructed in instances where the extracts captured a shared experience, not specified in a previously identified theme. The entire data set was then read again in order to establish whether the themes provided an accurate description of the data set as a whole.

2.6 Ethical Considerations

Ethical approval for the study was granted by the University of Hertfordshire Ethics Committee (Appendix 10). The study was also in accordance with the British Psychology Society Code of Conduct, Ethical Principles and Guidelines (1993). Informed consent was ensured through providing all participants with details of key information about the study. This included the purpose of the study, the intended method, and information regarding confidentiality. Participants were also informed of their right to withdraw from the study at any time, and without penalty, or having to provide a reason. This was to ensure that participants understood that they were under no obligation to take part in the study.

2.6.1 Confidentiality

Participants were informed both verbally, as well as through written material in the information packs, about confidentiality and its limits. All participants' names and other identifying information were removed from the write-up of this study, and were replaced with pseudonyms. Colours were chosen to replace names of participants. This was in keeping with the nature of the topic of transgender relationships, and the rainbow symbol often used to indicate pride in sexual diversity. It was deemed important that gender identification was not lost in this process, and as such, titles such as Mr, Mr/s were given.

All identifying information was kept separately and securely from audio-recordings. Participants were made aware that audio recordings would be destroyed following confirmation of completion of the degree. They were also made aware that anonymised data would be kept for five years post research submission (June 2016), in accordance with University of Hertfordshire's 'Good

practice in research' guidelines, after which it would be destroyed. Due to time constraints, an approved transcription service was used to transcribe some of the interviews. Participants' names were removed in order to protect their identity in these cases. The transcription service ensured confidentiality and held a company confidentiality policy (Appendix 11).

2.6.2 *Potential distress*

Although research suggests that participants have described the process of reflecting on their experiences as therapeutic (Birch and Miller, 2000), the possibility that participants might become distressed when describing their experiences of romantic relationships was considered. As mentioned above, participants were assured that they were not obliged to answer any of the interview questions, and that the interview could be terminated at any time. Participants were also provided with time to debrief, and details of additional sources of support (see Appendix 6).

2.7 **Measures of reliability**

2.7.1 *Repertory Grids*

Winter (1992, pg 53) states that, "A number of investigations have provided evidence of the validity of repertory grid technique by testing hypotheses derived from personal construct theory, and assumptions about grid method ...". Reliability of repertory grid technique has been a more controversial area within the literature. Slater (1965, 1974) regarded traditional nomothetic methods of assessing reliability to be incompatible with grid methods, with the possible exception of grids constructed for general use. As measures of test-retest reliability assess consistency over time, and repertory grids often highlight the changeable processes of construal, the concept of reliability in this sense may not be the most appropriate for repertory grid technique. Nevertheless, studies which have assessed test-retest reliability of grid measures have generally found this to be high (Fransella et al., 2004).

In order to provide inter-rater reliability checks, I participated in a repertory grid peer group. This included participation in sub-groups in order to carry out reliability checks on the repertory grid content analysis measure used in this study (Feixas et al., 2002), as well as the reconstrual pathway in the Experience Cycle Methodology used (Oades and Viney, 2000). The raw percentage agreement for the content analysis was found to be 84% between two raters. Disagreements were discussed in a wider group of four in order to come to a consensus. The raw percentage agreement for the Experience Cycle Methodology categorisation was 79%. Disagreements were discussed, providing evidence as support, until an agreement was made.

2.7.2 *Qualitative research*

Barker, Pistrang and Elliot (2002) suggest that traditional psychometric criteria for evaluating reliability and validity in quantitative research may not be easily transferable to qualitative methods. Instead, specially produced guidelines for evaluating qualitative research have been followed in order to consider issues of quality and rigour (Elliot, Fischer and Rennie, 1999; Yardley, 2000; 2008).

2.7.3 *Providing credibility checks*

Both peer review and supervision were used in order to provide credibility checks to assist transparency within the process, as well as to increase validity. I regularly participated in a TCA group where peers discussed methodology and analysis, as well as providing auditing and verification of each other's process of interview analysis.

Some authors have stated that member checking may influence the researcher's interpretation of the interview (Alexander & Clare, 2004; Whittington & Burns, 2005). However, others have argued that it is a useful measure of credibility, which increases face validity within qualitative research (Barker et al., 2002; Elliott et al., 1999; Smith et al., 2009). Both positions were considered. As this is a project situated within a constructivist and social constructionist paradigm, I take the view that there are multiple realities, and that understanding is co-created. As such, feedback from participants has been sought and would be welcomed.

Chapter 3. Results

This chapter outlines the findings for each participant, and then illustrates the various themes for the group as a whole.

3.1 Demographic information

Demographic data were collected for age, ethnicity, level of education, gender identification, self-defined meaning of gender identification and how this had developed, current romantic relationship status, time of last romantic relationship, reasons for participating in the study, and professional or other support sought in the past. These data (Appendix 12) were used to describe the sample. They were also used to understand the participants' motivation for participating in the study. Six participants took part in the study, all of whom had previously had or were currently involved in a romantic relationship. Two participants were in long-term relationships (9 years and 4 years). Both were living with their partners, and one recently married. Two participants were not currently in a romantic relationship, one having had a fourteen month relationship which ended six months prior to interview, and the other having had a relationship which ended three weeks prior to the interview. Two participants were in fairly new romantic relationships. One participant identified as genderqueer, three as transmen, one as a transguy, and one as transgender female to male (FtM). All participants had received support from different mental health professionals. Most received both medical and psychological support in order to transition. This seems a particularly significant detail, as none of the participants were recruited through the National Health Service.

3.2 Mr Red

Mr Red was a thirty year old transman. He had been in a long term relationship of four years, and had recently been married (two weeks before) at the time of the interview. His wife was his primary partner, but Mr Red also had a regular boyfriend. He was open about this, and explained that his wife and boyfriend were not jealous of each other. His wife had had girlfriends, of which Mr Red was aware. At the time of the interview, however, she was not seeing anyone else.

3.3 Mr Red's Repertory grid

Participants' individual repertory grids including a brief summary of the raw data are provided in Appendix 13.

3.3.1 *Principal component analysis*

Percentage of variance accounted for by the components

The percentages of variance accounted for by the first (47.49%) and second (28.87%) components from principal component analysis of Mr Red's grid indicate that he had more than one viable dimension of construing.

Plot of elements in construct space

The plot (Figure 1) shows that Mr Red's principal dimension of construing contrasts people characterised as 'happy', 'having a companion' and 'comfortable in biological sex' with those who were characterised as 'sad', 'lonely' and 'uncomfortable in biological sex'. 'A typical male' and 'a typical female' are construed in the former terms, and 'self in non-preferred gender role' and a 'stereotype transperson' in the latter. Mr Red's second major dimension of construing contrasts people such as 'self as seen by others when not in a romantic relationship' and 'self not in a romantic relationship', characterised as 'uncomfortable in biological sex' and 'hairy', with 'partner' and 'a typical female', characterised as 'smooth' and 'comfortable in biological sex'.

Stater Analyses for Mr Red's Grid
 Axis Range: -9.66 to 9.66

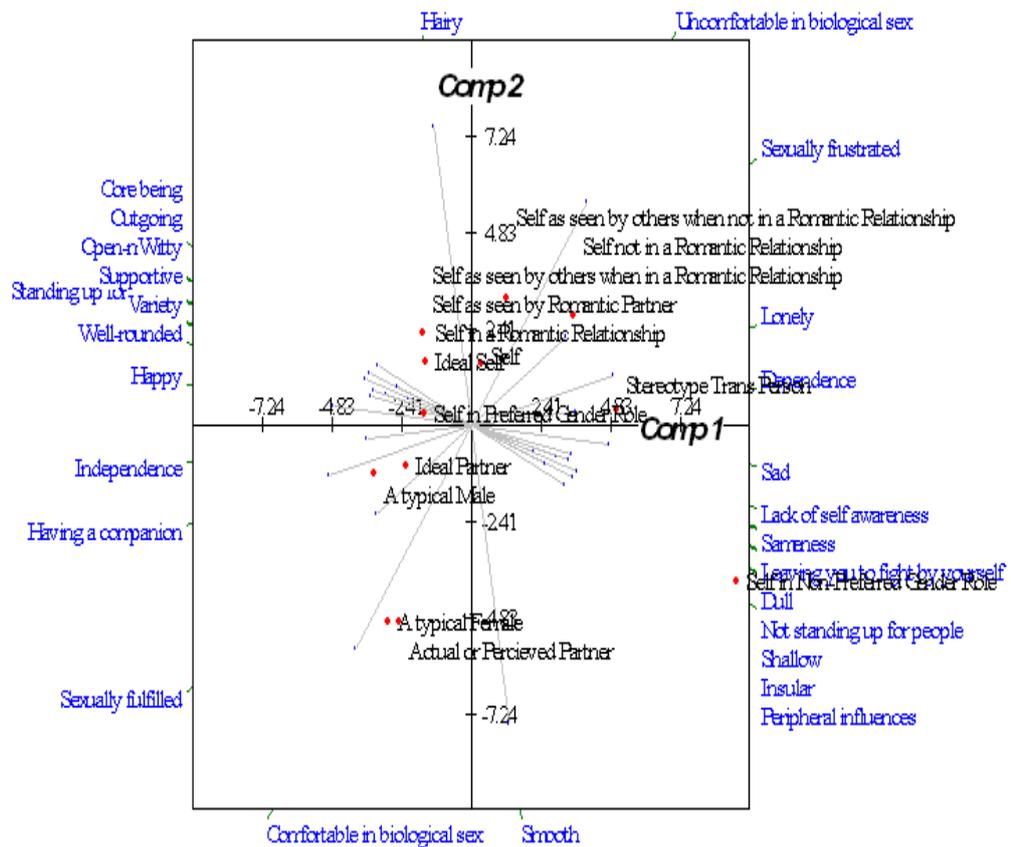


Figure 1: Mr Red's Plot of elements in construct space

3.3.2 Element statistics

Saliency of elements

Table 2 shows that Mr Red's view of himself when not in a romantic relationship is more salient than his view of himself when in a romantic relationship, as measured by the loading on component 1. However, this result is not consistent with the number of extreme and midpoint ratings. Both measures show that 'self as seen by others when in a romantic relationship' is

more salient for Mr Red than ‘self as seen by others when not in a romantic relationship’.

Element	Loading on component 1	Number of extreme ratings (1 or 7)	Number of midpoint ratings (4)
Self in a romantic relationship (RR)	-1.58	9	0
Self not in a romantic relationship (RR)	3.51	4	1
Self as seen by others when in a romantic relationship	-1.68	10	2
Self as seen by others when not in a romantic relationship	1.23	6	2

Table 2: Saliency of elements for Mr Red

Distances between elements

Table 3 shows that Mr Red construes himself in a romantic relationship identically to the way he construes his ideal self. The distances between other elements indicate that these are neither very similar nor very dissimilar.

Elements	Distance
Self in RR & Self not in RR	1.01
Self in RR & Ideal self	0.00
Self not in RR & Ideal self	1.01
Self & A typical male	0.84
Ideal self & A typical male	0.69
Self & A typical female	1.16
Ideal self & A typical female	0.97
Self & Stereotypical transperson	1.05
Ideal self & Stereotypical transperson	1.11

Table 3: Distance between elements for Mr Red

3.3.3 Construct statistics

Construct superordinacy

Mr Red's superordinate constructs are 'hairy – smooth' (18.02% variance), 'uncomfortable in biological sex – comfortable in biological sex' (16.11%), 'sexually fulfilled – sexually frustrated' (11.18%), 'having a companion – lonely' (10.70%), and 'happy – sad' (7.58%). Participants' individual measurement value tables are provided in Appendix 14.

Construct correlations

Significant correlations between the supplied construct 'uncomfortable/comfortable in biological sex' and other constructs indicate that Mr. Red construes people who are uncomfortable in their biological sex as 'dependent' ($r = -0.63$) and 'hairy' ($r = 0.58$). Participants' individual content analysis tables are provided in Appendix 15.

3.3.4 Implicative dilemmas

No implicative dilemmas were found in Mr Red's grid.

3.3.5 Conflict analysis

Not being in a romantic relationship (13.4% conflict) is more conflictual for Mr. Red than being in a romantic relationship (3.5%). 'Self in non-preferred gender role' (10.5%), 'partner' (9.9%), 'stereotype transperson' (9.1%), 'a typical female' (9.1%) and 'self' (8.0%) were conflictual elements. Participants' individual conflict analysis tables are provided in Appendix 16.

3.3.6 Experience Cycle Methodology category groupings of reconstrual pathway (Oades and Viney, 2000).

Table 4 provides examples taken from Mr Red's interview. These suggest that his experience cycle included loose prediction, high investment and invalidation, which eventually led to significant revision in his construal about romantic relationships.

Phase	Category	Example
Anticipation	Loose prediction	"I don't really think I had any (options), to be honest... I suppose ... I don't think there were ... I don't really think about options. I don't think I felt that anything was closed to me um because (pauses) I'm out in my life anyway".
Investment	High investment	"I think it's (expectations) incredibly important. You know, because there's no point for me being with somebody who didn't get that um ... the stuff I talked about. There's no point in doing it, if they didn't mean it."
Dis/confirmation	Invalidation	"I was not expecting to fall... I was not expecting to get married. I was not expecting to, to fall in love quite so strongly, and to have somebody feel the same about me. I was not expecting to be able to explore other relationships within that, as well. Um, I thought at some point I might find somebody and you know, settle down a bit more and be in love again. But not to this ... not to the depth of the connection we have. I think it's really ... it's incredibly strong".
Construct revision	Significant revision	"I've learned much more about myself and what my needs are ... I kind of ... became more of a person ... I've become even more solid as a person". "Maybe the reason this happened to me is because ... I'm quite ashamed by this, but ... if I hadn't transitioned, I don't know if I would be ... it has made me much more of an open-minded person, much more supportive and much more understanding..."

Table 4: Experience Cycle Method Analysis of category groupings for Mr Red

3.3.7 ABC Technique

Mr Red's responses to the ABC technique indicate his preference for having a romantic relationship, and that there is no motivation for this to change.

A: The problem construct

A₁: Not having a romantic relationship

A₂: Having a romantic relationship



B: Elaboration of A (problem construct)

B₁: Disadvantage of A₁

B₂: Advantages of A₂

Lack of companionship and connection with others

Companionship – having someone to laugh and cry with. Having someone to share bodies with

C: Defining the dilemma

C₂: Advantages of A₁

C₁: Disadvantages of A₂

None at present

None now with an open relationship – Previously it would have been independence

3.4 Mr. Orange

Mr Orange was a 24 year old white British transman. He was not in a romantic relationship during the time of his interview. His previous relationship had lasted fourteen months, and had ended six months before the interview. Mr Orange described his gender identity as being “outside of male and female. In a way, I am both”. He explained that he developed this definition because “my body doesn’t match my brain sex. Therefore, I am not female and not male. I am something else. Transman is as good a name as any”.

3.5 Mr Orange’s repertory grid

3.5.1 *Principal component analysis*

Percentage of variance accounted for by the components

The percentages of variance accounted for by the first (62.54 %) and second (13.96 %) components from principal component analysis of Mr Orange’s grid are suggestive of a relatively tight system of construing, and as such, relatively low cognitive complexity.

Plot of elements in construct space

The plot (see Figure 2) shows that Mr Orange’s principal dimension of construing contrasts people characterised as ‘seeing someone they love’, ‘being comfortable’, ‘happy’, and ‘confident’, with those characterised as ‘seeing someone they hate’, ‘doesn’t fit’, ‘sad’, and ‘scared’. ‘Ideal self’ and ‘ideal partner’ are construed in the former terms, and ‘stereotype transperson’, and ‘self in non-preferred gender role’ are construed in the latter. Mr Orange’s second major dimension of construing contrasts people such as a ‘stereotype transperson’ and ‘self in a romantic relationship’, characterised by being ‘uncomfortable in biological sex’, ‘different’, and ‘not worrying what I’m supposed to be’, with ‘a typical female’ and ‘a typical male’, characterised by being ‘comfortable in biological sex’, ‘clone’, and ‘conforming’.

Stater Analyses for Mr Orange's Grid
 Axis Range: -9.54 to 9.54

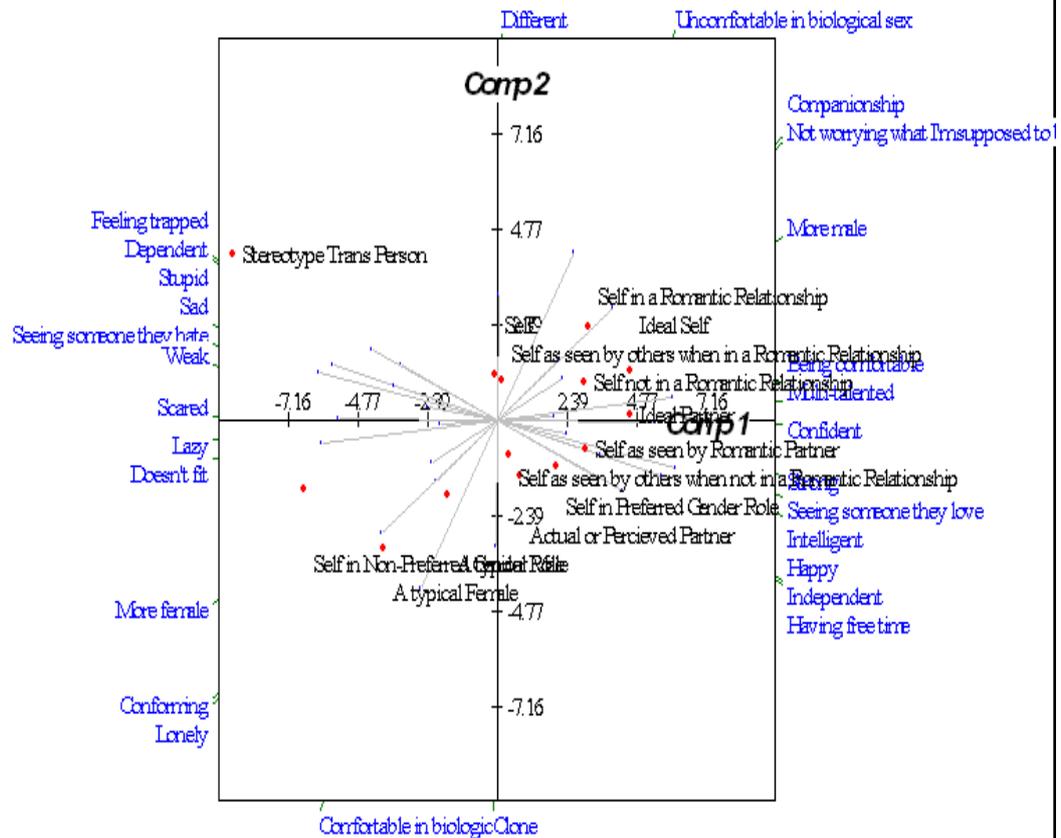


Figure 2: Mr Orange's Plot of elements in construct space

3.5.2 Element statistics

Saliency of elements

Table 5 shows that Mr Orange's view of himself when in a romantic relationship is more salient than his view of himself when he is not in a romantic relationship. Both measures are congruent in relation to this. However, the measures differ in that the loadings on the first component suggest that Mr Orange's construal of himself as seen by others when not in a romantic relationship is more salient than his construal of himself as seen by others when

in a romantic relationship. The measure of extreme ratings does not show this, but both measures suggest only a small difference.

Element	Loading on component 1	Number of extreme ratings (1 or 7)	Number of midpoint ratings (4)
Self in a romantic relationship (RR)	3.09	8	0
Self not in a romantic relationship (RR)	2.96	7	0
Self as seen by others when in a romantic relationship	0.13	1	0
Self as seen by others when not in a romantic relationship	0.38	0	0

Table 5: Saliency of elements for Mr Orange

Distances between elements

Table 6 shows that Mr Orange construes himself as similar to his ‘ideal self’ whether or not he is in a romantic relationship. His view of his ‘ideal self’, however, is dissimilar from his view of a ‘stereotypic transperson’.

Elements	Distance
Self in RR & Self not in RR	0.47
Self in RR & Ideal self	0.47
Self not in RR & Ideal self	0.43
Self & A typical male	0.71
Ideal self & A typical male	1.15
Self & A typical female	0.97
Ideal self & A typical female	1.35
Self & Stereotypical transperson	1.35
Ideal self & Stereotypical transperson	1.92

Table 6: Distance between elements for Mr Orange

3.5.3 Construct statistics

Construct superordinacy

Mr Orange's superordinate constructs are 'seeing someone they love – seeing someone they hate' (11.92%), 'being comfortable – doesn't fit' (11.01%), 'uncomfortable in biological sex - comfortable in biological sex' (10.19%), 'happy – sad' (10.19%), 'confident – scared' (9.02%) and 'not worrying what I'm supposed to be – conforming' (8.29%).

Construct correlations

Significant correlations between the supplied construct 'uncomfortable/comfortable in biological sex and other constructs indicate that Mr Orange construes people who are uncomfortable in their biological sex as 'more male' (0.68).

3.5.4 Implicative dilemmas

No implicative dilemmas were found in Mr Orange's grid.

3.5.5 Conflict analysis

Being in a romantic relationship (9.3%) is more conflictual than not being in a romantic relationship (7.1%). As well as this, a 'stereotype transperson' (17.5%), 'self in non-preferred gender role' (11.9%), 'a typical female' (11.4%), 'self in a romantic relationship' (9.3%) and 'a typical male' (9.0%) are conflictual elements for Mr Orange.

3.5.6 Experience Cycle Methodology category groupings of reconstrual pathway (Oades and Viney, 2000).

Table 7 provides examples taken from Mr Orange’s interview. These suggest that his experience cycle included loose prediction, high investment and invalidation, which eventually led to significant revision in his construal about romantic relationships.

Phase	Category	Example
Anticipation	Loose prediction	“Expectations, I don’t think I ever really have, um expectations, um, because I’m always worried about people’s reactions. I don’t try to think, um, expectations, or, um... Everyone is completely different from everybody else, and so I just, ah, I take each person as completely apart from everybody else. I don’t, ah ... I, I have no or very limited predictions as to what, who, I would wind up with.”
Investment	High investment	“Yeah, it matters a lot (laughs). It’s the initial ... it’s always the, um, as I say, it’s the initial stages of a relationship which is scary for everybody. I mean, I’m not saying it’s just me. But, for, I think this is probably just like an added extra dimension for me, um, coming into a relationship. I mean my ... there’s a lot because I want to try and make it work if I, if I like someone enough to, you know, want to enter a relationship with them. Um, it, it really matters and it worries me, you know, um, when it does happen. It’s like, you know, it almost keeps me awake, like what (laughs) am I supposed to say or what am I supposed to do?”
Dis/confirmation	Invalidation	“I think I worry too much ... I’m fairly cynical as well. I think that, you know, people won’t understand or, they won’t have enough patience, whereas, in my experience, and even with just dating history rather than relationship history, people have just been okay, you know, well, give me a, give me a little while.”
Construct revision	Significant revision	“I should relax and be confident and, you know, happy in who I am... If I’m happy, and I’m confident and relaxed, other people will be too, you know, because if it’s not an issue for me, then they’ll think it’s not an issue at all”.

Table 7: Experience Cycle Method Analysis of category groupings for Mr Orange

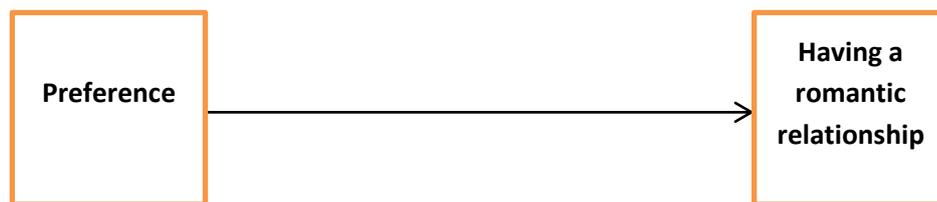
3.5.7 ABC Technique

Mr Orange's responses to the ABC technique indicate his preference for having a romantic relationship, his motivations for pursuing this, and the reasons he may be reluctant to engage in a romantic relationship.

A: The problem construct

A₁: Not having a romantic relationship

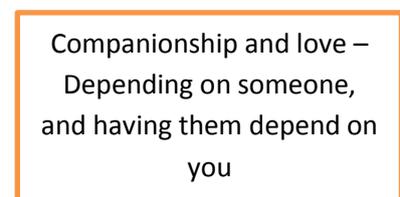
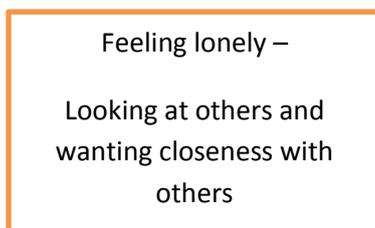
A₂: Having a romantic relationship



B: Elaboration of A (problem construct)

B₁: Disadvantage of A₁

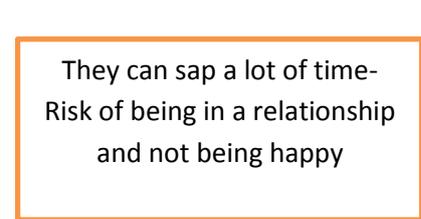
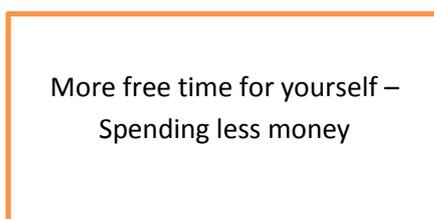
B₂: Advantages of A₂



C: Defining the dilemma

C₂: Advantages of A₁

C₁: Disadvantages of A₂



Mr/s Yellow was a 31 year old white British genderqueer transperson. She was born biologically female, and preferred people to use the pronouns he and she interchangeably in reference to him. Mr/s Yellow was in a new romantic relationship at the time of the interview. She had recently broken up from a seven year relationship with a lesbian partner, with whom she had a son. Mr/s Yellow described his gender identity as “hard to define, not a boy, not a girl, but sometimes a bit of both. A place away from binary ideas of gender, although am aware that sounds contradictory.” He said that this definition fitted her because she was “finding it increasingly impossible to identify as a female woman, and not identifying as male”.

3.7 Mr/s Yellow’s grid

3.7.1 *Principal component analysis*

Percentage of variance accounted for by the components

The percentages of variance accounted for by the first (69.02 %) and second (19.16 %) components from principal component analysis of Mr/s Yellow’s grid are suggestive of a tight system of construing, and as such, low cognitive complexity.

Plot of elements in construct space

The plot (Figure 3) shows that Mr/s Yellow’s principal dimension of construing contrasts people who are characterised as being ‘visible in a different way’, ‘confidence in self’, ‘confident’ and ‘having to change things to suit self’, with those who are characterised as ‘feeling invisible’, ‘swayed by magazines’, ‘self-hatred’ and ‘following something to the letter’. ‘Ideal partner’ and ‘ideal self’ are construed in the former terms, and ‘stereotype transperson’, ‘self in non-preferred gender role’ and ‘a typical female’ are construed in the latter. Mr/s Yellow’s second major dimension of construing contrasts people such ‘a typical male’, characterised as ‘buying into gender binary’, ‘being an emotional cripple’ and ‘following something to the letter’, with ‘self when not in a romantic

relationship' and 'self', who are associated with 'queerness', 'not afraid of emotions' and 'having to change things to suit self'.

10/05/2011 (09:53:20)

Stater Analyses for Mr/s Yellow's Grid

Axis Range: -12.15 to 12.15

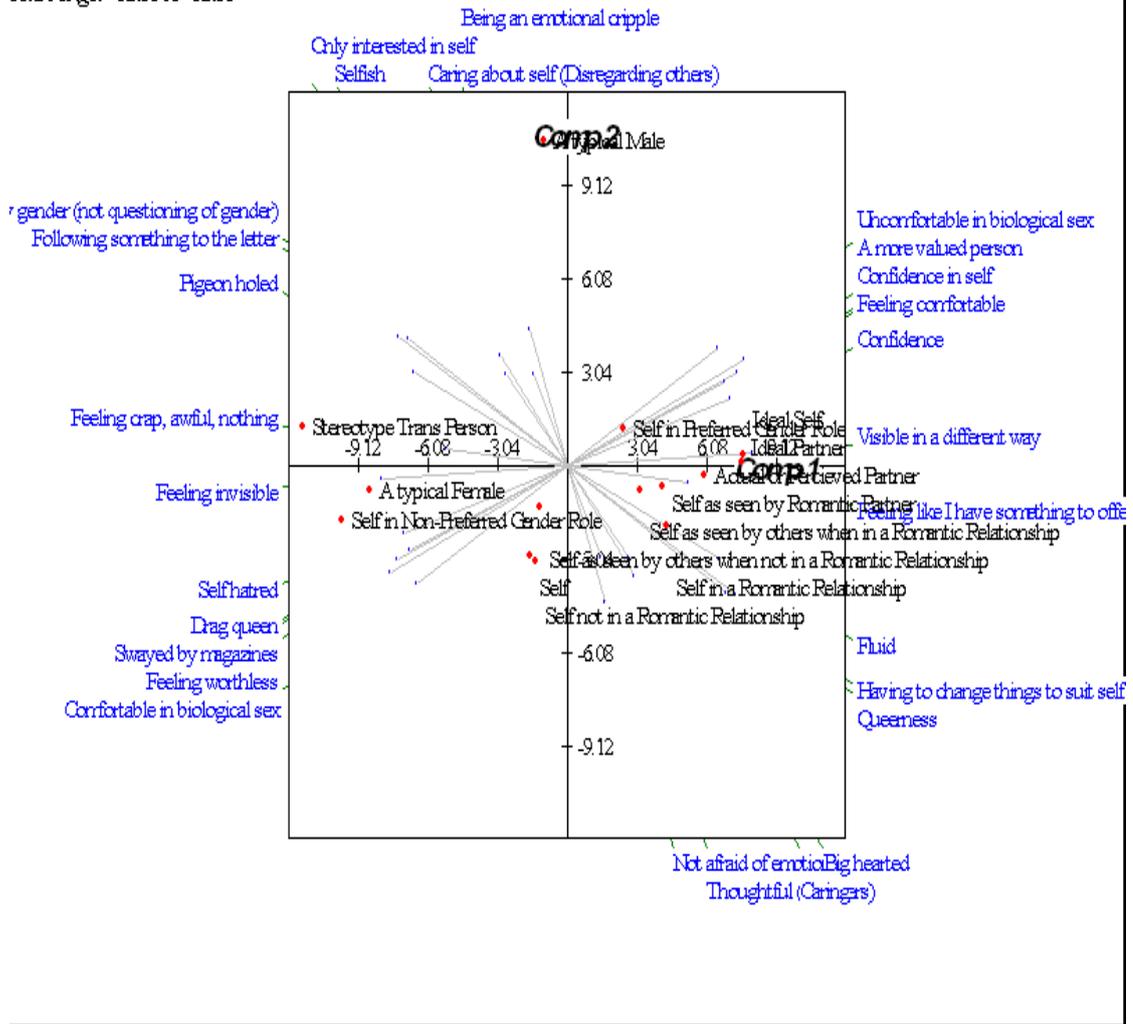


Figure 3: Mr/s Yellow's Plot of elements in construct space

3.7.2 *Element statistics*

Saliency of elements

Table 8 shows that both measures suggest that Mr/s Yellow's view of himself when in a romantic relationship is more salient than his view of himself when he is not in a romantic relationship. Both measures also indicate that his view of himself as seen by others when in a romantic relationship is more salient than his view of himself as seen by others when not in a romantic relationship.

Element	Loading on component 1	Number of extreme ratings (1 or 7)	Number of midpoint ratings (4)
Self in a romantic relationship (RR)	4.33	5	1
Self not in a romantic relationship (RR)	-1.37	2	4
Self as seen by others when in a romantic relationship	3.15	3	0
Self as seen by others when not in a romantic relationship	-1.21	3	7

Table 8: Saliency of elements for Mr/s Yellow

Distances between elements

Table 9 shows that Mr/s Yellow construes herself as rather closer to her ideal self when she is, than when she is not, in a romantic relationship. Her view of her 'ideal self' is dissimilar from that of 'a typical female', and there is even greater difference in his views of his 'ideal self' and a 'stereotypical transperson'.

Elements	Distance
Self in RR & Self not in RR	0.60
Self in RR & Ideal self	0.50
Self not in RR & Ideal self	0.97
Self & A typical male	1.27
Ideal self & A typical male	1.29
Self & A typical female	0.84
Ideal self & A typical female	1.55
Self & Stereotypical transperson	1.07
Ideal self & Stereotypical transperson	1.81

Table 9: Distance between elements for Mr/s Yellow

3.7.3 Construct statistics

Construct superordinacy

Mr/s Yellow's superordinate constructs (in order of superordinacy) are 'visible in a different way – feeling indivisible' (10.46%), 'a more valued person – feeling worthless' (10.10%) and 'having to change things to suit self – following something to the letter' (10.03%).

Construct correlations

Significant correlations between the supplied construct 'uncomfortable/comfortable in biological sex' and other constructs indicate that Mr/s Yellow construes people who are uncomfortable in biological sex as 'feeling comfortable' (0.91), 'a more valued person' (0.88), 'confidence in self' (0.87), 'confidence' (0.83), 'visible in a different way' (0.73), 'feeling like I have something to offer' (0.70) and 'fluid' (0.59).

3.7.4 Implicative dilemmas

No implicative dilemmas were found in Mr/s Yellow's grid.

3.7.5 Conflict analysis

Being in a romantic relationship (4.3%) is less conflictual than not being in a romantic relationship (10.4%). As well as this, 'self in non-preferred gender role' (14.7%), 'a typical male' (13.6%), 'self' (10.4%) and 'self not in a romantic relationship' (10.4%) are conflictual elements for Mr/s Yellow.

3.7.6 Experience Cycle Methodology category groupings of reconstrual pathway (Oades and Viney, 2000).

Table 10 provides examples taken from Mr/s Yellow's interview. These suggest that his experience cycle included loose prediction, low investment and invalidation, which eventually led to significant revision in his construal about romantic relationships.

Phase	Category	Example
Anticipation	Loose prediction	"Um, my expectations, I don't really... I suppose I just want someone that treats me well... I think it's easier to just kind of stay in the present and not try and imagine what might be, in case that makes me get hurt, kind of thing... So yeah, I think, well, just see how it goes..."
Investment	Low investment	"It probably wouldn't really mean that much if it were to finish with (new partner's name) like today... Because yeah, nothing will ever hurt me as much as this has hurt me." (reference to previous relationship breakdown)
Dis/confirmation	Invalidation	"Completely the opposite of how I ever thought things would happen... I knew that we like weren't that great, kind of thing, towards the end of our relationship, but I didn't actually think it was something we couldn't sort out... I know it makes me sound really kind of stupid and stuff, but I didn't, I didn't think for a second that we would break up. And it came as quite a shock.
Construct revision	Significant revision	Um, I think I'll try to kind of stay truer to who I am... and to actually remember who I am and what I like doing, and to always do that." "I don't think I will ever be so trusting ever again. Yeah, I'm not really sure how I'm ever going to trust anybody. I'm certainly not going to have a joint back account with anyone ever again."

Table 10: Experience Cycle Method Analysis of category groupings for Mr/s Yellow

3.7.7 ABC Technique

Mr/s Yellow's responses to the ABC technique indicate her preference for having a romantic relationship, her motivations for entering into one, and the reasons she may resist having a romantic relationship.

A: The problem construct

A₁: Not having a romantic relationship

A₂: Having a romantic relationship



B: Elaboration of A (problem construct)

B₁: Disadvantage of A₁

B₂: Advantages of A₂

Loneliness –
Less good sex, less frequent

Having someone to think about can be an advantage – It's nice to do stuff with someone like just watch a film and snuggle.

C: Defining the dilemma

C₂: Advantages of A₁

C₁: Disadvantages of A₂

Going out with friends more –Possibly less self-conscious and feeling better about body

Having someone else to think about and someone else to negotiate

3.8 Mr Green

Mr Green was a thirty year old white British transman. He defined being a transman, as being “masculine with a female history which I value and enjoy.” He was currently in a fairly new romantic relationship.

3.9 Mr Green’s repertory grid

3.9.1 *Principal component analysis*

Percentage of variance accounted for by the components

The percentages of variance accounted for by the first (70.57 %) and second (15.62 %) components from principal component analysis of Mr Green’s grid are suggestive of a tight system of construing, and a low level of cognitive complexity.

Plot of elements in construct space

The plot (see Figure 4) shows that Mr Green’s principal dimension of construing contrasts people who are characterised by qualities such as ‘fluid’, ‘freedom’ and ‘uncomfortable in biological sex’ with those characterised as ‘rigid’, ‘oppression’ and ‘comfortable in biological sex’. ‘Self as seen by romantic partner’ and ‘self as seen by others when in a romantic relationship’ are construed in the former terms, and ‘a typical male’, ‘a typical female’ and ‘self in non-preferred gender role’ are construed in the latter. Mr Green’s second major dimension of construing contrasts people such as ‘a typical male’ and ‘a typical female’, characterised by ‘stability’, ‘confidence’, ‘complete’, ‘emotionally mature’, ‘comfortable in biological sex’ and ‘transgressive’, with ‘a stereotype transperson’ and ‘self as seen by others when not in a romantic relationship’, who are characterised by ‘confusion’, ‘insecurity’, ‘damaged’, ‘emotionally immature’, ‘uncomfortable in biological sex’ and ‘categorised’.

Stater Analyses for Mr Green's Grid

Axis Range: -12.34 to 12.34

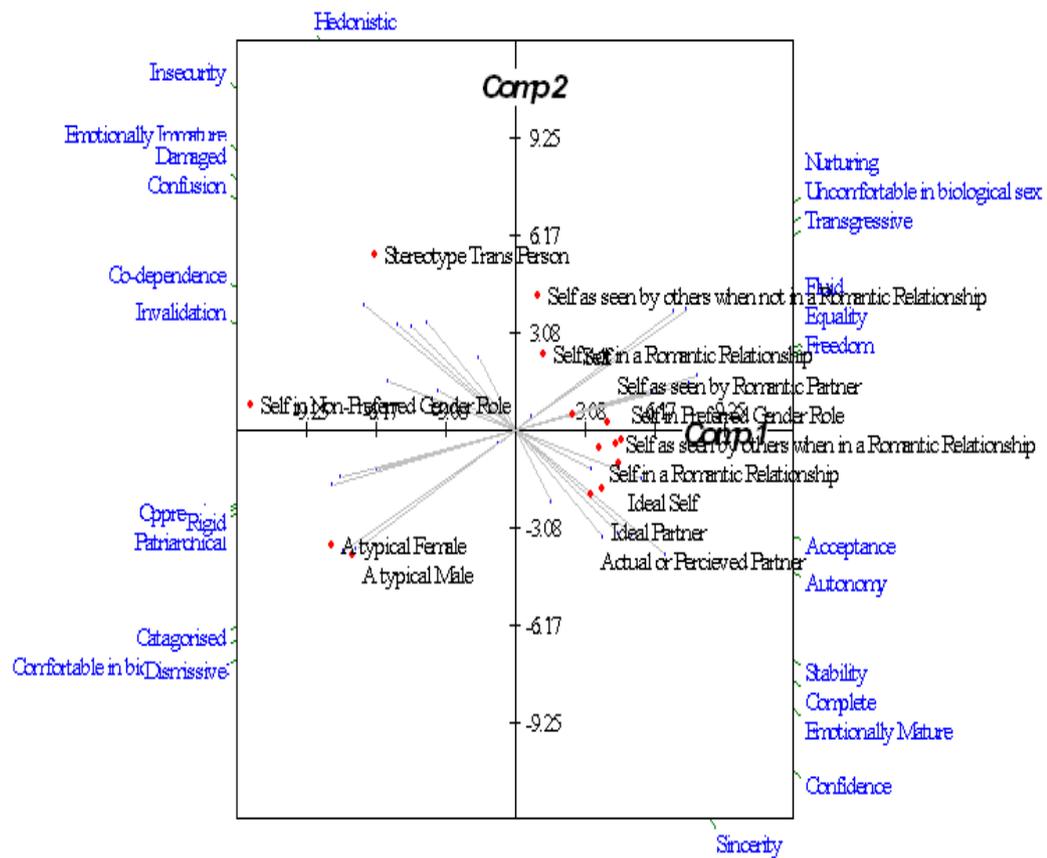


Figure 4: Mr Green's Plot of elements in construct space

3.9.2 Element statistics

Saliency of elements

Table 11 shows that both measures indicate that 'self in a romantic relationship' is more salient for Mr Green than 'self when not in a romantic relationship'. The measures also indicate that Mr Green construes 'self as seen by others when

in a romantic relationship’ as more salient than ‘self as seen by others when not in a romantic relationship’.

