

**EnGendering inclusive practice: exploring trans people’s experiences of adoption and fostering in England and Wales**

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**Abstract**

This thesis presents the findings of a narrative inquiry exploring the lived experiences and perceptions that trans and non-binary people have in relation to adopting or fostering a child in England and Wales. Since the 1950s, adoption and fostering agencies have acted as ‘gatekeepers’, deciding who is deemed a suitable parent/carer and who is not. Adoption and fostering agencies have tended to espouse gender normative views in their practices. This amounts to covert discrimination as these practices disadvantage people who identify outside of normative frameworks of gender. This research addresses a gap in the research, bringing trans people’s voices into fostering and adoption social work in England and Wales.

The results of ten in-depth semi-structured interviews are examined. These include eight trans people who have adopted/fostered or who hope to adopt/foster and two social workers who have been involved in recruiting, assessing or supporting trans carers. Narratives of personal identity, family, fostering and adoption are explored within this thesis and analysed using a theoretical framework which includes cisgenderism, stigma and discourses of power to explicate the sociology of trans people’s experiences. Cisgenderism was found to operate in different ways upon different experiences, hindering the life and family opportunities of trans and non-binary people. The negative effects of cisgenderism could be especially pronounced for those whose identities did not align with a binary designation of gender. Findings and conclusions are used to make recommendations for good practice in social work and to suggest future research directions.

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## Chapter 1

**Introduction**

* 1. **Introduction to the chapter**

Adoption and fostering agencies act as gatekeepers, deciding who is a suitable parent/carer and which types of family are most desirable. Much prior research has found that these agencies tend to espouse gender normative views in their practice, with only pockets of gender inclusive practice in child and family social work *(see Chapter 2: Critical review of the current literature).* This thesis aims to develop the existing knowledge base by contributing a detailed analysis of trans and non-binary people’s lived experiences and perspectives of adoption and fostering. It examines the way people make sense of their own personal identities and family lives, as they relate to the workings of cisgenderism in adoption and fostering agencies. It offers a unique contribution by exploring adoption and fostering experiences from the perspective of trans people and their social workers, within a United Kingdom (UK) social work context (participants resided within England and Wales, two of the four countries that make up the UK. Recruitment was directed to residents of all four UK countries, however no volunteers from Scotland and Ireland came forward). As the first narrative inquiry to focus on trans adoption and fostering within the England and Wales, the study adds original findings to a newly emerging body of work in social work literature and advances interdisciplinary work in sociology and gender studies. While the focus of this thesis is upon practice in England and Wales, it will have relevance to a wider global audience as it adds to current debates on gender diversity, inclusion/exclusion and broadening conceptualisations of family.

The thesis provides an examination of positive stories as well as the challenges that trans people face. It unearths a deeper understanding of trans people’s personal identities and experiences of family. In doing so, it goes beyond a reporting of the challenges, to ask why differences in perspective may occur, how they may be categorised and in what ways they could be linked to both historical and contemporary ideas of trans identities.

Within this introductory chapter, I firstly present a discussion of the relevant terminology associated with adoption, fostering and trans identities, to enable to the reader to understand the topics discussed throughout (with further conceptual explanations included in *Chapter 3: Theoretical frameworks*). I then lay out an examination of the historical development of relevant policy and legislation, to enable the reader to situate the study and end with the contemporary policy and legislative context. To situate the findings in relation to international scholarship, a brief transnational comparison of adoption and fostering is set out within this introductory chapter While there are differences in the socio-cultural, legislative, policy and practice context in Scotland, many of the adoption and fostering trends have been found to bare similarities with those of England and Wales (Maclean and Hudson, 2010). Lastly, I explain the scope and structure of the thesis. A full list of definitions is set out in the *Glossary.* This provides clarity of meaning with regards to the usage of terms throughout this thesis.

* 1. **Terminology**

**‘Trans’ as a politicised and pathologised term**

As definitions of gender diversity hinge on conceptualisations of identity, it is important to firstly set out what is meant by this term. For the purposes of this thesis ‘identity’ is the subjective, constructed and a continually evolving story of how an individual has become the person they currently are (McAdams and McLean, 2013). ‘Gender identity’ is a term used to describe a person’s subjective sense of their own gender (Bradford and Syed, 2019). ‘Gender’, as an identity, is often conceived of in terms of man/masculinity and woman/femininity, however, an expanding multiplicity of identities now exist that challenge this limited binary (Stonewall, 2017a). ‘Gender expression’ relates to how an individual chooses to outwardly convey their gender (Stonewall, 2017a). This can be done in a way that conforms to societal expectations of gender stereotypes or in a way that transgresses the norms associated with conventional conceptions of gender (Bornstein and Bergman, 2010). Within the UK and most Western cultures, ‘gender roles’ tend to describe the ways in which societies expect men and women to present and behave (Lindsay, 2016). Gender roles have a significant impact on many aspects of social life; for example, roles taken within the family, education, employment and use of leisure time. Gender roles have tended to be attributed to binary categories of man and woman.

Attention to the terms ‘sex’ and ‘gender’ is needed because their meaning and varied use can affect how people are related to in social life from infancy (Fine, 2010; Ripon, 2019) and more specifically how institutions such as the medical profession treat trans people (Pearce, 2018). It is beyond the scope of this thesis to attempt to establish what gender and sex are, or are not, or to set out how this relates to trans experiences, identities and bodies. Indeed, the act of trying to do so can be viewed under the study’s social constructionist position as an unnecessary and unhelpful venture. Rather, the contested nature of this debate is acknowledged, and the perspective ascribed to is tentative; sex and gender have a complex relationship to biological difference that continues to evolve as our evidence-base in this area expands (Pearce, 2018). However, it is useful to note the prevailing definition still being offered by the medical world is that ‘sex’ is biologically determined, while ‘gender’ is a term used to describe characteristics of men and women that are regarded as being socially created (World Health Organisation (WHO, 2021). The labelling of sex at birth has been a practice employed by most countries across the world to categorise babies as ‘male’ or ‘female’ (or intersex: an umbrella term used for a person born with both male and female sex organs or other sexual characteristics) based on the appearance of their genitalia (Tate, Youseff and Bettergarcia,2014). It is noted that specific terms such as biological or natal sex are not used as this thesis aims to avoid essentialist perspectives on gender (*further analysis of the term ‘sex’ is provided below*).

‘Trans’ is an abbreviation for ‘transgender’; a term used to describe a person whose gender identity does not align with the sex and gender they were ascribed at birth (Schilt and Westbrook, 2009; Bradford and Syed, 2019). The term ‘cisgender’ or ‘cis’ describes someone whose gender identity matches that which was ascribed to them at birth (Schilt and Westbrook, 2009). The politicisation and pathologizing of the term ‘trans’ are relevant to this thesis as these processes can impact upon the narratives of personal and public identity, experienced and performed by trans people (Rogers and Ahmed, 2017). For decades, the academy has considered the gendering processes of socialisation, and norms associated with this, mostly in relation to a binary understanding of gender. This binary understanding has arguably resulted in the silencing of people who identify outside of it or who defy its boundaries (Pershai, 2006).

Hines (2020) traces the gender problems that persist in contemporary society back to the 19th century, whereby sexology (scientific study of sex) began to dominate societal understanding of human behaviour. Within this understanding, sex differences were positioned as biologically driven and bodily difference absolute. The essence of being female was linked to the ability to gestate and the essence of being male was associated with an ability to impregnate. Further, sexed bodily difference directed personality traits, social roles and behaviour. This medical model advanced by sexologists was used to pathologize trans people throughout the 20th century, following the first usage of the terms ‘transsexual’ and ‘transvestite’ (Drescher, 2010; Hines, 2020). The term ‘transgender’ was first used in the 1960s; with the hope that it could resituate trans identities, moving them away from the disordered definition they had within the Diagnostic and Statistical Manual 5 (American Psychological Association (APA), 2013) and towards a social understanding (Hines, 2010).

With a history steeped in politicisation and pathologizing, transgender studies represent a diverse and continually contested field that it is likely will continue to be influenced by the politics, legal and medical institutions of the time (Stryker and Aizura, 2013). Notwithstanding, a surge in sociological academic work has led to a more enhanced social understanding of trans identities (Ekins and King, 1999, 2010; Hines, 2006a, b, 2007a, 2009, 2020; Roger and Ahmed, 2017). In the UK, this is reflected in legislation such as the Equality Act 2010 which offers protection from discrimination (based on gender reassignment) in areas of public life such as the access of services. However, a medicalised discourse prevails within the UK which arguably causes harm to trans adults and youth alike (Asquith, 2020).

There is a tension between trans people’s desire for their identities to be de-medicalised and the reliance that many still have on the medical institution to support treatment that affirms their gender (Callahan, 2021). Ripon (2019) sets out that as the concepts of sex and gender may be purposefully separated by those seeking to try and prove the pre-birth emergence and inflexibility of binary man/woman categories, the terms may be more usefully merged for academic purposes to ‘sex/gender’. Some individuals may creatively narrate their identity using strategies of diversion and evasion to ‘*open up alternative spaces of identification*’ (Koeford and Simonson, 2017, p.634). Koeford and Simonson’s (2017) alternative view that people can use agency to transgress similarity by creating difference could offer a way of conceptualising strategies of resistance for those whose identity diverges from the man/woman binary (Halberstam, 1998). Certain social work perspectives are indeed welcoming of a conceptual shift towards locating understanding of gender identity within a social model (Fish, 2006). The disadvantages placed on trans individuals could be understood as comparable to the disruption society makes to disabled people’s lives by for example commissioning buildings that lack wheelchair access (Shakespeare, 2017). A social model understanding of trans problems then would state that they are not inherent to trans people, rather problems are created by a society that fails to account for gender diversity (Davis, 2017).

There is a growing body of work which problematises the notion of gender as a binary category, instead this work examines gender as a spectrum of identities. This thesis recognises that a diversity of identities sits across, along or outside of a gender spectrum and strives not to homogenise or delimit the term ‘trans’ (Ekins and King, 2010; Rogers and Ahmed, 2017). The umbrella term ‘trans’ as such includes a wide range of identities including that describe people whose assigned gender at birth does not align with their own experience of gender (Bachman and Gooch, 2018). A list of terms that fully describe the range of gender identities cannot be provided within this thesis, nor in any static document, because the language people use to express their identity is constantly evolving (Bornstein, 1994; Bornstein and Bergman, 2010). However, for the purposes of the thesis, an introduction to some of the most commonly used descriptors is appended (*see glossary*) and includes: trans man/masculine, trans woman/feminine, transsexual woman, transsexual man, MtF, FtM, a woman or man with a trans history (Bachmann and Gooch, 2018). Non-binary, genderqueer, queer, genderfluid, gender neutral, gender diverse, gender non-conforming and other terms may be used to describe a person whose gender does not conform to the man/woman binary (Bernstein Sycamore, 2008; Bachmann and Gooch, 2018).

Recent research suggests that the use of ‘non-binary’ as an umbrella third option for identities who do not fit a man/woman binary categorical distinction has largely been accepted by non-binary communities (Chetkovich, 2019; Elias and Colvin, 2019). Further, ‘non-binary’ has been utilised within contemporary social research (Valentine, 2016; Matsuno and Budge, 2017). As such, the term has been accepted for use within this thesis. In-line with other contemporary research, this thesis refers to lesbian, gay, bisexual, trans and queer ‘LGBTQ’-headed or -parent families (Goldberg et al., 2019; Tasker and Lavender-Stott, 2020). ‘Queer’ is used as an umbrella term for those whose sexuality or gender diverges from norms and is often used by those who reject those specific norms and labels (Stonewall, 2017c). ‘LGBTQ+’ is used as an umbrella term in the interests of brevity, with ‘+’ included to acknowledge that ‘LGBT’, ‘LGBTQ’ or any other acronym list would fail to represent the rich diversity of gender and sexual identities that humans have (Twist et al., 2020).

In 2006 Whittle (2006, xi) argued that trans identities should be accessible to ‘*anyone who does not feel comfortable in the gender role they were attributed with at birth, or has a gender identity at odds with the labels “man” or* “woman” credited to them by formal authorities’. Pearce (2018, p.4) further builds on this claim about accessibility, autonomy and self-identification in her usage of the term trans, utilising it to refer to a wide range of experiences, identities and modes of gender presentation. Labels for gender identities are constantly being adapted to meet identification needs of the individuals who use them (Hines, 2007b). As such, self-selected gender identity descriptors for participants will be included within parentheses along with their pseudonym and interest in adoption or fostering. While the importance of formal, academic convention is appreciated, and its resistance to ‘colloquialisms’ acknowledged (Seone, and Loureiro-Porto, 2005), the importance of inclusive terms of reference is emphasised (Hyland, 2004; Richards et al., 2016). As such, non-binary people will either be referred to by ‘they/their/them/themselves’ or a pronoun they have stipulated.

Pearce (2018, p.4) includes a useful definition of the term *‘transition’*, as involving *‘a move away from the gender that was assigned to a person at birth and towards an alternate preferred, desired or felt state of gendered (or non-gendered) being.’* It is important to note here that transition can but does not require any medical intervention (Stonewall, 2017b; Equality Act 2010). Social transition involving the internal representation and/or external presentation of self as a gendered or non-gendered being is sufficient to denote transition. Further, it should be made clear that transition does not need to be a discrete linear process, rather it can be a journey of exploration of self-identity that can take any path and myriad forms throughout the lifetime of an individual (Bornstein, 1994; Twist et al., 2020).

An acknowledgement of the evolving nature of language and identities claimed reflects the social constructionist position adopted by the thesis. Knowledge is taken to be derived from and maintained by social interactions (Berger and Luckman, 1966), understandings and labels of identity can also be regarded as social constructions. Broadly, the thesis takes the perspective that gender is socially produced through practices and processes, such as socialisation, and the associated cultural regimes and norms underpinning them (Connell, 1987). In-line with gender theorists such as Butler (1999) and Serano (2016), any definitions included in the thesis are based on the premise that sex and gender are both socially constructed categories (*see Chapter 3 for further explication*).

Although a certain level of definition is needed to enable the reader to understand the narratives contained within this thesis, the extent to which gender terminology requires definition has been considered (Twist et al., 2020). Strict definitions can limit diversity of expression, a philosophical position is adopted that ensures open possibilities for the self-definition of trans identities (Whittle, 2006; Pearce, 2018). Umbrella terms such as ‘trans’ are useful for brevity and to convey commonly understood terms at the time of writing (LGBT Foundation, 2017; Bachman and Gooch, 2018). However, if definitions were written a decade into the past or future, the way terminologies are used and understood within this thesis would likely be different (Twist et al., 2020). As such, no restrictions or limitations will be applied to any term utilised in this paper. Instead, Serano’s (2016) philosophical position will be taken; that experience of gender identity is personal and should not be reduced to physical presentation or a set of socially dictated characteristics.

**Ideologies of gender normativity and cisgenderism**

The ideologies underpinning the conceptual framework of this thesis will be briefly set out, with further in-depth discussion provided within *Chapter 3.* Firstly, the broad concept of gender normativity relates to the social construction of a binary man/woman gender categorisation as ‘normal’ and positions any divergence from this as anomalous (Stryker and Aizura, 2013). Within this normative conception, cisgender identities are positioned as natural and immutable, in that gender identity is seen as being fixed at birth and absolute, whereas trans identities are viewed as unnatural, deviant and other (Enke, 2012). This notion underpins my analysis as it places the most commonly represented social constructions of binary gender as normal (Stryker and Aizura, 2013). ‘Cisgenderism’ is a theoretical concept that integrates ideas of gender normativity. It refers to the view that identities that differ from the gender ascribed to a person at birth and defined by social conventions are less valid than cisgender identities (Ansara and Hegarty, 2011, 2014). ‘Cissexism’ refers to a set of normative views that assume everyone identifies with the sex assigned to them and birth and enforces binary gender ideas within society (Valentine, 2016).

Normative views on gender, including those that are cisgenderist, can be regarded as social constructions that are temporally located in a particular social, cultural and historical moment. Indeed, Vincent and Manzano (2017, p.25) argue that the Western concept of binary gender is relatively new, with masculine/feminine categories being viewed with greater congruence as little as a century ago. They illuminate a long history of gender variance across the globe and argue that specific socio-cultural contexts generate ‘*highly varied articulations of gender’*. They further set out that gender diverse people in non-Western societies are suffering systemic oppression due to Western colonialism; whereby countries such as England impose their societal norms upon a country with the aim of achieving economic dominance over them.

Theories of normativity in relation to sexual identity are also of relevance to the analysis as sexuality and gender are often conflated and it can prove difficult to separate experience in terms of the two (Rogers and Ahmed, 2017). Heteronormativity is relevant too as it refers to the assumption of heterosexuality as the ‘norm’ and homosexuality as deviant (Hall, 2010; Mallon, 2011). Similarly, heterosexism describes the privileging of heterosexual identities and norms and the diminishing of homosexual identities, including the failure to accept that sexuality can be fluid or context dependent (Schilt and Westbrook, 2009).

* 1. **Social work: policy and legislative contexts**

**Defining adoption and fostering**

Along with an understanding of the terminology of gender diversity, it is also important to introduce the areas of social work practice that this thesis is concerned with.Adoption and fostering are two methods used within the UK to provide substitute forms of care for children who cannot be looked after by their birth families (Children Act 1989; Adoption and Children Act 2002). Adoption is defined by the provision of a lifelong family for a child whose birth family are not able to care for them or meet their needs (Triseliotis, Shireman and Hundleby, 1997). Adoption is intended to be lifelong; removing all legal ties from the birth family and giving full legal responsibility to a child’s adoptive parent/s (Children Act 1989; Adoption and Children Act 2002).

Fostering provides a safe and caring family for a child while they are unable to live with their birth parents (Fostering Network, 2016). Foster carers are defined by the Fostering Network (2016) as trained professionals contributing to the care of a looked after child, as part of an expert team who aim to support the rehabilitation of birth family members with a view to restoring their caring duties. Where the courts decide that a child cannot be returned but their birth family relationships should be maintained (e.g., via supported contact arrangements), a long-term fostering placement is required to provide care for a child without severing legal relationships. Fostering does not involve a redistribution of legal parental responsibility in the sense of removing parental responsibilities from the birth parents, as in adoption. However, in most long-term foster placements children will be subject to a Care Order, under s.31 of the Children Act 1989, by which the local authority acquires joint parental responsibility in most areas and can legally exercise these unilaterally of the birth parent (Children Act 1989; Adoption and Children Act 2002).

**History and development of fostering in England and Wales**

Whilst this thesis is not concerned with policy and legislation per se, adoption and fostering are highly regulated areas of social work practice. The patchwork of regulations and policy underpinning both affects anyone who goes through the assessment process in their quest to be an adopter or foster carer. Therefore, understanding the history and contemporary legislative and policy contexts in needed to situate the research and its findings. Of the two substitute family provisions under focus within this thesis, fostering is the form that dates back earliest within UK historical records. Foster care was first formally used in the UK in 1853 when the Reverend John Armistead removed children from a workhouse in the English county of Cheshire and placed them with substitute families who could offer care to them (Guishard-Pine, McCall and Hamilton, 2007). At the time, the unions (the equivalent of today’s local authorities: geographically divided sections of England and Wales that are responsible for enacting national law and policy at a local level) were legally responsible for the children and for paying the foster payments; an amount equal to the cost of maintaining the child they cared for in the workhouse.

Today, local authorities retain the role of providing payment and remuneration in addition to a child’s maintenance costs is now provided to foster carers (Fostering Network, 2016). The role of independent foster care providers (who are separate to local authority services, some profit and some non-profit) is to recruit carers for placements which the local authorities then purchase in (Fostering Network, 2016). Foster carer fees reflect a payment for skills in acknowledgement of the difficulties inherent to the task of providing substitute care for children who have often experienced abuse, upheaval, and attachment difficulties. Indeed, the description provided about foster carers as being expert care professionals (Fostering Network, 2016) is markedly different to the historical foster care role that simply required the provision of food and accommodation (Guishard-Pine, McCall and Hamilton, 2007). However, calls were made for change as: ‘*Foster carers do not always receive the respect and recognition they deserve’,* highlighting that shadows of foster care’s historical conceptualisations remain (House of Commons Education Committee, 2017, p.4).

**History and development of adoption in England and Wales**

The first piece of UK adoption legislation was the Adoption of Children Act 1926. However, the foundations of what we now define as adoption, the provision of a lifelong family for a child whose birth family are not able to care for them or meet their needs, arose in the 1950s (Triseliotis, Shireman and Hundleby, 1997). The population of children needing adoptive parents was mostly made up of babies who were voluntarily given up by unmarried mothers due to the social stigma attached to their positions (Kornitzer, 1976). Kornitzer (1976) describes how at the time, the population of adopters coming forward almost entirely comprised White British, middle-class, heterosexual, cisgender couples who could not have biological children. The supply of adopters far exceeded the number of babies and agencies could select based on criteria of their own choosing. Social workers and managers acted as gatekeepers (and still do), deciding which potential adoptive families are suitable and which were not.

The phenomenon of adoption may be considered a challenge to the normative discourse on family as this alternative way of creating families sits outside of the normative discourses on family that have existed throughout history (Waltner, 1990). Though many countries historically took a favourable view of adoption due to its ability to provide heirs and labour to families who struggled to have children of sufficient number or characteristics, conversely, the UK and other Christian-led countries favoured birth parenting.

During the early 20th century, oversight of the adoption assessment process was minimal and matching was either ad hoc or based on the views of the religious figure presiding over the adoption (Keating, 2009). However, in the 1970s there were less babies being relinquished, and more children being brought into care due to abuse, therefore the need for adopters for older children began to grow (House of Lords, 2006). As such, the adoption system was reviewed and a Report of the Departmental Committee on the Adoption of Children recommended that the legislative be updated to support the changing context of adoption in the UK (Sir William Houghton, 1972, c.f. House of Lords, 2006). It was at this time that the concept of ‘permanency’ for looked after children arose as social care needed to make a more solid provision for children who could not stay with their birth families. As a result, the Adoption Act 1976 introduced ‘Freeing Orders’, which allowed for parental responsibility to be removed from birth family so that local authorities were able to place children for adoption. The Adoption Act 1976 directed the responsibilities of adoption agencies to assess adopters and match them with children and the Children Act 1989 set out adoption as a solution for meeting the needs of children who had to be removed from their birth families. As a result, there was a rise in the adoption of older children and those with additional needs (Kirton, 2013).

Special Guardianship is a further option from the Adoption and Children Act 2002 which (like adoption) offers permanence by taking a child out of the formal care system and transfers most parental responsibilities (but not the right to consent to adoption) to the Guardian. This route is most often pursued by either pre-existing friends/extended family connections or foster carers (Wade et al., 2014).

**Contemporary policy frameworks governing adoption and fostering**

A major issue in both adoption and fostering today is a persistent lack of families who can meet the needs of the looked after children needing homes (Office for Standards in Education, Children’s Services and Skills (OFSTED), 2021). Although there are issues in reporting (Baginsky, Gorin and Sands, 2017), it has been estimated that the foster carer shortfall is around 5700 (Narey and Owers, 2018) and adopter shortfall is 1220 (First4Adoption, 2017). At the time of writing, the situation is further worsened by the pandemic, which Turner (2020) argued is fuelling a shortage of all forms of placement. Regardless of the political situation however, there has been a persistent pattern where even when carer recruitment and approval increases, there remains a lack of placements for children with complex needs (OFSTED, 2021) for children who for example, require trauma-informed care (Wilson, Pence and Conradi, 2013).

A key concept in adoption and fostering research, policy and practice within the UK is ‘permanence’; a term that describes the long-term plan:

‘*to ensure that children have a secure, stable and loving family to support them through childhood and beyond and to give them a sense of security, continuity, commitment, identity and belonging.’* (Department for Education (DfE), 2015, p.22).

Permanence can be achieved via multiple routes; adoption, fostering or by a successful return to birth parents; where the issues leading to a child becoming ‘looked after’ by a local authority are resolved (DfE, 2015). It can also involve placing a child with other family or friends or in residential placements. However, within England and Wales, this route is usually a last option if a suitable foster home cannot be found for a child. In the UK, the guiding assumption is that the security, stability and a sense of family enshrined by the concept of ‘permanence’ is best achieved by placing a child within a family *(engagement with the debate regarding what constitutes ‘family’ is set out within Chapter 3, however it is noted that UK definitions of family tend not to include residential staff members).*

The backdrop to the enaction of the current laws came from New Labour’s modernising agenda in the early 2000s. Problems in the approach were identified due to a lack of homogeneity in the nature and quality of practice (Kirton, 2013). In response, the Adoption and Children Act 2002 received royal assent and was enacted in 2005, along with national standards, guidelines and targets for adoption agencies (Performance and Innovation Unit, 2000). This Act replaced its 1976 predecessor and made it legal for unmarried couples to adopt; meaning many previously precluded couples defining as lesbian, gay, bisexual, transgender or queer were then eligible to adopt. Though adoption by single people has been allowed since the first legislation in 1926 and there was no prohibition of adoption based on sexuality (Owen, 1999), it has been argued that the 2002 Act presented the first statutory challenge to the traditional heteronormative ideal (Hicks 2000; Mallon, 2011; Mallon and Betts, 2005). Culture was changing and the legislation began to catch up so that no longer was it to be assumed that a good adoptive family comprised a heterosexual cisgender couple and biological children.

Legislative change in the last few years has been driven by a Conservative government, which is demonstrably pro-adoption (DfE, 2016). Following consultation with an expert working group (DfE, 2012; Expert Working Group on Adoption, 2012) the Adoption Agencies (Miscellaneous Amendments) Regulations 2013 were brought in to improve adoption by speeding up and standardising the assessment process. This change primarily aimed to increase the numbers of adopters being approved, however it was also purported to remove barriers preventing those with characteristics of difference such as race, class, being single, lesbian, gay, bisexual, or transgender from adopting (OFSTED, 2012).

**Similarities and differences in contemporary adoption and fostering**

There are numerous similarities between adoption and long-term fostering as they both aim to provide stable, secure and loving family life for a child into adulthood and beyond (Beckett et al., 2014). Foster care differs from adoption primarily in a legal sense; adoption aims to provide a child with a lifelong substitute family and in doing so removes all previous legal parental responsibility from a birth family and bestows it upon the adoptive family (Children Act 1989). When a child is in foster care however, a local authority bears the majority of the legal parental responsibility and the rest is retained by birth parents. While the local authority can delegate responsibility for the day-to-day care of a child to foster carers, in the eyes of the law they have are temporary guardians with no rights to a child because they have no parental responsibility (DfE, 2015). As detailed by the Fostering Network (2016), fostering placements can be short-term (lasting days, weeks, or several months) long-term placements (lasting years, perhaps up until a child reaches 18 years of age, with a possibility to extend until 21 under the ‘staying put’ scheme) (Children Act 1989; Adoption and Children Act 2002). Temporary foster care arrangements may be viewed as differently in that they do not seek to provide in themselves a lasting sense of family and belonging, however their role contributes to an eventual permanence plan (DfE, 2015).

Adoption and long-term fostering have been found to share more similarities than differences in terms of the assessment process and experience carers and children have (Selwyn and Quinton, 2004). In Selwyn and Quinton’s (2004) research, key differences were also found. First, adopters were found to have greater autonomy and perceived closeness to children. Secondly, adoptive placements have been associated with greater stability. Thirdly, fostering placements are governed by regulations and standards (DfE, 2011). However, recent research shows that rising demand for adoptive placements, austerity measures and increasingly bureaucratic, target-driven practices have threatened the stability of adoption placements (Featherstone, Gupta and Mills, 2018). Indeed, it was noted that an insufficient assessment of complex issues such as parental feelings of grief and loss regarding infertility and inadequate support for childhood experience of trauma created a ‘*toxic mix’* for adoptive placements (Featherstone, Gupta and Mills, 2018, p.18). Thus, drives to professionalise fostering (Hutchinson, Asquith and Simmonds, 2003; Guishard-Pine et al., 2007) that channelled separate adoption and fostering service foci (Schofield, 2009) are reinstituting overarching ‘family placement’ or ‘permanency’ services (DfE, 2018).

‘Permanency’ services have been highlighted as examples of good practice, offering a streamlined service that *‘does not restrict or define the child’s journey by legal status, but instead allocates one expert to the child to identify and deliver the best possible option for them.’* (DfE, 2018, p.21). However, as the Peterborough example set out made use of outsourcing to an independent fostering agency (DfE, 2018), it could be argued that prioritising this model could serve a neoliberal conservative agenda to marketize and privatise social care (Garrett, 2010; Hyslop, 2016). Notwithstanding, an overarching family placement model with equivalent support offers across adoption, fostering and special guardianship could provide solutions to some of the issues highlighted by recent reviews (Featherstone Gupta and Mills, 2018; Education Select Committee, 2017; Narey and Owers. 2018, Lawson and Cann, 2019). |As such, the thesis will engage with adoption and fostering social work together, as work done to recruit, assess and support ado ptive parents and foster carers to provide substitute care until adulthood (and often beyond) for children unable to live with their birth families (Children Act 1989; Adoption and Children Act 2002).

**Political tensions within contemporary adoption and fostering**

Both areas of adoption and fostering are established areas of social work, but these are often contested and critiqued. As a result, both undergo frequent reviews. The findings of fostering and adoption Enquiries alike indicated a need for significant change to UK care pathways and provisions (House of Commons Education Committee, 2017; Narey and Owers, 2018; Featherstone, Gupta and Mills, 2018). The Adoption Enquiry commissioned by the British Association of Social Workers (BASW), unearthed ethics and human rights issues and examined the social work role within adoption (Featherstone, Gupta and Mills, 2018). It found that in the UK, adoption has not only been prioritised as a route to permanence, but reportedly sometimes feels to birth families and social workers to be a ‘fait accompli’. Decisions can be made at the point of intervention that prevent families and professionals working together towards a plan for rehabilitation home. Indeed, a conservative agenda prioritising adoption over fostering has been highlighted by the Education Select Committee (2017) and Foster Care in England (Narey and Owers, 2018).

The government attempted to clarify that the needs of the individual child should be considered, however, made plain its position that adoption and Special Guardianship are the preferred options for looked after children as these routes offer the greatest sense of ‘*normal’* life, whereby children *‘find a stable family outside of care’* (DfE, 2018, p.58). However, Featherstone and Gupta (2020) highlighted that the issues they unearthed had not been addressed and argued that increasing gaps in wealth disparity are magnifying the problems. Indeed, the rate of looked after children had reached 80,080 children by March 31st 2020, having steadily risen since 2015 (CoramBAAF, 2020).

Reform to UK social work overall has been a key feature of the UK’s political agenda for over a decade, however, Cromarty (2018) questions the effectiveness of this raft of reform initiatives and implicates large caseloads, budget cuts, negative media coverage and a blame culture as the real issues in social work. The global Coronavirus pandemic has put further strain on social work practice (Dominelli, 2020; DfE, 2021; BASW, 2021), with reported increases in child abuse referrals and a feeling of being less able to protect the most vulnerable members of society (BASW, 2021). While it is too early to gauge the impact of the pandemic on trans people’s experiences of adoption and fostering, and not within the scope of this thesis, fertility research points to the increasingly disproportionate disadvantaging of LGBTQ+ people (Harvey and Inghraham, 2021).

**Transnational comparisons of adoption and fostering**

The undergirding aim of child and family social care in the UK, to provide children with ‘*a sense of belonging and family membership’,* is acknowledged internationally (Thoburn, 2010, p. 34). However, there is marked variance in methods of providing substitute care even between ‘developed’ countries. For example, the UK and USA prioritise adoption as a form of substitute parenting, mainland Europe makes greater use of residential care (where paid staff care for children within specifically designated group accommodation units) (Thoburn, 2007) and Australia primarily uses fostering (Hansen and Ainsworth, 2016). Contrary to popular myth, the UK is not distinct from the rest of Europe in its legal provision for adoption. Rather, most European countries make provision for and some use of adoption (Fenton-Glynn, 2015). It is difficult to establish statistics to compare the use of adoption across Europe, however, the information available suggests that the UK makes a greater use of adoption than many other European countries. Fenton-Glynn suggests that this is due to failings of the UK care system that could more usefully be addressed as a reason that the UK makes more adoptive placements for children who must be separated from birth families.

Although Scotland is not the focus of this study and it is noted that it is governed by different legislation and policy, its trends in adoption and fostering are largely mirrored (Maclean and Hudson, 2010). Issues leading to children becoming ‘looked after’ may differ as Scotland’s geographical and socio-cultural positions vary, for example it has higher levels of parental drug and alcohol abuse. However, governing legislation; the Children (Scotland) Act 1995 and Adoption and Children (Scotland) Act 2007 make similar provisions for adoption and fostering. Maclean and Hudson (2010) highlight that Scotland has often led the way in terms of academic, government and practice based social care development, with England and Wales following behind. Indeed, Scotland was at the forefront of projects promoting openness and contact in adoption and fostering.

It is acknowledged that a Eurocentric perspective is taken within this thesis, in that the literature included and research findings produced relate primarily to Western countries; specifically, to the legal, practice and policy context of England and Wales (Hobson, 2012). However, this refining of focus allowed for the in-depth exploration of trans people’s experiences of adoption and fostering practice within England and Wales. A national rather than international focus was appropriate due to the specific regulatory and legal framework that England and Wales has. Notwithstanding, the rationale for conducting this research aligns with an international conceptualisation of social work (*see section below*). Thus, it can be said that the study’s findings have a wider interest to themes of social work and social justice and to gender and transgender studies discourse, as well as specific application to the social work practice and policy context in England and Wales.

Baroness Hale pointed out in a 2006 House of Lords judgement, that the UK is unusual within Europe in legally severing parental rights permanently, without the consent of birth parents. O’Halloran (2015) argues that modern policy development must consider adoption, fostering and other kinship placements within the context of each other, as all seek to secure the welfare interests of children. All forms of permanency are also arguably seen in different lights that are reflective of the different political positions of the times. As discussed above, there does appear to be a blurring of boundaries between adoption and fostering, moving towards a newer conceptualisation perhaps more akin to Australia’s definition of ‘permanent carers’ (Barnardo’s Australia, no date). Though adoption is still used in the UK, alike the US, the introduction of Special Guardianship Orders arguably moves UK practice towards models of permanency practice utilised by Australia and most of the rest of Europe (Fenton-Glynn, 2015).

**Matching policy**

The process of matching in adoption and fostering which is unpacked in *Chapter 2*, is relevant to this thesis because it directs how a family is selected for a child as best able to meet their needs. There has never been a national policy which directs social workers to match children with adopters or foster carers based on attributes of gender, culture or identity. There have however been policies directing the matching of children to adopters/carers based on ethnicity. In the mid-2010s, the Conservative Government removed the duty to consider ethnicity, language and culture when placing for adoption in England (however this still exists in the other UK countries). In the case of adoption, the Adoption and Children Act 2002 dictates that there should be no discrimination and prospective adopters and foster carers should not be turned down based solely on protected characteristics such as sexuality or identifying as trans (Stonewall, 2017a). However, despite legislative protection and the continual need for more adopters and foster carers (Brown, 2017; Adoption Match, 2017; Lawson and Cann, 2019), trans people do still report experiencing discrimination and difficulty with adoption and fostering applications (Goldberg et al, 2020). These issues will be discussed in further detail in the literature review chapter.

Key messages produced by Research in Practice and the DfE (2014) state that in the UK:

*‘Whatever the route to permanence, professionals must work to match the developmental needs of the child with the caregiving required to meet them.’ (DfE, 2014, p.1).*

Policy for matching in adoption and fostering stipulates that the process should fully involve the child. However, it is noted that this rarely happens (DFE, 2014). There is emphasis on the relationships between the child and professionals around them being key to an iterative matching process that involves robust assessments and support plans, a high level of information sharing and careful decision making.

**Gender in law and policy**

A consideration of the ways in which contemporary UK law and policy relates to gender identity is relevant to this thesis as it is primarily concerned with the provision of rights and recognition. The main two pieces of legislation are the Gender Recognition Act 2004 and the Equality Act 2010. The Gender Recognition Act 2004 allows a trans person over the age of 18 years to apply for a gender recognition certificate to enable them to record their ‘acquired’ gender on their birth certificate. Applications for a gender recognition certificate are assessed by a panel of medical and legal professionals and decisions are dependent on an individual having gender dysphoria and having lived in their ‘acquired’ gender for two years. White (2018) points out that not all trans people in the UK apply for a gender recognition certificate. Indeed, individuals can write to the relevant authority to request a change of gender marker on most other official documents (e.g., driving licenses, passports and National Health Services records) without a gender recognition certificate.

Although it always offered gender recognition irrespective of hormone therapy or surgery, the Gender Recognition Act 2004 has been criticised because it does not provide legal recognition or protection for non-binary people, intersex people or young people under 18 (Bachman and Gooch, 2018). Although the Gender Recognition Act does not impose any legal barriers for pregnancy, childbirth, fostering or adoption, neither does it consider trans parents. For example, it does not make provision for changing the gender/parenting role recorded on the birth certificate of a trans person’s child (White, 2018). Bachman and Gooch (2018) also refute the act’s outdated premise that being trans is a mental illness and argue that the ‘*bureaucratic and demeaning’* (p.11) process required to gain recognition of gender should be replaced with a simple self-declaration process.

The Equality Act 2010 sought to bring together and update numerous pieces of legislation to advance equal opportunities and protect the rights of individuals living in England, Scotland and Wales. It aimed to make it unlawful to discriminate based on disability, race, religion or beliefs, marriage or civil partnership, pregnancy or maternity leave, sex, sexual orientation and gender reassignment. The Equality Act 2010 aims to safeguard against discrimination for these nine protected characteristics in education, at work, as a consumer of good or services, when renting or buying property and when accessing clubs. An individual has the protected characteristic of gender assignment under the Equality Act (s7) if ‘*the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.*’ As such, any individual undergoing or preparing to undergo a process of social transition (e.g., uses different pronouns) should be afforded protection.

The Equality Act 2010 should offer sufficient legal protection for trans people within the context of social work service access (Fish, 2012). However, it is clear the Act’s protections are being flouted in practice (Bachman and Gooch, 2018; LGBT Foundation, 2017). Furthermore, although the Gender Recognition Act 2004 and the Equality Act 2010 were considered adequate for their time, they have now been criticised for offering insufficient protection for trans people today (Bachman and Gooch, 2018). The ‘Transgender Equality’ report highlighted failings across a wide breadth of trans issues, including media representation, hate crime, prisoners and probation, gender markings, education, health, and social care (House of Commons Women and Equalities Committee, 2016).

Calls were made to change the Gender Recognition Act 2004 to include provisions for self-declaration and replace confusing, outdated language within the Equality Act 2010 with a new protected characteristic of ‘gender identity’ (MySociety, 2016). Hunter (2018) argues that the Equality Act only protects those with normative expressions of gender, masking structural inequality and propagating a notion of diversity that itself represents an empty, depoliticized recognition of difference in this neoliberal age. Following a three-year consultation period with a view to updating the legal framework, however, reforms were put on hold in Scotland (BBC, 2019) and in England and Wales (Guardian, 2020). Cited reasons included concerns about implications for wider gendered policy and service delivery, and access to women’s spaces. The project of stalling legislative reform in the name of harm reduction can be easily critiqued however, with findings that trans people experience disproportionately high levels of mental illness, homelessness, unemployment and domestic abuse (LGBT Foundation, 2017; Bachman and Gooch, 2018).

* 1. **Rationale**

**Inequality faced by trans people within the UK**

Trans people experience routine discrimination in both public and private spheres. A recent largescale Stonewall survey of 871 trans and non-binary people living in the UK shows that levels of discrimination and hate crime are extreme (Bachman and Gooch, 2018). For example, at work, 51% of trans people hid their identity for fear of discrimination; the reason why is clear, with one in eight reporting physical attacks at work. In the private sphere, 14% of trans (and 24% of non-binary) people felt unable to ‘come out’ (did not feel able to be open about their gender identity) to anyone in their family, and 6% were unable to ‘come out’ to friends. Research shows that in both public and private areas of social life, trans people lack support from friends, family and professionals due to lack understanding of trans issues*.*

Such lack of understanding can lead to cisgender people intentionally or unintentionally misgendering trans people (Matsuno and Budge, 2017). Misgendering is when someone makes an assumption about a person’s gender or refuses to accept their gender, and uses language that makes this apparent, misusing pronouns or gendered language such as ‘sir’ or ‘madam’ (Valentine, 2016). Misgendering and a lack of awareness of trans identities are common occurrences reported by trans people (LGBT Foundation, 2017; Bachman and Gooch, 2018), and may be especially pronounced for non-binary people (Matsuno and Budge, 2017). All the above are examples of transphobia, a term that describes ‘*Discriminatory or prejudiced actions or ideas related to someone’s actual* *or perceived gender identity or gender expression.’* (Valentine, 2016, p.93).

**Specific detriment to non-binary people**

Non-binary people have attracted interest within the mainstream media over recent years; however, this interest has not necessarily been productive in working towards inclusion and acceptance of non-binary people. Rather, the media has tended to situate non-binary people as ‘other’ to the presumed normatively grouped viewer (Sue, 2010). This thesis aims to avoid contributing to the ‘othering’ of non-binary people while also acknowledging the specific challenges that non-binary people may face. Valentine (2016) highlights a lack of research examining the experiences of non-binary people as a distinct group and a need to address the Ministry of Justice’s claim that there is no specific detriment to non-binary people that warrants a review of legislation.

There is an amassing body of research that suggests that specific detriment does exist for non-binary people within the UK (Matsuno and Budge, 2017; Valentine, 2016). Matsuno and Budge (2017)’s literature review found that non-binary people experience higher levels of depression, anxiety and suicidality than binary trans people. They experienced exclusion from services where non-binary identities were not understood or represented (Valentine, 2016). While Airton (2018, p17.) sets out that a de-politicizing or gender-neutral pronouns can lead to reduced misgendering, the success of inclusivity policies depends on how they change the ways *‘(mostly) cis-gender institutional actors feel about and narrate their own involvement in the institutional commitments’.*  Non-binary people experience multiple challenges as they try and navigate their lives in a society that is organised around binary gender identities.

**The exclusion of trans and non-binary people from social work and social care research**

Just over a decade ago, a review of trans research noted an ‘*almost complete absence of research on accessing social care services for trans people*’ (Mitchell and Howarth, 2009, p.61). More recently, research has begun to focus on addressing this, with several key studies contributing to the emerging mass of knowledge (Rogers, 2016; Tasker and Gato, 2020; Hafford-Lechfield et al., 2021; Goldberg et al., 2019, 2020; Brown, 2021). The voices of trans people however still necessitate greater inclusion within the adoption and fostering social work research base (Brown and Rogers, 2020). Trans voices must be regarded as *‘real, valid and deserving of affirmation’* (Pearce, 2018, p.6). The ignorance or subsuming of trans voices into broader LGBTQ+ research is an issue of social injustice, necessitating the attention of trans-inclusive feminist inquiry (Hines, 2019), as well as social work focus (Rogers, 2016; Hicks, 2013).

The core tenets of the social work profession point to the responsibility it has to advance the rights and support the wellbeing of trans people as a minoritized group who routinely experience discrimination and oppression:

*“Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing.”* (International Federation of Social Workers, 2014, online).

Indeed, at a national level, the first professional standard set out by Social Work England (2020, Standard 1) assert that social workers should *‘promote the rights, strengths and wellbeing of people, families and communities*.’ Specifically, they should:

*‘1.5 Recognise differences across diverse communities and challenge the impact of disadvantage and discrimination on people and their families and communities.*

*1.6 Promote social justice, helping to confront and resolve issues of inequality and inclusion’.*

**The need for good adoptive parents and foster carers**

The picture of child and family social work today has been influenced by several serious case reviews, the highest profile which have been the death of Victoria Climbie in 2000 and the death of Peter Connelly (‘Baby P’) in 2007 (Sidebotham, 2012). Doubts have been expressed in relation to the efficacy of reviews in producing safer practice (Sidebotham, 2012), and the issues of bureaucracy and risk-aversion as practice hindrances emphasises (Munro, 2011). Nevertheless, the practice response has been to bring more children into care, which has led to an imbalance with the demand for foster and adoptive placements exceeding supply (Hood et al. 2016). With a continually increasing number of children being brought into care and persistent shortfall of adopters and foster carers available to provide suitable placements (CoramBAAF, 2020), it is argued that a different approach is needed to meet the demand (Brown, 2017). Scotland has similarly reported an increase in children needing adoption and fostering, highlighting that ‘*fundamental change’* to existing systems and a ‘*radical approach’* is needed (Maclean and Hudson, 2010, p.3).

The DfE (2018, p.42) has explicitly stated: ‘*We want the foster parent population to be diverse and enough trained carers to meet the needs of all children.’* In light of an increasing public awareness of trans identities, Austin (2018) argues that greater numbers of trans children and will need support from social services in the near future. Though it should be made clear that no suggestion is made that trans carers should *only* be matched with trans children, it could be that they are especially well placed to understand and meet their specific needs (McNeilly, 2019).

The research presented within this thesis as such aims to add to the emerging body of research attending to the voices of trans adopters and foster carers. It will add a unique perspective by exploring trans people’s experiences of adoption and fostering in the UK via use of a narrative inquiry. It focuses on analyses of the current extant problems and provides recommendations for improvements to practice.

As such, the following objectives were set for the research which sought to:

1. Understand how trans people make sense of their experiences of adopting and fostering through narratives of personal identity and family.
2. Explore what enablers and barriers exist for trans people who wish to adopt and foster in England and Wales.
3. Generate knowledge to identify any qualitative differences between the experiences of different trans and non-binary individuals.
4. Produce recommendations in the form of good practice guidance for adoption and fostering social work staff.
   1. **Overview of the scope and structure of the thesis**

This thesis is interdisciplinary, informing fields of social work, sociology, gender and family studies. The thesis can also be placed within the subject of transgender studies; an area of study that focuses not only on discourses around the lived experiences of trans people, but also explores the relevance of trans insights for broader understandings of political and social phenomena (Stryker and Aizura, 2013). As set out in *Chapter 3: Theoretical Frameworks*, the thesis interweaves concepts of cisgenderism with theories of stigma and analyses of discourses of power.

Sociological theory and analyses are applied to the real-world practice of adoption and fostering social work. As such, particular settings that the ideas may be transferable to include adoption and fostering services in countries with similarly strong traditions of public social care systems. The ideas will also be relevant to academics, activists and practitioners in other contexts. In turn, the thesis will also be useful for social scholars who work outside of the specific areas of adoption, fostering and transgender studies.

*Chapter 2* engages in a critical review of the literature, overviewing the rise in LGBTQ+-headed families, exploring knowledge on trans parenting, examining the impact that normativity and gatekeeping has on social work practice, and scrutinising the current research base pertaining to adoption and fostering.

In *Chapter 3* I set out an explanation of the theoretical ideologies that underpin my work, connecting sociological theories of a contemporary feminism inclusive of trans people with theories of stigma and power among social strata. In doing so I attempt to engage with debates surrounding the complexity of trans identities and construct the discursive parameters that have directed the analysis and discussion contained within the thesis. Wider social science theory is also used to complement sociological understanding and add strength to analyses.

The research’s epistemological and ontological positions are laid out in *Chapter 4: Methodology*. Following this, the design and methods of the study are explained, with detail regarding the reasons a narrative inquiry method was employed.

I then present data from the participants’ narratives within integrated findings and discussion *Chapters 5, 6* and *7.* A framework of cisgenderism, incorporating ideas of stigma, feminism and discourses of power to offer a conceptually informed analysis of the narratives. Inductive thematic analysis led to the emergence of three main themes which form the findings and discussion chapters.

Narratives of personal identity attends to the ways in which early experiences have influenced the gender rules, roles and expression that participants have engaged with throughout their childhoods and into adulthood. It explores experiences of ‘coming out’ and how participants define their gender identities.

Narratives of family examines the family attitudes and narratives that trans interviewed in the study expressed in terms of membership to a family in childhood (family of origin), adult romantic relationships and those involving children in their families.

The adoption and fostering narratives chapter sets out the experiences and perspectives that influence trans people’s desire to adopt or foster. In doing so, it considers the ways in which the motivation to adopt or foster can be linked to a person’s trans identity, as well as the gender barriers that can present challenges to for trans carers.

Narratives of resistance are interwoven within all three chapters and are drawn together with the synthesis of the three chapters’ findings and discussion within *Chapter 8: Conclusions and recommendations*. As I demonstrate within this thesis, counter-narratives are gaining traction and beginning to challenge the hegemony of binary gender discourse, both within society at large and within adoption and fostering settings.

* 1. **Chapter summary**

This chapter has introduced the terminology needed to read the thesis, set out the rationale for the project, and explained the scope and structure of the thesis. *Chapter 2* will go on to engage with a critical appraisal of the literature.

**Chapter 2: Critical review of the current literature**

**2.1 Introduction**

A narrative literature review was undertaken to reflect the narrative methodology. Research from multiple sources was drawn together and woven into a narrative that tells the story of the research base (Baumeister and Leary, 1997; Aveyard, 2014). Main terms and concepts were searched for, as well as their associated terms (e.g., ‘trans’ OR ‘LGBT’ in addition to ‘adopt’, ‘foster’ OR ‘social work’. *See Appendix 2: Literature search terms*). Searches were conducted using the following databases: ASSIA, Community Care Inform, CINAHL, EBSCO Host, PsychInfo, ProQuest, Social Care Online, Social Policy and Practice, Social Services Abstracts, Scopus, SSRN, University of Salford, Teesside and Sheffield library databases and Google Scholar. Additional searches were conducted through specific journal sites (Sexualities, IJTH, Journal of GLBT family studies) using ‘adopt’, ‘foster’, ‘social work’ to ensure relevant results were yielded. Abstracts, book reviews or full articles were read to establish relevance to the central topics of adoption, fostering, LGBTQ+ personal and family lives. Additional results were also obtained from following up citations included within original search results.

The literature included within this review comprised predominantly qualitative empirical studies, supported by quantitative empirical research, academic and autobiographical books. The Critical Appraisal Skills Programme (CASP, 2006) checklist was utilised as a basis to critically appraise the literature. The ten-question sequential processes aided evaluation of the rigour, relevance and credibility of the studies included (Hannes, Lockwood and Pearson, 2010). It was deemed to have efficacy in evaluating adoption and fostering literature as it was developed in conjunction with the Cochrane Qualitative Research Methods Group (CQRMG), a state-sponsored project dedicated to bringing in peer reviews of quality that can be used by policymakers (Denzin, 2009). The CASP framework’s brevity and adaptability to multiple sources of data offered distinct advantages that were more suited to this project’s narrative review than lengthier or more rigid tools (Hannes, Lockwood and Pearson, 2010; Health Care Practice Research and Development Unit, 2009; Tong, Sainsbury and Craig, 2007). The CASP tool provided useful stimulus for the critique contained within the literature review, however framework was not suited to every piece of literature, thus its core thread was adapted and applied flexibly to autobiographical literature and media sources. Further, Knowles and McGloin (2007) argue that appropriate contextualising information should also be incorporated to produce a robust critical appraisal. Thus, ‘PESTLE’ analysis (2014) was also used to stimulate consideration of the Political, Economic, Social, Technological, Legal and Environmental context relevant to the study.

Relevant terminology and the legislative and policy backdrop have been set out in the previous chapter. A full list of definitions included in *Appendix 1: Glossary* can be referred to for clarity of meaning and specific usage of terms. A critical assessment of the literature was conducted to analyse the strengths and weaknesses of current evidence, compare and contrast existing knowledge and identify gaps in the research base (Rogers and Allen, 2019).

This chapter begins with an overview of LGBTQ+ families and follows with relevant themes within the literature on trans parenting. It goes on to examine the literature on adoption and fostering by LGBTQ+ families as an overarching group. Gender and sexual identities have been difficult to separate out within the research base; however, findings can offer insight into how LGBTQ+ people are treated as an overall community. Further, aspects of the findings pertain to the lesbian, gay, bi or pansexual identities of the study’s participants. Next, themes of normativity and power in social work practice are analysed in relation to adoption and fostering social work. The chapter will then focus on recent research evidence pertaining specifically to trans people’s experiences of adoption and fostering.

**2.2 Technological and cultural support for LGBTQ+ families**

**Increasing recognition and visibility of LGBTQ+-headed families**

A recent surge in LGBTQ+ parenting research reflects a change in societal constructions of family (Goldberg and Allen, 2020). LGBTQ+-headed families have become increasingly more common over the past few decades, for two main reasons. Firstly, technological development has offered LGBTQ+ families numerous options to start a family together, in ways that were not previously possible. There has been a plethora of research documenting the options that advances in assisted reproductive technologies provide; conception via implantation using gametes from one or multiple parents, surrogacy using parental or donated eggs/sperm, and the freezing of sperm or eggs prior to transition (e.g., Chabot and Ames, 2004; Obedin-Maliver and Makadon, 2016; Sterling and Garcia, 2020; Riggs and Batholomaeus, 2018; Riggs et al. 2020). Secondly, there has been a dramatic global shift in legal and socio-political climates that have supported more positive attitudes towards diverse families (Tasker and Lavender-Stott, 2020; Flores, 2019This shift can be linked to the emergence of the most common form of lesbian and gay family existing today, that which comprises birth and stepchildren of partnerships assembled after the dissolution of heterosexual relationships.

A greater socio-political acceptance of LGBTQ+ families should arguably promote the inclusion of LGBTQ+-headed families of multiple forms (Tasker and Lavender Stott, 2020), however, just over a decade ago, a scoping review the body of research on LGBTQ+ families and found comparatively little about families with bisexual and trans parents, rather the focus was on lesbian and gay-headed families (Bilblarz and Savci, 2010). It should be noted that while it is not within the parameters of this research, the experiences of carers representing minoritized sexual identities such as bisexual, pansexual and asexual people are likewise under-researched, and represents a gap within the knowledge base. Tasker and Lavender-Stott (2020) highlight that while contemporary studies have begun to attend to trans voices within LGBTQ+ research, lesbian and gay-headed families remain the core focus. Policy guidelines relating to trans parenting (e.g., via fertility treatments) have likewise lagged behind those supporting reproductive choice for lesbian and gay parents (Riggs and Batholameus, 2018; Sterling and Garcia, 2020).

In examining the conditions that have contributed to the increased societal acceptance of LGBTQ+ families, and resulting greater visibility in public contexts, the role that child development theory played can be regarded as pivotal. Since the 1980s, researchers have been advocating for a reconceptualisation of child development theories due to the historically misplaced view that heterosexual, cisgender, two-parent families are better promoting an adopted child’s psychological health, role modelling and transmitting good values (Feigelman, Silverman and Richards, 1981). This literature review found no empirical research to support the claim that children raised by lesbian or gay parents are vulnerable to confusion about gender and lack important gender role models. Conversely, evidence was found that lesbian and gay parents provide adequate role modelling and that their children do not show gender confusion (Freedman, Tasker and di Ceglie, 2002; Green, 1998; Tasker, 2010). Several studies confirmed that lesbian and gay- headed households do not disadvantage children’s emotional and mental health, social adjustment or educational measures (Stacey and Biblarz, 2001; Cooper and Cates, 2006; Gates et al, 2007).

Research in the late 1990s and early 2000s proved useful in disconfirming negative stereotypes and beliefs about LGBTQ+ parenting (Freedman, Tasker and di Ceglie, 2002; Green, 1998; Tasker, 2010; Stacey and Biblarz, 2001; Cooper and Cates, 2006). Previous stereotypes and beliefs are suggestive of the prevailing heterosexist discourse; research had to firstly disprove a heterosexist assumption that gay and lesbian-headed families were not disadvantaged before it could explore any advantages that lesbian and gay families offered (Golombok et al., 2014).

Conceptualisations of gender norms within families also played a notable role in the growth of LGBTQ+-headed families. Throughout the 1990s and 2000s, traditional notions of family were troubled by examinations of same-sex intimacies and deconstructions of traditionally gendered family roles (e.g., Weston, 1991; Donovan, Heaphy and Weeks, 2001; Gabb, 2006). Indeed, the notion of *families of choice,* families constructed in the absence of blood ties, (*see Chapter 3 for an examination of this concept)* offers a family option for trans people who have become estranged from their families of origin due to familial cisgenderism and transphobia (Bachman and Gooch, 2018). However, LGBTQ+-headed families and families of choice persistently lack the routine and full acceptance that hetero- and gender-normative families are readily afforded (Short et al., 2007; Quaid, 2013; Hicks and McDermott, 2018). The nuclear family, as headed by two cisgender, heterosexual parents, is indeed still prioritised in law as the default model in the UK (Hicks and McDernott, 2018) as well as in other Western countries such as Australia (Parashar and Dominello, 2017) and the US (Mallon, 2011).

The notion of families of choice is not useful for all LGBTQ+ families. Heaphy, Smart and Einarsdottir’s (2013) found that LGB people often give precedence to their families of origin, to biological and couple relationships over their friendship networks. Additionally, egalitarian relationships were not always found. Findings indicate that LGB people do not necessarily resist hetero- or gender- normative family roles; indeed, there can be an emphasis on ordinary family life that ignores political aspects of being LGB. This may be because gender is the main way in which we identify people, organise intimate relationships and create meaning within social life (Nagoshi and Brzuzy, 2010). Breaking the gender rules as LGBTQ+ families do can present a threat to an established order (Pearlman, 2006).

**2.3 Trans parents**

**Trans people’s desire to parent**

Recent attention has been paid to the parenting desires of trans people. In one study, Ryan (2009) interviewed 10 transmale parents and found that the difficulty in becoming fathers and being seen as such were felt to be caused by the rigid, gendered rules that have been set up for family life. Trans parents in studies by both Hines (2007a, b) and Ryan (2009) reported negative and prejudicial reactions from friends, family and professionals, who failed to accept their gender and rejected the idea that they were suitable parents. An online survey of 160 trans Australian adults (Riggs, Power and Von Doussa, 2016) found that 24% had children already, with 59% of that subset having had children by birth before transitioning. 79% of those with children reported that their children were unaware of their gender diversity. Of those without children (all birth, not by adoption, fostering or a kinship care arrangement), 50% were considering having them in future.

The support a person received from their family of origin was positively correlated with the desire to have children and found the converse correlation was found where discrimination from family linked to a person not wishing to become parents themselves (Riggs, Power and Von Doussa, 2016). Though a small subset of participants it was found that of those expressing a strong desire to parent in future, 50% (n=9) wanted to do so by birth and 50% wanted to adopt or foster. While, Riggs, Power and Von Doussa’s (2016) study suggested that trans people perceive that they have limited pathways to parenting, Tornello et al. (2019) note the range of parenting options available to them (biological parenting, assisted reproduction step parenting, adoption and fostering).

In Nahata et al.’s (2017) study of trans youth, only 2 out of 73 took up the option of fertility preservation after fertility counselling. This finding suggests that only a small proportion of trans youth wish to become parents by birth in the future. The finding can in part be contextualised however, as 21% of the sample did not wish to have children and 45% planned to adopt. This finding is of specific import to the present study as it indicates a substantial proportion of trans youth could consider adoption. Detail was not provided with regards to the reasons trans people in Nahata et al.’s study wished to adopt. However, recent research has shown a variety of views in relation to trans birth parenting (Riggs et al., 2020). Some trans women do elect to freeze sperm that can be used for conception via various methods, and some trans men wish to bear children (Riggs et al., 2020). However, there are indeed difficulties in policy, practice and public reactions to trans men being pregnant that can dissuade them from choosing this route. Pregnancy and its associated bodily changes such as engorged chest tissue can also be experienced as dysphoric for trans men.

In their review of UK law on policy pertaining to trans pregnancy, White (2018) found no formal barriers were in place to prevent trans men, transmasculine and non-binary people becoming pregnant or the legal parent to a child resulting through pregnancy. Indeed, extant law and policy indicates that they should not be discriminated against when accessing NHS antenatal care or fertility treatment. However, the consideration of trans pregnancy remains largely absent within current law, policy and official guidance (White, 2018; Riggs et al., 2020). As a result, there is uncertainty as to which areas of policy apply to trans people, meaning the successful navigation through healthcare systems is often dependent on an individual’s capability to self-advocate or the understanding and empathy of professionals. Although many policies have been amended with a view to improving LGBTQ+ inclusivity, White (2018) argues that amendments that incorporate the needs of LGB parents do not necessarily reflect the specific needs of trans parents. As such, trans identities can experience erasure even through endeavours that seek to include, if attention is not given to the specific needs that trans populations have.

**Trans parenting and relationships**

Trans parenting is not a new phenomenon, trans people have been part of family life throughout centuries (Israel, 2005). It has been highlighted that over the past two decades, research into trans families has emphasised health and transition issues (Williams and Freeman, 2007; Veldorale-Griffin, 2014; Veldorale-Griffin and Darling, 2016), prioritising these areas of study over more traditional areas of family research such parenting experiences and relationship formation (Donovan, Heaphy and Weeks, 2001; Hines, 2007b). Trans people’s familial and romantic relationships (Riggs, Von Doussa and Power, 2015) and practices of intimacies (Hines, 2007b) have however attracted recent research focus. Within the literature on trans parenting, there has tended to be a skew in focus towards the challenges trans people have in ‘coming out’ where they have existing families, as well as the adjustment required by partners and children (Israel, 2005). Indeed, Imrie et al. (2020) emphasise that there is a lack of research on the functioning of trans-headed families, beyond an examination of the effects of transition upon family systems.