Element	Loading on component 1	Number of extreme ratings (1 or 7)	Number of midpoint ratings (4)
Self in a romantic relationship (RR)	3.69	5	0
Self not in a romantic relationship (RR)	1.25	2	2
Self as seen by others when in a romantic relationship	4.43	8	0
Self as seen by others when not in a romantic relationship	0.99	4	1

Table 11: Salience of elements for Mr Green

Distances between elements

Table 12 shows that Mr Green’s view of his ‘ideal self’ is very similar to that of himself in a romantic relationship.

Elements	Distance
Self in RR & Self not in RR	0.53
Self in RR & Ideal self	0.18
Self not in RR & Ideal self	0.60
Self & A typical male	1.22
Ideal self & A typical male	1.37
Self & A typical female	1.21
Ideal self & A typical female	1.36
Self & Stereotypical transperson	1.09
Ideal self & Stereotypical transperson	1.34

Table 12: Distance between elements for Mr Green

3.9.3 Construct statistics

Construct superordinacy

Mr Green's superordinate constructs are 'transgressive – categorised' (12.76%), 'uncomfortable in biological sex – comfortable in biological sex' (12.17%), 'fluid – rigid' (11.56%), 'freedom – oppression' (10.60%), and 'stability – confusion' (10.36%).

Construct correlations

Significant correlations between the supplied construct 'uncomfortable/comfortable in biological sex' and other constructs indicate that Mr Green construes people who are uncomfortable in their biological sex as displaying the qualities 'autonomy' (0.58), 'stability' (0.51), 'acceptance' (0.63), 'equality' (0.79), 'transgressive' (0.85), 'fluid' (0.87), and 'freedom' (0.85).

3.9.4 Implicative dilemmas

No implicative dilemmas were found in Mr Green's grid.

3.9.5 Conflict analysis

Mr Green construes being in a romantic relationship (2.4%) as less conflictual than not being in a romantic relationship (9.2%). As well as this, 'a typical female' (16.9%), 'self in non-preferred gender role' (16.3%), 'a typical male' (14.6%) and 'self as seen by others when not in a romantic relationship' (14.2%) are conflictual elements for Mr Green.

3.9.6 Experience Cycle Methodology category groupings of reconstrual pathway (Oades and Viney, 2000)

Table 13 provides examples taken from Mr Green’s interview. These suggest that his experience cycle included loose prediction, high investment and invalidation, which eventually led to significant revision in his construal about romantic relationships.

Phase	Category	Example
Anticipation	Loose prediction	“I don’t really know if I have any expectations”...“So many options are open to me now”.
Investment	High investment	“Yes, it matters a lot (um), yes, extremely important, so yes, it’s really important to me”
Dis/confirmation	Invalidation	“Well, my expectations of my last relationship are very different to what actually happened (um), like in a lot of levels”... “But um, yes, expectations,...they all went out the window. I think I expected to have a fairly equal relationship ..., but actually because she was so uncomfortable with me, she was really depressed for most of our relationship”.
Construct revision	Significant revision	“God, I learned so much (um) about, you know, in the context of relationships, me being trans, and just about how relationships work...” ... “I don’t think I could really articulate everything that I’ve learned from it because a lot of it is fairly sort of unconscious I think. But, I’ve certainly changed how I was...” ... “The way I view my life generally has changed a lot in the last two years, so the way I view everything has changed”

Table 13: Experience Cycle Method Analysis of category groupings for Mr Green

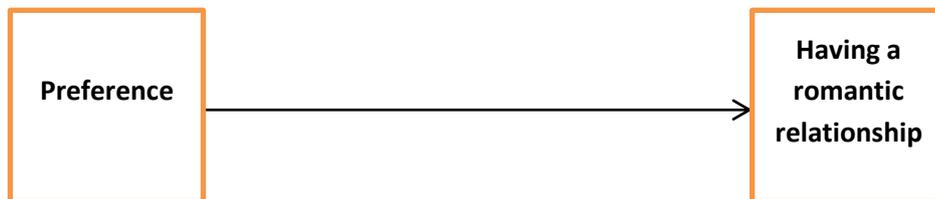
3.9.7 ABC Technique

Mr Green's responses to the ABC technique indicate his preference for having a romantic relationship, and the reasons he might engage in, or resist having a romantic relationship. It is worth noting that Mr Green uses a preferred pole of one his superordinate constructs as an advantage of having a romantic relationship, suggesting the value of this.

A: The problem construct

A₁: Not having a romantic relationship

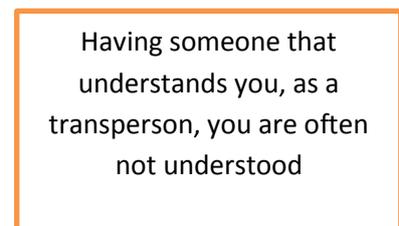
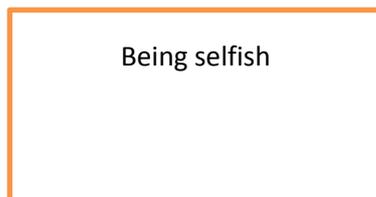
A₂: Having a romantic relationship



B: Elaboration of A (problem construct)

B₁: Disadvantage of A₁

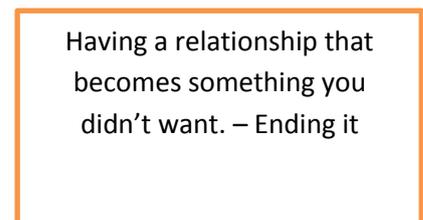
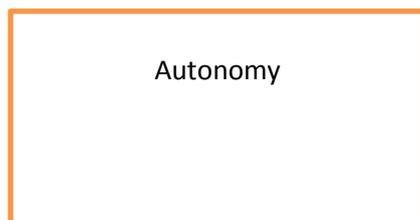
B₂: Advantages of A₂



C: Defining the dilemma

C₂: Advantages of A₁

C₁: Disadvantages of A₂



3.10 Mr Blue

Mr Blue was twenty years old, and identified as a white British transguy. He defined this as “being able to acknowledge my male identity at the same time as understanding my biological sex.” He explained that he had come to define his gender this way through “coming to terms with that I do feel male, and feeling lucky that I have an opportunity to make myself feel more like myself”. He was not engaged in a romantic relationship at the time of the interview, and his last relationship had been three weeks prior to the interview.

3.11 Mr Blue’s repertory grid

3.11.1 *Principal component analysis*

Percentage of variance accounted for by the components

The percentages of variance accounted for by the first (69.87 %) and second (11.99 %) components from principal component analysis of Mr Blue’s grid are suggestive of a tight system of construing, and a low level of cognitive complexity.

Plot of elements in construct space

The plot (see Figure 5) shows that Mr Blue’s principal dimension of construing contrasts people who are characterised as being ‘comfortable’, ‘cool’ and having ‘mutual understanding’ with those who are characterised as ‘uncomfortable’, ‘uncool’ and ‘ignorance’. ‘Ideal self’ and ‘ideal partner’ are construed in the former terms, and a ‘stereotypical transperson’ and ‘self in non-preferred gender role’ are construed in the latter. Mr Blue’s second major dimension of construing contrasts people such as ‘a typical male’, and a ‘stereotype transperson’, characterised by being ‘the guy with the biological penis’, with ‘a typical female’, construed as ‘being the girl in the relationship’.

Stater Analyses for Mr Blue's Grid

Axis Range: -8.88 to 8.88

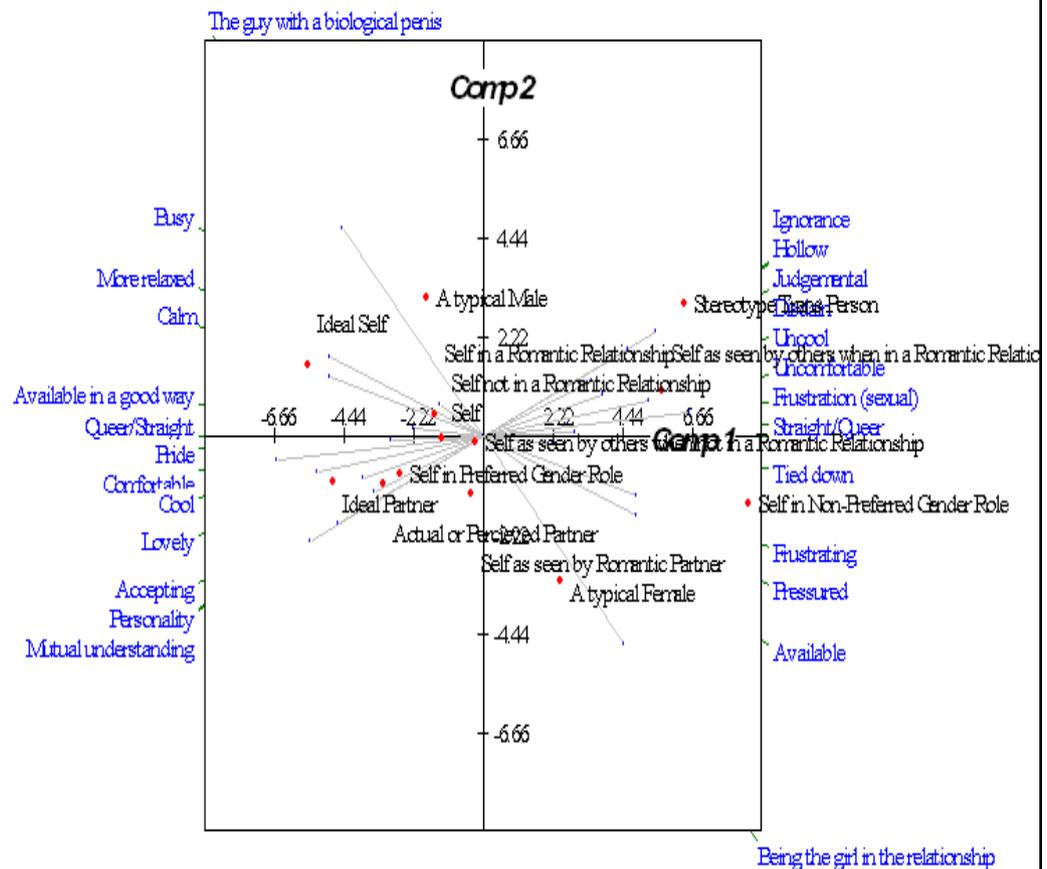


Figure 5: Mr Blue's Plot of elements in construct space

3.11.2 Element statistics

Salience of elements

Table 14 shows that both measures of salience suggest that self when in a romantic relationship and when not in a romantic relationship are relatively similar in salience. The loadings on the first component measure indicate that his construal of 'self as seen by others when in a romantic relationship' is more

salient than ‘self as seen by others when not in a romantic relationship’. This is not congruent with the measure of midpoint ratings.

Element	Loadings on component 1	Number of extreme ratings (1 or 7)	Number of midpoint ratings (4)
Self in a romantic relationship (RR)	-1.54	1	3
Self not in a romantic relationship (RR)	-1.34	0	2
Self as seen by others when in a romantic relationship	5.68	0	8
Self as seen by others when not in a romantic relationship	-0.28	0	3

Table 14: Salience of elements for Mr Blue

Distances between elements

Table 15 shows that Mr Blue’s view of his ‘ideal self’ is fairly similar to that of his construal of himself whether or not he is in a romantic relationship. Mr Blue also construes himself and ‘a typical male’ as being similar, whereas his view of his ‘ideal self’ and a ‘stereotype transperson’ are dissimilar.

Elements	Distance
Self in RR & Self not in RR	0.54
Self in RR & Ideal self	0.73
Self not in RR & Ideal self	0.71
Self & A typical male	0.54
Ideal self & A typical male	0.70
Self & A typical female	0.77
Ideal self & A typical female	1.34
Self & Stereotypical transperson	1.24
Ideal self & Stereotypical transperson	1.74

Table 15: Distance between elements for Mr Blue

3.11.3 Construct statistics

Construct superordinacy

Mr Blue's superordinate constructs are 'the guy with the biological penis – being the girl in the relationship' (14.13%), 'comfortable – uncomfortable' (13.98%), 'mutual understanding – ignorance' (12.52%) and 'cool – uncool' (10.17%).

Construct correlations

When completing the repertory grid, Mr Blue explained that he had no preference for either pole of the construct 'uncomfortable in biological sex – comfortable in biological sex'. He explained that he viewed my asking him to specify a preference to be similar to a question he has been asked about whether or not he would want to be rid of his "gender dysmorphia". He explained that although he was happy to continue his contribution to the study with the other aspects of the grid data and semi-structured interview, he chose not to participate in rating this construct. As such, Mr Blue's grid was analysed excluding the supplied construct.

3.11.4 Implicative dilemmas

No implicative dilemmas were found in Mr Blue's grid.

3.11.5 Conflict analysis

Mr Blue construes being in a romantic relationship (7.2%) as more conflictual than not being in a romantic relationship (4.8%). 'Self in non-preferred gender role' (10.4%), 'a typical female' (9.9%), a 'stereotype transperson' (9.3%), 'a typical male' (9.1%) and 'self in preferred gender role' (9.1%) are also conflictual elements for Mr Blue.

3.11.6 Experience Cycle Methodology category groupings of reconstrual pathway (Oades and Viney, 2000)

Table 16 provides examples taken from Mr Blue’s interview. These suggest that his experience cycle included loose prediction, high investment and validation, which eventually led to minimal revision in his construal about romantic relationships.

Phase	Category	Example
Anticipation	Loose prediction	“I suppose well, I don’t know. I expect the other person to be, you know, happy and accepting towards me, just like I would be of them, and things like that... I think possibilities are endless... wherever you meet new people, there’s an opportunity for that... I just don’t really, ah, look to the future too much. Um, or just maybe, will I like this person if, when I carry on learning more about them maybe – and um yeah, will they find me interesting?”
Investment	High investment	“I wouldn’t be in a relationship with someone who didn’t accept me and who didn’t find, see that I was male, and I wouldn’t expect to carry on a relationship with someone after like, they didn’t like me or if I discovered that I don’t really like them either.”
Dis/confirmation	Validation	“I just thought, well, I’m having fun, and um, I did think about him quite a lot, because he was being a jerk, and a bit distant. So it was a bit like chasing him up, but we didn’t really speak, so I mean, I knew it wouldn’t go anywhere, but I was just chasing up to see, like, what he told his friends about me, really more than anything else... When the relationship started, I just thought this will be funny to tell, like, my friends tomorrow. It’s like that kind of fun experience... It was all about a notch on a bed post, something to add to the experience box, because I had nothing.”
Construct revision	Minimal revision	“Do the same thing, just like, be myself, and see how the other person, like, reacts to that and just be, like honest and upfront from, like, the start”

Table 16: Experience Cycle Method Analysis of category groupings for Mr Blue

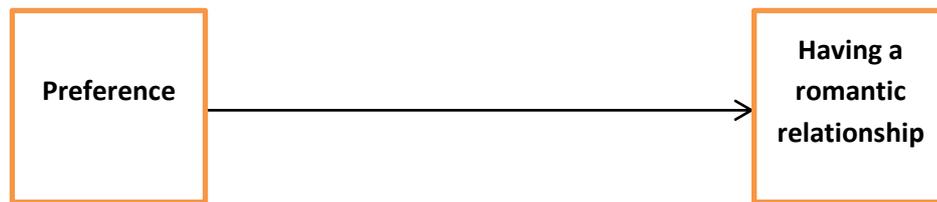
3.11.7 ABC Technique

Mr Blue's responses to the ABC technique indicate his preference for having a romantic relationship, and his reasons for resisting or pursuing a romantic relationship.

A: The problem construct

A₁: Not having a romantic relationship

A₂: Having a romantic relationship



B: Elaboration of A (problem construct)

B₁: Disadvantage of A₁

B₂: Advantages of A₂

If it's been a long time, you start to feel rejected

Being in a relationship and having fun with someone who you really like

C: Defining the dilemma

C₂: Advantages of A₁

C₁: Disadvantages of A₂

Freedom to play the field

Wondering what the other person thinks of you

3.12 Mr Violet

Violet was 31 years old, and identified as white British “transgender female to male”. He defined this as “not 100% male, but a male mind/soul in a female body.” He explained that he had come to define his gender in this way to “define oneself and know who I am and be able to communicate it to others”. He had not started the process of physically transitioning during the time of our interview, but had made up his mind, and had started seeking support for embarking on his transition. Mr Violet was in a long-term relationship (9 years), and living with, with his lesbian partner.

3.13 Mr Violet’s repertory grid

3.13.1 *Principal component analysis*

Percentage of variance accounted for by the components

The percentages of variance accounted for by the first (38.04 %) and second (20.57 %) components from principal component analysis of Mr Violet’s grid are suggestive of a loose system of construing, and thus a high level of cognitive complexity.

Plot of elements in construct space

The plot (Figure 6) shows that Mr Violet’s principal dimension of construing contrasts people who are ‘straightforward’, ‘sociable’, and ‘dominant’ with those who are characterised as ‘militant’, ‘unsociable’, and ‘submissive’. ‘Self not in a romantic relationship’, ‘self as seen by others when not in a romantic relationship’ and ‘a typical male’ are construed in the former terms, and ‘self in non-preferred gender role’ and ‘self as seen by romantic partner’ are construed in the latter. Mr Violet’s second major dimension of construing contrasts people such as ‘ideal partner’ and ‘self’, characterised by being ‘compassionate’, ‘perverse’, and ‘demure’, with the elements ‘self in non-preferred gender role’, ‘a typical male’ and ‘self as seen by others when not in a romantic relationship’, characterised by being ‘selfish’, ‘normal’, and ‘brash’.

Slater Analyses for Mr Violet's Grid

Axis Range: -5.93 to 5.93

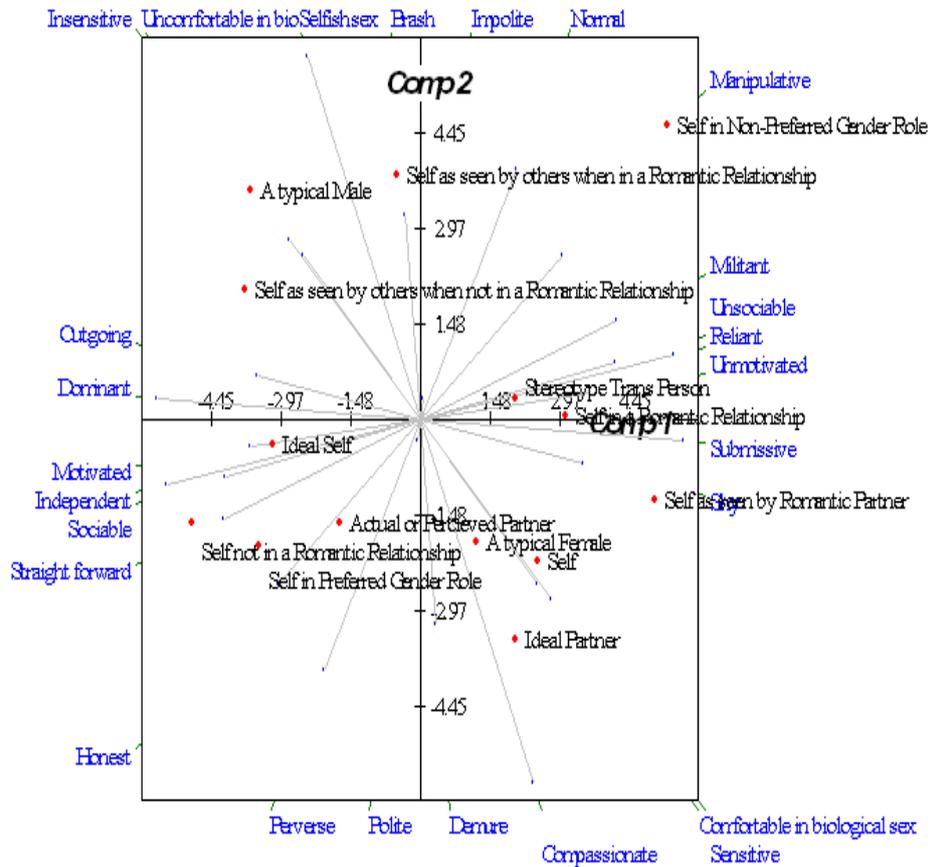


Figure 6: Mr Violet's Plot of elements in construct space

3.13.2 Element statistics

Salience of elements

Table 17 shows that both measures of salience indicate that 'self when not in a romantic relationship' is more salient than when in a romantic relationship. The loading on the first component measure indicates that 'self as seen by others when not in a romantic relationship' is more salient than 'self as seen by

others when not in a romantic relationship’. This is not congruent with the measurement of extreme and midpoint ratings.

Element	Loading on component 1	Number of extreme ratings (1 or 7)	Number of midpoint ratings (4)
Self in a romantic relationship (RR)	3.09	1	1
Self not in a romantic relationship (RR)	-4.87	5	0
Self as seen by others when in a romantic relationship	-0.50	2	1
Self as seen by others when not in a romantic relationship	-3.75	1	2

Table 17: Salience of elements for Mr Violet

Distances between elements

Table 18 shows that Mr Violet construes his ‘ideal self’ similarly to his ‘self when not in a romantic relationship’. The other elements are neither construed as very similar, nor very dissimilar

Elements	Distance
Self in RR & Self not in RR	1.06
Self in RR & Ideal self	0.93
Self not in RR & Ideal self	0.48
Self & A typical male	1.13
Ideal self & A typical male	0.83
Self & A typical female	0.72
Ideal self & A typical female	0.76
Self & Stereotypical transperson	0.80
Ideal self & Stereotypical transperson	1.06

Table 18: Distance between elements for Mr Violet

3.13.3 Construct statistics

Construct superordinacy

Mr Violet's superordinate constructs are 'uncomfortable in biological sex – comfortable in biological sex' (15.11%), 'compassionate – selfish' (11.14%), 'perverse – normal' (10.51%), 'dominant – submissive' (9.92%) and 'independent – reliant' (9.51%).

Construct correlations

None of Mr Violet's constructs correlated significantly at a 5% significance level with the supplied construct 'uncomfortable/comfortable in biological sex'.

3.13.4 Implicative dilemmas

Mr Violet would like to be 'sociable', 'motivated' and 'dominant' but associates these characteristics with being 'selfish' ($r = 0.21, 0.21, \text{ and } 0.31$ respectively) and 'insensitive' ($r = 0.33, 0.33, \text{ and } 0.46$), neither of which he wishes to be. People who are 'motivated' are also seen as 'impolite' ($r = 0.30$).

3.13.5 Conflict analysis

Being in a romantic relationship (9.4%) is more conflictual than not being in a romantic relationship (1.3%). As well as this, 'self as seen by others when in a romantic relationship' (11.3%), 'self' (9.4%), and a 'stereotype transperson' (9.4%) are conflictual elements for Mr Violet.

3.13.6 Experience Cycle Methodology category groupings of reconstrual pathway (Oades and Viney, 2000).

Table 19 provides examples taken from Mr Violet’s interview. These suggest that his experience cycle included tight prediction, low investment and invalidation, which eventually led to significant revision in his construal about romantic relationships.

Phase	Category	Example
Anticipation	Tight prediction	“My prediction for the future is that if (partner’s name) will have me, I will still want to be with her. I’d love us to get married. We’re not going to have children, but I’d love to stay with her”.
Investment	Low investment	“I would have said that I put a lot of store in my beliefs and morals, but they, life has changed so much in the past few years”... “My expectations are changing. So I’m kind of more flexible now. I’m growing up and maturing and, so my expectations were everything to me, I’m more flexible because I appreciate how changeable life is”.
Dis/confirmation	Invalidation	“I think all expectations must go out the window, but I probably expected (name of partner) to finish with me. She didn’t, so that’s been very pleasing...that’s an understatement. I expected she’d run a mile. I never expected that she could try and grow with me and make that effort.”
Construct revision	Significant revision	“Um what I’ve learned is that I’m lovable and not a bad person. I do have good traits. I do have something worthwhile. I do have something to give. I’ve definitely learned that with women, there is a lot of code in language. When someone says – when you get off the phone – is that person okay, they’re not really saying are they okay, they’re saying what did you talk about?... It (relationships) isn’t just about sex. That’s probably the biggest thing I’ve learned, that relationships aren’t just about sex.”

Table 19: Experience Cycle Method Analysis of category groupings for Mr Violet

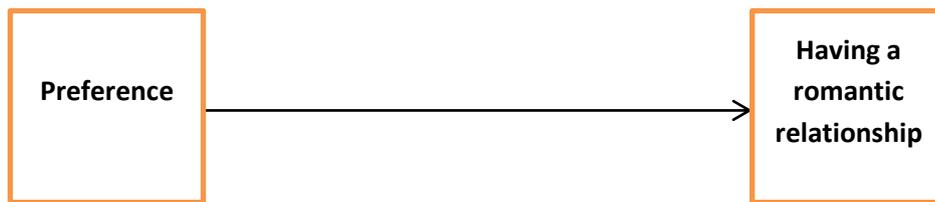
3.13.7 ABC Technique

Mr Violet's responses to the ABC technique indicate his preference for having a romantic relationship, and the pros and cons associated with this decision.

A: The problem construct

A₁: Not having a romantic relationship

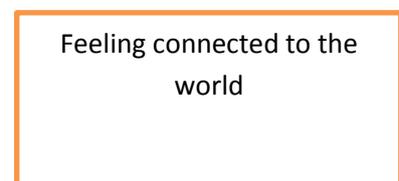
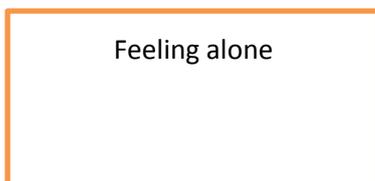
A₂: Having a romantic relationship



B: Elaboration of A (problem construct)

B₁: Disadvantage of A₁

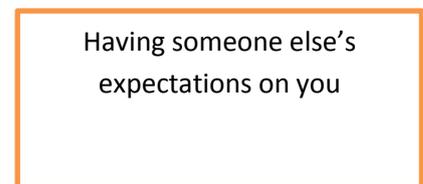
B₂: Advantages of A₂



C: Defining the dilemma

C₂: Advantages of A₁

C₁: Disadvantages of A₂



3.14 Content analysis of personal constructs (Feixas et al., 2002)

Table 20 shows the content categories of the constructs which correlated at a 5% significance level with the supplied construct: 'comfortable/uncomfortable in biological sex'. Out of 17 constructs, 10 (58%) were categorised as "personal", 2 (11%) were "relational" constructs, 2 (11%) were classified as "concrete descriptors", and 2 (11%) were classified as "values and interests" constructs. One (0.05%) construct was categorised as moral. In terms of subcategories, as indicated in Table 20, being uncomfortable in one's biological sex was predominantly associated with self-acceptance and being flexible but also with being dependent, respectful, and organised.

Only four participants were included in the content analysis categorisation, and the results are likely to be heavily skewed towards a high percentage of "personal" constructs, due to Mr/s Yellow's results. The seven constructs she provided which correlated with the supplied construct were all categorised as "personal" constructs (See Appendix 15).

# of constructs	Category	Construct content
1	1D	Respectful – Judgemental
2	3F	Dependent – Independent
1	4D	Organised – Disorganised
3	4F	Flexible – Rigid
5	4I	Self acceptance – Self criticism
1	4O	Relational other
2	6A	Ideological, political, religious, social, moral and gender values
1	7A	Physical characteristics
1	7O	Concrete descriptor other

Table 20: Content analysis figures

3.15 Summary

Analysis of participants' repertory grids and Tschudi's ABC technique showed that all participants preferred being in a romantic relationship. Data interpretation indicated only one participant construed 'self not in a romantic relationship' as more salient than 'self in a romantic relationship'. This participant was also exceptional in that he construed his 'ideal self' and 'self not in a romantic relationship' as similar, whereas all other participants stated the opposite. For half of the participants being in a romantic relationship was more conflictual than not being in one.

3.16 Thematic content analysis

The following section presents the qualitative themes which emerged from the Thematic Content Analysis (TCA) from all the interview data from the participants regarding their views and experiences of encountering romantic relationships.

Each overarching theme is presented together with the major themes and sub-themes in a thematic map. The sub-themes are further divided into sub-component themes, and due to space constraints two quotes are provided for each. Additional quotes can be made available on request.

All themes are provided as only one possible interpretation of the experiences portrayed. Moreover, interpretations reflect my personal views and assumptions regarding the complexity transgender people may face in negotiating romantic relationships. As such, the data may be interpreted differently by other researchers, and aspects of the data may be more prominent, reflecting their own personal beliefs and opinions. It is worth noting that all six accounts from the participants were rich and multi-layered. As such, it would not be possible to represent all the views and experiences of each participant in this section. There is also an acknowledged degree of overlap, opposition and agreement both between and within the themes portrayed here. With this in mind, my endeavour remained to present a

rigorous and rich experiential account of the researched experience of transgender romantic relationships.

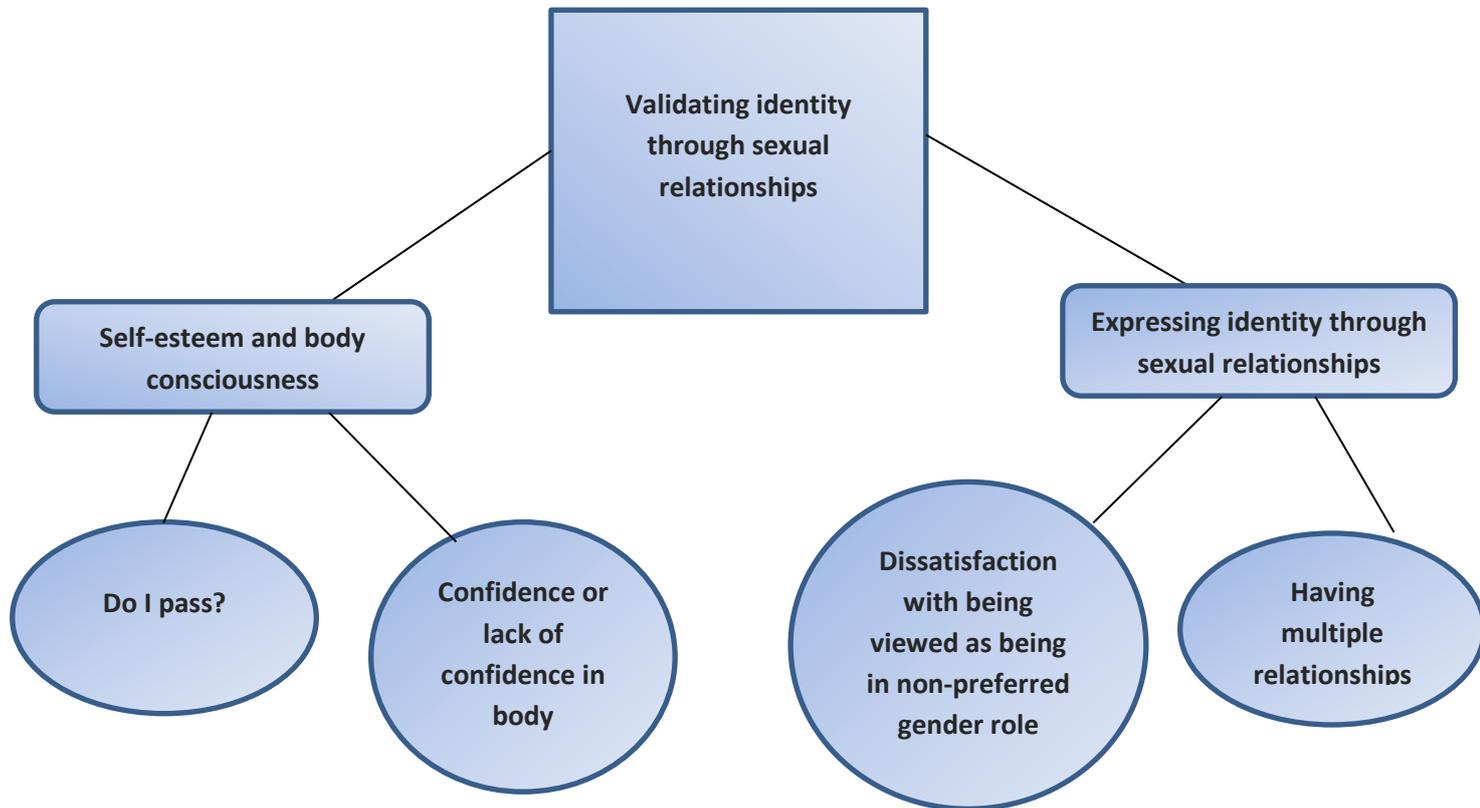
Four overarching themes emerged from the interview data. These are discussed below, together with their major and sub themes (see Table 21).

3.17 Emergent themes from rainbow participants

Overarching themes	Major themes	Sub themes
Validating identity through sexual relationships	Expressing identity through sexual relationships	Having multiple relationships
		Dissatisfaction with being viewed as being in non-preferred gender role
	Self-esteem and body consciousness	Do I pass? – (preferred gender)
		Growing confidence in body
Having a bi-gendered lens to view the world	A bi-gendered experience of the world	Insight into bi-gendered world
		Invisible identities
	Negotiating change in sexuality	Partners having to reconstrue
		Emotional and social complexity of transitioning
Facilitating greater understanding in society	Desire for acceptance / fear of rejection	Finding someone who loves me for me
		Fear of rejection
	Facilitating greater societal understanding	Social and political activism
		Explaining self in a cis-gendered world
	Intricacies of the “queer community”	Too close for comfort
		Feeling more understood
Learning from romantic relationships	Qualities that make a good romantic relationship	Difference between romantic relationships and just having sex
		Sharing political and social affiliations
		Having a laugh
	Learning about self	I am worthy (a worthwhile person)
		Not losing self (becoming subsumed in the other)

Table 21: Thematic analysis emergent themes from the group of participants

**3.18 Illustration 1: Thematic map of overarching theme 1:
Validating identity through sexual relationships**



Overview

This theme encompasses the participants' search for validation of their gender identities through sexual relationships. The nature of the sexual encounter often highlighted how they were seen in the eyes of the other. This was often expressed as validating or invalidating, depending on their preferred gender identity, self-perceived goodness of fit with this identity, level of confidence in their body, and through having multiple relationships as a way of satisfying different aspects of identity.

3.18.1 Major Theme 1: Expressing identity through sexual relationships

This theme was repeated with high frequency under the overarching theme. It outlines individuals' attempts at expressing or elaborating their identity through their sexual relationships. Both the type of relationship, and the repercussions of this are highlighted within the theme.

Sub-theme: Having multiple relationships

Some of the participants described a freedom to have sexual relationships outside a more established on-going relationship. Others talked about having multiple partners and negotiating boundaries within multiple relationships. As a way of understanding the desire to have multiple sexual relationships, with multiple partners, one participant explains:

For me, it means that ... It's the same, I suppose, as expressing the whole of my gender identity. It expresses the whole of my sexuality".

Mr Red

Another participant explains the concept of multiplicity in sexual relationships through his sexual identity. He explains:

I'm pan-sexual ... I used to say I was bisexual before I learnt the term and before I transitioned, because, um, now bisexuality seems so limited (laughs) like in a gender binary, so I just ... it isn't feminine or masculine qualities I look for. I can appreciate ... how a person expresses them, but I don't, um, ah, focus on that as a main factor".

Mr Blue

Sub-theme: Dissatisfaction with being viewed as being in non-preferred gender role

Related to the major theme of validating identity through sexual relationships, the dissatisfaction with being viewed as being in a non-preferred gender role emerged. This was often expressed through the intimacy related with the sexual encounter, or through feeling misunderstood:

Participant: *“This dissatisfaction from sex...I might have an orgasm, but I’m not satisfied. There’s something missing in my sex life. So, I’m thinking, this is what it is, to be able to act like a man when I’m with a woman rather than ... with (name of female 1), we had lesbian sex... Having sex with (name of female 2) was amazing... She didn’t want me as a woman. She didn’t want me to touch her as a woman. She wanted to ...”*

Interviewer: *“Experience you as a man?”*

Participant: *“Yes, suck my strap-on like it’s a cock.”*

Mr Violet

“Yeah, just because, like, ah, with people who, like, I mean, ask and stuff, I don’t want them to, like, think about it with me because, with testosterone their, like, genitals, grow and... like, I consider it like my dick. And, ah, but then I find it very hard to, like, convey that because, like, their perception of a penis is, like, on a man and, like, enough to, like, get hard, pee through and have, like, intercourse with. And, like, I know that mine can’t do that, but it’s still, ah, like, ah, my dick. ... And, yeah, it’s kind of hard to explain to people”.

Mr Blue

3.18.2 Major theme 2: Self-esteem and body consciousness

This theme was also repeated with high frequency. Many participants described a pre-occupation with their body. Most, but not all, participants had started the process of transitioning, some through invasive surgery, and others

through taking hormones, and by binding their breasts with fabric, so that they appeared less prominent. Participants expressed their self-esteem in relation to being conscious of their bodies, both through their understanding of how others viewed their bodies, as well as how they perceived their own bodies to be. Insecurities around “passing” (or appearing to be) in the preferred gender were voiced in the interviews. In addition, many participants expressed an increasing confidence in their body, and the new experience of a partner who felt attracted to their bodies, as they were:

Sub-theme: Do I pass? – (preferred gender)

“I’m not desperate for that confirmation that I’m okay, because I’ve got that already. So that I can... I could be very much more picky and choosy about, you know, if I feel that, that person doesn’t... we don’t connect or I don’t feel comfortable, then, um, I don’t... I don’t have to sleep with them. I think... whereas beforehand, I was still much more, kind of, searching for that validation that my body is okay, it’s okay to be like this, and I’m still sexy and looking for that from other people rather than from myself”

Mr Red

“I think that’s something that happens quite a lot in the trans community and I’ve seen it happen a lot with other people, you know. So you end up with the wrong people because especially early on in transition people are very unsure about their identity and about how well they’re going to pass and all that sort of thing.”