Children can experience loss in relation to a gendered figure, for example, that of a father, and can have difficulty adjusting to relating to a parent as a differently gendered figure such as that of a mother (Cicotello, 2000; Finney Boylan, 2013). Wider relationships (e.g., friendships) can also be fractured because of someone’s trans status (Bernstein Sycamore, 2008; Smith, 2010). Fractures in relationships can last from a matter of days to some years. In contrast, recent research found a good quality of parent-child relationships as well as good psychological adjustment in child of trans-headed families (Imrie et al., 2020). There have been some notable autobiographical anthologies exploring trans sexual and romantic relationships. For example, Diamond’s (2011) anthology demonstrated the complexity and multiplicity of forms that trans relationships can take. It explored the simultaneous emotional strength and vulnerability that trans people can experience as they navigate new relationships and work to maintain long term bonds, whether with trans or cis partners. The experiences of non-binary parents and their birth children are however lacking from the body of literature.

The notion of ‘passing’ can be central to some trans people’s experiences of social life and relationships, often after a binary transition from male-female or vice versa (Bernstein Sycamore, 2008). Autobiographical narratives of some trans people indicate an ardent desire to ‘pass’ in their gender and that the path to achieve this can involve medical treatment for gender reassignment and a rigid adherence to binary structures (e.g., Finney Boylan, 2003; 2013). However, others (e.g., Bernstein Sycamore, 2006; 2008; Spade, 2006) argue for resistance against gender conformity and the institutional categorisations that create what they deem to be unnecessary hierarchies within minority groups, that serve to further isolate individuals. These examples highlight the tensions that can exist within trans-headed families; that is, the pressure or desire for assimilation versus gender non-conformity. This binary opposition (of the desire for assimilation versus gender non-conformity can create divisions within trans communities (Halberstam, 1998).

**Stigmatising trans parents**

Being trans is an attribute that can stigmatise an individual within society, resulting in trans people experiencing multiple disadvantages within social life (LGBT Foundation, 2017; Stonewall, 2018). Although accurate statistical figures are lacking (arguably due to a reluctance to report), research suggests that trans people experience higher levels of discrimination than both cisgender heterosexual and homosexual populations (Marzullo et al., 2009). The State of the Nation Report (Social Mobility Commission, 2015) (which assesses the progress that Britain has made regarding reducing child poverty and improving social mobility) highlighted that children in care wished to have ‘normal’ and ‘ordinary’ lives with a sense of belonging. Here, findings detailing negative reactions from the public towards trans people (e.g., LGBT Foundation, 2017; Stonewall, 2018) could be used to argue that a child could be disadvantaged by being raised by trans parents.

As such, it is necessary to attend to the argument that living with a trans parent can have detrimental impacts on a child due to the prejudice directed at the parents or whole family. Indeed, there is evidence to suggest that exposure to prejudice can cause acute distress that can lead to poor mental health, increased substance misuse, social and emotional problems and offending behaviour (Mays and Cochran, 2001; Meyer, 2003a, b). However, there is also evidence to suggest that parents can ameliorate these effects, as positive outcomes for children have still been found where significant discrimination prevails (Foster, 2005; Millbank, 2003; Patterson, 2000). These findings support a minority stress model, whereby if a person’s minority identity is a positive, important and integrated part of them, the potential stress in relation to it is reduced (Meyer, 2003a, b). Veldorale-Griffin and Darling’s (2014) study of 73 trans birth parents at various stages during transition found that boundary ambiguity and stigma presented the biggest challenges for families. However, they also found that a strong sense of identity coherence may act as a protective factor against the negative impact of stigma.

Research indeed demonstrates that there has been a tendency for negative perspectives to be taken in relation to children’s psychological adjustment (Downing, 2013; Lev, 2010) and family conflict (Freedman, Tasker, and Di Ceglie, 2002; Haines, Ajayi, and Boyd, 2014). The unpacking of negative views is important to trans adoption and fostering as misappropriated information could be cited as justification to avoid placement with trans parents. Indeed, negative impact findings may be due to children feeling caught in the middle of parental conflict that hinges on issues related to ‘coming out’ (Veldorale-Griffin, 2014). Thus, challenges posed to children may be limited to those families in which gender is not discussed openly.

**The impact of cisgenderism on families**

Recent research has found that cisgenderist views held by professionals and other parents impacts upon trans parents (Riggs, Power and Von Doussa, 2016; Bower-Brown and Zadeh, 2021). Indeed, cisgenderism and intersectional experiences of racism and disablism can dissuade trans parents (including adopters) from accessing parenting spaces such as support groups (Bower-Brown and Zadeh, 2021). Hafford-Lechfield et al.’s (2021) qualitative study exploring stakeholder perspectives on children and family social work supporting gender diverse parents found evidence that cisgenderism operates within the profession. It was suggested that professionals should tailor their ways of working to meet the specific needs of each individual and family they assess and support. They further assert that an affirmative, human rights-based approach valuing the diversity of family life is likely to be best achieved where professionals take on an active role in educating themselves on relevant matters.

Though it must be acknowledged that the research base is limited, the small collection of extant studies shows that trans people have poor experiences of encounters with children’s social care. Limitations of the current research base include that no study has directly accessed the detailed, subjective views of trans and non-binary people in relation to adoption and fostering in England and Wales. While some qualitative data was obtained by Goldberg et al. (2020), this was in relation to a US population thus application to the UK context to inform practice is limited. Additionally, the qualitative element included was secondary to a primary quantitative methodology, thus in-depth examination of people’s perspectives was limited.

Gender variance as a discrete topic has not been a mandatory part if any pre- or post-qualifying education and training for social workers, rather has been overlooked or subsumed within a diffuse discussion of anti-discriminatory practice (Hudson-Sharp, 2018). However, educational professionals interviewed all agreed that current provisions regarding education on gender variance are insufficient. Hudson-Sharp found pockets of social work expertise where social workers had undergone self-directed study, although found overall it was seen as ‘low priority due to low incidence’ (p.5). There were reports of staff behaving in a prejudicial manner, making uninformed judgements about the acceptance of gender variance and failing to recognise the impact an unsupportive environment can have. Local authority staff spoke of there being phases of interest in different minoritized groups that will demand attention, but these shift with the political environment e.g., radicalisation may be a current focus.

Cisgenderist views are specifically relevant to the present study, as these can position trans identities as less valid with attempts to coerce trans people into cisgender roles (Rogers, 2017a, 2017b) as to be accepted as a ‘proper’ person and parent, one must be male or female (Prosser, 1998). Power relations can affect how people feel as they must ‘perform’ gender roles (Butler, 1990; Hicks, 2011) and, inevitably, there are power imbalances in the relationship between an adopter or carer and a social worker. Hicks (2013) argues that individual workers having anti-oppressive views in relation to gender is insufficient, as the power of gender conformity and normativity is embedded in the institutional discourses that dominates practice, resulting in social workers being accountable and directed by a moral order that acts to uphold this dominant discourse.

Despite rapid shifts in social dynamics and a recent explosion of scholarship on trans identity development, the research base has previously been theoretically isolated from the wider study of trans identity (Bradford and Syed (2019). Based on prior findings from interviews with genderqueer individuals (Bradford et al., 2018) their 2019 US focus group study aimed to discern the master and alternative narratives that guide trans identity development. Bradford and Syed (2019) argue that transnormativity is best explicated as a hegemonic alternative narrative seeking to resist a master narrative of cisnormativity (the idea that cisgender identities are normal). They found that trans people both resist and concede to transnormativity and that border wars can form within the trans community due to these opposing and contradictory processes.

**2.4 Opening the gates for LGBTQ+ people to adopt and foster**

**Developing LGBTQ+-inclusive social work practice**

In considering social work practice with LGBTQ+ people in the US, Mallon (2018) highlights a core difficulty that many students had few professional or personal encounters with LGBTQ+ people. He questioned how social work graduates could be expected to effectively practice with LGBTQ+ people when they had little understanding of the needs of this population. Indeed, he argued that most people have little accurate knowledge of the needs of LGBTQ+ communities. Although he highlighted that important developments have been made in US social work teaching on LGBTQ+ issues over the past two decades, he acknowledges that there is still not enough awareness. This general barrier of lack of LGBTQ+ awareness in social workers can also be applied to adoption and fostering social workers.

A similar trajectory of promising but slow-paced progress has been made in the UK (Hicks, 2013; Hicks and McDermott, 2018; Hudson-Sharp, 2018). Hicks and McDermott (2018) make use of queer theory (a branch of study that centres on a questioning of gender- and sexuality-based binaries (Prosser, 1994)) to argue that much of the early research into gay and lesbian-headed families was produced to reassure the social work audiences that lesbian and gay families were just like heterosexual families. It can as such be argued that the pace of progress in both research and practice was stinted because of the existence of discriminatory anti-gay perspectives; the task was firstly a defensive one to prove absence of harm (Stacey and Biblarz, 2001; Hicks and McDermott, 2018).

**Gatekeeping in adoption and fostering**

Since the 1950s, social care agencies for children and families have acted as ‘gatekeepers’, deciding whose family constitution is socially acceptable and who is deemed a suitable parent/carer (Kirton, 2013). Decisions regarding who is able to adopt and foster are directed by social work teams, as such, they are guided by social work gatekeepers’ definitions of what constitutes a good family (Hall, 2010; Hicks, 2000). Foucault (1969) would argue that such definitions of good family have primarily been framed from the positionality of those in powerful standings in society, such that these definitions normalise their own family structures and practices. These are then transmitted via social norms that tell us who is acceptable and who is deviant.

Over twenty years ago, Hicks (1998) mapped the discrimination openly voiced about lesbian, gay and single carers. Opinions of social workers and the public were that lesbian and gay families were outside of the norm, and as such it was unfair to place an adopted child who has already endured stress and a feeling of difference, into an *unusual* family. The picture in relation to sexuality began to change in 2005, when the law was changed to allow gay couples to adopt together (DfE, 2016). Throughout the following year, there were still relatively fewer gay men applying to adopt or foster (Hicks, 2006). Hicks (2006) argued that this was due to processes in which gay men who were maternal were positioned as *‘perverts and gender deviants’* because their aims and presentation did not fit with traditionally expected hetero-norms (Hicks, 2006, p.95). Hicks (2006, p.95) however, also narrated the wave of cultural change felt at the time in relation to gay men, whereby ‘*stories of impossibility…. [were] being replaced by narratives of opportunity and choice’*. This statement has relevance today in relation to the wave of cultural change and emerging research into trans peoples’ adoption and fostering experience (Hicks and McDermott, 2018).

Discrimination within adoption and fostering agencies was studied comprehensively in the context of its impact on lesbian and gay people during the 2000s (e.g., Brooks and Goldberg, 2001; Shelley-Sireci and Ciano-Boyce, 2002; Ross et. al, 2008). Although lesbian and gay people are increasingly being welcomed into the mainstream of carers (Cosis-Brown and Cocker, 2008), the conditions of acceptance depend on one’s ‘goodness of fit’ to an existing heterosexist and gender-normative model (Hicks, 2008). This theory is supported by a social-constructionist analysis of an US online forum (to support the matching of parents to children), which found people presented themselves to fit prototypes that were culturally dictated to be superior (Wahl, McBride and Shrodt, 2005). Desired characteristics thought to make one eligible to be an adoptive parent were being middle class, owning a home and pet, and living in a suburban neighbourhood. Fewer lesbian, gay and single carers were found but they strove to paint the same picture, to appear ‘normal’.

Such hetero- and homonormative push forces act quietly and subtly to differentiate and disadvantage those who do not fit established norms, expressly, trans people (Stryker, 2008; Bernstein Sycamore, 2006; 2008). Hetero- and gender-normative views fail to acknowledge that sexuality and gender can be changing and context-dependent (Schilt and Westbrook, 2009) and try to force LGBTQ+ carer assessments to fit heteronormative templates (Hicks, 2008; Hall, 2010; Mallon, 2011). Along a similar vein, cisgenderist views see trans identities as less valid and try to force trans people into cisgender roles (Rogers, 2017a, 2017b).

Over the past two decades there has been a surge in research into the impact that normative frameworks of sexuality have had in relation to adoption and fostering by lesbian and gay-headed families (for example Mallon and Betts, 2005, Hicks, 2000, Hall, 2010). This has indeed led to improvements to practice with less stringent gatekeeping, however, in 2012 adopters were still reporting that barriers preventing them from adopting included individual characteristics of difference such as being LGBTQ+ or single (Ofﬁce for Standards in Education, 2012). By distancing itself from commercial and emotional processes, modern adoption has been steered towards becoming a social engineering process that has been referred to as ‘kinship by design’ (Herman, 2008; Kirton, 2013). Where adoption and fostering practice only achieves tokenistic equality and diversity that is not fully embedded throughout a service, people who identify outside of normative frameworks can be disadvantaged (Hicks, 2013).

Reflecting this disadvantage, there is an emerging body of both quantitative and qualitative research demonstrating that trans people experience discrimination by public and private health and social care services (e.g., housing, hospitals) (LGBT Foundation, 2017; Bachman and Gooch, 2018; Matsuno and Budge, 2017). Indeed, adoption and fostering agencies have tended to espouse heteronormative and gender normative views in their gatekeeping practices (Kirton, 2013). Hicks and McDermott (2018) demonstrate that discrimination within adoption and fostering services can be masked, where social workers state vague or alternative reasons for not selecting LGBTQ+ families. They may for example stipulate that a two-parent family with a strong male/female role model is required. Social workers resort to vague or seemingly arbitrarily gender matching requests presumably due to fear of being perceived as discriminatory. Such covert discrimination can be more pervasive (Ely, 1995), further, subtle processes of regulation based on normative gender and sexuality can be more difficult to identify and address (Hicks, 2000).

**Bias and neutrality in adoption and fostering social work**

An issue of negative or neutral bias in relation to LGBTQ+ parents pervades contemporary adoption and fostering practice (Hicks, 2013). Recent research shows that these biases lack evidential grounding (Golombok et al., 2014). Golombok et al (2014) conducted an in-depth exploration of the experiences of 130 families and found that LGBTQ+ parents do not disadvantage children, and further, that gay-headed families may offer adoptive children some advantage. Gay fathers had significantly fewer depressive symptoms than lesbian mothers and heterosexual couples and engaged in more interaction with their children. Most of the heterosexual couples in the study had experienced fertility problems, supporting prior research, showing heterosexual couples with fertility issues are the most likely demographic to proceed with an adoption application following initial inquiry (Wallis, 2006). Lesbian and gay people were however more likely to come to adoption as a first choice (Golombok et al., 2014). This was particularly true of gay men, who had believed being gay was incompatible with parenthood. A similar belief has been expressed by some prospective trans parents (Von Doussa, Power and Riggs, 2015).

A queer theory perspective can be taken to highlight that owing to a majority of LGBTQ+ research being based on middle class, white, urban samples, there is a risk of simply reproducing normativity (Hines, 2007b; Hicks and McDermott, 2018). Hicks and McDermott (2018) argue that LGBTQ+ families should neither be assumed to be assimilative nor transgressive. Taking an overly simplistic view of LGBTQ+ people as being different or not different to cisgender heterosexual people negates the complexity of LGBTQ+ lives. Indeed, Short et al. (2007, p.5) highlight that the major difference between LGBTQ+ and non-LGBTQ+ headed families is that LGBTQ+ people live in a *‘legal, public policy, social, and discursive context in which discrimination and prejudice on the basis of the parents’ gender or sexuality is a feature of everyday life’*.

Demonstrably, heterosexist discourse has had a marked impact on adoption and fostering research, policy and practice (Hicks and McDermott, 2018). Short et al.’s (2007) review of the literature found that there tended to be a neutrality bias in conclusions drawn within gay and lesbian adoption and fostering research. When the evidence was scrutinised, they found a growing body of research suggesting that lesbian and gay families are not just equal to heterosexual families; they may offer some advantages (American Psychological Society’s (APA), 2004). For example, patterns of equality were found between lesbian and gay couples that increased parental wellbeing and appeared to in turn positively impact upon children’s emotional adjustment (Millbank, 2003; Johnson and O’Connor, 2002). In relation to direct parent-child interactions, Johnson and O’Connor’s (2002) study found that lesbian and gay parents tended to be more responsive to their children, and that the children appeared to have more secure attachments. Indeed, Short et al. (2007) suggested that it is not the structure of families (e.g., gender, sexuality or co-habitation status) that determines good outcomes for children, rather, it is the family processes such as the quality of interactions and relationships, that positively impacted on children’s wellbeing.

**Normativity and power in adoption and fostering social work**

It important to note that heteronormativity (the positioning of heterosexual identities as the norm and all other sexual identities as deviant) has been extensively researched in relation to adoption and fostering over the past 20 years (Hicks, 2000, 2011), however gender normativity and cisgenderism have only come into focus in more recent literature (Brown and Rogers, 2020; Bower and Zadeh, 2020; Tasker and Gato, 2020; Brown, 2021).

Numerous studies have found that there is a gap between the promotion of equality directed in legalisation and policy, and that enacted in assessment (Brodinsky, Patterson and Vaziri, 2002; Cosis-Brown and Cocker, 2008; Cocker and Cosis-Brown, 2010; Hicks 1998; 2008). This is because embedded cultural views influence the micro-context of assessment. Extreme forms of discrimination represented in research are rare but of great concern. For example, in Hick’s (1998) study, one professional believed a lesbian household would be the *safest* kind, insinuating that a single- or two-man household would be least safe. Such instances where social workers believe that children placed with men are more likely to be abused indicate an equality issue that contravenes social work codes of practice (Social Work England, 2020).

Social workers should treat everyone fairly, remove barriers to fair treatment and value a diversity of experiences (International Federation of Social Workers (IFSW), 2014; Social Work England, 2020). Normative views however appear to have seeped into every aspect of the assessment process; with panels giving greater interrogation to those whose views and lifestyles do not fit within the accepted paradigm (Hicks, 2008). This presents a direct contradiction to the anti-discriminatory and anti-oppressive values and codes of practice set out by social work’s professional regulator (Social Work England, 2020).

**Social work attitudes**

Attitudes to LGBTQ+ people remain an issue within contemporary social work practice. Kemper and Reynaga (2015) surveyed adoption workers’ attitudes to adoption by LGBTQ+ people and found more agreement with statements that children of trans adopters will experience more ridicule than those in lesbian or gay families; although there are no empirical studies that support this view. They were also more likely to agree that trans parents should undergo psychotherapy and that homosexual people are more suitable to adopt than trans people. These attitudes are consistent with cisgenderist assumptions that trans identities are less valid (Ansara and Hegerty, 2014). However, there are limitations in terms of generalisability of US findings to a UK context. Further, there is a notable divergence in the Kemper and Reyanga’s (2015) findings; within the qualitative commentaries detailing respondents’ overall attitudes towards LGBTQ+ adoption, many purported that love, stability, safety and ability were more important than a person’s identity.

Research exploring potential reasons for negative views in relation to LGBTQ+ adoption suggests that there are generational differences where social workers over 45 years may be less supportive of non-traditional families (Hall, 2010); this finding was, however, unsupported in other research (Kemper and Reynaga, 2015). Minority status in relation to sexuality is similarly relevant trans adoption and fostering, as self-report from a large-scale LGBTQ+ survey (2017) shows 27% of trans people are bisexual, 24% queer, 15% pansexual, 13% lesbian, 10% gay and only 20% straight. Research has found a general lack of awareness among social work educators about LGB issues (Fairtlough et al., 2013) and homophobic attitudes in student social workers (Camilleri and Ryan, 2006; Dugmore and Cocker, 2008).

Some studies found a correlation between lower education levels and homophobic attitudes (Camilleri and Ryan, 2006; Hall, 2010; Dugmore and Cocker, 2008) but others found no attitudinal differences based on demographic factors (Ryan, 2000; Kemper and Reynaga, 2015). Hicks (1998) discussed beliefs held by some social workers that homosexuality could be transmitted through familial relationships. These beliefs could lead to an avoidance of placing children in homosexual families for fear that gay parenting could make a child gay, an assumed negative characteristic.

Dugmore and Cocker’s (2008) study offers optimism for the efficacy of a practical, problem-solving approach to discriminatory views with the finding that professionals who attended just one eight-hour training focusing on LGBTQ+Q issues were likely to then report improved beliefs. However, Tyler and Slater (2018) would argue that such a simplistic approach is unlikely to result in change to internalised beliefs *(see Chapter 3 for further discussion related to changing discriminatory views).* Indeed, the root of discrimination in adoption and fostering social work practice is likely to be structural, as a result of an organisation’s norms and values (Hicks, 2000). Moreover, the poststructuralist perspective that this thesis adopts could be used to unsettle wider conceptualisations of ‘good’ standards of childcare. British society takes for granted the idea that children should have their needs met and live free from abuse, requirements that are enshrined within law (Children Act 1989). However, over and above this baseline exists a complex, multiplicity of subjective views on what constitutes ‘a good family’ (Sen, 2018). While it is commonly acknowledged that social workers aim to select the best possible substitute family for children, the reasons for their beliefs regarding what constitutes this ideal family remain under analysed.

**2.5 LGBTQ+ applicants in the adoption and fostering processes**

**Assessment**

Once a person decides to foster or adopt, they are required to undergo a period of intensive assessment. This is a comprehensive and in-depth process designed to determine their suitability as a parent/carer, as well as aid the process of matching a child to them (*see below*). Although the adoption suitability assessment is necessary in UK law, there is little empirical evidence about its efficacy (Palacios et al., 2018). There does appear to be some homogeneity of content examined within adoption and fostering home study assessments between agencies, states/counties and between western countries (Beasley, 2019). Preparation training is required for foster and adoptive applicants (Chapman, 2019; Dibben, 2020). Common assessment elements included autobiographical information from the applicant, interviews with applicants and their family via home visits, health and criminal record background checks, financial statements and provision of family and friends’ references These common aspects of the adoption and fostering processes were similarly required of heterosexual cis applicants, as well as those who are LGBTQ+.

Vast differences were however found in relation to the timing and intensity of the home study process (Geen, Malm, and Katz, 2004). Within the literature, this difference in process has tended to be presented as a negative; as if uniformity and structure is the key to good assessment and to reducing bias (Crea, Barth and Chintapalli, 2007). However, a postmodern view on assessment could be taken that rejects fixed notions of knowledge, values subjectivity and accepts complexity and multiplicity (Atkinson, 2002). Such a perspective may be useful to adoption and fostering assessments as it could allow more flexibility and responsiveness to individual family circumstances. Critics may see postmodernists as refusing to do anything but play because they resist certainty and resolution (Soper, 1991), however, when attempting to unpack a rigid set of boundaries such as enshrined normative views, it could be argued that it is necessary to unsettle the assumptions of and boundaries set by traditional binaries of morality and philosophy (Atkinson, 2002).

The research base on adoption and fostering assessments suggests that they are conducted in-line with hetero- and gender- normative ideals of relationships and gender roles; that men and women are biologically destined to take on different roles that co-exist in heterosexual relationships (Hicks 1998; 2008; Hicks and McDermott, 2018; Hall, 2010; Mallon, 2000; 2011; Mallon and Betts, 2005). A dominating hetero- and gender-normative worldview templates the ideal adoptive or foster home as consisting of a heterosexual couple, making subordinate those parents and carers who are LGBTQ+ (Hicks 1998; 2008: Hicks and McDermott, 2018).

Brown (1991) argued that five additional elements should be included in a lesbian or gay carer assessment; experience of ‘coming out’, confidence in their sexuality, the impact of homophobia and heterosexism on their lives, how they deal with homophobia in their relationships and willingness to engage in relevant support networks outside of lesbian and gay communities. Brown and Cocker (2008) however offered further commentary that inclusion of lesbian and gay carers at the time was tentative and contradictory, as visibility increased while acceptance lagged. This process of coming *‘out of the closet and into the mainstream’* (Brown and Cocker, 2008, p.19) can be likened to the position of trans people in today’s adoption and fostering context. There may remain a similar contradiction between explicitly stated inclusion policies and the degree of depth to which these are embedded within organisations.

There has been a ‘desexualising’ and ‘depoliticizing’ of lesbian and gay people within adoption and fostering assessments, whereby they are encouraged to moderate their parenting views and the burden is upon them to prove what they offer is a sufficient substitute for a heterosexual adopter or foster carer (Hicks, 1998; 2000). Heteronormative practices are evident here, as applicants are being encouraged to align with the expected normative characteristics associated with heterosexual couples. There is a failure to acknowledge that gender and sexuality can be fluid and context dependent (Schilt and Westbrook, 2009) with LGBTQ+ prospective adopters/carers expected to fit heteronormative templates (Hicks 1998; 2000; Hall, 2010; Mallon, 2000; 2011). Further, homonormativity can be seen as lesbian and gay applicants conform to expected gender stereotypes such as a household where one parent takes a more masculine role and one a more feminine role, in essence acting out a heterosexual ideal (Hick, 2000). Lesbian and gay carers may also feel the need to stress specific normatively desirable family features such as having a house with a garden (Hicks and McDermott, 2018).

Within the confines of legally mandated frameworks, there have been examples of lesbian and gay adopters enacting resistance to be able to adopt. Goldberg, Downing and Sauck (2007) studied the experiences of lesbian women living in US states that prevented homosexual couples adopting. They found that this necessitated a covering up of relationship status and presentation of the adoption as officially being done by a single person. The women largely perceived the social inequalities they were experiencing to be as a result of legal and political barriers outside of the control of their local agencies, and in fact cited several local practices that supported them. One example was conducting one home study assessing the family as a couple and another as a single which would be the one presented in the more public domain for a match. It has been argued that a fairer system would lead assessors to enquire about characteristics such as gender identity, sexuality and relationship status without overemphasising them (Mallon and Betts, 2005). Further, it is advised that work is done to prevent approval panel decisions being steered by an over-focus on certain characteristics, such as an applicant being LGBTQ+ (Ryan, 2000).

Though the assessment process is purported to be social work led (Kirton, 2013), it can be argued that stronger influences are exerted at levels wider than the personal; structural and cultural pushes direct a social worker’s decisions (Thompson, 2016). At a structural level, social workers are inducted into managerialist ways of thinking, which allows for dissenting voices to be silenced within organisations (Rogowski, 2011). It may be that individual social workers aim to incorporate trans-inclusive practice into their adoption and fostering assessments. However, a subtler and more pervasive influence can be exerted by politics and culture; meaning social workers’ individual views are shaped by internalised cigenderist norms institutionalised in society, by a process of socialisation (Parsons, 1951; Harlow et al., 2013).

**Matching**

Matching in adoption and fostering is the process of profiling children and finding adopters/carers who can meet their needs and have expressed preference for their characteristics (Quinton, 2012; Zeilmans et al., 2016; Oftsed, 2020). Potential matches are identified based on a child’s age, gender, ethnicity, abuse history, contact needs and whether they are part of a sibling group (Linkmaker, no date). Mismatching is often implicated as a causal factor in disruptions of both adoption (Randall, 2013) and fostering placements (Oftsed, 2020).

However, there has been little research linking specific parts of the adoption and fostering matching processes to successful outcomes for children (DfE, 2014). Ineffective information sharing has been highlighted as social work directed factor hampering adoption and fostering matching processes (Quinton, 2012; Cousins, 2003; Sinclair, 2005; Thomas, 2013; Randall, 2013; OFSTED, 2020). However, another prominent issue is that to be able to make successful matches for children with a diverse range of needs (based on careful assessment of need, matching skills and personal traits) there must be an ample pool of carers from which to select (Thomas, 2013; Clarke, 2010, OFSTED, 2020).

As set out in the introductory chapter, adopter and foster carer gender diversity has not yet been attended to within matching policy or practice (DfE, 2014). The extant literature on adoption and fostering matching gives little specific consideration to LGBTQ+ people. Rather, it shows the variation of practice within local authorities (Schofield et al, 2011) and difference whereby adoption and long-term fostering matching processes tend to be detailed and formalised, whereas shorter-term fostering has historically been given less attention (Sinclair, 2005; Coram, 2016). Careful matching in fostering was however found to be essential to the stability of placements, and to children feeling loved, secure and enjoying their lives (Oftsed, 2020). Indeed, the more stable a child’s placement, the better their outcomes are likely to be (Rubin et al., 2007; Ott, 2017; Zeijlmans, et al., 2016). Children often felt their views were not included in matching processes, and stipulated that feeling valued, loved and accepted by a foster family was key to a good foster home (OFSTED, 2020). Although a child’s input into plans for their future has long been acknowledged as important (Henry, 2005; Jones, 1979; Kagan, 1980; McInturf, 1986), this can be overlooked as priority is given to the social worker’s view of what constitutes a good match (Coram, 2016; OFSTED, 2020).

Although research has not yet been conducted to specifically examine placements made between cis- and transgender children and parents in the UK, a small number of adoptive parents were included in Rahilly’s (2020) study across the US and Canada. It was found that where cis parents access appropriate support to enable them to understand the issues faced by trans youth, they can support trans-affirmative parenting. Research on the birth parents of trans children similarly shows that where conceptions of normative gender had already been decentred, parents were better equipped to raise their trans children (McNeilly, 2019). Comparisons could be made to policies on transracial matching, that perfect matching needs to be balanced with delay prevention and identifying the best parent to meet the child’s overall needs (Dance et. al, 2010; DfE, 2012; Children and Families Act (2014)). Where a parent does not match their child’s ethnicity, there has been no evidence of detriment to the child (Thoburn, Norford and Rashid., 2000; Quinton, 2012) where carers live in a diverse community and can support a child to find out about their heritage (Selwyn et al., 2010).

Goldberg et al. (2020) recommended that adoption professionals should recognise the opportunity for placements that trans people may offer; given their finding that trans people are more likely to consider ‘harder to place’ children. Indeed, in both UK and US studies LGBTQ+ parents feature more prominently in the adoption of children with special needs, prenatal substance use and trauma (McCarty et. al, 1999; Groze, 1991; Triseliotis et al, 1997; Lowe et al, 1999; Cousins, 2006). LGBTQ+ people may have a more active interest in older children, BAME children and those with additional needs (Willis, Ward and Fish, 2011; Raleigh, 2012; Goldberg et al., 2020). However, the ‘matching undesirables’ effect should also be considered, whereby ‘ideal’ families are chosen first for adoptive children and only when these families are exhausted, or the child is similarly deemed un-match-able, will a non-traditional family be considered a good option (Gailey, 2010, p.24).

The yet under-scrutinised role of unconscious bias in adoption and fostering matching warrants further attention, as a Spanish study demonstrates that the biases of social workers and psychologists can impact on adoption placement decisions (Poveda, Jociles and Rivas, 2013). Normative ideals can be embedded within matching processes, where social workers take heterosexual, cisgender couples to be the normative referent for a good family (Poveda, Jociles and Rivas, 2013; Hicks, 1998; Hicks and McDermott, 2018; Goldberg et al., 2020). As such, adoption and fostering social workers should receive training in the explicit and implicit ways in which LGBTQ+ carers can be exposed to marginalisation and stress through the adoption process (Goldberg et al., 2019).

As highlighted in *Chapter 1*, demand for foster and adoptive placements in the UK has persistently outweighed the supply of foster carers and adopters able to meet the needs of the children needing placements. While greater numbers of foster carers have been recruited, the looked after population too has grown (OFSTED, 2021). In adoption, there has been an issue of ‘generic’ adopter pools waiting a long period of time for links, as they cannot offer a home for ‘harder to place’ children, who comprise around 93% of the children listed (Coram, 2016). A particular associated with this problem however is the practice of ‘stretching’ parents’ initial preferences in order to identify families who can meet the characteristics of children who would otherwise not be adopted (Quinton, 2012). While this exercise meets placement need in the short-term, Quinton (2012) argues that it may produce longer-term issues for placement stability.

**Post placement**

The provision of adoption support services by agencies has been problematic in terms of availability and quality of mental health services particularly for families in crisis (Randall, 2013; Selwyn, Wijedasa and Meakings, 2014). Adopters’ unrealistic expectations of a child have been found to be associated with breakdowns (Randall, 2013; Reilly and Platz, 2003; Rosenthal, Groze and Curiel, 1990; Smith, 2014). However, a lack of information provision has been implicated in the formation of unrealistic expectations, thusly, this factor may be more attributable to the agency than adopter (Selwyn., Wijedasa and Meakings, 2014). Palacios et al. (2018) reviewed the body of evidence in relation to adoption breakdown and found that a child’s gender (girl/boy) and race did not have an association with adoption breakdowns, once other factors such as age at placement and behavioural difficulties had been controlled for.

Several studies have found that a robust support network of family, friend, community resources and other adoptive parents is linked to placement stability (Leung and Erich, 2002; Marinho, Barbosa-Ducharne and McRoy, 2012; McRoy, 1999; Randall, 2013; Rosenthal, Groze and Curiel, 1990, 1990). The requirement to have an established support network comparable to that of a cis applicant could be problematic for trans adoptive and fostering applicants, for despite patterns of increasing acceptance, trans communities still experience social exclusion (LGBT Foundation, 2017; Bachman and Gooch, 2018).

Several recent reviews have highlighted the need for further research into the social wellbeing needs of trans people and how social and health care services can reduce barriers that stop trans people accessing support they need (LGBT Foundation, 2017; Bachman and Gooch, 2018; Matsuno and Budge, 2017). Austin (2018) sets out that the needs of each child and family (including carers) will vary, however a framework of affirmative practice will be useful. Social workers will need to upskill, using new research findings produced to fill the gap in knowledge.

Indeed, the necessity for quality gender diversity training for all professionals involved in supporting trans people in social care has likewise been highlighted in recent reviews (LGBT Foundation, 2017; Bachman and Gooch, 2018; Hudson-Sharp, 2018). It was found that while there is some evidence of good training on transgender awareness, knowledge is inconsistent (Hudson-Sharp et al., 2018). Many social workers’ knowledge of gender identity and variance was not sufficient to provide an effective support service to trans people and their families. Matsuno and Budge (2017) urge professionals to challenge binary assumptions of gender and create affirmative, inclusive environments for non-binary people. Although their recommendations were primarily directed towards mental health professionals, they have relevance to adoption and fostering support workers.

**2.6 What trans people could bring to adoption and fostering**

**What trans people could offer children needing adoptive and foster homes**

Recent reviews of the needs and assets of the trans community by the LGBT Foundation (2017) and Stonewall (Bachman and Gouch, 2018) uncovered the immense strength and resilience of the trans community. Findings demonstrate the ways in which trans and non-binary people organise themselves to provide support to other members of the trans community online and in person, through groups and buddying systems, and via crowd-funding and activism.

Indications from trans people’s autobiographical accounts suggest that trans people could be especially well placed to empathise with adopted or fostered young people who feel misunderstood and who have lacked stability, support and respect from family members in their early years, as these are themes reported within trans people’s narratives (e.g., Bernstein Sycamore, 2006; Serano, 2016). Further, certain individual narrative accounts have exemplified a high level of commitment from trans parents to withstand the challenges that accompany processes of gender questioning and transition and develop the resilience needed to continue to offer support to one’s children (e.g., Finney Boylan, 2003).

As found in Goldberg et al.’s (2020) US study, prospective trans adopters and foster carers were more likely to indicate an openness to harder to place children early on in their considerations of adoption. This linkage could be used to infer that trans adoptive and foster placements have the potential for greater longevity. However, a counterpoint to this hypothesis is that a ‘matching of undesirables’ process could be operating (Gailey, 2010). It is possible that due to trans people’s beliefs that there are greater barriers to them becoming adoptive parents or foster carers (Goldberg et al., 2020; Tasker and Gato, 2020; Bower-Brown and Zadeh, 2021), they may feel the only option available to them is a harder to place child. Notwithstanding, if expectations set are realistic, the positive effects on placement stability may still ensue (Randall, 2013; Reilly and Platz, 2003; Rosenthal, Groze, and Curiel, 1990; Smith, 2014). Flexibility regarding a child’s needs and self-confidence in the adoptive parenting role were indeed found to be associated with intact placements (Marinho, Barbosa-Ducharne and McRoy, 2012).

In specific relation to the capacity of trans carers to provide homes for trans youth, it is argued that trans carers may have the advantage over many cis carers if they already have a gender subversive approach to parenting (McNeilly, 2019). This refers to a parenting style that has already disrupted and decentred cisnormative assumptions, instead adopting perspectives of gender as diverse and socially constructed. Indeed, cis parents who have already adopted a gender subversive approach may offer a similar secure, stable home for trans youth as they have already decentred and destabilised their gendered ideas and expectations (McNeilly, 2019; Rahilly, 2020).

**2.7 Trans people’s experiences of adoption and fostering**

**Parenting desires do not translate into applications**

While there are no official recorded figures, it is logical to suggest that the number of trans applicants is low compared with cis applicants (Brown and Rogers, 2020). The UK’s centralised first enquiry point, First4adoption (2021), acknowledges that although trans people are eligible to adopt and there are laws to protect them from discrimination, the numbers of trans adopters appears to be low. New Family Social (2013) report that there are a small number of trans people going through the process of assessment or who have successfully become adoptive parents or foster carers. Rates indicating 45-50% of trans people may consider adopting (Riggs, Power and Von Doussa, 2016; Nahata et al., 2017) do not seem to translate into applications (First4adoption, 2017, 2021).

**Examining the current research base and its gaps**

As outlined in the LGBTQ+ adoption and fostering section above, although there is a well-established research base focusing on lesbian and gay adopters and foster carers (Mallon, 2000; 2007, Mallon and Betts, 2005, Hicks, 2000, Hall, 2010; Cosis-Brown et al. 2015; Golombok et al. 2014), research on trans carers has been slow to follow (Brown and Rogers, 2020). For over fifteen years, calls have been made for sociological research to focus on transgender lives and experiences in order to build a knowledge base that will further academic understanding of trans lives and relationships (Hines, 2006a).

While there is a wealth of sociological literature examining the roles of men and women over the past century, there is comparatively little empirical research focusing on trans experiences within various areas of social life (Lindsay, 2016). There is a need for research to extricate the experiences of trans people from those of lesbian and gay people to explore their distinct needs and advance their rights (Bilblarz and Savci, 2010). Despite calls from prominent researchers in the field (e.g., Hines, 2006a, b; Mallon, 2011; Hicks, 2013), trans inclusion in adoption and fostering research has lacked depth and specificity (Brown and Rogers, 2020).

Five papers directly accessed the views of trans people, with three presenting qualitative data from interviews conducted within the UK (Tasker and Gato, 2020; Bower-Brown and Zadeh, 2020) and two presenting US findings from the same survey project ran by Clark University and the Human Rights Campaign, a large US LGBTQ+ organisation. (Goldberg et al., 2019, 2020). Four papers included data on the experience of trans people in relation to both fostering and adoption (Tasker and Gato, 2020; Goldberg et al., 2019, 2020) and one only included adoption (Bower-Brown and Zadeh, 2021). One study accessed the views of a range of professionals (e.g., social workers, psychologists) involved in supporting gender diverse parents in social work practice generally (Hafford-Lechfield et al.’s (2021). Within this study, only one case of a trans person applying to adopt was relayed by a social worker, however professionals offered views on how trans inclusivity could be improved within their respective fields, including both fostering and adoption.

**Lack of awareness and stigma in social work**

Following a systematic literature review highlighting the lack of research focus on trans parenting within social work (Hafford-Letchfield et al., 2019), Hafford-Letchfield et al. (2021) interviewed 25 stakeholders within social work organisations and conducted a thematic analysis of the results. They found evidence of the ability to recognise and label areas where stigma was acting upon everyday parenting challenges as well as a desire for positive change. However, numerous barriers existed at organisational levels within social work systems. These included lack of awareness of trans issues in social work staff (from practitioners to leaders and educators), lack of confidence in dealing with trans issues, an absence of adequate training in gender diversity and an absence of a coherent government framework for supporting trans inclusion. Hudson-Sharp's (2018) scoping review of child and family social workers’ knowledge also highlighted a patchy awareness of trans issues.

Reports of direct discrimination by US adoption agencies were given by three trans participants in Goldberg et al.’s (2019) study. This took the form of invasive questions about their genitals and transition, being questioned about whether they would make their children trans, and a difficult time being matched. This qualitative data was gleaned from open-ended questions from a largescale survey. Goldberg et al.’s (2020) study focused in on the findings related to 448 trans people in the US who were open to adoption or fostering, comparing them to a larger proportion of cisgender sexual minority men and women included within the wider study. Trans participants reported greater fear of discrimination based on gender identity and expression, finance and social support as compared to their cisgender counterparts. They were notably more open to placements with ‘harder to place children’, a term used to refer to children that have historically been overrepresented in the equivalent of the UK’s ‘looked after’ population. This included children over twelve years, those with mental health diagnoses and behavioural problems, BAME children, those with a physical disability and young people who were trans.

It was recommended that the next steps in future research should involve direct liaison with trans and non-binary communities to identify executable strategies for development work to promote the inclusion of trans parents within social work (Hafford-Letchfield et al., 2021). The research presented within this thesis answers this call, extending the small but growing knowledge base informing children and family social work practice. It addresses previous methodological issues by directly accessing the perspectives of trans and non-binary people, supporting credibility of the findings. While the research offers useful knowledge for wider child and family social work practice, gender studies and sociology disciplines as the thesis explores narratives of personal identity and family, it also focuses specifically and in detail on adoption and fostering perspectives in England and Wales. This supports transferability of the findings to the UK adoption and fostering context, filling a gap in the current social work knowledge base. In focusing on the workings of cisgenderism on adoption and fostering for trans and non-binary people, the study extends the well-established knowledge base on lesbian and gay adoption and fostering experiences in the UK.

Key ethical issues within existing studies are that adoption, fostering and sexuality may be considered sensitive topics, LGBTQ+ populations can feel over-studied and where a population a sample is drawn from is modest, confidentiality and anonymity can be at risk. The present study sought to minimise these issues by offering support, stressing voluntariness and prioritising anonymity (*see Chapter 4 for a more detailed discussion of these issues*). However, it is recognised that some of the ethical issues inherent with conducting sensitive research remain as the topic under study can be emotive and the population from which the sample can be drawn currently remains small.

**Intersectionality in adoption and fostering social work**

The research base accessing trans people’s direct experience has achieved representation of a range of different binary and non-binary trans identities (Tasker and Gato, 2020; Bower-Brown and Zadeh, 2021, Goldberg et al., 2019, 2020; Brown, 2021). The experiences of those at intersections between minoritised groups based on gender, ethnicity, class and (dis)ability are however especially difficult to identify due to negligible representation within the extant body of work on adoption and fostering social work (Rogers and Ahmed, 2017; Brown and Rogers, 2020). For instance, research indicates there are higher numbers of disabled people among the trans population when compared to the national average (Bachman and Gooch, 2018).

Disability has been examined within wider trans parenting research (Bower-Brown and Zadeh, 2021; Tasker and Gato, 2020). It was however not stipulated whether these participants were adoptive parents, carers or prospective applicants, or whether these were birth parents included in the studies. Trans participants tended to be educated to a high level although, (where stated), incomes were lower (Tasker and Gato, 2020; Hafford-Lechfield et al, 2021, Bower-Brown and Zadeh, 2021, Goldberg et al., 2019, 2020; Brown, 2021). However, there has been no research to date to exploring how being trans and disabled may impact on an application to foster or adopt.

A major limitation identified in the knowledge base, as well as within this study, is the lack of representation of people from Black, Asian and minority ethnic (BAME) backgrounds (Tasker and Gato, 2020; Hafford-Lechfield et al., 2021, Bower-Brown and Zadeh, 2021, Goldberg et al., 2019, 2020; Brown, 2021). The US-based studies (Goldberg et al., 2019, 2020) included some BAME-identified people, however it was noted that the samples were skewed in terms of the proportion of White survey respondents. The UK studies had majority White samples (Tasker and Gato, 2020; Hafford-Lechfield et al., 2021, Bower-Brown, 2021). Bower-Brown and Zadeh (2021) report that the sample was not wholly White, however do not go into further detail because of issues of potential identification of participants.

**2.8 Chapter summary**

The literature review has contextualised trans issues within the wider social care domain and illuminated some of the issues that may be influencing adoption and fostering social work for trans and non-binary people. The research presented within this thesis aims to add to an emerging body of literature examining trans identities and family life using psychological and sociological theories and research. It adds to the conversation on inclusive adoption and fostering practice by beginning to unearth and unpack some of the issues that are currently facing trans and non-binary carers. It makes a unique contribution to the research base on trans people’s experiences by focusing on the workings of cisgenderism within adoption and fostering social work in the UK.

*Chapter 3* will lay out the theoretical framework that underpins the analysis contained within the thesis.

**Chapter 3: Conceptual and Theoretical framework**

**3.1 Introduction**

This chapter sets out the concepts and theoretical perspectives that combine to form the theoretical framework used to analyse participant narratives. The study will analyse participants’ stories through a framework that centres the understanding of trans people’s experiences of gender and gender discrimination. As such, the chapter begins with an exposition of cisgenderism and related concepts of normativity which are used to make sense of people's experiences and perspectives.This conceptual framework enables a detailed understanding of how concepts of gender and normativity affect trans people’s experiences of identity, family, adoption and fostering. The theoretical framework is constituted by poststructural and sociological theory as well as a feminist critical paradigm. Foucault’s poststructural theories of power (1969, 1970, 1978, 1979) are utilised in conjunction with classic and contemporary sociological theories of stigma (Goffman, 1963; Paton, 2018; Link and Phelan, 2014; Tyler and Slater, 2018).

The ways in which we make sense of and respond to issues of gender diversity and discrimination on an individual and social level are important considerations in exploring modes of resistance and acquiescence. Therefore, psychological and sociological approaches that offer insight such as that of narrative therapeutic approaches, theories of intimacy and feminism will be interwoven throughout analysis. Structural competence will also be touched upon as a method by which recommendations of the research findings may be implemented within social work practice. This chapter draws together various theoretical approaches into a framework model that provides clarity with regards to the analytic strategy underpinning this study.

**3.2 Cisgenderism and theories of normativity**

**Trans identity and belonging**

Firstly, I attend to the general term ‘identity’ as its conceptualisation necessarily impacts on the understanding of gender identity. Since the point at which the study of identity was brought into the mainstream by Erikson in 1968, scholars have used the term ‘identity’ in multiple forms, with definitions lacking clarity and consistency (Fearon, 1999). Fearon (1999) used ordinary language analysis to explicate what is meant when a word is used. His analysis suggested that the term identity can be used in two ways; firstly, as a social categorisation that is defined by membership rules based on alleged attributes or expected behaviours. Secondly, identity is personally ascribed due to socially distinguishing, and largely stable, features that the person takes pride in. Many definitions of identity point to a person’s concept of who they are and how they relate to others (see for example: Deng, 1995; Jenkins 1996). Some describe identity as a stable and personal understanding of the self (Wendt 1992), while others regard it as an evolving and mutually constructed phenomena (Katzenstein, 1996).

When identity is considered by trans and non-binary people, rich, detailed narratives are offered, describing the multi-faceted and individual meanings of who we are and how we relate to others (Finney Boylan, 2003; Bornstein, 2012; Serano, 2016; Twist et al., 2020). Masculinity and femininity (attributes considered to be characteristic of men and women) are often considered to be core to both cis and trans people’s identities, arguably because of the proliferation of gendered structuring within society (Messerschmidt et al., 2018). Some trans identities however are characterised by a lack or fluidity of gendered traits, and encounter lack of understanding due to the deep enmeshment of gender categorisations within western culture (Hines, 2018). Gender not only directs social roles and expectations within society and relationships, but it can also influence the way emotion and personal identity are experienced (Hines, 2007a, b, 2018).

Rigid gender rules cannot account for forms of female masculinity, which describes a diversity of masculine-associated identifications and expressions among masculine women (Halberstam, 1998). Similarly, femininity in men is subjugated by societal classification that often places femme presentations in men or trans people at the bottom of the hierarchy of genders and sexualities (Serano, 2016). It is well acknowledged within sociological literature that feminine identities continue to be devalued by society (Connell, 1987). Indeed, such devaluation is maintained by the patriarchy, society and government systems that ensure men hold the majority of power and exclude women and other gender identities (Messerschmidt et al., 2018).

Accounts of trans identities, much alike cis identities, are by no means ‘one-size fits all’, however themes include disbelief and adjustment difficulties encountered in social and romantic relationships (Finney Boylan, 2003). Other accounts explore the confluences of gender and other aspects of identity such as religion (Bornstein, 2012), sexuality and relationships (Diamond, 2011) and culture (Twist et al., 2020). These accounts show that personal identity is a complex web of notions related to who a person feels that they are, as influenced by their relations with others (Deng, 1995; Jenkins 1996). One particularly problematic aspect of considering trans identities, however, is that notion of identity as being a stable understanding of the self (Wendt, 1992).

Although some trans and non-binary people find the ‘wrong body’ narrative that has emerged in relation to trans people unhelpful (Twist et al, 2020), for others it is indeed an accurate portrayal of the way they felt growing up. Finney Boylan (2003) describes her experience at ten years old as being *‘in the wrong body, living the wrong life’* (p.19). While some accounts of trans identities detail a salient sense of gendered self that must be revealed to the wider world (Finney Boylan, 2003), some point to a sense of self that allows for continual construction and reshaping, based on emerging personal and societal conceptualisations of gender (Diamond, 2011; Twist, 2020). Other authors challenge the notion that there is a need for self-identification, at least in the traditional sense (Bernstein Sycamore, 2008; Bornstein, 1994). The system of gender itself can be seen as oppressive where its rigid guidelines seek to limit the possibilities for individuals to experience and express their gender in a way that feels right to them. In both the latter schools of thought, gender identity can be seen an evolving and mutually constructed phenomena (Katzenstein, 1996).

Much of the literature ensconces themes of belonging for trans people. Although it may not be overtly attended to as a theme, the search for a sense of belonging appears to be interwoven throughout much of the narrative on trans identities (Finney Boylan, 2003; Diamond, 2011; Twist, 2020). Even queer writers specifically resisting assimilation into the mainstream are arguably seeking belonging in a different sense, to that of an identified subgroup of gender outlaws (Bernstein Sycamore, 2008; Bornstein and Bergman, 2010). Indeed, Baumeister and Leary (1995) argued that humans have an inherent need to belong, and as such have a basic need for a minimum number of positive relationships. This need has been linked to human survival, as humans living in groups or communities were more likely to survive attack, secure sufficient food supplies and effectively produce and rear offspring. Within contemporary society, although Baumeister and Leary (1995) set out that there are individual differences in the type and number of relationships each person has, belonging remains a primary human need. Connection with others meets emotional, social and cognitive needs, and exclusion can result in poor emotional wellbeing.

**Intersectionality and privilege**

Crenshaw (1991) set out the idea of intersectionality, arguing that there is little use in focusing solely on one identity category. Rather, we must also consider how one identity category is mutually shaped by others within a broader context of overlapping ideologies. For example, in 1991, Weston’s research into lesbian and gay kinship suggested that gay men often used categories such as ‘queen’ and ‘butch’ to describe their gendered identities along a continuum. While some lesbians made use of ‘butch’ and ‘femme’ role designations, some were staunchly against the terms, asserting that the enactment of such roles served to recreate inequalities extant in traditional heterosexual couples. Riggs and Treharne (2016) indeed point out that we must not assume uniformity of experience across categorical dimensions such as gender or sexuality. They highlight that multiple layers of minority stress can be seen to impact upon one individual. Conversely, privilege can also operate within minority groups.

Privilege is a term that was developed within the field of critical race theory and describes how individuals who are positioned as members of dominant social groups automatically accrue benefits based on such membership (McIntosh, 1989). Membership of a dominant social group such as being white or male is usually acquired at birth and necessarily comes at the expense of those who are not members (Riggs, 2010). Increasingly, the idea of privilege has been applied to those who do not fully conform to the norms of the dominant group. For example, cisgender white middle class gay men have been described as a group within society that can now bare considerable privilege (Riggs, 2010). Indeed, in applying contemporary conceptualisations of intersectional theory to the current study, it could be argued that being white, male, middle class or heterosexual could serve as protective factors for trans people.

Conversely, being black, female, working class or LGB could mean an even further diminishment of status and increased experience of minority stress (Riggs, 2010). However, it is also important to emphasise that the intersectional approach does not seek to rank oppressions, rather it hopes to recognise how ideologies can interact to differentially shape a person’s experiences (Crenshaw, 1991). Hill Collins (2019) cautions against the dangers of using one’s own category as a master category and accommodating other categories primarily by their addition to the master category. She lays bare an inherent difficulty in intersectional theory; the endeavour of pragmatically theorising and operationalising co-formed phenomena with the complexity that systems of power represent. Hill Collins highlights that although intersectional theory has proven useful to understand contemporary issues, it has not yet reached its potential as a critical social theory. Hill Collins urges practitioners to critically reflect on the assumptions, epistemologies and methodologies deployed by intersectional theory so that some consensus, however provisional, can be agreed upon with regard to the core components of intersectional theory and their relationality.

**Cisgenderism**

Cisgenderism, underpinned by gender normativity, is a concept used within this thesis to make sense of the ways in which binary genders are positioned as ‘normal’ categories and trans identities are then positioned as divergent (Stryker and Aizura, 2013). Within a normative conception of gender, cisgender identities are positioned as natural and indisputable, with gender identity viewed as being absolute and fixed at birth. Due to the influence of gender normativity in society, cisgender identities are viewed as the norm and acceptable and trans identities are seen as unnatural, deviant and other (Enke, 2012). In this sense, gender is being socially produced through cultural processes that enable gender identities to develop and to be performed (Butler, 1990; 2004). This’ facilitates ‘*one’s sense of self as a gendered person’* (Enke, 2012, p.18).

However, the potent influences of gender- and hetero-normativity can mean that the performativity of gender and sexuality in public contexts are different to that of in personal or private ones (Rogers and Ahmed, 2017). Processes of normative social categorisation can result in individuals portraying identities that are considered by a majority to be more typical, in order to either feel a sense of belonging or to give the agent political power. Where trans people believe that their identities are regarded by other people or organisations as less valid than cisgender identities, cisgenderism is exemplified (Ansara and Hegarty, 2011; 2014).

Cisgenderism operates at different levels including from individual (e.g., misgendering a foster carer) to the systemic (e.g., a failure to represent trans adopters in recruitment material) and can be intentional or unintentional (Riggs, Ansara and Treharne, 2015). Cisgenderism can be present in personal views, but it is also considered to have systemic traits and can therefore be framed as a prejudicial ideology akin to sexism and racism (Ansara and Hegarty, 2011, 2014; Rogers, 2017a, b). Indeed, Lennon and Mistler (2014, p.63) offer an encapsulating definition of cisgenderism as involving ‘*the cultural and systemic ideology that denies, denigrates, or pathologises self-identified gender identities that do not align with assigned gender at birth, as well as resulting behaviour, expression, and community’*.

Therefore, as an orienting framework, cisgenderism broadens analysis of the discrimination experienced by adopters and foster carers, from a focus at the micro level of interpersonal interactions to include macro level institutional structures (Riggs, Ansara and Treharne, 2015). The lack of consideration given to trans people by adoption and fostering agencies exemplifies this institutional cisgenderism (see *Chapter 2* for an examination of the literature on trans adoption and fostering). The presumption is that carers will be cis, therefore no provision is made for a diversity of gender identities. Macro level structures of social services thus both produce and maintain the effects of marginalisation of trans people within adoption and fostering services, as well as society at large.

Cisgenderism can be seen as an example of a hegemonic discourse (where discourse describes the ways in which we talk about ideas within society – *see section below*) as it holds sway as a dominant way of seeing the world within a specific contemporary social context (Pearce, 2018). The hegemonic discourse still operating within western society today largely holds that there are only two genders; man/masculine and woman/feminine, and that these are unchangeable, inflexible and incontrovertible categories (Stryker and Aizura, 2013). This dominant cisgenderist discourse seeks to fit everyone into one of the categories and does not make provision for gender variance (Pearce, 2018). To do so, cisgenderist discourse employs its ideology with power and authority, and as such is able to shape and direct how the world views and responds to gender.

**Misgendering and pathologizing**

In considering how cisgenderism may be experienced at different levels in the context of adoption and fostering, two forms may be reported: misgendering and pathologizing (Shelton, 2015). At the micro interpersonal level, misgendering exists where gendered language is used inaccurately, for example not using correct pronouns or names, or describing a person who identifies as a woman as biologically male. Pathologizing can also occur at micro levels, where trans people are treated as disordered and labelled (Ansara and Hegarty, 2014; Riggs, Ansara and Treharne, 2015). However, pathologizing more often relates to a macro level, for example where adoption and fostering organisations view trans people as less suitable parents/carers. Where organisations are not inclusive of trans identities and as such dissuade trans people from coming forward to apply to adopt or foster.

Taking a broader sociological examination of the impact of cisgenderism, it can be argued that it shapes the social context of a country (Bauer et al., 2009). Cisgenderism exerts influence from the individual practices in human interactions to the establishment of organisations, as well as the procedures adopted by institutions. The media politicises bodies in a way that exemplifies cisgenderism (Hines, 2020). Trans bodies, particularly those of colour, are objectified and sexualised. Whether this creates fear or fascination, trans bodies and identities as resultingly positioned as ‘other’.

**White tears as a gendered political strategy**

Phipps (2020) analyses the mechanisms by which this ‘othering’ is achieved, arguing that the tears of white, middle class women can be used to support colonialist structures as they elicit rage and ensuing protective action on the part of white, middle class men. Marginalised groups including black and trans people can be further disadvantaged when certain forms of reactionary feminism engage in a strategic political exploitation of this ‘white tears, white rage’ circuit. White tears are used to position white women as damsels in distress, attacked by ‘the other’ (e.g., black and trans people). This provokes a defensive reaction by white men and achieves subjugation of the presumed attackers. However, as Hill Collins (1986) sets out; these tears may not hold the vicarious power that they first seem to possess, as white tears do not have the capacity to hold white men accountable. Rather, the power elucidated via white tears is presided over by white men, who use them to mobilise political strategies that maintain the primacy of their social control.

Whether the locus of control indeed lies with white men or is devolved in part to white women, Phipps (2021) argues that white tears are used as a political mechanism to maintain the dominance of discourses of white supremacy, as well as the supremacy of binary conceptualisations of gender. Further, the contemporary use of white tears within political discourse to marginalise black and trans identities can be likened to historical forms of slavery and criminalisation. Where cisgenderist thought constructs trans women as being predators and positions them as being essentially male, they can be used as scapegoats for cis male crime perpetrated against women. Links between cisgenderism and racism as prejudicial ideologies serving to maintain layers of oppression within society as thus exemplified (Ansara and Hegarty, 2014). These ideologies achieve the disproportionate exclusion of black and trans people within society; leaving marginalised identities to survive outside of mainstream communities, families and the law (Phipps, 2021).

**A politics of language choice**

The ways in which language is selected for use in relation to trans people cannot be extricated from a long history of pathologizing of trans identities (Stryker and Aizura, 2013). As such, the choice of language used to describe trans identities remains steeped in political tension (Twist et al., 2020). For example, Shelton (2015) argues for the avoidance of some recent terminology such as ‘gender non-conforming’ due to the implication of individual pathology, and diminishment of the role of societal intolerance regarding expressions of gender identity. Instead, Shelton (2015) makes a case for the use of alternative terminology such as ‘gender expansive’; a term less laden with potential for individual pathologizing and the absolving of societal responsibility for addressing cisgenderist ideologies.

Language use within children and families social work is indeed linked to power; language has the ability to exclude, dominate and stigmatise (Oritz, 2019). Language similarly has the capacity to include and empower, particularly when it is selected by those to whom it represents. Thus, Oritz (2019) argues that children in care have the right to choose how they are spoken about by professionals. Twist et al. (2020) assert that trans and non-binary people should be afforded the same right. This assertion is further supported by social work principles that promote service user empowerment and involvement as part of a wider agenda to improve anti-discriminatory and anti-oppressive practice (Social Work England, 2020).

The issue of language becoming enmeshed with cisgenderist ideology is further expounded by Ansara and Hegarty (2014), who analyse the gendered classification of groups. They set out that a binary categorisation of people as ‘trans/transgender’ and ‘cis/cisgender’ can be unhelpful, as the splitting of those two groups bares the inherent implication that trans and cis people are distinctly different beings. Indeed, Beauchamp (2019) elects not to use the term ‘cisgender’ at all, arguing that it relies upon and fuels a biological understanding of gender. This can limit projects aiming to explore ruptures and contingencies in biological gender frameworks. Ansara and Hegarty (2014) assert that there is potential for harm to be caused via the ‘othering’ of trans people and obstruction of a clear focus on systematic oppression. Indeed, they clarify that any ‘othering’ of individuals or groups due to them being labelled as trans is a form of cisgenderism. This thesis however uses ‘cis/cisgender’ as a way of delineating the different experiences that trans people have of adoption and fostering, in order to identify examples of cisgenderism.

**Associated concepts of normativity**

‘Cisnormativity’ is a notion that sits under the conceptual umbrella of cisgenderism. It describes the expectation that people will be cisgender; that all those assigned male at birth will identify as male, and those assigned female at birth will identify as female (Bauer et al., 2009; Catalpa and McGuire, 2018). Cisnormativity is regarded as an aspect of cisgenderism that is so pervasive that it is rarely even acknowledged, named or questioned (Bauer et al., 2009). Counter-discourses have emerged within today’s social context however, that seek to challenge the dominant cisgenderist discourse and offer alternative explanations as to how gender works. Trans feminist discourses *(trans-inclusive feminism: see section below)* and those of non-binary gender draw attention to the complexity and diversity that exists within biological, social and political life. These discourses enable us to acknowledge the possibility of a world that does not have to be divided simplistically by rigid ideas of binary sex and gender (Bornstein, 1994; Bornstein and Bergman, 2010).

Understandings of normativity in relation to sexual identity are also relevant to analysis using the concept of cisgenderism, as sexuality and gender are often conflated, and it can be difficult to disentangle the two (Rogers and Ahmed, 2017). ‘Heteronormativity’ refers to the assumption of heterosexuality as the ‘norm’ and homosexuality as deviant (Hall, 2010). The concept of ‘heterosexism’ explains the privileging of heterosexual identities and norms, and the diminishment of homosexual identities (Schilt and Westbrook, 2009). Though large-scale studies exploring the richness and multi-dimensionality of trans people’s identities are lacking from the research base, indications from smaller-scale studies are that many trans people identify their sexuality as lesbian, gay or bisexual (LGB) (Riggs, Von Doussa and Power, 2015; Pearce, 2018). Early indications suggest that a sizeable proportion of the trans population identify with a sexuality that indicates attraction to more than one gender (e.g., bisexual, pansexual).

It has been argued that heteronormativity is no longer the main adversary to queer theory (Kehl, 2020), as the ‘right kind of queers’ have been integrated into heteronormative institutions (Sabsay, 2012). ‘Homonormativity’ describes this development of a gay mainstream, where lesbian and gay people who fit currently established norms (e.g., are white, middle class, cisgender) are privileged (Duggan, 2002, p.179). Trans people however, especially those who do not assimilate (‘pass’ by fitting binary categorisations of gender), are further marginalised and their views excluded from mainstream debates in relation to LGBTQ+ rights (Wilkinson and Langlois, 2014).

Under Duggan’s (2002) conceptualisation of homonormativity, the main political activism undertaken by lesbian and gay people is a fight for inclusion into the constellation of rights that mark heteronormativity, such as marriage and having children. LGBTQ+ adoption and fostering could then represent a mark of heteronormativity, and the project of LGBTQ+ inclusion within services could be demarcated as a homonormative endeavour. Puar (2007, p.70) further argues that homonormativity exists as part of a larger homonationalist ‘us vs them’ rhetoric, whereby the normalisation of some white queer bodies is used to exclude (often non-white) ‘others.’ In applying this theory to adoption and fostering, LGBTQ+ applicants who present acceptably (in terms of sexuality and gender norms) may increase their societal standing by virtue of their approval as suitable adoptive and foster families. In this way, the ‘normalisation’ of some white queer bodies inducts these people into the ‘us’ grouping and serves to further ‘other’ those whose identities fail to align with established norms.

Those who are deemed ‘acceptably queer’ (Puar, 2006, 2007, 2013) may be those fit within transnormative templates. Transnormativity describes the way in which certain identities are privileged over others because of their ability to ‘pass’, based on normative assumptions of gender (Bradford and Syed, 2019). A trans woman who has undergone medical gender confirming treatment, uses make-up, has long hair and wears dresses may be described as engaging with transnormativity where her aim is to ‘pass’ as a woman. Trans people are a group who have been positioned as ‘social pariahs’, as such, they may wish to ‘pass’ to avoid social exclusion (Nicolazzo, 2016). However, Nicolazzo (2016) found that non-binary people can be caught in a wrestle between passing and realness. Where some trans identities have gained traction within contemporary social imagery, non-binary identities can *‘remain unseen, unheard and… misunderstood’* (p.1186). Thus, prospective adoptive and foster carers may feel pressure to enact a binary form of gender throughout the process in order to ‘pass’, believing their successful application, matching and support hinges on passing (Puar, 2006, 2007, 2013).

A useful way of understanding how the interplay of contemporary gender discourses (discourse refers not just to language but to bodies of knowledge) can affect individuals is offered by Bradford and Syed (2019), who conducted a US focus group study exploring the role of master and alternative narratives in shaping the lives, experiences and identity development of trans people. The study found that cisnormativity was framed as a master narrative. Transnormativity existed as a hegemonic alternative narrative that could resist the master narrative of cisnormativity. Trans individuals were found to negotiate with transnormativity by both resisting and conceding to it. Aspects of transnormativity were performed (e.g., clothes were chosen with the aim of ‘passing’) when it was believed necessary to be perceived as legitimate in social situations.

Transnormativity was resisted when accessing queer spaces, where individuals believed a more queered presentation would not result in social detriment (Bradford and Syed, 2019). Resisting transnormativity was sometimes experienced as empowering, however resistance was at times believed to reify the standards it sought to impute. In queer spaces, distance from rather than proximity to cisnormative standards may then become a measure for evaluating which trans identities are classes as legitimate. The study highlighted the contextual nature of analyses of trans identity development, by exploring the discursive tensions that exist within the trans community due to divergent strategies of relating to transnormativity. Overall, it can be surmised that trans identity development is enmeshed within the cultural context and prevailing belief systems in which a person is situated (Puar, 2007; Nicolazzo, 2016; Braford and Syed. 2019).

**3.3. Poststructuralism and Power**

**Situating Foucault**

This analysis draws predominantly from Foucault’s genealogical studies from the 1970s onwards, thus the thesis is situated within poststructuralism (Olssen, 2003). Postructuralism is a philosophical and theoretical perspective that aims to move beyond structuralism’s rigid and logical way of defining reality (Davies and Gannon, 2005). Postructuralism proffers the contrasting notion that there is no way of directly accessing reality or truth, rather, truth and reality are mediated by human interactions such as that of language and discourse. Foucault’s (1970) focus was directed toward the role of power in history and the historical constitution of knowledge. Therefore, Foucault’s (1970, 1978, 1979) rejection of structuralism’s universal laws and perspective of history as being underpinned by elementary structures was clear indication of his poststructuralist epistemological position. Furthermore, he consistently opposed structuralism’s tendency to prioritise the pre-existence of the whole, believing it is only possible to explain the units once the essence of the overall had been revealed.

The overarching concept I employ to make sense of how trans identities are categorised and related to within society is Foucault’s theory of discourses of power (Foucault, 1969, 1970, 1979). Foucault began laying the foundation of his thesis in 1969, developing it across the following decade (Foucault, 1970, 1972, 1979). Within Foucault’s conceptualisation, discourse refers to the bodies of knowledge that emerge in relation to a phenomenon or ‘object’ such as that of homosexuality or transgenderism.

**Discourses of power**

Foucault (1972) described discourse as a complex web of interlinked ideas that regulate a particular social field. These ideas are tied to the identities of their producers but cannot be seen as purely individually produced as the individual is produced by a series of interactional encounters with their environment; *‘the space and place we inhabit produce us’* (Probyn 2003, p.294). Necessarily, professional discourses then also reflect power relations, as there are gatekeepers at every level of the adoption and fostering process (Foucault, 1972). This structural level application of power is a useful way of considering power within social work practice. Definitions of power operation in the context of interpersonal relationships describe it as an ability to consciously or unconsciously influence another person’s emotion, cognition, attitudes or behaviours (Komter, 1989). While such definitions can inform analysis of the micro-context of the social worker- applicant relationship, a wider definition is also needed.

Foucault (1978, 1979) sets out discourses as having great import to the understanding of societal processes because they are intrinsically linked to the operation of power. Discourses do not merely describe the world; they serve to reproduce how it is seen and experienced. Foucault (1969) assigns a defacto privilege to those discourses that define the sciences, however, he explains that this is only a provisional privilege. The analysis of discursive events is not limited to the field of science and the division of the scientific field should not be seen as completely valid and definitive. Rather, it should be seen only as an initial approximation that will allow for relations to appear that could erase the initial outline’s limits.

**A Foucauldian understanding of trans history**

Foucault’s (1969) examination of the discursive formations of psychopathology could be applied to the way in which trans identities have been medically pathologised throughout history. He explained how the label ‘madness’ was constituted by every statement that narrated it, explained it, divided it up, mapped its developments, judged it, set out its correlations and gave speech to it. Thus, societal understanding and beliefs relating to ‘madness’ were constructed by the articulation of discourses narrating various forms of mental illness, then termed ‘psychopathology’. In applying this theory to trans histories (Stryker and Aizura, 2013), the ideas of Foucault (1969, 1970) help to explicate that knowledge about trans people was constructed via myriad statements that storied transgenderism as deriving from mental disorder. This medical and pathological association enabled trans identities to be judged, labelled given speech to, via a discourse of psychopathology.

In attempting to lay down a rule to which trans phenomena (or ‘objects’ of transgenderism) were first subject, Foucault (1969, 1979) sets out that we first need to map the surfaces of their emergence (where discussion of them came from). Foucault (1979) believes that sexuality emerged as a discursive object with the aim of enacting the maintenance of hegemonic power. This was achieved by deploying heteronormative discourse as a master discourse, placing the heterosexual couple as the most desirable and ‘normal’ coupling, and rendering homosexual relationships as deviant. A similar analysis can be applied contemporarily to gender.

Foucault (1979) may argue that transgenderism as an ‘object’ (or phenomenon) emerged from medical ‘surfaces’ (or fields/arenas). It was then made subject to authorities of delimitation (control) via medical and legal discourses enacted by dominating institutions such as the UK’s National Health System (which provides both mental and physical health treatments, including gender assessments and gender confirming treatment) and police service. Processes of initial differentiation took place as ‘trans’ was discussed, labelled, compared and contrasted to cis identities, its sub-groups were compared and contrasted. It was then in the discontinuities, thresholds and distances that appeared through the discussion of what ‘trans’ is and is not, that a discourse found a means by which it limited its domain and defined what was being spoken about. This gave the status of ‘trans’ as an identity and as such made manifest the nameable and describable discourse of transgenderism. The institution of medicine (constituted by its own body of knowledge and practice, recognised by public opinion, government and law) became the main authority permitted by society to name, designate and delimit ‘trans’ as an object/phenomenon. Indeed, prominent authors in trans studies stress the dominance of the medical profession in trans history (Stryker and Aizura, 2013). It was the main authority that was permitted to name, designate and delimit transgenderism throughout the 20th century.

Foucault’s (1969, 1970) theory can also be used to explain how the discourse of trans as a psychopathology has been updated and amended to move away from notions of transgenderism as equating a mental disorder (Stryker and Aizura, 2013). Foucault (1969, 1970) may explain that statements constituting the pathological discourse cannot be taken to refer to a single object, saliently throughout time. Rather, pathology was the presentation of transgenderism in the 19th and 20th centuries, however much discursive work was undertaken to group statements of a social understanding of gender. As such, by the 21st century a more expansive trans discourse enabled a new presentation of trans as an object, reframing trans identity as emerging from social spheres instead of prior medical and legal spheres. However, there is still much work to be undertaken to redirect trans identities away from its historically rooted medicalised discourse and toward a social understanding (Hines, 2007a). While such an understanding similarly hinges on normative conceptions of how trans identities should be understood, a socially constructed understanding allows for the contingency, complexity and multiplicity involved in the study of social life (Berger and Luckman, 1966).

**Discourses of power in adoption and fostering social work**

Oppression, the silencing of minority voices, occurs where there is a power differential between the subject and the enactor of the discriminatory view, occurring at personal, structural and cultural levels (Thompson, 2016). In the adoption/fostering context, personal discrimination can occur between an adoptive applicant and a social worker, who: ‘*without necessarily meaning to, becomes a person of enormous power’* and *‘instils in the applicant a feeling of being threatened’* (Thompson, 1978, p.248). Recent accounts echo these earlier findings, demonstrating that vulnerability and disempowerment experienced through the process is pronounced where applicants have characteristics of difference such as being LGBTQ+ (Wood, 2016, 2017; Hicks, 2008).

Adoption and fostering practice is regulated by processes stemming from beyond personal and cultural levels (Thompson, 2016). It is directed by prevailing societal discourses that allow those who rule to impose limits defining whose knowledge is valid and who may speak (Foucault, 1969). The discourse of truth operating at the time is influenced by myriad explicit and implicit influences and the power to direct them is in the possession of the ruling class. Whose behaviour within society defined as divergent and unacceptable depends on whose discourse of normality currently prevails. Biopower, the technology of power, is used to manage entire populations by diffuse propagation of gender- and heteronormative discourses (Foucault, 1979).

The notion of adoption as a non-normative way of having a family remains today, as demonstrated by Baxter et al.’s (2014) findings that having a birth child is a strong preference and adoption is seen as second-best. The prevailing discourse in both historical and contemporary society is that of cisgender, heterosexual parents who have biological children. Those families identifying outside of hetero- and gender- norms are, as such, regarded as unusual (Green, 2007; Seidman, 1995). Inevitably dominant cultural views become embedded in professional discourses which then also reflect power relations (Foucault, 1972), as there are gatekeepers at every level of the adoption and fostering processes (Hall, 2010; Hicks, 2000).

If the premise is accepted that no person is disconnected from their history (Fine and Weiss, 2008), findings highlighting inconsistencies in how adoption workers interpret their roles and responsibilities in assessing adopters (Department of Economic and Social Affairs, 2009) and preparing and supporting children (Hanna, 2008) are unsurprising. Hidden understandings and social rules can guide our evaluations and actions without us being able to explicitly communicate what has motivated them (Polyani, 1974). Further, discrimination that is covert can be more pervasive and resulting oppression harder to address than that which is overt (Ely, 1995). LeVine (2004) outline a dilemma that workers have whether to make decisions based on developmental psychology as a scientific base for making decisions supposed to be in a child’s best interests or being guided by moral ideals about how to best raise a child, rooted in cultural and personal situations. Social workers hold a large portion of power in relation to the approval of substitute families because it is their interpretation of a range of face-to-face interactions, they are involved in that directs decisions (Noordegraaf, Van Nijnatten and Elbers,. 2008a, 2008b).

**Strengths and limitations of employing a Foucauldian perspective on power**

Foucault’s approach has several limitations; most obviously that his work was situated within a particular time period and took an andro- and euro-centric perspective (Leonard, 1994; Selby, 2007). Foucault’s approach, while formally eschewing the notion of objectivity, has nonetheless been criticised in practice for implying the universality of its claims. Foucault’s theory problematically however lacks consideration of the experiences of non-Europeans, woman and subordinate classes (Leonard, 1994). Another criticism of Foucault is his seeming amorality including in respect of issues of childcare and abuse (Garrett, 2019). While his work lacked attention to gender, his analysis of power, sexuality and subjectivity are indeed central to feminist projects (King, 2004). Foucault’s pessimism in relation to possibilities for change could limit the use of his theories in a social work context, for he believed that any revolution would simply replace one discourse with another similarly exclusionary and controlling discourse (Leonard, 1994). However, a critical exploration of relations of power that highlights the disconnect between social work commitments such as anti-oppressive practice and empowerment, and their original humanitarian moorings is arguably essential in exposing the shortcomings of contemporary practice (Gilbert and Powell, 2009).

Zamora and Behrent (2016) set out a specific critique of Foucault’s work after 1968 (the body drawn upon by this thesis); arguing that it resembles the neoliberal project. It is set out that Foucault gave public support to neoliberal policies such as opposition to universal health care and social security and negative income tax. Although Foucault publicly criticised neoliberal figures such as Friedman, Hayek and Becker, Zamora and Behrent (2016) set out that he believed policies advanced by them offered the best alternative form of power to protect individual freedoms, as neoliberalist solutions to social issues did not seek to subjectify, rather to incentivise. Further, Zamora and Behrent (2016) argue that this misinterpretation of Foucault’s attitude to neoliberalism resulted from the academy’s increasingly deracination of Foucault from his French routes.

Notwithstanding, Foucault’s concepts of discourses of power and particularly biopower, offer strength to the thesis’ analytical framework in the way it explains complex societal processes, Furthermore, when Foucauldian concepts of power are woven in with modern stigma theory (e.g., Link and Phelan, 2014), issues of andro- and eurocentrism are largely resolved (*see below*).

**3.4 A Sociological Analysis of Stigma**

**Origins of stigma theory**

Goffman (1963) uses the term ‘stigma’ to describe an attribute that is deeply discrediting, in that when it is ascribed to a person it is believed to designate them as undesirable in some way. The level of undesirability can vary as dictated by the view held in relation to a trait in a specific time period and social context. At the extreme end of the spectrum, a stigmatised trait can denote that someone is dangerous, bad or weak. Goffman traces the history of the term ‘stigma’ to ancient Greece, where signs were cut or burnt onto people to advertise something unusual or immoral about them (e.g., being a slave or criminal) through to modern times where natural and less obvious signs subtly demarcate difference. When stigma information is processed, our view of a person as whole and normal is reduced to that of a tainted and discounted person. As a result, signs of stigma serve to allow ‘normal’ members of society to deny full societal acceptance to a person considered unusual.

In explicating the reasons for the stigmatisation of individuals and groups within society, Goffman (1963) argues that throughout history societies have set out ways of categorising people by attributes deemed to be either natural or out of the ordinary. The functions of such social organisations in Goffman’s theory are efficiency and psychological comfort; routinising social intercourse allows us to deal with strangers more easily as we are more likely to be able to predict their attitudes and category based upon first appearance. We can ascribe a ‘virtual social identity’ to a new person without consciously attending to the processes and assumptions at play. Demarcations of stigma can however vary in visibility; for example, facial scarring may be visible at first glance, but some disabilities remain invisible until further information is volunteered by the disabled person. This can cause a discrepancy between virtual and actual social identity that can cause us to reclassify a person more positively (based on an unanticipated desirable characteristic), neutrally (to another equally well-anticipated category) or negatively (due to an unanticipated undesirable attribute). As such, reclassification based on less obvious traits can increase or decrease our estimation of a person.

When considered through a lens of cisgenderism, being trans is a negatively stigmatising attribute as it marks a person’s gender identity as deviating from that which is considered usual or normal, that is, identifying as cisgender (Ansara and Hegerty, 2014). Within Goffman’s (1963) framework, transgenderism could be viewed akin to homosexuality, mental illness, unemployment, radical political behaviour or ‘unnatural passions’; aspects of identity that blemish the character and are presumed to suggest weakness. Cisgender people are positioned as ‘normal’ and ‘usual’, and trans people are positioned as the unusual counterparts. This stigmatising of trans identities gives cis people societal permission to enact methods of discrimination, often unconsciously, to reduce the life chances of trans people. A stigma theory is constructed to account for the threat a trans person represents and to explain their inferiority. This may be done directly in relation to the main stigmatised characteristic of being trans, or a person could rationalise that the animosity they perceive is actually based on another undesirable characteristic such as class or disability.

Goffman (1963) sets out that we all hold an internal view and belief of ourselves as being ‘normal’ and as such deserving of a fair chance and equal treatment within society. We as such seek out acceptance from others through social contact that is made on equal grounds. Where acceptance is not received, internally we can feel shame and engage in self-derogation. In terms of external presentation, stigmatisation can affect a person’s behaviour and presentation of self in social situations. The individual may feel unsure of what others truly think of them, that there is a greater need for them to be self-conscious and act intentionally to manage the impression they are making. In response to stigma and resulting discriminatory exercises, the stigmatised individual may act in anticipatory ways, from shying away from verbal and non-verbal interaction to making use of bravado or hostility. The use of anticipatory action to manage stigma may be felt especially essential where the person could be classified in several groups of potential stigmas, such as that of gender sexuality, disability, class or mental illness. Indeed, Goffman’s work could be said to relate to later conceptualisations of intersectionality in explaining the potential for greater threat to a person’s wellbeing where they experience discrimination in relation to multiple dimensions of their identity (Crenshaw, 1991).

**Contemporary stigma theory**

While Goffman’s theory (1963) has been productive in generating research on stigma, as an ahistorical and apolitical text, contemporary stigma researchers have questioned its direct application to today’s social issues (Tyler and Slater, 2018; Whelan, 2020). Titmus (1974) highlights that Goffman’s (1963) theory was developed based on American values and involved generalisation from personal values and mythologies. Indeed, the theory is rooted in white, heteronormative and androcentric assumptions prevailing at the time, which may limit its direct application to that moment in time (Whelan, 2020). Goffman (1959, 1963) assumes a constant awareness and negotiation of stigma by the stigmatised, therefore the theory does not attend to unfelt stigma, indifference or resistance to stigma (Tyler, 2020). Whelan’s (2020) theory of partial compliance can be related to Bradford and Syed’s (2019) findings that trans people engage with and resist transnormativity. Partial compliance can include acts that engaged in to hide problematic aspects of a person’s information, often for purposes of social survival, for example, when trans people aim to ‘pass’.

Goffman’s (1963) thesis has also been critiqued for lacking empirical anchoring and for being micro-sociological, thus lacking the explanatory power to unearth the workings of stigma on a societal level (Whelan, 2020; Paton, 2018; Tyler, 2020). As such, contemporary stigma theory highlights the importance of ‘looking up’ to enable researchers to elucidate how stigma has been designed and activated by state-led campaigns that filter stigma down into everyday interactions. Indeed, Tyler and Slater (2018) would argue that a micro-sociological and psychological method of analysing the data could detract from important questions regarding where stigma is produced, how it is produced and why. Social and political elements of understanding are often missing in stigma analyses, which is especially problematic for this thesis as it aims to attend to questions of how stigma is used to erect barriers preventing trans people for adopting/fostering. In answering this question then it is essential to consider how stigma is used by individuals, groups and the states to reproduce inequalities for trans people (Parker and Aggleton, 2003). Here, Foucault’s (1978, 1979) theory of biopower is useful, as it explains how the modern capitalist nation state has developed an ability to control the entire British population.

Contemporary stigma research therefore builds on classic Goffmanian theory (1959, 1963), incorporating the micro-sociological analysis Goffman offers into wider structural analyses that offer a fuller picture of stigma (Link and Phelan, 2014; Paton, 2018; Tyler and Slater, 2018). Tyler and Slater (2018) argue that stigma and anti-stigma initiatives are sites of intense social struggles, shaped by unequal power relations. Austerity drives and other political agendas shape stigma. While simply talking about stigma can lessen it some degree, campaigns seeking to remove stigma barriers must address in parallel the deeper social consequences of the decline of public service provision in order to be effective in tackling issues such as trans exclusion. Reduction in employee rights, job securities and welfare has resulted in chronic stress being experienced by large portions of the global population (Schrecker and Bambra, 2015). Such government-produced stress is unequally distributed (e.g., affects trans populations disproportionately) and becomes embedded by psychosocial mechanisms. Anti-stigma campaigns that fail to account for the role of economic and social policies that propagate mental distress as such have inherent limitations.

It is thus proffered that the contemporary study of stigma is best undertaken by interweaving classic Goffmanian stigma theory (1959, 1963) and Foucauldian notions of discourses of power (Foucault, 1969, 1970, 1979), with contemporary conceptualisations of stigma that promote a ‘gazing up’ (Paton, 2018) that attends specifically to the socio-politics of stigma (Tyler and Slater, 2018). Link and Phelan (2014, p.30) developed the concept of ‘stigma power’. Stigma power refers to the resource deployed by stigmatisers to achieve the subjugation of a group, by enacting stigma processes that are indirect and hidden. This theory was built from Bourdieu’s (1987) social class theory that explains how stigma is used to oppress lower classes and maintain the power of the upper class. Within this theory, power is most effectively exercised when its use can be hidden. Link and Phelan (2014) argue that the stigmatised continue to be held down, exploited or cast out as hidden tactics of manipulation are used to control wider society to sanction their exclusion. This theory is further developed to incorporate a Foucauldian perspective that stigma power is deployed by focusing attention on stigma as both a productive and constitutive force (Tyler and Slater, 2018; Tyler, 2020). In the context of gender then, political apparatus and the media are used to enable power to function to oppress trans people.

In their research applying stigma theory to a real-world Scottish housing context, Hicks and Lewis (2020) found that that categorical boundaries between ‘stigmatiser’ and ‘stigmatised’ were not always rigid. Rather, they used an interactionist approach to explicate how modern notions of stigma can be understood in terms of shame and respectability within society. In doing so they made use of Plummer’s (1975) ideas that sexual stigma is not at once attributed to and taken up by a person. Rather, it arises through processes that involve and important element of select reaction. Understanding of stigma is insufficient where research relates to it simply a social norm problem that can be alleviated when challenged (Tyler and Slater, 2018). Such a perspective fails to account for the complexity and pervasiveness of stigma. Thus, stigma should be understood as a feature of an intricate system of social relations existing within an overarching framework of capitalism, patriarchy and colonialism (Tyler, 2020).

**Surveillance of trans people**

The notion of ‘deception’ has pervaded some trans-exclusionary forms of feminism (Hines, 2019). Beauchamp (2019) unpacks the processes by which stigma has been mobilised in the US, offering real world examples of Foucault’s (1979) theory of biopower. How police and the public rely on an understanding of gender non-conformity that suggests a person wearing clothes that seem discordant with their gender is in itself a reason to suspect dangerous behaviour. It is assumed that this implies a person has something to hide. The surveillance practices mobilised by this logic support the social construction of gender non-conforming characters as deceptive and risky. Surveillance then is a core practice ‘*through which the category of transgender is produced. Regulated and contested’* (Beauchamp, 2019, p.1). Surveillance is not enacted as a result of gendered deviance, rather it produces the categories of gendered deviance it claims to simply identify. Implicit anxieties (e.g., about terrorism) are capitalised on by public campaigns suggesting that anything out of the ordinary may denote danger.

**3.5 Feminist perspective**

**History and development of this thesis’ feminist perspective**

The origins of the contemporary feminist theory which this thesis adopts can be traced back to Simone De Beauvoir’s influential work ‘The Second Sex’ (1949). Although it was published over 70 years ago, scrutiny of the female position in relation to parenthood remains of relevance to the present day and the present study. Beauvoir reports a commonly held view that ‘*It is in maternity that woman fulfils her physiological destiny’* (1949, p.501). She questions notions of motherhood as being assumed to provide maternal fulfilment and to justify a woman’s existence, providing early seeds of contemporary arguments for women as more than mothers (Gabb. 2006) and notions of family and reproductive choice (Riggs, Power and Von Doussa, 2016; Riggs and Bartholomaeus, 2018; Riggs, 2020). Beauvoir (1949) examines the ways in which different women can experience humiliation and intimidation because of others’ responses to them when they follow a course of action that is outside of society’s norms. Examples of such actions were wide-ranging even in their 1949 citing; from social presentation of one’s gender, to sexual preferences and practice, homosexuality, choosing not to have children or having an abortion.

Although it was not labelled as such, early intersectional analysis was undertaken by Beauvoir to consider the ameliorating privilege and respective disadvantage that women can experience (1949). Through virtue of their class and social standing, education and cultural position, Beauvoir (1949) posits that some women are more emancipated because of their independence and ability to attribute the negative views of others to ignorance. Here, the argument is that only mild psychological discomfort may be caused as a result of discrimination, whereas those in poorer positions are more likely to hold implicit beliefs that are directed by prevailing social norms and as such feel that discrimination is justified. This theory is countered by findings that upper-class women experience the lower self-esteem than their lower-class counterparts, due to the greater esteem and invisible power that their husbands hold (Komter, 1989). However, contemporary intersectional writers assert that socioeconomic disadvantage such as that which is often exemplified by those who are BAME and/or from lower classes can exponentially increase the social disadvantage that people experience (Crenshaw, 1991; Hill Collins, 2004, 2019). This thesis’ feminist position incorporates intersectional analysis of ways in which gender and other identity characteristics interplay to influence a person’s individual experiences of oppression and discrimination.

**Trans-inclusive feminism**

This thesis adopts a feminist perspective that asserts all gender identities must be included to achieve real social justice within the fight for gender equality (Hines, 2005, 2019, 2020). This perspective centres on providing choice for trans people with regards to their desire for starting or growing their families. As such, reproductive choice and justice for trans and non-binary people form the nexus from which my feminist approach is constructed (Riggs and Bartholomaeus, 2018; Riggs et al., 2020). It is set out that people of all gender identities should be afforded the same options within contemporary society to elect not to have children, to try and have birth children through a method of conception that works for them, or to choose to build a family via adoption or fostering. In order for social justice to be advanced in relation to gender and family, all trans identities should be afforded comparable options to cis people. This perspective aligns with trans inclusive feminism.

**Power and patriarchy**

There is, however, an inherent philosophical tension between the aim of this thesis to improve social work practice in a practical, tangible way and the poststructuralist perspective that it utilises. Indeed, Foucault (1970, 1979) may question the assumptions of this thesis that a discourse of ‘real social justice’ and fight for ‘gender equality’ exist. Rather, it could be countered that neither discourse is possible in a poststructuralist approach that eschews single reality and truths. However, this thesis accepts a level of paradigmatic unease and lack of methodological homogeneity for the pragmatic purposes of improving understanding of trans adoption and fostering (Hothersall, 2019). It acknowledges the inherent pluralism that exists within the social work profession’s integrative philosophy and maintains focus on experience as a foundation for inquiry. The goal not being to achieve try and achieve an undefinable full social justice, rather to enable the improvement of inclusivity in social work practice.

Foucault's (1970, 1979) work has influenced poststructuralist feminists and their work as the concept of gender is now understood to be directed by prevailing societal discourses (Messerschmidt et al., 2018; Hines, 2020). These discourses allow those who rule to impose limits defining whose knowledge is valid and who may speak (Foucault, 1979, 1991). The discourse of truth operating at the time is influenced by myriad explicit and implicit influences and the power to direct them is in the possession of the ruling class.

Whose behaviour within society defined as divergent and unacceptable depends on whose discourse of normality currently prevails (Foucault, 1969). Indeed, we are constituted in and through discourse and social constrictions (Probyn, 2003). We are exposed to discourses as we inhabit multiple social spaces that influence the production of our thoughts and behaviours (Foucault, 1970). It can as such be argued that a complex web of interlinking patriarchally-directed ideas regulates the social field of gender, both at a personal and professional level (Foucault, 1972).

**Colonising feminism**

The phrase ‘trans feminism’ could be used to describe an aspect of the feminist position the thesis takes, as it ensconces the project of cis and trans women standing together for all women (Stryker and Bettcher, 1992; Koyama, 2003; Serano, 2016). Indeed, ‘transfeminist’ manifestos such as Serano’s (2016) do align with the aetiology of this research. It should be made clear however that my position is that of promoting gender equality for masculine identities as well as feminine (Riggs et al., 2020). Further, the term ‘transfeminismo’ has been used within a global context as a replacement for ‘queer’, as part of a reaction to poststructuralist white Anglo queer theory (Bettcher, 2017). Linked with notions of English imperialism within Spain and South America, an examination of the global politics and usage of terms such as ‘transfeminismo’ is beyond the scope of this UK practice-focused thesis that acknowledges its inherent eurocentrism (Espineira and Bourcier, 2016).

However, Koyama’s (2020) perspective that ‘no-penis’ policies are inherently classist and racist is briefly attended to, as it is important to note that contemporary feminist debates are often presided over by middle-class white activists. Koyama (2020) sets out that the ranking of women’s oppression as the most pervasive form of oppression is in itself oppressive to people who experience marginalisation due to multiple identities such as class and race. Koyama (2020) explains that leaving consideration of the oppression of multiple identities to the few individuals affected may align with the vested interests of white, middle -class feminists seeking to maintain their own oppressive forms of feminism.

**The issue of trans exclusionary radical feminism**

A major metaphorical elephant in the room to be dealt with by any contemporary explication of feminist positionality is that of ‘trans exclusionary radical feminists’ (TERFs) (Hines, 2019). Smythe (2018) is credited with coining the term ‘TERF’ when she used it in her 2008 feminist blog, however trans-exclusionary forms of feminism have been around for many decades. While Raymond’s (1979) book ‘The transsexual Empire’ is not cited as the sole initiator of this exclusionary form of feminism, it did much to embed trans-exclusionary perspectives within the UK’s (and world’s) social consciousness (Hines, 2019). Raymond (1979) promotes essentialist claims that biological sex is dictated by chromosomes and is unchangeable. Further, she asserts that gender is a direct expression of biological sex. Raymond positions gender as fixed at birth and unchangeable, thus denies the identities of all trans people.

This position has been reinforced by other writers (e.g., Greer, 1994; Jeffreys, 1997), creating deep divides within feminist communities that other contemporary writers argue have been difficult to bridge (Riddell, 1996; Stone, 1992, Serano, 2016). However, Williams (2014) points out that alongside the snowballing of TERF perspectives, pockets of inclusionary practice existed concurrently from the 1970s onwards. Indeed, radical feminism should not be confused with TERF, neither should its semantics remain tied in with understandings of 1960s radical feminism (Mackay, 2015). Mackay (2015) sets out that the methods used by contemporary radical feminist movements have characteristics of greater professionalisation or managerialism, as well as inclusion of men within their organisation and leadership. Smythe (2018) points out that another term she uses within her blog may offer more accurate description of the problem in setting certain factions out as ‘trans exclusionary separatist’ (TES). However, ‘TERF’ has been evaluated as a useful terminology within recent conceptualisations of trans-inclusive feminism:

*‘Ontologically and epistemologically it works to narrate the power relations at*

*stake produced through discursive struggles around gendered authenticity and the tenure of feminism.’* (Hines, 2019, p.4).

The term ‘TERF’ is as such deemed appropriate in describing the alternate position that may seek to diminish the power relations existing within narratives of trans personal identity, family and adoption and fostering.

Hines (2005) analysed the relationships between femininity, feminism and trans masculinity and found that trans men and women social and political problems with conceptualisations of feminism that pervaded throughout the 1970s and 1980s. Many trans men reported having active involvement in feminist communities (often lesbian or queer subcultural groups) before or during their transitions. However, their masculine identities were met with subsequent challenge. Likewise, many trans women struggled to access feminist spaces within this time period, as their feminine identities were refuted. By the early millennium, feminist spaces had reportedly become less hostile and trans people expressed some optimism with regards to the trajectory that feminism was taking.

**Contemporary cultural shifts**

In her recent authorship, Hines (2019, 2020) reviews progress made and highlights that some positive cultural shifts have occurred. For example, greater research focus on trans health and social care as well as media coverage of trans identities has led to greater understanding of trans identities by some factions of the public. Online communities have also offered an important resource for trans community building, bringing together a previously disparate geographically distanced population (Whittle, 1996). Hines (2019) argues that although social media and media culture has brought positives to feminist movements, a significant problem for trans people today is the traction that social media has afforded to TERFs. Indeed, as Hines (2019 p.149) argues:

‘*Hostility to the self-determination of gender identity appears to strengthen as trans people gain increased citizenship rights.’*

As trans people have gained increased rights as citizens, there has been increased hostility directed at trans people’s right to self-determine their gender (Hines, 2019). Williams (2016) points out that the support of trans people has been secreted away from feminist discourse and argues for a reclaiming of the trans-inclusivity that she sets out is actually inherent within feminism. The ‘*strong branch of anti-transgender sentiment running through contemporary feminist discourse’* however must be named and acknowledged for the project of a gender inclusive form of feminism to achieve its aims (Hines, 2019, p.151).

**3.6 Socially (re-)constructing family**

Ideas of feminism, gender studies, queer theory and patriarchal discourses are necessarily embedded within notions of family. Although queer theory is not explicitly utilised as an analytical approach, it is relevant to this thesis as a branch of the overarching poststructuralist approach (Butler, 1990; Prosser, 1994). Focusing specifically on the challenge of gender and sexual binaries, queer theory challenges the way in which society has been structured around norms of heterosexual and cisgender identities. This thesis does not specifically challenge all extant notions of gender; however, it does argue for society to make space for possibilities of multiple identities. Thus, an overarching poststructuralist analysis is required to make room for a multiplicity of realities and truths, as they exist through the imaginations of each person.

As such, the following discussion will explore the sociology of families, relating this more specifically to families that are gender diverse. Family can be seen as a socially constructed phenomenon (Coontz, 2003) that is made up of a complex network of normative specifications (Kressierer and Bryant, 1996). Indeed, Kressierer and Bryant (1996) argue that family is the most highly regulated context, prescribed by specific rules of social legitimacy which make outliers such as LGBTQ+-headed families, single-parent families and those brought together by adoption or fostering appear deviant. Connell (1987) outlines that it is because the family is regarded as the foundation of society that it is governed by complex and elaborate social constructions, and multi-layered relations. Features of the normative family have remained largely salient over the decades, with the assumption still standing that they will comprise a spousal, heterosexual relationship that will produce birth children (Goffman, 1959; Giddens, 1992; Jamieson, 1998).

**Families of choice**

Contemporary conceptualisations of the family have been widened to include those of ‘families of choice’; a term describing intimate relationships that are chosen as opposed to being given by blood or marriage (Weston, 1991). A major disruption to traditional roles is arguably the deconstruction of motherhood (Gabb, 2006). Gabb (2006) unpacked the idealised image of a woman as fulfilling her destiny and becoming a sexless being through motherhood. She argued that this image was propagated by patriarchal systems that sought to oppress women, keeping them from empowering sexual and work lives. Interviews with lesbian, gay and bisexual people showed that family relationships were often defined by everyday practical activities and demonstrations of mutual care (Donovan, Heaphy and Weeks, 2001). They often involved more egalitarian relationship forms, as well as involvement with communities and friendship networks.

A family unit does not need to be directed by the bounds of a stereotypical hetero- and gender-normative family; rather, it is often comprised of adult friends who feel their relationships transcend the boundaries of usual friendships to become a more enduring unit, deserving of the title ‘family’ (Donovan, Heaphy and Weeks, 2001). Re-directing concepts of family away from traditional views that they should be built upon bloodlines offers greater inclusivity for LGBTQ+ families as well as those formed by adoption and fostering (Weston, 1991). Morgan’s (1996, 2011) notion of family practices and associated parenting practices has been included within families of choice literature and is useful to this thesis. The term describes the diversity of ways that people engage in family life, describing any act that will influence a person who is regarded as family as a family practice. In this way, the approach avoids placing limits on considerations of family, rather expands its definition to better equip sociology to analyse continually advancing iterations of family life.

**3.7 The challenges of combining theoretical approaches**

A blended sociological and poststructuralist theoretical framework was considered appropriate because it enabled findings to be analysed in a manner that accounted for multiple social realities. A sociological branch to the analytic framework was necessary to make provision for the broad, encompassing examination of social life that the narratives covered. Participants often made reference to self and family as they related to the societal context in which a person and their family existed in. A poststructuralist analysis of social problems was deemed essential because poststructural theory questions the pursuit of underlying truth that social scientific inquiry has traditionally often embodied (Reekie, 1994). As Reekie (1994) sets out, many of the problems that social workers attend to within family contexts can be more usefully analysed within a theoretical framework that makes provision for the existence of multiple and conflicting truths. The framework also supported consideration of why participants wanted to share aspects of their stories and how they shared them. In relation to the stories contained within this thesis, an analytical framework that failed to allow for contradiction and multiple realities could risk the creation of analysis that only gives one side to a complex story. Allowing for multiple truths however enabled analysis of the complicated, nuanced pictures that people gave, as well as their reasons for storying their lives in that way. Foucauldian notions of discourse and power were essential to this analysis as he argued for the inextricability of the relationship between knowledge of society and society’s power structures.

Barbour (1998) highlights that analytical rigour can be strengthened by the acknowledgment and addressing of potentially contradictory assumptions within qualitative research. The challenges of combining the two theoretical approaches of sociology and poststructuralism are thud laid out. A practical challenge was that poststructuralism lacks clear empirical application in terms of its political, cultural and existential relevance to core sociological areas of study such as gender (Agger, 1991). Further, although sociologists have not tended to explicitly state a positivist approach has been taken, many have tended to ascribe to the core thread of positivism that it is possible to reflect the world without integrating philosophical and theoretical challenge into sociological research. However, contemporary sociologists have broadened sociology’s approach markedly in this respect. For example, in her development of a sociology of trans lives, Hines (2007) explains how trans identities have been shaped by medical and legal discourses, by feminism and poststructuralism.

Indeed, as Agger (1991) argues, contemporary sociology (particularly the sociology of gender) has benefitted from the conceptual and empirical application of the poststructuralist theoretical perspective. As such, challenges of theoretical combination were overcome by utilising the main ideas of poststructuralism and applying these to a contemporary sociology of trans identity and of stigma. Poststructuralism’s role in helping readers and writers to recognise their own involvements and investments in research has been central to this research project. Its notion of social scientific inquiry as inherently involving not the holding of a mirror to, but the imagination and invention of a social world is central to this thesis’ analytic approach. The theoretical approach therefore moves beyond both a traditional American sociological approach to sociology as a science and a philosophical approach to that decries social scientific inquiry due to a presumed positivist rooting. Instead, the thesis blends core ideas of poststructuralism with a contemporary sociology of trans identity, cisgenderism and stigma, to assert that social scientific inquiry can make use of interpretivist ideas to better understand trans identities. I argue that together, the poststructuralist and sociological elements to the analytical framework supported a fuller understanding of trans people’s social lives, as they related to personal identity, family and adoption and fostering.

**3.8 Chapter summary**

This chapter has set out how a framework integrating ideas of cisgenderism, discourse/power, stigma, feminism and the sociology of families can help in the process of analysing the narratives of trans people in relation to adoption and fostering services in the UK. In focusing on the ways in which trans people’s self-understanding can be discounted, challenged or passed over unnoticed by individuals and systems, this framework can aid understanding of trans peoples’ experiences.

The followingchapter will set out the methodology used for the research presented within this thesis, examining the choices made from the point of study inception to research design, through to data analysis.

**Chapter 4: Methodology**

**4.1 Introduction**

This chapter begins by outlining the epistemological and ontological positions underpinning the thesis, linking these to the qualitative methodology and study design. It critiques qualitative methodology and explains the reasoning for its selection. This chapter goes to locate narrative inquiry within its historical context, set out the specific form of narrative inquiry that the study utilised and explain the reasons why this methodology was selected. I will outline the research methods to show how the data was gathered and why the specific research design, interview and analysis techniques were selected to meet the needs of the research questions.

The research questions are as follows:

1. How do trans people make sense of their experiences of adopting and fostering through narratives of personal identity and family?

2. What barriers and enablers exist for trans people who wish to adopt and foster in England and Wales.

3. Are there qualitative differences between the experiences of different trans and non-binary individuals?

4. What recommendations can be made for adoption and fostering social work staff to promote good practice?

Analysis of the robustness of the study is based on the premise that the trustworthiness of qualitative research hinges on the researcher’s honesty about their impact on the research (Guba, 1981; Guba and Lincoln, 1982; Holloway, 2005). As such, a transparency of reporting was deemed essential to the research process (Newton et al., 2012). A reflexive analysis is interwoven throughout the first four chapters and returned to in the concluding chapter*.* Reflexive accounts serve to add clarity about the potential influences, dynamics and biases at play in the conducting and reporting of the study (LeCompte and Schensul, 2010). It is important to attend to the nuances of researcher impact as it is an integral (and often contested) part of narrative research (Andrews, Squire and Tamboukou, 2013). Therefore, the impetus for this PhD, including how and why the research questions were chosen is outlined in this prefacing section.

In 2011 as I was undertaking my final placement for my Social Work MA at a local authority adoption team in Manchester, the team talked proudly about the same-sex couples they had recently approved, matched and placed with. However, when I asked if they had any trans adopters, the response was simply ‘*It’ll never happen’*. Further, while the talk about gay and lesbian couples was positive, there were still many issues related to traditional expectations of gender roles embedded within practice. When I reflect on my time as a qualified social worker employed within the same team from 2013-2017, I realised these gender norms had become subconsciously embedded within my practice too. When I began analysing how this happened, I came to realise that gender norms were entrenched at every level of adoption and fostering social work practice and were difficult to challenge. At the micro level, individual social workers believed that trans adopters and carers would ‘never happen’. At the meso level my request to address letters to a person’s full name where prefixes were not given to prevent making gendered or relationship assumptions being made was denied as the formality of address was considered more important. At the macro level, I found no local or national policy and legislation pertaining specifically to gender diversity in adoption and fostering.

I also became aware of the possibility that individual social workers and managers could specifically gatekeep, preventing trans and non-binary people progressing as adopters and foster carers. Where the reason for preventing a person’s initial application progressing was not recorded as related to their gender identity, there was no legal or policy backing to challenge a decision made by individual social workers and managers. As an individual social worker, I felt I lacked the power to challenge and request changes within a local authority and within a subsequent regional adoption agency conglomerate. That feeling of powerlessness to make what I saw as integral changes to my profession was a core motivator for starting my PhD research. At the time however, because of the way I had been socialised into adoption and fostering social work practice within a team that embodied cisgenderism (a word I did not yet know), my first proposal focused only on single adopters. It was not until I discussed my ideas, experiences and motivators with my first supervisor that I realised it would be possible to research trans and not-binary people’s experiences of adoption and fostering.

Research questions two and four concerning barriers and enablers to adoption and fostering and practice recommendations were the first questions set at the project’s commencement. These questions were produced because I wanted to explore both negative and positive aspects of people’s experiences and to use the information gleaned by the study to produce guidance to have a direct positive impact on practice. As this is a social work thesis, applying the learning produced to the practice setting is essential. Research question one exploring narratives of personal identity and family arose as I began the process of transcription and analysis of the interviews. While I did ask about identity demographics and family role, I did not anticipate that these areas would end up forming large sections of my thesis. The open questioning and flexible interview style allowed participants to tell me what they thought was important to the overall topic of trans people adopting and fostering. Participants clearly felt that their experiences and development of personal identity in terms of gender and sexuality were important to explain. They likewise used stories of family to contextualise their perspectives on adoption and fostering. This information was given in a lot of detail to help me and the audience of readers understand how experiences growing up influenced the sociological imagination of family for them.

Research question three pertaining to the qualitative differences between the experiences of different trans and non-binary individuals arose as I engaged with contemporary literature on trans identities that focused more specifically on non-binary. Practice knowledge and discussions undertaken with attendees at the LGBT Foundation workshop I hosted suggested that those who ‘passed’ may be more likely to be accepted within the binary gender structures that I had experienced within adoption and fostering contexts. This notion was developed further when I interviewed non-binary adopters/carers and early analysis indicated support for literature highlighting a specific detriment to non-binary people in a variety of health and social care domains.

**4.2 Epistemological and ontological positions**

**Locating the research within an interpretivist, poststructuralist paradigm**

Before attending to the particulars of the research design, it is essential to attend to ontology, what it is possible to know about the world (Crotty, 1998; Snape and Spencer; 2003) and epistemology, how we produce knowledge (Bryman, 2008). There are two main paradigms within research: positivism and interpretivism (Guba and Lincoln, 2005). A researcher’s ontological and epistemological positions together establish the paradigm they use. Positivist researchers see reality as a free entity that exists independently of observers and regard the world as permanent and unchanging (Snape and Spencer; 2003). Whereas interpretivist researchers embrace a subjective ontological worldview, believing that reality is dependent on the meanings that people give to it (Guba and Lincoln, 2005). The epistemology of positivist research is that we can only create knowledge by using tools to measure observable things, whereas interpretivist research believes that to know reality we must interpret it to try and understand its layers Crotty, 1998). This thesis is situated within the interpretivist paradigm as it views the nature of reality as ever-changing and context dependent and believes that the research questions it sets (*see the final section of this chapter)* can only be answered by interpreting layers of meaning.

Examples of interpretivist approaches include critical race, queer, and feminist theories; the latter is utilised in this thesis (Guba and Lincoln, 2005). Denzin and Lincoln (2005) argue that these approaches can be located on the borders of postpositivism (a movement that emerged in response to dissatisfaction with positivist research) and poststructuralism (the intellectual project that rejected prior structuralist thought which prioritised ideas of fixed, binarily opposed social structures, *see Chapter 3: Theoretical Frameworks*). However, while poststructuralism is often used interchangeably with postpositivism and postmodernism, these terms should not be confused (Wullweber, 2014).

Postmodernism is a term used to critique the unity of modernism (*also known as modernity*, Alvesson, 2002). Forming part of the Enlightenment (the 17th and 18th century movement that shifted the focus from religious worship to that of rational thought and reason, bringing scientific methodologies into mainstream society), modernism involves certainty, control and objective, rigid ways of considering social issues. It propelled the notion that social life could be rationalised, and its problems eradicated with logic, order and authority; in essence its aims could be described as social engineering. Modernism is the orienting thread running through the positivist research paradigm. Postmodernism then is the critical reaction and scepticism towards modernist and positivist thinking (Alvesson, 2002). Postmodern social research can be described as antagonistic of approaches that seek to eliminate uncertainty. While postmodern ideas may have some relevance to the thesis, a poststructuralist analysis is utilised as it seeks to unearth biases and inconsistencies in ways of knowing, as they relate to societal discourses. The knowledge produced by this research is laid out as temporally located and subjectively co-created, offering a subjective, socio-culturally influenced understanding of layers of meaning in relation to participants’ experiences at a particular moment in time. As such, this thesis is situated within a poststructuralist paradigm that views knowledge, truth and reality as produced via human linguistic interactions (Davies and Gannon, 2005).

Postpositvism is a theoretical stance evolving from positivism that seeks objective reality while acknowledging it cannot be perfectly measured due to researcher bias (Alvesson and Sköldberg, 2009). Wullweber (2014) argues that postpostivism can be viewed as an umbrella encompassing poststructuralism as the important epistemological thread that ties these theories together is its challenge of the implicit assumptions of an objective, value-free and neutral approach to social sciences. Indeed, postpositivist approaches see science as simultaneously shaping and being shaped by society and emphasises that every theory is influenced by bias (Shapiro, 1981, 2013).

This thesis however engages with Foucault and Butler’s poststructuralist ideas of gender (*see Chapter 3*). Poststructuralism is adopted as a distinct form of analysis as it questions the master narratives that establish gender binaries, critiquing frameworks that position gender as inevitable, determined by language and social structures (Davies and Gannon, 2005). Instead, master narratives can be considered simultaneously as having constitutive force and resisted as being the sole arbiters of meaning.

Critiques of poststructuralism relate to their rejection of the notion of absolutes. Positivist and postpositivist perspectives hold the ontological position that there is an objective truth that exists in the world (Denzin and Lincoln, 2005). Further critiques imply a lack of coherence in poststructuralist theory. However, these perspectives do not seek to provide certainty, rather aim to trouble existing master narratives pertaining to gender (Davies and Ganon, 2005). Poststructuralism enables the development of new subjectivities, understanding agency as a way of recognising the power of discourse. The form of feminist poststructuralist research this thesis uses then makes way for new possibilities a multiplicity of gender understanding.

**A social constructionist perspective**

The thesis adopts a social constructionist perspective that views knowledge as being derived from and maintained by social interactions (Berger and Luckman, 1966). Over time concepts or mental representations created by interactions become habituated into reciprocal roles that are played out by social actors in relation to each other. Once these roles are made available to other members of society to play out, these reciprocal interactions have become institutionalised, and their meaning embedded into society. As such, beliefs about what constitutes reality arguably result from social constructions.

Social constructionism is an appropriate epistemological and ontological position to be taken by a practitioner-researcher with a background in social care, as it views the knowledge about what constitutes family as being socially protracted through processes of interpreting experience (Burr, 2003). The approach lends itself to the research methodology as it explores the diversity of contradictions and failures in meaning, the dependence of meaning on context and the mutual constitution of meaning between researcher and participant (Holstein and Gubrium, 2008). Social constructionism does not assume an objective external reality, rather believes that reality is constructed subjectively by a set of individual interpretations (Bryman, 2008). These are necessarily co-constructed as the researcher will impact on the social world of the participants (Denzin and Lincoln, 2005).

The social constructionist perspective has been criticised by social realists such as Searle (1995), who asserts that some aspects of the world are objectively true and, as such, should be considered as independent from the way humans think about them. A realist counterargument to the social constructionist viewpoint utilised by this thesis may argue that as gender is influenced to some degree by objective reality (Searle, 1995). Elder-Vass (2012) attempted to reconcile the differences between realism and social constructionism, arguing for a middle-ground whereby objective truth is said to inform and shape the social world. However, the efficacy of this attempt is easily troubled by an examination of Elder-Vass’s (2012) stance on sex and gender. He views sex as an objective and natural distinction between maleness/femaleness and gender identity as socially constructed. Whereas the social constructionist perspective that this thesis adopts (Berger and Luckman, 1966) regards all knowledge, including that pertaining to sex and gender, as arising from interactions that take place within social systems (Butler, 1990; Fausto Sterling, 2012).

**4.3 Design choice and evaluation criteria**

**Considering qualitative, quantitative and mixed methods designs**

Firstly, working definitions of qualitative, quantitative and mixed methods research approaches are set out to enable the comparing and contrasting involved in the decision-making process that led to selecting a qualitative research methodology. Situated within the interpretivist paradigm, qualitative social research aims to gain rich, exploratory insight into experiences and subjective meanings of social phenomena (Guba and Lincoln, 2005). While quantitative social research, rooted in positivism, aims to obtain objective measurements of distilled aspects of social life for statistical comparison to establish patterns, prove/disprove hypotheses, make predictions and generalise these to wider populations (Newman and Ridenour, 1998; Aveyard and Sharp, 2017). Removing unwanted bias is a core aim to ensure validity and reliability of results (Kaplan, 2004). Mixed methods research employs tools set out by both qualitative and quantitative research within the same study, for example, including numerically counted survey responses alongside questions that allow open-ended textual or verbal responses (Tashakkori and Teddlie, 2010).

A purely quantitative methodology was discounted as it would be unable to provide rich, exploratory data about trans people’s lived experiences of adoption and fostering (Newman and Ridenour, 1998; Aveyard and Sharp, 2017). Tashakkori and Teddlie (2010) argue for the efficacy of mixed methods research that makes use of a numerical element to allow for quantifiable measures to be compared and analysed for statistical significance, as well as for the exploration of the human experience behind the numbers. Bryman (2006) criticises this form of mixed methods for its lack of methodological integration. As qualitative research met the needs of the research on its own merits (Denzin, 2009), a mixed-methods design was discounted as this could prevent the aims of both paradigms being fully achieved (Smith and Hodkinson, 2005).

The purpose of the study was to generate rich, detailed understandings of the subjective meaning of a highly contextualised social issue (Bryman; 1988; Cresswell, 2009; Holloway, 2005). It was exploratory, seeking to generate theory from its findings rather than prove prior held theory (Denzin and Lincoln, 2008; Newman and Benz, 1998). The research focuses on the meanings that people attach to experiences, in context of the social processes that influence them (Popay, 1992). Exploration of this requires ‘*extensive interaction’* with participants and an attempt to see through the eyes of those whom you are studying (Bryman, 1988). As such, a qualitative methodology was selected because the topic was not suitable for reduction to a set of questionnaire responses (Denzin and Lincoln, 2008).

**Defining and critiquing qualitative methodology**

Denzin and Lincoln argue (2005, p.3) that by its nature, the parameters of qualitative research cannot be rigidly defined, rather, it describes ‘*a situated activity that locates the observer in the world’*. Definitional difficulties are, however, inherent to research terminology that is steeped in a complex political history concerning dominating discourses of power (Bishop, 2005). An example of this is in the dominance of white, androcentric research which was challenged in the 1960s by a surge of feminist research (Chase, 2005).

At a micro level, qualitative research can be broadly outlined as making use of data written or recorded audially or visually from interviews and conversations, field notes, photos, other visual materials, diaries and correspondence (Aveyard and Sharp, 2017). Qualitative research is often drawn upon to develop themes to support a theory to explain the nature of and reasons behind an experience (Newman and Ridenour, 1998). As such, the macro characteristics that distinguish qualitative research from quantitative are that it comprises a set of interpretivist practices that transform the world into a series of representations (Denzin and Lincoln, 2005).

Qualitative research has the key advantage of being able to offer flexible methods of data collection and analysis that enable the researcher to be led by what participants want to say, rather than directing a strict agenda (Denzin and Lincoln, 2005). This enables participants select themes of importance to the topic area, rather than the researcher directing an agenda influenced by their own personal knowledge (Andrews, Squire and Tamboukou, 2013). However, qualitative research has limitations in that its findings cannot be replicated or generalised to a wider population (Kaplan, 2004). While its exploratory uses are valued, qualitative research may be considered secondary to quantitative research in terms of policy and practice influence as it cannot be used to prove/disprove or predict (Alasuutari, Bickman and Brannen, 2008). Further, positivist researchers have called into question the efficacy of qualitative research by questioning its rigour (Kaplan, 2004; Alasuutari, Bickman and Brannen, 2008).

**Establishing rigour in qualitative research**

Rigour refers to methodological robustness achieved through ‘*thoroughness, accuracy, confirmability and ethical soundness of all aspects of a study’s design’* (Andrews and Halcomb, 2009, p. xvi). The quality of the research findings will be measured by their capacity to provide new insights that increase understanding of trans people’s experiences of adoption and fostering in England and Wales (Krippendorff, 2004). Rolfe (2006, p.305) argues that the evaluation of qualitative studies should not be linked to truth or value as these are positivist terms, rather trustworthiness and persuasion are key, and are strengthened by ‘*leaving a decision trail’.* This adds clarity and strength, while retaining the valued flexibility inherent within responsive qualitative research (Silverman, 2016). The evaluative criteria of qualitative research include credibility, transferability, dependability and confirmability (Lincoln and Guba, 1985; Holloway, 2005) equivalent to the criteria of validity, reliability, replicability and generalisability in quantitative research (Kaplan, 2004).

To demonstrate credibility, a study must demonstrate that it sets out a true picture of the phenomenon under study (Shenton, 2004), considering the degree to which research findings represent the meanings of the participants (Leitz and Zayas, 2010). Credibility is important for qualitative research that seeks to influence future research directions and make recommendations for policy and practice (Lincoln and Guba, 1985). Transferability describes the degree to which the study’s findings can be applied to other contexts to inform social work practice (Given, 2008). This evaluative criterion is achieved when findings *‘‘fit’ into contexts outside the study situation and when its audience views its findings as meaningful and applicable in terms of their own experiences’* (Koch, 2006, p.92). Dependability attends to whether the researcher transparently accounts for the methods and findings reported (Aveyard and Sharp, 2017). Confirmability refers to the extent to which the results can be confirmed or repeated in another study (Aveyard and Sharp, 2017). To increase a study’s conformability, researchers must demonstrate that findings emerge from the data rather than their own predispositions (Shenton, 2004). For this study a process of researcher reflexivity was employed as I repeatedly reconsidered the potential impact of my identity and experiences on the research (Mao et al., 2016).

**4.4 Methodological choices**

**Defining narrative research**

Narrative inquiry was the most appropriate choice for the study because it seeks to explore the co-created expression of a social topic (Andrews, Squire and Tamboukou, 2008). As this thesis primarily sought to inform social work practice, a narrative inquiry was suitable as it aligns with social work practice that often utilises narrative methods (e.g., in assessments). The narrative researchers who have most significantly influenced the methodology of the present study are Bruner (1991), Briggs (1986), Mishler (1986, 1991) and Riessman (1993, 2007; Riessman and Quinney, 2005). These figures have in turn have thanked Labov and Waltezky (1967) for their earlier contributions that brought sociolinguistics and anthropology together to bring to light the value of studying everyday narratives. Labov and Waltesky’s (1967) importantly put forward the idea that narratives are a type of discourse that can be characterised by specific structures that perform particular social functions. Their analysis of ordinary people’s narratives elucidated five sociolinguistic features through which the story could be understood. Firstly ‘orientation’ informs the listener about the actions involved, the place and time. Next ‘complication’ refers to the action of the main body of the narrative and ‘evaluation’ illuminates the point the narrator is bringing the story to. Following this, ‘resolution’ gives the end result of the action, and lastly ‘coda’ are what the narrator uses to return the listener to the present moment. This model planted the seeds from which narrative inquiry as the present study uses it today grew.

A common problem that narrative researchers encounter is the question of what distinguishes narrative as a research approach; how does narrative inquiry differ from simply hearing a story and how it can be defined? As a working definition, this thesis adopts the position that narrative inquiry, at its essence, is ‘*the study of the ways humans experience the world’* (Connelly and Clandidnin, 1990, p.2) and ‘*a way of thinking about experience’* (Connelly and Clandidnin, 2006, p.477). Riessman and Quinney (2005) uphold that narrative inquiry is not an approach that requires a rigid structure or tight boundaries, and instead talk about its ‘*essential ingredients’* (p393).

Bruner (1986) developed these ideas when he noted that narrative is not just a form of text but acts as a mode of thought. Mishler (1986) and Briggs (1986) took a sociolinguistic focus to analyse the impact of the research interview itself as a specific form of discourse. Riessman (1997) found the original structures of narrative inquiry too restrictive and opened up the typology of genres to include habitual and hypothetical narratives. In connecting the form and function of speech, she found that the approach was more able to help her analyse how people discussed their divorce experiences in her influential book ‘divorce talk’ (Riessman, 1990).

The distinctive features that set a narrative apart from another form of exchange are that it develops a detailed plot, complexities of a setting and the characters within it (Riessman and Quinney, 2005). Other communicative exchanges such as question and answer exchanges, reports and arguments do not necessarily possess these characteristics (Riessman, 1993). A central feature that separates narrative inquiry from the act of simply hearing a narrative is the analytic attention paid to it (Riessman and Quinney, 2005). Narrative researchers attend to *how* the story was made, *who* it was constructed for and for *what* purpose it was told.

The methods of data collection and analysis within the field of narrative inquiry are acknowledged to be as multiple and as a varied as the narratives it deconstructs (Chase, 2005). Indeed, because its focus is on human experience, one could argue that a narrowing of parameters is neither possible nor useful in helping this methodology to achieve its aims. Bruner (1991) sets out that a narrative can be defined as how a protagonist interprets events and experiences deemed to be important. Connelly and Clandinin (2006) expand upon this premise, to explain that people shape their lives by storying who they and others are. Stories act as portals through which people enter the world and also ways in which they interpret their experience of it.