Mr Green

Sub-theme: Growing confidence in body

Some participants expressed a new and more positive way of viewing their body, through the eyes of a partner who was physically attracted to them. This experience could be interpreted as a liberating experience, and one in which participants could learn to think of their bodies in a more self-affirming manner:

Participant : *“Yeah and just kind of thinking that somebody’s reading your body in a way that’s different to how I read my body kind of thing. And yeah, excited I suppose is the word. Um, I don’t know. I can’t explain it. Um, do you know what I mean?”*

Interviewer: *“Um, a sense that someone sees your body differently, more positively than how you...”*

Participant: *“(Sniffs) yeah.”*

Interviewer: *“See it. And that’s... It’s new, it’s exciting, um...”*

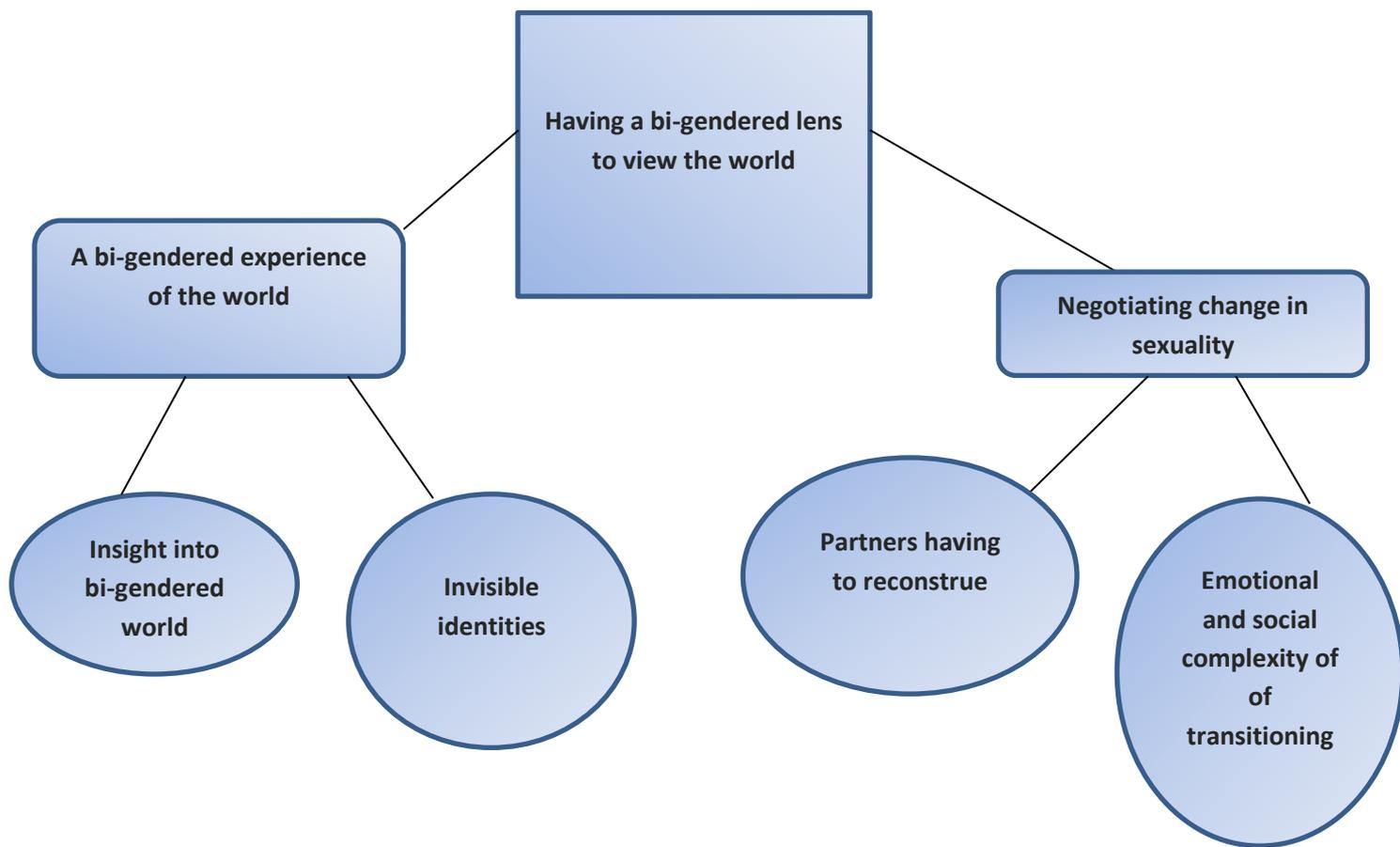
Participant: *“Yeah and it’s, it’s made me see my body differently as well, which I know sounds incredibly shallow and pathetic, but it has (laughs).”*

Mr/s Yellow

“Not just accepting it, but loving that part of me and finding somebody who loved my body for what it was. And I suppose there’s that kind of, the thin line between it being a, a novelty and just loving it kind of thing and finding that balance. But yeah, it’s finding somebody who, who could understand who I was and love me for that. And not expect anything different and not expect me to be, all right, you know, like, I can be with this person because in a couple of years they’re going to have a load of surgery so it’ll be fine. You know, but being with somebody who, who, um, because I’m not ever having another surgery, so (laughs) that’s never going to happen. So that’s never going to happen. So yeah, so being somebody who loves me for me and stands out and I think that’s... that was my main concern, was finding somebody who was comfortable with it. And who wasn’t just comfortable with it, but who loved it as well.”

Mr Red

3.19 **Illustration 2: Thematic map of overarching theme 2:
Having a bi-gendered lens to view the world**



Overview

Most participants expressed a rich insight that is accessible through having experienced the world as female, as well as male. This experience was often viewed as something they had gained in life, but as sometimes coming with a cost as well. In particular, the cost of not being seen as whole, or that an aspect of identity that was once available to participants, was now not recognisable to others. As such, the spontaneity in being instantly accepted within certain groups was also lost.

Participants also discussed transitioning in sexuality, as well as in their gender identity. Some discussed a discrepancy between how they were viewed externally, and what changes that created for them internally. Participants also

discussed having to negotiate a changing sexuality to others, as well as having to make sense of this themselves. Because sexuality is often defined as same sex or opposite sex attraction, participants who had partners witness their transition in gender may have also had to reconstrue their own sexual identity.

3.19.1 Major theme 3: A bi-gendered experience of the world

Participants spoke about the insight they acquire through experiencing the world as both male and female as a type of double-edged sword containing both strengths and weaknesses:

Sub-theme: Insight into a bi-gendered world

“When is the good point to tell a woman, sorry, I used to be a man? I do have the inside track. I can do manicures. I can do pedicures. I understand the clitoris. I’d be the perfect husband in that sense. I can cook. I can clean. I can iron. I can do all those typically domestic female things, but I can also do all the DIY, the putting up the shelves, the fixing the car. So, I’ve got all that going for me. But, if that woman wants a cock, there’s nothing I can do about it. That would make me feel not a man because if you had a born man and he had an accident and he lost his penis, he’d still be a man, but I will never be a man.”

Mr Violet

“... My experience of being female and other women has been that women are much more emotional than men and, you know, just chuck PMT in there as well and it all goes haywire. So it was, yes, really kind of like tumultuous emotional intense relationships. Whereas as a guy my relationships with men have been just about, shall we have sex? Yes, right, great. Should we go out? Yes, you know, it’s kind of like completely... like much more superficial...”

Mr Green

Sub-theme: Invisible identities

Participants spoke about loss associated with the experience of having identities that were no longer visible to others with whom they previously were able to easily identify.

“One of the hardest things about transitioning, for me, was not being seen as an obvious dyke anymore. You know, kind of, that was a big part of my identity and I was quite dykish and sort of baby dyke kind of looking. And so not being recognised for that anymore... I got recognised for being a dyke and you’d see other sort of gay women out on the street and you’d kind of nod and you’d recognise each other. And now of course, I do that... I still recognise them and I nod and smile, but to them it looks like a lecherous guy looking at two women together, how lovely kind of thing, you know. So it doesn’t look like it’s coming from a dyke anymore. So of course I have to stop and think, as you know, it’s not appropriate for me to smile and nod at them, because they don’t see who is actually nodding at them. They just see a guy nodding. So that’s... You know, that’s quite hard as well and I think...”

Mr Red

The experience of not being recognised as a “baby dyke” (a young boyish looking lesbian) came as a significant loss to Mr Red. This had previously been a part of his identity in which he had experienced being part of a community. This also came with a greater experience of loss, as his values remained the same. He expressed that he did not identify with a mainstream heterosexual community, yet could not nod his head in mutual acknowledgment of a community he felt a part of, due to how he was perceived by its members.

“I won’t be able to go up to the little old lady and say, excuse me. Would you like a lift? It’s raining. She’ll go, oh, my God. A man. What’s wrong? I’m not looking forward to women thinking certain things about me or... talking to kids walking a dog. I can’t just go, hi, what’s your dog’s name? As a man, I will have to behave differently because I’ve been allowed... even as I feel I am male, I have been allowed to behave in society as somebody

not to be afraid of. If I was 6'2" and burly, you know... so, there's different expectations from you... It's just so weird, you know, when you're driving and you let somebody past... people thank you all the time. Now, men never thank me. They just stare straight ahead. It's just little things like that."

Mr Violet

In this quote, Mr Violet discusses the qualities that he holds in high regard within social interaction. These are qualities that he seems to take for granted as ones that should be prevalent in society, regardless of gender. Mr Violet expresses being struck by finding that these qualities are no longer expected of him now that he is viewed as male.

3.19.2 Major theme 4: Negotiating change in sexuality

The above theme is discussed in relation to how it impacts on the participant, as well as how it impacted on the participant's partners. Not only were participants often perceived as having changed sexual preference (defined by same or opposite sex preference), but some participants also experienced a change in being attracted to people they would not have previously considered as sexually attractive. Some participants made sense of this by explaining that attraction in the "queer (or trans) community" is not about bodies, but about an attraction to the individual qualities of a person, where aspects of masculinity and/or femininity are assumed to exist whether or not the physical body is seen as male or female.

Sub-theme: Partners having to reconstrue

"She's trying to, you know, be supportive and, you know... but, I am supportive back... Ah, she said she loves me and she will still love me and I believe she believes that. Change happens, but my only fear going through the transition is losing her. I don't care what people say. I'm not scared of the surgery. I'm looking forward to the surgery. I can't wait to start testosterone, although I am worried about my sex drive because everyone tells me it'll really increase... She believes she will still want me, but I'm...

that's the only thing I'm scared of, is losing her, um, because she is gay. I'm going to have a male voice. She's going to roll over to a muscly body because I will be muscular. I will be a little gym bunny because... to make up for my shortness".

Mr Violet

"I was kind of having a couple of one-night-stands with a couple of guys, and a couple of times who kind of... I slept with them and they were like, oh, does this mean I'm straight. And I just went, no, you just don't get it at all. Or the kind of the, the swapping numbers and somebody being interested in you and then they hear through the grapevine that I'm trans and then I get... You know there's one guy who kept texting me saying; you know I'm not a lesbian. Yes, neither am I (laughs) kind of thing."

Mr Red

Sub-theme: Emotional and social complexity of transitioning

Participants discussed the emotional and social impact of having to negotiate the impact of transitioning on themselves. This often took the form of elaborated reconstrual following encountering different experiences:

Participant: It's through my own experiences that I've come to that conclusion that it could be anyone. I mean, um, it was very surprising for me to find myself in a relationship with a lesbian, for example. Like, it wasn't necessarily because I wouldn't fancy, you know, I wouldn't fancy a lesbian. It's because I didn't think that they were... she would be uncomfortable with that, you know, like, you know. I don't know. (laughs)

Interviewer: At the same time, pre-transition you were, you were with a straight woman.

Participant: Yeah. Yeah, yeah. Yeah, it's the same. (laughs) I never even thought of that, but... for, for me, that was like, pre-... that was pre-transition and I still think of myself even before then like, you know,

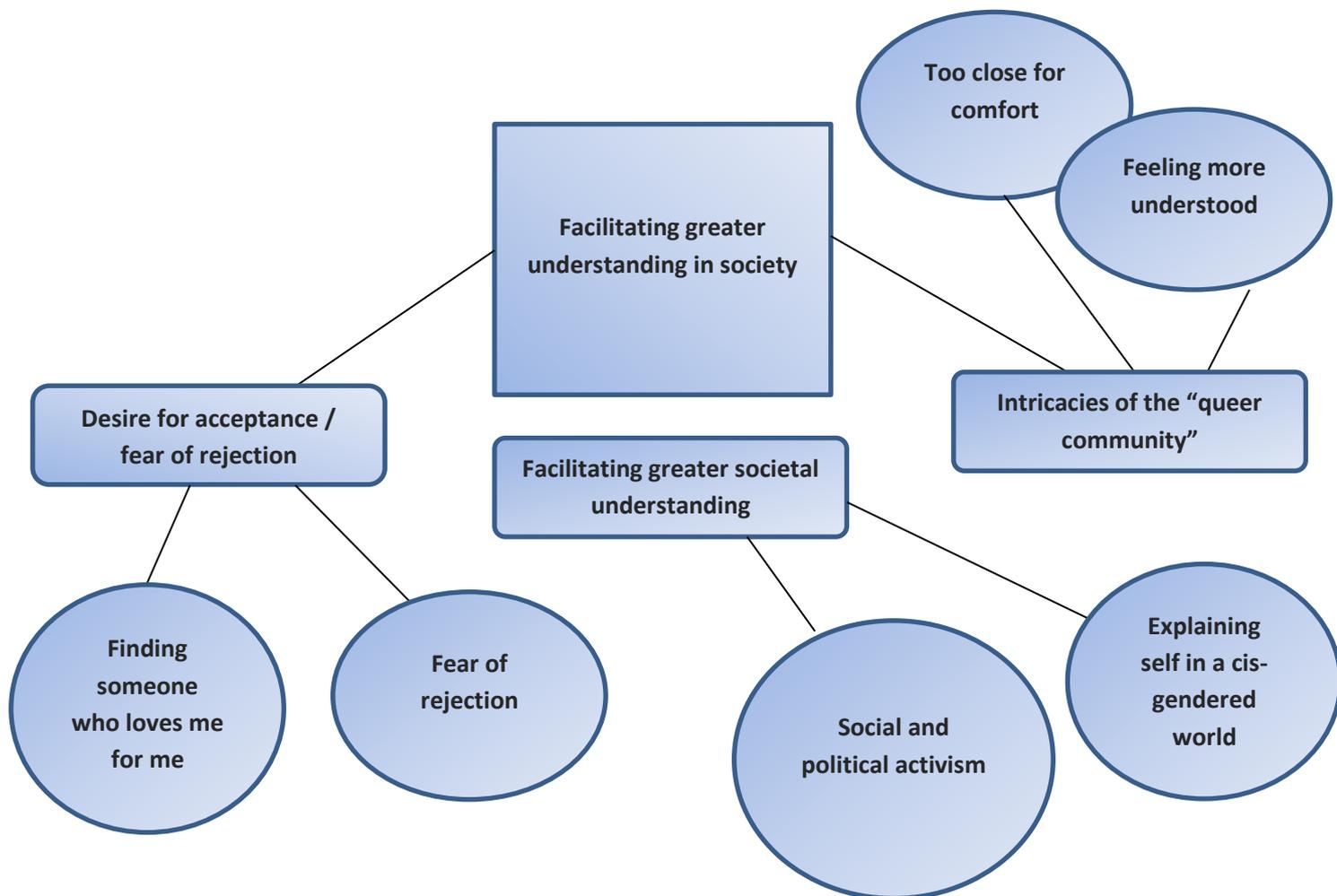
*as like, as a man. And so for me that wasn't so weird. It was weird for her. But for me it was just like, ah, mm hmm, I'm alive.
(laughs)*

Mr Orange

"I changed my sexuality numerous times throughout my transition. Obviously started out as a dyke and then I suppose kind of, when I started transitioning I was with another woman, so kind of technically seen as heterosexual and yet I refused to let her describe our relationship as heterosexual. And yet, of course I refused to let her describe it as gay, because I wasn't female. So she wouldn't... you know, she couldn't win at all. I just knew that wasn't the whole of it."

Mr Red

3.20 **Illustration 3: Thematic map of overarching theme 3:
Facilitating greater understanding in society**



Overview

A variety of sub-themes are discussed within this overarching theme. All themes revolve around a degree of facilitating greater societal understanding of transgender issues. This is partially expressed in the desire to be accepted, and not rejected by society and its individuals. In addition, social and political acts that participants were involved in were aimed at increasing social awareness and acceptance of transgender minority status in society. In addition, participants described attempts to explain the concept of being transgender to those who they felt did not understand their lived experience. The transgender

or “queer community” was also discussed as a way of creating a group of people who supported and understood each other. This was also identified as an area of potential conflict, as it was experienced as a tight-knit community.

3.20.1 Major theme 5: Desire for acceptance / fear of rejection

Participants spoke about their attempts at being more accepted within society, as well as by individuals. Each potential romantic relationship was likely to symbolise the way in which being transgender was viewed in society. Both attempts to be accepted and fear of being rejected were discussed:

Sub-theme: Finding someone who loves me for me

Related to the fear of rejection, and desire for acceptance, participants also spoke about the hope of finding someone to love them as a complete person. Some held a positive view about the possibilities in the future, and others expressed more concern.

“I, I worry if, you know, people will – the, the, the specific person that I, I’m being in a relationship with -- will love me as I am or as I will be, you know, when I’ve... because I will, I’ll have some surgery. Are, are they loving me now or are they loving for what I will be or are they wanting me to be something completely different, you know (laughs). Um (sigh). Yeah.”

Mr Orange

“I’m kind of, like, romanticised in that way and, you know, when I can find someone who I can love, that will be in love with me too, and that will be, just, you know, swings and rainbows and things (laughs)... Ah, so I don’t know. I suppose, well, I don’t know. I expect the other person to be, you know, happy and accepting towards me just like I would be of them, and things like that.”

Mr Blue

Both Mr Blue and Mr Orange show an expectation of having to search for the person who can love them as they are.

Sub-theme: Fear of rejection

As opposed to the previous sub-theme, “Do I pass?”, this sub-theme is not related to body consciousness, or a fear that others might reject the participant’s physical body. This sub-theme is more concerned with a transgender identity, which may be difficult for others in society to make sense of, or tolerate.

“I think I still have a little bit of worry that... I don’t know, that maybe at some point, you know, like the person I’m seeing now will suddenly go, oh fuck you’re trans, you know, oh my God that’s really freaky, I’m going to run away now. I don’t know, I think maybe I’m slightly still sensitive to that... Yes, I think probably just mostly around rejection and, um... and if I’m really honest as well I think there’s that kind of... again I guess it’s internalised trans phobia, that kind of what you take on externally. Um, I’m probably a little bit aware that like, because we’re in a fairly poly situation what if she meets a cisgendered guy who... you know, with a penis and it’s better than with me, you know.”

Mr Green

“If I got into a relationship with someone who didn’t know, ah, that I was trans before, um, I’d probably feel, ah, the same amount of, like, nervousness if they would reject me if they were queer or if they were cisgender or if they were straight or any, like, anything.”

Mr Blue

3.20.2 Major theme 6: Facilitating greater societal understanding

The sixth major theme describes how participants facilitated a greater societal understanding of transgender issues through being open in their communication with others. Social and political advocacy of being transgender,

as well as everyday discussion of their minority status within society, are expressed within this theme:

Sub-theme: Social and political activism

“I’m very aware of that and I’m aware of the risks that are involved in being trans and in terms of hate crimes and things like that. I think the... every two days a trans person is murdered somewhere in the world just for being trans which is what 150, 160 a year, something like that. It’s a lot of people and, um... and that’s not... I think two trans people were murdered in the UK last year so... and when trans people are attacked in hate crimes they tend to be very brutal and very violent and very dehumanising. So I’m kind of... you know, I guess my social context is one of, um, discrimination which I’m very very aware of, um, yes... unless you challenge people overtly they’re not... they don’t think differently.”

Mr Green

Mr Green demonstrates his knowledge of facts and figures associated with his minority status as a transman, and his active attempts to challenge people to think differently.

“We’ve just done a lot of, um projects on... I did a, um, a photo project at (name of town) about sort of, essentially public persona and personal visible side of things as well. And the images we did were, um, sort of being out on the street, being clothed, I was perceived as male. And then we did some stuff in her studio, did some naked shots of my boyfriend, so that kind of showed the... my gay side and my trans side which is hidden. Because as soon as I put my clothes on, I just present as male and that’s what people see.”

Mr Red

Mr Red demonstrates how he challenges predominant assumptions in society, by participating in projects that are intentionally designed to challenge dominant discourses. By exposing his body in photographs, he challenges people to see him, in his entirety, as a transman. Mr Red appears male when clothed. As he has not had genital surgery, his description of posing naked

with his boyfriend provides a visual illustration that he uses to challenge assumptions about gender prevalent within society.

Sub-theme: Explaining self in a cis-gendered world

Participants describe the difficulty in explaining their gender identity in a world that assumes that everyone born male or female identifies congruently in their biological sex:

“Whereas most people do regard me as his parent, but there’s some people that don’t. And yeah, like I mean I had to... I was interviewed by Social Services awhile back and she and she produced this report that, um... It’s like this 12 page document and two of the pages are all about, um, (male name), who is the sperm donor, who is like a friend who has been involved, but you know, isn’t (son’s name) dad. We have never called him (son’s) dad. He’s not (son’s) dad. You know (son’s name) only has two parents. In that sense it’s very conventional. Um, and this social worker’s report spends two of the 12 pages going on and on and on about how important (male name “sperm donor”) is and there’s no mention anywhere about my role in (son’s) life. But it’s like this woman spent about three hours with me and I thought by the end of it that she did actually get it. But she clearly didn’t at all... I mean I got her pregnant. I was there at the birth. You know, I’ve been there all the way along until she completely stopped me from seeing him, totally.”

Mr/s Yellow

Mr/s Yellow describes that despite her best efforts to explain her gender identity to the Social Worker involved in her son’s care, she is cast off as a non-parent, because she is not biologically male. Mr/s Yellow expresses frustration, in that she believed that the Social Worker had understood the importance of her role in her son’s life. This came as a grave consequence, as she might potentially lose the right to see her son, if the legal system were to prohibit her from having any rights in this regard.

*I saw an advert on the, ah, tubes, you know, going on the escalators you have all these adverts. And there was an advert for a blackberry, just like, all these things you could text and it had loads of bubbles with them, all these things you could text and, um, one of them was, I'm really a man, which, um, is like... I know how people think, I'm really a man, would be, ah, a trans woman saying, I've got a penis, to someone. That's how, like, people think of, I'm really a man, would come up. But the, the only time I could think of it has come up if it is female to male, and so I'm saying, I'm really a man, but no one ever thinks of it like that... and **being a man isn't a lie**. If I tell someone that, it's not a lie, but saying I was born biologically male, ah, would be."*

Mr Blue

Mr Blue also describes feeling misunderstood. His description is based on the incongruence between what he feels internally regarding his gender identity and the majority of society's views on being transgender. He passionately describes that: "being a man isn't a lie", but that many would consider it a lie if he did not disclose this. His explanation comes from the way he views himself, regardless of how he might be viewed by others.

3.20.3 Major theme 7: Intricacies of the "queer community"

This major theme discusses participants' feelings about belonging to a "queer", or trans, community. This relationship is a relatively complex one, as it can be a source of commonality and safety, and can also be experienced as potentially stifling.

Sub-theme: Too close for comfort

"With these relationships within the trans community, everyone knows each other. So you, you can't really take this stuff, like, too lightly and have a terrible break-up because this... it's going to be so divided and split and then you might lose friends and I never want that to happen."

Mr Blue

Mr Blue describes that members of the trans community should tread carefully, because he expects people to gossip, and that he tries to avoid getting a negative reputation as a consequence of this.

“Um, I don’t know if you have any experience with the gay community, but where I live it’s very incestuous. ... So, I went out with (female name 1) just for a weekend... It was exciting to me. Um, we’d have phone sex, but it was kind of a bit awkward when I got there because it was – I don’t know – just a bit embarrassing that this had happened. So, we kind of just ignored it, brushed over it... we’re just friends. We listened to CDs, watched a movie, um, and then, ah, we started making out on the couch... So, we started snogging on the sofa and, ah, it was all sort of getting quite heavy and I was straddling her and I pulled her top off and I said, (female name 2 - called her by another name)”.

Mr Violet

Mr Violet describes a three-way type relationship, where the complication of inter-relationships leads him to say another person’s name while being sexually intimate with someone else. His description of the gay community as “incestuous” indicates a level of closeness that is highly uncomfortable and fraught with difficulty. Implicit in this is that this community is also where his relationships tend to be formed.

Sub-theme: Feeling more understood

This sub-theme emerged from participants’ descriptions of feeling more understood within the trans community.

“If I’m with people who, um, I’ve never met or anything like that, then identify as male, because, it’s much easier for them to understand. It’s much easier for me to not have to explain it, because that’s how I present. And they just get on with life and it’s much easier. With those close

friends and more so in the trans community I can be much more complex about my own identity because there's more... greater understanding as well."

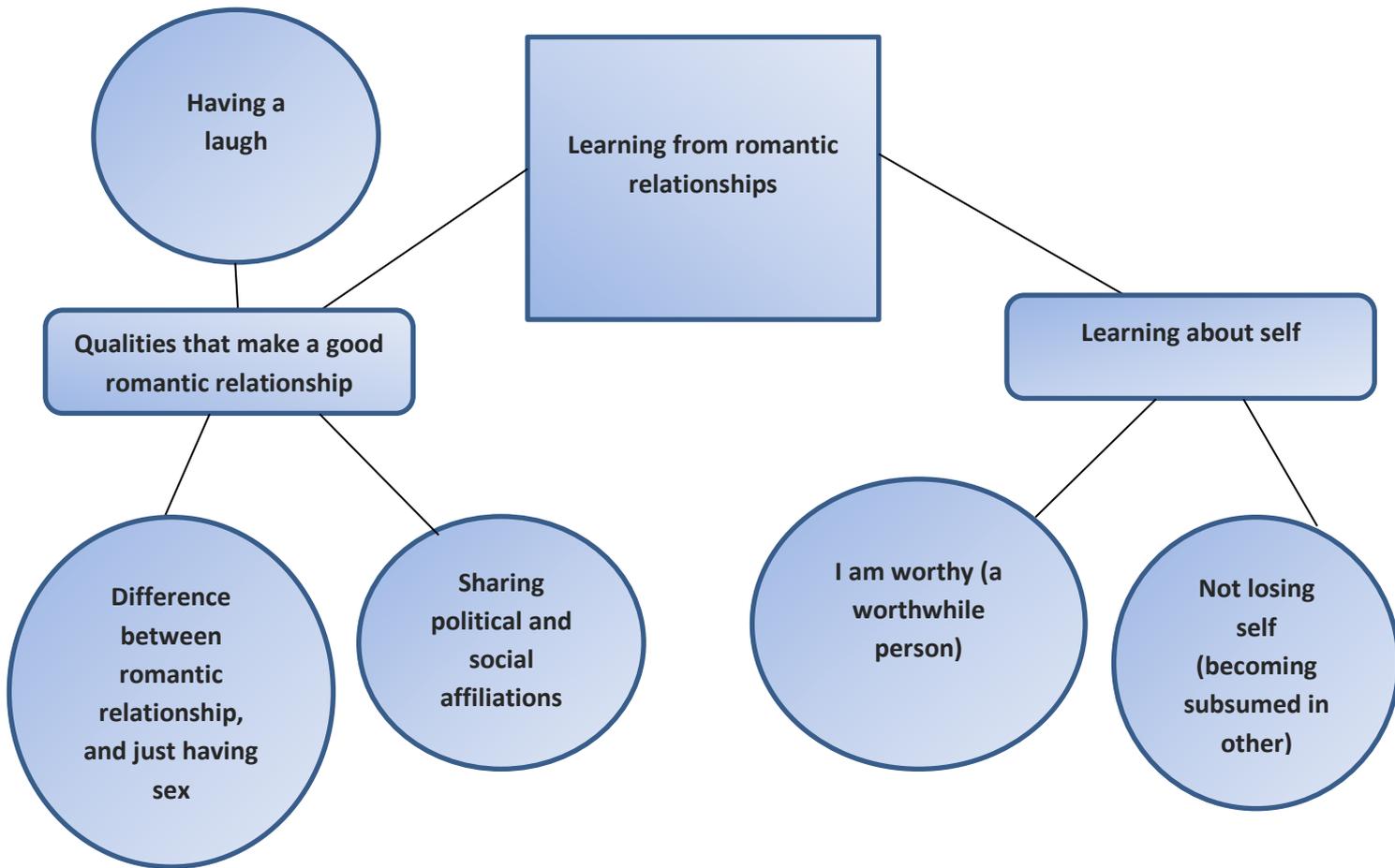
Mr Red

"Um, you know, I'm probably never going to be the sort of person who could go... who could chat someone up in a bar and, you know, maybe start dating, you know, because it's... I don't know, I may freak them out a bit. But certainly in the queer community it's all good and that's where I feel more comfortable anyway."

Mr Green

Both Mr Red and Mr Green describe their feelings of greater understanding, and of feeling more comfortable in a trans community. Mr Red describes not having to hide, or explain his gender identity in the same way, and Mr Green explains how approaching potential partners is more problematic outside of the queer community.

3.21 **Illustration 4: Thematic map of overarching theme 4:
Learning from romantic relationships**



Overview

The fourth overarching theme focuses on what participants have learned from romantic relationships. They discussed the qualities they have found that they value in a romantic relationship. Participants also discussed what they have come to learn about themselves through their relationships. Participants also frequently differentiated between more intimate types of romantic relationships, and sexual encounters with people they did not share an intimate bond with. The former was often seen as the more fulfilling type of relationship, and being able to have both types of relationship through negotiation and open communication with a primary partner was expressed as a more freeing way of being.

3.21.1 Major theme 8: Qualities that make a good romantic relationship

Sub-theme: Difference between romantic relationships, and just having sex

“Yes, I think that’s probably the definition (of romantic relationships) I’d use, um. Yes, when there’s sort of some more in depth intimacy than just about fucking or, you know... um, I don’t know, when I... like the relationship that I’m kind of coming into now would be or hopefully will be a primary relationship. So I might maybe see some other people but it’s... but the emotional connection and the kind of intimacy and all that is with one person...”

Mr Green

“Ah, to me, love and sex can... obviously, they’re within the same relationship. Sex doesn’t necessarily have to be emotional. For me, romantic would be, say, the relationship I’m in now, which is loving, caring, being open, probably making myself vulnerable to somebody and letting them in whereas... yes, I’d say that’s romantic. That sort of relationship where, um... yes, making yourself vulnerable and available emotionally.”

Mr Violet

Both Mr Violet and Mr Green make a distinction between a primary loving romantic relationship, characterised by a more intimate level of connection between the partners, and the physical act of having sex. They are not seen as mutually exclusive, but the types of relationship that are defined by the physical act tend to be seen as qualitatively different. This sub-theme was repeated in high frequency throughout the interviews.

Sub-theme: Sharing political and social affiliations

Participants discussed the importance of likeminded attitudes towards those affiliations they value. For some participants, this was so important that they would not consider a relationship with someone who held opposing positions.

“Someone’s political beliefs would be really important to me. I would never have a relationship with a Conservative I should imagine. Im, slightly on the Liberal end of the spectrum there, possibly, almost into Social Democrat, not quite. But, yes, um, (pause), yes, you know, the BNP are out straightaway (laughs). So politics and how... I mean there are a lot of things that I feel are very important to me like how I feel about the environment and climate change and social actions and things like this. So I think someone has got to be on the same level in that sense.”

Mr Green

“So if they (a potential partner) were, like, in the BNP or something, I just wouldn’t feel comfortable being in a relationship with them because that’s... like, it’s, it’s other things. It’s not just femaleness, it’s like... I don’t believe in, you know, just different political ideas and, ah, a really, probably even a really devout Christian, I would probably find a relationship difficult, to be in that relationship with.”

Mr Blue

Both Mr Green and Mr Blue provide examples of their own social and political affiliations, and use this to explain that it would be difficult to consider having a relationship with someone who stood opposed to their views.

Sub-theme: Having a laugh

The ability to have a laugh in a romantic relationship was also considered to be an important quality by many of the participants. Some contrasted this with relationships that are too serious or stressful, and others spoke about an uplifting feeling when being able to make their partner laugh, and vice versa.

“I’ll look for someone who, you know, makes me laugh and you know. It’s (laughs) fun, I guess. But, I mean, someone I feel comfortable with, just

like, mainly, because, you know, you don't want to be in a stressful relationship."

Mr Blue

"I guess you have to be on the same wavelength and also being able to have fun as well, yes, and not lose sight of that because life is too stressful. You need to be able to have a laugh with someone so... and, you know, whether or not they give really good hugs, yes, absolutely, that's very important."

Mr Green

3.21.2 Major theme 9: Learning about self

Participants discussed what romantic relationships taught them about themselves. Both positive and negative experiences were included.

Sub-theme: I am worthy (a worthwhile person)

"I feel like there's a lot more I can achieve now, sort of, in my personal life and, and relationships wise, because I know that I'm worth it. And I'm starting to believe that now as well. But I think before I didn't, which [unclear] getting that validation. I kind of knew theoretically that I was worth it, but I didn't necessarily believe it myself, whereas now I'm starting to believe that I think. So that is different. So that is something that is down to, to being with (partner's name) and, and her kind of bullying me into (laughs) seeing that I'm worth it..."

Mr Red

"Um, what I've learned is that I am lovable and that I'm not a bad person. I do have good traits. I do have something worthwhile. I do have something to give."

Mr Violet

Both Mr Violet and Mr Red explain that their romantic relationships have taught them that they are valuable people.

Sub-theme: Not losing self (becoming subsumed in the other)

Participants also spoke about learning not to lose themselves within the context of a romantic relationship. One participant spoke about the joy he found in rediscovering the things he enjoyed doing after the break-up of a long-term romantic relationship. He explained how this experience taught him to create a balance in future relationships where greater compromise could be achieved.

“Um, I think I’ll try and kind of stay truer to who I am. Because I felt like I was permanently just kind of not doing stuff that I wanted to do because it was just too difficult and she just made it too kind of hard. And to actually, yeah, remember who I am and what I like doing and to always do that. And if that’s a problem with someone, then, then we need to seriously look at the relationship.”

Mr/s Yellow

“Ah, I’d be more myself. You don’t have to give up yourself to make somebody else happy. You can both be happy. You can both compromise. You don’t have to... it doesn’t have to be all or nothing. You can find common ground and a way through..”

Mr Violet

3.22 Summary

Overall, the results from the TCA demonstrated that participants experienced romantic relationships as generally positive, or were able to draw on what they learned from their experiences in order to create a positive experience of romantic relationships in the future. Participants did express their fear of being rejected due to their trans-status, but generally found ways of managing this, either by socialising within a supportive community, or by communicating openly and showing a degree of patience with prospective romantic partners.

Participants generally spoke in a positive light regarding the future and having romantic relationships, either through growth in satisfying relationships they were currently in, or through an assumption that time will provide them with options to explore a more fruitful romantic relationship.

Chapter 4. Discussion

“The more I was treated as a woman, the more woman I became. I adapted willy-nilly. If I was assumed to be incompetent at reversing cars, or opening bottles, oddly incompetent I found myself becoming. If a case was thought too heavy for me, inexplicably I found I it so myself.”

Jan Morris, a male-to-female transsexual describing her post-transition experiences in her autobiography, *Conundrum* (1987) p.140

This chapter presents the main findings from this study, in response to the research questions, and discusses these in relation to the literature base. Clinical implications of these findings are then considered, and the limitations of the study are reviewed. The chapter also outlines potential areas for future research.

4.1 Summary and discussion of the main findings

How do transgendered people approach the decision to have a romantic relationship?

The Experience Cycle Methodology (ECM) used in this study provided an insight into how the transgendered sample approached the decision to have a romantic relationship. A variety of ways to approach this decision were expressed, but the central themes tended to be being open to the possibilities, having an open dialogue in communication, and negotiating boundaries to some degree. Both communication and negotiating boundaries revolved around concerns of being able to have flexibility in a relationship. The goal of this was often to establish a secure relationship, while simultaneously exploring other types of relationships. Related to this, the Tschudi technique showed that all participants preferred having a romantic relationship, although all but one viewed such relationships as having both advantages and disadvantages. Most of the concerns around deciding whether or not to have a romantic relationship revolved around feeling alone, as opposed to having freedom, and companionship.

The repertory grids contributed to further elaboration of results related to the above question. Participants' grids showed a tendency to prefer being in a romantic relationship. Often 'self in a romantic relationship' was closer to the ways in which participants construed their 'ideal self'. In Mr Red's case, both elements received an identical rating on each construct. This may be considered as a possible measure of degree of investment. The results, however, do not completely correspond with the ECM measure of investment, as participants varied in their levels of investment, yet this variety was not as prevalent in the grid analysis. The discrepancy between the ECM and grid measures may lie in the content of participants' descriptions of their investment. Most descriptions are not solely about entering into a romantic relationship, but are to do with specific concerns about the process of engaging in the relationship.

How do transgendered people construe the process of making this decision?

Participants differed in how they construed making the decision about romantic relationships. Whereas some participants spoke of being apprehensive due to past experience of being humiliated, others spoke of being surprised at how accepting a potential romantic partner can be. Although the content of participants' experiences of making the decision to engage in a romantic relationship differed, they explained that their processes were born out of the experiences they had in the past. All participants' descriptions were consistent with Kelly's Experience Cycle model. However, the method of investigation was designed to elicit experiences in line with each phase of the Experience Cycle. As such, it is possible that an implicit bias exists in how participants describe the process of making decisions regarding romantic relationships.

Participants also expressed a process that was similar to that of 'social exchange theory (Kelley and Thibaut, 1978; Laursen and Jensen-Campbell 1999), (section 1.8.1). The major theme of desire for acceptance / fear of rejection was largely in relation to weighing up the pros and cons of a potential romantic relationship. It is likely the fear of rejection is reduced when exploring relationships in the trans and queer communities. This may be related to the major theme, "intricacies of the queer community". Participants expressed a greater sense of

understanding within this community. This did not mean an assumption exists that everyone is the same, but that there is a shared identification with a group. Participants also spoke about the double-bind that can occur when forming relationships in these communities.

Are the outcomes of this decision validating or invalidating?

Participants' experiences differed significantly in this area. Although the results from the Experience Cycle Methodology showed that most participants experienced invalidation, this was in relation to their predictions about what would happen should they pursue a romantic relationship. Invalidation, in this sense, does not necessarily correspond to a negative outcome. In fact, for those participants who expected to be rejected or misunderstood, invalidation came as a pleasant surprise.

At the same time, this was not the experience of each participant. For example, Mr Green spoke of the invalidation he experienced when coming to the realisation that his long term partner of four years was not comfortable with his body and transgender status although she desired to be. He suggested this experience had been made worse because they moved together to a "suburban area" in which they shared a home, and people assumed that they were like "any other heterosexual couple". His partner was unable to discuss her concerns openly, and it took her time to realise that she was not entirely satisfied. This experience of invalidation, through assuming that a partner was happy with one's gender identity, was an exceptional experience of invalidation.

Does reconstrual depend upon the outcomes of the decision making process?

The (ECM) construct change pathway described by Oades and Viney (2000) was accurate in the case of each participant in this study. Those who were considered to have significantly revised their construal had experienced invalidation. However, none of the participants significantly revised their construal due to tight predictions with high investment, stated by Oades and Viney as the other pathway to construct change (2000). Mr Blue was the only participant who seemed to revise his construal to a minimal degree. He also

experienced validation, in that his predictions of ridicule and rejection were met in his description of his encounter of a romantic relationship. This construct pathway is congruent with Oades and Viney's ECM hypotheses.

Are the major considerations in making the decision to do with the mechanics of the physical relationship, the sense of self as transgender, the social pressures of what male and female roles are, or any other reasons?