**Value of narrative research**

Woodiwiss (2017) highlights that although the body of literature on why and how we do narrative research is growing, we still lack clarity in relation to exactly what we mean by narrative research. Gubrium and Holstein (2009) maintain that the job of analysing narrative reality rests not on whether stories have borders, rather seeks to understand how those borders are established. They see the stories contained within the transcripts of narrative research as textual representations of continuously unfolding accounts. Though stories can be bound by plots and themes, these conventional borders are seen as ‘*ongoing products of narrative reality’s operating components’* (p.228). In this way, narrative inquiry is as a way of responding to the agentic flexibility of stories as a way of attempting to capture the richness of narrative reality.

A feminist sociological approach to the definitional issues of narrative inquiry is useful; instead of focusing on the minutiae of methodology or the politics of its competing paradigms, Woodiwiss, Smith and Lockwood (2017) look at the opportunities and challenges that researching human stories presents us. Wang and Geele (2015) offer the perspective that narrative inquiry gives us a specific way of caring about how knowledge is produced. They feel that it is important for caring professions to consider knowledge production as a dynamic process that is sparked by continuous reciprocal human interactions. In viewing knowledge in this way, research that involves an element of the ‘insider view’ such as that included in the present study is valued rather than tolerated. It is seen as an essential mechanism for understanding nuances of the researcher-participant relationship and how meaning is made.

**Critiquing narrative research**

The subjective nature of a narrative inquiry has been central to critiques that some voices are privileged over others (Gottlieb and Lasser, 2001). Gottlieb and Lasser (2001) highlight that this could exclude the views of certain groups from research by virtue of group member’s shared natures. Smythe and Murray (2000) argue that narrative research is dependent on participants’ openness, ability to reflect and to grasp multiple realities. However, some people may have a singularity, as opposed to multiplicity, of worldview and exclusion may be necessary due to a person’s ability to fully participate in the research.

Another critique point is whether it is ethical for a researcher to retell a person’s story (Smythe and Murray, 2000). In relation to the treatment of the narratives within the methodology of this study, Dargie et al. (2014) argue that we need to reinforce an acceptance of the meaning that people make of their narratives as an exploratory journey, as opposed to insisting on rigid patterns of identification. Learning has been taken from Byrne’s (2015) article exploring meaning-making in narrative inquiry and my position with regards to equality of perspective. Byrne argues that the poetic form can enable inclusion of multiple voices and stories in a non-hierarchical way in order to make the researcher’s views explicit without allowing them to become dominant. The voice of participant, researcher and literature are as such placed on an equal level within the project’s story. As a qualitative researcher, I acknowledge the subjectivity involved in analysis and aim to make this plain in a reflexive account that utilises analysis of a research diary. The inclusion of field notes that include personal memoranda hopes to add trustworthiness of this study (Vaismoradi, Turunen and Bondas, 2013).

**4.5 Alternative study designs**

**Alternative designs: other qualitative options**

This section will explore potential advantages that alternative qualitative methodologies could have offered the research and set out the reasons why they were rejected in favour of a narrative inquiry. Participatory action research is arguably the most empowering and inclusive methodological option; seeking to increase levels of meaningful collaborative work between the researcher and participants (Kemmis and Taggart, 2005). The reason for the discounting of action research is that it would not be possible to consult with participants regarding what needs to be achieved to improve services and then to put this in place. There may be a possibility to employ a participatory design in future research, however, at this early stage of conducting exploratory research into a marginalised group a participatory design was unrealistic.

Three realistic designs were explored as alternatives to narrative inquiry: ethnography, interpretive phenomenological analysis (IPA) and grounded theory. A fourth consideration was the viability of combining narrative inquiry with grounded theory within a mixed methods qualitative design. The thinking in relation to what these approaches could offer the research will now be considered in terms of their value, limitations and suitability for this study.

Firstly, LeCompte and Schensul (2010) would further argue that an ethnographic approach would have offered the flexibility to study the insider experiences of the study’s participants. Following the data, noticing gaps and responding to changes of direction arguably increases the ability to capture the whole truth of what one hopes to study. Furthermore, avoiding placing limiting parameters on the data collection process can reduce bias (Sharkey and Larsen, 2005). However, as the research is exploratory in nature and focuses on the views and stories of participants, including future-thinking as well as past experience, an ethnographic approach was not able to meet the needs of the research question (Denzin and Lincoln, 2005).

Secondly, IPA was considered as it is a qualitative approach seeking to examine how people make sense of their major experiences in life (Smith, Flower and Larkin, 2009). The approach stemmed from the phenomenology of Husserl (1977), who was interested in finding out the way in which a person comes to accurately know their own experience of a certain phenomenon. Husserl developed IPA as a means of focusing on what allows a person to identify the essential qualities of an experience. The idea being that if we can identify these qualities, they could transcend the specific circumstances of that life event and may then shed light on an experience for others too. IPA has a number of strengths in terms of how it can meet the needs of research question. Like narrative inquiry, IPA is the study of lived experience that is interested in comprehending what it is like to be human (Smith, Flower and Larkin, 2009). It resists predefining and overly abstracting categories of experience and is instead interested in examining when every day experience takes on particular significance for people; interrupting the flow and denoting something of importance has happened in a person’s life.

Indeed, it can be argued that the present study makes contact with the intersection of IPA and discursive psychology as it is interested in stories that exist in the cultural realm and can be used as a medium for understanding something (Andrews et al., 2000). However, IPA’s primary focus is with an experience in a particular context. It would be more likely to sample people who share an experience, whereas the present study is informed by people of diverse backgrounds and experiences. It also analyses experience as a singular unit in time in terms of how it is connected to other units and reflections on their significance. Whereas narrative inquiry is use to look at the sorts of story structures that people used to make sense of their emotional experiences. The emotional experience that trans and non-binary people have in relation to fostering and adoption is a central aspect of this research.

A third option for consideration was grounded theory; a methodology that offers the possibility of building theories from data, by continuing collection until theoretical saturation is reached (Glaser and Strauss, 1967). Grounded theory sought to legitimise qualitative research as a pseudo-scientific approach, blending characteristics of quantitative and qualitative approaches and offering the first clearly set out structure for qualitative analysis. In grounded theory, data collection and analysis run in parallel as each piece of information is compared and contrasted with other information. Through this constant comparison, it is aimed that similarities and differences becomes clear and information amasses to inductively develop theories which can then be used to predict future occurrences. A major advantage of the approach is that it is a well-established and well-regarded as a qualitative approach that has refined its methodological rigour (Smith, Flower and Larkin, 2009). Using grounded theory as a singular option was quickly discounted because the present study is firmly placed within the exploratory realm and does not have hypotheses that can be drawn upon from previous research.

However, as the study produced some individual findings that could be used to begin generating hypotheses for testing, the viability of a fourth option was explored: mixing narrative inquiry and grounded theory Lal and Suto (2012)). Traditionally, a mixed methods design referred to the combination of qualitative and quantitative approaches (Denzin and Lincoln, 2005). However, Lal and Suto (2012) observed that research increasingly combines multiple qualitative methodologies within a single study. Adopting Swanson-Kauffman’s (1986) terminology, they undertook a literature search for studies utilising a combined methodological approach of grounded theory and narrative inquiry and analysed their compatibility. Lal and Suto (2012) found that in theoretical terms the two approaches are compatible and argue that they can indeed be complimentary.

A qualitative mixed method approach could then strengthen the overall design Lal and Suto (2012). The weaknesses of fragmentation and decontextualization associated with grounded theory can be ameliorated when narrative inquiry is situated and particular focus is woven in. It could be argued that a combined approach gives the potential for research that offers a richer and deeper understanding of a psycho-social phenomenon and that findings could be made accessible to a wider audience. However, Lal and Suto (2012) also caution that a combined approach could result conversely result in the two approaches being used ineffectually. There is also a risk of the study being perceived as less robust even where its detail is well conceived of, where the constraints of a journal prevent full publication of a study’s methodology. This could be true where an explanation of the whys and hows of a mixed methods design are not explicitly explained in sufficient detail to enable a reader to understand and interrogate the design. Full, transparent accounts of a study’s design and methods are an essential aspect of ensuring the credibility, dependability, transferability and confirmability of qualitative research (Denzin and Lincoln, 2005). Ensuring the methodology achieves these criteria is essential to the doctoral research project as it aims to disseminate the results via peer-reviewed publications.

From a methodological position, Guba and Lincoln (2005) argue that it is acceptable to combine methods if they are situated within a comparable paradigm. Carter and Little (2007) supported this view of paradigmatic compatibility and expanded it to assert that the effective combining of methods within a single study can be achieved where the two methods maintain a ‘*coherent epistemological position’* (p. 326). However, herein lies a problem for considering a design that combines narrative inquiry and grounded theory within the present study. Historical paradigmatic issues of a philosophical nature may also come into play, as some purists would reject the epistemological compatibility of the approaches because grounded theory grew from post-positivism and narrative inquiry emerged from a post-modern and social constructionist positionality Lal and Suto (2012)). As its use of narrative inquiry is highly constructionist, it can be seen as epistemologically incompatible with grounded theory as an approach that has objectivist leaning. One could argue then that the coherence required would not be possible.

A counterargument is that the very inception of grounded theory by Glaser and Strauss (1967) serves as proof that researchers from differing paradigmatic backgrounds can come together to create a useful new approach. As a qualitative sociologist, Strauss was highly influenced by the Chicago School and Symbolic Interactionism, whereas Glaser’s background was quantitative, in descriptive statistics. We can also draw comparisons between early inceptions of narrative inquiry and the grounded theory methodology that was developed in the same period. Labov and Waltezky (1967), like Glaser and Strauss (1967), focused in on the structural elements of and functions served by narratives. As such, the form of narrative inquiry emerging at the time can be said to possess similar elements of the fragmentation and decontextualization of grounded theory. However, these similarities are not applicable to the present study’s use of narrative inquiry as it is more heavily influenced by contemporary conceptualisations of narrative inquiry set out by Riessman (1993, 2007; Riessman and Quinney, 2005).

This study takes Riessman’s (1993, 2007; Riessman and Quinney, 2005). open and flexible approach to narrative as a co-created conversation that the interviewer engages the participant in. It prioritises interaction over attempts to neutrally observe data as an outsider looking in. The analysis employed also differs in that it examines how and why a story is told, and for whom. It values context and does not seek to assess sociolinguistics at a micro level, rather to understand the overarching meaning and emotion behind the experiences shared. It focuses on macro level critical turning points in the participant’s life, as it believes these are key pieces of information that narrators offer to help audiences understand their present situation and individual perspectives (McAdams, 2001).

**4.6 Sampling**

In their review, Lal and Suto (2012) found that the sample sizes of narrative research studies varied markedly, from just two participants (Birmingham, 2010) to 600 (Labov and Waltetzky, 1967). Lal and Suto (2012) recommended that sample size should be considered based on the details of the data collection needs of the study. They argue that with narrative inquiry a higher number of participants does not necessarily translate into higher quality research. In-line with a study methodological and thematic similarities, a minimum number of two participants sharing detailed accounts was set (Birmingham, 2010).

An original aim for a sample size of 15 was set as a target because a recent narrative inquiry into social care service provision for trans people found that 15 interviews provided sufficient data to engage in in-depth qualitative analysis, without sacrificing the richness of the personal narratives (Rogers, 2016). Smith and Sparkes (2005) similarly found that 14 participants in their study exploring narratives of hope in men with spinal injuries was effective at elucidating some important themes. Difficulties were encountered in the recruitment of participants; although the recruitment process was kept open three years, LGBT and academic agencies were asked via email and social media to share study fliers/information and a workshop was delivered, only eight people with lived experience and two social workers with experience volunteered to take part. This may in part be due to insider/outsider research factors and research participation fatigue (*see section below*). The small numbers of volunteers are also likely due to a small population from which the sample was drawn. A non-binary adoptive parent interviewed relayed that they believed themselves to be the first successful non-binary adoptive parent in the UK. Indeed, my professional networks had not priorly alerted me to non-binary adopters or foster carers.

Though it is acknowledged that a larger sample size could offer a broader insight into the population under study (Denzin and Lincoln, 2005), a number of 10-15 was evaluated as being appropriate to meet the methodological requirements of the research as described above. The lower end of the aimed sample size was later accepted for the following reasons. Firstly, the limitations of the study as a small-scale exploratory qualitative project are acknowledged. The findings were not intended to be generalisable to or representative a wider population, rather to explore in detail the themes within the sample (Rogers and Ahmed, 2017). Secondly, the known population of trans foster carers and adopters from which the sample is drawn is currently modest in size. The numbers of trans people approaching fostering and adoption agencies are known to be small and there are fewer approvals (Brown and Rogers, 2020). Thirdly, there are issues associated with the media and public influence on trans peoples’ trust of cisgender researchers.

Consultations with trans equality and diversity experts and those with lived experience have suggested that the transphobia that individuals are currently having to endure on a daily basis can cause generalised anxiety and distrust (Bachman and Gooch, 2018). This may explain why in spite of wide dissemination of the study’s publicity materials, the small sample of trans and non-binary people predominantly volunteered themselves when a friend or colleague gave some form of personal recommendation about the study. Fourthly, sampling was impacted by the practical considerations of a small-scale project with time and funding constraints.

Although snowball sampling occurred and was actively encouraged, a purposive strategy was also in place to ensure the selection of relevant people with rich information to share in interviews (Palinkas et al., 2015). Purposive sampling required specific inclusion and exclusion criteria. The inclusion criteria are detailed as follows. Participants with lived experience were required to self-define under the umbrella term of trans (*see Chapter 1 for detail in relation to definitions contained within this overarching term*) and have either been through the process of being assessed as foster carers or adopters or are at the start of considering applying to foster or adopt. Practitioners needed to have experience of working within a local authority or voluntary/independent adoption or fostering service.

Participants included eight trans and non-binary people representing a range of gender and sexual identities who were interested in adoption and fostering or were adopters/carers. There were also two social work practitioners interviewed who I came across as I attempted to recruit trans and non-binary people. Following this, ethics approval as updated to include social workers in the sample and advertisement included a call for social workers with experience of working with trans carers/adopters. No further practitioners however came forward. The data from the practitioners adds an interesting dimension to the assessment section as their stories describe a part of the adoption process that adopters/carers did not have access to.

Participants were aged between 25-70 years old, tended to be well educated, were in employment/study or did not specify their status. Participants represented resided across urban and rural areas of England and Wales and represented a mix of socioeconomic backgrounds. The 'gender identity' column is based on how the interviewee self-defined in their own language. The ‘other personal characteristics box' included information that each participant offered about themselves. As such, the self-descriptions vary based on what participants wanted to share. Many, although not all, included job/activity status, education and sexual orientation. Other identifying information has been removed to protect the confidentiality and anonymity of participants.

**Table 1: Interviewee Characteristics: Trans-identified participants**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Pseudonym | Gender identity | Age | Interview date and type | Other personal characteristics |
| 1 | Alice | Trans woman | 31 | 23.04.18  In person | Prospective adopter. White British.  Lives in rural South East England.  Lesbian cohabiting with partner (cis woman).  Works full-time in energy management.  Completed college apprenticeship. |
| 2 | Sarah-Jane | Transsexual woman | 70 | 29.05.18  In person | Considered adopting, pseudo-adopted.  White British.  Lives in Wales.  Lesbian married to transsexual woman.  Retired but still works as volunteer trans activist.  Degree level education. |
| 3 | Andie | Woman with trans history | 46 | 19.05.18-29.05.18  Email | Been fostering 8 years (short and long-term placements of different aged young people), adopted youngest boy placed, now 5 years old.  White British.  Lives in South England.  Lesbian married to cis woman. |
| 4 | Celyn | Non-binary | 27 | 17.07.18  In person | Bisexual, queer, single.  White Welsh, lives in north of England.  Adopter with 5-year-old child in placement for less than a year, dual heritage, gender questioning. Their child has experienced prior abuse that results in child to parent violence. |
| 5 | Jamie | Non-binary,  Trans/transmasculine | 25 | 12.01.19  In person | Prospective adopter. White American, lives in London.  Pansexual.  Married to cis man.  Disabled – has an invisible disability.  Undertaking PhD full-time. |
| 6 | Ash | Neutrois | 27 | 14.01.19  In person | Prospective adopter.  White British, from low-income household.  Lives in Manchester.  Pansexual. Married to woman with trans history.  Disabled, has PA 27 hours/wk.  Birth son 5 years old, lives with them and sees his dad. |
| 7 | Toby | Non-binary transman. | 25 | 20.0120-29.02.20  Email | Prospective foster carer.  White British, lives in South East England.  Works full-time, degree education.  Pansexual, monogamous, currently single.  Brought up in very religious Christian household on council estate. |
| 8 | Noel | Cross dresser/transvestite | 49 | 27.01.20- 29.02.20  Email | Interested in adoption and fostering.  Long-term partner does not cohabit with.  White British, lives in London. |

**Table 2: Interviewee Characteristics: Social work practitioners**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Pseudonym | Professional role | Age | Date interviewed | Profile |
| 1 | Melanie | Adoption social worker | 30-40 | 17.07.18  In person | BAME, British, cisgender, social worker.  Adoption 1-year, previous child protection work 2 years |
| 2 | Amy | Senior practitioner | 30-40 | 17.07.18  In person | White British, heterosexual, cisgender, social worker,  Worked in adoption since 2009 (local authority), moved to voluntary adoption agency in 2015  Experience with lesbian, gay, single adopters of different ethnicities. |

**4.7 Recruitment**

As discussed in the literature review, it was important for the study to explore the views of some diverse gender identities; including trans men, women and participants are non-binary (Jenkins, 2014). It was also important to include the views of some participants at the intersection of minoritised groups based on gender, ethnicity, class and (dis)ability. This is because there can be a greater complexity of issues for those with multiple protected characteristics in addition to gender (LGBT Foundation, 2017). A desire to include these individuals is also due to reports that their representation is negligible within the existent body of research on trans people’s social care experiences (Rogers and Ahmed, 2017).

Participants were required to be over 21 (the age required to apply to foster, adopt or qualify as a social worker in the UK). They needed to speak English and, at the time of interview, to reside in the UK. This is because the research focuses on adoption and fostering practice within the UK. While it would be interesting to engage in comparison between UK practice and practice in other countries, this was not within the scope of the present study. Though it is acknowledged that a greater diversity of sample could be achieved by recruiting participants who do not speak English, because the sole researcher for this project was only able to communicate in English, the semi-structured interview method would not be achievable without employing translation services. This was evaluated as being problematic firstly because the employment of such services could reduce the flow and effectiveness of the interview technique. Secondly, it could contravene the confidentiality measures employed, whereby only the researcher and PhD supervisors were given access to the full data set. Thirdly, incurrence of additional costs would be problematic as there was no funding allocated to the project and any project costs were researcher-met.

Participants were recruited via electronic and paper posters, fliers and social media posts. Focused recruitment activity was undertaken via advertisement by agencies supporting LGBTQ+ people more generally, who agreed to send out details of the study via social media and/or email shot to their group lists. Upwards of 50 groups committed to the advancement of rights for trans people were contacted: ranging from advocacy groups, health and social care services, social support groups and research groups. Out of these, 10 replied and agreed to support the dissemination of the research information. This was done via email shots, newsletter and posts on websites. Those who were interested in taking part emailed to express interest and received participant information and a consent form in response (*see Appendices 3-6)*. A wide-reaching advertising strategy was appropriate for studying trans people’s experiences because sampling from this group may be difficult due to the relatively smaller size of the trans population, as well as the social barriers to participation that discrimination can put in place (LGBT Foundation, 2017). In addition to the sample population being hard to access, the private family context that adoption and fostering issues exist in may make this effect more-so (Wallace 2005). Through utilising various channels of advertising and encouraging an open sharing of posts and fliers, the sampling strategy hoped to disseminate the study information and contact details widely enough to enable potential participants to view the details and self-select whether they were eligible and if they wished to take part.

The small response indicated that the number of people reached who were both eligible and willing to take part was low. A limitation acknowledged here is that there is no way of establishing the reach that the study advertisement had. However, the sharing of posts by larger trans support agencies indicated that views would be in the thousands. Therefore, it was surmised that the study flier was being viewed but resulting responses were low. I wondered if this could be due to wariness in relation to myself as an unknown, non-trans researcher and the reality that many trans people still live in stealth to protect their physical and emotional safety (Beauchamp, 2019). I attempted to navigate this difficulty by establishing in-person links at trans-specific forums; offering the opportunity to meet me and ask questions. As part of the sample and recruitment strategy I thus I offered to attend drop-ins for trans people's support groups or meetings to discuss the study’s rationale, objectives and methodology and answer any questions potential participants may have (Allen, 2012; Rogers, 2016). Responses from groups regarding drop-ins were however similarly low and perhaps due to the perception that a non-trans researcher attending a safe space for trans people could be invasive (Beauchamp, 2019).

I delivered one workshop at the LGBT Foundation, in-line with a media themed day they were hosting, exploring the influence that the media has had on fostering and adoption opportunities for trans people. Following the workshop, attendees were invited to take a participant information sheet and stay behind if they would like to talk in private about taking part in the study or to exchange contact details to arrange an interview. Six trans people with an interest in adoption or fostering attended the workshop and engagement was good. However, attendees wished to move on to further workshops after its conclusion and I did not receive any follow-up contact to take part in the study.

The sampling strategy was amended early in the data collection process (with a change to ethics approval) to include social workers who have experience in supporting a trans or non-binary carer or adopter. This change occurred when I received contact from two workers who had been supporting trans carers/adopters. Due to their support role, it was evaluated that their perspectives could support the study’s aims to access the experiences of trans people adopting and fostering. While the workers’ experience was not lived as they were not trans adopters/carers, their experience in the social work role assessing and supporting trans adopters/carers was direct. Further recruitment materials all specified that workers with experience could be interviewed as well as trans people with lived experience. I utilised my professional networks to inquire if any further social workers had experience of trans carers and were willing to be interviewed, however, no further social workers volunteered throughout the data collection period. Anecdotal information gleaned through discussions with colleagues suggested that social workers were not aware of having received any expressions of interest from any potential adopters/carers who were trans or non-binary.

A further attempt at increasing recruitment involved the lengthening of timescales of the recruitment and data collection phases. Recruitment remained open and active from the point of the original ethics approval being granted in March 2017 until the point at which the data analysis needed to be finalised for writing up in April 2020. As such, the data collection phase of the study remained active alongside the data analysis phase to maximise responses. This flexible, three-year data collection phase was successful in including two further participants in early 2020. While it is acknowledged that a larger sample could offer increased insight into a greater variety of perspectives, the final sample of ten allowed sufficient appropriate interviews to provide in-depth accounts which addressed all of the research questions.

**4.8 The interview method of data collection**

Semi-structured narrative interviews were used with all participants (*see Appendix 7* for interview schedules). Brannen (1998) suggests it is important, especially when undertaking sensitive research, not to pre-judge the research problem by defining its boundaries too strictly. A semi-structured interview is thus appropriate as it does not assume full prior knowledge of the participants’ experiences (Lee, 1993). This method seeks to allow participants to express their own subjective reality by selecting subtopics relevant to them (Brannen, 1998). A flexible structure of topic prompts was used to guide participants to consider and select stories and information that relate specifically to adoption and fostering (Bauer, 1996).

One-to-one interviews align with the feminist, poststructuralist aetiology of the study as they are a critical tool for unearthing the hidden ideas of ordinary people who have experienced subordination of voice (Anderson and Jack, 1991). They seek to encourage the development of new formulations and frameworks by enabling doubt to be cast on the established and socio-culturally accepted theories of the time (Reinharz, 1992). Though a comparison of in-depth interviews and focus groups highlighted that focus groups can be more cost effective and require less time to reach thematic saturation levels (Namey et al., 2016), they were deemed to be less appropriate due to difficulties in moderating them to avoid some narratives being prioritised over others (Barbour, 2018). Another issue is that the aimed to give voice to individuals who have been marginalised and have experienced discrimination. As such, it was identified that participants should not be asked to share potentially emotive personal stories in front of a group (Dickson-Swift, James and Liamputtong, 2008).

Due to the constraints of the doctoral thesis and my availability as the sole researcher alongside employment, interviews in person took place on a one-off basis. I would have liked to extend the narrative inquiry method to include visual representations of peoples’ stories and experience, whether self-drawn, using photo books, video or another medium (Bach, 2007). Bach (2007) argues that researchers are increasingly making use of multiple mediums to enable participants to add different dimensions of representation to their stories. These can prompt them to consider the way their own identities and those of friends, family and others mutually influence each other. However, practical constraints again limited the project’s ability to be flexible in relation to how participants wished to tell their story. As such, only spoken or written material was collected and the potential for incorporating visual expressions of personal stories was ruled out. The possibility of telephone interviews was considered as a way of enabling verbal data collection in a way that could be more convenient to some participants. However, this method was also discounted due to a lack of technical equipment that would enable the successful recording and transcription of verbal data in this manner.

To enable a degree of flexibility in response to the individual needs and preferences of participants, a series of email interviews were offered as an alternative to a one-off in-person interview. Email interviews have been shown to be an effective method of gathering data offered from an increasingly geographically disparate population, by previous narrative research exploring sensitive topics with trans people (Rogers, 2016). The present study employed a similar protocol of developing rapport with potential participants as they find out about the study and then allowing a maximum of 3 months for an email exchange of questions taking a similar format to the verbal interview; using the interview schedule as a guide and following the lines of inquiry and stories that the participant wishes to tell about a given topic. Once completed, each email interview was closed by informing the participant that the interview is finished and thanking them for their contribution.

In terms of the preparation for the interviews, Minister’s (1991) practical guide to narrative interviewing was used and the following actions and styles were employed:

1. I prepared for the interviews by studying the potential socio-historical contexts that could affect trans people’s lives as well as the professional context to adoption and fostering social work.
2. Before commencing the interview, I began by revealing my own investment in the research.
3. I aimed to develop rapport and facilitate a trusting, comfortable context.
4. I aimed to respond to different people’s individual communicative styles, rather than imposing my own.
5. My style aimed to avoid an interrogative ‘mining’ of interviewees for information, rather a conversational style was used.
6. I allowed participants to ask questions and responded to them.
7. I sought to remain aware of the politics inherent with co-creation of knowledge and shared meaning-making.
8. As such, I shared some of the interpretations of meaning, made through the interview.

Interview venues were negotiated with the participant based, as far as is reasonably practicable due to time and cost constraints, on their needs and preferences. Environmental and social factors have been considered based on the argued premise that participant comfort can influence the honesty of answers given (Sharkey and Larsen, 2005). It can be argued that research more accurately measures what it seeks measure to when a researcher allows participants to take part in a manner and environment that is familiar to them (Avis, 2005). A such, participants were offered the option of email or face-to-face interviews that could take place, within reason in terms of practical and risk considerations, at a venue of their own choosing. Selected venues have included a participant’s home or hotel, at a community centre and offices of an organisation the participant is a member of (see risk assessment for further detail). Public spaces such as cafes could not be offered as information shared would not be kept anonymous, however have been used as informal meeting places to discuss the details of the study so that a potential participant could feel comfortable meeting and take time to decide if participation is right for them.

As the case could be with any participant who is given a researcher’s contact details, there is potential for participants to try and instigate further communication because they are struggling with the ending of the research relationship or have perceived/desire a blurring of lines between a research and therapeutic relationship (Hyden, 2013; Dickson-Swift, James and Liamputtong, 2008). I strove to prevent such perceptions and expectations by clearly setting out the parameters of the interviews from the outset, sensitively reminding participants of these if needed during the study and reiterating them at the close. The referral information for signposting sheets in *Appendix* 5 were given to all participants and they will be directed to this for information signposting to organisations, groups, helplines and therapy services they may wish to access following their interview.

The study uses Briggs’ (1986) and Mishler’s (1986) conceptualisations of interviewing; seeing it as a reciprocally communicative event where certain narratives can be encouraged or discouraged by the researcher. This is because the researcher can also be seen as a subjective participant in the research; involved in the shaping of the narrative of the individual in focus.

The interview questioning technique used in the present study included beginning with more general and non-directive questioning and incorporating a structure of questions as open-ended prompts. This hoped to encourage personal views but also focus attention on a topic that helps participants to articulate their personal testimonies. However, the use of static questions was discounted in favour of topic prompts followed by active listening and the following up of the idiosyncrasies of a conversation (Anderson and Jack, 1991). This was useful in encouraging narratives that were ‘interviewee-oriented’ not ‘instrument-oriented’ (Reinharz, 1992, p38). This approach held the advantage of allowing the emergent conversations to seem chaotic, circular or lacking relevance to the researcher at the time but ensuring the researcher did not try and immediately delineate stories. The interviewee’s train of thought was not discouraged. Rather, the research took a position of valuing uncertainty, complexity and less obvious connections of meaning in people’s expressions of their experience (Coates, 2003).

With informed consent, all interviews were digitally recorded, and data then transcribed by the researcher. Consideration was given to whether the interviews could be videotaped instead, as Charon (2006) argues that video provides an effective method for capturing paralinguistic communication features for analysis. Mishler (2004) concurs that video allows analysis at a micro-level, down to eye gaze and body posturing. However, due to the potentially sensitive nature of the research, audio taping was selected as appropriate to allow for narrative analysis while reducing feelings of invasiveness (Hyden, 2013). Gready (2013) pointed out that interviewing that acts to incite over-sharing or leaves a participant with a feeling of regret at sharing is unethical. As such, member checking sought to prevent instances of a participant verbally sharing what they did not wish or intend to, and then being unable to retrieve their ‘stolen’ story.

In line with Clandidnin and Connelly’s (2000) approach, a research journal also forms part of the data collected as it is viewed as a narrative to be studied as part of the educational experience of conducting the study. The planning and execution of the study involved an element of the freedom to experiment with the aim of progression through processes of purposeful learning characterised by trial and error (Dewey, 1938). The diary not only documented the experience and different directions taken as a result of what was learnt, but also explored the social and interactive processes that influenced me personally and professionally to shape the study.

**4.9 Data storage and confidentiality**

Written and verbal explanations of the study’s overall aims, justification, methods of collection, analysis and dissemination were given electronically or by paper in person to interested parties. Consent forms and data in hard copy have been stored securely in a lockable file or cabinet in the researcher’s office at her home. Electronic forms have been stored in a secure file.

Consideration was given to offering participants the option of a pseudonym or to use their own name. This was in recognition of participants’ ability to decide for themselves whether anonymity was indeed desirable or if open acknowledgement of their contribution would be preferable. However, it was decided that a blanket policy of pseudonym use would be employed as a precautionary measure in order to protect participants against any unanticipated implications that dissemination of the study’s findings could bring either now or in the future. Specific consideration was given here to the possibility of participants adopting or fostering a child for whom anonymity and confidentiality of family information is essential to keep the child and family safe.

**4.10 Data analysis: transcription and coding**

**Thematic analysis**

Thematic narrative analysis was an appropriate method of data analysis because the research aimed to analyse the narrative materials of participants’ life stories from a constructionist perspective (Vaismoradi, Turunen and Bondas, 2013). The flexibility inherent to thematic analysis has attracted criticism on the grounds that it may lead to data inconsistencies (Nowell et al., 2018). Content analysis could offer some advantages over thematic analysis for exploratory work on potentially sensitive phenomena (Vaismoradi, Salsali and Mark, 2011) that enables some quantification of themes (Gbrich, 2007). However, thematic analysis has the distinct disadvantage of risking missing out some complexity and contextual information (Braun and Clarke, 2006). I also considered undertaking a structural analysis that examines how actors are embedded in social structures and networks may offer a useful perspective, however this analytic method is presumptive that social behaviour is not due to personal attributes (Herz, Peters and Truschkat, 2015) and therefore I ruled this out.

Thematic narrative analysis enabled the identification of codes and themes that emerged from the narratives, keeping them situated within relevant contexts and enabling the integration of manifest and latent contexts (Fraser, 2004; Andrews, Squire and Tamboukou, 2013). This method was suitable because the analysis sought not only to provide descriptors and representations of the textual information within the data set, but also to offer interpretations of what was important to the research question (Braun and Clarke, 2006; Spencer, Ritchie and O’Connor, 2003). Due to there being little existing research on the topic, inductive analysis was used to derive categories directly from the interview data (Hsieh and Shannon, 2005). Though it was hypothesised that the responses would provide information about internal and external barriers and enablers to adoption and fostering, the analysis did not operate from an assumption that data would necessarily fit within any anticipated framework. Rather, the research embraced the view that analysis must be responsive to the particular data set (Sandelowski and Barroso, 2007).

**Six phases of narrative analysis**

1. **Active listening:** The study implemented an approach to narrative analysis that was guided primarily by Fraser (2004) and also used elements of Holloway and Jefferson’s (2000) approach. Fraser’s (2004) view of narrative analysis bears more elements of artistry than science; it seeks to identify threads and weave them together to make meaning of stories. Following a set formula of line-by-line analysis would hamper a researcher’s ability to engage in this weaving process. Instead of discrete steps, Fraser offers phases of analysis but asserts clearly that they do not need to be sequential and should be modified to fit different studies. The first phase is to listen to the audiotapes as you would a radio show, avoiding intellectualisation and instead experiencing the emotion of them; noting points of agreement and disagreement and first thoughts about how the conversation unfolded. Anderson and Jack (1991) recommend making notes about the place, time and emotional climate of the interviews as they can affect ensuing interpretations. As such, information was recorded in research journals along the process.
2. **Data transcription:** The second phase of data analysis in this study was data transcription. All transcription and analysis was undertaken by the researcher to enable her to familiarise herself with the data, note down initial ideas and absorb herself within the narratives (Braun and Clarke, 2006). From transcription and familiarisation, time was set aside for multiple re-readings and full immersion to get a sense of the data as a whole (Polit and Beck, 2003). While the transcription was done solely by one researcher, member checking was offered to participants, but was not required where they did not have time or desire to do so (Fraser, 2004). Each person could read their transcript to confirm it was an accurate representation of the conversation and experiences or ask for some excerpts not to be changed or deleted (Rogers, 2016). This enabled participants to retain a sense of control of their stories and increased the reliability and internal validity of the data (Mishler, 1991; Riessman, 1993).
3. **Interpreting individual transcripts:** Phase three involved the interpretation of individual transcripts; noticing the types of story, directions they are flowing in, what contradictions and circular motions where are, and how the tone of voice and body language is in step or otherwise with the statements being made (Fraser, 2004). This process was aided by the verbatim transcription method that avoiding ‘cleaning up’ data as it would lose important utterances, pauses, silences and inaccuracies of speech. The main challenge associated with this phase of analysis was how to organise long chunks of narrative into specific stories, especially where stories flow into others or the narrator hops between topics, creating stories that are not discrete. This study did not make use of chronologizing narrative as it can create an artificial order and decontextualize complex, interwoven themes (Riessman, 1987). Instead, I divided the talk into sets of ideas expressed and scenes in which a plot is unfolding, naming stories by themes (Fraser, 2004). The coding process was supported by the use of the electronic coding programme NVivo, which helped to organise the large volume of data into coherent themes and sub-themes via the annotation of codes and nodes.
4. **Scanning across transcripts:** Following on from this, phase four necessitated a scanning across different domains of experience to prevent the researcher from fixating on one dimension (Fraser, 2004). This is done by looking at intrapersonal aspects of stories where a narrator engages in self-talk or confessional, as well as interpersonal aspects, often denoted by the reporting of another’s speech (Simon, 1996). Here, Holloway and Jefferson’s (2000) approach was used for analytical purposes as it has clear links to both sociology and psychoanalysis within psychology. It views participants as subjects who are both positioned within surrounding social discourses and motivated by unconscious processes of investment and defence to promote personal wellbeing by reducing anxiety.

Bamberg and Andrews’ (2004) idea of counter-narratives was also useful to identify narratives that took a positional opposite, in tension with a main category. Here, narratives of resistance are also considered, where counter-narratives (e.g. transnormativity – *see Chapter 3*) to a dominant narrative (e.g. gender normativity) are engaged with in an attempt to overthrow the dominant narrative. Where there are multiple, contradictory voices and counter-narratives that develop as someone speaks about their life, researchers must attend carefully to how they represent a person’s ideas and perspectives within written pieces (Andrews, Squire and Tamboukou, 2013). The fluidity and multiple layers of relational categories are acknowledged as what is dominant and therefore also what is counter, is forever shifting (Bamberg and Andrews, 2004).

1. **Collating themes:** Holloway and Jefferson’s (2000) methods of data production and analysis are built upon principles of free association and as such they argue against computerised forms of analysis as they fragment accounts and can miss relevant subtle meanings that are tied into culture, because they analyse based on language. Analysis within this study then sought to identify a theme and trace it through the text, identifying and collating evidence while scrutinising whether this indeed can be deemed as evidence.

Reflexivity was essential here because the approach acknowledges the researcher as having a culturally located view and troubles whether there is a level of objectivity that could enable another person to come to a similar interpretation. Cultural aspects of stories refer to cultural conventions of larger groups and suggest to us the dominant discourses that are assumed to be common sense and structural aspects point to claims made in relation to the influence of social systems and public policies (Mullaly, 2002). This includes modes of social organisation such as race, class and gender. Leading on from this is phase five; linking personal with political. Here, deliberate attention is given to poplar discourses mentioned (Riessman, 1990).

1. **Comparing and contrasting:** Phase six involved examining the commonalities and differences that exist between participants. Here a similar process was followed to the analysis of individual transcripts, whereby the style, tone, content, connecting plots and theme clusters were compared and contrasted (Fraser, 2004). The core aspects of narrative and thematic analysis were merged to allow an identification of the main themes that were co-constructed within participants’ stories. Importantly, though alignments with initial assumptions of the research are to be considered, so too are inconsistencies and surprising findings (Worthington, 1996). Phase seven is the process of converting spoken narratives into academic writing. Here the aim is to keep checking back and redrafting to try and produce a written analysis that is both coherent and credible. In order to enhance credibility, early analyses were circulated with the participants for their responses and to try and ameliorate the potential for analytical blind sports.

*(See the coding manual in Appendix 8, along with coding and theming tables and maps in Appendix 9 for further detail regarding the generation of codes and themes).*

**4.11 Interpreting narratives**

**Narrative identity**

The way a person reconstructs their autobiographical past and creates an imagined future is relevant to a person’s narrative identity individually and in relation to family (Singer, 2004). McAdams and McLean (2013) argue that narrative identity is internalised and constantly evolving in order to give a person meaning, purpose and unity in their life. They set out several coding constructs that the present study considered when trying to understand a person’s narrative identity; agency, communion, meaning-making, suffering, redemption, contamination, exploratory narrative processing and coherent positive resolution. Where specific stories are privileged, the audience is given insight into the preferences of the individual. For example, a need for control can manifest in storying one’s own agency by highlighting accomplishments and self-mastery. A desire for communion is verbalised by stories of interpersonal connection citing intimacy, caring and belonging. Coding for meaning making involves considering the degree to which the protagonist gleans messages and learns from experience. Stories of suffering can emerge in different ways with interesting narrative results.

**Making meaning**

When positive events dramatically change to become negative to the extreme so that negativity engulfs, destroys and erases a previously positive story. The way suffering is then dealt with can impact upon the story’s conclusion. The experience can be explored in depth at a cognitive level, considering details of what was felt, how and why the negative event occurred, what the event did and what it could mean for the overall life story. A second phase is often more behavioural in nature, with the narrator articulating and committing to positive resolution of the event. Here, they may choose a tale of transformation, exploring what they have learnt, resolving the tensions and contradictions to bring the story to a close. A narrator may in fact set up a story of redemption in which a ‘bad’ event led to a positive outcome. Adler’s (2012) longitudinal study exploring the experiences of people undergoing psychotherapy treatment supported McAdams and McClean’s (2013) ideas. Adler’s (2012) findings suggested that high levels of agency and redemption themes within stories, whereby clients battled their symptoms and emerged victorious, could be linked with improved mental health.

In order to help understand some of the themes that could impact upon trans and non-binary people’s lives, several analytical lenses were employed to make sense of the research findings *(See Chapter 3: Theoretical frameworks for further detail)*. The research attends to the linkage between knowledge and socio-historical structure (Andrews, 2007). As Cherry (2000) points out, there are no truths to be found, only perspectives. People can become so invested in a perspective that it can act like a supporting wall; so central to, depended on and enmeshed within its surrounding identity structure that it cannot be easily explicated (Cherry, 2000). It is therefore important for the analysis of the study to draw upon a range of potential explanatory sources to seek to understand how and why participants’ perspectives were constructed as they were, without limiting interpretation with strict boundaries (Riessman, 1997).

Interpretation of stories can present further difficulties as what a participant says is not always what they mean as humans have natural mechanisms for psychological and social defence. As such, Holloway and Jefferson (2000) looked at how we analyse the defended participant. They argued that we need to look for evidence to interpret excerpts by considering them in the context of the whole. In some ways then, it could be argued that all narrative analysis includes elements of psychoanalysis, as we may need to consider the ways in which psychological defence mechanisms affect what a participant does say, as well as what they may be avoiding voicing. Along a similar vein, Woodiwiss (2017) cautions against a reliance on traditional tools for narrative analysis that infer falseness or lack of authenticity in stories. Rather, she takes the view that all stories are constructed partially and variably at different times, for different reasons.

**Reflexivity in analysis**

This account details an example of the reflexive process undertaken throughout the data analysis. It focuses on excerpts from Sarah-Jane’s narrative:

*And I was lucky that I did a student apprenticeship with BP, who not only decided which university I went to but actually paid me a small salary… It wasn’t a lot; in those days I got paid £5 a week, but my rent was only 3 guineas. I had £2 left after that, and I think I gave my mum a pound. Because in those days a pound was a lot of money. (Sarah-Jane, trans woman interested in adoption)*

The difference in time period was something that Sarah-Jane indeed wished to draw attention to. The above quote detailing change of monetary value was one such example of this. This was done in a way that demonstrated Sarah-Jane’s reflective capacity; looking back on the expanse of change that had occurred. The tone used was not one of sadness or anger, however, rather a noticing of and perhaps appreciation of change. There was a light-heartedness of tone that accompanied Sarah-Jane’s reflections on the differences in society today. We both laughed at the Sarah-Jane’s description of her pay in which she roughly equated the guinea with £1 of today’s money. The description of what each sum bought showing the huge change in value that the pound has experienced over the last 50 years. Our shared response of laughter at this disparity of monetary worth highlighted to me both the vastness of economic change over time as well as the potential for difference in assumed shared understandings that different generations can have.

Another occurrence during the interview illuminated the influence that temporal location can have on a person’s family narrative. Sarah-Jane told me why she did not like being addressed plurally by the words ‘guys’ or individually as ‘hun’. In this example, there were generational differences in understanding related to a common word that affected the way its meaning was interpreted. I explained to Sarah-Jane that I often used the term ‘guys’ to address a group comprising of any gender. However, Sarah-Jane explained that when she had grown up, ‘guys’ was a term used solely to refer to men. As such, she did not like to hear the address in reference to herself and regarded it as inaccurate when used in reference to other females. This consideration got Sarah-Jane thinking about another term she knows to be used differently by my generation than to hers; ‘hun’. I outlined that within my frame of reference, ‘hun’, was often used as an informal term of endearment for friends, but that I knew some people (especially those of an older age than the person using the word) could interpret the address as patronising or overfamiliar. However, I was surprised to find out that Sarah-Jane in fact disliked the word because to her ‘the hun’ were originally known to be violent German soldiers who invaded during the war.

These examples of misunderstandings did lead me to question whether my interpretation of Sarah-Jane’s data was could in parts be too far removed from its intended meanings. However, in considering this issue as I re-read her transcript, I was reassured by the manner in which Sarah-Jane sought to highlight these potential pitfalls in shared understanding for me. As an older adult privy to the differential sets of understanding that occur over generations, Sarah-Jane had an awareness of the potential areas of intergenerational misunderstanding. Further, her willingness to highlight these where she felt I may miss differences in meaning was an aspect of her support that I found to be valuable in the research process. I believe this increased attention to temporal differences in understanding added robustness to the analytical methodology both in terms of participants highlighting known differences and also for myself in identifying potential cites of misunderstanding in this area.

It was Sarah-Jane’s attention to highlighting intergenerational differences in understanding noted in other topics covered in the interview that brought my attention to a sentence in which she did not seek to clarify any intergenerational difference in understanding for me. This suggested then to me that the sentence below about having children young was not intended to reflect a commonly held culturally belief of the time, rather a personally held view of Sarah-Jane’s. Here, in relation to the decision to have children straight away:

*It’s just that, there’d be time left after the children, rather than having it before, have it afterwards. (Sarah-Jane, trans woman interested in adoption)*

There is an element of vagueness to this brief statement that could allow its interpretation in opposite manners. Firstly, it could be implied that Sarah-Jane and her partner discussed having children young because they wished to cordon off some time later in their lives in which they were done with the task of raising children to adulthood. This could be time allotted to them as a couple for leisure, for example to travel or pursue joint hobbies. This statement could also refer to time allotted for induvial pursuits in leisure, career or another dimension of personal or social life. However, in other instances throughout the interview, Sarah-Jane offered full explanations of beliefs or cultural practices that were common to the time period, but that I may not guess at as a 32-year-old who has grown up within different dominating discourses.

In light of knowledge of Sarah-Jane’s transition and relationship with Isla, this comment could be viewed as suggesting that Sarah-Jane was electing to have children in one of the early stages of her adult life, immediately after university, in part because of her not yet disclosed desire to attend to exploration of her gender identity. The way Sarah-Jane describes there being ‘time left after’ and a wish to ‘have it afterwards’ indicates time that she will have to devote to herself, with the implied juxtaposition being that until this point her time and attention will be focused on children over and above her own needs. The latent content of the prose can as such be seen to contain an inferred plan to begin a process of transition after the children have grown up.

**Locating the researcher within the socio-political climate**

In 2005, it was argued that the UK’s strong socialist background with its membership to the European Union and commitment to universal free health and social care services, distinguished it from the harsher consumerist marketisation of the US (Riessman and Quinney, 2005). In a profession attending to the ‘here and now’ as well as ‘when and where’ beyond an individual, Riessman and Quinney (2005) argue that the ground of social work practice is fertile for growing the body of narrative research. However, they also noticed the increasing push for ‘evidence’ being directed by the conservative agenda and point out that where the flow of time and funding is quashed by those in power, it becomes more difficult for students and researchers alike to utilise the methodologies they may select as most appropriate to address a topic or question.

It is as such with personal and professional gratitude, and also reflexive interest, that I reflect on the very different way in which I was trained as a doctoral student. As a self-funding student with no institutional support, I had no external pressures to select any specific topic or to conduct the research in any specific way. I did indeed have an internalised bias towards including some form of quantitative element in my study due to the embedded belief that the results could not be published in an academic social care journal nor could they have impact, unless some ‘hard evidence’ was offered (Riessman and Quinney, 2005). However, my primary supervisor guided me to question my assumptions and resist positivist pressures that were instilled in me through my earlier Psychology degree and later Social Work masters, for we can be blinkered by the discipline we come from (Riessman and Quinney, 2005).

**Feminist perspectives in narrative analysis**

This study encompasses Woodiwiss’s (2017) feminist perspective that we are all part of a social and political context and that this affects what aspects of our identities and life histories we choose to share, with whom, and for what purpose. Due to the pervasive osmotic effects that the dominant political discourses of the time can have on both participants and researchers alike, we need to be aware of the potential for silencing those voices and stories that do not fit. To illustrate this point, Woodiwiss (2015) explored the ways in which narratives of childhood sexual abuse can be adopted even where evidence or clear memories of it do not exist. Her analysis explained how this could be the result of the current dominance of a therapeutic culture.

A dominating therapeutic discourse can lead us to believe that unhappiness or dissatisfaction in life must be due to damage caused by childhood trauma rather than other situational factors (Woodiwiss, 2015). Here narrators can take on the role of victim in their stories and assume that a plot of healing and change is needed and will ultimately lead to happiness. Woodiwiss (2015) found that where happiness did not result, the narrator could reject the abuse story entirely, whether it was present or not, by selecting a counter-narrative of false memory syndrome. She argued that this is due to the belief that an acceptable alternative narrative does not exist to select. Dissatisfaction could not be attributed to bad luck or a person’s own life choices; the victim role had to be maintained so was transferred to position the therapist as the cause of their abuse.

**Reflexivity and researcher impact**

This section makes transparent the potential impacts that I may have had on this research. It attends to the ways in which my own personal and professional history has necessarily impacted on the inception, design, conduction and analysis of the research that has been undertaken throughout this doctoral project (Andrews, Squire and Tamboukou, 2013).

**Cis researchers exploring trans issues**

A particular reflexive point that was continually revisited during my project was that the impact of a cis researcher (me) exploring trans issues. Galupo (2017) examines the ways in which personal experience and lack thereof can influence research. She explains that when conducting research into sexuality, her own personal ideas and wonderings will often come to the fore as she considers research need, design and analysis. However, when she conducts research exploring trans issues this is done from a distance and without intimate knowledge of trans experiences that are often positioned as different to celebrated cisgender norms. Galupo asserts that her experience as a cis woman directs everything from the way research questions are formulated, design choices are made, interview questions phrased, and data analysed.

There are further issues concerning the historical tendency of trans people to be subjects of research rather than researchers (Veale, 2017). Veale (2017) assert that visible trans researchers demonstrate trans people’s capability and ensures that research is directed at issues of greatest concern to trans people. As a researcher who is not part of the LGBTQ+ community, it could be argued that I am not the best person to conduct research into LGBTQ+ lives. Indeed, to exemplify, Gilliam (2004) implores LGBTQ+ people to consider fostering for LGBTQ+ youths. He argues that LGBTQ+ carers are best placed to understand and support some of the specific challenges that LGBTQ+ youths are likely to go through, such as understanding their identity, coming out and dealing with discrimination.

However, I also sought to avoid contributing to an ‘othering’ of trans people. The process of trying to understand an individual’s personal story requires exploration of multiple facets they view as important rather than imparting a researcher-driven priority (Andrews, Squire and Taboukou, 2013). Participants may wish to construct their meanings extemporaneously based on multiple dimensions of gender, sexuality, ethnicity, class and a multitude of subcultural influences not simply the dimensions identified by the researcher for sampling purposes (Alarcón, 1990).

The case could be made that a trans or non-binary person with lived experience of the adoption process may be better placed (than a cisgender social worker) to conduct this research. Wang and Geele (2015) may argue that a trans adopter or foster carer has insider knowledge that could guide them to ask the right questions in the right way to stimulate relevant and credible responses. However, Bishop (2005) unpacks concerns that as an insider, a researcher may possess inherent bias. This can exist at the point of analysis or as part of the dynamic interpretation that goes hand-in-hand with the co-construction of meaning that is inherent with narrative research. Bishop argues that insider researchers can be too close to a topic and too enmeshed within its subcultures to enable the asking of critical questions. As such, it is argued that I am a suitable interviewer because I possess knowledge in relation to adoption, fostering and gender diversity but am not currently a member of any of those groups.

Bernstein Sycamore (2006, p.17) writes of the way *‘academics appropriate anything that they can get their hands on – mostly people’s lived struggles, activism and identities – and then claim to have invented them’*. Gready (2013) further highlights that participants who have been interviewed by a skilled and experienced interviewer can leave feeling as though their story has been stolen because they have shared more than they wished or intended to. However, the narrative inquiry methodology sought to engage in co-creation of participant stories, an interactive process through which researcher and participant create meaning together. An example of this:

**Acknowledging cis privilege**

I acknowledge my cisgender privilege; the ways in which I lack problems in life because I identify as the gender which was assigned to me at birth (Galupo, 2017). Cisgender privilege means I have not routinely experienced verbal or physical abuse when using public toilets or other gendered shared spaces, I have never had the validity of my gender questioned, been deadnamed, misgendered or had strangers interrogate me about my genitals or sexual practices. I have not been through extensive physical and psychological examination in order to receive the medical and social care I need (Serano, 2016). Without this experience, I cannot and do not claim to understand what life is like for trans people, rather I set out the limitations to my understanding of trans lives (Galupo, 2017). I invite any cis readers to connect with and accept the idea of being privileged neither as a vehicle to create power and segregation or an unwanted influence of power and the associated shame of holding it. Instead, I would direct readers to consider cisgender privilege in-line with Serano’s (2016) explanation, that the concept serves as a tool to help a majority group notice the otherwise invisible advantages they are receiving as compared to the minority group.

The issue of cis privilege was considered in relation to each aspect of the research process, as the norms I relate to gender may be influenced by my cis identity and reflect different priorities and methods to those a trans person may select (Galupo, 2017). The powerful and wide-ranging privilege that being cisgender provides within wider society (Spade, 2002; Bernstein Sycamore, 2008; Enke, 2012) could affect the research relationship too. One such example is in rapport building in the research relationship (Dickson-Swift, James and Liamputtong, 2008). It is possible that participants may have felt more comfortable interacting with a researcher who also defined as trans, or who had lived experience of adoption or fostering as an LGBTQ+ person. Indeed, Holloway and Jefferson (2000) purport a general rule of choosing a male/male or female/female interviewer/interviewee combination to ‘*minimise the defensiveness brought on by sex differences’* (p31). While some gender matches naturally occurred where I was interviewing women as a woman researcher, I also interviewed men, trans masculine and non-binary people.

I was aware that in our society, those who are gender diverse have too often been ‘*the punchlines for jokes in a bully culture’* (p.3, Bornstein, 2013) and at the time of writing there are ongoing voracious exchanges taking place on Twitter, and other social media platforms between trans people and their allies and trans-exclusionary radical feminists (TERFs). Further, Currie and Maclean (1997) found it advantageous for female participants within a domestic violence study to speak to male interviewers and suggested the fear of judgement may be reduced where the interviewer has a different gender identity. While, as stated above, my gender aligned with some participants’, my gender history differed as I’m cis. Applying Currie and Maclean’s logic to this study, consideration was given to whether there may be advantages to a cis researcher interviewing trans people. It could be that some people do not have the energy to continually resist gender norms and assimilation in the politically activist way that writers such as Bernstein Sycamore (2008) advocate. To freely admit any apathy could be more difficult when conversing with a trans than cis individual, as a trans person is more likely be personally affected by the reduced collective political action that Bornstein and Bergman (2010) argue harnesses the greatest power against gender oppression.

In this study, the concern in relation to cisgender privilege was also compounded by my having a privileged role as a social worker on the gatekeeping side of the fostering and adoption process. This could mean participants were aware that I held a relatively large amount of real or perceived power in comparison to themselves as carers or adopters, particularly prospective applicants. In an effort to try and minimise the impact of these power differentials, I tried to remain aware of them and also to minimise them by making clear that diversity is valued within this. Throughout the processes of interview and ensuing analysis it was important that I continued to accept and try to understand the multi-layered power relations that occur within each interview conversation (Hyden, 2008).

**The insider social work perspective**

Interviews conducted by an experienced adoption and fostering worker could arguably increase the trustworthiness of the study (Andrews, Squire and Tamboukou, 2013). As a social worker with ten years’ experience working in adoption and fostering settings, my practice and research knowledge of the strengths and gaps existing in these fields was invaluable to the process of conducting this research. The original positioning of the research question came from my professional desire to find good adoptive and foster homes for children who needed them. The idea to research trans experiences arose from anecdotal knowledge that trans people rarely came forward to enquire about adoption and fostering, and in the few instances when they did, progression to application did not result. Having reviewed the reasons stated for this, I queried whether the nonnormative presentation that trans families took presented an issue for social workers. As a practitioner, it was impossible to examine if this were the case as the information given on initial inquiry forms was sparse and the Equality Act 2010 would prevent workers recording gender as a reason for halting an applicant’s progression.

Over the years I have been working in the field as a social worker, I have collected anecdotal experience from observations and informal consultations with social work staff across different local authorities and voluntary adoption agencies. The anecdotal information indicates that while there is little overt discrimination, there is a much higher prevalence of covert discrimination in the adoption process which is much more difficult to adequately address through formal mechanisms. I have had numerous anecdotal reports that trans adopters and carers would not be chosen for children who already must accept the stigma of being adopted or ‘in care’, because having trans parents would impose upon them another layer of stigma. Indeed, statistics from research that seemingly aims to promote trans equality have been quoted back to me as reason not to prohibit trans people from adopting and fostering.

While it is true that trans people experience high levels of transphobia in public life and in using public services (*see Introduction),* use of the effects of transphobia as a justification for maintaining wrongful discrimination could be deemed an issue of malpractice (Social Work England, 2020). Though it is undeniable that social work’s professional identity and roles are complex in nature (Wiles, 2013; Ferguson et al., 2020), I argue that hypocrisy is unacceptable for a profession that states its core aim as addressing social injustice (Ferguson, 2015; IFSW, 2014). If we continue to accept this discrimination in society and skirt over subtle and pervasive oppression, there will be little progress in true anti-discriminatory practice and equality along dimensions of gender (Ingraham, 1994).

These observations are supported by research showing lesbian and gay fostering and adoption applicants frequently feel they must conform to expectations of stereotyped gender roles, despite disagreeing with this (Hicks and McDermott, 1999; Riggs, 2007; 2010; 2011; Ross et al. 2008). Heterosexism and cisgenderism, the assumptions that heterosexual and cisgender identities are more valid than homosexual and trans identities, appear to be prevalent in social work today (Hudson-Sharp, 2018; Tasker and Gato, 2020). Therefore, rationale was provided for this exploratory piece of research to examine a hidden issue.

**4.12 Ethical considerations**

**Potential for harm**

Part of the process of designing sensitive research is to weigh up the potential costs or risk of harm with the potential benefits (Flaskerud and Winslow, 1998). Deliberation has occurred in relation to whether the findings could further stigmatise and marginalise the trans population in relation to fostering and adoption, but the researcher evaluated the risk of this to be low and deems the potential for changing views as a product that positively outweighs potentially negative responses within the public or profession. There is potential for manifestations of defensiveness from the social work population to be directed to the researcher personally, as an ‘insider’ criticising current practice. However, the project addresses a pressing social issue in relation to how trans people are viewed, treated and accepted as carers or adoptive parents. To shy away and avoid researching this simply because it may be deemed by some as controversial is arguably to shy away from responsibility (Sieber and Stanley, 1998). Indeed, in the context of covert discrimination, it is not possible to take action to challenge it in the manner overt discrimination could be addressed, through complaints procedures, therefore research and dissemination seems the only viable way to begin to enact change.

A wider issue is whether the research question is one of import and potential benefit for the populations of trans people hoping to foster or adopt and to the children needing substitute homes. Assuming what the public wants can be a presumptive act on the part of a researcher (Dickson-Swift, James and Liamputtong, 2008). It can indeed be argued that the anecdotal information my job provides, alongside statistics showing a need for homes *(see Introduction),* gives weight to the potential benefit to children of any endeavour that may provide more adopters and carers. Informal consultations undertaken with foster carers, adoptive parents and trans people at the conception of this research was that this is an important and worthwhile topic to study.

Ayoub (2014) examined survey and interview data in different countries and analysed the impact of religion on reception to active resistance. His findings suggested that contexts of high threat contexts, the resistance produced can be self-defeating. Where the prevailing norm is resultant from a deeply embedded historical religious essence, its dominance can be exerted and effects strengthened by the act of framing the aspect of difference, here being LGB or T, as absurd.

**Sensitive research**

Ethical research practice was examined in detail as it is an aspect intrinsic to the undertaking of potentially sensitive social work research with a hard to access group (Dickson-Swift, James and Liamputtong, 2008). Included within participant accounts were stories in relation to family, personal identity, adoption, fostering and wider interaction with health and social care services, all of which could be considered sensitive topics. This is because there are potential consequences for the participants and the marginalised group of trans people they represent (Sieber and Stanley, 1988) and because the topics discussed could be considered private, may be formerly hidden, and may be stressful or stigmatising (Lee, 1993). Where sensitive subjects are discussed, it is recognised there is potential for participants to experience distress and upset (Dickson-Swift, James and Liamputtong, 2008).

However, Hyden (2008) antagonises the assumption that a researcher or ethics committee can deem what is sensitive or private for another person. Rather, Hyden (2008) argues that each participant should be able to decide what is sensitive to them, what they share about their own life and how they narrate it. It may be that what is sensitive and elicits a feeling of expected or unexpected emotional intensity to one person is regarded as emotionally neutral to another. I therefore aimed throughout interviewing to be aware that topics which I may evaluate as sensitive may not be regarded as such by participants, and likewise those I deem neutral and suitable for rapport and comfort-building may cause distress or embarrassment to some. There is however an acceptance within the academy that discrimination is regarded a sensitive subject, as it involves sharing stories of psychological or physical harm (Dickson-Swift, James and Liamputtong, 2008).

My professional skills developed from experience in social work interviewing, and voluntary experience in a counselling role, were thus drawn upon to enable a supportive and responsive interview style (Andrews, Squire and Tamboukou, 2013). This involved monitoring of nonverbal cues to identify and respond to distress and active listening. Indeed, Vincent (2018) argues that listening is the most powerful tool that can be employed by a researcher for a project that can be described as emancipatory in nature. Participants were also given contacts for agencies that could offer support after the interview to minimise the impact of longer-term distress (Hyden, 2013).

**Ethics approval and professional standards**

In acknowledgment of a priority in social care research to take responsibility for and sufficiently address ethical principles (Iphofen 2005), appropriate measures were taken to meet the ethical requirements for UK Social Work research undertaken in association with a Research Excellence Framework approved higher education establishment. Ethics approval was first granted by the University of Salford ethics committee for the first stage of the PhD and subsequently from the University of Sheffield after a programme transfer on 1 April 2019. The study was conducted in accordance with Standards of Conduct, Performance and Ethics (formerly HCPC, 2016, now Social Work England, 2020) and the Social Research Association’s (2003) guidelines. The Data Protection Act 1998, the University of Salford (2021) and University of Sheffield (2021) Research Data Management guidance and the General Data Protection Regulations (GPDR, 2018) were adhered to.

**Informed consent**

Attention was given to supporting informed consent, the right to decide whether to take part or to withdraw, ownership of one’s story, confidentiality and risk (Williamson, 2007). The participant information sheet (*Appendix 4*) was given to all interested parties ahead of their interview. The researcher was available to answer prospective participants’ questions via email, telephone or in person. Written informed consent was obtained from all participants before interview (see *Appendix 6*). In the process of gaining this the researcher emphasised confidentiality, anonymity, voluntariness and the right to withdraw up to a month after the interview without giving a reason. Participants were told that the information discussed would be used in the research study and associated publications.

**Confidentiality**

Participants were assured that their data would be anonymised to minimise the likelihood that anyone reading the material would be able to identify the speaker from what they have said. It was explained that names, locations, contact details and dates of birth would be removed from the data to ensure the confidentiality of this information. Participants were also given the opportunity to check their transcript for anonymity before it was subsumed within the dataset for analysis. This was because it is recognised that the participant is best positioned to notice potentially identifiable information that is personal to them or their network. It is of particular import to ensure anonymity in this way where participants come from a relatively small subset of the population as information in their story could enable an individual or organisation to identify them as narrator.

It was stated that the only reason for breaking confidentiality would be if the person discloses information that may indicate a risk of significant harm to themselves or another person. In this case, the researcher must discharge a professional duty to pass on information to the relevant authorities after informing the participant that this would be done. No organisational agreement was required for the study as participants were recruited individually and not accessed via any specific local authority or voluntary adoption agency gatekeepers. With regards to organisational support for recruitment, informal conversations were facilitated with national LGBTQ+ fostering adoption organisations as well as trans activist and community groups across the North of England. Agreement in principle to support the study was given prior to ethics approval by two organisations. Further conversations and agreements were undertaken following this and included the kind support of numerous individuals and organisations supporting adoption, fostering and trans rights.

**Supporting inclusion**

This study sought to be empowering in nature and as such aimed to collate the individual views of this group in a manner which is inclusive; putting in place reasonable steps to ensure that those who wish to take part can (Lee, 2001). The research was flexible in response to participants’ needs and wishes and made reasonable attempts to provide an environment that felt physically and emotionally secure for a participant to be comfortable sharing sensitive details (Lee, 1993). Throughout the designing and implementation of the research methodology, consideration was given to the potential for conflicts of interest and the possibility of a perceived power differential (Wengraph, 2001).

Issues related to coercion and potential for blurred boundaries were attended to (Dickson-Swift, James and Liamputtong, 2008) and are outlined in further detail in the instructional guide. As part of the process of ensuring the research was ethically sound, I consulted with acquaintances with lived experience to gain constructive criticism that could aid the study’s development. As an experienced social worker and therapist, I have skills to manage discussing emotive topics as a researcher (Hyden, 2008). With precautions in place for considering and minimising potential psychological and physical harm, the risks associated with the study were evaluated as being low (*a Risk Assessment was completed as part of the Ethics Approval).*

**4.13 Dissemination**

Findings of the study are presented in full within this doctoral thesis and will be prepared for publication in a relevant journal upon the completion of the PhD. A free copy of the thesis, research summary and recommendations will be offered to the participants who enabled its production. It is acknowledged that not all participants may wish to read a full thesis, and some may find it inaccessible. As such, the summary and recommendations will be offered alongside it. I will also offer to call participants who would prefer a verbal dissemination of the findings.

Early findings have been disseminated via publication in a good practice guide, oral presentations at a social work and trans pregnancy conference and through a peer-reviewed journal article. A research summary of 4 sides A4 will be distributed, along with posters and social media infographics to share smaller excerpts of interesting findings and brief precis of points. I will continue to encourage the dissemination of results via fostering and adoption channels such as CoramBAAF, New Family Social, The Fostering Network, as well as by trans activities and community groups. The aim is to make findings and learning points gleaned from the study available to a wider audience of social work staff to inform best practice. It is also hoped that wider public dissemination of findings will encourage more gender diverse people who are considering adoption or fostering to take the steps of inquiring and making applications.

**4.14 Chapter summary**

This chapter has detailed the methodological framework adopted by the research. It sought to set out my feminist, social constructionist approach by undertaking an analysis of the philosophical and theoretical influences that the design has drawn from. The central aim of the research was to identify some of the micro – and macro – level sociological inequalities that influence how adoption and fostering services are delivered for and with trans people. To achieve this objective, narrative accounts were collected from trans and non-binary people, as well as social workers with some experience of supporting gender-nonconforming people within adoption and fostering services. The use of a relational and voice-centred method has enabled the perspectives and experiences of the participants to remain central throughout processes of data collection, analysis and discussion.

Chapters 5-7 will set out an integrated analysis of the findings and discussion related to the three main themes emerging from the participant narratives: personal identity, family and adoption and fostering. Chapter 5: Narratives of personal identity examines participants’ self-definitions and developing understandings of personal identity characteristics such as gender and sexuality. It explores their experiences of ‘coming out’ and the confluence of intersecting identities. Chapter 6: Narratives of family traces participants’ current experiences back to their families of origin. It attends to the varying levels of support participants received from family, friends and romantic partners and explores the complexity of family relationships as they relate to gender. Chapter 7: Narratives of adoption and fostering focuses in on the way in which participants felt being trans could influence the adoption and fostering processes. It analyses the specific detriment that non-binary people can face and troubles the notion of gender as being an important factor to adoption and fostering assessment, matching and support.

**Chapter 5: Narratives of personal identity**

*I am what I am*

*And what I am needs no excuses*

*I deal my own deck*

*Sometimes the aces, sometimes the deuces*

*It’s one life and there’s no return and no deposit*

*One life so it’s time to open up your closet*

*Life’s not worth a damn, til you can shout out*

*I am what I am*

*(Gloria Gaynor, 1974).*

*‘We’re here, we’re queer, let us dress how we want without fear!’* (Jas, 2020, p.63)

**5.1 Introduction**

In this chapter I present narratives of personal identity to illuminate participants’ experiences of gender, including their struggles with gender identity, coming out and transitioning. The accompanying discussion sets the backdrop for an examination of people’s narrative identity, experiences and sense of self. Analyses of dominant categories of gender, masculinity and femininity are integral to several participant narratives. Thus, the chapter explores how regulation serves to engage, modulate and form each individual (Berger, Wallis and Watson, 1996). This chapter engages with debates about the relations between gender and identity as well as including a focus on the interrelationship with embodiment (Halberstam, 1998).  As identity is multidimensional attention is given to theories of intersectionality (Crenshaw, 1991; Hill Collins and Bilge, 2016) as the idea of binary gender, as well as the notion of other aspects of identity as being binary or one-dimensional, is critiqued throughout. Other identity categories (e.g., sexuality, disability) likewise come up against definitional challenges as the borders within and between categories and meanings are often contested and adapted over time (Twist et al., 2020).

**5.2 Defining identities**

**Separating gender and sexuality**

Over the past twenty years there have been many changes to the social construction of gender and sexual identities, and as such their definitional terminologies, convergences and divergences (see *Chapter 2*). Within this research a conflation of gender and sexual identity was reported by some participants who experienced their childhoods as late as the early 2000s:

*The first time I ever came out, I was 14, I came out as bisexual, because it was the best word I had at the time, to explain what was going on. (Jamie, non-binary prospective adopter)*

Here, bisexuality was selected as a term from sexuality discourse and adopted as a main identity descriptor. This suggests discourse of sexuality was sufficiently well established for Jamie to be able to select a term from a lexicon to describe their sexual identity, however, this also suggests this lexicon was not sufficiently expansive to accurately describe it at that time *(‘…best word I had at the time...’)*. Halberstam (1998) points out that many trans men first come out as lesbians (though also adds that many **also** do not), explaining that identifying as lesbian may give access to a community. Indeed, Jamie gained access to a social support group at their school because of their sexual identity:

There was a Gay Straight Alliance at my school, and, yeah, we had those… it was much more accepted… it felt like kind of a safer thing… I came out at school. *(Jamie, non-binary prospective adopter)*

For Jamie coming out as bisexual prior to identifying/coming out as trans was seen as safer and more socially acceptable because the discourse on sexuality was better established (Foucault, 1979). However, the need to come out as bisexual demonstrates that a discourse of heteronormativity and cisnormativity prevailed (Hall, 2010) within the US where Jamie grew up. This was also the case for Celyn who grew up in Wales (‘…*at 17 I came out to my parents as bi.’).*  Discourse on sexuality was expanded from Jamie’s childhood into adulthood, such that they can now offer a more refined explanation of their sexuality:

*I use queer for myself as an umbrella term, erm, it just kind of situates, encompasses the sexuality and gender stuff… I’m pansexual… (Jamie, non-binary prospective adopter)*

However, coming out in terms of sexuality before gender identity was a common theme among participants. The ‘*taint of abnormality’* (the stigmatising of identities that sit outside of established norms) that was once attached to homosexual identities had been displaced (Foucault, 1979, p.4).

Halberstam (1998) illustrates how there has been a tangle between sexuality and gender and a lack of historical medical acknowledgement and recording of trans people’s identities. As such, it could be surmised that transgender discourse had not been coherently shaped in the same way as sexuality discourse had been (Foucault, 1979). Trans discourse was less established in the 20th century, as such there was less availability of trans gender descriptors. Participants as such sought out the terms/meanings and resultant discourses that appeared closest in nature to that of gender. Where gender descriptors did exist in emerging discourse, positive conceptualisations of trans identities were lacking:

*I lived in a pretty small town, but at that point most people had the internet, and you had cable tv, so, like, the fact that it was a small town didn’t really factor in… I’d never seen a positive media representation of a trans person. (Jamie, non-binary prospective adopter)*

Like sexuality terms, gender terms used by participants are likely to have originated primarily from social groups rather than other surfaces of emergence such as the family, work contexts and religious communities (Foucault, 1979). Participant narratives show that terms and meanings of transgenderism were unavailable within these contexts and as such, participants lacked access a coherent discourse on transgenderism as they moved through childhood. However, in contrast to Weston’s (1991) research, by 2018-2020 (when the interviews took place), clear distinctions were being made by participants in relation to their gender and sexual identities in adulthood:

*Gender: Nonbinary transman (pronoun: they/them) Sexuality: Pansexual - can be attracted someone of any sex or gender, monogamous (Toby, non-binary trans man)*

This change is suggestive of a more expansive discourse on trans identity (1979). Indeed, contemporary UK research found ‘*expanded vocabularies of gender identity/expression’* (Bragg et al., 2018, p.1). While the establishment of trans discourse does not necessarily denote societal acceptance of trans people, to Foucault (1969), the emergence of a discourse for a specific object (e.g., trans identity) is a pre-requisite to its potential for gaining power. Thus, the acceptance of trans identities is contingent on society talking about what it means to be trans. However, Phipps (2021) counter-argues that speaking of trans identities is insufficient to bestow power upon them. Her analysis highlights that trans people are subjugated using the same processes that were historically used to position homosexuality as deviant, even criminal (Foucault, 1979).

Notwithstanding, changing discourse on gender and sexuality has impacted on how participants narrated their gendered identities:

*And there is the side of me that’s sort of gender-nonconforming… seems to be a term I’ve heard term banded around quite a lot recently. (Alice, trans woman, prospective adopter)*

Participants’ narrations of their gender identities are thus influenced by the terminology imparted by discourses of gender that prevail at the time (Foucault, 1979).

**Defining gender**

Foucault (1969, p.49) acknowledges that it can be difficult to say something new, for new objects such as that of minority trans identities to ‘*light up and emerge out of the ground’*. Objects do not exist waiting in limbo to be freed, embodied and made visible. Rather, they exist only under the positive conditions of an intricate and multifarious group of relations. Terminology relating to trans identities is continually being shaped by and within the socio-political context in which it is discussed:

*The word ‘transsexual’; it’s been the medical term for about 110 years. But the young people say, but it’s about gender, not about sex. I actually got told I was transphobic, by using it to describe myself! (Sarah-Jane, trans woman interested in adoption)*

Here it can be seen that the term ‘*transsexual’* has undergone such challenge in recent years that some members of a newer generation regard it to be a transphobic object that they wish to have removed from transgender discourse. This change in attitude likely reflects contemporary challenge to the dominance of the medical authority as an acceptable delimiter of trans identities, as the term ‘*transsexual’* was the original word used by the medical profession to describe someone who sought medical intervention to make physical changes to live as an opposite sex to that ascribed to them at birth (Stryker and Aizura, 2013). Terminology associated with trans discourse however has been subject to rapid introduction, change and disuse (Foucault, 1969). As newer terms such as ‘*non-binary’* and ‘*neutrois’* are used (see Jamie, Toby, Ash for example), older terms such as ‘*cross-dresser’* (Graham) and ‘*transsexual’* (Sarah-Jane) are amended, redefined, challenged and even erased.

Head (2020) argues that Western society cannot fully understand gender diversity until it develops enough understanding of the rigid ways in which gender directs everything around us; from how to behave, how to dress, what education and employment routes we should take, which relationships we could have. Society still conceptualises gender binarily; a person is either a man and behaves in masculine ways or a woman and behaves in feminine ways. However, this conceptualisation is insufficient to understand non-binary trans identities:

*I think when I was first like understanding my gender, I was a little bit, erm, hmm, I was, I was nervous to like… I, how do I explain this? I felt like I would have to give up, like, my femininity, and like, being trans meant that I would have to not, like, express myself in ways that would be like traditionally considered as feminine. And I wasn’t wanting to give those things up. (Jamie, non-binary prospective adopter)*

Participants narrated their gender identities using transfeminist counter-discourses to challenge dominant discourse and explain how their gender works (Koyama, 2003; Serano, 2016; Stryker and Bettcher, 2016). Counter-narratives serve to construct alternative discourse on gender identity that more closely align with the personal experiences of those who do not fit with master narratives of gender normativity. The counter-narratives of participants served to challenge the dominant cisgenderist discourse and offer alternative explanations as to how gender works and is presented. Over the past ten years, counter-narratives have changed gender discourse to allow trans people to have greater acceptance and visibility (e.g., Hines, 2007a, 2007b, 2019; Rogers, 2016). Counter-discourses such as Jamie’s lay out a different working of gender that does not divide it simplistically and rigidly into binary categories (Bornstein, 1994; Bornstein and Bergman, 2010).

In considering the terminology used, Halberstam (1998, p.161)muses that the term ‘transgender’ may have arisen from debates aiming to denote a gender identity that is *‘at least partially defined by transivity but that may well stop short of transexual surgery’.* Halberstam also argues that terms such as ‘transgender’ inevitably become catchalls, and this lessens their effect.

*Non-binary would be like the first term I would use to describe… But also trans and also trans-masculine… gender-queer kinda works as well. That’s the one I used to use but non-binary just kinda made a little bit more sense. (Jamie, non-binary prospective adopter)*

There can be particular complexity in representing yourself through language when the words do not exist (Janib, 2020; Korn, 2020). Non-binary people use the language that they have available at the time (Pollock, 2020). In languages where neutral words do not yet exist, they have to be made up and then defended (Janib, 2020). Thorne et al. (2019) reviewed the terminology used within keys texts and journals containing trans academic writing and found that non-binary and genderqueer were the most commonly used terms for describing non-female and non-male identities. They attempted to identify a term with emerging usefulness as an umbrella term for non-binary gender identities and put forward that ‘gender diverse’ is increasingly being utilised and may be a suitably inclusive descriptor.

**Borders and boundaries**

Bergman and Barker (2017) point out that the non-binary movement can be viewed by outsiders as being young and difficult. Indeed, Serano (2013) explains how non-binary activism has been positioned by some as a threat to freedom of speech or a ‘political correctness gone mad’. However, findings from this study demonstrate that the term ‘trans’ is insufficient to describe the identities of all trans people:

*[Regarding the label ‘trans’] I can’t necessarily claim that... it was like a misunderstanding of what non-binary and trans was, I thought that non-binary meant that you were like, 100% in the middle, it was like so androgynous that no one could place you. (Jamie, non-binary prospective adopter)*

Twist et al. (2020) consider definitional boundaries and point out that ‘trans and non-binary’ is often used as a phrase to encompass everyone who does not identify with the sex they were assigned at birth. However, they elucidate the critique that some people dislike these terms because they infer that trans and non-binary people exist in discrete categories. The phrase *‘binary trans and non-binary trans people’* (Twist et al., 2020, p.19) attempted to resolve the issue but has been criticised by those who feel that the term ‘binary trans’ supports the idea of an oppressive binary system. However, not all trans people find binary gender oppressive, indeed some participants within this study engage with a narrative of transnormativity and value the ability to ‘pass’ in their binary gender (Bradford and Syed, 2018):

*But now you don’t get the stares, you don’t get stared at… you’re just an ordinary-looking person aren’t you, so. Great! (Alice, trans woman and prospective adopter)*

Indeed, the denial of binary categories risks negating the lived experiences of gender that many people have within their social worlds (Finney Boylan, 2003). Further, the term ‘non-binary’ itself can be critiqued through this perspective, where using the word ‘binary’ in any descriptor can be argued to reinforce the binary gendered system that we wish to challenge. As such, it is expounded that while catchalls are useful to situate a reader within a text or develop some base understanding for social work practice purposes, it is important that each person’s individual preferences in choice of phrasing are utilised (Twist et al., 2020).

Another important aspect of people’s self-definition is that temporality of gender identity is understood and respected. As Effinger-Weintraub (2020) points out, trans people can have a hard time navigating the changing terrain of individual experiences of gender when they have already established a public professional name for themselves or engaged in personal relationships in a gender they no longer perceive themselves to be. However, some people use their agency to identify in different ways in different contexts (Rogers and Ahmed, 2017).

*Gender-queer and gender fluid I toyed with briefly, and um, that’s more that, like, my expression is fluid, but I was never really like, ok, I was never really like, my style and dress from day-to-day, but at its core it didn’t feel like it was changing. So, that was why it didn’t work for me. (Jamie, non-binary prospective adopter)*

According to Prosser’s (1994) account, queer theory represents gender within poststructuralist notions of fluidity, accentuating the performative. Queer theory (as part of this thesis’ broader poststructuralist analysis) may be seen as revelling in the space between definitions, believing that it is this space that is full of promise.

*I've always consistently viewed myself as male, but when I began my social transition I started reading books on gender identity, I joined a support group and started talking to a colleague that I had become close with -- he asked me if I thought I might be nonbinary. I hadn't really thought about the idea of gender being a spectrum before. When I looked into what nonbinary meant it did seem to fit me very well, after living with gender roles my whole life I find being nonbinary incredibly freeing! (Toby, non-binary trans man)*

Indeed, Halberstam (1998) explains that gender and sexual identities should be defined in terms of the way a person subjectively experiences them. No identities or identity categories should be privileged (for example where genderfluid identities are framed as ultimate gender rebellion), nor should their definitional boundaries be rigidly imposed by others. Toby had felt a need to categorise as male, however desires, identities and bodily conformities and transgressions can involve a degree of movement (Halberstam, 1998). One they had access to the term ‘non-binary’, they adjusted and accommodated this term into their identity and found it ‘*incredibly freeing’.*

**5.3 Gender identity development in childhood**

**Belonging and emotional challenges**

Emotional struggles and mental health problems that extended through childhood and into adulthood were common among the participants included within this study, in line with other contemporary research (e.g., Romito et al., 2019; Rahilly, 2020; Bachman and Gooch, 2018). Emotional difficulties stemmed from experiences of bullying and a sense of not fitting in:

*Sad thing for me is the bullying followed me all through my school life, I never understood why. I had very low esteem and lack of personal confidence, with a strong feeling of not fitting in anywhere. Waking up each morning, just meant another day of misery and trying to avoid the bullies at school. (Andie, trans woman, adopter and foster carer)*

As found in other literature (Finney Boylan, 2003; Diamond, 2011; Twist, 2020) Andie and many other participants felt they did not belong. A sense of belonging is an inherent human need (Baumeister and Leary, 1995), without which people experience negative emotional impacts *(‘…low self-esteem and lack of personal confidence…misery’).* Being bullied and feeling like she did not fit in meant that Andie lacked the connection needed to meet her emotional, social and cognitive needs in childhood. The exclusion she and other participants felt resulted in poor emotional wellbeing and had a particularly profound impact on her confidence, an effect reported by many trans people (Twist et al., 2020).

**Processes of gender identity meaning making**

As detailed above, gender and sexuality are often conflated. Andie’s narrative illustrates the impact that this conflation can have on childhood identity development:

*New school and the new kid in the class [aged 10-12 years] and once again I was the subject of bullying from day one, made worse because I hated rugby. All I clearly remember is waking up each morning hating my life, it was around this time I started to feel things were wrong. Never feeling like I fitted in, being confused with hidden desires not to be male. At first, I thought it was a sign of being gay. (Andie, trans woman, adopter and foster carer)*

Andie’s thoughts and feelings about her gender and sexual identity are reflective of cisnormative discourse (Bauer et al. 2009; Catalpa and McGuire 2018). As argued by Bauer et al. (2009), cisnormativity was so pervasive, it was not acknowledged, named or questioned when Andie was growing up. The assumptions held by Andie and the rest of society were that those assigned male will identify as such; there was no discourse to refer to in order to explain her ‘*hidden desires not to be male’*. As such, Andie drew from the only counter-discourse she had available to her; discourse on homosexuality *(‘…I thought it was a sign of being gay’)* that had emerged as a counter-discourse to that of heterosexuality (Foucault, 1979).

A sense of having a gender identity that differed to that of others in their social worlds often arose in a non-discrete manner:

*It's difficult to pinpoint exactly when I first started to realise I was trans. I only recently in the last couple of years had the words for it. My internal dialogue growing up I remember being male, in my daydreaming I was a boy, I related more to male characters in films and books and when I looked in the mirror I saw myself as a long haired boy just wearing the clothes that had been given to me. I didn't express this to anyone, it felt like I just didn't have the words. Like many children I was very keen to please my parents and remember being very afraid of, sort of, "tipping the apple cart". (Toby, non-binary trans man)*

The quotes above suggest that the process of exploring one’s gender can be confusing for children, as they can lack a framework for understanding what gender is when it does not meet conventional understandings of gender identity, role, expression and presentation. Participants engaged in different forms of gender exploration and transition outlined by Ekins and King (1999, 2001). Some participants migrated from one side of a binary gender divide to another on a permanent basis (Alice, Sarah-Jane, Andie). As a cross-dresser, Noel continues to engage in an oscillating between male and female polarities across the binary divide. However, Toby and other non-binary participants engage in processes of eliminating the binary divide (as Toby and Jamie did) or transcending a divide by presupposing the idea that gender is not a dichotomy or a continuum, rather there are infinite possibilities of masculine and feminine and that which is neither (aligned with Ash’s neutrois identity).

**Wrong body narrative**

The process of binary migration (Ekins and King, 1999, 2001) from assigned male to female is exemplified in Andie’s narrative:

*I began to have strong feelings that my body was wrong, I would have been happier if I had been born a girl. I tried to hide these thoughts and choose not to say anything to anyone, as I grew older. The thoughts of being in the wrong body became very strong, I started dressing in girl’s clothes, it felt completely normal. (Andie, trans woman, adopter and foster carer)*

This ‘wrong body’ narrative is not new (Prosser, 1998), however there remains a

phenomenon in contemporary British society whereby we have a yearning for fixed and clear-cut binary identities (Pollock, 2020). Pollock (2020) explains that this is where the idea of being born into the wrong body or being somehow wrong about any previous beliefs regarding gender and sexuality has come from. However, they elaborate that contrary to this, the reality for all humans is that being alive involves a process of continual change. They explain that there is a process to finding the words as to who you are, and also to understanding yourself as you grow. They challenge the idea that queer people, and any people, know who they are from birth and that this identity is fixed and binary. While thoughts and feelings of assigned gender as being wrong were present in all participants from childhood, however not all trans people align with the ‘wrong body’ narrative. Indeed, some find this offensive (Bernstein Sycamore, 2008; Bornstein, 2013).

**Gender identity awareness at a young age**

Feelings of being ascribed a gender inaccurately were strong from an early age in some participants:

*The first time, I was a kid. It was like really little, and I was like telling people that I wasn’t a girl. And they were telling me I was a girl, and I was like ‘no, no, no, you’re gravely mistaken!’… I was like, ‘no, no, no, where’d you get that from?’… I didn’t see what they were kind of picking up on in me. (Jamie, non-binary prospective adopter)*

This quote demonstrates that children can have a clear awareness from a young age that the gender labels assigned to them are not right. This feeling could indeed be present before they have refined the cognitive and phonetic abilities to verbalise it. Although there is an innate difficulty in trying to pinpoint a chronological or developmental age at which a person may realise their assigned gender label is inaccurate, as such a realisation is dependent on an emerging understanding of the social constructions and conventions that exist within societies in which a child is growing up. Indeed, although other narrative accounts of working out gender also suggest this process starts in childhood, experiences of how gender is understood varies between individuals. This could be influenced by a person’s family of origin, peer relationships, public interactions and wider (and vastly differing) experiences of culture and society (Twist et al., 2020).

**Compounding difficult experiences**

Some participants had poor experiences of family that were unrelated to gender identity:

*Our dad was away at sea a lot of the time, during one of these periods a stranger started showing up, bring us presents and taking us out with our mother, it was not long before reality hit me… and things got a lot worse for me, our stepdad would constantly play my brother and me of against each other. He went out of his way to belittle my dad and never had a good word to say about him. (Andie, trans woman, adopter and foster carer)*

Andie’s separation from her dad and experience of emotional abuse by her stepdad appeared to be a contributing factor in the erosion of her self-esteem and confidence. A recent study found that trans young people had more Adverse Childhood Experiences (ACEs) scores when compared to cis lesbian, gay and bisexual youths (Schnarrs et al., 2019). Examples of ACEs include emotional abuse and parental separation such as that reported by Andie. Indeed, the lack of belonging she experienced at home was likely compounded by the lack of belonging she felt in wider contexts (‘…*a strong feeling of not fitting in anywhere.’).* For Andie, the lack of connection and belonging was thus especially pronounced (Baumeister and Leary, 1995).

In Schnarrs et al.’s (2019) study, after adjusting for ACE scores, a significant link was found between gender identity and psychiatric impairment. This could suggest a higher incidence of mental illness in trans people and could be taken to suggest there is a link between Andie’s ACEs and her trans identity. Indeed, the media has reported cases of people de-transitioning after realising that their wish to be known in a different gender to that assigned at birth was associated with difficulties resulting from ACEs (Heyer, 2018). However, the proportion of people who detransition has been found to be less than 1% (Richards and Doyle, 2019). Further, Hughto et al. (2021) confirmed the link between negative media and symptoms of depression, PTSD, anxiety and other psychological distress in trans adults after controlling for physical and sexual abuse. This finding counter the assumption of a causal link between trans identity and mental health, rather demonstrates that experience of discrimination in the media can cause the mental distress that many trans people experience.

**5.4 Gender as personal and performative**

**The personal and performative**

In examining gender identity definitions and meanings, it is useful to consider whether gender is experienced and defined by participants as a personal or a performative experience (Butler, 1990), or both.

*When you meet someone, the first thing you do subconsciously is decide whether they’re male or female… We speak to them differently, we treat them differently, depending on what your brain has decided. And it’s all completely subconscious. (Sarah-Jane, trans woman interested in adoption)*

Sarah-Jane suggests that other peoples’ interpretation of one’s presentation of self is important to a person’s internal idea of the self, as the personal and performative are not distinctive and mutually exclusive categories of representation (Butler, 1990). Indeed, we are constituted in and through discourse and social constrictions, for ‘*the space and place we inhabit produce us’* (Probyn, 2003, p.294). We are exposed to discourses as we inhabit multiple spaces as we grow up, from family, to school and workplaces, and these influence the production of our thoughts and behaviours (Foucault, 1970).

*Sometimes… I meet somebody, and I give them my name and I say hello and we chat a bit, and they’re quite happy using female pronouns, and then I’ll say something, and they’ll switch to male pronouns… perhaps because I’ve been more assertive… and their brain has gone, men are assertive: they must be male. (Sarah-Jane, trans woman interested in adoption)*

Goffman (1959) would argue that because it is impossible, within the parameters of a social event, to be certain whether the person will indeed line up to an impression or go on to complete an action, inferences are central to one’s judgement of another. The security one feels in making inferences depends on various factors such as the level of information already possessed in relation to that person. However, no amount of evidence can eliminate the need to act based on some level of inference. Contemporary stigma theory and research would confirm the power that stigma can have on trans people (Link and Phelan, 2014; Tyler and Slater, 2018). However, Goffmanian theory would be expanded to urge consideration of the wider structural impact of stigma. Paton (2018) would encourage a ‘gazing up’ to explicate the causes of stigma, rather than attaching it to an individual. Stigma can be experienced on a one-to-one basis as Sarah-Jane describes, however contemporary theory directs that its cause lies not with the individual, but with those who have power over British media and politics (Tyler and Slater, 2018). Indeed Hughto et al.’s (2021) findings of increased psychological distress in trans adults after negative media exposure provides support to this theorising of trans stigma.

**Gendered roles**

The experiences of participants in terms of what gender roles mean for them tended to first arise from the general views that their parents held and espoused:

*Gender roles were very clearly defined in our household. Dad frequently told my brother that* *boys aren't meant to cry (which is something I remember projecting onto myself at the time and finding it very difficult to express myself). (Toby, non-binary trans man)*

This quote illustrates the way in which an individual’s experience of their parents’ conceptions of normative gender roles can influence their own sense of appropriate expression. Toby’s expression and presentation of femininity and masculinity as they grew up was regulated by conventions that their parents portrayed as being non-negotiable aspects of being female or male. Toby’s depiction of the way in which gender roles were defined exemplifies the ways in which masculinity and femininity were engaged in and modulated by their birth family practices (Berger, Wallis and Watson., 1996). Bretherton and Munholland (1999) argue that thoughts, actions and choices are directed by an internal working model that is transmitted intergenerationally and developed in early childhood. Such a working model can direct what a person comes to know and expect as acceptable. This can relate to the norms and values that are differently ascribed to female and male genders. Toby’s narrative of early family life illuminates this internal working model *(‘…I remember projecting onto myself…’*) and the ways in which it formed Toby as an individual.

Gender normative ideals were imputed onto children by parents from a young age, perhaps not even consciously. This quote demonstrates the long-lasting impact that seemingly innocuous gendered actions in childhood can have on a person. Toby may have chosen to pursue a career in coding like his brother did, had he been offered the opportunities to explore his skill and interest in this area as a child.

*My brother who had a computer coding kit from a very young age and was encouraged to do those kinds of things. I wasn't given technical toys to play with as a child, kind of model building kits etc, and I feel like this has impacted on my ability to do those sorts of things as an adult. I think having those sorts of toys as a child would have helped me to master them with more ease as I had more neuro-plasticity. (Toby, non-binary trans man)*

Toby’s knowledge of what constitutes male and female has been constructed and maintained throughout his childhood social interactions (Berger and Luckman, 1966). As such, the knowledge he built up about gender was dominated by his parent’s priorly constructed notions of gender (Berger, Wallis and Watson, 1996).Smith (2020) however, challenges this view of identity as setting out a frame in which we are to exist. They question the usefulness of considering aspects of identity (e.g., gender) as constant and unchanging. Rather, Smith (2020) argues that strict patterns never fit when applied to real people; they are often not able to fill or spill over in excess. Using Smith’s (2020) frame of analysis then, Toby tried to apply a set pattern of what their parents believed to be male behaviour to themselves, and this resulted in them experiencing a difficulty in self-expression. Instead, Toby resisted assimilation into pervasive cisnormative expectations (Bauer et al., 2009; Catalpa and McGuire, 2018) and aligned with a counter-discourse that challenged the notion of binary gender (Bernstein Sycamore, 2006; 2008; Spade, 2006)

**Gendered expectations**

The narratives suggest that trans identity development is enmeshed within the cultural context and belief systems in which a person is situated (Puar, 2007; Nicolazzo, 2016; Braford and Syed, 2019). One example comes from Toby’s narrative as he provided a list of gendered expectations according to his mother as women should:

*- wear makeup and look feminine, mum would comment on women who didn't wear make up and say they were lazy*

*- shave* [legs]

*- have a boyfriend and get married and definitely not have sex until married*

*- be a "stay at home mum"*

*- generally, just behave in a proper way*

*They all just seemed to be the unwritten rules of life and I never questioned them. (Toby, non-binary trans man)*

This quote illustrates the connection between Toby’s experience of their parent’s normative conceptions of gender roles and appropriate expression which, in turn had an impact on Toby’s acquired beliefs about gender roles and expression. Gender rules dictating how a woman should look and behave (Rogers, 2013) were ascribed to Toby in a rigid manner that made them feel the rules could not be challenged (‘…*I never questioned them’*). Although its first publication was over 20 years ago, Halberstam’s (1998) text exploring female masculinity, tensions and border wars between masculine cisgender women and trans men still resonates with some of the narratives of personal identity included here.

Halberstam (1998) sets out that masculinity (and I argue also femininity) is often reduced down to the body and its effects; the social, cultural and political expression of maleness (or femaleness). This reductionism is exemplified by the quote above whereby Toby’s mum appears to have stipulated a whole set of unwritten rules for femaleness that Toby felt they had to live by as they grew up. The two quotes together seem to suggest that Toby’s mum was able to set out the rules for being female, and their dad lay out the rules for being male. Further, these two sets of rules imply a binary opposition between female and male traits. Indeed, there was no information to suggest Toby’s parents perceived any areas in which femininity and masculinity overlapped.

**Gender expression and dysphoria**

Toby felt a strong need to present as the gender they were most easily read as by members of the public (a woman) (‘…*I was being read as female all the time and I was worried I would get judged at the swimming pool’)*. In relation to gender expression, participants were influenced by parents, friends and general members of the public:

*I love to swim, I had laser hair removal on my legs a few years ago as a quick fix because the act of having to shave my legs made me feel dysphoric. I hated what I was doing. I made the decision to permanently remove the hair because at the time* *I was being read as female all the time and I was worried I would get judged at the swimming pool. I had a conversation with my best friend about it who said "it's 2018, women don't need to shave anymore"... she thought a little bit and followed up with "actually, I did see a woman with really hairy legs at the swimming pool once, it was really awkward" (Toby, non-binary trans man)*

Toby experienced a tension between keeping their trans identity secreted away from public contexts such as the swimming pool (see section below – *living in stealth*) and preventing feelings of dysphoria *(‘when a person experiences discomfort or distress because there is a mismatch between their sex assigned at birth and their gender identity’*) they had when engaging in gender incongruent acts (Stonewall, 2017c, no page no). Toby underwent a laser hair removal procedure to prevent them having to shave as this female-associated task made them feel dysphoric.

Though the term ‘dysphoria’ has medical associations as it was linked to diagnosis of gender dysphoria as a medical disorder (Davy and Toze, 2018), contemporary medical discourse is moving towards a depathologizing of trans identities via new discourse reframing dysphoria as associated with distress due to gender incongruence related to both the individual self and the way a person is treated within society (Johnson, 2019). While this reframing is welcomed, research on the lived experiences of trans people suggests the efficacy of gender-confirming medical treatment remains important in the reduction of distress associated with dysphoria (Romito et al., 2021).

**Living in stealth**

Many participants reported living in stealth (hiding their trans identity from the public and/or friends and family) throughout most of their childhoods and into adulthood (Beauchamp, 2019):

*When I eventually left home, and began living on my own, I could spend all my spare time dressed in female clothing. Living a double life going to work as male and my free time as female. (Andie, trans woman, adopter and foster carer)*

This was due to fears of others’ judgements, which Beauchamp (2019) explains resulted from trans peoples’ awareness of the negative picture the public at large holds of them. The narratives included within this study support the findings of large-scale research showing that contemporary UK society still fails to include and accept trans people (Bachman and Gooch, 2018). That trans adults feel the need to live in stealth illustrates that cisnormative discourse dictates the social and cultural conditions that regulate gender expression (Foucault, 1979).

In further unpacking the experiences of those living in stealth, participants reported that they felt as though they were living ‘*double life’*. There appeared to be an enormous amount of stress and low mood exerted on people as they tried to cope with a duality of identity:

*I found myself back living a split life, switching between male and female, keeping this a secret from everyone, even my closest friend never noticed. It was on the whole a miserable existence, with little hope of improving. I thought about ending my life on a few occasions but managed to bury such thoughts. (Andie, trans woman, adopter and foster carer)*

Participants had to locate themselves differently within social relations than in their private lives to maintain this stealth living (Rogers and Ahmed, 2017). People use their agency to make decisions about how to present in different contexts, however this is influenced by structural factors as stealth living is directed by cisnormative discourse that creates a fear of openness. This need to live a double life further demonstrates the power of cisnormative discourse (Foucault, 1979; (Bauer et al., 2009; Catalpa and McGuire, 2018).

Numerous narratives from trans and non-binary people similarly describe the experience of having to hide themselves for a period of time and evaluated this as being emotionally difficult (Twist et al., 2020). Goleman (1995) sets out that emotion is roused by life encounters that may aid or threaten our ability to achieve our goals. Feelings are created differently in each human being because of the personal significance they attach to the occurrence (Lazarus and Lazarus, 1994). Emotional appraisal of events influences thought processes and as such then feeds into decisions and action taken. The excerpt above from Andie’s story suggests that she struggled emotionally as she did not feel able to ‘come out’ and achieve her goal of living openly as a woman (‘…*I found myself back living a split life, switching between male and female.’)*. However, there is also a hint of surprise that no one found out (‘…*even my closest friend never noticed.’).* Andie may have secretly wanted her friend to notice and open up a conversation, perhaps as a way of offering her a way out of the stressful way in which she was living in stealth (Beauchamp, 2019).

Secreting away her true self with little hope of any change to her situation caused Andie to experience severe low mood (‘…*a miserable existence, with little hope of improving.’)* and suicidal thoughts (… ‘*I thought about ending my life on a few occasions’)*. Research shows that trans people are indeed more likely to experience poor mental health, self-harm and suicide attempts (Bachman and Gooch, 2018). The stress of having to live in stealth and fearing the repercussions of potentially being outed exert enormous emotional pressure on trans people (Beauchamp, 2019). Compounded by the impact of negative media coverage (Hughto et al., 2021), trans people experience frequent transphobia and cisgenderism that often causes lasting psychological harm (Bachman and Gooch, 2018).

Where ideologies of normative gender are institutionalised and used to delegitimise and dehumanise trans people, the conditions are set for minority stress to proliferate (Riggs and Treharne, 2016). The findings of this study support Riggs, Ansara and Treharne’s (2015) findings regarding the mental health of trans Australians and the application of these to their model of decompensation. Andie’s experience encompassed multiple factors that were linked to poorer mental health; she wished to have treatment but did not feel able, lacked community connectedness and access to services.

**5.5 Coming out**

***Sexuality first***

Most participants reported firstly coming out as gay, lesbian, bisexual or pansexual and coming out as trans later in life. In these narratives, ‘coming out’ refers to the sharing of information about sexual or gender identity with another person/people, such as friends, family members, employers or colleagues. Experiences of coming out as trans were mixed, as were associated experiences of coming out as lesbian, gay, bisexual and pansexual. Some narratives portrayed primarily positive experiences, for example that of Celyn:

*So then, when I came out, at 17 I came out to my parents as bi. Er, and they said, oh ok, so is your dad. So yeah, as far as coming out to your parents goes, it was pretty painless. (Celyn, non-binary adopter)*

This ‘painless’ experience that Celyn had may be attributed to their dad also being bisexual; people of various gender and sexual identities can find it easier to understand and relate to those with similar experiences and preferences (Twist et al., 2020). Lev (2010) presented a counterargument that LGBTQ+ parents can experience pressure to raise heterosexual and gender-conforming children, due to fear of judgment that their lifestyle choices are linked to children being LGBTQ+. Indeed, recent evidence suggests that trans parents are yet to be accepted into the mainstream (Haines et al., 2014; Bower-Brown and Zadeh, 2021). However, this study’s findings suggest that LGBTQ+ parents offer more acceptance of children’s sexual and gender identities, enable young people to experiment and role model the successful navigation of less conforming lifestyles.

Celyn’s parents had already undergone a process of decentring of norms related to sexuality and gender before Celyn came out to them, as such they found it easy to accept their child as bisexual and trans (McNeilly, 2019). Celyn’s relation to their gender questioning child was likewise informed by a parenting style constructed from a place of decentred gender norms (*see Chapter 7* for further explanation), Further, Ammaturo (2019) highlights that children have their own political agency; the rights and ability to self-determine their own gender and sexuality.

**Pressures of gender conformity**

Some participants reported negative experiences in relation to the process of exploring their gender identity and coming out. Negative responses at expressions of gender that differed to that a person is assigned at birth tended to begin pre-adolescence:

*When I was really young, they were kind of like, oh yeah, whatever, like, described me as a tomboy…* *just like, oh yeah, Jamie’s just like, a little bit, you know, like rough and tumble, likes to wear boys’ clothes, or whatever…* *then that started becoming like, less and less acceptable, to my mother especially, the older that I got. (Jamie, non-binary prospective adopter)*

Gender conformity tends to be imparted upon girls with particular effort as they approach puberty, at which point Halberstam (1998) argues that female masculinity is likely to be interpreted and responded to as posing a threat of similar weight to that of male femininity. Attempts to subjugate a trans man into complying with accepted forms of femininity during adolescence can as such be as vehement as those pushed upon trans women in efforts to sculpt them into forms of traditional masculinity.

It may be that trans masculine people experienced markedly more positive reactions from others in relation to their expression of masculine identities as children than did trans women, as there may be a belief in society that tomboyism (an extended period of childhood female masculinity) can be tolerated or indeed encouraged (Halberstam, 1998). Tomboyism can be viewed as a desire to accrue the greater freedoms and social mobilities that men are afforded, demonstrable of the hegemony of patriarchal gender. However, where a total eschewing of female identity or a masculine alignment extending past puberty tends to be met with opposition and efforts to reorient to a female gender. This is illustrative of the dominance of cisgenderist discourse (Stryker and Aizura, 2013), and failure of society to make provision for gender variance (Pearce, 2018).

While some participants experienced pressure to conform to gender norms and marked distress at coming out to romantic partners (see *Crisis point triggers* section below), other participants disclosed their gender identity to romantic partners with relative ease:

*We’re very close, sort of Victoria’s always known about my orientation for a lot of years…Yeah, erm, well since day dot actually! (Alice, trans woman, prospective adopter)*

Alice felt able to share her gender identity with her partner from the start of their relationship, perhaps reflecting that Victoria’s pre-existing views and gender norms were already decentred (McNeilly, 2019). This absence of gender conformity pressures was conducive to the development and maintenance of fulfilling romantic relationships (Riggs, Von Doussa and Power, 2015).

***Coming out an older person***

Andie and Sarah-Jane (the older participants among the group, born pre-1975) remained in the closet (they had not come out as trans, Stonewall, 2017b, c) for the longest amount of time (until over thirty years of age). This was likely due to the historical lack of acceptance of trans people within UK society during their youth to middle adulthood (Stryker and Aizura, 2013). In speaking about whether she could have transitioned in her early 20s and before having her family, Sarah-Jane explains how she was denied this option:

*I did try, but I was told ‘no, that sort of thing’s not for people like you’. Get married and it’ll all go away. (Sarah-Jane, trans woman interested in adoption)*

Over compensatory behaviours are often engaged in to hide gender identity (Eisenberg and Zervoulis, 2020). This exemplifies the extent to which heteronormativity and cisgenderism were in operation at the time; that Sarah-Jane’s enquiry into transition was refused with a response that appeared to encourage her to stop questioning her gender identity and instead to assimilate into heteronormative prevailing norms (Ansara and Hegerty, 2014). The mechanism by which it was supposed this could happen was by engaging in normative gendered relationships:

*It’s the same that they told gay people in the 60s; ‘you’re only gay because you haven’t experienced opposite-sex sex. (Sarah-Jane, trans woman interested in adoption)*

This quote offers a further classic example of heteronormativity and cisgenderism. Andie describes the way in which these dominant discourses had exerted power over her (Foucault, 1979) and led to her attempting to live as a cisgender, heterosexual male:

*I didn’t want to be alone in my closet anymore…In my quest to feel normal I joined a dating agency online, met several ladies, who really surprised me, with their keenness for sexual relationships, it really wasn’t what I wanted, I thought there must be affection, than just sleeping with someone. I was really trying to supress my transsexual life and at first when I met Sophia I thought, I’d buried things so far in my mind so I could live. (Andie, trans woman, adopter and foster carer)*

At the time, Andie did not feel able to access a counter-narrative to dominant cisgenderist discourse, thus she aligned with it (Bamberg and Andrews, 2004). Andie’s story likewise suggests that she had internalised a belief that if she could engage in relationships as a cisgender male, her trans identity could in effect be pushed down. These narratives tell a story of how people were made to feel that being trans and transitioning into their preferred gender was not a possibility and that assimilation into cisgender normative life was the only real option available. This resulted in both Andie and Sarah-Jane attempting to live as cisgender males and have relationships with cisgender females, refraining or feeling prevented from considering and seeking out support to transition to their preferred genders until many years later in the 2000s.

Although these narratives speak of difficulties in ‘coming out’ over 20 years ago, current research still shows there that trans people find it difficult to come out and live openly and visibly within the UK (LGBT Foundation, 2017; Bachman and Gooch, 2018). Indeed, the processes prior to coming may bare similarities today as the fear of negative repercussions remain (Pearce, 2018; Kennedy, 2020). However, a key difference is that Andie and Sarah-Jane did not have the same access to the internet as younger participants. This made it harder for them to find a lexic key, the acquisition of vocabulary such as ‘trans’ that enables a person to search for more information that can help them understand their situation:

*I had very low esteem and lack of personal confidence, with a strong feeling of not fitting in anywhere…* *All I clearly remember is waking up each morning hating my life, it was around this time I started to feel things were wrong. Never feeling like I fitted in, being confused with hidden desires not to be male. (Andie, trans woman, foster carer and adopter)*

These feelings are common among trans youth and constitutes what Kennedy (2020) describes as the tacit deferral period of a person’s coming out process. Throughout this time, young people feel gender dysphoria but do not have the language to understand and express it. Therefore, a person feels as though things are wrong and that they are different, but they do not know why. This is followed by an epiphany, that leads to a discursive deferral stage in which the terminology to explain gender is found and a process of exploration begun. During this stage today, young people often explore online spaces to negotiate and understand their identities, as well as to connect with other people in similar positions to themselves. However, as found by other contemporary research, older trans women grew up with a feeling of difference that was more difficult to make sense of as they lacked exposure to other trans people (Eisenberg and Zervoulis, 2020).

**Role models**

Trans people continue to feel compelled to live in stealth due to societal fears manifested as aggression towards trans people (Beauchamp, 2019). This cisgenderist discourse of trans as unnatural and ‘other’ appears to have exerted strong influence on participants (Ansara and Hegerty, 2014), imputing in them a fear of ‘coming out’ even where a positive role model presented an opportunity to follow suit:

*There was a trans boy at my high school… I remember thinking, like, I wish I was as brave as him… he was just fearless, in my eyes anyway. He was, like, I’m using the boys’ bathroom… you’re using my correct name and pronouns, like, fight me about it! … it was amazing to see that… but even then, I was like, oh no, I could never do that kind of thing. (Jamie, non-binary prospective adopter)*

Indeed, Bird and Garofalo (2012) found that the presence and accessibility of role models did not have a significant relationship to negative health behaviours such as binge drinking and drug use. However, Morrow (2004) suggested that it was the lack of adult roles models that poses the issue for LGBTQ+ youth. Positive adult role models such as that of LGBTQ+ parents may be more likely to offer work to enable LGBTQ+ youth to navigate challenges in life, offering an image to observe as well as support to discuss and reflect on issues. One such issue is the impact of cisgenderist discourse on ways of understanding social life:

*Growing up, I thought that people were divided into two categories, male or female. And in everyday life I hear people say "that's a very guy thing to do", "classic girl problem" (Toby, non-binary trans man)*

Nguyen (2020) writes about their experience of learning to perform manhood as a child by observing their father and witnessing toxic forms of manhood in the people who bullied them. Like Toby, they found actions to be clearly divided by gender, and this formed their first understanding and experience of what gender was. These defined the parameters for processes of identification through similarity and difference (Rogers, 2016). Indeed, stories from non-binary people from different cultures in Eastern and Western cultures suggests that contemporary society largely assigns a binary gender category to physical presentation (e.g., clothes, hair, body shape, use of make-up) and behaviours (Twist et al, 2020). Jas (2020, p.55) sets out the argument that ‘*physiology does not dictate gender’*. Although bodies transform into slightly different shapes as a result of hormones, Jas argues that the variation between human shapes is far greater than two shapes.

**Crisis point triggers**

Andie had two separate crisis points or triggers that she expressed as triggers for ‘coming out’. Firstly, Andie knew her medical notes would ‘out’ her to social workers and this urged her to consider coming out to her wife:

*Our initial contact with the YYYYY fostering team regarding becoming foster carers, triggered my first dilemma, my medical checks gave away my most closely guarded secret about my transgender past.* *I had never told my wife Sophia about my past as I thought it was just that; buried in the past. (Andie, trans woman, adopter and foster carer)*

Continuing the fostering process thus removed Andie’s agency in relation to sharing her gender identity (Rogers, 2016). While Andie continues to be married to Sophia, she did not reconstruct stories of coming out as positive, rather, the narratives retained the negative impact of her coming out experience (McAdams, 2001). Her fostering and adoption narratives are indeed then contaminated as the story of how she and Sophia grew their family necessarily involves recounting the distress that Andie felt as she felt coerced into coming out (McAdams et al., 2001).

The second a convergence of events and challenges that amounted to a big enough stimulus to lead her to the tough decision to come out publicly to her friends and colleagues:

*I never found the courage to tell my mum before she was killed in a car crash, falling into a depression I finally went to the doctor…I finally reached a point in my life where I felt so trapped, my mum and dad had passed on. Last year I had lost my brother and been made redundant. It was the turning point in my life, and I could not deny who I was any more. (Andie, trans woman, adopter and foster carer)*

This crisis point was complex and multi-layered. Firstly, Andie’s family had passed away, leaving no family of origin to disapprove of her trans identity (*see Chapter 6* for further information on family of origin). Secondly, Andie lost a job and the collegiate relationships that provided. These events, although undoubtedly distressing, may have collided to provide the necessary conditions for Andie to feel more comfortable coming out. She no longer had to fear disapproval in two main sites of social life: family and employment (Connell, 1987). The potential for negative response and loss of contact with significant people in her life could have been a prior motivator to live in stealth (Beauchamp, 2019).

It is concerning that Andie’s experience essentially seems to be that of being forced to disclosure her trans history by social workers:

*The assessing social worker and her manager insisted I had to talk to Sophia [Andie’s wife] about my past history before we could move on. After a week of stressing, I finally found the courage to talk to her about being transgender. It was possible my marriage could have ended, and a family broken up, because of the social workers’ lack of knowledge or I think understanding of transgender issues…* *Our assessing social worker or her manager had no idea of the trauma they were inflicting on me. (Andie, trans woman, adopter and foster carer)*

This exemplifies the dominance of cisgenderist discourse within a fostering context. It further demonstrates the significant shame that Andie held about her gender identity (Bockting et al 2020). This shame is induced by powerful processes of stigma (Link and Phelan, 2014). Andie had been exposed to cisgenderist discourse with such wide-reaching power and influence that she felt her wife could have rejected her (Tyler and Slater, 2018). She felt her identity was spoiled and that social acceptance was so unlikely because of her stigmatised trans history (Goffman, 1963).

**Strength and resilience**

The data included in this study supports current research in researching the strength and resilience that many trans individuals have (LGBT Foundation, 2017; Bachman and Gooch, 2018). One such example is the courage shown by those who fought feelings of shame and low self-esteem and self-worth to reach a point they could be open and proud about who they are:

*So here I am telling the world I'm transgender and no longer ashamed of being me, I have kept this secret for 42 years. (Andie, trans woman, adopter and foster carer)*

There could be some additional complexities in the process of ‘coming out’ as non-binary, as options for expression can be stinted where categories for gender were limited. One participant discusses their coming out at college:

*My college boss was non-binary. That was the first non-binary person I’d ever met in my life, and I was like, you could be that?! … I don’t think I’m a boy, but I don’t think I’m a girl… I was looking at this one path of … this linear, binary transition that I thought was the only thing you could be… Pretty soon after that I came out… I started the process, for me, and what it meant for me… telling people I was non-binary… ‘they’ are my pronouns all the time, only ‘they’… I don’t mind when people use ‘he’, but it’s like, it’s, it’s like closer, but it’s not quite… I bought ALL the men’s’ clothes, that I could find… (Jamie, non-binary prospective adopter).*

Strides have been made to expand the possibilities for gender expression for non-binary people in the UK in recent years. Examples include the civil service adopting a non-binary identity option (Monro and Van der Ros, 2017) and the increased visibility of non-binary people in clinical settings (Motmans, Nieder and Bouman, 2019). However, the literature still suggests there are challenges regarding the visibility of non-binary people (Taylor et al., 2018). This invisibility can be an issue from individual to structural levels. A structural example comes from Jaspal et al. (2018) who argue that where health monitoring systems use binary gender categories, non-binary identities are erased. At an individual level, a large-scale study found that 76% of non-binary people in the UK avoided expressing their gender identity because they were afraid of negative reactions to it (Government Equalities Office, 2018).

**5.6 Hierarchies of gender and sexualities**

**Border wars**

Within the LGBTQ+ community there can be great dissidence both between and within the respective sub-categories of gender and sexual identities (Twist et al., 2020). This could be due to increased media representation that lesbian and particularly gay men have had in contrast to the lack of representation that trans people had in the 2000s:

*There was a Gay Straight Alliance at my school… being a teenager, it was like, the sexuality thing felt safer because it was like, this would’ve been 2006, um, so, it was more like, especially like gay men, had a lot of media representation, people knew about this, it wasn’t like, shocking or weird. (Jamie, non-binary prospective adopter)*

Trans people are seen as ‘*shocking or weird’* whereas gay men had by 2006 become part of mainstream western society, as they had been accepted and promoted by the elite who control politics and the media (Jensen and Tyler, 2015). There emerged a hierarchy of gender and sexualities with gay men and lesbian women placed at the top and trans women placed at the bottom (Serano, 2016).

There was a theme within the participant narratives of secrecy being important to exploring gender identity, even once you were ‘out’ about your sexuality. In considering why participants felt they could not discuss their identity with others, the socio-political history of female masculine identities may offer insight. Some lesbians (often known as Trans Exclusionary Radical feminists: TERFs) have pitted trans men as traitors to the feminist movement who cross over and become enemy to the cause (Halberstam, 1998; Hines, 2019). Trans women are framed as the enemy trying to infiltrate and invade women’s spaces. Some cisgender women identifying as butch believe that trans men are merely butch women who prioritise belief in anatomy, and conversely some trans men believe butches to be trans men afraid to transition. Halberstam (1998) argues that such border wars are caused by the presumption that masculinity is a limited resource that is available only to a few or that it enshrines a set of protocols that should be agreed upon in advance. It is perhaps such presumptions that cause others to experience some form of psychological or social discomfort when dealing with someone whose gender does not conform to socially dictated norms.

**De-valuing female and non-binary masculinities**

In analysing why non-binary trans masculine identity such as Toby’s was difficult to openly share (‘…*I was being read as female all the time and I was worried I would get judged at the swimming pool’),* it may be useful to examine the way in which society views female masculinity, the varied expressions of masculinity that women can have (Ekins and King, 2005). Halberstam (1998) highlights that although society finds it difficult to define masculinity, it nonetheless seems to recognise, ratify and reward some narrow versions of it *(‘Gender roles were very clearly defined…boys aren't meant to cry’).* Female masculinity does not reap the rewards of ‘heroic masculinities’ in the same way though. In using Halberstam’s concepts, it could be argued that Toby’s identity as a non-binary trans man did not fit the narrow frame of ‘heroic masculinity’ that society celebrates. Rather, their identity exists at the margins of masculinity, comprising rejected aspects of dominant masculinity.

*Are they gonna be like, whoa, there’s this, not even this trans person, there’s this non-binary person, what even is that? (Jamie, non-binary prospective adopter)*

Connell’s (1987) theory of hegemonic masculinity supports this notion, detailing that the practise of legitimising and maintaining men’s dominant position in society acts to subordinate other gender identities perceived to be feminine. Recent research into transmasculine pregnancy likewise suggests that a narrow societal view of masculinity can disadvantage trans men and transmasculine people (Riggs et al., 2020). Halberstam (1998) may further argue that minoritised non-binary transmale identities (such as that of Toby) can be used to make these identities within the dominant sphere appear to be more authentically male. As such, the marginalisation of non-binary male identities could be seen as a defensive behaviour, arguably enacted by men whose fragile sense of masculinity feels under threat. Conversely, this quote is suggestive of perception of a threat to femininity:

*We left a church because my parents didn't like that it was led by a female minister, which went against my mum's views that that wasn't a job for women. (Toby, non-binary trans man)*

Toby’s mum changed church due to a feeling of threat or unease at a female taking on a minister’s role. This exemplifies the influence that cisgenderist discourse had on Toby’s family (Stryker and Aizura, 2013; Ansara and Hegerty, 2014). Family practices were dictated by normative conceptions of gender roles and lack of acceptability of transgressing these (Connell, 1987).

**5.7 Transition**

**Medical narratives on trans and transitioning**

Prior literature argues that the medical institution has largely gone unchallenged throughout the 20th and 21st centuries (Stryker and Aizura, 2013). However, Andie’s quote suggests that the dominion of the medical model in directing the formation of trans discourse underwent significant change in the early 21st century:

*It was during receiving counselling for depression that I talked about my feelings of being female. In 2001 I attended C clinic in London trying to find answers to my feelings. I was diagnosed with severe gender dysphoria and given a few options on how I could continue. Back in 2001 the treatment regimen was very different to modern day understanding of suitable care. (Andie, trans woman, adopter and foster carer)*

Foucault (1979, 1988) would argue that every object (e.g., madness, sexuality) undergoes a process of initial differentiation that is directed by authorities such as that of law and medicine. Historically, trans personal identities have been defined by medical discourses (Stryker and Aizura, 2013). This is due to the medical institution being constituted by a body of knowledge and practice that is recognised by public opinion, government and law. Andie’s narrative demonstrates that in 2001 her trans identity was ‘*diagnosed’* as a mental illness (‘…*severe gender dysphoria’*). While this is the terminology Andie uses, under the DSM-IV (APA, 1994) she would have received a diagnosis of gender identity disorder. It was not until 2013 that ‘disorder’ was replaced with gender dysphoria in the DSM-5 (APA, 2013). The medical institution is indeed moving away from a pathologizing discourse and towards gender-affirming practice that considers gender beyond the binary (Knudson, 2020):

*I just thought that trans meant, like medical something… like a sort of medicalised understanding (Jamie, non-binary prospective adopter)*

This process has been supported by sociological analysis of trans identities (e.g., Hines, 2006a, b, 2007a, b, 2019, 2020), underpinned by theories of gender normativity and cisgenderism (Ansara and Hegerty, 2014). These theories have propagated a new discourse that does not limit trans identities by binary categories or outside imposed standards such as that of medical and legal professions, rather allows trans identities to be configured and trans discourse constituted by trans people themselves (Whittle, 2006; Serano, 2016; Pearce, 2018).

It is only in very recent years that the deficit of knowledge in relation to non-binary people has been highlighted by the psychiatric research base (Richards et al., 2016). Generational differences may account for some variance in the prevalence of non-binary people, as Clark et al.’s (2018) study on Canadian young people found that they are more likely to identify as non-binary. Non-binary people may elect to have medical treatment or may not:

*I don’t think transition is like, one thing. I think there’s like utterly infinite, infinite possibilities for what that could mean. (Jamie, non-binary prospective adopter)*

Richards et al. (2016) put forward several treatment options such as use of hormones and urged compassionate assistance to non-binary people in the absence of clinical guidelines and treatment protocols.

**Results of medical treatment**

For those who wanted and have had hormone treatment and surgery, the reported results have been positive:

*Well, you’re just an ordinary-looking person aren’t you, so. Great! (Alice, trans woman, prospective adopter)*

A person’s gender can be experienced as relative to other people’s expression of gender (Tolu and Tolu, 2020). Alice gains recognition as a woman in a relational way, by identification with processes of visual similarity to women and difference to men. Alice was satisfied with her medical treatment because it enabled her to pass. Passing was an important part of Alice’s transition as it enabled her to live as a woman without the potential negative responses that trans women who do not pass experience (Finney Boylan, 2003; 2013). Jas (2020) discusses the difficulties that trans people with femme-coded styles of clothing can have when presenting themselves in cisnormative spaces, particularly to the general public. Risks range from lack of understanding to the perception that you stand out to physical and emotional abuse. Alice shines and spotlight on the converse feeling she had after surgery, the implication being relief at no longer looking extraordinary and attracting attention. Jas (2020) argues that public attention directed towards trans femme people arises when mundane, cisnormative environments are destabilised.