The analysis of the repertory grids, combined with the thematic analysis conducted in this study, provided insight into the specifics of the above research question. Participants gave varied accounts of their experiences and of the particular considerations in making the decision to encounter a romantic relationship. Generalisations are not possible due to the small size of the sample, and it seemed that all the factors stated in the question were relevant to the participants in the sample.

The mechanics of the physical relationship was often considered in the initial possibility of a romantic relationship. Some participants discussed the difficulty associated with going clubbing in a "cisgendered bar". For example, Mr Blue explained that:

"...my group of friends in the cisgendered bars, it's in clubs or in pubs with drinking and everyone's drunk and then there might be, like, casual sex that evening, but I can't do that because it's, like, trying to explain to some drunk person, ah, the complications of being transgendered and, like, it's just near impossible."

As one of the major themes in the thematic analysis suggests, the sense of self as transgender was associated with a fear of rejection, and the hope of acceptance by current or potential romantic partners. As the theme suggested, this was in relation to identifying as transgender, and the perceived implication of this was for the other. This was often a matter of great concern, as being transgender was a core element of many of the participants' identity, and the possibility that another person might reject or ridicule this aspect of identity was a potential source of conflict for participants. For example, Mr Blue's construct related to the elements 'self' and 'ideal self' was 'the guy with the biological penis – the girl in the relationship'. Although Mr Blue, like other

participants, acknowledged the fact that he would be unlikely to ever be able to have a functional biological penis (at least in the way that a cisgender biological male would have), this was central to his construal of himself. He also spoke about the importance of this regarding romantic relationships, expressing that he would not consider encountering a relationship with someone who was not able to acknowledge him as a man. This was often echoed by other participants. For example, Mr Violet explained that:

Having sex with (name of female) was amazing because ... it was like losing my virginity because it's not like I wanted to be horrible to her or ... but I wanted her to be submissive, so she didn't try to do things that would turn me off, like touch my breasts or go down on me

As stated previously, Mr Violet was pretransition during the interview, and explained that he enjoyed sex more when he was not made aware of the female parts of his body. Mr Violet explained that this was in contrast to having “lesbian sex”.

Social pressures of male and female roles were also a consideration for participants in their decisions to engage in a romantic relationship. This was expressed in the sexual act, as well as in other general areas of a relationship. The previous example from Mr Violet is related to the social expectations of traditional male and female roles of dominance and submission inside and outside of the bedroom (Grieves, 2007). Mr Blue also explains that sex (amongst cisgendered people) is often only thought of in terms of penetration. He expressed frustration that sex is often only defined in those terms of a penis penetrating a vagina, and believed that there are a variety of other ways to have sex.

How do transgendered people construe their level of comfort within their biologically determined sex (the sex they were born into?)

The content analysis of repertory grid constructs which correlated significantly with the construct ‘comfortable in biological sex – uncomfortable in biological sex’ provided a method by which the above question could be investigated. This showed that ‘comfortable in biological sex’ was more frequently associated with ‘self-acceptance’ and being ‘flexible’. With the exception of Mr Blue, who

declined to specify his preference, the construct pole 'uncomfortable in biological sex' was the preferred pole for all participants.

The supplied construct itself provided noteworthy results in that it was a superordinate construct for five out of the six participants. Even though the construct was supplied, the results showed that it resonated to a great extent with the experiences of the participants as having a considerable degree of meaning. Although this construct was highly conflictual for Mr Blue, it did not arise in the analysis of construct conflicts for any of the other participants. As suggested previously, Mr Blue associated stating a preference for either of the construct poles to be similar with a question he disliked. No conclusions can be made as to how other participants had interpreted this construct, or what associations they made with it, other than what is available through the analyses that were carried out. Having said this, it is nonetheless, still possible to make a tentative interpretation due to the plots of elements in construct space. Most of the participants contrasted at least one of a combination of the elements 'ideal self', 'self in a romantic relationship', and 'ideal partner' with 'stereotype transperson', 'self in non-preferred gender role', 'a typical male' and 'a typical female'. It can be assumed that the less preferential elements, such as 'a typical male', 'a typical female' and 'self in non-preferred gender role' are also construed as comfortable in biological sex. However, most participants showed a dislike of the idea of a 'stereotype transperson' although this element was generally construed as 'uncomfortable in biological sex'.

4.2 Clinical implications

This research has several clinical implications. It provides an insight into the complexities of the transgender experience of negotiating romantic relationships in emerging adulthood. This can be useful for clinicians working with transgender couples and/or individuals who are navigating this experience, or those who feel unable to, due to their transgender status. The present research also indicates the importance for clinicians of incorporating consideration of constructions of relational issues into their formulations and therapy when working with transgender people in the 'emerging adulthood' life stage.

In addition, this research draws links between the expression of identity and the formation of romantic relationships. The sexual act is, in a sense, the embodiment of identity expression, and the degree of validation – invalidation is often related to the degree of sexual satisfaction. In this way, the sexual encounter contains an aspect of seeing oneself in the eyes of the other. This can be explained as a type of mentalisation process (Bateman and Fonagy, 2006). The Personal Construct Psychology term, sociality (Kelly, 1955), described in section 1.11, captures more of the interaction process between partners at this time. One’s perception of how the other is experiencing their gender identity is reflected back to them. This experience can be validating or invalidating. As being transgender was a core aspect of identity, threat associated with not having this reflected back is likely to have been very high. Winter (1992, p.11) explained that in personal construct terms, “a person experiences threat when aware of the imminent comprehensive change in core structures, those constructs which govern the individual’s maintenance processes and which are central to his or her identity”. As Leitner (1995) has described, threat is one of the components of the “terror” which accompanies core role invalidation, an experience to which any individual entering an intimate relationship puts him/herself at risk.

This view is consistent with the experiences described by the participants in this research. Should further studies suggest a similar interaction process, of sociality leading to a degree of validation, threat, or identity affirmation, this finding might be useful in informing potential future intervention models. For example, a clinical intervention may be more successful with the understanding that a transgender person seeking a romantic relationship may be actively engaging in an attempt to elaborate his/her gender identity. Rather than viewing a transgender client from a framework of risk taking or compulsive behaviour, this research suggests that a transgender client may seek relationships which s/he perceives will validate his/her identity. Helping the client to identify what the goal of his/her behaviour is may be a positive starting point in therapy. In this way, a clinician and client can collaboratively engage in establishing an experimental procedure that will be more conducive to meeting the client’s goals. Behavioural experiments or fixed roles may be designed with this in mind. As mentioned in the introduction, Kelly’s “choice corollary” states that “A person chooses for himself that alternative in a dichotomized construct through which he anticipates the greater possibility for the extension and definition of his system” (Kelly, 1955/1991a, p.64/p.45). This

notion of choice can also be discussed with the client in order to enable him/her to identify where extension of his/her system may lie. This would enable further clarifications of the client's goals and possible identification of the type of romantic relationships which might enable the client to satisfy his/her goals.

More specifically, this research suggests that one of the significant lessons the transgender participants learned through their romantic relationships was the importance of being happy with themselves, and the danger of looking for a romantic partner for validation. A therapist's assessment of a client's self-esteem upon entering a romantic relationship may be useful in helping him or her more accurately gauge the direction of the relationship. This may also be used in collaborative formulation with the client who may find his/her relationships unsatisfactory, yet continue to seek relationships which negatively impact on his/her mental health.

Furthermore, the present study suggests that transgender people may be more preoccupied with seeking validation from a partner due to physical changes they have undergone in order to reflect their identity. Sexual intimacy is an appropriate testing ground for transgender people wondering if they "pass", and the repercussions of rejection from a stranger (or non-intimate partner) may be less threatening. This is another area that may be useful to discuss with transgender clients who may repetitively put themselves in risky sexual situations in order to seek the validation of passing as the physical expression of their gender identity. A therapist may then use this understanding in order to enable a client to think through safer ways of testing out his/her identity with others, and of satisfying his/her needs. This may involve identifying when best to disclose to potential partners, and gaining an understanding of the context in which the relationship occurs. This may also involve a degree of patience on the clients' part, and an expectation of having to educate other people about transgender identity in general, and their specific personal experience. The client may be helped by narrating his/her own story in therapy, and understanding the process s/he has gone through by elaborating it in the therapeutic context.

Another significant finding of this study is that participants stressed the use of communication in having a satisfying romantic relationship. Couples seen in therapy may be encouraged to discuss openly their degree of satisfaction and how to negotiate boundaries within the relationship. They may also be invited to discuss issues of identity and how the relationship may or may not contribute to validating each member's identity. Both members of a couple discussing their gender identities may be a useful therapeutic intervention even when one member does not have a transgender identity. Listening to one another's experience of their gender may facilitate greater sociality between them, and lead to greater sharing of experiences and understanding in the relationship.

Although the present study investigated the experiences of transgender people in emerging adulthood, the findings may also be useful when working with older transgender people who feel they have not accomplished a satisfactory relationship. Due to the more recent trend toward greater societal acceptance, older transgender people often have not had the opportunity to openly express their transgender identity, frequently having to transition later in life (de Vries, 2007). This can come with further complications, as relationships tend to be greatly affected, especially as many older transgender people have tried to suppress their gender and sexuality status. Thus, the consequences of transitioning in later life often involve a complex interplay of negotiating the effects of transition on long-established relationships with loved ones (de Vries, 2007).

This research also highlights the potential of personal construct methods in therapeutic work focusing on aspects of decision making regarding romantic relationships. For example, repertory grid technique, and the extraction of measures such as those used in this study, could provide a useful focus for therapy. Thus, if the salience of self in, as opposed to not in, a romantic relationship were found to be low, this could be increased through role plays or fixed role therapy (Kelly, 1955), or through writing an elaborated characterisation of the self in a romantic relationship. In addition, if dilemmas were identified in a grid, methods described by Feixas and Saul (2005) could be used in which the dilemmas are presented to clients as a way of reframing a problem, highlighting the conflict arising from a wish to change, and the difficulty related to the consequences of this. Methods such as laddering

(Hinkle, 1965, cited in Winter, 1992) or identifying prototypical people whom the client construes as able to hold both positions of the dilemma can be used to generate concrete examples of alternative ways of being that are accessible to the client.

The use of the Experience Cycle Methodology (ECM) in this research provides a useful lens from which to view the construal process of transgender people deciding on whether or not to engage in a romantic relationship. The ECM might also be potentially useful as an assessment tool in clinical settings in order to highlight a client's construal process in therapy. As well as this, the use of the ABC technique in this study demonstrated its use in enabling clients to explore and resolve their dilemmas. Tschudi and Winter (2011) have recently revisited the use of this technique and provide further details of its use in dilemmatic resolution in a clinical context.

4.3 Limitations

One of the limitations of this study was a small sample size, which did not allow for generalizable findings. However, the small sample size allowed for an in depth investigation into the participants' construal process of romantic relationships. It also enabled a variety of perspectives to be explored (Myers, 2000). A small number of studies have investigated romantic relationships in transgender emerging adults, and even less have used a personal construct theoretical approach in their investigation. As such, a qualitative approach with few participants, and in-depth analysis added to the growth in knowledge in this under-researched area. The findings of this study have also generated potential questions for further research.

Another possible limitation of this research was that there was no way to account for any sample bias which might be inherent in the purposive sampling approach used. All potential participants who met the inclusion/exclusion criteria and consented were included in the study. Although many were approached through transgender support groups, most participants were recruited through conferences. Conferences were often hosted or sponsored by support groups, and there was often a degree of overlap. As such, all

participants were active recipients of transgender organizations, and this included a sense of belonging to a group. Undoubtedly, this is not the experience of many transgender people in this age-group in the UK. Those who did take part in this research stated their reasons for doing so. Some expressed their understanding for how difficult it can be to find participants. Others echoed Mr Green, who said that what led him to participate was:

“the desire to facilitate a deeper understanding of transpsychology”

The sample that came forward generally had positive experiences or a positive outlook. Most participants were female to male transgender people. Most participants had already decided that they were not going to transition completely into a traditionally male body, by having genital surgery, and were choosing romantic relationships where their masculine identity was validated. It is possible that only those people who had better experiences in their transitions and romantic relationships came forward to participate in this research. The experiences of those who were not as successful, or were less optimistic about the future may not have been heard through this research. As suggested earlier in the recruitment section, potential participants declined “due to the complications of their transition”, and felt that they could not contribute, as they had not yet had a romantic relationship. Having said this, one of the participants in this study also shared this feeling, but was able to draw upon some of his past experiences, and his constant construal of the decision making process in order to contribute.

4.4 Future research

The findings from this research suggest that sociality and validation/invalidation of expressed identity may have implication for theories of romantic relationships. As the first overarching theme in the thematic analysis suggests, this concept emerged in high frequency, and seemed to be dominant throughout the interviews. This concept has been echoed in the writing of Esban Benestad (2007), a bi-gendered medical doctor, and sexologist, who said:

“I believe that most people strive for belonging, and I see part of the experience of belonging as being perceived by others the same way as you

perceive yourself. Belonging is positive when that which is being perceived is given a positive value. ..”

Another valuable area for further research would be comparison of the construct systems of cisgendered and transgendered people concerning romantic relationships in similar stage of life. It would also be of interest to carry out such studies in countries such as Thailand, where the gender binary does not exist in the same way (see section 1.6.5),and sexuality is not defined in relation to this (Jackson, 2000). A future study could be also be conducted with a larger sample group. This may also include subtypes within the participants including transwomen and transmen.

When recruiting participants for this study, I was unable to recruit from transgender support groups in the UK for Muslim, Jewish, and Christian faith groups. I can only speculate that the repercussions of participating in research may have been too exposing for members to consider. During the recruitment stages, I was able to discuss my research at length with a Transwoman Church of England priest, who had access to Christian transgender support groups. Although she was willing to participate, I was unable to recruit her, as the exclusion criteria restricted the age range of participants. Future studies could possibly include transgender faith groups in a sample, or as an entire sample group.

4.5 Conclusions

Recent trends in research have started to reflect an emphasis on qualitative and affirmative approaches to understanding transgender people’s needs. Hill (1997) suggests that psychologists should reconceptualise theories on sex, gender and transgender identity in order to respect the gender diversity in society. Transgender people are often seen by clinical psychologists as part of their transition process or because of mental health concerns. The present study found that all participants had seen clinical psychologists with concerns about their transgender status. Manners (2009) suggests that clinical work with transgender clients requires careful exploration of personal experience in order to allow for greater self-acceptance.

Tacconelli (2008) discusses the need for psychologists to be aware of gender diverse issues, and highlights the importance of training on these issues in Doctorate of Clinical Psychology courses. It is only through improving our understanding of transgender and other gender diverse groups that clinical psychologists can improve their therapeutic effectiveness with such individuals. The present study contributed to further understanding of transgender people's experiences of how they construe romantic relationships. The study was generated due to a gap in the literature, and Personal Construct Theory was used as the theoretical framework from which to conduct an investigation. Results identified some of the central themes of identity elaboration through romantic relationships, the intricate nature of these relationships, and the individual differences between participants' processes of construal. Further research may be of benefit, including the use of larger samples in order to be able to draw more generalizable conclusions.

References

- Alegria, C. A. (2010). Relationship challenges and relationship maintenance activities following disclosure of transsexualism. *Journal of Psychiatric and Mental Health Nursing*, 17, 909-916.
- Aman, B. (2007). A journey towards gender belonging: Adam's story. *The International Journal of Narrative Therapy and Community Work*, 3, 39-45.
- APA. (1980). *Diagnostic and Statistical Manual of Mental Disorders* (3rd ed.). Washington, D.C.: American Psychiatric Association.
- APA. (1994). *Diagnostic and Statistical Manual of Mental Disorders* (4th ed.). Washington, D.C. : American Psychiatric Association.
- APA. (2000). *Diagnostic and statistical manual of mental disorders* (Fourth edition, Text revision). Washington, DC: APA.
- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55, 469-480.
- Arnett, J.J. (2004). *Emerging adulthood: The winding road from the late teens through the twenties*. New York: Oxford University Press.
- Arnett, J.J., & Tanner, J.L. (2006). *Emerging adults in America: Coming to age in the 21st century*. Washington, DC: American Psychological Association.
- Baillie-Grohman, R. (1975). The use of modified form of repertory grid technique to investigate the extent to which deaf school leavers tend to use stereotypes. Unpublished MSc thesis, University of London, London.
- Bannister, D., & Agnew, J. (1977). The child's construing of self. In A.W. Landfield (Ed.), *The Nebraska Symposium on Motivation*. (1976). Lincoln: Nebraska Press.
- Bannister, D., & Salmon, P. (1967). *Measures of Superordinacy*. Unpublished MS. Bexley Hospital.
- Barker, C., Pistrang, N., & Elliott, R. (2002). *Research Methods in Clinical Psychology; An Introduction for Students and Practitioners* (2nd ed.). West Sussex: John Wiley & Sons Ltd.
- Barton, E. S., Walton, T., & Rowe, D. (1976). Using repertory grid technique with the mentally handicapped. In P. Slater (Ed.), *The Measurement*

of Intrapersonal Space by Grid Technique. Volume I. Explorations of Intrapersonal Space. London: John Wiley & Sons.

Bateman, A., & Fonagy, P. (2006). *Mentalisation based treatment for Borderline Personality Disorder.* Oxford: Oxford University Press.

Bell, R. (2009). *Gridstat version 5: a program for analysing the data of a repertory grid.* Online manual: University of Melbourne.

Bem, S. L. (1993). *The lenses of gender: Transforming the debate on sexual inequality.* New Haven, CT: Yale University Press.

Benjamin, H. (1966). *The transsexual phenomenon.* New York, NY: The Julian Press.

Birch, M., & Miller, T. (2000). Inviting intimacy: the interview as therapeutic opportunity. *International Journal of Social Research Methodology*, 3, 189-202.

Blackless, M., Charuvastra, A., Derryck, A., Fausto-Sterling, A., Lauzanne, K., Lee, E. (2000). How Sexually Dimorphic Are We? Review and Synthesis. *American Journal of Human Biology*. 12,151-166.

Bockting, W. O., Robinson, B. E., & Rosser, B. R. S. (1998). Transgender HIV prevention: a qualitative needs assessment. *Aids Care-Psychological and Socio-Medical Aspects of Aids/Hiv*, 10, 505-525.

Bolin, A. E. (1994). Transcending and transgenering: Male to female transsexuals, dichotomy, and diversity. In G. Herdt (Ed.), *Third sex, third gender: Essays from anthropology and social history* (pp. 447-485). New York: Zone Publishing.

Boyatzis, R. E. (1998). *Transforming qualitative information: Thematic Analysis and Code Development.* Sage.

BPS. (2006a). *Code of Conduct, Ethical Principles & Guidelines.* Leicester: The British Psychological Society.

Braun, Virginia and Clarke, Victoria. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

Brown, B. B. (1999). "You're going out with who?" Peer group influences on adolescent romantic relationships. In W. Furman, B. B. Brown, & C. Feiring (Eds.), *The development of romantic relationships in adolescence* (pp. 291-329). Cambridge: Cambridge University Press.

Brown, N. R. (2009). The sexual relationships of sexual-minority women partnered with transmen: a qualitative study. *Archives of Sexual Behaviour*, 39, 561-572.

Burr, V. (1995). *An introduction to social constructionism*. London: Routledge.

Burr, V. (2003). *Social constructionism*. East Sussex: Routledge.

Buss, D. M. (1995). Psychological sex differences: origins through sexual selection. *American Psychologist*, 50, 164-168.

Butler J. (1990). *Gender trouble: Feminism and the Subversion of Identity*. New York: Routledge.

Butler, J. (1993). *Bodies that matter: On the discursive limits of sex*. New York: Routledge.

Butler, J. (2004). *Undoing gender*. London: Routledge.

Butt, T. (1996). PCP: Cognitive or Social Psychology. In J. W. Scheer & A. Catina (Eds.), *Empirical Constructivism in Europe: The Personal Construct Approach*. Giessen: Psychosozial-Verlag.

Butt, T. (2000). The person in society: construct psychology and social action. In J. W. Scheer (Ed.), *The Person in Society: Challenges to Constructivist Theory*. Giessen: Psychosozial-Verlag.

Carroll, R. (1999). Outcomes of treatment for gender dysphoria. *Journal of Sex Education and Therapy*, 24, 128-136.

Carroll, J. S., Willoughby, B., Badger, S., Nelson, L. J., Barry, C. M., & Madsen, S. D. (2007). So close, yet so far away: The impact of varying marital horizons on emerging adulthood. *Journal of Adolescent Research*, 22, 219-247.

Cass, V. C. (1979). Homosexual identity formation: A theoretical model. *Journal of Homosexuality*, 4, 219-235.

Cass, V. (1984). Homosexual identity formation: Testing a theoretical model. *Journal of Homosexuality*, 20 (2), 143-167.

Chodorow, N. (1978). *The reproduction of mothering*. Berkeley: University of California Press.

Clarke, V., & Braun, V. (2009). Identifying and disrupting the heterosexist and genderist hidden curriculum in higher education: some lessons from psychology. In F. Columbus (Ed.), *Sexuality Education*. (pp. 232 – 239). New York: Nova Science.

Clarke, V., Ellis, S. J., Peel, E., & Riggs, D. W. (Eds.). (2010). *Lesbian Gay Bisexual Trans and Queer Psychology: an introduction*. Cambridge :Cambridge University Press.

Clements-Nolle, K., Marx, R., Guzman, R., & Katz, M. (2001). HIV prevalence, risk behaviors, health care use, and mental health status of transgender persons: Implications for public health intervention. *American Journal of Public Health, 91*(6), 915-921.

Clements-Nolle, K. (2006). Attempted suicide among transgender persons: The influence of gender-based discrimination and victimization. *Journal of Homosexuality, 5*, 53-69.

Coates, S. (1990). Ontogenesis of boyhood gender identity disorder. *Journal of the American Academy of Psychoanalysis, 18* (3), 414-438.

Coates, S. and Person, E. S. (1985). Extreme boyhood femininity: Isolated behaviour or pervasive disorder? *Journal of the American Academy of Child Psychiatry, 24* (6), 702-709.

Cohen-Kettenis, P.T.and Pfäfflin, F. (2003). *Transgenderism and Intersexuality in Childhood and Adolescence: Making Choices*. Sage Publications, London.

Collaer, M. L., & Hines, M. (1995). Human behavioural sex-differences: a role for gonadal-hormones during early development. *Psychological Bulletin, 118*, 55-107.

Collins, W. A., & van Dulmen, M. (2006). Friendships and romance in emerging adulthood: assessing distinctiveness in close relationships. In J. J. Arnett & J. L. Tanner (Eds.), *Emerging adults in America: coming of age in the 21st century* (pp.219-234). Washington, DC: American Psychological Association.

Connolly, J. A., & Konarski, R. (1994). Peer self-concept in adolescence: Analysis of factor structure and of associations with peer experience. *Journal of research on adolescence, 4*, 385-403.

Connolly, J., & Goldberg, A. (1999). Romantic relationships in adolescence: The role of friends and peers in their emergence and development. In W. Furman, B. B. Brown, & C. Feiring (Eds.), *The development of romantic relationships in adolescence* (pp. 266-290). Cambridge: Cambridge University Press.

Coolidge, F. L., Thede, L. L., & Young, S. E. (2002). The heritability of gender identity disorder in a child and adolescent twin sample. *Behaviour Genetics*, 32, 251-257.

Cromwell, J. (1999). *Transmen & FTMs: Identities, bodies, genders & sexualities*. Chicago: University of Illinois Press.

Crosby, R. A., & Pitts, N. L. (2007). Caught between different worlds: How transgendered women may be "forced" into risky sex. *Journal of Sex Research*, 44, 43-48.

Davidson, G., Reser, J. (1996). Construing and constructs: personal and cultural?. In B. M. Walker, J. Costigan, L. L. Viney, & B. Warren (Eds.), *Personal Construct Psychology: A Psychology for the Future*. Melbourne: Australian Psychological Society.

De Cecco, J.P. and Elia, J.P. (1993). A critique and synthesis of biological essentialism and social constructionist views of sexuality and gender. In J.P. De Cecco and J.P. Elia (eds.), *if you seduce a straight person can you make them gay? Issues in biological essentialism verses social constructionism in gay and lesbian identities* (pp. 1-26). Binghamton, NY: The Haworth Press.

Denny, D. (1992). The politics of diagnosis and a diagnosis of politics: The university- affiliated gender clinics, and how they failed to meet the needs of transsexual people. *Chrysalis Quarterly*, 1, 9-20.

De Vries, B. (2007). LGBT Couples in later life: a study in diversity. *Generations*, 31, 18-23.

DH. (2008a). Gender Dysphoria. Retrieved 10th July 2008, from <http://www.nhs.uk/Conditions/Genderdysphoria/Pages/Introduction.aspx?url=Pages/What-is-it.aspx>

DH. (2008b). *Guidance for GPs, other clinicians and health professionals on the care of gender variant people*. London: Department of Health.

DH. (2004). *Patient and Public Involvement in Health: The Evidence for Policy Implementation*. London: Department of Health.

- Diamond, M. (1996). Self-testing Among Transsexuals: A Check on Sexual Identity. *Journal of Psychology and Human Sexuality* 8(3), 61-82.
- Diamond, M. (1997). Sexual Identity and Sexual Orientation in Children with Traumatized or Ambiguous Genitalia, *Journal of Sex Research* 34,199-222.
- Diamond, M. (1999). Pediatric Management of Ambiguous and Traumatized Genitalia. *The Journal of Urology* 162, 1021-1028.
- Diamond, M. (2002). A Conversation With Milton Diamond, PhD. (Re:Transsexualism) The Phallus Palace, Kotula, D. and W.E. Parker (editors), Alyson Publications, Los Angeles, pp35-36.
- Diamond, M. and Sigmundson, H.K. (1997). Sex Reassignment at Birth. Long Term Review and Clinical Implications. *Archives of Pediatrics and Adolescent Medicine* 151(March), 298-304.
- Diamond, M., & Sigmundson, H. K. (1997). Management of intersexuality: Guidelines for dealing with persons with ambiguous genitalia. *Archives of Paediatric and Adolescent Medicine*, 151, 1046-1050.
- Diamond, M., Watson, L.A. (2004). Androgen Insensitivity Syndrome and Klinefelter's Syndrome. In Child and Adolescent Psychiatric Clinics of North America (Sex and Gender). Milton Diamond and Alayne Yates (editors); W.B. Saunders, Philadelphia 13, 623-640.
- Di Ceglie, D. (2000). Gender identity disorder in young people. *Advances in Psychiatric Treatment*, 6(6), 458-466.
- Dinnerstein, D. (1977). *The mermaid and the minotaur: Sexual arrangements and human malaise*. New York: Harper & Row.
- Drescher, J. (1998). *Psychoanalytic therapy and the gay man*. New Jersey: Analytic Press.
- Drescher, J. (2007). Homosexuality and its vicissitudes. In J. Muran (Ed.), *Dialogues on difference: studying diversity in the therapeutic relationship* (pp. 85-97). Washington DC: American Psychological Association.
- Duck S. W. (1973). *Personal relationships and personal constructs: a study of friendship formation*. London: Wiley.
- Duck S. W. (1975). Personality similarity and friendship choices by adolescents. *European Journal of social psychology*, 5, 351-365.

Duck S. W. (1977). Inquiry, hypothesis and the quest for validation: personal construct systems in the development of acquaintance. In S. W. Duck (Ed.), *Theory and practice in interpersonal attraction*. London: Academic.

Duck S. W., & Craig, G. (1978). Personality similarity and the development of relationship: a longitudinal study. *British Journal of Social and Clinical Psychology*, 5, 237-242.

Duck S. W. (1979a). The personal and the interpersonal in construct theory: social and individual aspects of relationships. In P. Stringer & D. Bannister (Eds.), *Construct of sociality and individuality*. London: Academic.

Duck S. W. (1979b). Personal constructs in the development and collapse of personal relationships. Paper presented to the Third International Congress on Personal Construct Psychology. Netherlands.

Duck S. W., & Miell, D. (1984). Towards a comprehension of friendship development and breakdown. In H. Tajfel, C. Fraser, & J. Jaspers (Eds.), *The social dimension: European developments in social psychology*. Cambridge: CUP.

Eliason, M. J., & Schope, R. (2007). Shifting sands or solid foundation? Lesbian, gay, bisexual, and transgender identity formation. *The Health of Sexual Minorities*, 1, 3-26.

Elliott, R., Fischer, C. T., & Rennie, D. L. (1999). Evolving guidelines for publication of qualitative research studies in psychology and related fields. *British Journal of Clinical Psychology*, 38, 215-229.

Epting, F. Prichard, S., Leitner, L.M. & Dunnett, G. (1996). Personal constructions of the social. In D. Kalekin-Fishman & B. M. Walker (Eds.), *The construction of group realities: Culture, society, and personal construct psychology*. Malabar, Florida: Krieger.

Esther, E., & Benestad, P. (2007). From gender dysphoria towards gender euphoria. *The International Journal of Narrative Therapy and Community Work*, 3, 67-69.

Ettner, R. I. and Brown, G. R. (1999). *Gender loving care: A guide to counselling gender-variant clients*. New York: W.W. Norton.

Fast, I. (1984). *Gender identity: A differentiation model*. Mahway, NJ: The Analytic Press.

Fausto-Sterling, A. (2000). *Sexing the Body: Gender Politics and the Construction of Sexuality*, Basic Books, New York.

Feixas, G., Geldschlager, H., & Neimeyer, R. A. (2002). Content analysis of personal constructs. *Journal of Constructivist Psychology*, 15, 1-19.

Feixas, G., & Saul, L. A. (2004). The multi centre dilemma project.: an investigation of the role of cognitive conflicts on health. *The Spanish Journal of Psychology*, 7, 69-78.

Feixas, G., & Saul, L. A. (2005). Resolution of dilemmas by personal construct psychotherapy. In D. A. Winter & L. L. Viney (Eds.), *Personal Construct Psychotherapy: Advances in Theory, Practice and Research* (pp. 136-147). London: Whurr.

Fernandes, E. (2007). When what I wish makes me worse . . . to make coherence flexible. *Psychology & Psychotherapy: Theory, Research & Practice*, 80, 165-180.

Fincham, F. D., & Cui, M. (2011). *Romantic relationships in emerging adulthood* (Eds.). Cambridge: Cambridge University Press.

Fine, C. (2010). *Delusions of gender: the real science behind sex differences*. London: Icon Books.

Foucault, M. (1978). *The history of sexuality*, vol. I., Trans. R. Hurley. New York: Vintage Books.

Fransella, F., Bell, R., & Bannister, D. (2004). *A Manual for Repertory Grid Technique* (2 ed.). Chichester: John Wiley & Sons Ltd.

Freud, S. ([1905] 1962). *Three essays on the theory of sexuality*. Translated and edited by J. Stachey. New York: Basic Books.

Freud, S. ([1923] 1962). The infantile genital organisation: An interpolation into the theory of sexuality. In J. Stachey (trans. and ed.) *Standard edition*, volume 19 (pp. 243 – 260). London: The Hogarth Press.

Freud, S. ([1925] 1962). Some psychical consequences of the anatomical distinction between the sexes. In J. Stachey (trans. and ed.) *Standard edition*, volume 19 (pp. 243 – 260). London: The Hogarth Press.

Freud, S. ([1931] 1962). Female sexuality. In J. Stachey (trans. and ed.) *Standard edition*, volume 21 (pp. 223 - 243). London: The Hogarth Press.

Freud, S. ([1933] 1962). Femininity. In J. Stachey (trans. and ed.) *Standard edition*, volume 22 (pp. 173-182). London: The Hogarth Press.

Furman, W., & Wehner, E. A. (1997). Adolescent romantic relationships: A developmental perspective. In S. Shulman & W. A. Collins (Eds.), *Romantic relationships in adolescence: Developmental perspectives* (Vol. 78, pp. 21-36). San Francisco: Jossey-Bass.

Gagne, P., Tewksbury, R., & McGaughey, D. (1997). Coming out and crossing over - Identity formation and proclamation in a transgender community. *Gender & Society*, 11, 478-508.

Gagne, P., & Tewksbury, R. (1998). Conformity pressures and gender resistance among transgendered individuals. *Social Problems*, 45, 81-101.

Galliher, Renee; Glover, Jenna; & Trenton, Lamere. (2009). Identity development and exploration among sexual minority adolescents: Examination of a multidimensional model. *Journal of Homosexuality*, 56, 77-101.

Garcia-Falgueras, A., & Swaab, D. F. (2008). A sex difference in the hypothalamic ucinat nucleus: relationship to gender identity. *Brain*, 131, 3132-3146.

GIRES et al. (2006). Atypical gender development: A review. *International journal of transgenderism*. 9 (1), 29-44.

GIRES (2009). *Gender variance in the UK: Prevalence, incidence, growth and geographic distribution*. London: GIREs.

Glover, J. A., Galliher, R. V., & Lamere, T. G. (2009). Identity development and exploration among sexual minority adolescents: examination of a multidimensional model. *Journal of Homosexuality*, 56, 77-101.

Goethal, S. C., & Schwiebert, V. L. (2005). Counselling as a critique of gender: on the ethics of counselling transgendered clients. *International Journal for the Advancement of Counselling*, 27, 457-469.

Goldner, V. (1988). Generation and gender: Normative and covert hierarchies. *Family process*, 27, 17-31.

Golombok, S. and Fivush, R. (1994). *Gender development*. Cambridge, UK: Cambridge University Press.

Gooren, L.J.G., Cohen-Kettenis, P.T. (1991). Development of Male Gender Identity/Role and a Sexual Orientation Towards Women in a 46,XY Subject with an Incomplete Form of the Androgen Insensitivity Syndrome. *Archives of Sexual Behaviour* 20,459-470.

Gooren, L.J.G., and Kruijver, F.P.M. (2002) Androgens and Male Behavior. *Molecular and Cellular Endocrinology* 198(1-2), 31-40.

Green, R. (1987). Sexual identity of 37 children raised by homosexual or transsexual parents. *American Journal of Psychiatry*, 135 (6), 692-697.

Green, R. (2000a). The family co-occurrence of “gender dysphoria”: Tensiblings of parent-child pairs. *Archives of sexual behaviour*, 29 (5), 449-507.

Green, J. (2004). *Becoming a visible man*. Nashville: Vanderbilt University Press.

Green, R. (2007). Gender development and reassignment. *Psychiatry*, 6, 121 - 124.

Grice, J. W. (2006). Idiogrid Manual Version 2.4: Idiographic Analysis with Repertory Grids: Oklahoma: Oklahoma State University.

Grice, J. W. (2008). Idiogrid: Idiographic Analysis with Repertory Grids (Version 2.4). Oklahoma: Oklahoma State University.

Grieves, L. (2007). Reflections. *The International Journal of Narrative Therapy and Community Work*, 3, 55-56.

Griffen, I., Wilson, I., & Wren, B. (2005). The interaction between young people with atypical gender identity organization and their peers. *Journal of Health Psychology*, 10, 307-315.

Grollman, E. A. (2010). Retrieved from:
<http://www.Kinseyconfidential.com>

Grumbach, M.M. (1998). Disorders of Sex Differentiation. In D.W. Forster (editor) *William's Text Book of Endocrinology*, Philadelphia: pp 1303-1425.

Grumbach, M. M. and Conte, F.A.(1998). Disorders of Sex Differentiation. In J.W. Wilson and D. W. Foster (editors) Williams Textbook of Endocrinology, pp. 1400-1405. W. B. Saunders, Philadelphia.

Grumbach, M.M., Huges, I.A., Conte, F.A. (2003). Disorders of Sex Differentiation. In: H.M. Kronenberg S. Melmed, K.S. Polonsky (editors). Williams Textbook of Endocrinology. Philadelphia: W. B. Saunders; pp 842-1002.

Gucciardi, D. F., Longbottom, J. L., Jackson, B., & Dimmeck, J. A. (2010). Experienced golfers' perspectives on choking under pressure. *Journal of Sport and Exercise Psychology*, 32, 61-83.

Gupta, A. E., & Huston, A. C. (2009). Depressive symptoms and economic outcomes of low-income women: A review of the social causation, social selection, and interactionist hypotheses. *Social Issues and Policy Review*, 3(1), 103-140.

Gurvich S. E. (1991). The transsexual husband: The wife's experience [Abstract]. *Dissertation Abstracts International*, 52-08A, 3089.

Harne, L. and Miller, E. (eds.) (1996). *All the rage: Reasserting radical lesbian feminism*. London: The Women's Press.

Harter, Stephanie Lewis, Erbes, Christopher R., and Hart, Christine C. (2004). *Content analysis of the personal constructs of female sexual abuse survivors elicited through repertory grid technique*. *Journal of Constructivist Psychology*. 17, pg 27-43.

Hazan, C., & Shaver, P. R. (1987). Romantic love conceptualised as an attachment process. *Journal of Personality and Social Psychology*, 52, 511-524.

Hegarty, P., Massey, S. (2006). Anti-homosexual prejudice ... as opposed to what? Queer theory and the social psychology of anti-homosexual attitudes. *Journal of Homosexuality*, 52, 47-71.

Hill, D. B. (1997). Understanding, knowing and telling transgender identities. Unpublished Doctoral dissertation. University of Windsor, Canada.

Hirschfeld, M. (1910). Selections from the transvestites: The erotic drive to cross-dress. In S. Stryker and S. Whittle (Eds.), *The transgender studies reader* (pp. 28-39). New York, NY: Routledge.

Horney, K. (1967). *Feminine psychology*: New York: W.W. Norton.

Hurtig, A.L. (1992). The Psychosocial Effects of Ambiguous Genitalia. *Comprehensive Therapy* **18**, 22-25.

Imperato- McGinley, J., Guerrero, L., Gautier, T., and Sturla, E. (1974). Steroid 5 α Reductase deficiency in Man: An Inherited Form of Male Pseudohermaphroditism. *Science* **27**, 1213-1215.

Imperato-McGinley, J., Peterson, R.E., Gautier, T., Sturia, E. (1979a). Male Pseudohermaphroditism Secondary to 5 α -Reductase Deficiency - a Model for the Role of Androgens in Both the Development of the Male Phenotype and the Evolution of a Male Gender Identity. *Journal of Steroid Biochemistry* **11**(1B), 637-645.

Imperato-McGinley, J., Peterson, R.E., Stoller, R., and Goodwin, W.E. (1979b). Male Pseudo-Hermaphroditism Secondary to 17 β -Hydroxysteroid Dehydrogenase Deficiency: Gender Role Change with Puberty. *Journal of Clinical Endocrinology and Metabolism* **49**, 391-395.

Jackson, P.A. (2000). An explosion of Thai identities: global queering and re-imagining queer theory. *Culture, Health and Sexuality*, **2**, 405-24.

Jeffreys, S. (1994). *The lesbian heresy: A feminist perspective on the lesbian sexual revolution*: London: The Women's Press.

Jeffreys, S. (2008). They know it when they see it: the UK Gender Recognition Act 2004. *British Journal of Politics and International Relations*, **10**, 328-45.

Johnson, K. (2007). Changing sex, changing self: Theorizing transitions in embodied subjectivity, *10*(1), 54-70.

Jones, S & Tinker, D. (1982). Transsexualism and the family: an interactional explanation. *Journal of Family Therapy*, **4**, 1-14.

Joslin-Roher, E., & Wheeler, D. (2009). Partners in transition: The transition experience of lesbian, bisexual, and queer identified partners of transgender men. *Journal of Gay and Lesbian Social Services, 21*, 30-48.

Kenagy, G. P. (2002). HIV among transgendered people. *Aids Care-Psychological and Socio-Medical Aspects of Aids/Hiv, 14*, 127-134.

Kenagy, G. P., & Hsieh, C. M. (2005). The risk less known: Female-to-male transgender persons' vulnerability to HIV infection. *Aids Care-Psychological and Socio-Medical Aspects of Aids/Hiv, 17*, 195-207.

Kelley, H. H., & Thibaut, J. W. (1978). *Interpersonal relations: A Theory of Interdependence*. New York: Wiley.

Kelly, G. A. (1955/1991). *The Psychology of Personal Constructs*. New York: Norton (reprinted by Routledge, London).

Kipnis, K., and Diamond, M. (1998). Pediatric Ethics and the Surgical Assignment of Sex. *Journal of Clinical Ethics, 9*(4), 398-410.

Kitzinger, C. (1987). *The Social Construction of Lesbianism*. London: Sage.

Kitzinger, C. and Wilconson, S. (1995). Transitions from heterosexuality to lesbianism: the discursive production of lesbian identities. *Developmental Psychology, 31*, 95-104.

Kitzinger, C., Wilkinson, S., Coyle, A. and Milton, M. (1998). Towards lesbian and gay psychology, *Psychologist, 11*, 529-33.

Kleeman, J. A. (1971). The establishment of core gender identity in normal girls. *Archives of Sexual Behaviour, 2*, 103-116.

Knafo, A., Iervolino, A. C., & Plomin, R. (2005). Masculine girls and feminine boys: Genetic and environmental contributions to atypical gender development in early childhood. *Journal of Personality and Social Psychology, 88*, 400-412.

Kohlberg, L. (1966). A cognitive-developmental analysis of children's sex role concepts and attitudes. In E.E. Maccoby (ed.), *The development of sex differences* (pp. 82-173). Stanford, CA: Stanford University Press.

Kohn, G., Lasch, E.E., El-Shawwa, R., Elrayyes, E., Litvin, Y., Rösler, A., (1985). Male Pseudo-Hermaphroditism due to 17 β HSD in a Large Arab Kinship: Studies on the Natural History of the Defect. *Journal of Pediatric Endocrinology* 1:29-37.

Koyama, E. (1999). *The transfeminism manifesto*. Available: <<http://www.transfeminism.org/pdf/tfmanifesto.pdf>>.

Krafft-Ebbing, R. (1888). *Psychopathia sexualis: The complete English language translation*. New York, NY: Arcade Publishing.

Kruijver, F. P. M., Zhou, J. N., Pool, C. W., Hofman, M. A., Gooren, L. J. G., & Swaab, D. F. (2000). Male-to-female transsexuals have female neuron numbers in a limbic nucleus. *Journal of Clinical Endocrinology and Metabolism*, 85, 2034-2041.

Lacquer, T. (1990). *Making sex: body and gender from the Greeks to Freud*. Cambridge, MA: Harvard University Press.

Landen, M., Walinder, J., Hambert, G., & Lundstrom, B. (1998). Factors predictive of regret in sex reassignment. *Acta Psychiatrica Scandinavica*, 97, 284-289.

Landfield, A. W. (1971). *Personal Construct Systems in Psychotherapy*. Lincoln: University of Nebraska Press.

Lane, R. (2007). Transitional stories: Constructing biology and culture in a transgender clinic. Retrieved from <<http://www.tasa.org.au/conferences/conferencepapers07/papers/100.pdf>>

Larson, R. W., Clore, G. L., & Wood, G. A. (1999). The emotions of romantic relationships: Do they wreak havoc on adolescents? In W. Furman, B. Brown, & C. Feiring (Eds.), *The Development of Romantic Relationships in Adolescence* (pp. 19-49). New York: Cambridge University Press.

Laursen, B., & Jensen-Campbell, L. A. (1999). The nature and functions of social exchange in adolescent romantic relationships. In W. Furman, B. B. Brown, & C. Feiring (Eds.), *The Development of Romantic Relationships in Adolescence* (pp. 50-74). New York: Cambridge University Press.

Lawrence, A. A. (2003). Factors associated with satisfaction and regret following male-to-female sex reassignment surgery. *Archives of Sexual Behavior*, 32, 299-315.

Lee, T. (2001). Trans(re)lations: Lesbian and female to male transsexual accounts of identity. *Women Studies International Forum*, 24, 347-357.

Lehavot, K., & Simoni, J. M. (2011). The impact of minority stress on mental health and substance use among sexual minority women. *Journal of Consulting and Clinical Psychology*, 79(2), 159-170.

Leitner, L. M. (1995). Dispositional assessment techniques in experiential personal construct psychotherapy. *Journal of constructivist psychology*, 8, 53-74.

Lev, A. I. (2004). *Transgender emergence: Therapeutic guidelines for working with gender-variant people and their families*. London: Routledge.

Levitt, H. M., Gerrish, E. A., & Hiestand, K. R. (2003). The misunderstood gender: a model of modern femme identity. *Sex Roles*, 48, 99-113.

Lombardi, E. L., Wilchins, R. A., Priesing, D., & Malouf, D. (2001). Gender violence: Transgender experiences with violence and discrimination. *Journal of Homosexuality*, 42(1), 89-101.

Mallon, G.P. (1999). Knowledge for practice with transgendered persons. *Journal of Gay and Lesbian Social Services*, 10(3/4), 1-18.

Manners, P. J. (2009). Gender Identity Disorder in Adolescence: A Review of the Literature. *Child and Adolescent Mental Health*, 14, 62-68.

Mason-Shrock, D. (1996). Transsexuals' narrative construction of the 'true-self'. *Social Psychology Quarterly*, 59, 176-192.

Masters, W., & Johnson, V. (1966). *Human Sexual Inadequacy*. London: Churchill.

Mayer, J. (1982). The theory of gender identity disorders. *Journal of American Psychoanalysis Association*, 2, 318-418.

McCoy, M. M. (1981). Positive and negative emotion: a personal construct theory interpretation. In H. Bonarius, R. Holland & S. Rosenberg (Eds). *Personal*

Construct Psychology: Recent Advances in Theory and Practice. London: Macmillan.

McLaney, M. A. (1984). Relationship development: a schematic approach. Paper presented at the First Annual North American Personal Construct Network Conference, Ohio.

Melendez, R. M., & Pinto, R. (2007). 'It's really a hard life': Love, gender and HIV risk among male-to-female transgender persons. *Culture Health & Sexuality*, 9, 233-245.

Meyer, J. K., & Reter, D. J. (1979). Sex reassignment – Follow up. *Archives of General Psychiatry*, 36, 1010-1015.

Minter, S., & Daley, C. (2003). *Trans realities: A legal needs assessment of San Francisco's transgender community*. San Francisco: National Center for Lesbian Rights. Retrieved from <http://www.nclrights.org/publications/transrealities0803.htm>

Minton, H. L. (1997). Queer theory: historical roots and implications for psychology. *Theory and psychology*, 7, 337-353.

Mitchell, S. (2000). *Influence and autonomy in psychoanalysis*. Hillsdale, NJ: Jason Aronson.

Money, J. and Ehrhardt, A.A. (1972). *Man and Woman, Boy and Girl: Differentiation and Dimorphism of Gender Identity from Conception to Maturity*. Johns Hopkins University Press, Baltimore.

Money, J. (1975). Money, J. (1975). Alblatio penis: Normal male infant sex-reassigned as a girl. *Archives of Sexual Behavior*, 4, 65-71.

Morris, J. (1987). *Conundrum*. Middlesex: Penguin Books.

Myers, M. (2000). Qualitative research and the generalizability question: Standing firm with Proteus. *The Qualitative Report [On-line serial]*, 4(3/4) Retrieved 01/05, 2009, from <http://www.nova.edu/ssss/QR/QR4-1/myers.html>

Neimeyer, G. J., & Neimeyer, R. A. (1981b). Functional similarity and interpersonal attraction. *Journal of Research in Personality*, 15, 427-435.

Neimeyer, G. J., & Neimeyer, R. A. (1983). Structural similarity in the acquaintance process. *Journal of Social and Clinical Psychology*, 1, 146-154.

Neimeyer, G. J., & Neimeyer, R. A. (1984). Cognitive complexity and marital satisfaction. *Journal of Social and Clinical Psychology*, 2, 193-198.

Neimeyer, G. J., & Neimeyer, R. A., (1985). Relational trajectories: a personal construct contribution. *Journal of Social and Personal Relationships*, 2, 325-249.

Nemoto, T., Operario, D., Keatley, J., & Villegas, D. (2004). Social context of HIV risk behaviours among male-to-female transgenders of colour. *AIDS Care*, 16(6), 724-735.

Nuttbrock, L., Rosenblum, A., & Bluenstein, R. (2002). Transgender identity affirmation and mental health. *The International Journal of Transgenderism*, 6(4). Retrieved from http://www.wpath.org/journal/www.iiav.nl/eazines/web/IJT/97-03/numbers/symposion/ijtvoo6noo4_03.htm

Nuttbrock, L. A., Hwahng, S., Bockting, W. O., Rosenblum, A., Mason, M., Macri, M., & Becker, J. (2010). Psychiatric impact of gender-related abuse across the life course of male-to-female transgender persons. *Journal of Sex Research*, 47(1), 12-23.

Oades, L. G., & Viney, L. L. (1998). Experience Cycle Methodology: A qualitative methodology from personal construct psychology. Paper presented at the Eighth Australasian Personal Construct Conference, Brisbane, July.

Oades, L. G., & Viney, L. L. (1999). A Personal Construct Model of Adolescent Risk-taking. Unpublished PhD Thesis, Department of Psychology, NSW, Australia.

Oades, L. G., & Viney, L. L. (2000). Experience Cycle Methodology: a new method for Personal Construct Psychologists?. In Scheer, J. W. (Ed.), *The Person in Society: Challenges to a Constructivist Theory*. Giessen: Psychosozial-Verlag.

Okumura, A. (2007). No turning back: Male to female transgender journeys of getting through tough times. *The International Journal of Narrative Therapy and Community Work*. 3, 57-66.

Pauly, I. B. (1992). Terminology and classification of gender identity disorders. In W. O. Bockting and E. Coleman (Eds.), *Gender dysphoria:*

Interdisciplinary approaches in clinical management (pp. 1-14). Binghamton, NY: The Haworth Press.

Pfeffer, C. A. (2009). Trans(Formative) Relationships: what we learn about identities, bodies work and families from woman partners of transmen. Unpublished PhD Thesis, (Sociology), University of Michigan.

Phornphutkul, C., Faust-Sterling, A., Grupposo, P.A., (2000), Gender Self-Reassignment in an XY Adolescent Female Born with Ambiguous Genitalia. *Pediatrics* **106**,135-137.

Rachlin, K. (1999). Individual's decisions when considering female-to-male genital reconstructive surgery. *International Journal of Transgenderism*, 3(3). Retrieved from <http://www.wpath.org/journal/www.iiav.nl/eazines/web/IJT/97-03/numbers/symposion/ijt990302.htm>

Rachlin, K. (2002). Transgender Individuals' Experiences of Psychotherapy. *International Journal of Transgenderism*, 6, No pagination.

Raj, R. (2002). Towards a transpositive therapeutic model: Developing clinical sensitivity and cultural competence in effective support of transsexual and transgendered clients. *International Journal of Transgenderism*, 6, No Pagination.

Rakie, Z., Starcevic, V., Marie, J., & Kelin, K. (1996). The outcome of sex reassignment surgery in Belgrade: 32 patients of both sexes. *Archives of Sexual Behavior*, 25(5), 515-525.

Raymond, J. (1979). *The transsexual empire: The making of the she-male*. Boston: Beacon Press.

Reiner, W.G. (2004) Psychosexual Development in Genetic Males Assigned Female: The Cloacal Exstrophy Experience. *In: Child and Adolescent Clinics of North America (Sex and Gender)* Milton Diamond and Alan Yates (editors). W. B. Saunders, Philadelphia **13**(3), 657-674.

Reiner, W.G., Gearhart, J.P. (2004) Discordant Sexual Identity in Some Genetic Males with Cloacal Exstrophy Assigned to Female Sex at Birth. *The New England Journal Of Medicine* 350(4), 333-341.

Richardson, J. (1999). Response: Finding the disorder in gender identity disorder. *Harvard Review of Psychiatry*, 7, 43-50.

Roberts, C. W., Green, R., Williams, K., & Goodman, M. (1987). Boyhood gender identity development: a statistical contrast of 2 family groups. *Developmental Psychology*, 23, 544-557.

Rösler, A., and Kohn, G., (1983). Male Pseudohermaphroditism Due to 17B-Hydroxysteroid Dehydrogenase Deficiency: Studies on the Natural History of the Defect and the Effect of Androgens on the Gender Role. *Journal of Steroid Biochemistry* 19(1), 663-674.

Ross, M. W., & Need, J. A. (1989). Effects of adequacy of gender reassignment surgery on psychological adjustment: A follow-up of fourteen male-to-female patients. *Archives of Sexual Behavior*, 18(2), 145-153.

Rutter, M., & Smith, D. (1995). *Psychosocial disorders in the young: Time trends and their causes*. Chichester, UK: John Wiley and Sons.

Ryle & Breen. (1972b). Some differences in the personal constructs of neurotic and normal subjects. *British Journal of Psychiatry*, 120, 483-489.

Salmon, P. (1976). Grid measures with child subjects. In P. Slater (Ed.) *The Measurement of Intrapersonal Space by Grid Technique. Vol. I. Explorations of Intrapersonal Space*. London: Wiley.

Sausa, L. A., Keatley, J., & Operario, D. (2007). Perceived Risks and Benefits of Sex Work among Transgender Women of Color in San Francisco. *Archives of Sexual Behaviour*, 36, 768 - 777.

Sedgwick, E. K. (1990). *Epistemology of the closet*. California: University of California Press.

Selvaggi, G., & Bellringer, J. (2011). Gender reassignment surgery: An overview. *Nature Reviews Urology*, 8, 274-282.

Sewell, K. W. (2005). The experience cycle and the sexual response cycle: Conceptualisation and application to sexual dysfunctions. *Journal of constructivist psychology*, 18, 3-13.

Scheer, J. W. (Ed.) (2000). *The Person in Society: Challenges to a Constructivist Theory*. Giessen: Psychosozial-Verlag.

Slater, P. (1965). The use of the repertory grid technique in the individual case. *British Journal of Psychiatry*, 111, 965-975.

Slater, P. (1972). *Notes on INGRID 72*. Unpublished manuscript, Institute of Psychiatry. Slater, P. (1977). *The Measurement of Intrapersonal Space by Grid Technique* (Vol. 2. Dimensions of Intrapersonal Space). London: Wiley

Slater, P. (1974). The reliability and significance of a grid, Unpublished MS, St. George's Hospital Medical School, London.

Slijper, F.M.E., Drop, S.L.S., Molenaar, J.C., De Muinck Keizer Schrama, S.M.P.F. (1998). Long-term Psychological Evaluation of Intersex Children. *Archives of Sexual Behavior*, 27,125-144.

Smith, J.A. (1999). Identity development during the transition to motherhood: an interpretative phenomenological analysis. *Journal of Reproductive and Infant Psychology*, 17, 281-299.

Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative Research in Psychology*, 1, 39-54.

Snedecore, G. W., & Cochran, W. G. (1989). *Statistical Methods; eighth edition*. Iowa: Iowa State University Press.

Sobel, V, Imperato-McGinley, J (2004). Gender Identity in XY Intersexuality *In* Child and Adolescent Psychiatric Clinics of North America (Sex and Gender), Milton Diamond and Alayne Yates (editors), W.B. Saunders, Philadelphia 13,609-622.

Socarides, C. W. (1969). The desire for sexual transformation: A psychiatric evaluation of transsexualism. *American Journal of Psychiatry*, 125 (10), 1419-1425.

- Starks, H., & Brown Trinidad, S. (2007). Choose Your Method: A Comparison of Phenomenology, Discourse Analysis, and Grounded Theory. *Qualitative Health Research*, 17, 1372-1380.
- Stein, R., Stockle, M., Fisch, M., Nakai, H., Muller, S.C., Hohenfellner, R. (1994). The Fate of the Adult Exstrophy Patient. *Journal of Urology* 152,1413-1416.
- Stewart, Jay (2009). Gendered Intelligence . Genderedintelligence.co.uk.
- Stoller, R. J. (1968b). *Sex and gender (vol. 1): The development of masculinity and femininity*. New York: Jason Aronson.
- Stoller, R. J. (1968). A further contribution to the study of gender identity. *International Journal of Psychoanalysis*, 49, 364 - 369.
- Stryker, S. (2006). (De) Subjugated Knowledges: An Introduction to Transgender Studies. In S. Stryker & S. Whittle (Eds.), *The Transgender Studies Reader* (pp. 1-18). London: Routledge.
- Stryker, S. & Whittle, S. (Eds). (2006). *The Transgender Studies Reader*. New York, NY: Routledge.
- Tacconelli, E. (2008). Supporting transsexual clients. *Clinical Psychology Forum*, 187, 17-21.
- Tschudi, F. (1977). Loaded and honest questions: A construct theory of symptoms and therapy. In D. Bannister (Ed.), *New Perspectives in Personal Construct Theory* (pp. 321-350). London: Academic Press.
- Tschudi, F., & Winter, D. A. (2011). The ABC model revisited. In Caputi, P., Viney, L. L., Walker, B. M., & Crittenden (Eds.), *Personal Construct Methodology*. Chichester: Wiley-Blackwell.
- Thomas, C. (Ed.) (2000). *Straight with a twist: Queer theory and the Subject of Heterosexuality*: University Illinois Press: Champaign.
- Turpin, M., Dallos, R., Owen, R., & Thomas, M. (2009). The meaning and impact of head and neck cancer: an interpretative phenomenological and repertory grid analysis. *Journal of Constructivist Psychology*, 22, 24-54.
- Ulrichs, K. (1994). *The riddle of "man-manly" love* (M. Lombardi-Nash, Trans.). New York: Prometheus Books.

Van Beijsterveldt, C. E. M., Hudziak, J. J., & Boomsma, D. I. (2006). Genetic and environmental influences on cross-gender behavior and relation to behavior problems: A study of Dutch twins at ages 7 and 10 years. *Archives of Sexual Behavior*, 35, 647-658.

Viney, L. L., & Oades, L. (1988). The use of conceptual models in personal construct psychology research. Paper presented at the Eighth Australasian Personal Construct Psychology Conference, Brisbane, Queensland, Australia.

Warren, Bill (2004). Construing Constructionism: Some Reflections on the Tension Between PCP and Social Constructionism. *Personal Construct Theory and Practice*, 1, 34-44.

Watson, S., & Winter, D. A. (2000). What works for whom but shouldn't and what doesn't work for whom but should: A case study of two clients with trichotillomania. *European Journal of Psychotherapy, Counselling & Health*, 3(2), 245-261.

Webb, C. (1992). The use of the first person in academic writing: objectivity, language and gatekeeping, *Journal of Advanced Nursing*, 17, 747-752.

Wei, M., Liao, K. Y., Chao, R. C., Mallinckrodt, B., Tsai, P., & Botello-Zamarron, R. (2010). Minority stress, perceived bicultural competence, and depressive symptoms among ethnic minority college students. *Journal of Counselling Psychology*, 57(4), 411-422.

Wiedeman, G. H. (1953). Letter to the editor. *Journal of the American Medical Association*, 152, 1167.

Wilchins, R. (1997). *Read my lips: Sexual subversion and the end of gender*. Ann Arbor, MI: Firebrand Books.

Wilchins, R. (2002). Gender rights are human rights. In J. Nestle, C. Howell and R. Wilchins (Eds.), *Genderqueer: Voices from beyond the sexual binary* (pp.289-297). Los Angeles, CA: Alyson Publications.

Willging, C. E., Salvador, M., & Kano, M. (2006). Brief Reports: unequal treatment: mental health care for sexual and gender minority groups in a rural state. *Psychiatric Service*, 57, 867-870.

Wilson, J.D., Griffin, J.E., Russell, D.W., (1993). Steroid 5 α -Reductase 2 Deficiency. *Endocrine Reviews*. 14:577-593.

Wilson, K. (2002). DSM-IV-TR: Gender identity disorder in adolescents and adults. *GIDreform.org: Challenging psychiatric stereotypes of gender diversity*. Available from <http://www.gidreform.org/gid30285.html>

Wilson, I., Griffin, C., & Wren, B. (2005). The interaction between young people with atypical gender identity organization and their peers. *Journal of Health Psychology*, 10, 307-315.

Winnicott, D. W. (1965). *The family and individual development*. London: Tavistock Publications.

Winter, D. A. (1992). *Personal Construct Psychology in Clinical Practice: Theory, Research and Applications*. London: Routledge.

Winter, D. A., Duncan, J., & Summerfield, E. (2008). Love hurts: Explorations of love, validation, and conflict. *Personal Construct Theory & Practice*, 5, 86-98.

Winters, K. (2000). Issues of GID diagnosis for transsexual women and men. *GID Reform Advocates*. Retrieved from <http://www.gidreform.org/GID30285a.pdf>

Wren (2002). "I can accept my child is transsexual but if I ever see him in a dress I'll hit him: Dilemmas in parenting a transgendered adolescent. *Clinical Child Psychology and Psychiatry*, 7, 377-397.

WPATH (2001). The Harry Benjamin International Gender Dysphoria Association's standards of care for gender identity disorders, sixth version. Retrieved from <http://www.wpath.org/Documents2/socv6.pdf>

Wylie, P. (1942). *Generation of vipers*. New York: Rinehart and Winston.

Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology & Health*, 15, 215-228.

Yardley, L. (2008). Demonstrating validity in Qualitative Psychology. In J. A. Smith (Ed.), *Qualitative Psychology A Practical guide to Research Matters* (2 ed.). London: Sage.

Zucker, K., Green, R., Garofano, C., Bradley, S., Williams, K., Rebach, H., et al. (1994). Prenatal gender preference of mothers of feminine and masculine boys: Relation to sibling sex composition and birth order. *Journal of Abnormal Child Psychology*, 22(1), 1-13.

Zucker, K. and Bradley, S. (1995). *Gender identity disorder and psychosexual problems in children and adolescents*. New York: Guilford.

Zucker, K. J., Bradley, S. J., Kulksis, M., Pecore, K., Birkenfeld-Adams, A., Doering, R. W., Mitchell, J. N., and Wild, J. (1999). Gender constancy judgments in children with gender identity disorder: Evidence for a developmental lag. *Archives of Sexual Behaviour*, 28 (6), 475-502.

Zhou, J. N., Hofman, M. A., Gooren, L. J. G., & Swaab, D. F. (1995). A Sex Difference in the Human Brain and its Relation to Transsexuality. *Nature*, 378, 68-70.

Appendix 1

Interview Schedule

1. What are the main factors you consider when thinking about a romantic relationship?
2. What has your experience(s) of romantic relationships been?
3. What predictions or expectations have you had when thinking about a romantic relationship?
4. What options did you feel were open to you?
5. What were your main concerns?
6. What did your expectations mean to you? (How much did it matter)
7. How did things go (compared to what you thought would happen)?
8. How did you feel about this?

9. What did you learn from this experience?

10. If there is a next time, would you change as a result of your experiences?

11. Will you change the way you view things or how you behave?

12. Is there anything else you would change?

13. What options do you see open to you now if you were in a similar situation?

14. How do you see the advantages and disadvantages of being in a similar situation in the future?

Appendix 2

University of
Hertfordshire



University of Hertfordshire
Doctorate in Clinical Psychology

INFORMATION SHEET FOR PARTICIPANTS

Research Title: The Construal of Romantic Relationships in Transgendered People: A Personal Construct Approach.

Introduction

You are invited to take part in a research study exploring the personal experiences of transgendered people who have had or are in a romantic relationship. Before you decide whether you would like to give consent to take part, please take the time to read the following information which I have written to help you understand why the research is being carried out and what it will involve.

The researchers

The study is being carried out by Amani Zarroug MSc, Trainee Clinical Psychologist, as part of a Doctoral qualification in Clinical Psychology. The study is supervised by Professor David Winter, Programme Director, Chartered Clinical Psychologist, and UKCP-registered Personal Construct Psychotherapist, and by Dr. Erasmo Tacconelli, Chartered Clinical Psychologist experienced in advocacy of gender diversity issues.

What is the purpose of the study?

This research is interested in finding out about transgendered peoples' experiences of romantic relationships. Health care professionals know very little about the experiences of this group of people, and in particular about how they see their own romantic relationships. Exploring the development of romantic relationships at certain times in our lives can give us insight into the significance and meaning of these relationships. It also can further our understanding of how we see ourselves, how we see others, and how we feel we are seen by them. We have very little academic literature investigating transgendered peoples' understanding of their relationships from their own point of view.

This piece of work will begin to address this silence by giving a voice to those who would like to talk about their own relationships. Whilst this research is not intending to be generalised to all transgendered people who have had or are having romantic relationships, it is an important pioneering piece of research, that will help clinical psychologists and other health care professionals to better understand this experience from a transgendered person's point of view. This exploratory study will be a foundation on which discussions regarding theory and service development for intervention can begin.

What is involved?

If you decide that you would like to take part you will be asked to sign a consent form and complete a brief information sheet about yourself. You will be invited to participate in an interview concerning your experience. The interview will take about an hour to an hour and a half. This will be carried out in your own home or at the University of Hertfordshire (travel expenses will be paid) which ever feels most comfortable for you. During this time we will discuss how you encountered romantic relationships and how you feel about them in general, and also your views concerning yourself and significant other people. All interviews will be tape recorded and later transcribed verbatim, after which the tape will be wiped.

Who is taking part?

This study will include transgendered people in their early adult years (18 to 35). A maximum of 8 people are required.

Do I have to take part?

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

What do I have to do?

If after reading this information sheet you would like to take part in the research, you will be given a consent form to sign. I will then send out the information sheet and contact you to arrange a suitable time and place to meet.

Will taking part be confidential?

Yes. If you agree to take part in the study your information will be stored in a safe locked location which will only be accessible by the researchers. The overall findings of the project may be published in a research paper; if your stories are used in the research I will conceal your identity by, for example, changing names and recognisable details.

If during the interview I have serious concerns about harm to yourself or the safety of others I am compelled by my duty of care to inform others.

What are the benefits of taking part?

From many years of clinical experience and research we know that talking about and reflecting upon our experiences can be helpful. This research will give you an opportunity to speak openly and honestly about your personal understanding of romantic relationships. It is hoped that this research will help to further psychological understanding of the issues that are of concern to you.

What are the potential difficulties that taking part may cause?

I am aware from my clinical experience that this topic can be very emotive. If at any point during the interview, you feel you want to stop or take a break, we will do so. Despite these potential difficulties, some researchers suggest that people taking part in research interviews can find the process of talking through their experiences therapeutic and beneficial. You will be given a number of contact details following the study, should you feel that you require support.

What if I have questions or concerns?

If you have any further questions about the research, please feel free to contact me via email, or post, details of which are below.

Who has reviewed this study?

This study was reviewed by University of Hertfordshire Research Ethics Committee and was given ethical approval. The Registration Protocol Number is PSY/07/10/AZ.

Thank you for taking time to read this.

Contact details of the researcher:**Amani Zarroug**

Email address: a.zarroug2@herts.ac.uk

Postal address: Doctor of Clinical Psychology Training Course
University of Hertfordshire
Hatfield, Herts., AL10 9AB

Appendix 4

Background information

1. Age
2. How would you describe your ethnicity?
3. What is your current educational level?
4. How do you describe yourself (transgender or otherwise)?
5. What does this definition mean to you?
6. What led you to develop this definition for yourself?
7. Are you currently in a romantic relationship?
8. If not, when was your last romantic relationship?
9. What led you to take part in this study?

10. What type of help have you sought in the past?

11. Have you ever sought help from health care professionals and/or other sources?

Thank you for your time.

Appendix 5

University of
Hertfordshire



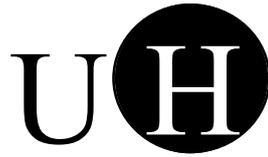
University of Hertfordshire
Doctorate in Clinical Psychology

DEBRIEFING INFORMATION SHEET

Thank you very much for making this study possible.

This study aimed to explore transgendered peoples' experiences of romantic relationships. I was interested in:

- how you approached the decision to have a romantic relationship
- what your personal understanding about this decision was
- how satisfying or unsatisfying the experience was for you
- whether or not you were able to find meaning in your experiences
- what the major considerations are for you in deciding to have a romantic relationship



Would you like to know the findings of this study?

Would you like to participate in the write up of your interview and provide feedback on my interpretations?

Would you like to comment further on the interview or any part of the research?

If so, please write your name together with *either* your email address or postal address in the space below, specify what you would like, and I will contact with the findings when the project is completed or to discuss your request further.

.....

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Appendix 6

SOURCES OF COMFORT AND HELP

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

1. The most immediate sources of comfort and help are likely to be those people you already feel comfortable talking to, and who you might already consider going to when you want to talk about your emotions.
2. There are many support groups around the UK for Transgendered people. You may already be a member of one of these support groups. A few are listed below.

The following national organisations offer support:

3. *Translondon*

Email: translondon@hotmail.co.uk

TransLondon is a discussion/support group for all members of the 'trans' community, whatever their gender identity (or identities) and whatever stage in their 'transition' they have reached (if at all). However, all members must themselves be trans-identified or 'questioning'.

The TransLondon group meets on the third tuesday of every month at 7.30pm at Gay's The Word Bookshop, 66, Marchmont Street, London, WC1N 1AB. The next meeting is on Tuesday 18th May.

Gay's The Word is only two minutes walk straight out of Russell Square tube. It is also a short walk from Euston Road, so easily accessible from King's Cross, St Pancras or Euston stations.

4. **Gendered Intelligence**

www.genderedintelligence.co.uk

Gendered Intelligence is a Community Interest Company whose object is to:

- Deliver arts programmes and creative workshops to trans youth (under the age of 25) from across the UK in order to increase the quality of young trans people's life experiences.
- Deliver facilitated workshops to all young people within schools, colleges, youth groups and other settings from across the UK, in order to generate discussion and debate around gender and the ways in which it presents challenges in our everyday lives
- Offer Continuing Professional Development, trans awareness training, policy development and consultation as well as attend conferences and events to raise awareness of young trans people's experiences and needs across the UK and beyond
- To contribute to the creation of community cohesion across the whole of the trans community throughout the UK by bringing trans people and professional services together to form partnerships and run projects that will benefit the trans community

5. **Mermaids**

www.mermaidsuk.org.uk

Information line: (0208) 123 4819 Monday to Saturday 3pm to 7pm

Mermaids is a support group for gender variant children, teenagers, and their families.

They aim to

- offer support to parents, families, carers and others
- raise awareness about gender issues amongst professionals and the general public
- campaign for the recognition of this issue and an increase in professional services

6. **Internet Forums**

<http://www.tsroadmap.com/info/transgender-forum.html>

There are various other internet forums. The above website has a list, as well as providing a forum.

Appendix 7: Idiogrid output

Slater Analyses for Mr Red's Grid

Original Grid (Mr Red's Grid)

	Self		Ideal Self		Self in a		Self not	
Romantic Relationship	.	.	.	.	.	.	.	.
in a Romantic Relationship	.	.	.	.	.	.	.	.
Self as seen by Romantic Partner	.	.	.	.	.	.	.	.
Self as seen by others when in a Romantic Relationship	.	.	.	.	.	.	.	.
Self as seen by others when not in a Romantic Relationship	.	.	.	.	.	.	.	.
Actual or Percieved Partner	.	.	.	.	.	.	.	.
Ideal Partner	.	.	.	.	.	.	.	.
A typical Male	.	.	.	.	.	.	.	.
A typical Female	.	.	.	.	.	.	.	.
Self in Preferred	.	.	.	.	.	.	.	.
Gender Role	.	.	.	.	.	.	.	.
Self in Non-	.	.	.	.	.	.	.	.
Preferred Gender Role	.	.	.	.	.	.	.	.
Stereotype Trans Person	.	.	.	.	.	.	.	.
Well-rounded	6.00	7.00	7.00	6.00	7.00	7.00	6.00	3.00
Lack of self awareness	7.00	7.00	6.00	7.00	7.00	7.00	6.00	3.00
Open-minded	6.00	7.00	7.00	7.00	7.00	7.00	6.00	3.00
Shallow	7.00	7.00	7.00	7.00	7.00	7.00	6.00	3.00
Independence	6.00	6.00	6.00	5.00	6.00	6.00	6.00	3.00
Dependence	6.00	6.00	6.00	7.00	7.00	7.00	6.00	3.00
Witty	7.00	7.00	7.00	7.00	7.00	7.00	7.00	5.00
Dull	7.00	7.00	7.00	7.00	7.00	7.00	7.00	5.00
Standing up for people	5.00	7.00	7.00	7.00	7.00	7.00	7.00	3.00
Not standing up for people	7.00	7.00	7.00	7.00	7.00	7.00	7.00	3.00
Having a companion	7.00	7.00	7.00	2.00	7.00	7.00	7.00	4.00
Lonely	7.00	7.00	4.00	7.00	7.00	7.00	7.00	4.00
Outgoing	4.00	5.00	6.00	6.00	6.00	6.00	6.00	

6.00	6.00	6.00	6.00	6.00	6.00	6.00	6.00	3.00
5.00	Insular							
			Supportive	5.00	7.00	7.00	7.00	
7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	4.00
5.00	Leaving you to fight by yourself							
			Hairy	7.00	6.00	6.00	6.00	
7.00	7.00	7.00	1.00	4.00	6.00	1.00	6.00	2.00
4.00	Smooth							
			Variety	6.00	7.00	7.00	5.00	
7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	3.00
7.00	Sameness							
			Core being	6.00	6.00	6.00	6.00	
6.00	6.00	6.00	6.00	6.00	6.00	6.00	6.00	2.00
5.00	Peripheral influences							
			Happy	7.00	7.00	7.00	4.00	
7.00	7.00	5.00	6.00	7.00	7.00	7.00	7.00	3.00
4.00	Sad							
			Sexually fulfilled	7.00	7.00	7.00	3.00	
7.00	7.00	4.00	7.00	7.00	7.00	7.00	7.00	7.00
2.00	Sexually frustrated							
	Uncomfortable in biological sex			6.00	6.00	6.00	6.00	
6.00	6.00	6.00	1.00	4.00	1.00	1.00	4.00	6.00
6.00	Comfortable in biological sex							

Descriptive Statistics for Elements [Mr Red's Grid]

		Means
Sum of Squares		|
|	Percent Total Sum of Squares	|
		Self 0.14
13.92	3.92	
		Ideal Self 0.64
7.35	2.07	
		Self in a Romantic Relationship 0.64
7.35	2.07	
		Self not in a Romantic Relationship -0.50
37.49	10.56	
		Self as seen by Romantic Partner 0.71
10.35	2.91	
		Self as seen by others when in a Romantic Relationship 0.71
10.35	2.91	
		Self as seen by others when not in a Romantic Relationship 0.07
17.20	4.84	
		Actual or Percieved Partner -0.07
34.06	9.59	
		Ideal Partner 0.43
7.06	1.99	
		A typical Male 0.36
19.92	5.61	
		A typical Female 0.00
34.92	9.83	

Well-rounded	6.36	15.21	4.28
Open-minded	6.43	17.43	4.91
Independence	5.93	14.93	4.20
Witty	6.71	6.86	1.93
Standing up for people	6.43	19.43	5.47
Having a companion	6.00	38.00	10.70
Outgoing	5.64	9.21	2.59
Supportive	6.50	13.50	3.80
Hairy	5.00	64.00	18.02
Variety	6.50	17.50	4.93
Core being	5.64	15.21	4.28
Happy	6.07	26.93	7.58
Sexually fulfilled	6.14	39.71	11.18
Uncomfortable in biological sex	4.64	57.21	16.11

Total SS: 355.14

Bias: 0.69

Variability: 0.47

Construct Correlations

	Well-rounded	Open-minded	Independence	Witty
Standing up for people	|	|	|	|
Having a companion	|	|	|	|
Outgoing	|	|	|	|
Supportive	|	|	|	|
Hairy	|	|	|	|
Variety	|	|	|	|
Core being	|	|	|	|
Happy	|	|	|	|
Sexually fulfilled	|	|	|	|
Uncomfortable in biological sex	|	|	|	|
Well-rounded	1.00			
Open-minded	0.91	1.00		
Independence	0.89	0.83	1.00	
Witty	0.73	0.89	0.76	1.00
Standing up for people	0.86	0.95	0.79	0.84

1.00

0.37	1.00	Having a companion	0.58	0.39	0.67	0.50
0.98	0.37	1.00	Outgoing	0.91	0.96	0.82
0.99	0.35	0.94	1.00	Supportive	0.80	0.91
0.28	0.02	0.33	0.24	1.00	0.33	0.03
0.76	0.58	0.83	0.68	0.24	1.00	0.84
0.88	0.42	0.95	0.80	0.42	0.83	1.00
0.64	0.91	0.66	0.60	0.29	0.71	0.71
0.11	0.82	0.04	0.17	-0.10	0.08	0.03
1.00						
-0.33	-0.41	-0.30	-0.34	0.58	-0.30	-0.23
-0.34	1.00					

Eigenvalue Decomposition

	Eigenvalue	% Variance	Cumulative %	Scree
PC_1	168.65	47.49	47.49	|*****
PC_2	102.52	28.87	76.36	|*****
PC_3	54.34	15.30	91.66	|****
PC_4	13.17	3.71	95.36	|**
PC_5	10.67	3.00	98.37	|**
PC_6	3.27	0.92	99.29	|*
PC_7	1.19	0.33	99.62	|*
PC_8	0.86	0.24	99.86	|*
PC_9	0.36	0.10	99.97	|*
PC_10	0.12	0.03	100.00	|*
PC_11	0.00	0.00	100.00	|*
PC_12	0.00	0.00	100.00	|*
PC_13	0.00	0.00	100.00	|*

Element Loadings

		PC_1
PC_2		|
1.57	Self	0.33
1.59	Ideal Self	-1.58
1.59	Self in a Romantic Relationship	-1.58
2.74	Self not in a Romantic Relationship	3.51
2.33	Self as seen by Romantic Partner	-1.68
	Self as seen by others when in a Romantic Relationship	-1.68

2.33			
Self as seen by others when not in a Romantic Relationship			1.23
3.19			
	Actual or Percieved Partner		-2.53
-4.95			
	Ideal Partner		-2.28
-1.03			
	A typical Male		-3.40
-1.22			
	A typical Female		-2.90
-4.90			
	Self in Preferred Gender Role		-1.66
0.28			
	Self in Non-Preferred Gender Role		9.20
-3.91			
	Stereotype Trans Person		5.02
0.39			

Note. Values for plotting elements in the component space.

Element Eigenvectors

			PC_1
PC_2			|
		Self	0.03
0.15			
		Ideal Self	-0.12
0.16			
		Self in a Romantic Relationship	-0.12
0.16			
		Self not in a Romantic Relationship	0.27
0.27			
		Self as seen by Romantic Partner	-0.13
0.23			
		Self as seen by others when in a Romantic Relationship	-0.13
0.23			
		Self as seen by others when not in a Romantic Relationship	0.09
0.32			
		Actual or Percieved Partner	-0.19
-0.49			
		Ideal Partner	-0.18
-0.10			
		A typical Male	-0.26
-0.12			
		A typical Female	-0.22
-0.48			
		Self in Preferred Gender Role	-0.13
0.03			
		Self in Non-Preferred Gender Role	0.71
-0.39			
		Stereotype Trans Person	0.39
0.04			

Construct Loadings

	PC_1	PC_2
Well-rounded	-3.48	0.74
Open-minded	-3.50	1.28
Independence	-3.64	-0.35
Witty	-2.19	0.69
Standing up for people	-3.66	1.16
Having a companion	-4.92	-1.26
Outgoing	-2.54	0.96
Supportive	-2.95	0.77
Hairy	-1.30	7.46
Variety	-3.40	0.85
Core being	-3.22	1.50
Happy	-4.80	0.47
Sexually fulfilled	-3.30	-2.22
Uncomfortable in biological sex	4.01	5.61

Construct Eigenvectors

	PC_1	PC_2
Well-rounded	-0.27	0.07
Open-minded	-0.27	0.13
Independence	-0.28	-0.03
Witty	-0.17	0.07
Standing up for people	-0.28	0.11
Having a companion	-0.38	-0.12
Outgoing	-0.20	0.10
Supportive	-0.23	0.08
Hairy	-0.10	0.74
Variety	-0.26	0.08
Core being	-0.25	0.15
Happy	-0.37	0.05
Sexually fulfilled	-0.25	-0.22
Uncomfortable in biological sex	0.31	0.55

Note. Values for orienting (drawing) constructs in component space.