Alice considers the specific changes to her emotional and physical self that transition brought:

*So, coming from a testosterone body to a… oestrogen body is different…in terms of the chemistry… but it hasn’t really affected me that much…No, no, it really hasn’t. So, if anything I do feel more empathetic to people, you know, I…I’m sort of a fairly average sort of person, I still like the same things I used to like and I haven’t changed in any real way. I’ve just become sort of even more outward expression of a person, which I like. I really like…less inhibited I think, definitely…So that’s been a really positive story. (Alice, trans woman, prospective adopter)*

Alice’s narrative is indicative of Enke’s (2012) conceptualisation of gender as being socially produced through cultural processes that facilitate ‘*one’s sense of self as a gendered person’* (p.18). Alice’s experience of gender arose through cultural processes that enabled her identity as a woman to be developed and performed (‘…*more outward expression’)* (Butler (1990, 2004).

**The role of family planning in transition**

Victoria was involved in Alice’s decisions and plans regarding when to transition, as the timing of this for them as a couple was tied in with their attempts at having a baby (*see Chapter7* for further detail). It was never an ‘if’, rather a negotiation as to ‘when’.

*I said, well look, I’ve seen that people who are trans are, when they get older it’s a lot harder for them to go through the physical change… I’m not getting to 30 and if we haven’t had kids and I’ve not started my hormones… and so we put our own little deadline on it. (Alice, trans woman, prospective adopter)*

At the point at which Alice made the decision to have children, as indicated by the quote, Alice had been living as a trans woman for three years and this underpinned the timing of her motivation to place a boundary around having a child (‘…*we put our own little deadline on it*’). This demonstrates how gendered embodiment as a phenomenon for some trans participants can be linked to physical processes (of transitioning, ageing and childbearing). Ageing can limit trans people’s options for gender confirmation surgeries as well as the way they perform gender (Siverskog, 2015).

**5.8 Cisgenderism in society**

**The impact of cisgenderist norms and assumptions**

The narratives all suggested that cisgenderism is prevalent within society:

*Society makes it very difficult to express your gender identity if it's not binary. Nonbinary is not recognised by UK law, it is not an option on official documents, insurance policies and the title "Mx" is not available on all forms…* *for the sake of legal recognition I am forced to choose either male or female. The best fit for me is male, unless I have an option of "other" or "unspecified". (Toby, non-binary trans man)*

Where people are forced to fit themselves into male and female binary designations, society is failing to meet their needs (Twist et al., 2020). Indeed, the narratives of the non-binary identified people included within this study point to a failure not just in adoption and fostering services, but more widely within myriad UK services. There is no legal, social or political space made for non-binary people to inhabit. There are also examples of assumptions being made about trans people:

*There is the assumption as well that if you are trans, that will rub off on your child, and that came from that environment there. (Ash, neutrois prospective adopter)*

Here, cisgenderism could be enacted where assumptions are made that people become trans as a result of an experience, rather than an acceptance of it as part of a person’s core personal identity. Although non-binary writer Pollock (2020) argues against the overly simplistic and binary viewpoint of trans people being born trans, as they feel that all aspects of identity cannot be satisfactorily seen as fixed from birth or binary. This argument could also be extended to assert that being trans is not something that can simply rub off onto someone. Rather, we need to critique the notion of any aspect of identity as being binarily quantified. It is this black and white thinking that leads to othering and the associated notion of other as possessing a stigmatised quality that demarcates them as fundamentally different from us (Goffman, 1963). Indeed, it can be said that change must occur at a societal rather than individual level, as the need for belonging to the majority grouping arises from a desire not to be ‘othered’.

**Narratives of change**

There are positive stories that indicate contemporary British society is incorporating positive changes in relation to how it views gender:

*The last 6 years it’s been massively accelerated acceptance of the communities…I’ve certainly found that. Just from the trans perspective, forget adoption, initially, from sort of 2010/11… you do get the stares, you, wandering about. People are just inquisitive, but they don’t wanna ask…But now you don’t get the stares, you don’t get stared at…I know that things like channel 4 are doing quite a lot, BBC are doing quite a lot on that front, so if people get exposed to that and, well, a large proportion of people, and that actually will start to make them think. So, you start to see a bit more of an accelerated change in peoples’ opinions. (Alice, trans woman, prospective adopter)*

Alice attributes exposure to trans people as the key factor in decreasing novelty and increasing acceptance of trans people. Indeed, Hines (2019) outlines that media coverage has enabled greater awareness of trans identities, however, she also argues that social media offers a platform for trans-exclusionary views to be widely shared. Alice considers discriminatory views as arising from lack of awareness and understanding. As such, it follows that increasing awareness will allow for the decreasing of misplaced misunderstanding in the form of discrimination. She also considers the difficulty in changing unconscious biases:

*If you think about the unconscious biasing, it’s social norms. It’s that sort of thing. So, you see others, you see people walking down the street and it’s all about that. And that takes generations to change. (Alice, trans woman, prospective adopter)*

Indeed, covert discrimination has been shown to be more pervasive and more difficult to address than that which is open (Ely, 1995). There is acknowledgment that it may take a longer period of time for unconscious biases held by the general public to be changed sufficiently for trans people to be regarded as usual and acceptable. This would be the only way to truly eradicate cisgenderism (Ansara and Hegerty, 2014).

**5.9 Transphobia**

**Online spaces: abuse, safety and risk**

A common finding across all the participants included in the study was the experiences of cisgenderism, transphobia and misgendering; forms of identity abuse (Rogers, 2016). Recent research suggests that online identity abuse in the UK is a problem that has been difficult to tackle due to issues in how to define, measure and record it (Vidgen, Margetts and Harris, 2019). They found that in spite of low records of hate crime and harassment (affecting 1 in 1000 people), 10-20% of people have been personally targeted with abusive content and 30-40% have seen online abuse. Toby said:

*You only need to follow BBC News who will occasionally post something like "Marvel are creating a transgender superhero" and I remember the top comment at the time was "How ridiculous, what's next? A superhero with downs syndrome?"…* [Toby next went on to relay transphobic comments they have viewed on Mumsnet] *"So you do not believe that a woman is an adult human female (i.e. with the chromosomes XX)? Is a woman just a feeling then? Nothing to do with biology?" and* [Toby reports comments made on Facebook] *"Fundamentally, you believe the rights of transwomen to be in single sex spaces such as a refuge overrules the need of vulnerable women to feel safe and comfortable?". (Toby, nonbinary trans man)*

Stonewall (2017d) found that 45% of LGBTQ+ people in the UK had witnessed online transphobia, homophobia or biphobia and Stray’s (2017) report for Galop found 85% of LGBTQ+ people had personally experienced abuse. Conversely, some participants experienced online forums as safe spaces to freely explore gender identity:

*I was like, exploring my gender in certain ways. So, I was… having sex with girls and like topping… I switch now, but that was like really important to me to explore… I was going in like online spaces, as a boy… I’d be like, I’ll just try and I was like, this is too bad, this is just for online and secret… (Jamie, non-binary prospective adopter)*

Jamie felt comfortable developing and expressing their narrative identity by creating stories of self in what they felt were safe spaces (McAdams and McLean, 2013). Narrating masculine or non-binary identities online can enable people to bolster their confidence by allowing them to express this identity anonymously first (Jas, 2020).

**Internalised transphobia**

Some participants reported experiences of both psychological harm as a result of transphobia, and the internalising of it:

*I spent a year (around age 23-24) going to counselling trying to undo the influence my parents’ beliefs had had on my life. I did not like the adult I had become, I had taken on so many of their views and suppressed myself so much, I had become very insecure and controlling, as well as a sexist and a transphobe. I am the complete opposite to this now, I would say I am a huge feminist (and/or feminist ally) and my transphobia was learned, I dismissed my own feelings for so long and I hated myself. (Toby, non-binary trans man)*

Internalised transphobia refers to the discomfort a person has with their trans identity as a result of taking on society’s gender norms and expectations (Bockting et al, 2020). Internalised transphobia can result in trans people excluding other trans people, whether consciously or subconsciously (Head, 2020). An alternative viewpoint comes from Smith (2020) who argues that humans often unconsciously recreate stress and oppression that we experience in our lives. Whether or not a person can undo the influence that their parents’ beliefs had on their life is an interesting philosophical question when pondered generally, but particularly pertinent when considered specifically in relation to gender.

Sartre (1968) would argue that humans cannot disconnect or insulate ourselves from our histories, therefore the meaning of our current lives would be seen as a direct result of all that has happened before. Toby’s narrative suggests that they have understood this to be the case and, through awareness of the impact their parents’ beliefs had on them, sought counselling to try and address the influence of their history. Toby’s apparent success at tackling their own issues of internalised sexism and transphobia, imputed by parental views, problematises Sartre’s (1968) view that we cannot disconnect from our histories. However, it could also be argued that Toby did not disconnect from their history, but rather they used counselling to emotionally appraise their childhood experiences in different ways, enabling them to use different thought processes to feed different decisions and actions (Lazarus and Lazarus, 1994).

**Misgendering**

Jamie gives examples of different scenarios when they were misgendered:

*I was like, so, like, stressed out about being mis-gendered, that I’m gonna …control how you see me… If I can be in a suit and tie, wearing a binder and all the rest of it, and still get called female, then what can I do? And…one time I was like, at the club, in like, a mini-dress, and, high-heels, and a full face of make-up, and I got ‘sir-red’…* *every time you say ‘mam’ or ‘sir’ to a stranger, you’re making an assumption (Jamie, non-binary prospective adopter)*

The Scottish Trans Alliance conducted a survey on the experiences of non-binary people in the UK and found that over 75% of non-binary people avoid situations due to fear of being misgendered, harassed or outed (Valentine, 2016). Two thirds of respondents also felt they were never included in services and very few people felt able to be out at work. Airton (2018) unpacks the political element of the advancement of trans rights, focusing specifically on a ‘No big deal’ campaign ran to promote accepted use of gender-neutral pronouns in Canada. He sets out that discomfort can be elicited in professionals where they fear making a mistake and that blame can be diverted onto trans people as a way of defending against the psychological impact of guilt when a professional does get things wrong. For these reasons, he argues that the de-politicisation of trans inclusive practices (such as use of gender-neutral pronouns) may indeed offer marked benefit to trans people. However, in the absence of a full understanding and appreciation of trans rights, improvement may be limited to just the one practice and discriminatory views may prevail.

This is due to the existence of a cisnormative master narrative of which all trans people must transgress (Bradford et al., 2018). Bradford and Syed (2019) conducted focus groups to identify the master and alternative narratives that guide trans identity development. They found that trans people both resist and concede to transnormativity (the hegemonic alternative narrative seeking to resist a master narrative of cisnormativity). Bradford and Syed (2019) argue that their Master Narrative framework can be used by practitioners to understand the identity development of trans people as being influenced by their negotiation with, resistance and acquiescence to transnormativity. The excerpt above from Jamie indeed exemplifies elements of resistance (‘…*I’m gonna …control how you see me’)* and surrender *(‘…then what can I do?)* to an alternative narrative seeking to further transgress normative understandings of gender.

**Discrimination: avoiding fault**

Participants tended to avoid the term ‘discrimination’ when speaking about their experiences of cisgdenderism, transphobia and misgendering. Sarah-Jane exemplifies what she feels is a strongly embedded subconscious sense of gender differentiation in people within our society and how it leads them to misgender her:

*I’m sometimes… I meet somebody, and I give them my name and I say hello and we chat a bit, and they’re quite happy using female pronouns, and then I’ll say something, and they’ll switch to male pronouns… And you correct them, and they say ‘no’! I say I’m using female pronouns and people say no no no, you do… sometimes, perhaps because I’ve been more assertive… and their brain has gone, men are assertive: they must be male. And similarly, if a trans guys is particularly caring or supportive they may call them ‘love’ without thinking. (Sarah-Jane, trans woman interested in adoption)*

Alice offers explanation for this in the way discrimination appears to be conceptualised as something overt, that people are aware of and as such seek to avoid:

*Generally, discrimination is another thing, I think people don’t wanna go near it, they don’t wana sort of approach these protected characteristics and they don’t want that too much because they think that the wrath of the law is gonna come and get them now. (Alice, trans woman, prospective adopter)*

As found in Hicks and Lewis’ (2020) stigma research, the boundaries between the ‘stigmatiser’ and ‘stigmatised’ are not always rigid. A person labelled as ‘discriminating’ could be stigmatised as this is not considered as a desirable characteristic in contemporary society (Goffman, 1963). It is perhaps for this reason that trans participants did not wish to label acquaintances with this stigmatised identity feature. This may be a developing phenomenon; stigma is not imbued and taken up at once, rather stigma arises through processes of selection and reaction (Plummer, 1975).

**5.10 Intersectionality of identity**

**Multiple identity categories**

In analysing narratives of personal identity, it is important to take an intersectional approach to account for how one identity category is mutually shaped by that of another (Crenshaw, 1991). The participant narratives show that gender works alongside disability to shape a person’s experience of identity. Jamie’s narrative highlights their experience that their gender can be overfocused on as an aspect of their personal identity, to the detriment of other facets:

*So, like, you know, like it’s interesting… you know, like, whatever, it’s a part of me, it’s an important part of me, I won’t downplay it. But, like, at the same time, it’s just, it’s like, it’s not the most. (Jamie, non-binary prospective adopter)*

Existing literature suggests that cisgender middle class gay men now comprise a group within society that now possess considerable privilege could be extended to the group of middle class trans men (Riggs, 2010). Indeed, it may be tentatively suggested that both trans and cis women remain at a disadvantage in terms of societal privilege as compared to trans and cis men (Halberstam, 1998). However, the narratives included within this study do not implicate womanhood as a factor in social disadvantage. Rather, the data makes alternative suggestions of disadvantage based on disability, mental health and socioeconomic status.

Ash discusses their views on the potential for discrimination on the basis of disability in addition to that based on their gender:

*So, it’s, like, adopting while disabled seems like a difficult thing to do. I am willing to do it and it be difficult, but I am not going to go into it expecting it to be ok…* *I think, there is, I think that there is just a societal understanding disabled people are looked after, they don’t look after. And that societal understanding sort of implies that, erm… Yeah, I think it’s become, I don’t think it’s personal biases, it’s from societal bias that says… A societal bias that says disabled people aren’t capable of doing things that everyone else can. (Ash, neutrois prospective adopter).*

Able-bodied, white privilege is acknowledged by non-binary writers as having impact the life opportunities, social perceptions and personal identities of non-binary people (see for example Jas, 2020). Ash is White British and therefore has access to white privilege, however, they experience disadvantage due to being disabled and having a non-binary identity (Crenshaw, 1991). Ash highlights that their disability is a particular feature of their identity that creates a social understanding of them as unable to live productively within society and as unable to parent. Olsen and Clarke (2003) highlight that research into disabled parenting (like that of LGBTQ+ research) looks for deficits and psychological impairments in children rather than exploring its positive aspects.

Olsen and Clarke (2003) further support Ash’s point that a similarly ableist expectation of incapability is imparted on those with mental illness. Indeed, they explore the intersecting impact of being a disabled parent and experiencing negative views of disabled parents as incapable because ‘*disabled people are looked after, they don’t look after.’*

As well as representing a higher proportion of people with disabilities, a large proportion of trans people have mental health problems (Bachman and Gooch, 2018).

*And I think that also applies to people with mental health conditions. And it comes back around that ¾ people have mental health conditions…* *I’ve had a lot of mental health treatment where people have made assumptions about me. I think it would just cause more assumptions to be made. (Ash, neutrois prospective adopter).*

65% of non-binary people in a recent largescale survey felt that lack of representation of people like them within services caused them to experience poorer mental health (Valentine, 2016).

Binary distinctions can be especially prohibitive to the understanding and support of intersectional identities, such as that of Ash. As a person who has a non-binary gender identity, is disabled, has mental health problems and *‘from a very low-income household’*, Ash questions what assumptions could be made about them. Ball (2003) argues that we often fail to see the way society imparts middle class views and moral truths. Reay (2004) further argues that even with overtly stated aims to the contrary, we continue to pathologize the working class. Foucault (1970, 1972, 1991) provides wider support to this notion, explaining that procedures exist to regulate discourses in society, allowing those who rule to impose limits defining whose knowledge is valid and who may speak.

Jas (2020) points out that concealing a central part of your identity and supressing your inner sense of self is an unhealthy practice. However, when individuals face negative responses when they express their gender more fully, this leaves them feeling less able to express themselves and as such results in greater limitation of self-expression.

*I think people will be… more negative were I to be openly trans... because I use a non-binary pronoun, because I have two current names, it’s confusing, and it scares people that aren’t from that world, because it’s all new. And there will be lots of talk about how it’s confusing for a child and it’s what gender you are, and… (Ash, neutrois prospective adopter)*

Hall (2020) describes the process of coming out as continual. They explain how non-binary people often ‘crumple under the weight of transphobia’ (p.109), allowing themselves to be shaped into something more palatable for cisnormative domains. Hall speaks about their coming out as involving no longer being constrained by expectations of both their black and trans identities. Ash’s decision of whether to be out in the adoption process is affected by considerations of the impact of their trans identity being intersected by being disabled and having mental illness too.

Valentine (2016) highlighted that there remains an inherent danger in openly occupying a non-binary gender and specified that there is a particular risk for people whose gender intersects with another marginalised identity. For example, those who are non-binary as well as BAME, disabled or working class may face increased discrimination.

Participants pointed out that there were other aspects of their identities outside of gender that were singled out:

*I did get bullied in school, but it wasn’t through that* [emerging sense of her gender diversity]*, it was just kind of generally being quite a small lad really. Someone that they can push around. I was told I was gobby, apparently. (Alice, trans woman, prospective adopter)*

However, although Alice stipulates that the bullying she experienced was not due to her gender diversity, there could have been some aspect of gender normativity at play in the bullying that she experienced. Being bullied because you are ‘*a small lad’* may imply that a small stature does not conform to traditional notions of masculinity as encompassing a larger size and bodily strength.

**5.11 Chapter summary**

This chapter has explored the richness and depth of narratives of personal identity. Discussion woven throughout this chapter has identified a common theme, suggesting that cisgenderist thought based on rigid viewpoints of gender as being binary, fixed and immutable have permeated people’s sense of personal identity. Perspectives and experiences varied among individuals, but a common thread interweaving through participants’ narratives is that each one spoke of some difficulty in relation to their personal identity appeared to result from interactions they had with others.

My analysis and interpretation of the data presented suggests that that it is the beliefs and actions of others that are a major causal factor in trans people experiencing challenges in relation to their personal identity. That is not to say that the road to exploring personal meaning and experience of gender would be entirely smooth in the absence of outside intervention; indeed, it may involve some discomfort where previously held beliefs about oneself must be shaken up and re-lain. However, the narratives demonstrate that it is the reactions of other people to a person’s gender diversity that appears to be the predominant cause of difficulty for trans people. Therefore. it can be surmised that it is the experience of cisgenderism through interactions with other individuals and groups, as well as the encountering of cisgenderism within cultural practise, social, political, legal and medical structures that are implicated in the challenges with personal identity that trans people face.

It is important to consider the complex interplay of factors that can impact upon a person’s sense of personal identity and give particular attention to the inextricable link between an individual’s psychology and their sociological experiences. It is suggested that cisgenderism may influence the narratives of trans people not just in terms of their personal identity, but also in terms of their interactions with others within groups and systems. The following chapter will go on to explore participants’ narratives of family.

**Chapter 6: Narratives of family life**

*They fuck you up, your mum and dad.*

*They may not mean to, but they do.*

*They fill you with the faults they had*

*And add some extra, just for you.*

*But they were fucked up in their turn*

*By fools in old-style hats and coats,*

*Who half the time were soppy-stern*

*And half at one another’s throats.*

*Man hands on misery to man.*

*It deepens like a coastal shelf.*

*Get out as early as you can.*

*And don’t have any kids yourself.*

*(Philip Larkin, 1971).*

**6.1 Introduction**

This findings and discussion chapter presents narratives of family life that speak to the sociology of trans families. It explores the impact that a trans person’s family of origin can have on their journey through youth and into adulthood. It examines how the different responses and modes of support (or lack thereof) can affect how a person narrates their experience of family. Much alike participants in previous research into trans people’s experiences of relationships within families of origin (Riggs, Von Doussa and Power, 2015) the term family was most often used within the participant narratives to describe parents and siblings. However, the participants’ subjective definitions of ‘family’ were used within this study and encompassed a wider conceptualisation including to romantic partners and children.

**6.2 Family of origin**

Participants were not specifically asked to speak about their family of origin. Some did not offer any stories relating to their own parents, whilst several participants spoke about their experience of being parented, both in relation to their gender identity and otherwise. Participants largely described their family make-up (for example if they had siblings, children) and then when family of origin accounts were given, they appeared to be offered firstly as contextualising stories that would then lead into stories of personal identity and adoption and fostering narratives (see also *C*hapters *5 and 7*).

**Parental influence**

Perhaps due to his scholarship in developmental psychology, Toby began their narrative by setting out their own early experience of childhood and tracks back the impact of their parenting experiences from when they were first born:

*My mum developed postnatal depression with me and admits that we didn't really bond until I was older and more able to explicitly express my wants and feelings. I learnt self-soothing techniques, some of which I have kept to this day. (Toby, non-binary trans man)*

The long-term effects of post-natal depression have been well documented, with research demonstrating the impairment on mother-infant interactions and impacts on infant emotional and cognitive development that Toby describes (Murray, 2009; Netsi et al., 2018). Toby discusses in detail the impact of the gender rules and norms set by their parents as they grew up (see Chapter 5), and follows these discussions and that of their mother’s depression with an examination of the linkages to their own romantic relationships:

*Historically I’ve been insecure in my romantic relationships and found it very difficult to relinquish control and spend time apart from a partner. With the help of counselling, those thoughts and feelings have completely gone. I've been able to take more control of my own life, rather than conform to my family's and sociological expectations. I have in tern become a lot more easy going with other people. (Toby, non-binary trans man)*

Levitt and Ippolitos (2014) argue that gender identity develops through an interplay between external demands and the desire for authenticity. Internal gender experience and external assessments come together to construct a coherent identity, or as in Toby’s experience, a lack of coherence. Thus, Toby needed additional support via counselling to integrate their sense of self, in the absence of support from their family and friendship network throughout a difficult period of exploring their gender (Budge et al., 2012; Kennedy, 2020).

Using McAdams and McLean’s (2013) concept of narrative identity, Toby’s story can be evaluated as offering a coherent positive resolution that highlighted the impact of personal agency as well as communion. Their story begins with discussing the difficulties that they have had with intimate romantic relationships, implicating the impact of their parents’ expectations in this and stressing their own role in affecting change within their life. Toby’s story could however also be interpreted using the master narrative model, whereby personal narratives arise from a balance between the master narratives and alternative narratives (McLean and Syed, 2015). Here, it could be argued that Toby had internalised expectations held by both their parents and by society at large that would direct (through a master narrative) how their life should unfold over their life course (e.g., marriage, child-rearing). Through counselling they integrated an alternative narrative that allowed for greater agency to set their own expectations. In this way, Toby has engaged with a counter narrative to dominating master narratives directed by gender and hetero-normativity (Bamberg and Andrews, 2004; Bradford and Syed, 2019).

**Parental acceptance and support**

Celyn’s account was the only narrative that solely featured reports of family acceptance in relation to both their sexual and gender identity:

*So then, when I came out, at 17 I came out to my parents as bi. Er, and they said, oh ok, so is your dad. So yeah, as far as coming out to your parents goes, it was pretty painless. (Celyn, non-binary adopter)*

While Kennedy (2020) found that young people were often unable to predict whether their parents’ responses to their coming out would be negative or positive, Celyn’s account does not suggest that they experienced usual feelings of uncertainty and trepidation. However, Alice describes her parents’ lack of support in relation to her early consideration of gender identity that began when, as a young boy, she felt that something was wrong with her male body:

*So early digits* [referring to her early years of life] *you start thinking there’s sort of something amiss with your body. It doesn’t seem quite right. You start to see the world, and actually, there’s nothing, you know, nothing right about it, so… so I went through school, and you know I was kind of, my parents weren’t supportive at all. (Alice, trans woman, prospective adopter)*

The lack of parental support that Alice experienced is a common finding among the literature (e.g., Grossman et al., 2005; Budge et al., 2012; Eisenberg and Zervoulis, 2020). When trans people come out, friends and family that are usually the providers of social and emotional support can become the cause of stress (Budge et al., 2012). The way Alice describes nothing being right about the world shows the extent to which she was made to feel as someone who is deviant or other, with an identity that was arguably so spoiled that it was not even acknowledged as an option (Goffman, 1963). Negative, cisgenderist reactions that Alice experienced within her family of origin (as well as other areas of life), can be applied to future occurrences, leading Alice and other participants to expect lack of acceptance and support (Pearce, 2018).

The way in which Alice linked her parents’ unsupportiveness to gender normativity indicated that cisgenderism had a significant impact on her life, permeating her early experiences in childhood right through to her adult relationships with her parents (Ansara and Hegerty, 2014). However, Riggs, Von Doussa and Power (2015) highlight that it can be difficult to extricate the impact of cisgenderism within families of origin from that of trans peoples’ experiences of cisgenderism within wider society.

While it was not overtly stated as such, Alice’s parents appeared to guide her towards roles traditionally associated with men:

*During the holidays it was like, ‘go and help your dad’. (Alice, trans woman, prospective adopter)*

It may be that her parents had an inkling that she was trans before she came out, as was found to be the case with some parents in previous research (Grossman et al., 2005).

Alice appears to make excuses for their apparent rejection of the validity of her gender identity and failure to address openly the fact that their child is trans:

*No, they, they’re tolerant now but they’re not, like, I wouldn’t say that I could go to them and actually have a proper conversation about it because just, they just worry too much. That’s what it is. (Alice, trans woman, prospective adopter)*

However, as outlined in the theoretical perspectives chapter, if intimacy is seen as necessitating a sympathetic emotional element, then some participants’ relationships can be said to be lacking full intimacy (Jamieson, 1998). Alice’s description positions her parents’ struggle to come to terms with her gender identity as being because ‘*they just worry too much’* could be motivated by a strong desire to retain the relationship. The reinforcing ‘*That’s what it is’* statement at the end of the above line indicated that Alice was trying to convince herself and her audience that her parents are well meaning. It could be reflective of her parents’ concerns regarding cultural cisgendeirsm and the responses that they fear Alice may get from the public (Kennedy, 2020). However, the following quote suggests that the underlying issue was more of a refusal on her parents’ side to work on their attitude and acceptance regarding Alice’s gender identity:

*They’re being tolerant with me because they don’t want to accept it, it’s like ‘Oh I’ve lost my little boy’… They’ve said things like ‘it’d be like you’ve died’ and I’m like ‘what a stupid thing to say?’* [When asked when] … *Not even that long ago. I’m thinking, ok, I have a good relationship with them, but I don’t have a full relationship. (Alice, trans woman, prospective adopter)*

Feelings of loss are indeed common in parents of trans young people (Wahlig, 2015). As western society relies heavily on gender as an organising principle it guides our understanding not just of personal identity, but also how we should act within relationships. Thus, parents can experience a sense of loss and confusion about their child’s identity and new role within the family. However, the comparison of a loss akin to death could also signify extreme cisgenderist and transphobic perspectives; that Alice being trans is something so abhorrent that it is like a death. This severe lack of understanding could be interpreted as arising from embedded societal cisgenderist beliefs that the only fixed and immutable gender identities are those of cisgender female/male binary categories (Ansara and Hegerty, 2014). Those identities that sit outside of that strict stereotype can be seen as spoiled identities; stigmatised as denoting the person is less than or other (Goffman, 1963).

It is of interest that Alice is able and willing to cope with these attitudes; expressing with certainty in the quote above that she disagrees with what her parents have said, while in almost the same breath, providing some defence of their views:

*That’s, that’s my issue… I just think things just sort of move at pace, and the longer time goes on and you know they’re seeing the changes happening, then it’s more acceptance. So, for them it’s more passive entry to acceptance perhaps for the parenting. (Alice, trans woman, prospective adopter)*

The way Alice offers up the potential reasons for her parents’ non-acceptance of her as being rooted in societal discourse in trans identity could, on the one hand, suggest that she finds it easier to attribute this to a cause outside of them or herself as individuals. It could also be that Alice has developed a sound understanding of the ways in which cultural cisgenderism (tacit, institutionalised cisgenderism) has infiltrated social consciousness to influence individual views such as those of her parents (Pearce, 2018; Kennedy, 2020).

Alice’s description of emotional distance in her relationship with her parents is not unusual as many trans people become estranged with members of their families of origin due to their lack of acceptance with regards to their gender identity (LGBT Foundation, 2017; Bachman and Gooch, 2018; Kennedy, 2020). Estrangement may indeed have become a feature of her life if Alice had remained living with her parents whilst she explored her gender identity. The following quote suggests that physical distance was an essential part of Alice’s exploration of her gender:

*But yeah so, I left home, at the age of 20 actually. Related to the home situation, so getting away from my parents I thought there’s no way I can express myself if I’m still there. (Alice, trans woman, prospective adopter)*

This study unearths the impact that cisgenderism in the family context can have, adding insight and understanding to prior findings from a largescale survey of 871 trans people in the UK (Bachman and Gooch, 2018). Their statistical data found that 42% of trans people who wished to have gender-affirming medical treatment had not yet sought this due to fear of the consequences it may have for their family life. Of those who were out to their family, 26% were out to all of them and reported that they were all supportive, however 11% lacked the support of a single family member. Like Alice, several participants within this study did not feel they could express their gender identity within the family home they came from and lacked support from most family members.

Some described clear examples of a sustained lack of parental acceptance that did not appear to be open to change:

*My mum cannot comprehend transgender being a thing because it goes against the bible (apparently?!). She frequently sends me YouTube videos from anti-trans activists who say it is not possible to be transgender… She thinks there are two binary genders, you are either 100% one or 100% the other and anything in between requires prayer and counselling… and it's been two years… She is just very difficult to reason with. (Toby, non-binary trans man)*

The effects of familial cisgenderism here are clear and rigid (Riggs, Von Doussa and Power, 2015). Grossman et al. (2005) found that the less gender conforming a young person was, the more likely they were to report verbal abuse from their parents. Indeed, the continued negative reactions displayed by Toby’s mother is echoed in Grossman et al.’s (2005) findings that 54% of young people’s mothers gave initial negative reactions to their child coming out, and 50% continued to react negatively three years on. Toby continues to engage with their mother however, suggesting a strong desire to work with her to change her cisgenderist views and maintain a relationship. This exemplifies the agency that trans people have in relation to the negotiation of their coming out and transition (Kennedy, 2020).

**Sibling relationships and support**

Alice’s relationship with her brother appears to be shrouded in the similar cloak of partial self-expression that she has accepted in order to assure an ongoing relationship with her parents:

*Yeah, so, I’ve got a brother as well… I haven’t said…. Yeah so, he’s a younger brother, he’s 4 years younger… junior… he’s very much like dad, he’s very laid-back… Yeah. He’s incredibly laid-back, he’s incredibly accepting of me, and my relationship, so… Yeah, so he doesn’t ask a lot of questions, you know I think he’s a bit sort of shy to you know, come to us and ask, but it’s all good with him really, you know… and I know the value of having a sibling compared to the value of not having a sibling. (Alice, trans woman, prospective adopter)*

Alice’s brother demonstrated acceptance of her gender identity and her relationship with Victoria (‘…*incredibly accepting of me’)*. This supports other recent research finding that positive aspects of coming out as trans on sibling relationships can be the development of strong and authentic sibling relationships (‘…*it’s all good with him.’)* (Parker and Davis-McCabe, 2021). Alice’s brother did not appear to need a process of family transition, rather he was readily accepting without question. This acceptance could be a key ameliorating factor in Alice’s family of origin story. Having just one supportive family member can help a young person successfully transition (Israel, 2005). As Riggs, Power and Von Doussa (2016) found, where discrimination was experienced in a trans person’s family of origin, they were less likely to experience support with plans to start their own family and thus less likely to desire to. Lack of support within a family of origin then could limit trans people’s pathways to parenthood.

**6.3 Romantic relationships**

**Stability and longevity**

The experiences of participants in relation to adult intimate relationships were variable, however many spoke of positive, open and loving relationships that had begun at a young age and remained established. Notable examples of positively experienced, open and stable relationships are those of Alice and Jamie. Alice speaks of the length and stability of her relationship with Victoria:

*Er, so my partner of 14 years this year… Yeah, so, we will get married someday… yeah at some point. It’s something were not particularly bothered about. We’re together, we’ve got that togetherness, you know, we’ve been in our house together 10 years this year. (Alice, trans woman, prospective adopter)*

In describing the nature and quality of their relationship, Alice comments:

*Yeah, really good. Quite happy… … we’re very close, sort of Victoria’s always known about my orientation for a lot of years… Yeah, erm, well since day dot actually! …Yeah, we got together when we were 17. (Alice, trans woman, prospective adopter)*

Participants who were currently in relationships mostly received good levels of support from their partners (Blair and Hostein, 2018).

**Openness and acceptance**

Alice’s narrative suggests that it was her and Victoria’s wish to have children by natural conception that put a halt on her physical transition to a female body:

*By 2013 I said right, we had a proper chat over the table and said right, I’m not getting to 30 and if we haven’t had kids and I’ve not started my hormones… I mean, let’s get to that point and it’s gotta be… I’m just gona have to… and she said yes, definitely. If she hasn’t conceived by then, then that’s the way it goes, and so we put our own little deadline on it. (Alice, trans woman, prospective adopter)*

This story of the support and acceptance Alice’s partner has given her, along with the support that the other female participant Andie received when she eventually came out to her partner (see below) contradict the findings of previous research. Riggs, Von Doussa and Power (2015) found that trans women within their study were less likely or less hopeful to experience an ‘ideal’ positive romantic relationship characterised by acceptance, respect, honesty, communication, trust and emotional closeness. Their survey study of 160 trans and gender-diverse Australians established that this effect could not be explained by lack of experience being in relationships and concluded that the finding suggested that there were differential effects of cisgenderism on trans women. This supported prior research by Garamel et al. (2014) that trans women experienced higher levels of stigma and stress within relationships. However, Riggs, Von Doussa and Power (2015) did not map the results by the gender of trans women’s partners and Garamel et al.’s (2014) study focused specifically on trans women in relationships with cisgender men. The present study explores the relationships between several trans women and other women and finds that they are characterised by intimacy, support and longevity.

This study similarly found evidence of openness, mutual support and long-term partnership within relationships between non-binary participants and their partners (a cis man and a woman with a trans history). Non-binary trans masculine participant Jamie described their relationship with their (cis) husband, who they married in 2019 when they were 25 years old. Jamie outlines the way in which the partnership started and quickly progressed to being seen by both as serious:

*So, I would say, like, let’s see… so, like we started, so like, we were friends first. We were like in the same friend group, and then erm, so we’d known each other for like, a long time. But we started dating in May, oh how long… 2015, yeah, that’s right, 2015. Erm, and, you know, I’d say within like a few months, we were having those conversations. Coz we’re both juts like, we’re not messin’ around, like, you know what I mean…* *this was gona be serious, so like, we both like really care about each other. So, like, we’re like, ok, if we’re gona build a life together, what does that look like? And is it compatible with what we want? (Jamie, non-binary prospective adopter)*

Like Alice’s relationship with Victoria, the narrative of Jamie’s marriage can be said to possess the features of the ‘ideal’ relationship, based on intimacy and sharing of needs and desires (Giddens, 1992; Jamieson, 1998). As found in prior research on LGB couples, Jamie and their husband’s relationship was characterised by an egalitarian form and engagement in processes of negotiation (Donovan, Heaphy and Weeks, 2001). They explored what each of them wanted and needed from the relationship and their future imaginings of family from the start, based on their own rules not those ascribed by traditional gender structures. As a couple whose identity, relationship and family desires sit outside of hetero- and gender-norms, Jamie and their husband may be regarded as a non-traditional family (Green, 2007; Seidman, 1995).

**Gender-based relationship difficulties**

Contrary to the stories of acceptance detailed above, Noel reported difficulties his partner has with regards to his cross-dressing:

*My present partner has issues with low feelings of self-worth and self-esteem and doesn't like it if I look "prettier" / put more effort into getting ready than her, so I have to compromise a lot. (Noel, Cross-dresser/transvestite).*

Although Noel attributes his partner’s behaviour as related to her own self-worth, this behaviour could also be controlling behaviour related to an emotionally abusive relationship. As found in prior research, trans relationships can involve control related to a person’s gender presentation (Rogers, 2016). Coercing Noel to ‘*compromise a lot’* with his gender expression can be conceptualised as a denial, control or minimising of his identity as a cross-dresser. Such methods of coercive control can go unnamed as they are aspects of domestic abuse that specifically relate to trans people, of which there is a lack of awareness.

As noted in Chapter 5, Andie narrated this following:

*Living on my own was easier than trying to cope with other people’s reactions, for instance I would ask myself “I don’t understand it, how will anyone else understand it”. (Andie, trans woman, foster carer and adopter)*

This illustrated that there did not seem to be an option for her to both explore her gender identity and seek a relationship:

*I didn’t want to be alone in my closet anymore… In my quest to feel normal I joined a dating agency online, met several ladies, who really surprised me, with their keenness for sexual relationships, it really wasn’t what I wanted, I thought there must be affection, than just sleeping with someone. I was really trying to supress my transsexual life and at first when I met Sophia I thought, I’d buried things so far in my mind I could live. (Andie, trans woman, foster carer and adopter)*

Her reference to a wish not to remain alone in her ‘closet’ was particularly interesting here, as the way it was phrased could lead the listener to think that Andie believed she could assuage the loneliness of being in the closet if she could establish an intimate relationship. Andie and Sophia had met when Andie was living as male and still seemingly denying her trans identity to herself:

*I was really trying to supress my transsexual life and at first when I met Sophia I thought, I’d buried things so far in my mind I could live.* *For the first time I even felt I could have a normal life and for several years the dysphoria was at a tolerable level, but it gradually began to take over again, I found ways to try and cope with it. The only problem now was in my quest to have a normal life feel love and be loved, I suddenly realised there was now another person, who would be hurt if I ever let my secret out. (Andie, trans woman, foster carer and adopter)*

As is discussed in further detail in *Chapter 7*, it was not until medical checks as part of the fostering process leading Andie’s social worker to advise she shared information about her trans history with her wife Sophia, that her ‘*most closely guarded secret’* was unearthed in their relationship:

*I had never told my wife Sophia about my [Transgender] past as I thought it was just that; buried in the past. There was the strong chance it would end our marriage; I could have ended up homeless and also the considerable stress and upset it would cause Sophia. (Andie, trans woman, foster carer and adopter)*

Andie lived in stealth for a number of years, not even divulging her trans identity to her wife (Beauchamp, 2019). This was due to her belief that being trans was undesirable and an attribute that would spoil her identity and attach a social stigma to her (Goffman, 1959). Andie believed that she must hide her identity or be rejected (‘…*the strong chance it would end our marriage*), and thrown out of her home. It was likely that Andie failed to entertain a possibility that Sophia would accept her because of the significant negative media attention that trans people have faced (Beauchamp, 2019). This has driven many people to secret their identities away from loved ones. The concept of cultural cisgenderism is useful here in explaining how Andie had been exposed to ubiquitous, unspoken cultural processes of passive discrimination against trans people (Pearce, 2018; Kennedy, 2020).

Due to the diversity within trans populations, it is important to acknowledge that individuals will have different experiences as a result of the different forms of cisgenderism they have been subjected to (Riggs, Ansara and Treharne 2015; Rogers, 2016). As detailed in the above section, Andie describes her experience of growing up as involving an overwhelming feeling of not fitting in. She may have experienced cisgenderism as permeating her world so widely from family to school to later adult relationships, that its effects were more devastating to her sense of self and as such, the way she interacted with others. This is indeed in line with classic sociological and psychological accounts of the impact of early relationships on the ability of an adult to see themselves as loved and accepted (Maslow, 1968; Erikson, 1968; Bowlby, 1969). The effects of which can be summed up by Jamieson’s (1998, p.3) statement emphasising the power of personal relationships: *‘They can provide training in hatred as well as love and in dominance and submission as well as cooperative efforts.’*

As outlined in the theoretical perspectives chapter, if intimacy is seen as necessitating a sympathetic emotional element, then some participants can be said to have been unable to achieve a fully intimate romantic relationship.

*Lucky for me Sophia has been very supportive from that moment up to the point I could not carry on living as a male and transitioned. We remain married and happy together. Many of my friends have lost their homes, families and jobs for being Trans and remain feeling isolated, with society not wanting to understand. (Andie, trans woman, foster carer and adopter)*

The anxiety that Andie felt in relation to coming out supports prior research, which shows that such fears are not unfounded (Riggs, Von Doussa and Power, 2015). Many trans people experience transphobia and cisgenderism within relationships. Trans people (and particularly trans women) can also be excluded from dating pools (Blair and Hostein, 2018). However, romantic partnerships can also be a good source of support for trans people, as Andie has experienced (‘…*very supportive’)* (Feeney and Collins, 2015).Indeed, Jamieson (1998) would argue that their relationship grew in quality as Andie disclosed her trans identity, trusting Sophia with privileged knowledge about herself.

**6.4 Experiences of parenting and caring for children**

**Becoming a parent and grandparent: The story of Sarah-Jane’s growing family**

This section will begin with an examination of the family narrative of Sarah-Jane, transsexual woman in her 70s. Though Sarah-Jane’s wife Isla (who also identifies as a trans woman) did not wish to be interviewed separately for the study as she did not have a wish to adopt or foster, Isla was present for and contributed to this section of the discussion about their children and grandchildren. Both Sarah-Jane and Isla were married to cisgender women in their early 20s and had birth children via natural conception. Sarah-Jane had a son and a daughter who have broken contact with her, and a granddaughter Sally who remains in contact. Isla had three children and five grandchildren, who all remain in contact with her. Sarah-Jane and Isla also share 35-year-old Tamsin; who they describe as being like an adopted daughter (though there is no legal relationship).

The term ‘pseudo-adoptive’ is used to refer to the way in which Sarah-Jane and Isla both regard Tamsin as being like an adopted daughter. The relationship cannot be described as an adoptive one as to do so Sara-Jane and Isla would under UK law have had to move through a legal process to establish a legal adoptive relationship with Tamsin before she was 18 years of age. Tamsin was born intersex and raised male at her father’s wish, with the aid of male hormones. However, when Tamsin was living in a male prison without the medical intervention her body had been used to, she experienced a physical transition from a male to a female body and presentation. Tamsin contacted Sarah-Jane and Isla from prison because she had been advised that Sarah-Jane and Isla run a support group for trans people and those wishing to transition. Tamsin was seeking support and advice to begin living openly as a female, as she felt that this was in -line with her core gender identity.

The family narrative that Sarah-Jane offered began with an account of her strong desire to have children in her early 20s. About the decision to have children, Sarah-Jane commented:

*I was engaged while I was still at university. And we were both keen that as soon I left, we’d get married and start a family. (Sarah-Jane, trans woman interested in adoption)*

At this point in time, Sarah-Jane was living as a cisgender man and was dating a cisgender female partner. Sarah-Jane’s narrative of experiences of early family life was strongly directed by cisgenderist views of what family life should entail (Ansara and Hegarty, 2014). The template in her mind about what a ‘normal’ family consisted of was a cisgender male and female heterosexual couple who would be married ahead of beginning a process of natural conception to have birth children. To deviate from this accepted and endorsed narrative of family would have set Sarah-Jane apart from the dominant discourse of society, and placed her as ‘deviant’ (Foucault, 1969). Using Goffman’s (1963) analysis, it would seem that Sarah-Jane had a desire to avoid the deeply discrediting attributes of remaining unmarried and childless. Goffman would categorise such attributes as blemishes of character, those which were not visible in the way tribal stigmas of ethnicity and religion or physical deformities such as blindness or reduced mobility may be, but that when revealed could have the same stigmatising effect upon an individual.

Sarah-Jane’s narrative indicated that she and her partner felt an urgency to begin their journey into marriage and having children as soon as was practicable. Sarah-Jane and her partner had spoken early on in their relationship about their wish to marry and start a family. As a result, they made plans to do so at the earliest time they felt this was possible. This consideration appeared to be based solely on what was sensible in terms of them being financially able to support a child:

*And I was lucky that I did a student apprenticeship with BP, who not only decided which university I went to but actually paid me a small salary… It wasn’t a lot; in those days I got paid £5 a week, but my rent was only 3 guineas. I had £2 left after that, and I think I gave my mum a pound. Because in those days a pound was a lot of money. (Sarah-Jane, trans woman interested in adoption)*

Sarah-Jane felt that the payment she received throughout university was insufficient to be able to marry and have a child at that stage, so the decision was made to wait until afterwards. In Sarah-Jane’s narrative of her plans for her life from university onwards there was an absence of any consideration of any alternative to the cisnormative family template that was embedded within society (Ansara and Hegerty, 2014). The total absence of consideration could have been due to the time period in which Sarah-Jane’s family narrative was formed and as such how her hopes, expectations and plans were created out of it.

Sarah-Jane offered the reason for being keen to start a family as:

*It’s just that, there’d be time left after the children, rather than having it before, have it afterwards. (Sarah-Jane, trans woman interested in adoption)*

Sarah-Jane’s decision to have children after University seems to have been directed by prevailing norms directing people to ‘*get married and start a family’* upon finishing your education (Goffman, 1963). At the time, a heterosexual coupling was the only option available for marriage. If Sarah-Jane’s family narrative was situated in contemporary society, it may have contained alternative options for intimacy in domains of romantic relationships, family and parenting (Jamieson, 1998). These could have included families of choice established via friendship networks, replacing the blood or legal relationships previously thought necessary for a familial type strength of support (Weston, 1991; Donovan, Heaphy and Weeks, 2001). Contemporary conceptions of intimate relationships also broadened the frame of romantic relationships to include same-sex relationships, couples cohabiting without marrying, single-parent families, and families headed by LGBTQ+ people.

It was of notable brevity that Sarah-Jane spoke of her daughter and son’s responses to her transition when she shared this with them as adults:

S*he won’t talk to me. After my transition. Nor my son. (Sarah-Jane, trans woman interested in adoption)*

Prior research has found that children can experience difficulties adjusting to a parent’s post-transition gender identity (Hines, 2006; Haines, 2014; Imrie et al., 2020). Familial breakdown is common where a trans parent discloses their gender identity during (as opposed to before) parenthood (Haines et al., 2014; Stotzer et al., 2014). Children’s responses to a parent’s transition are difficult to predict, however, it may be harder for the children of transwomen, rather than those of transmen, to accept their different presentation (Hines, 2006). This is due to the greater cultural acceptance of female androgyny than male femininity. Difficulties in acceptance of trans identity was indeed also linked to the relationship that parents had with their children, which in Sarah-Jane’s case was sullied by their placing of blame regarding the divorce on her. While some young people reported that things felt the same within their family once a parent had come out and began transition, others experienced feelings of loss and confusion (Zadeh, Imrie and Golombok, 2021). In considering the reasons for the dissolution of her relationship with her children. Sarah-Jane reflects:

*The last time I saw my two children was at my mum’s funeral in 2005, so… Isla thinks that when my ex dies, they might start talking to me… Well I think they blame me for the divorce. As usual it’s 6 of one and half a dozen of another. I was no saint, and neither was she. (Sarah-Jane, trans woman interested in adoption)*

Transition has been shown to cause changes to the gendered expectations of parenting, which requires a renegotiation of roles and relationships within a family (Hines, 2006). Further, the lack of support given by Sarah-Jane’s ex-wife likely exacerbated potential uncertainties that her children had.

Sarah-Jane describes her experiences of parenting as incredibly positive:

*I really enjoyed having the children. It was wonderful. I was at both of the births, which was unusual back at the end of the 60s and the 70s; usually the other parent was excluded. But I was there, and still, the moment my two were born, are the most important moments of my life, even more important than being me, more important than having my surgery, and that was pretty awesome! It’s just like, I don’t know… it’s like a miracle. I remember standing there and thinking, ‘oh, that is just amazing!’ (Sarah-Jane, trans woman interested in adoption)*

Indeed, this quote stories her living in stealth (Beauchamp, 2019) with a positive tone because it enabled her to continue parenting her children, who are to Sarah-Jane ‘*even more important than being me’.* Becoming a parent represents a significant part of Sarah-Jane’s identity, as such the loss of this role is felt keenly (Erikson, 1968). When I asked her about whether she had always dreamed about being a parent, Sarah-Jane responded:

*Yes, but I’d always wanted to be mum. And it was interesting that I’ve spent quite a lot of time looking after the children. And sometimes I was more the housewife than my wife was. (Sarah-Jane, trans woman interested in adoption)*

This quote exemplifies Sarah-Jane’s desire to align herself with gender roles traditionally associated with women (Butler, 1990). Sarah-Jane wanted to perform womanhood in a way that society often defined it, by becoming a mother (Beauvoir, 1949). As such, the gender rules Sarah-Jane had acquired through her interactions with family and society directed her to take on tasks of caring for the children and being a housewife (Rogers, 2016).

As she transitioned later in life and her children chose not to see her afterwards, Sarah-Jane was not able to take on the mum role she desired with her birth children, however, her role in Tamsin’s life enabled Sarah-Jane to finally become a mum. Isla did not include herself in the study as she did not have an interest in adoption or fostering, however, she joined in part of the conversation to explain why this was:

*SARAH-JANE: But we didn’t really think about having any children, and then Tamsin [Sarah-Jane and Isla’s pseudo-adoptive daughter] came along… Well, we’ve talked about it.*

*ISLA: We’ve both talked yeah. I think we’re both of age where… when you’ve been through parenting children, you don’t really wana go through it again. Unless you’re a masochist! It’s quite hard work being a parent.*

*SARAH-JANE: It is. I mean things might’ve been slightly different if all the kids had rejected us.*

*ISLA: Possibly.*

*SARAH-JANE: And it’s nice having Tam isn’t it?*

*ISLA: Sometimes! (laughs)*

*SARAH-JANE: Yeah, she can be annoying too, but then all kids can be!*

*ISLA: I think with kids, I always got on better… preferred them when they’re older.*

*SARAH-JANE: Whereas I like them as little kids.*

Isla is quite clear here that she does not wish to take on a further caring role in her current place in life, expressing that she found it hard work raising them. Sarah-Jane may have used this opportunity to bring up the idea of expanding the family with Isla, as indicated by her bringing up the positive experience they have had with Tamsin. Upon examination of this narrative, it could be proposed that Sarah-Jane hoped Isla would change her mind about fostering. Sarah-Jane is however respectful of her wife’s wishes and feelings and expresses appreciation of the mothering role they have been able to take with Tamsin. This role may have filled a big gap for Sarah-Jane; where she has not been able to continue the nurturing mother role to her birth children as they have moved into adulthood, she has relished the opportunity to provide this for Tamsin.

Sarah-Jane goes on to discuss the other children in the family:

*But Isla’s children are perfectly ok [with Isla’s gender identity], and my granddaughter comes and stays with us… And I think she understands because she’s in a same-sex relationship. (Sarah-Jane, trans woman interested in adoption)*

Sarah-Jane reflects that her granddaughter understands her gender identity because she is a lesbian. This may reflect a decentring of gender norms (McNeilly, 2019) and a greater exposure to LGBTQ+ communities.

**Becoming a pseudo-adoptive parent: A special place in the family for Tamsin**

This section will discuss the pseudo-adoptive relationship that Sarah-Jane has with Tamsin. Of Tamsin’s in-prison transition, Sarah-Jane explained:

*She went to the open prison and one of the other prisoners said, ‘what’s that woman doing in our swimming pool?’ You know, in an all-male estate. And that for her, said, you know, I’ve gotta face up to this. And it was shortly after that she rang us. She was very lucky, one of the officers was very supportive and saw our contact details in the press and showed her our pictures apparently, and she got her to find out our information line number. And that’s when she called me. (Sarah-Jane, trans woman interested in adoption)*

The mentoring that Sarah-Jane and Isla provided grew into a parent-child dynamic as their relationship developed over the eight years they had known her. This led to Tamsin regarding Sarah-Jane and Isla as mothers and them accepting her as a pseudo-adopted daughter. Though Tamsin is regarded as an adoptive daughter, this relationship has not been established through the usual processes associated with adoption and fostering in the UK and has not had any statutory involvement. Because the character of this relationship sits outside of the legal and policy-directed stipulations of a UK adoption or fostering arrangement. This relationship however reflects the benefits of homophily (the tendency to interact with similar others), namely, understanding, belonging, shared identity (Fu et al., 2012). These are important factors in families, where homophily can result in greater synergy of communication and as such a capacity to work together more effectively.

Some of the complexity of Tamsin’s position within the family is considered in relation to Sarah-Jane’s birth granddaughter. Tamsin is regarded by Sarah-Jane and Isla as a daughter, but without this relationship being recognised traditionally via blood or legal routes there are possibilities for other family members to see Tamsin differently, and indeed to experience attraction to her:

*And interestingly, my granddaughter really likes Tamsin and we were almost concerned that they might go off together at one point! (Laughs)… It wouldn’t have been incest because Tam is from a completely different family. But it was like, ‘do we really want this?’ (Laughs). (Sarah-Jane, trans woman interested in adoption)*

Although the relationship has not been legally enshrined and Sarah-Jane acknowledges Tamsin has a mum by birth, the way she speaks of the relationship suggests that she gets a great deal of joy and happiness from taking on a mother role to Tamsin:

*And I said to her, you know, it’s lovely that you’re calling me mum, but you know, I’m not your mum. You have a perfectly good mum… you may not be in very good contact with her, but she’s still your mother. And she said ‘no, no, no, you’re a mum, and it takes a special person to be a mum’… And we say the 3 of us are like a little trans family. And Tam is hoping to get married in the autumn* [2017]. *And her partner Nicola already has a little girl who’s 8, and Tam loves having a daughter again. (Sarah-Jane, trans woman interested in adoption)*

The relationship that Sarah-Jane has with Tamsin can be included within the concept of families we choose that was indeed generated to describe the changing family make-ups and practices that LGBTQ+ people established in the 1990s (Weston, 1991; Donovan, Heaphy and Weeks, 2001).

Throughout the interview, Sarah-Jane spoke in much more detail about Tamsin’s life and her experiences with her own family than she did about her birth daughter and son. Here she describes the non-traditional life and family narrative that Tamsin has:

*…and she got married to a woman who already had children. They had some more children, but nobody believes that they’re really Tamsin’s because intersex people are usually infertile…. And nobody is prepared to do a DNA test. It can’t be done for sure. (Sarah-Jane, trans woman interested in adoption)*

Contemporary literature challenges this traditional assumption of infertility (Krempasky, 2020). Advances in the field of trans pregnancy (Riggs et al., 2020) have specific relevance to the thesis topic of trans people’s wishes to adopt and foster, as the question of whether one wishes to adopt or foster can be linked to whether or not it is possible to conceive after transition. Riggs and Bartholamaeous (2018) position the decisions and associated removal of decision-making power in relation to one’s route to starting a family as a politics of ‘reproductive justice’. This concept of reproductive justice can be extended to the subject of adoption and fostering as it refers to the barriers placed on trans people who wish to have a family. Where Riggs and Bartholamaeous (2018) in Australia, along with the trans pregnancy research project based across Australia, the US and UK (Riggs et al, 2020), focused on barriers put up by health systems, the current doctoral research focuses on those put up by social care processes. The two foci share many similarities however, in seeking to explore and stimulate the address of issues of cisgenderist processes which limit the opportunities of trans people in relation to family and parenting choices.

**Experiences of birth parenting**

Ash is a non-binary person in their mid-20s married to Maisie, a woman with a trans history, and together they parent Ash’s 6-year-old birth child McKenzie. McKenzie was naturally conceived through a previous relationship that Ash had with a cis male partner, who still has involvement in McKenzie’s life. Ash met Maisie shortly after becoming pregnant and the couple decided to raise McKenzie together. Regarding their current situation and future plans, Ash explains:

*I’ve become a lot more disabled since having our first child. And we did want, we did have a look at having another biological child but now the medication I’m on at the moment to keep me stable wouldn’t be good for a foetus…* *So, we decided that adoption was the best way to do it...* *it’ll be something that we look at more seriously now that we’ve got a PA, and we haven’t done up until now. (Ash, neutrois prospective adopter)*

They reported concerns that they expected to experience cisgenderist discrimination due to their non-binary identity as well as with regards to their ability to parent as a disabled person (see *Chapter 7*). Indeed, they did not feel able to pursue adoption until they had the support of a personal assistant. Prior to this provision, Maisie took the role of full-time carer for Ash, as well as undertaking many of the practical aspects of parenting McKenzie. Ash’s experience lies at the intersection of disablism and cisgenderism and is further complicated by already being a birth parent.

Ash had begun looking into adoption as an option; gathering information via the internet from adoption websites and forums and had applied criteria set out to their own circumstances to consider firstly is adoption would be right for their son. One consideration was observations of how well McKenzie interacted with other children as an indication of how well he may take to an adoptive child joining the family, believing he would do so well because of his experience with his half-brother:

*He has a half-brother in his dad’s side, erm, who has taken to copying everything that he does, coz he’s what? One and a half. (Ash, neutrois prospective adopter)*

Ash’s narratives about their son McKenzie focused in quickly on how his wellbeing exemplifies Ash and their wife’s capability of raising children, and in conjunction how these skills are transferrable to the role of adopting:

*We already have one child. And we have said that we think we’ll do much better now adopting than we would be done before, because we have the evidence that we can raise a perfectly healthy child. (Ash, neutrois prospective adopter)*

This statement suggests some generalised anxiety in relation to the adoption assessment as a process that involves opening yourself up to the judgement of one’s parenting capacity by others. However, the following comments are more suggestive of worries in relation to being seen as less capable due to gender identity. The following excerpts suggest that the couple has experienced bias and judgement in relation to their parenting of McKenzie because they are trans rather than any basis related to actual parenting capacity.

*I think having McKenzie is a positive mark on our… because he’s happy and healthy and, and has never had… he had social services involvement once, [due to concerns reported by] transphobes on the internet. …we had his nursery raise concerns because he wore girls’ clothes to nursery…And so, we’ve had a couple of bits of social services involvement but every time they’ve said ‘he’s a happy, healthy baby, and he’s fine’. And so, I think that’s… I think that would only work in our favour, that we have clearly raised a child ok the first time. (Ash, neutrois prospective adopter)*

These excerpts point to the difficulty of raising children in a binary world, where structures and organisations including infant nurseries reflect society’s organisation by binary gender. Ash relays an incident where ‘*transphobes’* reported a safeguarding concern to social services, which was concluded with no action needed (‘…*he’s a happy, healthy baby, and he’s fine’).* They also had concerns raised by McKenzie’s nursery ‘*because he wore girls’ clothes.’* The narrative indicates that trans people can experience discrimination and stigma where they do not fit a cisnormative stereotype in relation to family (Ansara and Hegarty, 2014; Goffman, 1963). Here, stigma functions within society to allow other individuals to categorise Ash and McKenzie in relation to themselves. Signals of a stigmatised characteristic such as non-binary gender (‘…*wore girls’ clothes’)* enable a person or group to classify someone with an outlying characteristic that is not deemed to be socially desirable as deviant (Goffman, 1963).

The act of raising concerns because of clothing believed to be discordant with a child’s gender is transphobia as it demonstrates ‘*Discriminatory or prejudiced actions or ideas related to someone’s actual* *or perceived gender identity or gender expression’* (Valentine, 2016, p.93).

Verbal and physical actions were taken by nursery to show Ash and McKenzie that they were regarded as different and deviant (‘…*we had his nursery raise concerns’).* This served the function of demarcating Ash and McKenzie and distancing the nursery staff’s identities from theirs in order to highlight the staff’s own coherence with dominant social norms (Goffman, 1963). This served a dual purpose of excluding Ash and McKenzie, the individuals perceived to pose a threat to the nursery community via disruption of the status quo and denoting the staff’s own social value. Notwithstanding, social workers affirmed Ash’s care of McKenzie, suggesting the limited effectiveness of the transphobia and cisgenderism when there is evidence of good quality care of a child within a family.

Stigma can be understood as both a cause and effect of the cisgenderism found to affect the narratives of family life offered by participants. These excerpts point to the difficulty of raising children in a binary world, where structures and organisations including infant nurseries reflect society’s organisation by binary gender (Tyler and Slater, 2018; Hicks and Lewis, 2020). Ash’s consideration of statutory adoption criteria such as a robust support network also suggest that they believe that their membership within a trans subculture could serve to disadvantage them:

*Normally once you get past the age of thirty, and once you are having children and stuff, the queer community kind of drops out… Coz so much of it is built around drinking and clubbing, and erm, and drugs culture. That when you stop and have a baby, you kind of lose bits of it. (Ash, neutrois prospective adopter)*

Here, both being part of a differently constructed version of family or social network and the normative behaviours of a subculture could be seen as weaknesses in Ash’s history that could tarnish the portrayal of family that Ash feels must be conveyed to social workers (Goffman, 1959). It can be interpreted that a dominant cisgenderist narrative of normative family ways is in contradiction with the experience that Ash has had through their participation in activities that fit with trans community norms and values. An analysis using Goffman’s (1963) arguments illustrates how the trans community has been systematically stigmatised through the devaluation of their trans identities and practices; with these being placed as deviant because they lie outside of the accepted dominating norms of cisgender communities. Indeed, research shows that greater connectedness to the community at large (Chavis, Lee and Acosta2008) and higher social support is linked to reports of better mental health (Boza and Nicholson Perry., 2014; Riggs, Ansara and Treharne, 2015). The citing of a poor support network as a disadvantage to a trans person’s application to adopt or foster can thus be simultaneously viewed as rational and discriminatory.

The segregation caused by such processes of stigmatisation has served to further push trans people to the margins of society, isolating individuals from mainstream practices and enshrouding them in alternative lifestyle practices as a way of creating and maintaining feelings of safety and acceptance (Bornstein, 1994; Bornstein and Bergman, 2010). This has effectively solidified the need for minority groups to exist at the fringes of society, as it has been made clear to them that acceptance into the mainstream is not an option. In such situations, members of minoritized groups look to strategies for psychological wellbeing, which can include escapist practices such clubbing, alcohol and drug use (Halberstam, 1998).

**6.5 Battling assimilation: counter-narratives as resistance**

**Children and gender**

While narratives of family life were indeed littered with narratives of marginalisation and beliefs that a failure to fit gender norms lead to the exclusion of trans identities (as discussed above), counter-narratives also emerged that can be seen as narrative acts of resistance (Bamberg and Andrews, 2004). Points ranged from those that were perhaps best placed on the subtler end of resistance, such as that of Alice pointing out that the beliefs instilled in her growing up about being trans and parenting were incorrect:

*I think that probably stems back from the upbringing being quite re- restricted and thinking ‘this isn’t right’ and ‘you can’t do that’ and that sort of thing. (Alice, trans woman, prospective adopter)*

A further example of resistance illustrates the way in which children can be readily accepting and understanding of a range of different genders.

*So, I told them about Robby that I mentioned, who is my god child, who, one day, he was telling his grandma about a day out that we’d had. And erm, grandma asked ‘is Celyn a boy or a girl? And he went ‘neither, they’re just normal’…* *And I was like yes, yeah, that’s how he understands it. (Celyn, non-binary adopter)*

A binary discourse on gender has been imputed to the general population and does not reflect the diversity of gender identities that many trans people have (Bornstein and Bergman, 2010; Matsuno and Budge, 2017). Although it appears that younger people seem more likely to describe their identities as non-binary, being non-binary is neither a new phenomenon nor one associated only with youth (Frohard-Dourlent et al., 2017). Celyn offers a counter-narrative to the dominant narrative of gender as binary. This counter-narrative deconstructs gender as man/woman into an unknown (Bamberg and Andrews, 2004).

The extract from Celyn has meaning in relation to existing research which reports that a positive sense of coherence in relation to parental gender and the structure of the family had a positive effect on family functioning and reducing stigma (Veldorale-Griffin and Darling. 2016). Further, Celyn’s counter narrative provides a contrast to the reports of social workers detailing fears of children being confused in relation to a trans person’s gender (explored in chapter 9).

Ash proposes that their experience of raising their birth child demonstrates the parenting capabilities of a couple comprising a non-binary person and a woman with a trans history. Importantly, reports by parents and social services of their son as ‘*happy, healthy’* counter trans parents’ priorly expressed concerns in relation to the possible effects of stigma on their children (Haines et al., 2014). Even where parents undergo transition, Hines (2006) argues that where this process is navigated with honesty and care, children can adapt. Further, Veldorale-Griffin (2014) found that many parent-child relationships remained unchanged or had improved since parental transition.

Though she has not yet parented herself, Alice details her alternative experience of helping care for a child in her home:

*And we’ve taken in one of our friends who’s got a kid, so… Yeah, so, one’s only 18 months old… she’s lived with us for a little while, just at weekends… Yeah, so there’s a six year-old lad, and this young baby girl, so… relevant experience all round there! (Alice, trans woman, prospective adopter)*

Sarah-Jane speaks of the relationship that she and Isla’s pseudo-adopted trans daughter Tamsin has with children within her family network, via partners she has had relationships with:

*She absolutely spoils Megan, because yeah, she does love children. When she first came out, she wasn’t sure where her sexuality was. And she hooked up with a guy who had 12 children, and he lived off the child support agency, basically, and she loved looking after the children. (Sarah-Jane, trans woman interested in adoption)*

Arguably even more solid evidence of the ways in which children can and young people accept trans identities comes from the experience of Andie in her fostering role:

*We had a 16-year-old boy on an emergency placement, whose behaviour was very challenging, but never displayed any transphobic behaviour towards me. He came from an adoption break down the mother also showed no negativity towards me. Our present placement is a 5-year-old boy who has settled into our family extremely well, I would say total acceptance of me. (Andie, trans woman, foster carer and adopter)*

The findings of the present study indeed suggest that where parents can be open about their trans identity with a birth, adoptive, foster or grandchild from the start of their relationship, negative issues do not arise. Children are accepting of trans and non-binary gender identities when these are explained to them clearly and openly. Indeed, young people in care specified that traits they valued in foster carers was honesty, openness and trust (Schofield et al., 2011)**.** The positive stories voiced by several participants can be conceptualised as counter-narratives (Bamberg and Andrews, 2004), detailing the alternative ways, methods and timelines via which they have successfully started and grown their families.

**Intersectionality of parenting experiences**

Various intersections detailing sexuality, age and generational differences and socioeconomic status are discussed above and in *Chapters 5 and 7*. Clear reference to these intersections was however minimal within the data.

Ash lays out a discussion regarding families with disabilities:

*I... read a piece at one point about the, there’s a statue of a woman in London who has no arms and no legs… pregnant… and social services were erring towards her not having the baby, and not keeping the baby, and it was like 20 years ago now, and there was a lot of fuss kicked up. And then they did how are you caring? Are you really caring? Is it the PAs caring for him? And a lot of things, like, ‘no, PAs are my hands, think of them as my literal hands’. And, erm, and then towards the end of it they were like, well your child’s eight now, could he not do your night-time care? (Ash, neutrois prospective adopter)*

Referencing a portrait of Alison Lapper, a disabled mother who rejects such a label, Ash engages in a similar challenge to ableism that the artist set out (Betterton, 2006). These include a challenge to society’s preconceptions of bodily and parental perfection, and more specifically a challenge to preconceived ideas that disabled people do not have the right and ability to bear children. In this reference and their accompanying discussion, Ash too challenges the notion of disabled parents as unable to parent, setting out a counter-narrative that explains the ways in which disabled people are able to parent with adaptations. Indeed, the development of a positive self-concept in disability has been shown to be key to a person’s adaptation to it (Bogart, 2014). Thus, a confluence of disabled and trans pride bolsters Ash’s confidence.

As the findings included in this section suggest, although discourses are arguable intrinsically linked to the operation of power (Foucault, 1991), counter-discourses are being seen to emerge within the contemporary social context to challenge dominant normative discourses. These counter-discourses may have the capacity to be intersectional, challenging the dominant cisgenderist discourse as well as ableist discourses. Counter-narratives of non-normative families can offer other explanations as to how gender and disability work. Trans feminist discourses of non-binary gender indeed highlight the complexity and diversity that exists within biological, social and political life. This enables us to acknowledge a world that is not divided simplistically by ideas of binary sex and gender (Bornstein, 1994; Bornstein and Bergman, 2010).

**6.6 Chapter summary**

This section offers an overarching analysis of the findings and discussion covering narratives of family life. Whether the narratives of family life included within this chapter denoted positive or negative stories, a commonality that can be seen across all participants is that experiences of family life shape people’s values, norms, perspectives, desires and wishes. The research found similarities in the sociology of trans family narratives as compared to cisgender families, in terms of people’s desire to be part of a close unit of individuals who share intimate and lasting relationships (Jamieson, 1998). The importance of being part of a close familial group was a wish expressed in relation to both family of origin as people grew up and family established/hoped to establish in adulthood. Indeed, all of the trans and non-binary participants’ narratives showed success in establishing long-term relationships characterised by a perceived quality of intimacy, in one or more of the forms described by Jamieson (1998).

Where parents, siblings or other members of the family of origin were unsupportive or rejecting of a person’s gender as being different to that which was ascribed to them at birth, issues occurred whereby individuals experienced threat of or actual social isolation. This could however be resolved by seeking out substitutes for family members in adolescence and into adulthood to form ‘families of choice’ (Weston, 1991). These networks comprised friends who took on roles more closely associated with the loyalty, stability and intimacy of traditional familial relationships. Lasting romantic partnerships also fulfilled a role of establishing family units. Further, early desires to parent children may also reflect trans people’s desire to experience their own close and loving family units in adulthood as the nurturing figure, in the same way cisgender adults yearn to take on the parenting role.

Discussion woven throughout this chapter has identified a common theme, suggesting that theorising intimacies within the narratives of trans personal relationships must necessarily incorporate analysis through a lens of cisgenderism. Cisgenderism can be seen as a key feature of the storied lives and lived experiences of all participants included within this study. However, as argued by Riggs, Von Doussa and Power (2015) it can be difficult to extricate the impact of cisgenderism within families of origin from that of trans peoples’ experiences of cisgenderism within wider society.

It is suggested that cisgenderism may influence the narratives of trans people at a broader structural level that affects their interactions, experiences and perceptions of adoption and fostering social work services. The following chapter will go on to explore this theme in relation to narratives of adoption and fostering.

**Chapter 7: Adoption and fostering narratives**

*‘There are no unwanted children, just unfound families’*

*(Adoption Center, 2021, no page)*

**7.1 Introduction**

This penultimate chapter sets out narratives that portray the experiences and expectations that trans people have of adoption and fostering services within England and Wales. Although reference to adoption and fostering has been made throughout the previous two chapters, this one specifically focuses on these fields of social work practice. Narratives of adoption and fostering are thus presented alongside an examination of the workings of cisgenderism within these areas of social work. Firstly, I analyse people’s motivations to adopt and foster, examining the linkages with trans identities, infertility and age. Next, I explore the different motivating factors that adopters have as compared to foster carers. I go on to illustrate trans people’s imaginings of parenthood, addressing transphobia, queer ideas of parenting and the desire to reproduce. The chapter then examines perceived institutional barriers and the ways in which cisgenderism impacts upon different points of the adoption and fostering processes. Data from participant narratives is scrutinised chiefly through the theoretical framework of cisgenderism (Ansara and Hegerty, 2014; Riggs, Ansara and Treharne, 2015; Pearce, 2018), while also drawing on theories of stigma and the presentation of self (Goffman, 1959, 1963) and the impact of discourses of power (Foucault, 1969, *see theoretical frameworks chapter for detail*).

**7.2 Motivation to adopt or foster**

**Pregnancy dysphoria**

As found in previous research (Riggs, Power and Von Doussa, 2016), the reasons given by participants for choosing adoption or fostering varied, with some selecting it as a first choice of how to start or grow their family:

*The changes your body goes through during pregnancy, I think would be really dysphoric for me… maybe if I had top surgery, I would feel differently about it…the changes are less so if you’ve already had a double mastectomy because your breast tissue doesn’t grow, because it’s gone. (Jamie, non-binary prospective adopter).*

For Jamie, the motivation to adopt is tied in with their trans identity, as the surge in oestrogen and accompanying bodily changes such as breast tissue growth would contravene with their transmasculine, non-binary identity. While some trans men and transmasculine non-binary people make the choice to become pregnant and carry a child, they can experience negative responses or a lack of inclusion within services (Riggs et al, 2020). Jamie knew someone who had undergone a transmasculine pregnancy, which in itself was not off-putting to them:

*The belly thing, like, in and of itself, wouldn’t like, um, [put Jamie off pregnancy] yeah, coz my friend had like, the full beard… coz if you stop T to conceive, you still have a beard, your beard doesn’t like, fall out….* *if you have a big lumberjack beard and a flat chest and pregnant belly, like, you don’t look any less like yourself, well, to me anyway. (Jamie, non-binary prospective adopter).*

To Jamie, a swollen belly was not associated with womanhood, however, an increase in breast tissue was. As such, a pregnant body ‘*would be really dysphoric*’ unless they had top surgery (‘… *because your breast tissue doesn’t grow’).*

**Infertility and loss**

Other participants came to adoption because other options (such as, birth) were closed to them. For example, the adoption pathway was chosen by some participants after experiencing fertility problems:

*Sadly, we had 6 miscarriages… it kept being losses and losses. And [my partner] was diagnosed with polycystic ovaries quite young…We considered adopting as soon as we had the loss, yeah… Yeah, definitely. It was a case of, so this isn’t gonna happen naturally…* *(Alice, trans woman and prospective adopter)*

This finding is congruent with previous research showing that fertility problems increased the likelihood of pursuing adoption (Hollingsworth, 2008; Jacobsma, 2014). Goldberg, Downing and Richardson (2009) found that although there were similarities in perspectives of lesbian and heterosexual couples on infertility leading to the pursuance of adoption, lesbians were less committed to the idea of conception. Alice’s narrative suggests that she similarly embodied a more expansive notion on how to create a family than biological reproduction (‘*We considered adopting as soon as we had the loss’)*. Like the lesbian adopters in Goldberg, Downing and Richardson’s (2009) study, Alice was pursuing parenthood among competing discourses of motherhood as central to women’s identities, and expectations that motherhood is not expected of lesbian couples. However, the personal stress that heterosexual couples can feel because of conception being linked to sexual intimacy could have affected Alice and Victoria as theirs was also a natural conception process. Indeed, Alice experienced the lack of control, disappointment and grieving processes that many heterosexual couples felt (‘…*losses and losses’).*

As detailed in the *Introduction*, the lack of research focus on trans people in adoption and fostering limits comparison between the current and previous findings based on aspects of gender identity. Prior research has not included any information on gender identity, however, indicates that infertility is a primary reason for pursuing adoption (Hollingsworth, 2008; Jacobsma, 2014). Contemporary research examines the fertility preservation and reproductive choices of trans people. For example, a study by Riggs, Power and Von Doussa (2016) found that of those participants who planned to have children in the future, four wanted to give birth themselves, nine wanted their partner to give birth, and eight wished to adopt or foster (Riggs, Power and Von Doussa,2016). The study did not however examine whether adoption or fostering was chosen as a first choice or whether it was not possible for the individual or their partner to have a child via pregnancy.

The present study does however include narrative data exploring this intersection, whereby fertility issues had prevented Alice and her partner from having a birth child throughout the duration of the period in which they tried to conceive naturally. Then at a certain point, Alice and Victoria’s family plans became influenced by Alice’s plans for medical transition:

*I said, well look, I’ve seen that people who are trans are, when they get older it’s a lot harder for them to go through the physical change, …I mean, I was out and living as a woman since 2010, so quite a long time really by 2013 I said right, , I’m not getting to 30 and if we haven’t had kids and I’ve not started my hormones… and so we put our own little deadline on it. (Alice, trans woman, prospective adopter)*

Attempts to have a birth child were halted when Alice underwent hormonal treatment and gender affirming surgery as she explained ‘*because I started the hormones, I’m sterile now’*. Alice’s decision to adopt was as such linked to her trans identity, as she and her partner put a time limit on attempts at conceiving through intercourse so that Alice could begin medical treatment for physical transition afterwards. At this point, Alice exercised choice and agency with regards to reproduction. Alice did not narrate any dilemmas in the decision to stop trying naturally. The loss she and Victoria experienced at their seventh pregnancy was the final point in their journey due to the tremendous loss they experienced:

*It’s never predictable but the 7th we were successful and had a child… just up to sort of 24 weeks she came out… The child we had, little Natalie, she was so little she could fit in a glass… what a weird period of time that was…* *Yeah, it, that was tough, but we had her and she survived just 9 weeks. (Alice, trans woman, prospective adopter).*

Echoing a qualitative study by Glaser et al. (2007), Alice experienced an emotional rollercoaster characterised firstly by intense feelings of closeness with her infant while she was alive:

*For the whole 9 weeks so we was just together… life was just stopped over there, and it was just our entire existence. (Alice, trans woman, prospective adopter).*

The extent of the emotional pain endured was demonstrated by the decision to make no further attempts to conceive:

*A couple of years after that [the decision to adopt rather than conceive naturally was made] …because it just needed too much pain, you know keep trying. (Alice, trans woman and prospective adopter)*

Following the loss, Alice experienced extreme sorrow and mental pain, akin to cisgender heterosexual couples interviewed for Glaser et al.’s (2007) study. Like other couples who experienced the loss of a baby, Alice and Victoria had a period of mourning, processing and adjustment following Natalie’s death.

**Gender-affirming treatment**

The treatment Alice received for medical transition affected her fertility, but she had already decided not to take up fertility preservation options that may have enabled her Victoria to continue attempts to conceive via assisted reproductive technologies:

*[…] and I didn’t bother getting anything froze, it was just like nah… there’s enough lunatics in the world, I don’t have to have that. If we adopt it’s gonna be there and thereabouts anyway. (Alice, trans woman and prospective adopter)*

Although Alice’s above comment has flippancy in its tone (‘…*nah… there’s enough lunatics in the world, I don’t have to have that.’),* this joking comment was brought into the narrative following her serious reflections to bring the discussion to a lighter, more jovial place when she had concluded the narration of loss as the reason to stop natural conception. As found in prior research, even several years after a loss has been experienced and its emotional processing has occurred (which was indicated by Alice’s ability to recount the story), deep sorrow and pain is often felt by parents when they think about their lost baby (Glaser et al., 2007).

The consideration of adoption in Alice’s case appears to have been affected both by the experiences of fertility difficulties and loss that she and her partner had as well as the decision to seek gender-affirming medical treatment. These two factors appear to have changed Alice and her partner’s plan and hopes to have a birth child; leading them to accept that natural conception may not be an option and as such to give thought to adoption as an alternative way to start their family.

**Age**

Other participants also reported that their motivation to adopt or foster resulted from intersecting reasons. Andie describes how becoming a foster carer and then adopting was influenced by her age (‘…*I was 37 when Sophia and I got together*’, in her 40s at the time of interview) and was linked to the relationship challenges that she had experienced in earlier life because of her gender:

*I lived life in turmoil and had chosen to keep myself single. I was 37 when Sophia and I got together. We did try in a natural way for a short while but put it down to age as to why nothing was happening. We thought it was too late to try and have children, so we decided to adopt and further decided we could make good foster carers.* *(Andie, trans woman, foster carer and adopter)*

Norms regarding parenting age have changed in recent years, as more women are choosing to have their first child later in life, for example in their mid- to late thirties or into their forties (Messerschmidt et al., 2018). However, after trying for a short time, Andie and Sophia decided to pursue fostering as an alternative route to family life. Although there is no explicit link stated, the sub textual implication is that the delay in beginning a relationship and associated aged-based fertility challenges were influenced by the turmoil that Andie experienced in earlier life due to being trans.

**A positive first choice**

An example of the pursuance of fostering as a positive first choice comes from the narrative of Toby which stories the desire to become a carer as being sparked and fuelled by the professional training and development routes that they took:

*I currently work in short breaks/respite services for children and young people with additional needs… My studies of health and social care at college taught me about fostering and adoption and safeguarding acts, legislation etc. Years ago, I found a book by Cathy Glass in a charity shop which really ignited my passion for fostering. I researched what being a foster carer was really like in comparison to the memoir I had read, researched the skills needed to be a good foster carer and at the time I was convinced I was well equipped to do a really good job. (Toby, non-binary trans man).*

The actions Toby takes to equip themselves with knowledge and insight into fostering and adoption in order to make an informed decision is demonstrative in itself of their motivation. Indeed, a theme found in this study that several participants had undertaken independent research and training supports that of Goldberg et al. (2020); trans prospective adopters and foster carers were more willing to take up training opportunities to develop their skills.

**Motivation: Adoption vs fostering**

In engaging in a further examination of what led people to want to adopt or foster, a qualitative difference was found in the motivations of those interested in adoption and fostering. People’s motivation to adopt tended to be clearly aligned with a wish to experience starting or growing their own families. Those primarily interested in foster care addressed the professional aspect of the role and highlighted their potential competency at carrying it out:

*I have a lot of empathy for children, I have a sense of humour and am fun seeking, but at the same time I know when to keep quiet and simply listen. I was interested to try fostering because I really believed it was something I would be good at. (Toby, non-binary trans man).*

Here, Toby details the qualities that they believe make them a good parent. They also indicate that fostering would involve a sense of achievement for them; emphasising a strong belief that it is something that they would be good at and would not fail at. A key difference then was that prospective foster carers emphasised the successful achievement of a professional role within their motivations. However, even where professional motivations to become a carer were set out, the role was not storied as being solely professional; personal reasons were involved in their professional carer aims:

*My reasons for wanting to foster are mainly personal motivations to support children, I love being around and supporting children and young people to achieve their potential, there are few things in life more rewarding than that. (Toby, non-binary trans man)*

Toby points out the personal fulfilment they would get from their professional fostering role as part of their motivation to foster.

**7.3 Imagined parenthood**

**Internalised transphobia affecting parenting imagination**

The narratives included within this study represented a mix of imagined parenthood possibilities, comparable to some of the narratives included within Von Doussa, Power and Riggs’ (2015) qualitative study of thirteen Australian trans people. Participants of both studies imagined parenting as part of their ideal future, with some viewing these as dreams they could realise and some feeling that their fantasies could be unattainable. As Von Doussa, Power and Riggs explored parenting desires more widely, several of their participants explained that they viewed the step-parenting role as a more realistic parenting option. Some participants expressed their interest in adoption but also articulated a belief that there could be challenges that prevent their dream from becoming reality:

*Internalised transphobia carried over to not feeling I would be able to do a lot of things. [regarding considering adoption] What would be the reaction of my partner, what would be the reaction of our child? (Noel, cross dresser/transvestite and prospective adopter)*

Here, stigma based on cisgenderist views has been internalised and reduces the opportunities that an individual then believes will be afforded to them (Goffman, 1963). Discrimination and marginalisation, whether experienced or anticipated, may act prohibitively where it causes a person to worry about other people’s reactions to oneself as a trans person. Cisgenderism has acted to reduce not the desire to adopt, but the belief in one’s ability to adopt. The prevalence of cisgenderism within contemporary society has sculpted trans people’s perspectives and led them to believe that they may be viewed as unnatural or less than due to their gender diversity (Ansara and Hegerty, 2014). In this way, it is suggested that cisgenderism acts oppressively within adoption and fostering social care spheres in a similar manner to health services (Pearce, 2018), preventing trans carers from gaining full access to their desired family lives (Goffman, 1963; Brown and Rogers, 2020).

**Queering the family: Absence of reproductive desire**

The narratives within this study largely suggested that becoming a parent or carer via adoption or fostering was a possibility that trans people imagined to be open to them. Indeed, Jamie and their husband’s wish to adopt as a first choice exemplifies a non-normative approach to imagining family (Baxter et al., 2014):

*I was like, ‘I am not birthing children’ and he was like cool. (laughs) Dope. ‘I’d actually rather you didn’t!’ (Jamie, non-binary adopter)*

Their active desire not to birth a child contravenes what Baxter et al. (2014) argues is a commonly held strong desire to pass one’s own genes onto offspring via birth parenting. This non-normative imagining of parenthood demonstrates a gendered decentring (McNeilly, 2019) of notions of family in both Jamie and their husband.

Von Doussa, Power and Riggs (2015) develop Berkowitz’ (2007) theory of ‘procreative consciousness’ and apply this to trans people. Berkowitz drew from Mills’ (1959) idea of the sociological imagination to draw links between social structure and personal biography to explain why gay men as part of contemporary society are more likely to imagine parenthood as a part of their future narrative than they were two decades ago. She argues that gay men’s thinking about fatherhood is located within a context of pronounced social and cultural change that allows for greater acceptance of gay fatherhood as well as increasing the options to enact this due to advancements in reproductive technologies. This analysis can be applied to the present study’s findings, explaining how Jamie and their husband imagine their future family as constructed via adoption because the social context allows for them to imagine this as a realistic option.

However, Berkowitz (2007) sets out that while the conditions for the option of gay fatherhood may be socio-culturally laid out, it is the actions of gay men themselves that translates possibility into social reality. As increasing numbers of gay men navigated new pathways to fatherhood, demanding greater recognition of their identities as fathers, the possibilities for other gay men to imagine themselves as fathers is in turn increased. As such, it may be that for more trans and non-binary headed families to imagine their future adoptive families, visible examples of this already having been achieved would be needed.

Several narratives spoke to both the confidence trans people had in their imagined future parenthood from early childhood, and valuing of adoption or fostering as imagined routes to parenthood. Indeed, several participants pinpointed the imagining of their adoptive or foster families as positive choice as being explicitly linked to their gender and sexuality:

*So, because I’m queer, I never assumed that I was going to, like, find a nice boy and make a baby with him… I’d always had adoption as, as one of the possibilities for starting a family… I probably would’ve been 5 when I started thinking about it, when I was really young… And when I was getting a little bit, well not really older, but a little bit older* [25 years old]*, and more settled I was like ‘yep, it feels right’, the right time… adoption was, adoption was very much my first choice… if there are children out there that need a family, then why would I make other children? (Celyn, non-binary adopter).*

Like Alice (‘… *there’s enough lunatics in the world’),* Celyn, narrated a lack of need to add to the population*,* rather they felt they could offer a home to a child who needed one. The lack of need to reproduce seemed a key motivator:

*Reproduction is cool for you if it’s important to you, like, but, you know, like, there’s a lot of kids already, like, and if we have a home available to give to kids that’s kind of, that’s more important to us to do that (Jamie, non-binary adopter)*

Active desire not to birth a child contravenes what Baxter et al. (2014) argue is a commonly held strong desire to pass one’s own genes onto offspring via birth parenting. Rather, non-normative motivations and imaginings of parenthood have led to adoption being viewed as the most desirable route to family. In line with several previous studies, the results of the present study suggest that trans people could be less focused on the genetic relatedness of the children they care for than members of the broader cisgender population may be (Riggs, Power and Von Doussa, 2016; Tornello and Bos, 2017; Riggs and Batholomaeus, 2018). These findings may be useful for adoption and foster agencies to consider as when prospective carers come to adoption or fostering as a first choice as a way of starting their families, there could be less complexity associated with their suitability assessment, preparation and support (Jakhara, 2014).

However, narratives included in the present study may be skewed towards representing a positive sociological imagining of trans parenthood due to the fact this study specifically recruited people who have adopted/fostered or who are interested in doing so. This way of targeting recruitment could have led to the exclusion of the viewpoints of trans people who had a wish to adopt/foster but did not also have an imagination or belief that this was possible.

**7.4 Perceived institutional barriers to pursuing adoption or fostering**

**Overt and covert discrimination**

The narratives suggested that participants believed numerous institutional barriers existed that would prevent them from starting or growing their family via adoption or fostering. For example, Jamie believed being trans could be a barrier that prevents them from adopting:

*I was really concerned about, like, being a queer family… if we were a cis gay couple, I’d be like, it’s pretty mainstream now, I think we’re fine, you know. But… am I gona have to pretend to be [cis woman]… like, could I even do that? Are we gona have to pretend to be a straight couple? (Jamie, non-binary prospective adopter)*

Using Bradford and Syed’s (2019) framework, participants within the study at times resist and at times concede both with a master narrative of cisnormativity and an alternative narrative of transormativity. Like Bradford and Syed’s (2019) study, within some spaces participants did do not aim to pass, and a queer presentation was adopted. However, when considering presenting themselves publicly in a context in which they could be disadvantaged by being trans (e.g., adoption assessment), they worried that they would need to concede to cisnormativity in order to be successful. For example, Jamie’s personal experience of gender would be as non-binary, however, they felt a need to perform a cis identity in public to avoid the social sanctions placed upon trans people (Butler, 1990). Indeed, cisgenderism and gender normativity was shown in relation to Ash’s birth child when they told me that ‘*we had his nursery raise concerns because he wore girls’ clothes to nursery’.*

Barriers to becoming adopters or foster carers varied in nature, with some participants describing barriers that hinged on their own internalised views, perceptions and beliefs and others encountering barriers that social work staff or institutions had constructed. Whether overt or covert, barriers to becoming carers could often be likened to concrete; that is, they appeared to be immovable. Examples of overt, concrete institutional barriers described by trans people in relation to adopting were given by participants who were social work practitioners:

*I remember erm, a couple of years ago when I was working in local authority Y…* *probably 2013… my manager said that they’d had a transgender adopter, and they took it to a match at panel, and it’d been thrown out...* *the panel just dismissed it; they didn’t accept it. They thought it would be too confusing for the child. (Amy, social worker)*

The phrasing Amy’s prior manager used to describe the issue could be interpreted as depersonalising. Howarth and Ibrahim (2014) apply a depersonalisation analysis to immigrants, explaining how the media constructs them as sub-human to prevent public outcry at the human rights violations they endure. In applying this to Amy’s quote, social work staff (influenced by media constructions) may depersonalise trans people to distance themselves emotionally from the suffering that trans applicants can experience because of rejection as an adopter/carer. Historically trans people have experienced depersonalising attitudes as they have been deindividuated, objectivised and fetishized (Stryker and Aizura, 2013; Hines, 2020). This may be result not from dehumanising constructions of trans people, but a lack of empathy creating exercises within education programmes (Ghidina, 2019).

A further example of trans people as being dehumanised is that of the denial of their fundamental rights and associated attempts to detain them:

*There are private groups on Facebook such as the INFP* [Introversion, intuition, feeling, perception: one of the Myers-Briggs personality types that is often regarded as the idealist or mediator] *group where people constantly felt the need to debate whether trans people should have fundamental rights or whether or not people were "crazy" and needed hospitalising. (Toby, non-binary prospective foster carer)*

Though activist groups often highlight the need for policy changes to promote equality, human and rights and citizenship, the state continues to regulate sexual and reproductive practices and limits the extent to which a trans person is imbued with citizenship (Kollman and Waites, 2009). Wilson (2009) adds to the debate by pointing out that discourses of human rights have become intertwined with those of citizenship and together, have been used on the global stage as a means of mobilising influence. However, without a willingness of the state to recognise and defend a person’s status, rights and claims in public, Link and Phelan (2014) would argue that visibility such as that brought about by activism and the academy, is insufficient to instate citizenship for trans people.

A further example of covert discrimination comes from the hetero- and gender-normative lifestyles that adopters and carers are expected to exemplify. Within an adoption or fostering assessment, the stability of an applicant’s mental health is assessed (Chapman, 2019; Dibben, 2020: Beasley, 2020):

*I don’t actually know much about what the assessment process entails… I think parts of the assessment that address mental health would be difficult for me to talk about. I have been to the doctors a few times and I have phrased it as “Low Mood” and played it down a lot due to fear that my poor mental health will go on my medical record and be held against me in the assessment process. I got the impression from a meeting I went to about this for X Fostering and Adoption that they aren’t very forgiving when it comes to mental health, so if you have experienced any kind of depression, self-harm or suicidal thoughts in your past this is held against you. (Toby, non-binary prospective foster carer)*

For trans people, mental illness and self-harm are common due to the discrimination that they encounter within society (LGBT Foundation, 2017; Bachman and Gooch, 2018). As such, to expect a prospective adopter or carer not to have encountered these issues is a hidden form of discrimination. Much like a need to hide gender identity then, trans people may feel a need to minimise their experience of mental illness to be approved as an adopter or foster carer (‘…*played it down a lot due to fear that my poor mental health will go on my medical record and be held against me in the assessment process.’).* However, Toby demonstrates that they have considered the impact of their mental health on the fostering role, and come to their own decision with regards to when the right time to commence this would be:

*At the moment, I am currently in the eye of the storm so to speak in terms of where my mental health is at currently -- I think this is the worst it is going to be, but I don’t see it improving until I’m done transitioning. This is another reason I feel that at this stage in my life I am not ready to foster, but in five years’ time I will be well out of the woods - as long as my mental health now isn’t held against me. (Toby, non-binary prospective foster carer)*

The current adoption and fostering assessment guidance lack consideration of the differing experiences that trans people have as it relates to a gender-normative majority (Chapman, 2019; Dibben, 2020: Beasley, 2020). Indeed, Barksy (2020) argues that assessment methods are outdated as they have been designed based upon the assumptions that being cisgender and heterosexual are the prevailing and preferred forms of gender and sexuality. Instead, he offers a modified and more inclusive genogram model for social workers to use. However, while this is helpful in recording different familial and support networks, it does not account for the minority stress and resultant mental health experiences that trans people have (Riggs, Ansara and Treharne, 2015; Riggs and Treharne, 2016; Meyer, 2003a, b). The integration of a structural understanding of the impact of stigma could reframe mental illness in trans people as an expected and normal human reaction to the extreme emotional pressure discrimination exerts.

Other contemporary narratives were shrouded in ambiguity regarding whether being trans or non-binary was indeed a barrier to adoption and fostering matching:

*So, you’d go to a profiling event and people would have conversations with Alex, and Alex looks female…* a*nd those conversations would be really positive…* *we’d have conversations afterwards and share stuff, and then it would just go quiet…* *they would say ‘that’s not a problem’* [referring to Alex being trans], *and then you wouldn’t hear anything. (Melanie, social worker)*

Examples such as this demonstrate a form of covert discrimination that can indeed be more pervasive than its overt counterpart (Ely, 1995). Challenging a discriminatory decision made by a panel in which the reason was stipulated as gender identity can today be pursued via formal channels outlined in a local authority’s complaints procedure, supported by the Equality Act 2010. However, challenging decisions that social workers, carers or adopters feel to be discriminatory but have no explicit, recorded proof of would be nigh on impossible. To make a case that the Equality Act 2010 or Gender Recognition Act 2004 has been contravened, evidence must be presented to a tribunal or court. However, where gender is not overtly stated by workers as a reason for not selecting a trans person as a suitable match for a child, it cannot be identified as a discriminatory decision nor formally challenged as such.

Notwithstanding, narratives of resistance have emerged (Bamberg and Andrews, 2004), whereby members of the trans community have used their agency to improve support for trans people:

*I am trying to use social media more productively recently, I have followed activists and as of last week I have been the owner of a Facebook group for trans and gender diverse people, we meet up weekly...* *I am part of the UKs trans FTM Facebook group…The group normally talk about general things relating to transitioning, but it definitely feels like a space where I could talk openly about anything including potentially fostering or adopting (Toby, non-binary prospective foster carer).*

Here, social media is used positively as a mechanism to mobilise local level activism that aims to improve the resilience of trans communities (LGBT Foundation, 2017; Hines, 2020). Toby’s statements offer further support to the conceptualisation of the relationship that trans identities have with social media as being complex (Hines, 2019). Toby’s narrative adds to Alice’s earlier troubling of social media as a double-edged sword that at once promotes awareness of trans identities and enables the platforming of negative attitudes towards them.

**Internalising cisgenderist views on family**

Participants suggested that stigma experienced by trans people can become internalised, acting to make salient the belief that the option to become a parent or carer is not something that society will make available for a trans person:

*I was never really up for it in the early years, you know, I thought, I had the sort of stigma in my head that I thought that trans people don’t have kids. (Alice, trans woman and prospective adopter)*

Stigma has been internalised and has influenced the imagined possibilities that Alice had for her life, thus exemplifying stigma power (Link and Phelan, 2014). The influence of cisgenderism has been integrated in Alice’s worldview and is so exclusionary that it made her feel trans people were not able to parent. The macro level structural influence of cisgenderism (embedded within culture and institutions) thus links to cisgenderism that operates at a micro level, reducing individual choice and agency as highlighted by Alice (Bauer et al., 2009).

Participants expressed the belief that for those whose presentation is genderqueer (not in-keeping with conventional binary gender distinctions), it would be more difficult to adopt than someone whose gender is binary:

*Can you imagine someone has a sort of more queered presentation?... They would have a tougher time than me…I think they’d really struggle. (Celyn, non-binary adopter)*

However, Celyn was cautious about sharing this view when speaking at an International Day Against Homophobia, Transphobia and Biphobia (IDAHOBIT) event:

*I was asked to speak at a IDAHOBIT event… the theme was ‘love makes a family’… and I had a really tough time with that speech, because I wanted to be honest, I wanted to be truthful, but also…I didn’t want to put off other trans people from applying … so I talked about some of the experiences that I’d had, erm, but I made sure that I really leaned heavily on the positive ones. (Celyn, non-binary adopter)*

Indeed, Jas (2020) points out that there are many barriers to non-binary people expressing an authentic sense of self. They explain that it is often a balancing act between self-expression and emotional (and sometimes physical) safety.

*You can be in Annie’s position and get away with it… Because she’s binary. And so, she can just say ‘I am a woman’, and not have to qualify it. And people will accept that. (Ash, neutrois prospective adopter)*

This lack of understanding can create a reluctance for people to be open about non-binary identities through the adoption process:

*I don’t think I would deny it. But I wouldn’t be the first to bring it up… (Ash, neutrois prospective adopter)*

Valentine (2016) also found that non-binary people did not feel comfortable sharing their gender identities with services (except for specific LGBTQ+ services). They had little confidence that health and social care services would respect their identities and felt that more staff training was required. Where respondents included further detail regarding the reasons, the most common reason for non-disclosure was that people did not feel it was relevant to the reason they were accessing a service and some further explicating a belief that gender identity would detract from the main reason for service access. Some people were not out to family/friends and were afraid information could get back to them and out them. Others felt it would be easier to present as a binary trans person as they believed providers have a greater understanding of their needs. There were indeed reports of service providers interrogating people about their non-binary identities. Indeed, Valentine’s (2016) study demonstrated the modernity of the issue; in using services within the last 5 years 67% had been misgendered by accident and 33% on purpose and 49% felt like they were educating services.

In examining why social work professionals may struggle with the idea of a trans person applying to adopt or foster, participants proposed that such reticence may come from a belief that placing a child with a trans person can influence the child’s gender:

*There is the assumption as well that if you are trans, that will rub off on your child, and that came from that environment there. (Ash, neutrois prospective adopter)*

Another barrier reported was a worry about unwanted attention that could be attracted by the British media because either a parent/carer or child is trans:

*There’s a genuine fear that I have is that the Daily Mail find out about us, they’ll have a ball! They can never, they never can. (Celyn, non-binary adopter)*

In a context where trans people routinely experience discrimination and its harmful effects (LGBT Foundation, 2017; Bachman and Gooch, 2018; Riggs and Treharne, 2016), the threat of further negative exposure for oneself and one’s child could put up a significant barrier to adoption and fostering. Indeed, minority stigma stress, mental illness and isolation, are known to be experienced by people following exposure to discrimination (Meyer, 2003a, b; Riggs and Treharne, 2016).

**Trans awareness in social workers**

The social work practitioners interviewed for this study had no prior personal or professional experience of gender diversity before beginning work with trans adopters. Both completed training to broaden their knowledge at the earliest opportunity but told stories of the difficulties encountered when beginning to support someone without a sound knowledge of gender diversity:

*The first time I met them we just talked. Yeah about… how to talk to them, and pronouns, and… just a little bit around that and, just trying to get… the thing that I found really difficult, is falling into sort of stereotypical pronouns. That’s the hardest thing. (Amy, social worker)*

In the latter part of this quote Amy describes the unintended use of inappropriate pronouns; behaviour that is described as ‘misgendering’ (Valentine, 2016; Rogers, 2020). Shelton (2015) explains that misgendering can occur accidentally, however accidental misgendering may still cause distress to trans people.In further expounding the issue of accidental misgendering, one participant explains why they believe unintended mistakes by social workers regarding their pronouns occurred when they were addressed during the adoption process:

*I think they all reverted to sort of what safe or normal for them. (Celyn, non-binary adopter)*

Cisgenderism and the broader concept of gender normativity can be employed here to understand why trans adopters and carers can be misgendered by adoption and fostering social work staff. Stryker and Aizura’s (2013) theory would explain that social work staff, along with the public at large, have been continually exposed to a male/female binary gender categorisation that has been positioned as ‘normal’. The brain is so used to coding and integrating schemas of binary gender that when it encounters a non-binary person they are identified as novel (Fine, 2010). Novel encounters are difficult for a brain to quickly sort and categorise, as such the more typical normatively gendered category is reverted to. This process of sorting people into male/female categories is reported to be a phenomenon that trans people have reported experiencing when interacting with a new person, whether it be a member of the public or a social work professional:

*When you meet someone, the first thing you do subconsciously is decide whether they’re male or female…We speak to them differently, we treat them differently, depending on what your brain has decided. And it’s all completely subconscious. (Sarah-Jane, trans woman interested in adoption)*

An embedded binary understanding of gender could be useful to us in many cases, where it helps our brains to efficiently process a mass of incoming information about a new person (Fine, 2010). Indeed, this process of social categorisation for efficiency purposes is not a new concept and predates neuroscientific data. Goffman’s (1963) theory explained that the process of drawing assumptions based on physical attributes and visible social demarcations has been long embedded within human society. According to Goffman this process, although timesaving and roughly accurate in numerous instances, can lead us to stigmatise certain individuals.

The social workers interviewed similarly reported that being non-binary was something that other adoption and fostering social workers were unfamiliar with, and thus regarded as problematic:

*I think the non-binary aspect of trans confused people [various local authority adoption social workers considering a match with an approved non-binary adopter] even more if I’m honest… it was a bit feeling it’s unknown, we’ve got nothing to base it against. (Melanie, social worker)*

Gender identities, expression and related terminology that sit outside of dominant gender norms (Ansara and Hegerty, 2014) are met with anxiety and confusion from adoption and fostering social work professionals who are not well informed about gender diversity. Indeed, previous research has found that many children and families social workers had not taken part in gender diversity training and as such the knowledge found across practitioners varied, with only pockets of proficiency in the domain of gender awareness found (Hudson-Sharp, 2018).

Contemporary theories of cisgenderism and gender normativity encompass and build upon Goffman’s early work (1959, 1963), to explain how the placing of the most commonly represented social constructions of gender as ‘normal’ resultingly displaces any variants as deviant and therefore unacceptable (Ansara and Hegerty, 2014; Stryker and Aizura, 2013). This can then result in the silencing and erasure of identities that sit out of binary norms or who defy the boundaries understood in terms of gender normativity (Pershai, 2006).

**Intersections increasing barriers**

Several complicating factors were identified by participants that they believed would further raise institutional barriers for adoption and fostering. Crenshaw (1991) argues that there is potential for greater threat to a person’s wellbeing where they experience discrimination in relation to multiple dimensions of their identity:

*There is a ‘you can adopt whether you’re…’ and there’s a list of identities, but there’s never anything disability specific…* [Ash read about] *the first person in the UK to adopt as a solo parent who required full-time [personal assistant] care…And they really struggled with questions about their capability and about whether it would be someone else doing all the parenting? Just in the assumption that he couldn’t possibly parent (Ash, neutrois prospective adopter)*

Clarke and O’Dell (2013) explore the ways in which discourse on disability has placed disabled parents as being dependent on and looked after by their children. This positioning of disabled parents has been critiqued as marginalising and problematising disabled parents, however, the legacy of this discourse remains. A social model of disability would offer an alternative analysis of Ash has being prohibited from fully taking part in the family life they choose because of barriers that society constructs (Shakespeare, 2017). Indeed, as Ash’s identity lies at intersections of gender, sexuality, health and disability, they experience a complex web of societal disadvantage (Korn, 2020).

Riggs and Treharne (2016) indeed point out that we must not assume uniformity of experience across categorical dimensions such as gender and highlight that multiple layers of minority stress can be seen to impact upon one individual.

*A lot of the cross… the intersectional elements of transness need to be taken into consideration, like having no money and having unstable work and… it’s, and not having supportive family, and that sort of thing is quite common. And in order for trans people to be in a position to adopt, they need more support from the system, because they’re lacking that family support or that job structure or that income level. And I think… there needs to be either more support or more advertisement saying ‘no, you can still do this’, you don’t have to have X. (Ash, neutrois prospective adopter)*

Smith (2020) highlights that most trans people never get a break from advocating for themselves. They further that explain that activism generally can involve ableist behaviour that does not allow for breaks. Trans people whose identities sit at the intersection of more than one marginalised grouping may experience even more pronounced difficulties. Indeed, Bower-Brown and Zadeh (2021) found that trans people who are also disabled have difficulties accessing parenting spaces. Trans people are prevented from living full lives and benefitting from the full range of options afforded to cisgender people (e.g., becoming adopters or carers) not because their gender differs to that ascribed at birth and they have disabilities, but because services and the public are not yet accepting them as they are and meeting their needs (Davis, 2017).

Relationship status is a factor that plays a part in adoption and fostering:

*I think there’s always a vulnerability as a single adopter in that, when that door closes on an evening you are in it on your own…* *sometimes on paper people can have an amazing support network, but you don’t really know how robust it is until you’re needing to use it. And Alex’s [trans adopter Melanie supported] has been fantastic. (Melanie, social worker)*

Being single as an adopter or foster carer can act as an intersectional characteristic that reduces the chances of being matched with a child (OFSTED, 2012). Indeed, Melanie’s quote above suggests that the ability of a single carer to proficiently care for a child is often doubted by social workers, even where they can exemplify a robust support network. However, Melanie also asserts that the support network of a trans adopter that she supported ‘*has been fantastic’.*

Barksy (2020) argues that standardised genograms (used collaboratively within social work assessments to assess and depict family dynamics) make use of symbols and conventions that are based on cisnormative and heteronormative ideas. He sets out that the use of assessment methods that have been designed based upon the assumptions that being cisgender and heterosexual are the prevailing and preferred forms of gender and sexuality is an outdated practice. Instead, he offers a modified and more inclusive genogram model for social workers to use. If social workers made use of concepts such as cisgenderism, they could be better equipped to understand external obstacles presented by social care workers and institutions. Furthermore, this could support social workers to see trans people's strengths and challenge false beliefs, as well as bringing concerns into a conscious and open dialogue to be addressed collectively (Morgaine and Capous-Desyllas, 2015).

**7.5 Experiences of cisgenderism in assessment**

**An over-focus on gender**

Several interviewees expressed concern that there would be an over-focus on gender, to the detriment of other characteristics and facets of life:

*It’s interesting… it’s a part of me, it’s an important part of me, I won’t downplay it. But… it’s not the most… I would expect… asking about... how does your experience as a trans person inform your parenting?... Coz I would be like, yeah, it has, absolutely… I’m happy to tell you that… the impact of growing up, like not being accepted, has… formed my ideas about… what’s kind of… important in raising a child… That’s a great question… but then also, ask us other questions, like stuff about our interests and our jobs and you know, home life and that kind of thing. (Jamie, non-binary prospective adopter)*

An unwarranted over-focus on gender throughout assessment and placement evidences a further form of cisgenderism present within adoption and fostering processes.

Several participants expressed belief that they felt it would be easier for them to move through the adoption or fostering process if they concealed a trans history or non-binary identity:

*A friend we know had to pretend not to be trans for the purposes of it [adoption assessment], because, because he knew there would be a lot of digging into it and a lot of questions about when he was gona transition, and when he was gona have surgery, and everything. And… and I can see that being a problem. (Ash, neutrois prospective adopter)*

Adoption social workers hold a large portion of power in relation to the approval of adoptive families because it is their interpretation of a range of face-to-face interactions, they are involved in that directs decisions (Noordegraaf, Van Nijnatten and Elbers, 2008a, b). The powerful influences of gender normativity can mean that the public performativity of gender and sexuality are different to that of the personal (Rogers and Ahmed, 2017). Processes of normative social categorisation can result in individuals portraying an identity that is considered by a majority to be more typical, to either feel a sense of belonging or to give the agent some form of political power. In the context of fostering, the form of power that may be needed by an agent is that of control over their personal information.

The result of such views being embedded within society and indeed social work practice is that trans identities are stigmatised and spoiled as they are regarded by a majority as being socially undesirable:

*I never thought it would be as difficult… when we went to panel and they got approved, I actually felt so confident about Charlie. I just thought, they’re amazing…‘they’re gona get snapped up’…* *It didn’t happen…* *it was nearly a year…once we got into family finding it was almost like we were back in time, when, when, er, LGB, you know, lesbian and gay adopters were seen as n-, as just, as not good as heterosexual. (Amy, social worker)*

This quote indicates that the hierarchy of gender and sexualities (Serano, 2016, Messerschmidt et al., 2018) has shifted within adoption and fostering practice. Where gay and lesbian adopters and carers were previously regarded as ‘*not good as heterosexual’* carers (Hall, 2010; Hicks, 2000), trans adopters/carers are now placed at the bottom of the hierarchy.

**Strengths to an adoption or fostering application**

Some prospective adopters/carers outlined relevant experience that they believed could add strength to their applications to adopt or foster:

*We’ve taken in one of our friends who’s got a kid, so…she’s lived with us for a little while, just at weekends…so there’s a six year-old lad, and this young baby girl, so… relevant experience all round there! (Alice, trans woman and prospective adopter)*

This shows Alice has actively sought childcare experience to develop skills that will be helpful to her in a role of adoptive parent. This demonstrates motivation to adopt and a realistic expectation that the parenting role will involve new skills and adaptation.

*I read a lot of books, I read a lot of blogs, I spoke to friends of mine who’d adopted… I hung out with their kids. I did every single training going. So, I’ve done the online training, the face to face ones and yeah so, I knew that once I had a kid it’d be almost impossible to go, so I thought that I’d take the time to get as much, while I can, get as much training and experience as I can…I’ve done Lego therapy, how to care for a child who’s been sexually abused, and I’ve done first aid and I’ve done all sorts.(Celyn, non-binary adopter)*

Celyn likewise demonstrates their motivation to become a skilled and knowledgeable adoptive parent to a child who has complex needs. Acknowledgement of the need to develop a range of therapeutic skills to meet the needs of children who have experienced abuse (Cairns, 2002; Wilson, Pence and Conradi, 2013)

*And she’s going to be having direct contact with her birth dad when she grows up... He’s not capable of parenting her, but he’s not a bad guy, and he’s obviously, obviously so important to her so if it is possible for me to keep that path open to her… then I’ll keep it open for her and sort of like maintain those connections. (Celyn, non-binary adopter).*

These quotes together demonstrate a good understanding of the needs of children needing adoptive and foster homes today (Baginsky, Gorin and Sands, 2017; CoramBAAF, 2020; Oftsed, 2021). With an increasingly complex presentation of needs, therapeutic skills and an understanding of the importance of a child’s birth family are key attributes to look for in foster carers and adopters (Baginsky, Gorin and Sands, 2017; Featherstone, Gupta and Mills, 2018; Narey and Owers, 2018).

Social workers detailed some of the traits they felt that the trans carers they had worked with possessed:

*When I met them, it was just amazing and I don’t think that many people, certainly single adopters, could’ve gone through what Alex has since Annie came to live with them….* *It is that sort of resilience, that not giving up, that really, that want to be a parent, and understanding that that’s lifelong, it’s a real commitment…there’s been some really difficult times and there’s been some really lovely times, and I think that Alex holds onto those…I think just their nature is, like, not gona give up, like stand up to what you believe and try and get all the support that you possibly can and advocate. Yeah. All the positive skills that you would be looking for in an adopter really. (Melanie, social worker)*

Further to the suggestions in the previous section detailing greater gender diversity awareness training and development work within social services, arguably stories such as those above that highlight the unique positives that trans people could offer to the role of adopter/carer could be disseminated to proactively create a counter-discourse, challenging cisgenderist views of trans people as less than. Information showing the childcare experience, knowledge, strength and resilience of trans carers/adopters could be integral to changing the prevailing cisgenderist dominant discourse that frames trans people negatively (Foucault, 1969). Rather, the emergence of a discourse that suggests trans people have unique offerings as carers/adopters could form a useful counter-narrative to help address cisgenderism within social services.

**7.6 Experiences of cisgenderism in matching**

**Prejudices in matching**

The social workers interviewed reported both overt and covert gender discrimination in the adoption and fostering processes. Here, Amy describes the responses of social workers considering a non-binary adopter for a match with children they needed a placement for:

*I don’t think that people were like, overtly prejudiced…they would say well how do, how would they respond, how would they explain their transgender status to a child? A child might get confused…* *how would a child er, cope with bullying? About a transgender parent. (Amy, social worker)*

Indeed, social workers have a dilemma as whether to make decisions based on theoretical grounds supposed to be in a child’s best interests, or to be guided by moral ideals about how to best raise a child that have been transmitted culturally (LeVine, 2004). Here, social workers were assuming that children of trans parents will be bullied and that a child placed with cis parents would not be bullied. However, a recent review of bullying suggests that its reasons are complex, encompassing individual and contextual factors such as the school environment and whether families encourage their children to problem solve using violence (Jung, 2018). The assumption that trans-headed families will disadvantage a child is a historical tension and one that continues in current practice.

*Some outright discrimination and some… trying to hide behind other things… agencies would come up with lots of different reasons, none of which really made sense…* *That was easier than to say, ‘we’re struggling with this’ (Melanie, social worker)*

Melanie’s quote suggests that selecting another reason (than gender) for not exploring a match between a trans adopter and a child was preferable by social workers as it masked their cisgenderist views. Between them, Melanie and Amy had interactions with a large proportion of the local authorities spanning the UK, via online and in-person linking and matching methods such as Adoption Link, emailing of profiles, adoption exchange and activity days. As such, their comments offer a transferable insight into the overt and covert discrimination that exists in numerous adoption organisations across the UK. Although overt discrimination can be challenged under legislation such as the Equality Act 2010, covert discrimination can be more pervasive and difficult to address (Ely, 1995).

There were some examples of outright transphobia from social workers in the adoption process. Social worker Amy relayed a comment made by workers at a potential placing authority after a meeting:

*‘I just think, they’re confused about their gender, their identity’. (Amy, social worker)*

In this quote, Amy recounts a comment about a non-binary adopter that shows a social worker denying the validity of the adopter’s identity, thus exemplifying the transphobia that exists in contemporary social work practice (Bachman and Gooch, 2018). Within a normative ideological conception of gender, social workers positioned cisgender identities as natural and indisputable, with gender identity viewed as being absolute and fixed at birth. Due to the influence of gender normativity in society, cisgender identities can be viewed as normal and acceptable and transgender identities as unnatural, deviant or other (Enke, 2012).

**Cisgenderism at individual and structural levels**

Cisgenderism can be present in the personal views of social workers, however as it is also considered to have systemic traits as a prejudicial ideology, it can be seen as a wider structural problem in society, likened to that of sexism or racism (Ansara and Hegarty, 2011, 2014; Rogers, 2017a, b). Such macro level structures can be said to both produce and maintain the effects of marginalisation of trans people within adoption and fostering services, as well as society at large. Cisgenderism can be intentional or unintentional (Riggs, Ansara and Treharne, 2015).

*I think people were scared of having the conversation, being able to say…‘look, I feel uncomfortable about [matching with a trans adopter]…I think that they didn’t want to be viewed as being discriminatory. So, they’d just say ‘we know it, we’ve had it [the trans awareness training Melanie’s agency were offering], but this person just doesn’t fit… with what we want’. (Melanie, social worker)*

Here, Melanie explains how social workers were ‘*scared’* of voicing the discomfort they had with regards to matching children with a trans adopter. Melanie infers that this is because they are hold discriminatory views but do not wish this to be known. However, their behaviour aligns with Lennon and Mistler’s (2014, p.63) definition of cisgenderism as involving ‘*the cultural and systemic ideology that denies, denigrates, or pathologises self-identified gender identities that do not align with assigned gender at birth, as well as resulting behaviour, expression, and community*.’ As an orienting framework, cisgenderism broadens the analysis of the discrimination experienced by adopters and foster carers, from a focus at the micro level of interpersonal interactions to include macro level institutional structures. Such macro level structures can be said to both produce and maintain the effects of marginalisation of trans people within adoption and fostering services, as well as society at large.

*We had a bad experience with one of our supervising social workers, which left us suspicious of the fostering team, we decided not to inform them of my decision to transition at first, mainly because I knew it was a long journey, unfortunately our 3 yearly medical reviews had to be done. Once again, my medical records betrayed me. (Andie, trans woman, foster carer and adopter)*

Trans people do not yet benefit from the full range of options afforded to cisgender people (e.g., becoming adopters or carers) because services and the public fail to understand and meet their needs (Davis, 2017).

**7.7 Experiences of cisgenderism at placement**

**Being outed**

Participants recounted experiences of being outed and of cisgenderist views of children’s social workers:

*His mother* [referring to a fostered child placed with *was told about me being transgender, she complained to the fostering manager. I’ve never been told what she said but I have been reassured the fostering team fully supports me. I do feel the child’s social worker should never have told mum I was transgender, or she should have consulted with me before hand, so I do feel the team lacks understanding. (Andie, trans woman, foster carer and adopter)*

Social workers appeared to reduce Andie to her physical presentation and a set of socially dictated characteristics (Serano, 2016). Being trans was only a small part of Andie’s profile as a foster carer, however, it was focused on and problematised by a social worker. This pathologizing practice is articulated in contemporary literature as a form of identity abuse when it occurs in trans people’s personal relationships (Rogers, 2020) however, it is under-theorised when it takes place within the context of a professional relationship involving social work practitioners (Brown and Rogers, 2020).

**Misgendering and transphobia**

Misgendering, another form of pathologizing (Shelton, 2015), was reportedly prevalent within social services. One social worker reflects on the difficult experience that a non-binary service user they supported had experienced:

*It must be so difficult for them, you know, they constantly…they get misgendered… all the time. (Amy, social worker)*

Social workers used their own agency to attempt to shield adopters from examples of direct transphobia:

*There were some things where I, I wanted to talk to Charlie [a prospective adopter who identifies as non-binary] about the, the sort of prejudice and discrimination, but also didn’t want them to realise how sometimes, how difficult it was…* *because it just seemed too, too, too much. (Amy, social worker)*

Many of the impacts, such as minority stigma stress, mental illness and isolation, are known to be experienced by people following exposure to discrimination (Meyer, 2003a, b; Riggs and Treharne, 2016). It would indeed be the role of a social worker to advocate for an adopter and challenge discrimination based their trans status (using the Gender Recognition Act 2004 and Equality Act 2010). However, the protection they claim to afford social work service users (Fish, 2012) has been shown by this study’s findings to be insufficient for adoption and fostering work with trans and non-binary people. Where discrimination was covert, it could not be addressed openly via formal complaints procedures in the absence of tangible evidence of discrimination (Ely, 1995). Participants believed discrimination due to being trans was occurring, but it was difficult to isolate the process by which negative responses were due to carers being trans and not some other characteristic:

*…* *my experience of family-finding was that it was just a ‘no’ or a ‘we’re not starting a discussion’. And there was never really any opportunity to try and talk about Alex. (Melanie, social worker)*

In this quote, Melanie draws attention to the way in which cisgenderist based discrimination operates in overt ways. Social workers are influenced by gender-normative discourse that places cis adopters and carers as the only valid categories of parent, closing off conversations regarding non-normative options (Foucault, 1979; Pearce, 2018).

**Wider impacts of cisgenderism**

The following quote highlights the pathologizing impact that cisgenderism can have on wider child and family social work practice:

*And I think it comes from genuine concerns of what will, like, I had, I have a friend who is trans and who is raising her children with ‘they’ pronouns, and social services escalated her* [referred her for a safeguarding investigation] *…* *Because they said it was depersonalising for the child. And not allowing the child to have an appropriate gender, and that sort of thing…* *Well, eventually they were left alone, but they had to justify themselves quite a lot. (Ash, neutrois prospective adopter)*

Ash’s quote demonstrates that there is a lack of understanding about pronoun use within the British public and that this can impact upon social work practice. The assumptions made here that gender-neutral pronouns are depersonalising, however there is no evidence to suggest this. Rather, the assumption is based on gender norms, evidencing the systemic nature and structural level impact of cisgenderism (Ansara and Hegarty, 2011; 2014; Rogers, 2017a; 2017b). The findings from my research add weight to the idea of the widespread operation of cisgenderism within UK public services (Pearce, 2018):

*I've been meeting other trans people and they all have experienced some level of hate (trans women being the most discriminated against) … I was once groped by someone who wanted to know if I was wearing a prosthetic in my underwear… In terms of Facebook, prejudice and hatred towards trans people is everywhere...Yes more people are feeling safe to express their true gender identity, but hate crimes are on the rise again because of this (Toby, non-binary trans man and prospective foster carer.*

These quotes demonstrate how trans people are seen as public property (‘…*groped by someone who wanted to know if I was wearing a prosthetic in my underwear.’)* It illustrates how trans people are treated as objects of curiosity (Pusch, 2005), and further that this objectification involves their fetishization (Hines, 2020). Trans people are framed as sexual deviants and are made subject to sexual attack in an attempt to prove this assumption and to disempower them (Phipps, 2021). Recent scholarship draws attention to the ignorance of trans abuse, and highlights that society often fails to conceptualise it as such (Rogers, 2016, 2017a, 2017b).

**7.8 Cisgenderism after placement**

Two participants had children placed via adoption and fostering, and this section will predominantly focus on offering an in-depth analysis of those narratives, as well as the narratives of the social workers who have supported trans carers after placement.

**Restrictions and anxieties**

There were examples of a placing adoption agency exerting restrictions on the groups and services that adoptive parents may take children to in order to explore their own gender as noted by Celyn who claimed “*I’m not allowed to take her to Mermaids [group for trans youths] because they’re… ‘too gender-affirming’”.* In place of this affirmative social support group, alternative provision was made:

*… they have made a referral to the gender identity clinic for her, to be seen… because, the gender clinic takes a very very long time and it’s very very very cautious. And erm, will, actively slow her making a transition. (Celyn, non-binary adopter)*

The gender identity development service (GIDS) approach (the only NHS treatment service in England) is more heavily rooted in a medicalised approach to trans identity, which young people in the UK experience significant delays gaining access to (Carlile, Butteriss and Pullen Sansfacon, 2021). As experienced by Celyn, these gatekeepers can hold up processes of assessment which can result in delays in children getting puberty blockers. This process is likely to be further delayed by the recent Bell vs Tavistock ruling (High Court of Justice, 2020) that children under 16 are unlikely to be capable of giving informed consent to receive puberty-blocking drugs. Such delays have been associated with psychological distress, even suicide attempts (Carlile, Butteriss and Pullen Sansfacon, 2021). Young people have also reported negative experiences within GIDS, whereby staff misgender, use deadnames and show lack of awareness of trans (and particularly non-binary) identities. The ‘*very very very cautious’* route to ‘*actively slow her making a transition’* then may actually represent the riskier route.