{Graph Created: Mr Red's Grid / PC_1 vs. PC_2 (Slater)}

Implicative Dilemmas for Mr Red's Grid

Elements Compared : Self vs. Ideal Self
Scale Midpoint set as Discrepancy Criterion = 4
Construct Congruence Criterion = 0.2

Discrepant Constructs

Note. Total number of Discrepant Constructs = 0

Congruent Constructs

Well-rounded
Open-minded
Independence
Witty
Standing up for people
Having a companion
Outgoing
Supportive
Hairy
Variety
Core being
Happy
Sexually fulfilled
Uncomfortable in biological sex

Note. Total number of Congruent Constructs = 14

Undifferentiated Constructs

Note. Total number of Undifferentiated Constructs = 0

Implicative Dilemmas

*Note. Total number of Implicative Dilemmas = 0
Percentage of Implicative Dilemmas = 0.00*

Dilemmas in Sentence Form

Note. No Dilemmas were found in the grid.

Slater Analyses for Mr Orange's Grid

Original Grid (Mr Orange's Grid)

					Self		Ideal Self		Self in a
Romantic Relationship					.	.	.	.	Self
not in a Romantic Relationship					.	.	.	.	Self
Self as seen by Romantic Partner					.	.	.	.	Self
Self as seen by others when in a Romantic Relationship					.	.	.	.	Self
Self as seen by others when not in a Romantic Relationship					.	.	.	.	Self
Actual or Percieved Partner					.	.	.	.	Self
Ideal Partner					.	.	.	.	Self
A typical Male					.	.	.	.	Self
A typical Female					.	.	.	.	Self
Preferred Gender Role					.	.	.	.	Self
in Non-Preferred Gender Role					.	.	.	.	Self
Stereotype Trans Person					.	.	.	.	Self
More male					5.00	5.00	6.00	5.00	Self
6.00 5.00 5.00 4.00 5.00					6.00	2.00	6.00	4.00	Self
4.00 More female									Self
Companionship					6.00	7.00	7.00	6.00	Self
7.00 5.00 6.00 5.00 7.00					4.00	6.00	6.00	4.00	Self
6.00 Lonely									Self
Having free time					6.00	6.00	5.00	7.00	Self
5.00 5.00 6.00 5.00 6.00					6.00	4.00	7.00	5.00	Self
2.00 Feeling trapped									Self
Seeing someone they love					5.00	7.00	7.00	7.00	Self
7.00 5.00 6.00 5.00 7.00					5.00	5.00	7.00	3.00	Self
1.00 Seeing someone they hate									Self
Happy					6.00	7.00	6.00	6.00	Self
7.00 6.00 6.00 6.00 7.00					5.00	5.00	6.00	3.00	Self
1.00 Sad									Self
Confident					5.00	7.00	7.00	6.00	Self
7.00 6.00 5.00 6.00 7.00					5.00	4.00	6.00	3.00	Self
2.00 Scared									Self
Independent					5.00	7.00	5.00	5.00	Self
6.00 5.00 6.00 6.00 7.00					6.00	5.00	6.00	3.00	Self
2.00 Dependent									Self
Intelligent					5.00	7.00	7.00	7.00	Self
7.00 6.00 6.00 7.00 7.00					5.00	5.00	6.00	6.00	Self

3.00	Stupid							
				Strong	6.00	6.00	5.00	5.00
5.00	6.00	6.00	7.00	7.00	6.00	4.00	6.00	4.00
4.00	Weak							
				Multi-talented	5.00	7.00	5.00	7.00
7.00	5.00	5.00	6.00	7.00	4.00	6.00	5.00	5.00
5.00	Lazy							
				Different	7.00	7.00	7.00	7.00
5.00	7.00	6.00	5.00	6.00	4.00	5.00	4.00	6.00
7.00	Clone							
	Not worrying what I'm supposed to be				6.00	7.00	7.00	7.00
6.00	6.00	5.00	5.00	7.00	3.00	3.00	4.00	4.00
4.00	Conforming							
				Being comfortable	5.00	7.00	7.00	7.00
6.00	5.00	5.00	6.00	7.00	4.00	4.00	6.00	2.00
2.00	Doesn't fit							
	Uncomfortable in biological sex				6.00	7.00	7.00	6.00
5.00	6.00	5.00	5.00	6.00	6.00	2.00	7.00	2.00
7.00	Comfortable in biological sex							

Descriptive Statistics for Elements [Mr Orange's Grid]

				Means
Sum of Squares				|
|	Percent Total	Sum of Squares		|
			Self	0.08
4.84	1.39		Ideal Self	1.22
24.27	6.97		Self in a Romantic Relationship	0.80
18.98	5.45		Self not in a Romantic Relationship	0.80
16.27	4.67		Self as seen by Romantic Partner	0.65
15.55	4.47		Self as seen by others when in a Romantic Relationship	0.08
4.41	1.27		Self as seen by others when not in a Romantic Relationship	0.08
2.69	0.77		Actual or Percieved Partner	0.08
8.12	2.33		Ideal Partner	1.15
23.12	6.64		A typical Male	-0.56
20.98	6.02		A typical Female	-1.20
35.84	10.29		Self in Preferred Gender Role	0.37
16.27	4.67		Self in Non-Preferred Gender Role	-1.63
54.84	15.74			

Seeing someone they love	5.50	41.50	11.92
Happy	5.50	35.50	10.19
Confident	5.43	31.43	9.02
Independent	5.29	24.86	7.14
Intelligent	6.00	18.00	5.17
Strong	5.50	13.50	3.88
Multi-talented	5.64	13.21	3.79
Different	5.93	16.93	4.86
Not worrying what I'm supposed to be	5.29	28.86	8.29
Being comfortable	5.21	38.36	11.01
Uncomfortable in biological sex	5.50	35.50	10.19

Total SS: 348.29
Bias: 0.51
Variability: 0.46

Construct Correlations

	More male	Companionship	Having free time
free time	|	|	|
Seeing someone they love	|	|	|
Happy	|	|	|
Confident	|	|	|
Independent	|	|	|
Intelligent	|	|	|
Strong	|	|	|
Multi-talented	|	|	|
Different	|	|	|
Not worrying what I'm supposed to be	|	|	|
Being comfortable	|	|	|
Uncomfortable in biological sex	|	|	|
1.00	1.00	0.18	0.53
Seeing someone they love	0.51	0.54	0.76
Happy	0.42	0.45	0.71

0.92	1.00								
			Confident	0.58	0.52	0.61			
0.91	0.93	1.00							
			Independent	0.38	0.36	0.68			
0.84	0.91	0.83	1.00						
			Intelligent	0.36	0.32	0.61			
0.80	0.79	0.84	0.66	1.00					
			Strong	0.41	0.07	0.56			
0.49	0.66	0.63	0.76	0.45	1.00				
			Multi-talented	-0.12	0.62	0.17			
0.49	0.48	0.50	0.41	0.58	0.11	1.00			
			Different	-0.07	0.32	-0.19	-		
0.13	-0.10	-0.02	-0.33	0.00	-0.17	0.18	1.00		
			Not worrying what I'm supposed to be			0.40	0.63	0.35	
0.58	0.59	0.71	0.37	0.66	0.35	0.59	0.65		
1.00									
			Being comfortable	0.47	0.63	0.63			
0.91	0.88	0.94	0.78	0.80	0.59	0.58	0.09		
0.76	1.00								
			Uncomfortable in biological sex			0.68	0.41	0.20	
0.27	0.21	0.42	0.24	0.04	0.43	-0.02	0.27		
0.47	0.47	1.00							

Eigenvalue Decomposition

	Eigenvalue	% Variance	Cumulative %	Scree
PC_1	217.82	62.54	62.54	

PC_2	48.63	13.96	76.51	|****
PC_3	35.49	10.19	86.70	|***
PC_4	15.14	4.35	91.04	|**
PC_5	11.49	3.30	94.34	|**
PC_6	7.20	2.07	96.41	|*
PC_7	5.49	1.58	97.99	|*
PC_8	3.61	1.04	99.02	|*
PC_9	1.64	0.47	99.49	|*
PC_10	1.18	0.34	99.83	|*
PC_11	0.30	0.09	99.92	|*
PC_12	0.18	0.05	99.97	|*
PC_13	0.10	0.03	100.00	|*

Element Loadings

		PC_1
PC_2		|
	Self	-0.12
1.14		
	Ideal Self	4.55
1.24		
	Self in a Romantic Relationship	3.09
2.32		
	Self not in a Romantic Relationship	2.96
0.97		

	Self as seen by Romantic Partner	2.99
-0.72		
	Self as seen by others when in a Romantic Relationship	0.13
0.99		
	Self as seen by others when not in a Romantic Relationship	0.38
-0.87		
	Actual or Percieved Partner	0.75
-1.40		
	Ideal Partner	4.53
0.13		
	A typical Male	-1.69
-1.86		
	A typical Female	-3.89
-3.22		
	Self in Preferred Gender Role	2.02
-1.12		
	Self in Non-Preferred Gender Role	-6.62
-1.74		
	Stereotype Trans Person	-9.09
4.14		

Note. Values for plotting elements in the component space.

Element Eigenvectors

		PC_1
PC_2		|
	Self	-0.01
0.16		
	Ideal Self	0.31
0.18		
	Self in a Romantic Relationship	0.21
0.33		
	Self not in a Romantic Relationship	0.20
0.14		
	Self as seen by Romantic Partner	0.20
-0.10		
	Self as seen by others when in a Romantic Relationship	0.01
0.14		
	Self as seen by others when not in a Romantic Relationship	0.03
-0.12		
	Actual or Percieved Partner	0.05
-0.20		
	Ideal Partner	0.31
0.02		
	A typical Male	-0.11
-0.27		
	A typical Female	-0.26
-0.46		
	Self in Preferred Gender Role	0.14
-0.16		
	Self in Non-Preferred Gender Role	-0.45
-0.25		
	Stereotype Trans Person	-0.62

0.59

Construct Loadings

	PC_1	PC_2
More male	2.24	1.04
Companionship	2.10	1.52
Having free time	3.30	-1.40
Seeing someone they love	6.12	-1.19
Happy	5.62	-1.40
Confident	5.46	-0.05
Independent	4.28	-1.75
Intelligent	3.51	-0.85
Strong	2.40	-0.32
Multi-talented	1.94	0.07
Different	0.07	3.17
Not worrying what I'm supposed to be	3.94	2.81
Being comfortable	6.01	0.56
Uncomfortable in biological sex	2.61	4.21

Construct Eigenvectors

	PC_1	PC_2
More male	0.15	0.15
Companionship	0.14	0.22
Having free time	0.22	-0.20
Seeing someone they love	0.41	-0.17
Happy	0.38	-0.20
Confident	0.37	-0.01
Independent	0.29	-0.25
Intelligent	0.24	-0.12
Strong	0.16	-0.05
Multi-talented	0.13	0.01
Different	0.00	0.45
Not worrying what I'm supposed to be	0.27	0.40
Being comfortable	0.41	0.08
Uncomfortable in biological sex	0.18	0.60

Note. Values for orienting (drawing) constructs in component space.

{Graph Created: Mr Orange's Grid / PC_1 vs. PC_2 (Slater)}

Implicative Dilemmas for Mr Orange's Grid

Elements Compared : Self vs. Ideal Self
Scale Midpoint set as Discrepancy Criterion = 4
Construct Congruence Criterion = 0.2

Discrepant Constructs

Note. Total number of Discrepant Constructs = 0

Congruent Constructs

More male
Companionship
Having free time
Seeing someone they love
Happy
Confident
Independent
Intelligent
Strong
Multi-talented
Different
Not worrying what I'm supposed to be
Being comfortable
Uncomfortable in biological sex

Note. Total number of Congruent Constructs = 14

Undifferentiated Constructs

Note. Total number of Undifferentiated Constructs = 0

Implicative Dilemmas

Note. Total number of Implicative Dilemmas = 0
Percentage of Implicative Dilemmas = 0.00

Dilemmas in Sentence Form

Note. No Dilemmas were found in the grid.

Slater Analyses for Mr/s Yellow's Grid

Original Grid (Mr/s Yellow's Grid)

					Self		Ideal Self	
Romantic Relationship					.	.	Self in a	
Self not in a Romantic Relationship					.	.		
Self as seen by Romantic Partner					.	.		
Self as seen by others when in a Romantic Relationship					.	.		
Self as seen by others when not in a Romantic Relationship					.	.		
Actual or Percieved Partner					.	.		
Ideal Partner					.	.		
A typical Male					.	.		
A typical Female					.	.		
Preferred Gender Role					.	.	Self in	
in Non-Preferred Gender Role					.	.	Self	
Stereotype Trans Person					.	.		
Caring	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00
Selfish	6.00	4.00						
Thoughtful (of others)					6.00	7.00	6.00	
Caring about self (Disregarding others)	6.00	6.00	6.00	7.00	6.00	7.00	3.00	6.00
A more valued person	7.00	4.00					3.00	5.00
Feeling worthless	3.00	7.00	5.00	4.00	6.00	7.00	7.00	1.00
Visible in a different way	1.00	1.00					2.00	7.00
Feeling invisible	3.00	7.00	7.00	4.00	7.00	7.00	4.00	3.00
Confidence	1.00	1.00					4.00	7.00
Self hatred	3.00	5.00	5.00	4.00	6.00	7.00	6.00	2.00
Feeling like I have something to offer	1.00	1.00					5.00	7.00
Feeling crap, awful, nothing	6.00	7.00	6.00	5.00	6.00	7.00	5.00	4.00
Big hearted	3.00	2.00					7.00	5.00
Only interested in self	7.00	7.00	7.00	7.00	7.00	7.00	4.00	4.00
Not afraid of emotions	7.00	3.00					6.00	7.00
	6.00	7.00	6.00	6.00	6.00	7.00	1.00	7.00
								6.00

5.00	5.00	Being an emotional cripple						
		Confidence in self			4.00	7.00	5.00	
4.00	5.00	5.00	3.00	7.00	7.00	7.00	1.00	6.00
1.00	1.00	Swayed by magazines						
		Queerness			6.00	7.00	7.00	
6.00	5.00	6.00	4.00	7.00	7.00	1.00	1.00	5.00
3.00	1.00	Buy into binary gender (not questioning of gender)						
		Feeling comfortable			4.00	7.00	5.00	
4.00	5.00	5.00	4.00	7.00	7.00	7.00	2.00	5.00
1.00	1.00	Drag queen						
		Fluid			4.00	7.00	6.00	
4.00	5.00	5.00	4.00	6.00	6.00	1.00	1.00	1.00
1.00	1.00	Pigeon holed						
		Having to change things to suit self			6.00	7.00	7.00	
6.00	7.00	6.00	5.00	7.00	7.00	1.00	3.00	5.00
1.00	1.00	Following something to the letter						
		Uncomfortable in biological sex			2.00	7.00	4.00	
2.00	5.00	5.00	4.00	5.00	7.00	7.00	1.00	3.00
1.00	1.00	Comfortable in biological sex						

Descriptive Statistics for Elements [Mr/s Yellow's Grid]

			Means
Sum of Squares			|
|	Percent Total Sum of Squares		|
		Self	-0.28
18.94	2.54		
		Ideal Self	1.87
65.80	8.81		
		Self in a Romantic Relationship	1.08
26.08	3.49		
		Self not in a Romantic Relationship	-0.20
16.65	2.23		
		Self as seen by Romantic Partner	1.08
23.94	3.21		
		Self as seen by others when in a Romantic Relationship	0.80
13.08	1.75		
		Self as seen by others when not in a Romantic Relationship	-0.13
6.94	0.93		
		Actual or Percieved Partner	1.44
38.80	5.19		
		Ideal Partner	1.94
59.65	7.99		
		A typical Male	-0.92
114.65	15.35		
		A typical Female	-2.06
84.22	11.28		
		Self in Preferred Gender Role	0.65
29.94	4.01		
		Self in Non-Preferred Gender Role	-2.20
107.08	14.34		

5.39	3.46	7.21	0.00					
	Self as seen by others when in a Romantic Relationship						6.56	
5.74	2.45	6.00	2.83	0.00				
	Self as seen by others when not in a Romantic Relationship						4.00	
9.59	6.40	3.87	6.08	5.00	0.00			
	Actual or Percieved Partner						8.49	
3.74	3.32	8.19	4.12	3.61	7.87	0.00		
	Ideal Partner						10.25	
2.24	4.90	10.00	4.69	5.10	9.11	3.00		0.00
	A typical Male						13.60	
13.82	13.78	13.71	12.81	12.33	12.12	13.08		13.71
0.00					A typical Female			9.00
16.64	13.49	8.94	13.11	12.25	8.31	15.13		16.55
14.28	0.00							
	Self in Preferred Gender Role						8.31	
8.43	6.48	8.12	5.66	5.66	7.00	6.71		7.48
11.40	12.41	0.00						
	Self in Non-Preferred Gender Role						9.11	
18.14	14.63	9.27	14.63	13.34	9.00	16.22		17.72
15.36	5.48	13.56	0.00					
	Stereotype Trans Person						11.45	
19.36	16.43	11.66	16.19	15.10	11.27	17.80		19.39
14.35	4.90	15.36	5.83	0.00				

Element Euclidean Distances (standardized)

								Self
Ideal Self								|
|	Self in a Romantic Relationship							|
|	|	Self not in a Romantic Relationship						|
|	|	|	Self as seen by Romantic Partner					|
|	|	|	|	Self as seen by others when in a Romantic Relationship				|
|	|	|	|	|	Self as seen by others when not in a Romantic Relationship			|
|	|	|	|	|	|	Actual or Percieved Partner		|
A typical Male								|
|	A typical Female							|
|	|	Self in Preferred Gender Role						|

				Confidence	0.37	0.18	0.95
0.88	1.00						
				Feeling like I have something to offer	0.64	0.38	0.81
0.87	0.85	1.00					
				Big hearted	0.85	0.67	0.28
0.40	0.32	0.55	1.00				
				Not afraid of emotions	0.75	0.77	-0.03
0.34	0.06	0.37	0.39	1.00			
				Confidence in self	0.28	0.03	0.94
0.79	0.95	0.80	0.28	-0.08	1.00		
				Queerness	0.87	0.59	0.51
0.66	0.62	0.80	0.74	0.54	0.61	1.00	
				Feeling comfortable	0.27	0.03	0.92
0.79	0.93	0.81	0.25	-0.05	0.98	0.58	1.00
				Fluid	0.69	0.40	0.51
0.67	0.58	0.78	0.48	0.51	0.58	0.87	0.63
1.00							
				Having to change things to suit self	0.85	0.54	0.55
0.74	0.64	0.87	0.64	0.67	0.58	0.92	0.60
0.89	1.00						
				Uncomfortable in biological sex	0.12	-0.03	0.88
0.73	0.83	0.70	0.10	-0.12	0.87	0.42	0.91
0.59	0.44	1.00					

Eigenvalue Decomposition

	Eigenvalue	% Variance	Cumulative %	Scree
PC_1	515.50	69.02	69.02	

PC_2	143.12	19.16	88.19	|*****
PC_3	29.54	3.96	92.14	|**
PC_4	24.63	3.30	95.44	|**
PC_5	11.86	1.59	97.03	|*
PC_6	8.38	1.12	98.15	|*
PC_7	5.99	0.80	98.95	|*
PC_8	2.84	0.38	99.33	|*
PC_9	2.24	0.30	99.63	|*
PC_10	1.70	0.23	99.86	|*
PC_11	0.70	0.09	99.95	|*
PC_12	0.34	0.05	100.00	|*
PC_13	0.01	0.00	100.00	|*

Element Loadings

		PC_1
PC_2		|
	Self	-1.65
-2.89		
	Ideal Self	7.65
0.38		
	Self in a Romantic Relationship	4.33
-1.94		
	Self not in a Romantic Relationship	-1.37

-3.09			
	Self as seen by Romantic Partner		4.15
-0.65			
	Self as seen by others when in a Romantic Relationship		3.15
-0.80			
	Self as seen by others when not in a Romantic Relationship		-1.21
-1.35			
	Actual or Percieved Partner		5.98
-0.31			
	Ideal Partner		7.58
0.14			
	A typical Male		-1.06
10.55			
	A typical Female		-8.62
-0.79			
	Self in Preferred Gender Role		2.46
1.21			
	Self in Non-Preferred Gender Role		-9.82
-1.77			
	Stereotype Trans Person		-11.58
1.31			

Note. Values for plotting elements in the component space.

Element Eigenvectors

			PC_1
PC_2			|
	Self		-0.07
-0.24			
	Ideal Self		0.34
0.03			
	Self in a Romantic Relationship		0.19
-0.16			
	Self not in a Romantic Relationship		-0.06
-0.26			
	Self as seen by Romantic Partner		0.18
-0.05			
	Self as seen by others when in a Romantic Relationship		0.14
-0.07			
	Self as seen by others when not in a Romantic Relationship		-0.05
-0.11			
	Actual or Percieved Partner		0.26
-0.03			
	Ideal Partner		0.33
0.01			
	A typical Male		-0.05
0.88			
	A typical Female		-0.38
-0.07			
	Self in Preferred Gender Role		0.11
0.10			
	Self in Non-Preferred Gender Role		-0.43
-0.15			

Construct Loadings

	PC_1	PC_2
Caring	2.91	-3.58
Thoughtful (of others)	1.45	-2.98
A more valued person	7.70	3.45
Visible in a different way	8.08	0.43
Confidence	7.12	2.21
Feeling like I have something to offer	5.31	-0.56
Big hearted	2.64	-2.95
Not afraid of emotions	1.65	-4.45
Confidence in self	7.41	3.04
Queerness	6.92	-4.15
Feeling comfortable	6.87	2.76
Fluid	6.69	-3.02
Having to change things to suit self	7.34	-4.21
Uncomfortable in biological sex	6.58	3.84

Construct Eigenvectors

	PC_1	PC_2
Caring	0.13	-0.30
Thoughtful (of others)	0.06	-0.25
A more valued person	0.34	0.29
Visible in a different way	0.36	0.04
Confidence	0.31	0.18
Feeling like I have something to offer	0.23	-0.05
Big hearted	0.12	-0.25
Not afraid of emotions	0.07	-0.37
Confidence in self	0.33	0.25
Queerness	0.30	-0.35
Feeling comfortable	0.30	0.23
Fluid	0.29	-0.25
Having to change things to suit self	0.32	-0.35
Uncomfortable in biological sex	0.29	0.32

Note. Values for orienting (drawing) constructs in component space.

{Graph Created: Mr/s Yellow's Grid / PC_1 vs. PC_2 (Slater)}

Implicative Dilemmas for Mr/s Yellow's Grid

Elements Compared : Self vs. Ideal Self
 Scale Midpoint set as Discrepancy Criterion = 4
 Construct Congruence Criterion = 0.2

Discrepant Constructs

A more valued person
Visible in a different way
Uncomfortable in biological sex

Note. Total number of Discrepant Constructs = 3

Congruent Constructs

Caring
Thoughtful (of others)
Feeling like I have something to offer
Big hearted
Not afraid of emotions
Queerness
Having to change things to suit self

Note. Total number of Congruent Constructs = 7

Undifferentiated Constructs

Confidence
Confidence in self
Feeling comfortable
Fluid

Note. Total number of Undifferentiated Constructs = 4

Implicative Dilemmas

Note. Total number of Implicative Dilemmas = 0
Percentage of Implicative Dilemmas = 0.00

Dilemmas in Sentence Form

Note. No Dilemmas were found in the grid.

Slater Analyses for Mr Green's Grid

Original Grid (Mr Green's Grid)

					Self				
					.		Ideal Self		
					.	.	Self in a		
Romantic Relationship					.	.			
in a Romantic Relationship					.	.		Self not	
Self as seen by Romantic Partner					.	.	.	.
Self as seen by others when in a Romantic Relationship					.	.	.	.	.
.				
Self as seen by others when not in a Romantic Relationship					.	.	.	.	.
.				
.				
Actual or Percieved Partner					.	.	.	.	.
.				
.				
Ideal Partner					.	.	.	.	.
.				
.				
A typical Male					.	.	.	.	.
.				
.				
A typical Female					.	.	.	.	.
.				
.				
Self in Preferred					.	.	.	.	.
Gender Role					.	.	.	.	.
.				
.				
Self in Non-					.	.	.	.	.
Preferred Gender Role					.	.	.	.	.
.				
.				
Stereotype Trans Person					.	.	.	.	.
Confidence					5.00	6.00	6.00	5.00	
6.00	6.00	3.00	6.00	6.00	7.00	4.00	6.00	1.00	
3.00	Insecurity								
Autonomy					6.00	6.00	6.00	6.00	
6.00	6.00	6.00	6.00	6.00	6.00	4.00	6.00	3.00	
3.00	Co-dependence								
Nurturing					6.00	6.00	6.00	5.00	
7.00	6.00	5.00	7.00	6.00	3.00	6.00	6.00	7.00	
6.00	Dismissive								
Sincerity					5.00	6.00	6.00	3.00	
6.00	7.00	3.00	7.00	6.00	3.00	6.00	6.00	6.00	
4.00	Hedonistic								
Stability					6.00	7.00	7.00	4.00	
6.00	7.00	3.00	6.00	7.00	4.00	4.00	7.00	1.00	
1.00	Confusion								
Emotionally Mature					6.00	7.00	6.00	4.00	
6.00	7.00	4.00	7.00	7.00	4.00	5.00	6.00	3.00	
2.00	Emotionally Immature								
Acceptance					6.00	7.00	7.00	6.00	
6.00	6.00	5.00	7.00	7.00	4.00	4.00	7.00	2.00	
3.00	Invalidation								
Equality					6.00	7.00	7.00	6.00	
7.00	7.00	6.00	7.00	7.00	2.00	2.00	7.00	4.00	
4.00	Patriarchical								

			Transgressive	7.00	7.00	7.00	7.00	
7.00	7.00	7.00	7.00	7.00	2.00	1.00	7.00	1.00
7.00	Catagorised							
			Fluid	7.00	7.00	7.00	7.00	
7.00	7.00	7.00	7.00	7.00	2.00	2.00	7.00	1.00
4.00	Rigid							
			Freedom	6.00	7.00	6.00	6.00	
7.00	7.00	7.00	7.00	7.00	2.00	2.00	7.00	1.00
4.00	Oppression							
			Complete	6.00	7.00	6.00	6.00	
7.00	6.00	6.00	7.00	7.00	6.00	5.00	7.00	2.00
1.00	Damaged							
Uncomfortable in biological sex				6.00	6.00	6.00	6.00	
7.00	7.00	7.00	3.00	4.00	1.00	1.00	7.00	1.00
4.00	Comfortable in biological sex							

Descriptive Statistics for Elements [Mr Green's Grid]

			Means
Sum of Squares			|
|	Percent Total Sum of Squares		|
		Self	0.60
7.74	1.29		
		Ideal Self	1.21
22.17	3.70		
		Self in a Romantic Relationship	0.98
15.88	2.65		
		Self not in a Romantic Relationship	0.06
14.74	2.46		
		Self as seen by Romantic Partner	1.14
19.60	3.27		
		Self as seen by others when in a Romantic Relationship	1.21
24.45	4.08		
		Self as seen by others when not in a Romantic Relationship	-0.09
27.45	4.59		
		Actual or Percieved Partner	1.06
24.17	4.04		
		Ideal Partner	1.06
21.03	3.51		
		A typical Male	-1.86
89.17	14.90		
		A typical Female	-1.86
82.31	13.75		
		Self in Preferred Gender Role	1.21
23.31	3.89		
		Self in Non-Preferred Gender Role	-2.86
151.03	25.23		
		Stereotype Trans Person	-1.86
75.60	12.63		

Note. Values are based upon deviation matrix in which construct means were

7.14	6.78	2.83	6.16	7.28	0.00		
						Actual or Percieved Partner	4.47
3.46	3.87	6.86	4.36	4.47	8.31	0.00	
						Ideal Partner	3.46
2.00	2.65	6.08	3.61	3.46	7.68	2.00	0.00
						A typical Male	11.66
13.11	12.53	10.91	13.23	13.56	12.21	12.65	12.49
0.00							
						A typical Female	11.58
13.04	12.45	11.79	13.00	13.19	12.53	12.08	12.41
5.83	0.00						
						Self in Preferred Gender Role	2.83
1.41	1.73	5.39	1.73	2.00	6.71	4.47	3.16
13.34	13.34	0.00					
						Self in Non-Preferred Gender Role	14.80
16.70	15.87	14.35	16.19	16.52	14.28	15.72	16.22
10.34	6.56	16.82	0.00				
						Stereotype Trans Person	10.49
12.88	11.87	9.11	12.04	12.57	8.89	12.57	12.73
10.95	9.90	12.73	8.66	0.00			

Element Euclidean Distances (standardized)

								Self
Ideal Self								|
|	Self in a Romantic Relationship							|
|	|	Self not in a Romantic Relationship						|
|	|	|	Self as seen by Romantic Partner					|
|	|	|	|	Self as seen by others when in a Romantic Relationship				|
|	|	|	|	|	Self as seen by others when not in a Romantic Relationship			|
|	|	|	|	|	|	Actual or Percieved Partner		|
|	|	|	|	|	|	|	Ideal Partner	|
A typical Male								|
|	A typical Female							|
|	|	Self in Preferred Gender Role						|
|	|	|	Self in Non-Preferred Gender Role					|

Equality	5.64	45.21	7.55
Transgressive	5.79	76.36	12.76
Fluid	5.64	69.21	11.56
Freedom	5.43	63.43	10.60
Complete	5.64	45.21	7.55
Uncomfortable in biological sex	4.71	72.86	12.17

Total SS: 598.64
Bias: 0.48
Variability: 0.63

Construct Correlations

				Confidence				
				|	Autonomy	|	Nurturing	|
Sincerity				|				|
Stability				|				|
|	Emotionally Mature			|				|
|	|	Acceptance		|				|
|	|	|	Equality	|				|
|	|	|	|	Transgressive				|
|	|	|	|	|	Fluid			|
|	|	|	|	|	|	Freedom		|
Complete				|				|
Uncomfortable in biological sex				|				|
			Confidence	1.00				
			Autonomy	0.80	1.00			
			Nurturing	-0.27	-0.27	1.00		
			Sincerity	0.19	0.01	0.76	1.00	
			Stability	0.83	0.79	0.14	0.54	1.00
1.00			Emotionally Mature	0.71	0.70	0.30	0.68	
0.95	1.00		Acceptance	0.76	0.84	0.14	0.36	
0.92	0.85	1.00	Equality	0.37	0.61	0.45	0.41	
0.68	0.67	0.81	1.00	0.38	0.56	0.20	0.06	
0.51	0.42	0.72	0.85	1.00	0.75	0.20	0.17	
0.70	0.64	0.88	0.92	0.50	0.75	0.20	0.17	
			Fluid	0.50	0.75	0.20	0.17	
			Freedom	0.93	1.00			

			Freedom	0.50	0.73	0.23	0.22
0.70	0.67	0.86	0.92	0.92	0.98	1.00	
			Complete	0.79	0.93	-0.11	0.21
0.85	0.82	0.86	0.56	0.41	0.67	0.67	1.00
Uncomfortable in biological sex				0.29	0.58	0.14	0.03
0.51	0.38	0.63	0.79	0.85	0.87	0.85	0.45
1.00							

Eigenvalue Decomposition

	Eigenvalue	% Variance	Cumulative %	Scree
PC_1	422.49	70.57	70.57	

PC_2	93.48	15.62	86.19	|****
PC_3	47.37	7.91	94.10	|***
PC_4	14.27	2.38	96.49	|*
PC_5	11.31	1.89	98.38	|*
PC_6	3.23	0.54	98.92	|*
PC_7	2.79	0.47	99.38	|*
PC_8	2.14	0.36	99.74	|*
PC_9	0.91	0.15	99.89	|*
PC_10	0.42	0.07	99.96	|*
PC_11	0.16	0.03	99.99	|*
PC_12	0.08	0.01	100.00	|*
PC_13	0.00	0.00	100.00	|*

Element Loadings

		PC_1
PC_2		|
	Self	2.53
0.50		
	Ideal Self	4.54
-1.06		
	Self in a Romantic Relationship	3.69
-0.53		
	Self not in a Romantic Relationship	1.25
2.42		
	Self as seen by Romantic Partner	4.10
0.28		
	Self as seen by others when in a Romantic Relationship	4.43
-0.41		
	Self as seen by others when not in a Romantic Relationship	0.99
4.23		
	Actual or Percieved Partner	3.30
-2.01		
	Ideal Partner	3.86
-1.84		
	A typical Male	-7.20
-3.97		
	A typical Female	-8.16
-3.62		
	Self in Preferred Gender Role	4.66

-0.33		
	Self in Non-Preferred Gender Role	-11.75
0.79		
	Stereotype Trans Person	-6.23
5.55		

Note. Values for plotting elements in the component space.

Element Eigenvectors

		PC_1
PC_2		|
	Self	0.12
0.05		
	Ideal Self	0.22
-0.11		
	Self in a Romantic Relationship	0.18
-0.05		
	Self not in a Romantic Relationship	0.06
0.25		
	Self as seen by Romantic Partner	0.20
0.03		
	Self as seen by others when in a Romantic Relationship	0.22
-0.04		
	Self as seen by others when not in a Romantic Relationship	0.05
0.44		
	Actual or Percieved Partner	0.16
-0.21		
	Ideal Partner	0.19
-0.19		
	A typical Male	-0.35
-0.41		
	A typical Female	-0.40
-0.37		
	Self in Preferred Gender Role	0.23
-0.03		
	Self in Non-Preferred Gender Role	-0.57
0.08		
	Stereotype Trans Person	-0.30
0.57		

Construct Loadings

	PC_1	PC_2
Confidence	3.88	-3.41
Autonomy	3.42	-1.22
Nurturing	0.73	0.45
Sincerity	1.58	-2.28
Stability	6.63	-3.96
Emotionally Mature	4.59	-3.27
Acceptance	5.62	-1.52

Equality	6.13	1.22
Transgressive	7.57	3.81
Fluid	8.08	1.71
Freedom	7.71	1.46
Complete	5.19	-3.34
Uncomfortable in biological sex	7.04	3.76

Construct Eigenvectors

	PC_1	PC_2
Confidence	0.19	-0.35
Autonomy	0.17	-0.13
Nurturing	0.04	0.05
Sincerity	0.08	-0.24
Stability	0.32	-0.41
Emotionally Mature	0.22	-0.34
Acceptance	0.27	-0.16
Equality	0.30	0.13
Transgressive	0.37	0.39
Fluid	0.39	0.18
Freedom	0.38	0.15
Complete	0.25	-0.35
Uncomfortable in biological sex	0.34	0.39

Note. Values for orienting (drawing) constructs in component space.

{Graph Created: Mr Green's Grid / PC_1 vs. PC_2 (Slater)}

Implicative Dilemmas for Mr Green's Grid

Elements Compared : Self vs. Ideal Self
 Scale Midpoint set as Discrepancy Criterion = 4
 Construct Congruence Criterion = 0.2

Discrepant Constructs

Note. Total number of Discrepant Constructs = 0

Congruent Constructs

Confidence
 Autonomy
 Nurturing
 Sincerity
 Stability
 Emotionally Mature
 Acceptance
 Equality
 Transgressive
 Fluid
 Freedom
 Complete
 Uncomfortable in biological sex

Note. Total number of Congruent Constructs = 13

Undifferentiated Constructs

Note. Total number of Undifferentiated Constructs = 0

Implicative Dilemmas

*Note. Total number of Implicative Dilemmas = 0
Percentage of Implicative Dilemmas = 0.00*

Dilemmas in Sentence Form

Note. No Dilemmas were found in the grid.

Slater Analyses for Mr Blue's Grid

Original Grid (Mr Blue's Grid)

					Self				
					.		Ideal Self		
					.	.	Self in a		
Romantic Relationship					.	.			
in a Romantic Relationship					.	.			Self not
Self as seen by Romantic Partner					.	.			.
.					.	.			.
Self as seen by others when in a Romantic Relationship					.	.			.
.					.	.			.
Self as seen by others when not in a Romantic Relationship					.	.			.
Relationship					.	.			.
.					.	.			.
.					.	.			.
Actual or Percieved Partner					.	.			.
.					.	.			.
.					.	.			.
Ideal Partner					.	.			.
.					.	.			.
.					.	.			.
A typical Male					.	.			.
.					.	.			.
.					.	.			.
A typical Female					.	.			.
.					.	.			.
Self in					.	.			.
Preferred Gender Role					.	.			.
.					.	.			.
.					.	.			.
Self					.	.			.
in Non-Preferred Gender Role					.	.			.
.					.	.			.
.					.	.			.
Stereotype Trans Person					.	.			.
The guy with a biological penis	5.00	7.00	6.00	5.00					
4.00	2.00	4.00	4.00	4.00	7.00	1.00	5.00	1.00	
5.00									
Being the girl in the relationship									
Pride	4.00	6.00	6.00	4.00					
5.00	4.00	5.00	6.00	6.00	4.00	5.00	6.00	2.00	
5.00									
Frustration (sexual)									
More relaxed	5.00	7.00	4.00	5.00					
4.00	4.00	5.00	6.00	7.00	7.00	3.00	5.00	2.00	
3.00									
Pressured									
Calm	5.00	7.00	5.00	5.00					
4.00	4.00	5.00	6.00	7.00	6.00	3.00	5.00	2.00	
3.00									
Frustrating									
Accepting	6.00	6.00	6.00	6.00					
5.00	2.00	6.00	7.00	7.00	4.00	5.00	6.00	4.00	
5.00									
Judgemental									
Busy	4.00	6.00	6.00	4.00					
5.00	5.00	4.00	5.00	4.00	4.00	4.00	4.00	3.00	
4.00									
Available									
Available in a good way	5.00	6.00	5.00	5.00					
5.00	4.00	5.00	6.00	6.00	5.00	4.00	4.00	4.00	
4.00									
Tied down									
Lovely	6.00	7.00	6.00	6.00					
6.00	4.00	5.00	6.00	7.00	5.00	6.00	6.00	3.00	

4.00	Disdain							
				Cool	6.00	7.00	4.00	6.00
6.00	4.00	5.00	6.00	7.00	6.00	5.00	6.00	2.00
2.00	Uncool							
				Straight/Queer	4.00	4.00	4.00	4.00
4.00	4.00	4.00	4.00	4.00	4.00	4.00	4.00	4.00
4.00	Queer/Straight							
				Mutual understanding	6.00	7.00	7.00	6.00
7.00	2.00	5.00	7.00	7.00	5.00	5.00	7.00	4.00
2.00	Ignorance							
				Personality	6.00	7.00	6.00	6.00
6.00	4.00	6.00	7.00	7.00	6.00	6.00	7.00	4.00
2.00	Hollow							
				Comfortable	6.00	7.00	6.00	6.00
5.00	3.00	6.00	6.00	7.00	6.00	5.00	7.00	1.00
2.00	Uncomfortable							

Descriptive Statistics for Elements [Mr Blue's Grid]

			Means
Sum of Squares			|
|	Percent Total Sum of Squares		|
		Self	0.27
3.89	1.17		
		Ideal Self	1.51
35.46	10.69		
		Self in a Romantic Relationship	0.51
12.32	3.71		
		Self not in a Romantic Relationship	0.27
3.89	1.17		
		Self as seen by Romantic Partner	0.12
5.17	1.56		
		Self as seen by others when in a Romantic Relationship	-1.42
43.17	13.02		
		Self as seen by others when not in a Romantic Relationship	0.04
2.03	0.61		
		Actual or Percieved Partner	0.89
14.17	4.27		
		Ideal Partner	1.20
28.17	8.50		
		A typical Male	0.35
18.46	5.57		
		A typical Female	-0.65
18.89	5.70		
		Self in Preferred Gender Role	0.58
11.32	3.41		
		Self in Non-Preferred Gender Role	-2.19
78.17	23.58		
		Stereotype Trans Person	-1.49
56.46	17.03		

Note. Values are based upon deviation matrix in which construct means were removed from the original grid scores.

Total SS: 331.57

Element Euclidean Distances

									Self
Ideal Self									|
|	Self in a Romantic Relationship								|
|	|	Self not in a Romantic Relationship							|
|	|	|	Self as seen by Romantic Partner						|
|	|	|	|	Self as seen by others when in a Romantic Relationship					|
|	|	|	|	|	Self as seen by others when not in a Romantic Relationship				|
|	|	|	|	|	|	Actual or Percieved Partner			|
|	|	|	|	|	|	|			Ideal Partner
A typical Male									|
|	A typical Female								|
|	|	|	Self in Preferred Gender Role						|
|	|	|	|	Self in Non-Preferred Gender Role					|
|	|	|	|	|	Stereotype Trans Person				|
								Self	0.00
								Ideal Self	5.10
0.00									
								Self in a Romantic Relationship	3.87
5.20	0.00								
								Self not in a Romantic Relationship	0.00
5.10	3.87	0.00							
								Self as seen by Romantic Partner	2.83
6.16	3.61	2.83	0.00						
								Self as seen by others when in a Romantic Relationship	8.12
11.66	9.00	8.12	7.48	0.00					

Available in a good way	4.86	7.71	2.33
Lovely	5.50	17.50	5.28
Cool	5.14	33.71	10.17
Straight/Queer	4.00	0.00	0.00
Mutual understanding	5.50	41.50	12.52
Personality	5.71	26.86	8.10
Comfortable	5.21	46.36	13.98

Total SS: 331.57
Bias: 0.36
Variability: 0.47

Construct Correlations

				The guy with a biological penis	Pride	More relaxed	Calm
Accepting							
Busy							
Available in a good way							
Lovely							
Cool							
Straight/Queer							
Mutual understanding							
Personality							
Comfortable							
The guy with a biological penis				1.00			
Pride				0.44	1.00		
More relaxed				0.66	0.48	1.00	
Calm				0.68	0.61	0.97	1.00
Accepting				0.38	0.63	0.44	0.55
Busy				0.44	0.61	0.30	0.45
Available in a good way				0.50	0.49	0.80	0.85
Lovely				0.45	0.74	0.65	0.74
Cool				0.44	0.50	0.83	0.82
Straight/Queer				. . . .		

		Mutual understanding					
0.76	0.35	0.67	0.83	0.75	.	1.00	
		Personality					
0.62	0.30	0.66	0.83	0.88	.	0.90	1.00
		Comfortable					
0.67	0.37	0.66	0.90	0.90	.	0.81	0.90
1.00							

Eigenvalue Decomposition

	Eigenvalue	% Variance	Cumulative %	Scree
PC_1	231.68	69.87	69.87	

PC_2	39.76	11.99	81.86	***
PC_3	22.46	6.77	88.64	**
PC_4	12.84	3.87	92.51	**
PC_5	10.74	3.24	95.75	**
PC_6	7.51	2.26	98.01	*
PC_7	3.61	1.09	99.10	*
PC_8	1.80	0.54	99.64	*
PC_9	0.67	0.20	99.85	*
PC_10	0.28	0.09	99.93	*
PC_11	0.22	0.07	100.00	*
PC_12	0.00	0.00	100.00	*
PC_13	0.00	0.00	100.00	*

Element Loadings

		PC_1
PC_2		|
	Self	-1.34
-0.05		
	Ideal Self	-5.61
1.61		
	Self in a Romantic Relationship	-1.54
0.48		
	Self not in a Romantic Relationship	-1.34
-0.05		
	Self as seen by Romantic Partner	-0.39
-1.27		
	Self as seen by others when in a Romantic Relationship	5.68
1.02		
	Self as seen by others when not in a Romantic Relationship	-0.28
-0.15		
	Actual or Percieved Partner	-3.19
-1.05		
	Ideal Partner	-4.77
-1.02		
	A typical Male	-1.83
3.12		
	A typical Female	2.44
-3.25		

-0.86	Self in Preferred Gender Role	-2.67
-1.49	Self in Non-Preferred Gender Role	8.45
2.97	Stereotype Trans Person	6.39

Note. Values for plotting elements in the component space.

Element Eigenvectors

		PC_1
PC_2		|
-0.01	Self	-0.09
0.25	Ideal Self	-0.37
0.08	Self in a Romantic Relationship	-0.10
-0.01	Self not in a Romantic Relationship	-0.09
-0.20	Self as seen by Romantic Partner	-0.03
0.16	Self as seen by others when in a Romantic Relationship	0.37
-0.02	Self as seen by others when not in a Romantic Relationship	-0.02
-0.17	Actual or Percieved Partner	-0.21
-0.16	Ideal Partner	-0.31
0.49	A typical Male	-0.12
-0.52	A typical Female	0.16
-0.14	Self in Preferred Gender Role	-0.18
-0.24	Self in Non-Preferred Gender Role	0.56
0.47	Stereotype Trans Person	0.42

Construct Loadings

	PC_1	PC_2
The guy with a biological penis	-4.50	4.65
Pride	-2.91	-0.07
More relaxed	-4.89	1.77
Calm	-4.87	1.35
Accepting	-3.44	-1.25
Busy	-1.36	0.69

Available in a good way	-2.23	0.18
Lovely	-3.80	-0.94
Cool	-5.27	-0.79
Straight/Queer	0.00	0.00
Mutual understanding	-5.50	-2.35
Personality	-4.60	-1.95
Comfortable	-6.57	-0.52

Construct Eigenvectors

	PC_1	PC_2
The guy with a biological penis	-0.30	0.74
Pride	-0.19	-0.01
More relaxed	-0.32	0.28
Calm	-0.32	0.21
Accepting	-0.23	-0.20
Busy	-0.09	0.11
Available in a good way	-0.15	0.03
Lovely	-0.25	-0.15
Cool	-0.35	-0.12
Straight/Queer	0.00	0.00
Mutual understanding	-0.36	-0.37
Personality	-0.30	-0.31
Comfortable	-0.43	-0.08

Note. Values for orienting (drawing) constructs in component space.

{Graph Created: Mr Blue's Grid / PC_1 vs. PC_2 (Slater)}

Implicative Dilemmas for Mr Blue's Grid

Elements Compared : Self vs. Ideal Self
 Scale Midpoint set as Discrepancy Criterion = 4
 Construct Congruence Criterion = 0.2

Discrepant Constructs

Note. Total number of Discrepant Constructs = 0

Congruent Constructs

The guy with a biological penis
 More relaxed
 Calm
 Accepting
 Available in a good way
 Lovely
 Cool
 Mutual understanding
 Personality
 Comfortable

Note. Total number of Congruent Constructs = 10

Undifferentiated Constructs

Pride
Busy
Straight/Queer

Note. Total number of Undifferentiated Constructs = 3

Implicative Dilemmas

*Note. Total number of Implicative Dilemmas = 0
Percentage of Implicative Dilemmas = 0.00*

Dilemmas in Sentence Form

Note. No Dilemmas were found in the grid.

6.00	6.00	6.00	Polite	6.00	6.00	6.00	6.00	6.00
3.00	Impolite			5.00	6.00	5.00	6.00	6.00
5.00	2.00	4.00	Perverse	7.00	4.00	5.00	7.00	
6.00	Normal			4.00	5.00	6.00	4.00	7.00
5.00	6.00	6.00	Honest	6.00	7.00	5.00	7.00	
4.00	Manipulative			6.00	6.00	5.00	6.00	6.00
4.00	7.00	6.00	Straight forward	4.00	6.00	4.00	7.00	
2.00	Militant			6.00	6.00	5.00	6.00	6.00
Uncomfortable in biological sex				5.00	7.00	7.00	7.00	
6.00	7.00	6.00	1.00	1.00	6.00	3.00	7.00	4.00
4.00	Comfortable in biological sex							

Descriptive Statistics for Elements [Mr Violet's Grid]

			Means
Sum of Squares			|
|	Percent Total Sum of Squares		|
		Self	-0.12
21.63	5.37		
		Ideal Self	0.80
18.06	4.48		
		Self in a Romantic Relationship	-0.27
20.20	5.01		
		Self not in a Romantic Relationship	1.26
29.20	7.24		
		Self as seen by Romantic Partner	-0.51
34.78	8.63		
		Self as seen by others when in a Romantic Relationship	-0.43
34.35	8.52		
		Self as seen by others when not in a Romantic Relationship	0.42
22.63	5.61		
		Actual or Percieved Partner	0.11
30.63	7.60		
		Ideal Partner	-0.04
31.49	7.81		
		A typical Male	-0.20
35.63	8.84		
		A typical Female	0.03
11.78	2.92		
		Self in Preferred Gender Role	1.19
22.49	5.58		
		Self in Non-Preferred Gender Role	-1.66
56.35	13.98		
		Stereotype Trans Person	-0.58
33.92	8.41		

Note. Values are based upon deviation matrix in which construct means were

removed from the original
grid scores.
Total SS: 403.14

Element Euclidean Distances

									Self
Ideal Self									|
|	Self in a Romantic Relationship								|
|	|	Self not in a Romantic Relationship							|
|	|	|	Self as seen by Romantic Partner						|
|	|	|	|	Self as seen by others when in a Romantic Relationship					|
|	|	|	|	|	Self as seen by others when not in a Romantic Relationship				|
|	|	|	|	|	|	Actual or			|
Percieved Partner									|
|	|	|	|	|	|	|			Ideal
Partner									|
A typical Male									|
|	A typical Female								|
|	|	Self in Preferred Gender Role							|
|	|	Self in Non-Preferred Gender Role							|
|	|	|	Self as seen by Romantic Partner						|
|	|	|	|	Self as seen by others when in a Romantic Relationship					|
|	|	|	|	|	Self as seen by others when not in a Romantic Relationship				|
								Self	0.00
								Ideal Self	7.48
0.00									
								Self in a Romantic Relationship	4.00
7.35	0.00								
								Self not in a Romantic Relationship	7.87
3.74	8.37	0.00							
								Self as seen by Romantic Partner	4.58
8.66	3.61	10.05	0.00						
								Self as seen by others when in a Romantic Relationship	9.17
7.07	7.07	8.37	8.77	0.00					
								Self as seen by others when not in a Romantic Relationship	8.66

4.58	8.31	4.80	10.20	6.08	0.00		
						Actual or Percieved Partner	8.31
6.56	9.54	7.28	9.90	9.22	6.48	0.00	
						Ideal Partner	6.56
8.43	7.42	8.89	7.21	8.89	8.72	5.83	0.00
						A typical Male	8.89
6.56	8.89	6.40	10.86	7.28	4.90	8.00	10.49
0.00							
						A typical Female	5.66
6.00	5.83	7.21	5.92	7.07	7.00	5.00	3.32
8.77	0.00						
						Self in Preferred Gender Role	7.00
3.61	7.28	2.24	8.83	8.66	5.48	7.35	8.37
6.93	6.56	0.00					
						Self in Non-Preferred Gender Role	8.94
10.49	7.48	12.49	7.55	8.60	9.75	9.95	9.64
10.05	8.25	11.62	0.00				
						Stereotype Trans Person	6.32
8.37	6.78	9.27	7.81	10.00	8.66	8.66	8.43
8.06	7.48	8.06	8.25	0.00			

Element Euclidean Distances (standardized)

								Self
Ideal Self								|
|	Self in a Romantic Relationship							|
|	|	Self not in a Romantic Relationship						|
|	|	|	Self as seen by Romantic Partner					|
|	|	|	|	Self as seen by others when in a Romantic Relationship				|
|	|	|	|	|	Self as seen by others when not in a Romantic Relationship			|
|	|	|	|	|	|	Actual or Percieved Partner		|
|	|	|	|	|	|	|	Ideal Partner	|
A typical Male								|
|	A typical Female							|
|	|	Self in Preferred Gender Role						|
|	|	|	Self in Non-Preferred Gender Role					|

Demure	4.43	25.43	6.31
Polite	5.64	9.21	2.29
Perverse	4.79	42.36	10.51
Honest	5.50	21.50	5.33
Straight forward	5.07	34.93	8.66
Uncomfortable in biological sex	5.07	60.93	15.11

Total SS: 403.14
 Bias: 0.33
 Variability: 0.51

Construct Correlations

				Sociable				
				|	Motivated			
				|	|	Dominant		
Independent				|	|	|		
Outgoing				|	|	|		
|	Compassionate			|	|	|		
|	|	Sensitive		|	|	|		
|	|	|	Demure	|	|	|		
|	|	|	|	Polite	|	|		
|	|	|	|	|	Perverse	|		
|	|	|	|	|	|	Honest		
Straight forward				|	|	|		
Uncomfortable in biological sex				|	|	|		
				Sociable	1.00			
				Motivated	0.85	1.00		
				Dominant	0.85	0.70	1.00	
				Independent	0.86	0.66	0.84	1.00
				Outgoing	0.58	0.73	0.55	0.61
1.00				Compassionate	-0.21	-0.21	-0.31	-0.20
-0.34	1.00			Sensitive	-0.33	-0.33	-0.46	-0.34
-0.50	0.76	1.00		Demure	0.11	-0.03	-0.19	-0.12
-0.32	0.37	0.34	1.00	Polite	-0.01	-0.30	-0.05	-0.06
-0.32	-0.02	0.10	0.60	Perverse	0.22	0.22	0.17	0.38
0.41	0.50	0.12	-0.02		-0.21	1.00		

			Honest	0.61	0.50	0.41	0.54
0.33	0.21	-0.18	0.51	0.32	0.41	1.00	
			Straight forward	0.67	0.53	0.51	0.50
0.31	-0.17	-0.40	0.59	0.47	0.08	0.86	1.00
			Uncomfortable in biological sex	0.01	0.06	0.18	0.03
0.40	-0.17	-0.25	-0.26	0.27	0.18	0.18	0.13
1.00							

Eigenvalue Decomposition

	Eigenvalue	% Variance	Cumulative %	Scree
PC_1	153.34	38.04	38.04	|*****
PC_2	82.91	20.57	58.60	|*****
PC_3	65.78	16.32	74.92	|****
PC_4	52.00	12.90	87.82	|****
PC_5	18.70	4.64	92.46	|**
PC_6	13.40	3.32	95.78	|**
PC_7	7.91	1.96	97.75	|*
PC_8	4.70	1.17	98.91	|*
PC_9	2.36	0.58	99.50	|*
PC_10	1.07	0.26	99.76	|*
PC_11	0.85	0.21	99.97	|*
PC_12	0.10	0.02	100.00	|*
PC_13	0.01	0.00	100.00	|*

Element Loadings

		PC_1
PC_2		|
	Self	2.50
-2.20		
	Ideal Self	-3.15
-0.38		
	Self in a Romantic Relationship	3.09
0.06		
	Self not in a Romantic Relationship	-4.87
-1.60		
	Self as seen by Romantic Partner	4.99
-1.26		
	Self as seen by others when in a Romantic Relationship	-0.50
3.79		
	Self as seen by others when not in a Romantic Relationship	-3.75
2.03		
	Actual or Percieved Partner	-1.73
-1.61		
	Ideal Partner	2.02
-3.41		
	A typical Male	-3.60
3.57		
	A typical Female	1.19
-1.91		
	Self in Preferred Gender Role	-3.43
-1.96		

4.56	Self in Non-Preferred Gender Role	5.24
0.33	Stereotype Trans Person	2.01

Note. Values for plotting elements in the component space.

Element Eigenvectors

		PC_1
PC_2		|
	Self	0.20
-0.24		
	Ideal Self	-0.25
-0.04		
	Self in a Romantic Relationship	0.25
0.01		
	Self not in a Romantic Relationship	-0.39
-0.18		
	Self as seen by Romantic Partner	0.40
-0.14		
	Self as seen by others when in a Romantic Relationship	-0.04
0.42		
	Self as seen by others when not in a Romantic Relationship	-0.30
0.22		
	Actual or Percieved Partner	-0.14
-0.18		
	Ideal Partner	0.16
-0.37		
	A typical Male	-0.29
0.39		
	A typical Female	0.10
-0.21		
	Self in Preferred Gender Role	-0.28
-0.22		
	Self in Non-Preferred Gender Role	0.42
0.50		
	Stereotype Trans Person	0.16
0.04		

Construct Loadings

	PC_1	PC_2
Sociable	-4.14	-0.89
Motivated	-3.62	-0.43
Dominant	-5.59	0.33
Independent	-5.39	-1.01
Outgoing	-3.48	0.67
Compassionate	2.40	-5.65
Sensitive	2.78	-2.78
Demure	0.32	-3.18

Polite	-0.06	-0.32
Perverse	-2.04	-3.88
Honest	-3.03	-2.55
Straight forward	-4.19	-1.55
Uncomfortable in biological sex	-2.50	2.54

Construct Eigenvectors

	PC_1	PC_2
Sociable	-0.33	-0.10
Motivated	-0.29	-0.05
Dominant	-0.45	0.04
Independent	-0.44	-0.11
Outgoing	-0.28	0.07
Compassionate	0.19	-0.62
Sensitive	0.22	-0.31
Demure	0.03	-0.35
Polite	0.00	-0.04
Perverse	-0.16	-0.43
Honest	-0.24	-0.28
Straight forward	-0.34	-0.17
Uncomfortable in biological sex	-0.20	0.28

Note. Values for orienting (drawing) constructs in component space.

{Graph Created: Mr Violet's Grid / PC_1 vs. PC_2 (Slater)}

Implicative Dilemmas for Mr Violet's Grid

Elements Compared : Self vs. Ideal Self
 Scale Midpoint set as Discrepancy Criterion = 4
 Construct Congruence Criterion = 0.2

Discrepant Constructs

Sociable
 Motivated
 Dominant

Note. Total number of Discrepant Constructs = 3

Congruent Constructs

Independent
 Compassionate
 Sensitive
 Polite
 Honest
 Uncomfortable in biological sex

Note. Total number of Congruent Constructs = 6

Undifferentiated Constructs

Outgoing
 Demure
 Perverse
 Straight forward

Note. Total number of Undifferentiated Constructs = 4

Implicative Dilemmas

Dilemmas Summary [Discrepant::Congruent]

	Self [Dis]	Ideal Self [Dis]	Self [Con]	Ideal Self	
[Con]					
Pearson Correlation					
Sociable :: Compassionate	3.00	6.00	7.00	6.00	-
0.21					
Sociable :: Sensitive	3.00	6.00	6.00	5.00	-
0.33					
Motivated :: Compassionate	3.00	6.00	7.00	6.00	-
0.21					
Motivated :: Sensitive	3.00	6.00	6.00	5.00	-
0.33					
Motivated :: Polite	3.00	6.00	6.00	6.00	-
0.30					
Dominant :: Compassionate	2.00	6.00	7.00	6.00	-
0.31					
Dominant :: Sensitive	2.00	6.00	6.00	5.00	-
0.46					

Note. Total number of Implicative Dilemmas = 7
 Percentage of Implicative Dilemmas = 8.97

Dilemmas in Sentence Form

Self is construed as "Unsociable"
 ...whereas Ideal Self is construed as "Sociable"
 The dilemma is a(n) "Sociable" person tends to be a(n) "Selfish"
 person (r = 0.21)

Self is construed as "Unsociable"
 ...whereas Ideal Self is construed as "Sociable"
 The dilemma is a(n) "Sociable" person tends to be a(n)
 "Insensitive" person (r = 0.33)

Self is construed as "Unmotivated"
 ...whereas Ideal Self is construed as "Motivated"
 The dilemma is a(n) "Motivated" person tends to be a(n) "Selfish"
 person (r = 0.21)

Self is construed as "Unmotivated"
...whereas Ideal Self is construed as "Motivated"
The dilemma is a(n) "Motivated" person tends to be a(n)
"Insensitive" person (r = 0.33)

Self is construed as "Unmotivated"
...whereas Ideal Self is construed as "Motivated"
The dilemma is a(n) "Motivated" person tends to be a(n) "Impolite"
person (r = 0.30)

Self is construed as "Submissive"
...whereas Ideal Self is construed as "Dominant"
The dilemma is a(n) "Dominant" person tends to be a(n) "Selfish"
person (r = 0.31)

Self is construed as "Submissive"
...whereas Ideal Self is construed as "Dominant"
The dilemma is a(n) "Dominant" person tends to be a(n)
"Insensitive" person (r = 0.46)

Appendix 8

Mr Orange

Initial Thematic Codes

Encounter phase

Paragraph 1, 2

- What is their reaction going to be? (other peoples reaction to him being trans)
- I have to feel like the risk is worth it (worth risking telling someone he is trans)
- Don't want to think about if someone reacts in a bad way
- I think about when I should tell people – and how do I do it? – How will they react?

Paragraph 3

- Labeling of sexuality and partners may be different
- Pre – and post transsexual relationships
- “I'm bisexual myself, but all my relationships have been with women...
- Had relationship with straight woman pre transition... post transition was in relationship with a lesbian... a bit mixed up in the head. All mixed up for them. All mixed up for, you know, everything
- Good experience with romantic relationships
- Romantic relationships are not necessarily defined by people's bodies or my own body or ... and what they're used to and what I'm used to.

Paragraph 4

- Romantic relationships – an emotional connection – some level of intimacy, emotional but also physical

Anticipation phase

Paragraph 5, 6

- No expectations
- I'm always worried about people's reaction
- I predict there's going to be some level of confusion on their part

- There's going to have to be some sort of patience with me, as they try and set something right in their head – this can be frustrating
- I have to remember that its taken me years to get more comfortable with myself
- I worry that the specific person will love me as I am or as I will be – because I will have some surgery – are they loving me now, or are they loving for what I will be or are they wanting me to be something complexly different – you know [laughs]. Um [sigh]. Yeah

Paragraph 7

- Will have top surgery – probably not lower – options aren't very good
- Each time I enter a relationship – there will be a barrier we have to overcome – not just them, me as well – worrying what they're thinking of me

Paragraph 8, 9

- Limitless options
- Everyone is completely different – no preconceptions
- Hopefully people will also be open-minded enough not to put a limit on who they'll be will as well.
- I understand that I could be with anyone
- Didn't think I would fancy a lesbian – didn't think she would be comfortable with that...
- I still think of myself pretransition as a man – it wasn't weird for me, it was weird for her

Paragraph 10

- Everyday concerns like everyone else – is the relationship going anywhere, how hard do we have to work at it, are we fighting all the time,
- Not just transgender concerns – I'm lucky because I pass pretty well.

Investment phase

Paragraph 11

- It matters quite a lot – the initial stages of the relationship are scary for everybody

- My being trans adds an extra dimension to the relationship – but it would be scary initially for many people
- I want to try to make it work, if I like someone enough
- At the moment, I'm not worried because I'm single, but when it does happen, it keeps me awake at night – what am I supposed to say?, what am I supposed to do?
- There's always someone else eventually

Dis/confirmation phase

Paragraph 12, 13

- I think I worry too much. I'm too cynical
- I underestimate that people will not have enough patients to understand
- In my experience (though) people have been okay – they give me a little while – they take time to understand it

Constructive revision phase

Paragraph 14, 15

- I've learned that I should relax and be more confident – happy in who I am
- Other people will reciprocate
- Next time – don't get frustrated if they don't get it straight away – give space and time

Paragraph 16, 17

- Each time I encounter a relationship – it will probably get a little easier for me to relax a little bit more (it's always a mine field, but relax more)
- I've changed the way I view things – less cynical

Paragraph 18, 19

- Not to worry – if it's right – it will happen, if not then it won't
- If two people like each other than they can overcome something like this – it doesn't matter too much

- If it doesn't matter to me – it shouldn't matter to them
- In my experience – romantic attachments have been to a lot of different other people
- Once people stop worrying about labels, they are okay with it

Paragraph 20, 21

- The mind is very fluid – people are able to accept that
- People are fairly open if I just explain it to them – the way I see it
- At the moment, I feel good about the way I look
- In the past, I was androgynous – people didn't know what I was
- Now I'm more confident

Paragraph 22

- I've always passed well
- Better with hormones – people used to get confused about my voice
- Now more confident
- Now people are surprised that I'm a transman – before they used to say – yeah I can see that – I thought there was something about you. (more congruent with self)

Appendix 9

Searching for themes

- Differentiating between romantic relationships (RR) and just sex
 - Alex (previously called Mr Green) – paragraphs 11, 12, 13, 21
 - Ms Violet – paragraph 1, 2 – (sexual liaison)
 - Mr Orange – paragraph 4
- Mr/s yellow – important to fancy someone – Mr Blue – paragraph 28 – don't go out with someone just because they like you if it isn't reciprocated – go out with someone you fancy
- Partners view of world is important (Ms Violet – paragraph 2, also mentioned by Mr Green, and Mr Red (political stance – no BNP member...))
 - Mr Blue – no BNP or devout Christian ... paragraph 19
- Body issues
 - (Possible exception) – Mr Red paragraph 30 – Learning to feel more comfortable with body, with self...
 - Mr/s Yellow – paragraph 60 – advantage of not having rr – less self-conscious about body
 - Mr/s Yellow- page 13 – very nervous about La seeing my body
- Fear of rejection – Mr Green
 - Mr/s Yellow – paragraph 32 – not to imagine – in case I get hurt
 - Mr Orange – paragraph 6 and 7 – barrier – worrying about what they will think of me
 - Mr Blue – paragraph 15 - If I got into a relationship with someone who didn't know that I was trans before, I'd probably feel the same amount of nervousness, if they would reject me if they were queer or if they were cisgender or if they were straight or anything
- Self esteem related to validation of body through sex with other – Do I pass? – attractiveness to others
 - Mr Green – paragraph 24
 - Mr/s Yellow – page 13 – somebody's reading your body in a way that's different to how I read my body... - page 14 – it's made me see my body differently.....lots of scarring on my body – Emily used to want to hide my body away – my scars... La handled it

totally perfectly – no big deal and I was getting myself into such a state about it

- Mr Red – paragraph 36 - *I'm not desperate for that confirmation that I'm okay...* (Mr Green also talked about self esteem and sex)
- Mr Red – paragraph 37 - *Not looking for depth in relationship – just looking for validation about body*
- Ms Violet – paragraph 3 – wanting sex because there was no intimacy
- Ms Violet – paragraph 11 - *For me, I think I go for straight women because it's some validation that they see something male*
- Ms Violet – paragraph 13 - *Hugging tall women – emasculating – although she's thinking, I'm with a woman so it wouldn't occur to her*
- Ms Violet – paragraph 14 - *Sex was good and really frequent, but – again, it was lesbian sex*
- Ms Violet – paragraph 14, page 19 - *I needed somebody to say, look, you are a woman, but I'm not attracted to you as a woman...*
- Ms Violet – paragraph 14, page 19 - ** This unsatisfaction from sex...I might have an orgasm, but I'm not satisfied. There's something missing in my sex life. So, I'm thinking, this is what it is, to be able to act like a man when I'm with a woman rather than ... with Rachel, we had lesbian sex*
- Ms Violet – paragraph 14, page 20 - *My problem is – what I want in my head and what I do – I can't seem to marry the two. I want to be sort of more in control and more dominant and more assertive, but when I get the change I can't do it. I can't step up.*
- Ms Violet – paragraph 17, 18 - *Needless to say, I'm not seeing this woman again because the thought of losing Rachel... but it was all so tied up with the gender thing – that this woman, she didn't want me as a woman. She didn't want me to touch her as a woman. She wanted to (Me – Experience you as a man?) Yes – Suck my strap-on like it's a cock*
- Ms Violet – more elaboration of this – paragraph 39, 40, 41, 42 ...
- Ms Violet – paragraph 18 - *I'm a sexual person and I have a sexual drive, but I couldn't get satisfied. I could masturbate and have an orgasm in about 15 seconds, but it's that feeling between orgasm and satisfaction*
- Ms Violet – paragraph 18 – *making sense of sexual aggression and transion - The sexual aggression was to do with feelings like an*

impotent male because since I've come out as, this is what I want to do and this is who I am, 99% of that is gone

- Ms Violet – paragraph 19 - *Having sex with Helen was amazing because ... it was like losing my virginity because it's not like I wanted to be horrible to her or ... but I wanted her to be submissive, so she didn't try to do things that would turn me off, like touch my breasts or go down on me*
- Mr Blue - paragraph 7 (explaining not being a lesbian because lesbians are women – *explaining sex to cisgendered friends – only about penetration*)
- *Mr Blue – paragraph 9 - My genitals have grown with testosterone*
- I consider it my dick – and I find it very hard to convey that because of peoples perception of a penis – on a man – enough to get hard, pee through and have intercourse with – I know that mine can't do all that, but its still my dick....
- Importance of reciprocated sexual desire
 - Mr/s Yellow – paragraph 5 – fancying someone is really important
 - Alex – paragraph 17, 18
 - Ms Violet – paragraph 10, page 12 - *When I have sex, I never feel satisfied, and I think it's because I have sex in a woman's body*
 - Mr/s Yellow – new partner – not bothered about scars
 - Mr Blue “I consider it (like) my dick
- Excitement of new relationship (body image and negotiating boundaries in new relationship)
 - Alex – paragraph 19
 - Mr/s Yellow – paragraph 55 - It feels exciting (new relationship) – something to look forward to
 - Mr Red paragraph 33 – finding someone who loved body, not just accepted it – nice quote - *There's a thin line between it being a novelty and just loving it, and finding a balance* – paragraph 34 also
- Value of honesty and open communication
 - Alex – paragraph 21, 31, 35
 - Mr Red – process of having multi-relationships – wife boyfriend girlfriend of wife ...
 - Mr/s Yellow -
 - Mr Red – paragraph 23 - *Finding someone who understands me and my transness* – (Mr Blue also) – related to the Whole of my

identity (multiple partners as an expression of sexual and trans identities)

- *Nice quotes* same paragraph Mr Red- Not defining the relationship in straight or gay terms – the relationship is not straight forward in those terms. - People being afraid to sleep with him in case that means they will be straight or gay
 - *Nice quote* – Mr Red paragraph 24 - Finding someone who actually understands and respects me and loves me for who I am
 - *Mr Orange* – paragraph 6 - I worry that the specific person will love me as I am or as I will be – because I will have some surgery – are they loving me now, or are they loving for what I will be or are they wanting me to be something complexly different – you know [laughs]. Um [sigh]. Yeah (body issue – goes on to explain this will cause a barrier – paragraph 7)
 - *Mr Blue* – paragraph 11, 12 – someone who loves me, and who I love
 - *Mr Blue* – paragraph 18 – without open communication relationship is doomed
-
- Social context
 - Other people's perception
 - Social/political discrimination
 - Trans status – Mr Red – paragraphs 10, 11 – importance of being trans in identity.
 - Political activism
 - *Invisible identities and affiliations*
 - *The sisterhood type thing – not being recognized (Mr Red bottom of paragraph 8 – great quote) – paragraph 9 “they don't see who is actually nodding at them”*

 - Negotiating boundaries within relationships – Link with theme on defining RR
 - Learning not to be subsumed in relationship – Alex,
 - Mr/s Yellow – paragraph 49 - Not to let myself be so guided by what somebody I'm in a relationship with feels about me – not to be so swayed by others opinions

- Mr/s Yellow – paragraph 50 – stay true to who I am – enjoy what I want to do – previous jealousy from partner
 - Ms Violet – paragraph 31 - I'd be more myself – you don't have to give up yourself to make somebody else happy – you can both compromise
 - Limitless options – frequent recurring theme (sample bias ??) – Mr Red paragraph 25
 - Polyamorous v monogamous
 - Mr/s Yellow – paragraph 33 - We're both up for not being in a monogamous relationship – I don't want all my eggs in one basket – so this feels healthy and liberating...
 - Ms/Yellow – paragraph 34 - I'm fine with her sleeping with other people, and she's totally fine with me sleeping with other people – see how it goes – I'm excited by it
 - Mr Red – paragraph 16 – not wanting to be hemmed in in a relationship – wanting a back door escape – good description of process of developing open relationship – paragraph 17 (boyfriend and wife get on)
 - Mr Red – paragraph 43 - I was surprised at having independence within a relationship – often you lose your independence in a relationship- Caroline is phenomenally independent
 - Mr Red – paragraph 18 - *It's the same as expressing the whole of my gender – it expresses the whole of my sexuality*
 - Lucky that Caroline and I have a strong enough relationship – a lot of discussion – a lot of compromise – and we still have boundaries – *it just means that I can be free and I can be more me –which is amazing*
(Linked with open communication)
- Having a lesbian history
 - Transitioning sexuality
 - Mr Red – paragraph 14, 15
 - Mr Red – paragraph 22 - I changed my sexuality numerous times throughout my transition
 - Mr Red paragraph 27 - *I think I became more confident because I became more fully a person (paragraph 28, 29 – further elaboration)*

- Mr Red – paragraph 49 – making sense of his transition (why being transgender happened to him)
- Mr Red – paragraph 51 – learning to accept that he’s worth it - *I knew theoretically that I was worth it, but didn’t necessarily believe it myself, whereas now I’m starting to believe that I think.*
- Ms Violet – paragraph 10 page 8 – I thought I was a gay woman... *this is destroying my sense of self...*
- Mr Orange – paragraph 3 - Had relationship with straight woman pre transition... post transition was in relationship with a lesbian... a bit mixed up in the head. All mixed up for them. All mixed up for you, you know, everything
- Experiencing the world from two different gender perspectives – sexual relationships from these point of views
 - Limitless options – Mr Orange – paragraph 9 – exception – I still thought of myself as male pretransition – (it was weird for her sexual identity – not really for me)
 - Alex – paragraph 15, 16, 17, 29
 - Insights into the different relationships men and women can have – Alex paragraph 44, 45,
 - Testosterone – Alex paragraph 50, as woman – monogamy, as man where is sex? – Mr Blue also - testosterone
 - Ms Violet – paragraph 3
 - Ms Violet – paragraph 26 – great quote about *Fearing rejection of coming out in new relationship – but also seeing it as a strength that being able to do traditionally female role (cleaning, coking, understanding the clitoris), but also able to do mans gender role (diy – fixing cars) – but then also knowing limits of this (if she wants a cock – there’s nothing I can do about it...not a man – a man born and got his penis cut off is still a man – but I will never be a man – worry about rejection – ridicule – shock disgust*
 - Ms Violet – paragraph 30 - I’ve learned that women have a lot of code in language ... Phone ..when they ask...they mean what were you talking about...
 - Looking for intimacy, rather than sex - Alex paragraph 51 – Jo regret over cheating, fulfilling a sexual need...

- Intricacies of the “queer community”
 - When to tell – when coming out isn’t coming out (Mr Blue – very eloquent about it – paragraph 16, Mr Orange - paragraph 2)
 - Mr Blue – peoples assumptions of lying and what it means to be a man – paragraph 16 - Advertisement – someone saying “I’m really a man” – but the only way I could think of it has come up if it is a female to male, and so I’m saying I’m really a man, but no one ever thinks of it like that...
 - Mr Blue – paragraph 17 – *being a man isn’t a lie* - If I tell someone that – being a man isn’t a lie. If I tell someone that is not a lie. If I tell them I was born biologically male, that would be ...
 - Attraction from a queer point of view – not about bodies – Alex paragraph 44, *Mr Blue paragraph 3, 4, 5 – good explanation*
 - Mr Orange – paragraph 3 - Romantic relationships are not necessarily defined by people’s bodies or my own body or ... and what they’re used to and what I’m used to.
 - Mr Blue – paragraph 13 – pulling in cisgendered world – explaining to a drunk person the complications of being transgendered
 - Mr Blue – paragraph 15 – queer club scene is aggressive – not really me
 - Mr Blue – paragraph 32 – queer community – everyone knows each other – don’t really want a failed relationship...
 - Feeling comfortable – Alex – paragraph 24, Mr Blue...
 - Everyone knows everyone (Mr Blue, Mr/s Yellow)
 - Mr Blue – on line – confidence in person – (mr red, and green – related to confidence)
 - Ms Violet – paragraph 8 - In the gay community, everything is very incestuous
 - Mr Red – paragraph 6 (better understanding and can be more complex in queer community)

Appendix 10: UH Ethics approval

Revised (September 2006)

SCHOOL OF PSYCHOLOGY ETHICS COMMITTEE APPROVAL

Student Investigator: Amani Zarroug

Title of project: The Construal of Romantic Relationships in Transgendered People: A Personal Construct Approach.

Supervisor: David Winter

Registration Protocol Number: PSY/07/10/AZ

The approval for the above research project was granted on 23 July 2010 by the Psychology Ethics Committee under delegated authority from the Ethics Committee of the University of Hertfordshire.

Signed:



Date: 23 July 2010

Professor Lia Kvavilashvili
Chair
Psychology Ethics Committee

STATEMENT OF THE SUPERVISOR:

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

Signed (supervisor):

Date:

Appendix 11: Transcription service confidentiality policy



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Appendix 12

Demographic information

Name	Age	Ethnicity	Level of education	Gender Identification (GI)	Personal meaning of GI	Romantic Relationship (RR) status	Type of Help sought in past
Mr Red	30	White British	A Levels	Transman	"Transman describes my GI. I don't feel wholly male and this allows for me to acknowledge my birth gender"	Currently in romantic relationship	- G.P. - Gender Services - Endocrinology
Mr Orange	24	White British	Graduate	Transman	"I am outside of male and female. In a way, I am both"	Not currently in romantic relationship – Last relationship was March 2009 to May of 2010	-Online communities - Gender Identity Clinic for therapy and hormones
Mr/s Yellow	31	White British	PhD	Genderqueer	"Not a boy, not a girl, but sometimes a bit of both. A place away from binary ideas of gender, although I'm aware that sounds contradictory"	Currently in "very new" romantic relationship	-Seen a few Counsellors -A Psychiatrist in my teens -Currently seeing CBT practitioner
Mr Green	30	White British	MSc	Transman	"that I am masculine with a female history which I value and enjoy"	Currently in a romantic relationship	"Counselling for support with living in a society in which I am not equal to my friends – minority group stress"
Mr Blue	20	White British	Currently in University	Transguy	"Being able to acknowledge my male identity at the same time as understanding my biological sex"	Nor currently in RR – Last relationship was 3 weeks prior to interview	-Medical transition support -Private psychologist -NHS psychologist
Mr Violet	31	White British	No formal qualifications	Transgender. Female to male	"not 100% male, but a male mind/soul in a female body"	Currently in a romantic relationship	CBT, CAT, Gender Specialist – "I've been seeing psychologists and counsellors since the age of 8. Tried to speak to GP (for years) - eventually went to private therapist"

Appendix 13

Participants' individual repertory grids

Mr Red's grid

Role Title List	Self	Ideal Self	Self in a romantic relationship (RR)	Self not in a romantic relationship	Self as seen by romantic partner	Self as seen by others when in a RR	Self as seen by others when not in an RR	Actual or perceived partner	Ideal partner	A typical male	A typical female	Self in preferred gender role	Self in non-preferred gender role	Stereotype transperson	Construct Contrast	
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	7 1	6 5 4 3 2
Sort																
1	6	7	7	6	7	7	6	7	7	7	7	6	3	6	Well rounded	Lack of self-awareness
2	6	7	7	7	7	7	7	7	7	7	7	6	3	5	Open minded	Shallow
3	6	6	6	5	6	6	6	7	7	7	7	6	3	5	Independence	Dependence
4	7	7	7	7	7	7	7	7	7	7	7	7	5	5	Witty	Dull
5	5	7	7	7	7	7	7	7	7	7	7	7	3	5	Standing up for people	Not standing up for people
6	7	7	7	2	7	7	4	7	7	7	7	7	4	4	Having a companion	Lonely
7	5	6	6	6	6	6	6	6	6	6	6	6	3	5	Out-going	Insular
8	5	7	7	7	7	7	7	7	7	7	7	7	4	5	Supportive	Leaving you to fight by yourself
9	7	6	6	6	7	7	7	1	4	6	1	6	3	4	Hairy	Smooth
10	6	7	7	5	7	7	7	7	7	7	7	7	3	7	Variety	Sameness
11	6	6	6	6	6	6	6	6	6	6	6	6	2	5	Core being	Peripheral influences
12	7	7	7	4	7	7	5	6	7	7	7	7	3	4	Happy	Sad
13	7	7	7	3	7	7	4	7	7	7	7	7	7	2	Sexually fulfilled	Sexually frustrated
14	6	6	6	6	6	6	6	1	4	1	1	4	6	6	Comfortable in biological sex	Uncomfortable in biological sex

Mr Red's grid shows that he uses a high number of extreme ratings. Out of a possible 196 ratings, Mr Red gives extreme ratings 106 times (54%). Mr Red's grid also shows that he sees himself much more congruently with his 'ideal self' when he is in a romantic relationship. In fact his ratings for 'ideal self', and 'self in a romantic relationship' are identical. When Mr Red is in a romantic relationship he construes himself as being at optimum levels of being 'well-rounded', 'open-minded', 'witty', 'standing up for people', 'having a companion', 'supportive', 'having variety', 'being happy', and 'sexually satisfied'. When Mr Red is not in a romantic relationship, he continues to construe himself as having the highest degree of being 'open-minded', 'witty', 'standing up for people', and 'supportive'. 'Witty' is the only preferred way of being that Mr Red rates as constant across the elements, 'self', 'ideal self', 'self in a romantic relationship', and 'self when not in a romantic relationship'.

Mr Orange's grid

Role Title List	Self	Ideal Self	Self in a romantic relationship (RR)	Self not in a romantic relationship	Self as seen by romantic partner	Self as seen by others when in a RR	Self as seen by others when not in an RR	Actual or perceived partner	Ideal partner	A typical male	A typical female	Self in preferred gender role	Self in non-preferred gender role	Stereotype transperson	Construct Contrast	
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	7 1	6 5 4 3 2
1	5	5	6	5	6	5	5	4	5	6	2	6	4	4	More male	More female
2	6	7	7	6	7	5	6	5	7	4	6	6	4	6	Companionship	Lonely
3	6	6	5	7	5	5	6	5	6	6	4	7	5	2	Having free time	Feeling trapped
4	5	7	7	7	7	5	6	5	7	5	5	7	3	1	Seeing someone they love	Seeing someone they hate
5	6	7	6	6	7	6	6	6	7	5	5	6	3	1	Happy	Sad
6	5	7	7	6	7	6	5	6	7	5	4	6	3	2	Confident	Scared
7	5	7	5	5	6	5	6	6	7	6	5	6	3	2	Independent	Dependent
8	5	7	7	7	7	6	6	7	7	5	5	6	6	3	Intelligent	Stupid
9	6	6	5	5	5	6	6	7	7	6	4	6	4	4	Strong	Weak
10	5	7	5	7	7	5	5	6	7	4	6	5	5	5	Multi-talented	Lazy
11	7	7	7	7	5	7	6	5	6	4	5	4	6	7	Different	Clone
12	6	7	7	7	6	6	5	5	7	3	3	4	4	4	Not worrying what I'm supposed to be	Conforming
13	5	7	7	7	6	5	5	6	7	4	4	6	2	2	Being comfortable	Doesn't fit
14	6	7	7	6	5	6	5	5	6	6	2	7	2	7	Uncomfortable in biological sex	Comfortable in biological sex

Mr Orange's grid shows that he viewed himself, his 'ideal self', 'self in a romantic relationship', and 'self not in a romantic relationship' in a relatively

similar way. These aspects of himself are construed as having the qualities 'more male', 'companionship', 'having free time', 'seeing someone they love', 'happy', 'confident', 'independent', 'intelligent', 'strong', 'multi-talented', 'different', 'not worrying what I'm supposed to do', 'being comfortable', and 'uncomfortable in biological sex'. These are all his preferred poles of his constructs.

Mr/s Yellow grid

Role Title List	Self	Ideal Self	Self in a romantic relationship (RR)	Self not in a romantic relationship	Self as seen by romantic partner	Self as seen by others when in a RR	Self as seen by others when not in an RR	Actual or perceived partner	Ideal partner	A typical male	A typical female	Self in preferred gender role	Self in non-preferred gender role	Stereotype transperson	Construct Contrast	Preferred Non-Preferred	(Emergent Pole) (Implicit Pole)		
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	7 1	6	5	4	3	2
1	7	7	7	7	7	7	7	7	7	3	6	7	6	4	Caring	Selfishness			
2	6	7	6	6	6	6	7	6	7	3	6	7	7	4	Thoughtful (of others)	Caring about self			
3	3	7	5	3	7	5	4	6	7	7	1	7	1	1	A more valued person	Feeling worthless			
4	2	7	7	3	7	7	4	7	7	4	3	7	1	6	Visible in a different way	Feeling invisible			
5	4	7	6	3	5	5	4	6	7	6	2	7	1	1	Confidence	Self-hatred			
6	5	7	5	4	5	5	4	6	6	7	2	5	2	2	Feeling like I have something to offer	Feeling shit, crap, awful, nothing			
7	7	5	7	7	7	7	7	7	7	7	4	7	7	3	Big-hearted	Only interested in self			
8	6	7	6	6	7	6	6	6	7	1	7	6	5	5	Not afraid of emotions	Being an emotional cripple			
9	4	7	5	4	5	5	3	7	7	7	1	6	1	1	Confidence in self	Swayed by magazine			
10	6	7	7	6	5	6	4	7	7	1	1	5	3	1	Queerness	Buy into the gender binary			
11	4	7	5	4	5	5	4	7	7	7	2	5	1	1	Feeling comfortable	Drag queen			
12	4	7	6	4	5	5	4	6	6	1	1	1	1	1	Fluid	Pigeon holed			
13	6	7	7	6	7	6	5	7	7	1	3	5	1	1	Having to change things to suit self	Following something to the letter			
14	2	7	4	2	5	5	4	5	7	7	1	3	1	1	Uncomfortable in biological sex	Comfortable in biological sex			

Mr/s Yellow's grid shows that he views himself, his 'ideal self', 'self in a romantic relationship', and 'self not in a romantic relationship' similarly across some constructs and differently on others. Being 'caring', 'thoughtful of others', 'not afraid of emotions', 'queerness' and 'having to change things to suit self' are construed as relatively constant ways of being. As the ratings given in this section are high, only preferred construct poles are mentioned. On the constructs, 'a more valued person – feeling worthless', 'visible in a different way – feeling invisible', 'feeling like I have something to offer – feeling shit, crap, awful, nothing' and 'uncomfortable in biological sex – comfortable in biological sex', Mr/s Yellow's ratings suggest a tendency to construe herself, and herself not in a romantic relationships in line with the less preferred pole of the construct, whereas 'ideal self', and 'self in a romantic relationship' are construed more favourably.

Mr Green grid

Role Title List	Self	Ideal Self	Self in a romantic relationship (RR)	Self not in a romantic relationship	Self as seen by romantic partner	Self as seen by others when in a RR	Self as seen by others when not in an RR	Actual or perceived partner	Ideal partner	A typical male	A typical female	Self in preferred gender role	Self in non-preferred gender role	Stereotype transperson	Construct Contrast	
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	7 6 5 4 3 2 1	
1	5	6	6	5	6	6	3	6	6	7	4	6	1	3	Confidence	Insecurity
2	6	6	6	6	6	6	6	6	6	6	4	6	3	3	Autonomy	Co-dependence
3	6	6	6	5	7	6	5	7	6	3	3	3	7	6	Nurturing	Dismissive
4	5	6	6	3	6	7	3	7	6	3	6	6	6	4	Sincerity	Hedonistic
5	6	7	7	4	6	7	3	6	7	4	4	7	1	1	Stability	Confusion
6	6	7	6	4	6	7	4	7	7	4	5	6	3	2	Emotionally mature	Emotionally immature
7	6	7	7	6	6	6	5	7	7	4	4	7	2	3	Acceptance	Invalidation
8	6	7	7	6	7	7	6	7	7	2	2	7	4	4	Equality	Patriarchal
9	7	7	7	7	7	7	7	7	7	2	1	7	1	7	Transgressive	Categorised
10	7	7	7	7	7	7	7	7	7	2	2	7	1	4	Fluid	Rigid
11	6	7	6	6	7	7	7	7	7	2	2	7	1	4	Freedom	Oppression
12	6	7	6	6	7	6	6	7	7	6	5	7	2	1	Complete	Damaged
13	6	6	6	6	7	7	7	3	4	1	1	7	1	4	Uncomfortable in biological sex	Comfortable in biological sex

As Mr Green was in a romantic relationship during the time of this study, his ratings for himself and himself in a romantic relationship were identical. Mr Green gives extreme and preferential ratings (7) for himself in a romantic relationship on the construct poles, ‘stability’, ‘acceptance’, ‘equality’, ‘transgressive’, and ‘fluid’. Both ‘transgressive’ and ‘fluid’ are also given extreme ratings (7) in Mr Green’s definition of himself when not in a romantic relationship. Mr Green’s description of himself in a romantic relationship is highly skewed toward his preferred poles on all the constructs elicited, and is

much more similar to his 'ideal self' in comparison with his definition of himself not in a romantic relationship.

Mr Blue grid

Role Title List	Self	Ideal Self	Self in a romantic relationship (RR)	Self not in a romantic relationship	Self as seen by romantic partner	Self as seen by others when in a RR	Self as seen by others when not in an RR	Actual or perceived partner	Ideal partner	A typical male	A typical female	Self in preferred gender role	Self in non-preferred gender role	Stereotype transperson	Construct Contrast	Preferred Non-Preferred (Emergent Pole) (Implicit Pole)	7 6 5 4 3 2 1
Sort	A	B	C	D	E	F	G	H	I	J	K	L	M	N			
1	5	7	6	5	4	2	4	4	4	7	1	5	1	5	The guy with the biological penis	Being the girl in the relationship	
2	4	6	6	4	5	4	5	6	6	4	5	6	2	5	Pride	Frustration (sexual)	
3	5	7	4	5	4	4	5	6	7	7	3	5	2	3	More relaxed	Pressured	
4	5	7	5	5	4	4	5	6	7	6	3	5	2	3	Calm	Frustrating	
5	6	6	6	6	5	2	6	7	7	4	5	6	4	5	Accepting	Judgmental	
6	4	6	6	4	5	5	4	5	4	4	4	4	3	4	Busy	Available	
7	5	6	5	5	5	4	5	6	6	5	4	4	4	4	Available in a good way	Tied down	
8	6	7	6	6	6	4	5	6	7	5	6	6	3	4	Lovely	Disdain	
9	6	7	4	6	6	4	5	6	7	6	5	6	2	2	Cool	Uncool	
10	4	4	4	4	4	4	4	4	4	4	4	4	4	4	Queer/Straight	Straight/Queer	
11	6	7	7	6	7	3	5	7	7	5	5	7	4	2	Mutual understanding	Ignorance	
12	6	7	6	6	6	4	6	7	7	6	6	7	4	2	Personality	Hollow	
13	6	7	6	6	5	3	6	6	7	6	5	7	1	2	Comfortable	Uncomfortable	
14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Uncomfortable in biological sex	Comfortable in biological sex	

Mr Blue's raw grid scores suggest that he views himself similarly whether or not he is in a romantic relationship. Mr Blue explained that he had no preference for either pole of the construct 'uncomfortable in biological sex – comfortable in biological sex'. He explained that he viewed my asking him to specify a preference to be similar to a question he has been asked about whether or not he would want to be rid of his "gender dysmorphia". Mr Blue chose not to participate in rating this construct. He explained that he was happy to continue his contribution to the study with the other aspects of the grid data and semi-structured interview. In accordance with the ethical guidelines, and the information supplied to participants, Mr Blue's grid was analysed excluding the supplied construct.

Mr Violet grid

Role Title List	Self	Ideal Self	Self in a romantic relationship (RR)	Self not in a romantic relationship	Self as seen by romantic partner	Self as seen by others when in a RR	Self as seen by others when not in an RR	Actual or perceived partner	Ideal partner	A typical male	A typical female	Self in preferred gender role	Self in non-preferred gender role	Stereotype transperson	Construct Contrast	
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	7 6 5 4 3 2 1	
1	3	6	3	6	3	4	6	6	5	5	4	6	3	4	Sociable	Unsociable
2	3	6	3	6	3	5	6	5	5	5	5	6	3	6	Motivated	Unmotivated
3	2	6	2	6	2	3	5	6	2	6	4	6	3	3	Dominant	Submissive
4	5	6	3	7	2	3	7	7	4	6	4	6	3	4	Independent	Reliant
5	4	5	5	6	2	5	6	4	4	6	4	6	3	6	Outgoing	Shy
6	7	6	6	5	7	2	2	5	6	2	6	6	3	6	Compassionate	Selfish
7	6	5	6	5	7	3	5	5	6	2	6	6	6	6	Sensitive	Insensitive
8	4	4	5	5	5	5	4	5	7	2	6	5	3	2	Demure	Brash
9	6	6	6	6	6	6	6	5	6	5	6	6	6	3	Polite	Impolite
10	7	4	5	7	5	2	4	4	5	6	4	7	1	6	Perverse	Normal
11	6	7	5	7	5	6	6	6	6	5	6	6	2	4	Honest	Manipulative
12	4	6	4	7	4	7	6	6	6	5	6	6	2	2	Straight forward	Militant
13	5	7	7	7	6	7	6	1	1	6	3	7	4	4	Uncomfortable in biological sex	Comfortable in biological sex

Mr Violet's raw grid scores suggest that he views himself whilst in a romantic relationship, and himself when not in a romantic relationship more or less similarly. The range of spread amongst ratings in Mr Violet's grid suggests a differentiated way of construing the various elements.

Appendix 14

Construct Superordinacy

Construct	% Variance accounted for
Well rounded – Lack of self-awareness	4.28
Open minded - Shallow	4.91
Independence – Dependence	4.20
Witty – Dull	1.93
Standing up for people – Not standing up for people	5.47
Having a companion – Lonely	10.70
Out-going – Insular	2.59
Supportive – Leaving you to fight by yourself	3.80
Hairy – Smooth	18.02
Variety – Sameness	4.93
Core being – Peripheral influences	4.28
Happy – Sad	7.58
Sexually fulfilled – Sexually frustrated	11.18
Comfortable in biological sex – Uncomfortable in biological sex	16.11

Table 6: Construct superordinacy for Mr Red

Construct	% Variance accounted for
More male – More female	4.51
Companionship – Lonely	3.94
Having free time	6.09
Seeing someone they love – Seeing someone they hate	11.92
Happy – Sad	10.19
Confident – Scared	9.02
Independent – Dependent	7.14
Intelligent – Stupid	5.17
Strong – Weak	3.88
Multi-talented – Lazy	3.79
Different – Clone	4.86
Not worrying what I'm supposed to – Conforming	8.29
Being comfortable – Doesn't fit	11.01
Uncomfortable in biological sex – Comfortable in biological sex	10.19

Table 12: Construct superordinacy for Mr Orange

Construct	% Variance accounted for
Caring – Selfishness	3.06
Thoughtful (of others) – Caring about self	2.41
A more valued person – Feeling worthless	10.10
Visible in a different way – Feeling invisible	10.49
Confidence – Self-hatred	7.96
Feeling like I have something to offer – Feeling shit, crap, awful, nothing	4.21
Big hearted – Only interested in self	3.71
Not afraid of emotions – Being an emotional cripple	4.06
Confidence in self – Swayed by magazines	9.04
Queerness – Buy into binary gender	9.49
Feeling comfortable – Drag queen	7.69
Fluid – Pigeon holed	8.95
Having to change things to suit self – Following something to the letter	10.03
Comfortable in biological sex – Uncomfortable in biological sex	8.80

Table 18: Construct superordinacy for Mr/s Yellow

Construct	% Variance accounted for
Confidence – Insecurity	6.01
Autonomy – Co-dependence	2.91
Nurturing – Dismissive	2.29
Sincerity – Hedonistic	4.49
Stability – Confusion	10.36
Emotionally mature – Emotionally immature	5.82
Acceptance – Invalidation	5.93
Equality – Patriarchal	7.55
Transgressive – Categorized	12.76
Fluid – Rigid	11.56
Freedom – Oppression	10.60
Complete – Damaged	7.55
Uncomfortable in biological sex – Comfortable in biological sex	12.17

Table 24: Construct superordinacy for Mr Green

Construct	% Variance accounted for
------------------	---------------------------------

The guy with the biological penis – Being the girl in the relationship	14.13
Pride – Frustration (sexual)	5.34
More relaxed – Pressured	9.76
Calm – Frustrating	8.55
Accepting – Judgemental	7.00
Busy – Available	2.84
Available in a good way – Tied down	2.33
Lovely – Disdain	5.28
Cool – Uncool	10.17
Straight/Queer – Queer/Straight	0.00
Mutual understanding – Ignorance	12.52
Personality – Hollow	8.10
Comfortable – Uncomfortable	13.98

Table 30: Construct superordinacy for Mr Blue

Construct	% Variance accounted for
Sociable – Unsociable	5.32
Motivated – Unmotivated	5.05
Dominant – Submissive	9.92
Independent – Reliant	9.51
Outgoing – Shy	5.17
Compassionate – Selfish	11.14
Sensitive – Insensitive	5.67
Demure – Brash	6.31
Polite – Impolite	2.29
Perverse – Normal	10.51
Honest – Manipulative	5.33
Straight forward – Militant	8.66
Uncomfortable in biological sex – Comfortable in biological sex	15.11

Table 36: Construct superordinacy for Mr Violet

Appendix 15: Individual content analysis tables

Content analysis categories for Mr Green

Construct	Content analysis category	Correlation with supplied construct
Autonomy - Codependence	Relational (3F)	0.58
Stability - Confusion	Personal (4D)	0.51
Acceptance - Invalidation	Moral (1D)	0.63
Equality - Patriarchal	Values & Interests (6A)	0.79
Trangressive - Categorised	Personal (4F)	0.85
Fluid - Rigid	Personal (4F)	0.87
Freedom - Oppression	Values & Interests (6A)	0.85

Content analysis categories for Mr/s Yellow

Construct	Content analysis category	Correlation with supplied construct
A more valued person - Feeling worthless	Personal (4I)	0.88
Visible in a different way - Feeling invisible	Personal (4I)	0.73
Confidence - Self hatred	Personal (4I)	0.83
Feeling like I have something to offer - Feeling crap, awful, nothing	Personal (4I)	0.70
Confidence in self - Swayed by magazines	Personal (4I)	0.87
Feeling comfortable - Drag queen	Personal (4O)	0.97
Fluid - Pigeon holed	Personal (4F)	0.59

Content analysis categories for Mr Red

Construct	Content analysis category	Correlation with supplied construct
Independence - Shallow	Relational (3F)	-0.63
Hairy - Smooth	Concrete descriptor (7A)	0.58

Content analysis categories for Mr Orange

Construct	Content analysis category	Correlation with supplied construct
More male - More female	Concrete descriptor (7O)	0.68

Ms Violet did not have any constructs that correlated with the supplied construct higher than the significance level for correlations.

Mr Blue declined to participate in rating the supplied construct, and did not wish to specify a preference for either being uncomfortable in biological sex or comfortable in biological sex.

Appendix 16: Conflict analysis tables

Measure of element conflicts or Mr Red

Element	Degree of conflict (%)
Self	8.0
Ideal Self	3.5
Self in a romantic relationship (RR)	3.5
Self not in a romantic relationship (RR)	13.4
Self as seen by romantic partner	3.5
Self as seen by others when in a romantic relationship	3.5
Self as seen by others when not in a romantic relationship	10.7
Actual or perceived partner	9.9
Ideal partner	4.8
A typical male	5.9
A typical female	9.1
Self in preferred gender role	4.6
Self in non-preferred gender role	10.5
Stereotype transperson	9.1

Measure of construct conflict for Mr Red

Construct	Degree of conflict (%)
Well rounded - Lack of self-awareness	9.2
Open minded - Shallow	7.5
Independence - Dependence	9.7
Witty-Dull	5.1
Standing up for people - Not standing up for people	8.3
Having a companion - Lonely	5.2
Outgoing - Insular	9.5
Supportive - Leaving you to fight for yourself	7.4
Hairy - Smooth	5.9
Variety - Sameness	5.8
Core being - Peripheral influences	7.8
Happy - Sad	5.9
Sexually fulfilled - Sexually frustrated	6.6
Uncomfortable in biological sex - comfortable in biological sex	6.2

Measure of element conflict for Mr Orange

Element	Degree of conflict (%)
Self	2.6
Ideal Self	3.2
Self in a romantic relationship (RR)	9.3
Self not in a romantic relationship (RR)	7.1
Self as seen by romantic partner	7.1
Self as seen by others when in a romantic relationship	2.9
Self as seen by others when not in a romantic relationship	1.6
Actual or perceived partner	6.6
Ideal partner	2.6
A typical male	9.0
A typical female	11.4
Self in preferred gender role	7.1
Self in non-preferred gender role	11.9
Stereotype transperson	17.5

Measure of construct conflict for Mr Orange

Construct	Degree of conflict (%)
More male – More female	9.0
Companionship – Lonely	6.3
Having free time	6.0
Seeing someone they love – Seeing someone they hate	7.7
Happy – Sad	6.6
Confident – Scared	7.0
Independent – Dependent	7.9
Intelligent – Stupid	5.7
Strong – Weak	7.9
Multi-talented – Lazy	7.5
Different – Clone	7.4
Not worrying what I’m supposed to – Conforming	6.7
Being comfortable – Doesn’t fit	7.7
Uncomfortable in biological sex – Comfortable in biological sex	6.5

Measure of element conflict for Mr/s Yellow

Element	Degree of conflict (%)
Self	10.4
Ideal Self	0.9
Self in a romantic relationship (RR)	4.3
Self not in a romantic relationship (RR)	10.4
Self as seen by romantic partner	4.3
Self as seen by others when in a romantic relationship	1.4
Self as seen by others when not in a romantic relationship	6.3
Actual or perceived partner	1.8
Ideal partner	0.0
A typical male	14.3
A typical female	13.6
Self in preferred gender role	7.7
Self in non-preferred gender role	14.7
Stereotype transperson	9.8

Measure of construct conflict for Mr/s Yellow

Construct	Degree of conflict (%)
Caring – Selfishness	8.2
Thoughtful (of others) – Caring about self	7.6
A more valued person – Feeling worthless	7.7
Visible in a different way – Feeling invisible	7.5
Confidence – Self-hatred	7.3
Feeling like I have something to offer – Feeling shit, crap, awful, nothing	6.5
Big hearted – Only interested in self	6.0
Not afraid of emotions – Being an emotional cripple	6.6
Confidence in self – Swayed by magazines	7.9
Queerness – Buy into binary gender	7.0
Feeling comfortable – Drag queen	7.7
Fluid – Pigeon holed	6.2
Having to change things to suit self – Following something to the letter	6.2
Comfortable in biological sex – Uncomfortable in biological sex	7.6

Measure of element conflict for Mr Green

Element	Degree of conflict (%)
Ideal Self	0.7
Self in a romantic relationship (RR)	2.4
Self not in a romantic relationship (RR)	9.2
Self as seen by romantic partner	0.7
Self as seen by others when in a romantic relationship	0.3
Self as seen by others when not in a romantic relationship	14.2
Actual or perceived partner	5.1
Ideal partner	3.4
A typical male	14.6
A typical female	16.9
Self in preferred gender role	1.4
Self in non-preferred gender role	16.3
Stereotype transperson	13.9

Measure of construct conflict for Mr Green

Construct	Degree of conflict (%)
Confidence – Insecurity	6.3
Autonomy – Co-dependence	8.5
Nurturing – Dismissive	5.4
Sincerity – Hedonistic	8.1
Stability – Confusion	9.0
Acceptance – Invalidation	8.8
Equality – Patriarchal	7.1
Transgressive - Categorised	7.5
Fluid – Rigid	6.8
Freedom – Oppression	7.3
Complete – Damaged	8.1
Uncomfortable in biological sex – Comfortable in biological sex	8.1

Measure of element conflict for Mr Blue

Element	Degree of conflict (%)
Ideal Self	3.7
Self in a romantic relationship (RR)	7.2
Self not in a romantic relationship (RR)	4.8
Self as seen by romantic partner	6.1
Self as seen by others when in a romantic relationship	7.5
Self as seen by others when not in a romantic relationship	2.9
Actual or perceived partner	6.9
Ideal partner	8.3
A typical male	9.1
A typical female	9.9
Self in preferred gender role	9.1
Self in non-preferred gender role	10.4
Stereotype transperson	9.3

Measure of construct conflict for Mr Blue

Construct	Degree of conflict (%)
The guy with the biological penis - Being the girl in the relationship	7.9
Pride - Frustration (sexual)	6.4
More relaxed - Pressured	7.2
Calm - Frustrating	6.8
Accepting - Judgemental	8.0
Busy - Available	9.5
Available in a good way - Tied down	6.4
Lovely - Disdain	6.7
Cool - Uncool	8.9
Straight/Queer - Queer/Straight	9.7
Mutual understanding - Ignorance	7.9
Personality - Hollow	8.1
Comfortable - Uncomfortable	6.5

Measure of element conflict for Mr Violet

Element	Degree of conflict (%)
Self	9.4
Ideal Self	4.7
Self in a romantic relationship (RR)	9.4
Self not in a romantic relationship (RR)	1.3
Self as seen by romantic partner	12.6
Self as seen by others when in a romantic relationship	11.3
Self as seen by others when not in a romantic relationship	6.5
Actual or perceived partner	6.3
Ideal partner	8.6
A typical male	8.4
A typical female	5.2
Self in preferred gender role	0.0
Self in non-preferred gender role	6.8
Stereotype transperson	9.4

Measure of construct conflict for Mr Violet

Construct	Degree of conflict (%)
Sociable – Unsociable	8.1
Motivated – Unmotivated	7.7
Dominant – Submissive	7.6
Independent – Reliant	7.6
Outgoing – Shy	8.4
Compassionate – Selfish	8.1
Sensitive – Insensitive	6.9
Demure – Brash	8.2
Polite – Impolite	6.7
Perverse – Normal	8.4
Honest – Manipulative	7.6
Straight forward – Militant	7.2
Uncomfortable in biological sex – Comfortable in biological sex	7.0

Appendix 17

Mr Orange

Speaker key

IV Interviewer

FR Mr Orange

IV Okay. So what are the main factors you consider when thinking about a romantic relationship?

FR Um. Well, they, uh, it's, it's... initially it's the usual ones, you know. I'm attracted to them and then, um, I want to, you know, totally make a move, and what not. Ah, um, my... one of, one of the main first things I think about is... when do I tell them about, you know, me, and how is, how is their reaction... what is their reaction going to be? Um, I don't think I've ever found an answer to that. I don't know. It's probably easier if they know already before I decide that I want to be in a relationship with them. Um.

IV When you say, tell them about you, do you mean...?

FR That I'm a tran, that I'm transgendered. So I, um, um... That's one of my initial... that's one of my initial thoughts, to be honest, and that's something that I have to come over, overcome every time, that I have to like them enough to... yeah, to make me feel that the risk is worth it, um, because if someone reacts in a bad way and it, it, it's just... I don't, I

don't know, I don't know what I... I don't really want to think about that. I've been lucky so far. But, um, it can, it could end quite badly. I mean, it could even, ah, they, they... either they don't want to see me any more or they don't [unclear] might start telling everyone else and... [Sigh] I don't know. It's... Um, so for me, that's, um, one of the main things I think about, to be honest. Yeah. Um. When do I tell people and how do I do it? How will they react?

IV Yeah. Okay. Um, and what has your experience of romantic relationships been?

FR Um. Well, um, I'm, I'm bisexual myself, ah, but all my relationships have been with women. Um, ah, I've dated both. Um, ah, pre-, pre-, um, transition, I had one relationship that lasted from when I was about 17 to when I was about 19. Um, and she was a straight woman and that was very convenient for everything. Um, but that was, it was good. Um, then I had... I've had three relationships. I had another relationship with... after I transitioned but before hormones, um, with, with a girl at uni, um, again a straight woman. And then I've had just... I came out of a relationship in May with another girl, um, who was a lesbian. So, sort of a bit mixed up in the head. [laughs] All mixed up for them. All mixed up for, you know, everything. It's just like... so my experience of relationships, romantic relationships, um, has been good. I've had three, um, very, you know, very good relationships, romantic relationships, with really great women. But, um, for me romantic relationships, um, are not necessarily defined by people's bodies or my own body or... and what they're used to and what I'm used to. Um, I don't, yes.

IV So how do you define romantic relationship?

FR Romantic relationship. It's like, I suppose, it's like, it's an emotional connection, I guess. Um, usually involves some level of intimacy, um, physically as well, um... probably, yeah, an emotional connection and then also physical. But...

IV Okay. And what predictions or expectations have you had when thinking about romantic relationships?

FR Expectations, I don't think I ever really have, um... expectations, um, because I'm always worried about people's reaction. I don't try to think about, um, expectations or, um, or [unclear] with that one.

IV So when, when you're thinking about, before, kind of, before... when, when you're thinking about either to have or not to have romantic relationships, what kind of predictions do you make about what it's going to be like or what you need to kind of consider or...?

FR I don't know. I think that each one is completely different, um, [sigh] because, well, usually I predict there's going to be a level of, um, confusion on their part. And this, there's going to have to be some sort of patience with me as they try and set something right in their head, um, which I find quite, quite frustrating sometimes. But then I have to remember that it's taken me years and years to get to my... you know, become comfortable with myself. So, um, I, I worry about, again... I, I worry if, you know, people will – the, the, the specific person that I, I'm being in a relationship with -- will love me as I am or as I will be, you know, when I've... because I will, I'll have some surgery. Are, are they loving me now or are they loving for what I will be or are they wanting me to be something completely different, you know [laughs]. Um [sigh]. Yeah.

IV What kind of surgery are you planning to have?

FR I will have top surgery. I will have secondary. I probably won't have... I won't do anything with lower surgery, um, maybe because I'm really worried about that. Um, and as far as I'm aware, it's not very good, the options aren't very good. So I probably won't do anything with that, so I think that this, the barrier that I put up between me and a potential, a potential partner will probably always be there until... Each time, each time I enter a new one, there'll, there'll be a barrier there that we have to overcome. Both of us, not just me. I mean, not just them, me as well, like, worrying about what they're thinking of me. You know.

IV Yeah. Um, and what options do you feel are open to you?

FR What options [laughs]. There's limitless, there's limitless, limitless, ah, limitless options, I think, because one, definitely for me... I, um, you know... everyone is completely, is, is different from everybody else, and so I just, ah, I take each person as completely, as completely apart from everybody else. I don't, ah... I, I, I have no or very limited preconceptions as to what, who, I wind up with. And so for me, it's sort of almost limitless as to the, ah, who I can be with. Um, and hopefully, that's, that's the same way, like, people

are open-minded enough to, ah, not put a limit on who they'll be with as well. Um, as I say, it was a bit, um, I mean, it's through my own experiences that I've come to that conclusion that it could be anyone. I mean, um, it was very surprising for me to find myself in a relationship with a lesbian, for example. Like, it wasn't necessarily because I wouldn't fancy, you know, I wouldn't fancy a lesbian. It's because I didn't think that they were... she would be comfortable with that, you know, like, you know. I don't know. [laughs]

IV At the same time you were pre-transition, you were with a straight woman.

FR Yeah. Yeah, yeah. Yeah, it's the same. [laughs] I never even thought of that, but... for, for me, that was like, pre-... that was pre-transition and I still think of myself even before then like, you know, as like, as a man. And so for me that wasn't so weird. It was weird for her. But for me it was just like, ah, mm hmm, I'm alive. [laughs]

IV Um. Okay, so what are your main concerns then when thinking about a romantic relationship?

FR Um, to be honest, um, apart from the, ah, the initial barrier that we talked about, just, you know, everyday concerns, like everyone else's concerns. Um, is it going anywhere, like, how hard do we have to work at it, are we fighting all the time. You know, just normal, normal concerns. I mean, I think that I'm fairly normal, um, in terms of that really, like, I try not to think about, you know, my transgendered [unclear] or whatever, um, too much, and I try to forget about it, um, and luckily I'm able to because I pass fairly well. Um, so for, for... when I'm in a relationship, it's just normal, you know and all, relationship worries. Yeah.

IV Um, and what have your expectations meant to you, as in how much, how much have they mattered to you?

FR Um, of, ah...

IV When, um, when thinking about a romantic relationship, like your expectations that, um, of how it will be for you, of, um, when to tell someone.

FR Yeah. It matters quite a lot. [laughs] It's the initial... it's always the, um, as I say, it's just the initial stages of a relationship, which is scary for everybody. I mean, I'm not saying it's just me. But, for, I think this is probably just like an added extra dimension for me, um, coming into a relationship. I mean my... there's a lot because I want to try and make it work if I, if I've, if I like someone enough to, you know, want to enter a relationship with them. Um, it, it really matters and it worries, it really worries me, you know, um... At the moment I don't have that problem because, you know, I've started being single but when it [laughs], when it does happen, it's like, you know, it almost keeps me awake, like, what [laughs] am I supposed to say or what am I supposed to do? Not, not quite, not quite, not quite that bad, to keep me awake because, you know, if it doesn't work out, there's someone else there. There'll be someone else, eventually, maybe, or maybe not, you know. [Laughs] But...

IV Um, and how have things been compared to what you thought they would be?

FR Um, better. [laughs] A lot better. Um, I think that, you mean, pre-transition or how do I think it's going to be after transition?

IV No, when, you know, when you're thinking about a romantic relationship, either pre or post...

FR Yeah, yeah. Well, and both times, it was better. Like, I, I think I worry too much. Um, so, I, I, and cynical... I'm fairly cynical as well. I think that, you know, people won't understand or what, and if they, or if they don't understand, they won't have enough patience to come to understand or... Whereas, in my experience, and even with just dating history rather than relationship history, people have just been, okay, you know, well, give me a, give me a little while. Then, you know, I just need to sort of see what that is, and I don't really understand it, but I'll see what it is, and then it's fine. You know? So, luckily, I'm, I don't know... Maybe it's not lucky, maybe it's just, that's what people are like [laughs]. Yeah.

IV Um, and how have you felt about this?

FR Ah, pretty good. [laughs] Pretty much, yeah.

IV Um, and what did you learn from that? What did you learn about...

FR Ah, that I should relax and be confident and, you know, happy in who I am. You know, um, if, um, yeah, if I'm, if I'm happy and I'm confident and relaxed, other people will be too, you know, because if it's not an issue for me, then they'll think it's not an issue at all. Maybe that, I... maybe that's what it is.

IV That makes sense.

FR Yeah.

IV Um and so, if there's a next time, what would you change as a, as a result of your experiences?

FR Um, relax. [laughs] Um, ah, don't push it. Um, don't get frustrated if they don't get it straight away and back off [laughs], um, initially, to give the space and the time, um, and just be myself. And don't worry.

IV I guess it's easier said than done.

FR Yeah, but, ah, each time... Yeah, I think that each encounter and each relationship, I think it probably will get a little bit easier for me to just, in that respect, relax a little bit more. Obviously, you know, it's, it's always a mine field, but in that respect, probably relax a little bit more. [sighs]

IV Um, and will you change the way you view things or how you behave?

FR Um, change the way I view things. I think I've, I think, yeah, I already have in terms of being less cynical.

IV Um, and is there anything else you would change?

FR Um, with regards to what?

IV With regards to how you, kind of, think about entering into a romantic relationship.

FR Um, no, not really. [laughs] Just don't worry about it [laughs] too much. If it, if it's right, it will happen. If it's not, then it won't.

IV And what options do you see open to you now, if you're, if you were in a similar situation?

FR Ah, what options do I see open to me? I don't get it. Sorry.

IV I guess it's very similar to the question before.

FR What options do I see open to me? Um, well, I think that if, ah, if two people like each other, then, um, you can overcome something like this and it doesn't... again, like, it doesn't, it doesn't actually matter too much. If it doesn't matter to me, it shouldn't matter that much to them, and, and, as long as they are open enough to accept it, you know, because, well, in my experience, my, my, um, romantic attachments have been to a lot of different other people. And so to me, personally, it doesn't matter what someone looks like, or who, like, where they're from or what not. Um, I don't, I can't tell you why I feel emotionally attached to someone and not to another, like, you know, in that way, um, romantically involved with someone and not another person. I don't, I can't explain why that, um... So, and I think, and I think that quite a lot of people are actually like that once they stop worrying about labels.

IV What do you mean, like what?

FR Labels in terms of...

IV No, no. Like, you said, a lot of people are like that.

FR Oh, like that. Like, like they are actually not that concerned about what they look like or where they're from or, you know, their gender actually. Ah, I think that... well, I think it's probably more to do with the mind is very fluid [laughs], that people are able to sort of accept that... go, okay, you know. Um, ah, I think people are more, ah, fairly open, um, if I just explain it to them, you know, the way I see it.

IV Um, and how do you see the advantages and disadvantages of being in a similar situation in the future or of thinking about a romantic relationship in the future?

FR Well, at the moment for me, it... I feel quite good about the way that I look, externally. Um, in the past I was very androgynous and I felt quite worried about how people were taking me because they didn't... I didn't always know, um, what they thought I was. Um, now I feel fairly confident when I'm talking to people, um, initially and, um, so, what was the question again? [laughs] I went off on a tangent.

IV You were, you were saying what, yeah, you were saying that you pass quite well.

FR Yeah. And...

IV And I agree.

FR In the past, um, I think I've always passed fairly well but pre-hormones, it wasn't necessarily that I was good... well, it isn't, wasn't as good as it was now. It was like, sometimes I would... people got confused, um, mainly about my voice. And now that I have, I'm on hormones, I'm on testosterone, that doesn't happen anymore ever. And I feel... and that makes me feel more confident because I'm not worried about how they're, how they're seeing me initially and what they think I am. Um, on the other hand, it does confuse people when they... then when I then go, oh, um, I'm a trans-man. I'm transgendered. Because they're like, well, really? You know, and then, and so it takes them completely by surprise whereas before, because I was androgynous, they're like, oh, I can see that.

IV Yeah, that makes sense.

FR So, like, oh, yeah, I kind of thought there was something about you. You know, so, yeah. [laughs]