*[Evie’s foster carer] was very supportive of Evie, but just little things… Evie was allowed to have one pair of boxers, that she was allowed to wear on weekends only, and her carer called them her ‘silly pants’…I was like they’re just boxers, she can wear them whenever she wants… and like don’t make a big deal out of it, they’re just pants. (Celyn, non-binary adopter)*

This quote suggests that Evie’s carer deemed wearing clothing that did not align with the gender a person is assigned at birth as ‘*silly’.* Gender expression that broke with conventional norms was seen as deviant, as dictated by ruling discourse of gender normativity (Foucault, 1979). Further examples of this were provided by participants where tasks usually given in delegated parental responsibility to adoptive parents from placement were restricted because they were related to a child’s gender identity exploration:

*Evie’s been asking to have her hair cut… They* [social workers and social work managers] *were micro-managing everything to the nth degree… talking about a child’s gender or sexual orientation, is quite scary for social workers, erm, for fear of are they gonna get it wrong? Are they gonna end up on the front page of the daily mail?... I think they all reverted to sort of what safe or normal for them. (Celyn, non-binary adopter)*

Cisgenderism was also highlighted in the school environment. In early placement, Celyn’s child Evie asked to bring in a book about gender to share with her class and this request was denied:

*The virtual school told them not to allow it. It’s a banned book on the curriculum… In key stage 2 they talk about girls’ bodies and boys, the difference between girls and boys, so they don’t talk about anything more complicated than that. Or anything beyond that… And so, we kind of had a really frustrating time where the school are willing and I kind of know what’s happening… and the virtual school are saying ‘you can’t’. (Celyn, non-binary adopter)*

The State of the Nation report (Social Mobility Commission, 2015) found that young people wanted their carers to understand their point of view. While cis parents and professionals may be able to support trans young people following training and/or a decentring of their own normative understandings of gender (McNeilly, 2019; Rahilly, 2020), this study’s narratives demonstrate that trans people *can* already embody this expansive approach and understanding. Further, ‘The Care Inquiry’ (2013) found that children prioritised having things in common with carers, as well as being loved and accepted by them. Trans carers may be especially well placed to provide the acceptance and belonging that children who cannot stay with their birth parents need.

Other professionals involved in the child’s part of the adoption process engaged in different struggles with a child’s gender identity:

*Matthew, the psychiatrist is, he was really reluctant to have anything in [Evie’s] profile about the fact that she was questioning her gender…Because he was worried about attracting someone who thought it was really trendy and cool. (Celyn, non-binary adopter)*

This quote suggests that the psychiatrist regards potential adopters as being shallow, seeing children as commodities to make them ‘*trendy and cool’.* The inference is that adoption could enables parents to engage in a selection process that birth parenting would not allow, whereby they choose the traits and characteristics of a child that they wish (Arneston, 1992).

**Resistance**

As exemplified above, there were difficulties in enacting overt methods of resistance against cisgenderist views and actions of social work, psychology or teaching professionals at the point where a child was placed for adoption but not yet officially adopted. The placing authority retains the majority share of parental responsibility and chooses how and when to share this with the adoptive parent; as such they have legal power over decision-making that cannot be disputed. However, there were still examples of small acts of resistance, such as the use of humour:

*So, I just mentioned that she was still asking to have her hair cut, […] and I sort of mentioned that she wanted to have a Mohican, as a joke! And they came back and said, ‘she’s allowed to have her hair cut, but she’s not allowed to have a Mohican!’ (Celyn, non-binary adopter)*

Modes of resistance can act to challenge normative thoughts, discourses and social presentations, acting to exert resistance against assimilation and to give voice to alternative social ways of being. Each time carers and social workers spoke about trans people, modes of resistance were created and operationalised as new objects were mentioned, and their relations of similarity difference spoken about (Foucault, 1969).

The following quote demonstrates how Celyn was prohibited from using a name they had chosen to represent their parenthood as a non-binary person who identifies as having both male and female components of their identity:

*Whereas, at E (Evie’s placing LA) my non-binary-ness was sort of considered and there were lots of… it was part of the reason why they matched me with Evie. But also… but they still sort of had their own anxieties about it, so for example, they said that I had to be called Celyn, I couldn’t be called… ‘Mum-dad’; it’s a welsh word that means parent…I’m Welsh. I’m not just sort of plucking it out of the air! (Celyn, non-binary adopter)*

Celyn felt that as word ‘Mum-dad’ would be a suitable label for their gendered parenting role, and as a word already integrated into the Welsh language it would likely be acceptable. However, this descriptor was rejected as a suitable label for Celyn. The action of rejecting a parenting label chosen by a non-binary person as reflective of their gender and role as a parent is pathologizing of their non-binary identity (Shelton, 2015). Further, although the rejection does not involve an inference of the wrong gender in the modus that misgendering usually attests to, it does prevent Celyn from being referred to as a parent in the linguistic manner that cis and binary trans people are afforded. As such, ‘misgendering’ could be argued to encompass examples where a non-binary person is prevented from assigning themselves a gendered term that they feel accurately describes them, such as a parenting word that does not have exclusively male or female connotations.

Celyn’s suggestion of alternative labels and ways of acting to support trans adult adopters as well as trans children can be conceptualised as a counter-narrative (Bamberg and Andrews, 2004). Foucault (1969) would explain that this process occurred as counter-narratives were given voice and the relationships between them were articulated, which then enabled them to emerge as a new discourse. Trans feminist discourses and those of non-binary genders enable us to acknowledge the possibility of a world that does not have to be divided simplistically by rigid ideas of binary sex and gender (Bornstein and Bergman, 2010). These discourses draw attention to the complexity and diversity that exists within biological, social and political life and add new dimensions to processes of matching and placing children for adoption.

**7.9 Tackling cisgenderism in social work**

**The complexities of addressing cisgenderism**

It is difficult to establish whether the issues in fostering and adoption social work related to the way in which cisgenderist stigma prevalent within society acts to devalue trans identities (Goffman, 1963), or if perhaps the greater issue was lack of understanding regarding how a person’s trans identity would or would not feature in a match between a carer/adopter and a child:

*Looking back, coz family finding was so difficult, I think I could’ve done a bit more to explain how a child would experience trans [adopters], but I think once I got my head around it, my opinion was just more or less, this is just an aspect of their identity. And it shouldn’t matter… Whereas it did matter in family finding. Because so many people found it really difficult. (Amy, social worker)*

Here, the dominance of cisgenderist and gender normative discourse has led social work practitioners to find it difficult to consider how trans people could be parents (Foucault, 1979). Indeed, the prospect of having a conversation with children about a trans carer appeared to be an issue for social workers:

*I think, er, I noticed that people who were family finding for babies, people were a little more open to considering me than they were for older children… Because they wouldn’t have to have the conversation with the child. (Celyn, non-binary adopter)*

This quote suggests that social workers are actively avoiding having (presumably) difficult conversations about gender with children. Their avoidance of the issue suggests a discomfort in talking about trans identity, resultant from a lack of understanding (Hudson-Sharp, 2018).

**Gendering infants**

A prospective adopter detailed a problem they believed could occur for them in relation to their desire to adopt a baby; how to navigate adoption and fostering systems that gender young infants. Indeed, online UK adoption and fostering matching system Linkmaker (no date) matches children with adopters and foster carers based on characteristics such as gender. This information is assumed from medical examination recorded at a child’s birth and provisions are lacking for the recording of non-binary identities. Trans participants however dispute the presumption and assignation of sex or gender at birth:

*They cannot talk. So, you don’t know that [a child’s sex or gender], you can’t know that…we would obviously say ‘no preference’, but do we like, bring that to their attention?... ‘hey, that’s actually pretty harmful’… What’s our like, place, in that? In addressing that? (Jamie, non-binary prospective adopter)*

Rather, participants believe that gender identity cannot be known until a child can share this information themselves. While Baron-Cohen (2004) has brought into mainstream consciousness an acceptance of sex and gender differences as being determined pre-birth, this work has been criticised by contemporaries condemning it as ‘neurosexist’ (Fine, 2010; Ripon; 2019). Evidence suggesting that there are sex differences in the brain structures of human babies at birth, and as such that being male or female could be directed by chromosomal sex, is tentative at best (Fine, 2010). Further, emerging neuroscientific research pointing to the plasticity and responsivity of the brain from birth suggests that infant brains are shaped by their gendered environments (Ripon, 2019). Sex and gender then are more usefully continually deconstructed and reconstructed within the social context of the time (Hines and Sanger, 2010; Callahan, 2021).

As such, when asked if they would find it uncomfortable to hear a child’s social worker referring to a baby as a boy or girl, Jamie responded:

*That’d be pretty uncomfortable, yeah…I mean, like, if they’re older, and we just ask them, and they would be able to tell us, and... but, you know, also, equally, like, like that kind of understanding can like grow, so, over time. Just coz the child is old enough to know their gender, doesn’t mean that they understand it. (Jamie, non-binary prospective adopter)*

Jamie’s quote indeed suggests that a more inclusive adoption and fostering service would not assume an infant’s gender, rather would allow the child to share this information when they are aware of and able to vocalise it. Importantly, Jamie stresses that awareness of gender in society does not equate with knowing your own gender, and that an understanding of personal gender identity can take time to develop. This point is evidenced in Chapter 5 of this thesis, and echoes other contemporary research showing that young people understand their gender identities at varying ages (Carlille, Butteris and Pullen Sansfancon, 2021). While children often report knowing their ascribed gender is wrong from a young age and as such desire puberty blockers to prevent dysphoric changes to their body, blockers can be experienced as offering time to explore and understand gender.

**Lack of experience with trans people**

The lack of experience that social workers have in supporting a match between a trans carer/adopter and a child was evident:

*I think people were struggling with the concept of how we would introduce the parent role when it’s not gonna be mum or dad...* *(Melanie, social worker)*

It appeared to be especially problematic because of the lack of precedent:

*I wasn’t able to find any examples of how social workers had prepared children. Because there’s none. And I think a lot of people were a bit scared. (Celyn, non-binary adopter)*

Indeed, much of the social work literature on fostering and adoption (e.g., Quinton’s 2012 review of matching evidence) does not consider trans or non-binary people. This lack of attention to trans identities within social work professional discourse may have contributed to uncertainty regarding how to proceed as social work teams did not have previous examples and case studies upon which to base their plans and decisions. Celyn reflected on whether or not professionals felt able to ask them if they were unsure about something related to their gender:

*Some did, some of them didn’t like my answer… I would say that children in my life… I’ve spoken to them and I’m not a boy or a girl, and they should call me ‘they’… and that because they’re kids and everything they’re learning, they’re learning, they’re not sort of having to re-learn, so they just incorporate it into their worldview in a way that grown-ups don’t. (Celyn, non-binary adopter)*

As such, a major issue highlighted for social work practitioners in the consideration of a placement between a trans carer and a child is a lack of knowledge and confidence with regards to speaking to the child about their carer’s gender. This finding is congruent with Hudson-Sharp’s (2018) findings that transgender awareness knowledge is patchy among UK social workers and that training provision in this area has been limited.

Focusing in on trans awareness training could help more trans people come forward for assessment as adopters and foster carers:

*I think if, if you can see that they have provided training to all their staff, on trans issues and trans identities, that would make it feel much more… safer to be in that environment. (Ash, neutrois prospective adopter)*

Creation of feelings of safety is essential to enable people to come forward. However, to infer that the completion of trans awareness training would be sufficient to solve the problems that exist within UK adoption and fostering social care services would be overly simplistic and reductionist. It appears that a trans carer is viewed as providing an additional difficulty for a child placed for adoption or fostering:

*I think the other part was these children have already had so much change and so much loss and differing people in and out of their life that that just added an additional thing… The children’s social workers know the children, they know what they’ve been through. They’re advocating for them and thinking this is an extra part. (Melanie, social worker)*

Here, existing powerful and dominant discourses seek to hinder the development of new counter-narratives (Foucault, 1972, 1979). Social worker reticence to consider someone with a trans identity seems to come from a belief that such a match could be a disadvantage to a child. This belief can be interpreted as resulting from cisgenderism that pervades UK society and the institutions that sit within it (Ansara and Hegerty, 2014).

**7.10 Positive experiences and recommendations**

**Factors in agency choice**

Factors in trans people’s choice of foster care of adoption agency to apply with centred on the experience it had in supporting LGBTQ+ parents. However, some participants highlighted that support of lesbian, gay, and bisexual people specifically did not necessarily also mean the agency would be able or willing to support trans people:

*There are some agencies that are really active in looking for LGBTQ+ parents, but the T is kind of contentious for a lot of them. Like, they’re happy for a lesbian couple to adopt a baby but would be more wary of a trans couple. And I think that’s, that’s a societal thing. (Ash, neutrois prospective adopter)*

Previous research has suggested that interest in and therefore support for lesbian and gay-headed families may have obscured the ongoing neglect of the most marginalized voices, because trans people are subsumed into ‘LGBTQ+’ research (Rogers, 2016; 2017b; Ross and Dobinson, 2013). There is indeed much research foregrounding the experiences of gay fathers and lesbian mothers and arguing for their more mainstreamed acceptance into family life (see for example Weston, 1991; Donovan, Heaphy and Weeks, 2001; Gabb, 2006). While lesbian-headed families have, as Ash suggests, become more accepted within society, Quaid (2013) suggests that they are still constructed as representing the antithesis to an idealised heterosexual, nuclear family. The heteronormative ideal remains as the prevailing gendered construction of motherhood as the most important role a woman plays too prevails. As such, Quaid (2013) argues that lesbian-headed families pose a risk to the social order of family life and intimacy, thus posing a wider risk to society. Further, where lesbian- and gay-headed families pose a risk to the social order of family life (Gabb, 2006; Quaid, 2013), trans-headed families may pose an even greater risk, thus representing the even more *‘contentious’* choice for an adoptive family. However, a recent ruling freed the label ‘mother’ from legal gender, meaning in law there can be male and female fathers (Pearce et al., 2019).

Trans participants all stated that it would be helpful for agencies to clearly express an openness to and valuing of trans people:

*Having the fostering/adoption service promote that it welcomed/needed non-binary families would be a huge encouragement (Noel, cross dresser/transvestite, prospective adopter)*

Other participants highlighted the importance of personal stories in their decision to pursue adoption or fostering with an agency:

*I like reading opinions… it was just reading peoples experiences because that’s more of a genuine thing. You know, you don’t want to read some kind of marketing thing that says ‘adopt tomorrow, it’s great’. (Alice, trans woman and prospective adopter)*

Personal accounts shared online were especially important to prospective adopters/carers with physical disabilities:

*[…] it’s more people online who’ve shared direct experience, because we don’t, my interactions are mainly online because getting out of the house is a struggle. (Ash, neutrois prospective adopter)*

Participants interviewed had searched for agencies who had experience of trans adopters and found a lack of experience in supporting trans adopters and carers. The social workers interviewed confirmed this but offered explanation about their attitude and openness to assessing and supporting a trans parent for the first time:

*It was completely new to me, and yeah, I just thought this is a, is a really good opportunity to learn...* *I went onto some New Family Social training. (Amy, social worker)*

Social workers in this study had not received training either pre- or post-qualifying, supporting Hudson-Sharp’s (2018) findings that there are significant gaps in knowledge on trans issues. In relation to adoption social work, the only knowledge reported from the team was in relation to a band:

*Some of the members of our team had quite a good awareness because they were into a, a rock band, and one of the people in it were quite famously transgender. (Amy, social worker).*

For participants who engaged with social workers who had previous experience supporting trans people, the experience was positive:

*With a new supervising social worker and a change in the fostering manager…this was very positive as our new social worker was brilliant, she had some experience with transgender issues and was able to offer us some real support. (Andie, trans woman, adopter and foster carer)*

Other participants, however, searched for agencies who had experience of trans adopters, and found a lack of experience in supporting trans adopters and carers:

*I got the impression that we don't have a single trans foster carer on our books (Toby, non-binary trans man and prospective carer)*

These narratives suggest that there are some difficulties inherent to promoting inclusive practice for trans people within adoption and fostering services that lack experience and knowledge of working with gender diverse individuals. It is suggested that improvements in the depth of training on gender diversity as well as breadth of its offering within social services could be key to stimulating agencies to make the changes needed for trans people to consider adopting and fostering with them. Agencies can make use of their existing LGB experiences to show prospective trans adopters that they already employ some inclusive practice measures, and once they begin assessing and supporting trans people they should make use of the personal accounts to demonstrate to the wider trans community that becoming an adopter/carer is possible. Here again, the implication is that the nurturing of sociological imagination leading to trans people in the community imagining a future of them becoming parents is key (Berkowitz, 2007; Von Doussa, Power and Riggs, 2015).

**Success stories**

Within the participants narratives, there were some positive examples of how trans people succeeded as both adopters and foster carers:

*We had a 16-year-old boy on an emergency placement, whose behaviour was very challenging, but never displayed any transphobic behaviour towards me. He came from an adoption break down the mother also showed no negativity towards me…Our present placement is a 5-year-old boy who has settled into our family extremely well, I would say total acceptance of me. (Andie, trans woman, foster carer and adopter)*

This quote demonstrates that some of the fears around trans adopters and carers causing confusion for a child are un-founded.

It is also positive to report that some prospective adopters and carers hold the belief that they will be able to move forward in the process:

*I do feel like, comfortable, like, you know, like having talked to a few other queer families, that they have been able to adopt as themselves… to get the assurances that they were able to do it, and it was ok… that there’s like, resources out there… a support group (Jamie, non-binary prospective adopter)*

Although these success stories do not sublimate the stories of challenge, doubt and adversity detailed in the sections above in relation to trans peoples’ experiences and beliefs about their ability to adopt or foster, they exemplify some pockets of good practice (Hudson-Sharp, 2018). Further, it is suggested that the positive beliefs of prospective adopters and foster carers in relation to their perceived ability to successfully move forward indicate that there is belief in positive strides being made within social care services to become more inclusive.

**Improvements services can make**

As with Hudson-Sharp’s (2018) previous findings, training was seen to be key:

*In terms of moving forward it’s about social work training courses…* *Yeah, I think it’s just more training, but training with the local authorities who are placing the children. (Melanie, social worker)*

In addition, the recommendation that social workers, families and teachers make use of existing resources (such as ‘*A kids’ guide to gender’)* that can help children understand both their parent’s gender and their own was considered to have potential:

*A picture book that explains gender to kids… there’s a wheel at the back where you can talk about ‘I have a body... there’s girl/boy/neither’… I think there are maybe 12 or 13 different options… then the outside ring is sort of ‘I like’ and there’s loads of different types of clothes… and activities and games… It’s really, really great. And Evie wanted to bring it into school. (Celyn, non-binary adopter)*

Social workers reported that other professionals they had interactions with as part of the adoption or fostering process benefitted from additional information they supplied, particularly where this was in relation to non-binary carers:

*We always attached like an additional bit of information about it, about gender as well… because I don’t think that everybody necessarily knows… what it means and what, in terms of pronouns and things, I think people definitely have more of an awareness of trans than non-binary. (Melanie, social worker)*

In this quote Melanie draws attention to different levels of understanding around gender diversity in that trans as a gender identity is more broadly understood than non-binary identity. This is unsurprising as ‘non-binary’ is a more recent term that has entered the lexicon of gender studies and is emerging in other areas of scholarship and social life (Matsuno and Budge, 2017). Whereas ‘trans’ is more widely recognised and understood having been present in social and cultural discourse for some decades (Stryker and Aizura, 2013).

Open and honest practitioner-led conversations about any concerns that placing authorities have in relation to carers being trans was also reported to be helpful:

*It was really useful to just let them be honest as well around what was concerning them, what were some of the questions, that might be, like from panel and stuff. (Melanie, social worker).*

Several participants recommended that social work agencies listen to trans people with experience of adoption and fostering, explaining that this is key to the improvement of inclusivity and support. An example of this being done comes from a social worker narrative:

*We thought about our training as well, before we put Charlie on the training…* *when I spoke to Charlie, they said training can be very difficult because they’re split into gender divides… In preparation for panel, we thought we needed to train them. So, we got New Family Social to come and do training from New Family Social’s training panel… [regarding previously male/female toilets] We put them down as just ‘toilets’ (Amy, social worker)*

It is argued that greater equality can be achieved by improving collaborative working with people who are trans or non-binary to understand their personal and social situations from a value perspective most relevant to conducting effective assessment, planning, intervention, and review (White, 2018). UK practice guidance may also be utilised by practitioners to assist implementation of the practicalities that promote an inclusive and collaborative approach in fostering and adoption (Brown, Andrew and Adams., 2018).

A more overarching recommendation was also set out:

*The bottom line is that I think social workers do need to be more open-minded, because, at the moment there is, you know, the amount of children far outweighs the amount of adopters. But I think it is a time thing as well, like, I don’t necessarily think social workers are just gonna switch, I think it’s gonna take time. (Melanie, social worker)*

It is, as such, suggested that a greater focus on the importance of gender diversity awareness within social care services is needed to improve the structural competency of social workers in relation to gender.

**7.11 Chapter summary**

Findings from the study suggested that the motivation to adopt or foster can be linked to factors outside of gender such as age, infertility and professional aspirations. However, the narratives included also suggested that the motivation to adopt or foster can be linked to a person’s trans identity too.

The debates laid out within this chapter have identified a common theme, suggesting that analysis through a lens of cisgenderism is expedient in the theorising of adoption and fostering narratives. As with the discussions and theory set out in *Chapters 5 and 6*, cisgenderism is again highlighted as a key feature of the storied lives and lived experiences of the participants included within this study. Indeed, the impact of cisgenderism within adoption and fostering services can be difficult to extricate from the impact of trans peoples’ experiences of cisgenderism within wider society (Riggs, Von Doussa and Power, 2015). Cisgenderism was found to operate at different levels and in different manners within adoption and fostering social care services. Discrimination could take overt and covert forms and could be internalised by trans people.

The following concluding chapter will synthesise the integrated findings and discussion included within the three analysis chapters, relating these to the literature base and making recommendations for practice and future research.

**Chapter 8: Conclusion and recommendations**

**8.1 Introduction**

Within this final chapter, the main research findings are presented as I revisit the four research questions that have directed my project. These are questions are:

1. How do trans people make sense of their experiences of adopting and fostering through narratives of personal identity and family?

2. What barriers and enablers exist for trans people who wish to adopt and foster in England and Wales?

3. Are there qualitative differences between the experiences of different trans and non-binary individuals?

4. What recommendations can be made for adoption and fostering social work staff to promote good practice?

I begin by summarising the findings that were taken from the collection of narratives from trans and non-binary identified participants in relation to personal identity, family, and adoption and fostering processes. Narratives were analysed using a method of multiple readings *(see Chapter 4: Methodology),* which was successful in highlighting the main themes found across the data. I unpack the findings of this research in relation to previous research findings to highlight gaps in the knowledge base and inform the ensuing section suggesting directions for future research.

I then set out the policy and practice implications that these findings could have, focusing on the practical recommendations that can be derived from the research to help adoption and fostering agencies become more trans-inclusive. Next, I locate myself within the research and follow with a discussion of the study’s limitations. I end the chapter with a summary of the conclusions drawn by the research.

Although this study did not seek to establish generalisability to the wider UK population, its findings can indeed be seen as having transferability as the results accessed the experiences of people with lived experience with a range of gender identities, ages and geographical locations. This provided detailed knowledge of the workings of cisgenderism within the processes of adoption and fostering. Overall, the study offers a rich, detailed insight into the specific problems and positive factors that the UK adoption and fostering system currently has and specifies recommendations for practice improvement that result from consultation with participants with direct experience of the system.

**8.2 Summary of findings**

**Trans stigma**

The findings of this thesis add to a burgeoning body of empirical research on contemporary stigma work. In engaging in a process of ‘gazing up’ (Paton, 2018), I was led to question the reasons for stigmatising trans people within society; what does it achieve and who does it benefit? My first thoughts were that the project of stigmatising trans people does not make sense, (while I acknowledge these are sweeping statements, they are used for the purposes of theoretical illustration) who would benefit from keeping a well-educated community of people with open-minded attitudes to parenting from mainstream society? In capitalist terms, trans people could bolster workforces and provide homes for children needing adoption and fostering, who (with a secure family base) may in turn be more likely to contribute to the economy. There may be an element of disablism involved where there are slightly higher incidences of disability and mental illness encountered within trans populations (LGBT Foundation, 2017; Bachman and Gooch, 2018). However, this does not sufficiently account for the level of stigma attached to trans people. Thus, while Link and Phelan’s (2014) concept of stigma power critically engages the two concepts, it is limited in its imagining of power as a force predominantly used by individuals.

Looking up at the forces that shape the emergence of stigma in adoption and fostering contexts is an essential aspect of addressing it (Paton, 2018; Tyler and Slater, 2018). The theoretical framework I employed enabled a fuller understanding of who is propagating trans stigma in relation to adoption and fostering, as well as how and why stigma is enacted in wider considerations of trans personal identity and experiences of family. Further, this framework is taken to compliment Minority Stress Theory (Meyer, 2003a, b) in that it adds wider explanatory power to a theory that explains the impact of cisgenderism at personal, cultural and structural levels (Thompson, 2016). This is relevant for the social work profession as it aims to understand and advocate for stigmatised groups within society.

State-sanctioned stigma is produced by British elites (e.g., politicians, journalists and TV producers), by, for example, reanimating historical images of an undeserving poor to encourage the public to accept austerity cuts (Jensen and Tyler, 2015). When discrimination is enshrined in public institutions, as has been shown to be the case in relation to trans people (Pearce, 2018), discriminatory actions are effectively authorised. Here biopower acts to manage the population by administrative governance of living beings (Foucault, 1979). Thus, stigmatisation is enmeshed in any project of neoliberal governance (Jensen and Tyler, 2015) as actors within that system of governance direct societal views of what constitutes a ‘good family’, positioning cis-headed families as normal and desirable, and trans-headed families as deviant.

Under this analysis of stigma and power then, the cisgenderist project of stigmatising trans people may be attributed to the British elites spearheading neoliberal campaigns through political and media spheres (Jensen and Tyler, 2015). As Tyler and Slater (2018) found in their analysis of UK mental health campaigns, the funding body behind an anti-stigma campaign may be the beneficiary of its proceeds. Care must then be exercised in any anti-stigma campaign for trans people as there is a risk that campaigns claiming to support gender diversity could indeed be propagating it to profit from it. British elites may be crafting an image of trans people as the deviant other to maintain a status quo of gendered roles and power divisions in cites of family (among other aspects of social life).

Society and the academy have incorporated Goffman’s (1963, p.5) view that ‘benevolent social action’ can ameliorate stigma. The focus being on opening up conversations and educating people about a stigmatised condition or educating the stigmatised about how to manage their difference. Indeed, I have argued above that conversations about trans and non-binary identities need to be supported within adoption and fostering agencies. There have been several prior recommendations for further social work training on trans issues (Hudson-Sharp, 2018; Goldberg et al., 2019; Tasker and Gato, 2020). However, as Tyler and Slater’s (2018) conceptualisation of stigma was thus employed to scrutinise where the potential threat from trans people may arise, it became clear that it is the gendered systems upon which society’s patriarchal structures were built that stigmatisers of trans people endeavour to protect. Trans and particularly non-binary trans people threaten to destabilise a society that has been built on a solid foundation of gender inequality.

**Internalised cisgenderism and transphobia**

Several trans participants included within the study detailed how ‘gender rules’ imparted by significant people in their young lives were internalised, supporting prior findings of this occurrence within a domestic violence and social work context (Rogers, 2016). Findings from this study also suggest that internalised transphobia is a problem for some trans people (Bockting et al, 2020). It is recommended that social work practice recognises the processes and impact on internalised cisgenderism and transphobia. Prospective carers may need support to process and move on from internalised transphobia.

Participants’ early experiences of transphobic and cisgenderist attitudes (from parents or other members of their families of origin, as well as from peers and professionals they have been involved with) became integrated into belief systems and carried into adulthood. This embedding of transphobia into individuals’ worldviews shaped their personal identities, family and social relationships. In this way, stigma power acts in a manner that is not simply repressive, rather it produces categories of knowledge on trans identity and regulates the social imagination of and behaviour (of trans and cis people) towards trans people (Beauchamp, 2019). Gender then can be understood not as a pre-determined category into which individuals or bodies as slotted, but as a shifting discursive category.

**Cisgenderism in family life**

Participants recounted multiple stories of how their families of origin (particularly their parents) held and projected onto them their own expectations of how males and females should differently present and behave. The findings suggest that contemporary western society imparts a rigid stereotyped template of gender roles within families, dictating the ways in which the social actors within that family perform maleness and femaleness (Butler, 1999). Furthermore, the study supports prior research showing that trans people contravene master narratives of gender normativity (Bradford et al., 2018), adding that this transgression occurs within personal and family life. The findings further suggest that non-binary identities are demarcated as representing particular transgression of established gender norms within families, thus may present a particular challenge to extant structures of family life.

The role of cis woman as primarily mother and man as provider is maintained, and cultural shifts towards egalitarian sharing of domestic and childcare duties within heterosexual relationships are thwarted (Gabb, 2006). Preventing the destabilisation of gender identities fits with a wider aim to maintain patriarchal structures that reserve wealth, resource and power for the white upper-class man (Komter, 1989). Gendered preconceptions are created that precede behaviour and often remain unchallenged. These affect individual esteem, serving to raise the self- and spousal-evaluated worth of upper-class white men, to the detriment of their wives. The maintenance of such implicit, gendered hierarchies of worth benefits men by giving them invisible power. Any gender subversive thinking presents such a significant threat to this invisible power imbalance that it must be quickly and effectively quashed. Indeed, this study finds that it has in adoption and fostering spheres. Adopters and carers who sit outside binary gender cannot be condoned as non-binary gender represents such a significant threat to patriarchal systems that gender our private, social and family lives.

It is thus recommended that policy and practice aims endeavours to unmask and challenge gender stereotypes that have become embedded within society. In the adoption and fostering context, assumptions that male and female role models are needed within a child’s life should be questioned. Social workers should focus on the ways in which carers can meet a child’s specific needs, rather than imputed gender normative templates of what idealised families look like.

**Cisgenderism in social care**

In support of recent research by Stonewall (Bachman and Gooch, 2018) and the LGBT Foundation (2017), findings from this study suggest that trans and non-binary people face significant challenges every day. Examples of overt discrimination (e.g., misgendering, selecting alternative families) by health and social care agencies have been cited by all trans and non-binary participants, in relation to both themselves and others that they know. Further, there was evidence of identity denial and pressure to conform to gender stereotypes within adoption and fostering services, demonstrating that cisgenderism occurs in these specific practice areas (Ansara and Hegerty, 2014). This finding supports largescale US based findings of cisgenderism in adoption and fostering processes (Goldberg et al., 2019, 2020), as well as the findings offered in relation to two adoption cases in the UK (Bower-Brown and Zadeh, 2021) and several UK based trans people considering different parenting routes (Tasker and Gato, 2020).

Although like Hudson-Sharp’s (2018) review of social care knowledge and views of trans people found, there were pockets of good practice and knowledge that can be cited as positive examples of the profession’s development, but there was also evidence of poor practice. Therefore, this study found that adoption and fostering social work practice is insufficiently trans inclusive. This study showed that the core principles of social work – namely ‘*social justice, human rights, collective responsibility and respect for diversities’* (International Federation of Social Workers, 2014, online) did not consistently underpin the practice of adoption and fostering social work as experienced by the participants. As such, echoing Hudson-Sharp’s (2018) call for better social work education, there needs to be a focus on trans awareness and trans affirmative practice in pre-and post-qualifying programmes.

The social work staff interviewed for this research gave numerous examples of direct discrimination shown by adoption and fostering social work staff across a range of different agencies. When people whose gender identities do not conform to normative expectations (e.g., non-binary identity), they were considered as ‘other’ by social work staff (Sue, 2010). This research begins to fill the gap in the research base focusing on the specific needs of non-binary people (Valentine, 2016). It supports wider findings that show non-binary people do experience specific detriment (Matsuno and Budge, 2017; Valentine, 2016), contributing the finding that this phenomenon occurs in UK adoption and fostering services. Social workers should be particularly aware of enhancing their understanding of non-binary identities to include them within adoption and fostering processes.

**Transgressing gender norms**

In specific relation to those who wish to adopt or foster, embedded cisgenderist views held by social workers can be problematic for trans and non-binary people who do not necessarily fit within the established gender stereotypes. This study found that there were some qualitative differences between the experiences of different trans and non-binary individuals. Participants expressed beliefs and recounted experiences that suggested there is a specific detriment experienced by non-binary people whereby normative trans identities and privileged and others subjugated. This finding offers support to Bradford and Syed’s (2019) argument that those with transnormative presentations are more likely to feel included within social life. Those who ‘pass’ are seen as acceptable parent figures as they maintain societal binary gender structures. Whereas those whose identities transgress gender norms present a threat to social order.

This gatekeeping that occurs within adoption and fostering services is an example of stigma power. Stigma power is deployed via hidden forces (e.g., unconscious bias) that suppress gender diverse identities (Link and Phelan, 2014). Stigma then acts as both a productive and constitutive force that enables power to function, dictating who is regarded a suitable adopter/care and who is not. This research supports prior findings in relation to sexual minority adopters/carers). These findings suggest a similar process of gatekeeping that previously restricted gay and lesbian adopters/carers (Hall, 2010; Hicks, 2000) is now restricting trans applicants. Further, the findings together implicate that adoption and fostering services could be sites that demonstrate a notable impact of stigma power. Where mental health, substance misuse, housing and finance issues have arisen due to stress related to minority identities, these should be considered in the context of the impact that cisgenderism and transphobia can have on a person’s life.

**The impact of infertility**

As set out in *Chapter 7,* a number of participants reported that infertility was a reason they considered adoption. Previous research found links between infertility and an increased likelihood of pursuing adoption (Hollingsworth, 2008) and between trans and wishing to adopt/foster or pursue fertility preservation options (Riggs, Power and Von Doussa, 2016). This study’s findings therefore support both prior findings and add that trans people who experience fertility problems may be especially likely to consider adoption. Indeed, there has been a useful examination of the idea that a pronatalist logic may be used in the debate on trans reproduction that frames genetic reproduction as the only form of family production that is valued (Riggs, 2020).

The present study supports Riggs’ (2020) assertion that professionals must advocate for alternative pathways to parenting children and adds to analysis of the political context of trans families. Findings suggest that trans people may be well suited to adoptive and fostering roles as they have already decentred their normative views on family, sometimes considering adoption and fostering as positive first choice to starting or growing their families. Where infertility issues present, this decentring may also be present where participants did not have established normative views of family embedded into their expectations and imaginings of family life.

**Social support**

Riggs and Treharne (2016) may argue here that a reduction in connectedness and support from friends could lead to a higher chance of decompensation in the face of cisgenderism and as such higher levels of mental health problems. However, the decompensation model would need applying to UK data to establish whether the same links are found between cisgenderism and the aggravating/protective factors existing for Australian populations. Further research to extricate the potentially variable effects of responses from different members of a person’s community would also be useful, as it may be for example that support from partners, families, institutions, employers and strangers encountered ameliorates the mental health impact of a waning support from friends.

Social workers should seek to buddy adopters and carers with other trans carers if possible, and where a buddy is unavailable, they should refer trans carers to New Family Social for peer support. Social workers should be mindful that a trans person’s support network may appear sparse in comparison to a cisgender person’s network or may lack family ties as defined by blood or law. The nature and quality of each relationship should be assessed on its own merits to establish that a carer’s network will provide the emotional and practical support that the role requires.

**Resistance**

Trans people exercised agency and control in the face of binary discourses of gender normativity by putting forward counter-narratives that sought to resist these and offer new ways of thinking about gender. Participants argued that gender should not be the primary factor to organise adoption and fostering services, rather, a person’s ability to care for a child who has experienced abuse should be primary. Trans people emphasised their strength, resilience, capability and optimism. New ways of parenting can expand the hegemonic gender binary (Bradford et al., 2018).

Modes of resistance are created and operationalised where new objects are mentioned, and their relations of similarity difference spoken about. These challenge normative thoughts, discourses and social presentations, acting to exert resistance against assimilation and to give voice to new social ways of being. The complex relations begin to emerge as a new discourse. Existing powerful and dominant discourses seek to hinder the development of new counter-discourses, but as the complexity of object relations within them are explored, counter-discourses can gain strength and traction (Foucault, 1969). Participant narratives demonstrated that trans people can offer an experience of parenting that is not dictated by rigid binary structures. As such, trans identities priorly positioned at the bottom of a hierarchy of gender and sexual identities can be reimagined as offering quality adoption and fostering placements (Serano, 2016).

**Strengths of trans carers and adopters**

The DfE (2018, p.42) has stated it requires the carer population to be ‘*diverse and enough trained carers to meet the needs of all children.’* This will include trans children as it is likely that increased numbers of trans or gender questioning children will need social service support in the near future (Austin, 2018). Indeed, this study supports prior research (e.g., McNeilly, 2019) in finding that trans carers are particularly well placed to understand and meet the specific needs of trans youth. They are in a unique position to offer a gender questioning young person support, drawing on their own experiences to guide them. It must be noted that participants in this study were not seeking only to care for trans children, neither was it be implied that cisgender carers are incapable of supporting trans children. However, as this study and prior research has found cisgenderism can have a complex and wide-reaching impact on trans people’s family lives and identities, it is likely that a trans person would be better placed to provide support to a trans youth than a cisgender counterpart (Bower-Brown and Zadeh, 2021; Tasker and Gato, 2020; Goldberg et al., 2020).

While Goldberg et al.’s (2020) largescale US study found that trans people are significantly more likely to consider adopting or fostering ‘harder to place children’ (e.g., older, family history or mental health, severe abuse), the findings of the present study were mixed. Some participants wished to adopt or foster babies, some considered ‘harder to place’ children. As these children are likely to experience some of the same exclusion and feelings of not belonging that trans people have, trans carers/adopters may be more open to caring for them as they are able to empathise with their experiences of marginalisation.

Evidence of gender role modelling and lack of gender confusion supporting lesbian and gay- headed households (Freedman, Tasker and di Ceglie, 2002; Green, 1998; Tasker, 2010) was not directly explored by this study in relation to trans people. However, Celyn’s account of the thought they gave to clearly explaining their gender, using resources to support them, offers a tentative finding that appropriate gender role modelling was given to aid a child to understand their parent’s trans identity. A reading of the data using a gender critical feminist framework may lead to an unsound conclusion that Celyn’s trans identity influenced their child Evie’s exploration of their own gender identity. However, Celyn was matched with Evie (in part) *because* of Celyn’s capability to support a gender questioning young person with an exploration of their gender identity.

The findings of this study support Stonewall’s (2017a, 2017b) assertion that there are many societal systems (e.g., education, NHS, government, family) that categorise children’s appearance and behaviour by whether they were assigned male or female at birth. As detailed by participants within this study, children are given gendered toys, clothes and roles throughout their childhood and this stereotyping leads them to believe there is a certain way that they should be. When children do not conform to traditional gender stereotypes, feelings of uncertainty and shame can arise. Trans people have direct experience of these processes, thus, can offer families in which gender norms have already been decentred (McNeilly, 2019), which could enable them to offer affirmative care that does not result in shame.

This study builds upon the research base into lesbian and gay parenting, to offer support for Short et al.’s (2007) argument that it is not the structure of families (e.g., gender, sexuality or co-habitation status) that determines good outcomes for children, rather, it is the family processes such as the quality of interactions and relationships, that positively impacts on children’s wellbeing. The data included within this study regarding interactions with children is limited, with only two people reporting on their adoptions and foster care placements. However, these were reported to be successful in that disruptions had not occurred, and the parents intended placements to be permanent. Although longevity of placement cannot be inferred due to the ‘snapshot’ nature of the one-off interviews and it could indeed be that respondents with success stories were more likely to want to share their experience, skewing the study. This study highlighted that a potential strength trans adopters and carers have is a willingness to engage in relevant training, a finding reflected in recent US research into trans adoption and fostering Goldberg et al. (2020).

**8. 3 The research base: gaps and future directions**

**Alternative family pathways**

Although this research was situated within the UK and its policy and legislative contexts, its findings have wider application in both geographical and field terms. The findings may be used to guide social work practice in other Western countries that make similar use of adoption and fostering as methods of providing substitute care for children who cannot live with birth families.

This study supports Riggs’ (2020) argument for alternative family pathways as well as fertility preservation, by suggesting that it could be useful to advocate for a trans people who wish to adopt or foster because they have experienced infertility. Although this may be a small population of people, their experiences and perspectives could be especially important to study as this group have experienced the compounding stress of cisgenderism as well as feelings of inadequacy imparted by pronatalist ideologies. Further research to explore this would be of value to adoption and fostering social workers, as well as other social care or mental health practitioners (such as counsellors) to gain a greater understanding of the complexity of perceptions of loss in relation to infertility (Kubler-Ross and Kessler, 2005).

The research findings contribute to a wider debate on the ways in which the nuclear family, as headed by two cisgender, heterosexual parents, is still prioritised in law as the default model in developed countries such as Australia (Parashar and Dominello, 2017). It is however made transparent that this thesis adopted a Eurocentric perspective (Hobson, 2012), and that future research focusing on cisgenderism within adoption and fostering practice in settings outside of the West could produce markedly different findings.

**Developing the research base on trans adoption and foster care**

Upon concluding my doctoral research, I have reflected upon how I now view both my methodology and theoretical perspective. I believe a narrative inquiry was an appropriate way of co-constructing stories of the participants’ lived experiences. However, if I were to address my research questions with a study that was supported by greater financial and human resource, I would recruit a research team that included trans people and ideally a trans adopters or foster carer. Everything from the design of the research through recruitment, interview and analysis was driven by my perspective as a cisgender person who has lived a life of cisgender privilege, sheltered from the multi-layered influence that cisgenderism has on trans people’s lives. If the research was co-designed with people with lived experience everything from the questions set to the methods employed could have been designed to maximise the study’s recruitment potential. Indeed, I believe that a notable limitation of my research was the difficulties that I had in recruiting participants. There may be a number of trans carers with experiences that they would not feel comfortable sharing with a cisgender researcher who lacks lived experience of the specific challenges that trans people often face. Including trans people in the research team may help address challenges in accessing a greater pool of trans people who may have experience of adoption and fostering in the UK.

Increased access to the population of potential participants may have led to a richer understanding of people’s experiences and also added intersectional insight. The absence BAME trans carers’ perspectives within this study was a particular limitation that may be improved in future research by including a BAME trans person within the research team. The participant group was also overwhelmingly comprised of well-educated people who largely appeared able to express their viewpoints readily through verbal or written narrative material. Different perspectives may have been incorporated by allowing participants to submit visual or other multimedia information that expresses perspectives and emotion through alternative mediums.

Intersectionality can help us understand where an individual’s position within various binary categories can place them in relation to power and privilege (Twist et al., 2010). Binary thinking itself is arguably a key aspect of oppression, as enables the privileging of one side of a binary over others, strengthening the impact of marginalisation (Hooks, 2014; Hill Collins and Bilge, 2016). Richards, Bouman and Barker (2017) highlight the need for any moves towards legal recognition for non-binary people to be accompanied by an increase in education, cultural awareness and protections from harassment and discrimination.

**Recognising non-binary identity in social work practice**

Over the past few years, trans issues and rights have gained more focus and attention in the media, which can serve to offer a platform for silenced voices to speak. Stonewall’s (2017a) ‘Vision for change’ for trans people argues for changes to be made to ensure that service provision is offered in an inclusive way, stressing the importance of positive role models for trans people. However, this study’s findings suggest that adoption and fostering services may be mirroring trends in mainstream media, whereby increased rights and support are given to some trans communities while other communities remain marginalised. Indeed, this study adds to a growing body of research suggesting that non-binary people in the UK do experience specific detriment (Matsuno and Budge, 2017; Valentine, 2016) and this study contributes to this knowledge finding that non-binary people experience such detriment in UK adoption and fostering contexts.

Trans and non-binary participants felt that gender-inclusive pronouns and labels could be added into existing adoption and fostering documentation. This supports campaigns such as those by Stonewall (2017b), suggesting that a sensible, common-sense approach can be used to make documentation and processes inclusive with relative ease. However, such campaigns only attend to overt cisgenderist views in social work can be overt (e.g., misgendering). This study found evidence to suggest that cisgenderism can operate covertly, whether hidden or unconscious. Covert discrimination can be more pervasive (Ely, 1995) and there exists no direction in the Equality Act 2010 or Gender Recognition Act 2004 regarding how hidden discrimination or unconscious bias in relation to trans and particularly non-binary people can be addressed.

While this study found evidence suggesting that non-binary people experience specific detriment due to lack of understanding of their identities, the data relating to research question 3 will benefit from further research to specifically attend to the differences trans and non-binary people experience in adoption and fostering.

**Children’s experiences of trans-headed adoptive and foster families**

The research knowledge could be further developed by including the views and perspectives of children living within trans-headed adoptive and foster families. It is acknowledged that due to the novelty of this research area, the inclusion of children’s voices may be impracticable to date due to recruitment and sampling difficulties. However, as more UK trans people become adopters and foster carers, it would be useful to compare the experiences both they and their children have to the experiences of cis-headed adoptive and foster families. Although there has been a recent flurry of publications exploring trans adoption (Bower-Brown and Zadeh, 2021; Tasker and Gato, 2020), as well as fostering (Goldberg et al., 2019, 2020) the knowledge base on the impacts of cisgenderism on potential adoptive parents or foster carers is in its infancy.

It would be useful for future research to further examine this study’s findings to establish whether trans adopters and foster carers provide better placements that more fully meet the needs of trans youth. Currently, longitudinal research exploring trans-headed adoptive or foster families is absent, yet longer-term studies could offer useful insights into parents’ experiences and children’s development trajectories and wellbeing. Findings of this research would add to the small but existing body of work which examines gay and heterosexual-headed families to establish if similar findings, showing no disadvantage, result (see, for example, Golombok et al., 2014).

**8.4 Recommendations for policy and practice**

**Significance and application of the research**

The findings of this research have specific relevance to social work practice, which impacts upon the family lives of both trans carers and children. The findings also add to a wider knowledge base exploring the sociology of trans lives, as such will be of interest to advocates for gender equality. The findings of the study will be shared widely (see section 8.5) to enable trans rights advocates within social work and wider fields to explain and evidence the way cisgenderism can operate within adoption and fostering in the UK. The findings can be used at individual and organisational levels to enable social workers and teams to better understand and reflect upon the unconscious processes that may lead to trans people being disadvantaged by services. Practical recommendations can also be used to stimulate changes to make service provision more inclusive of gender diversity.

However, a key difficulty related to the application of the study’s findings has been uncovered throughout the doctoral process; research evidence may only be sourced and utilised by workers and teams who are already willing to promote gender inclusivity. To be receptive to findings that show embedded cisgender norms are affecting the way trans carers are regarded and treated by services, a worker or team must be receptive to having their own personal and professional gender norms decentred. The most entrenched examples of cisgenderist practice are likely to occur in workers and teams that lack any awareness of this occurrence. The challenge in disseminating results with a view to enabling practice change is thus similar to that found by previous UK-based social work researchers such as Steve Hicks and Kate Wood. Although findings can be disseminated through a range of media to increase visibility and accessibility, the audience viewing the material must be receptive to its contents for impact to be produced.

The findings then can be conceptualised as occupying a socio-cultural space of tension between waves of trans rights research and media and competing waves of trans-exclusionary or trans-ignorant research and media. It is anticipated that the findings of this and other trans inclusive social work research may follow a similar trajectory to that which Steve Hicks’ work has moved in; a gradual practice change trajectory that gains momentum as wider culture, law and policy also change. Therefore, the findings have immediate relevance to those receptive to implement some changes now and add to a burgeoning wider conversation and contributing to process of practice change that is rooted in cultural change. Embedded cultural norms in such societally regulated sites as the family can be slow to change, thus research in this area likewise contributes to gradual as opposed to reactive practice change. This may occur over a period of 10-20 years as norms in adoption and fostering practice change contingently with wider sociological notions of family.

It is acknowledged that this study was exploratory in aim and did not seek to establish generalisable findings. The following recommendations are based on the in-depth analysis of the interview narratives, drawing on multiple theoretical lenses, and extant empirical data in this area.

**Greater openness in policy could meet contemporary need**

As detailed in *Chapter 1: Introduction*, there is an unmet need whereby more adopters and foster carers are needed to provide homes for children who have experienced trauma and abuse, who are older and need ongoing contact with birth family (Baginsky, Gorin and Sands, 2017; CoramBAAF, 2020; Featherstone, Gupta and Mills, 2018; Narey and Owers, 2018; OFSTED, 2021). Although it is too early to gauge the full impact of the coronavirus pandemic on social work practice, early indications suggest that more children are experiencing abuse and neglect and are vulnerable (BASW, 2021). As such, it can be predicted that there will be an even greater need for foster carers and adopters within the UK following the pandemic. Further, research indicates that the pandemic has increased problems for LGBTQ+ people accessing an already prohibitive fertility process (Harvey and Inghraham, 2021).

This research as such recommends that social work policy and practice adopts an approach characterised by a greater openness to considering trans carers and adopters. Local policy guidance should be issued within local authorities guiding social workers to speak to potential trans carers and adopters about what they could offer a child. A greater openness to trans adopters and carers within social care agencies could simultaneously meet the needs of an increasing population of children and contribute to addressing social injustice that prevents trans parents from starting or growing their families (Riggs and Bartholomaeus, 2018).

**Training for social work staff**

The findings of this research suggest that training offered to social workers should be aimed at increasing awareness and understanding of gender diversity including non-binary identities. General awareness training as suggested by Hudson-Sharp (2018) would be beneficial to social care professionals, however, in order to work towards full inclusivity, there needs to be a specific, focused effort to support social workers and associated staff to understand non-binary gender identities. Specific understanding of non-binary people’s identities is essential to limit the strength of hierarchies of gender (Serano, 2016) and potential for non-binary adopters and foster carers to be regarded as ‘other’ (Sue, 2010).

It is hoped that such training will help individual social workers or teams to make practice improvements and empower prospective carers to navigate the process to become approved adopters or carers. Indeed, the importance of individual and organisational development work to promote more nuanced understandings about gender diversity and inclusive practices should not be diminished. Hafford-Letchfield et al. (2021) discussed the option of adopting specialist models of social work practice where services identify champions/coordinators who are trained to act as advisors and advocates for trans families. could be most useful for assessing trans and non-binary carers. Indeed, as this study’s findings exemplify, individual and team practice improvements can contribute to successful adoption and fostering placements for children, and a fulfilling family life for trans adults.

As the social work profession states in its standards the requirement to make effective use of service user feedback (Social Work England, 2020, Standards 1 and 2), it is argued that this section is of notable significance to those employed within adoption and fostering services. Allowing applicants to map their family and support networks in a way that they feel best represents them, while engaging in discussion with their social worker, could promote affirmation and understanding rather than upholding gender-and heteronormative notions of family (Swainson and Tasker, 2008). Though the research is exploratory in nature, it offers rich insight that may be of use to wider policy makers such as the DfE (Cromarty, 2018). Incorporating the views of those with lived experience into service design, implementation and review, as well as into everyday practice, is key to quality social work practice (IFSW, 2014; Social Work England, 2020).

However, this study echoes Hudson-Sharp’s (2018) findings that there is a need for social work practice to be developed on a wider scale. Pockets of good practice in relation to supporting trans people within child and family social work is unacceptable for a profession that states its international definition centres on empowerment, social justice, promotion of human rights and respect for diversity (IFSW, 2014). Neither is a contravening of key principles acceptable for social work at a national level. Failing to support trans rights clearly flouts the first professional standard set out by Social Work England (2020, Standard 1) assert that social workers should *‘promote the rights, strengths and wellbeing of people, families and communities*.’ Specifically, they should:

*‘1.5 Recognise differences across diverse communities and challenge the impact of disadvantage and discrimination on people and their families and communities.*

*1.6 Promote social justice, helping to confront and resolve issues of inequality and inclusion’.*

Social Work England (2020) directs that qualifying and post-qualifying education and training should ensure that the skills and attributes contained with its Professional Standards are developed and maintained by all registered social workers. However, although Social Work England (2020) align with the principles of the Equality Act 2010, this thesis has demonstrated that trans and non-binary people are not always afforded the protections the act provides for them in real life contexts. As this research has found, adoption and fostering are included in these contexts.

As the body responsible for governing UK child and family social work policy, it is recommended that the Department for Education (children and families) considers how it can better promote gender-inclusive practice on a national scale. It is acknowledged that a larger scale research project is needed to canvas the views of a much higher proportion of the trans and non-binary people and social workers involved in adoption and fostering in the UK. Thus, I argue that the findings from this research project offer the rich insights needed to justify the commissioning of a large-scale research project that aims to make recommendations for policy and legislative reform for UK adoption and fostering.

**Structural competence for social workers**

There is a lack of guidance in how to address individual and structural discrimination in relation to gender diversity with adoption and fostering fields. Although practical changes to documentation can make non-binary people feel included at a micro level, when gender norms are embedded within society this can result in a dominant discourse of cisgenderism (Foucault, 1972, 1979). This study’s findings suggest a need for increased structural competence for adoption and fostering social work staff. Indeed, it can be argued that social work service providers have a duty to promote social justice and wellbeing (IFFSW, 2014). This is not only achieved through the provision of interventions but also the way in which trans people are represented and dealt with by staff. Misgendering, lack of understanding and underrepresentation have all been found by this research and can all cause distress for trans people accessing services, particularly for non-binary people (Valentine, 2016).

Hafford-Letchfield et al. (2021) set out that *‘any initiatives to improve practice will need to recognize the challenges of cultural and political climate for change given the absence of a coherent government framework for supporting TNB inclusion reflected in legislation, policy, monitoring and development of progressive measures to promote TNB rights in the UK.*’ (p11).

However, that is not to say that the introduction of a coherent government framework is in itself sufficient for meaningful, enduring change to become embedded within social work practice. Indeed, Foucault (1996) argues that the idea of implementing programmes to build new ways of relating is dangerous because *‘as soon as a program is presented, it becomes a law and there’s a prohibition against inventing’* (p. 312). A multi-sectorial perspective, comprising economic, political and cultural analysis, is more likely to yield the desired benefits in each respective domain as it incorporates a more in-depth understanding of the complex influences of power and resistance (Wilson, 2009).

While the findings and recommendations discussed above may be of use to individuals and agencies actively seeking to improve their gender inclusivity, this activism depends on individuals/groups having already decentred their normative expectations of gender (McNeilly, 2019). Where gender subversive approaches are not yet germinating, there is unlikely to be receptivity to anything more than a superficial change such as the acceptance of gender-neutral pronouns (Airton, 2018). Such an example of politically neutral policy change that requires only extra not excessive effort may indeed be easily and readily adopted. However, Airton (2018) argues that although a willingness to make a small change may make a big impact to the way non-binary people experience an adoption or fostering service, they would not necessarily reflect any deeper acceptance and understanding by staff.

Shelton, Kroehle and Andia (2019) argue that to enable social work students to develop skills in challenging oppression, they must be taught to understand the ideological origins and systematic oppression of groups such as trans people. Shelton, Kroehle and Andia (2019) propose addressing issues of bias with a shift in which cultural competence is broadened to structural competence. Here. the safe space associated with the social work classroom is reconceptualised as a brave space in which challenge of status quo is promoted. Indeed, social workers should have a role in the disruption of cisgenderism and a dismantling of harmful gender binaries, as well as multiple axes of oppression that intersect. Where trans voices have been silenced, a process of effective change would aim to understand the potential impact of oppression (Thyer, 2003) and bring issues of covert discrimination into the open (Ely, 1995). However, Hodge (2003) argues that where a difference in worldview and power exists, bias will result and act to subordinate the minority view.

In ‘gazing up’ (Paton, 2018), a sole focus on awareness of trans identities could neglect to address the structural and political functions of stigma as a form of power. It is therefore important to question whether awareness training leading to small changes such as changing pronouns on forms would be sufficient to enact the change needed to recruit, assess, match and support non-binary adopters/carers. Ghidina’s (2019) study showed that sociology students were less likely to engage in victim blaming, othering and dehumanizing processes in relation to an individual when they watched video clips of the effect on that person and participated in group discussion of the case afterwards. It was theorised that this increased students’ understanding of how social forces impact upon individuals, thus increasing their structural awareness. Such exercises could be integrated into social work curricula with the aim of developing understanding of the sociological imagination in relation to trans people.

**Summary of recommendations**

To summarise the recommendations that this study’s findings offer to adoption and fostering services (*Research question 4*), the following practice improvements points are suggested:

1. Provide training for all social care staff that develops a greater awareness and appreciation of trans and non-binary identities. This should include specific focus on the potential impact of unconscious bias at an individual level, while also linking to macro factors of the ways in which the socio-political backdrop of the society within which social work operates affects cultural and personal views. Thus, it should develop social workers’ structural competence.

2. Social workers should be supported to keep abreast of current research and terminology relating to gender. Local policy should attend to both staff development in gender inclusivity and provide guidance relating to how the organisation’s staff will interact with and support trans and non-binary people. This should include detail that staff and systems recordings should ask individuals their pronoun and titles and remember to use them (apologising and correcting themselves where any mistakes are made). Replacing drop-down boxes with free text boxes could enable individuals to represent their genders and pronouns accurately. Asking carer/adopter pronouns (or including a space for them to be recorded in name labels) routinely throughout interactions in assessment, matching and support could also support accurate self-representation. In this way, who are genderfluid could be enabled to give information about titles, names and pronouns contemporaneously.

3. Adoption and fostering agencies should consult with trans and non-binary people about what can make their services more trans-inclusive. While it should not be assumed that one trans or non-binary person can represent other trans or non-binary people, consultants with professional experience in equality and diversity along with lived experience of gender diversity may be well equipped to suggest changes that encompass inclusive policy for a range of identities. It should further be noted that intersectional experiences related to for example being trans and disabled or BAME should be included in consultations regarding service improvements.

4. Agencies should review and adapt all forms, resources and letter/email templates to include gender neutral language, definitions and titles (inclusive language can avoid nouns that are gender-specific or make use of non-binary pronouns as well as male/female pronouns). It is highlighted that trans and non-binary people experience multiple barriers throughout their interactions with services that demonstrate the extent to which social work processes and procedures reflect binarily gendered systems embedded within society. As such, review of each aspect of recruitment, assessment, matching and support processes would be needed to identify and challenge barriers for trans carers.

5. Agencies should visibly show they value the T in LGBTQ+. Visibility may take a more generic form as services begin the process of increasing inclusivity (e.g., with trans-inclusive imagery and recruitment materials specifying trans adopters/carers are welcome), however real-life accounts and photos could be useful to encourage more trans carers to approach agencies (when experienced trans carers are able to offer these).

6. As more trans carers become adopters and foster carers it would be useful to include case studies detailing (anonymously as needed) lived experiences and perspectives of trans-headed adoptive and foster families. These could be used to encourage recruitment of trans carers and to inform how support services may better meet the needs of trans carers. Resources giving detail about the workings and successes of trans-headed families could serve both applicants and social workers seeking good homes for children.

**8.5 Dissemination of findings and research impact**

Early findings from this research were shared at a Joint University Council ‘Social Work at the Margins’ conference in 2019 and a Trans Pregnancy Conference in 2020. From the latter, early findings from *Chapter 8: Adoption and fostering* narratives were published in the ‘International Journal for Trans Health’ (Brown, 2021). I made use of the secondary research I conducted for my narrative literature review and the writing of this thesis to co-author a CoramBAAF Practice note (Brown, Andrew and Adams, 2018) and a journal article in ‘Child and Family Social Work’ that serves as a conceptual discussion piece (Brown and Rogers, 2020).

In addition to formal publications, the work undertaken throughout the course of my PhD has informed developmental work I have engaged in across adoption, fostering and educational contexts. I have joined the LGBTQ+ youth in care network to share good practice amongst social care agencies and have delivered specialist training on supporting LGBTQ+ carers and young people to staff and carers at independent fostering agencies across the North East and West, Yorkshire and Lincolnshire. I hope to produce further publications as journal articles and book chapters upon completion of this doctorate, for which I am in the process of applying for funding to support. I aim to disseminate the findings of my research via accessible practice guides and a series of interactive workshops for trans prospective carers and adopters, as well as the adoption and fostering workforce via my CoramBAAF contact.

I will explore multimedia options for dissemination to try and reach potential trans carers and adopters as well as current and training social workers. Options include commissioning a short film or animation detailing the challenges and unique strengths that trans and non-binary people could offer as adopters/foster carers. This, along with an executive summary of the research findings could be shared with social work teams across the UK. Posters, infographics for social media and pride events could engage with the public on a broader level. Through partnering with the LGBTQ youth in care network, it is hoped that core findings relating to barriers and ways in which carers and social workers can challenge them can be shared with a high proportion of adoption and fostering organisations.

The impacts and outcomes of dissemination activity vary. Short-term immediate change could be achieved by social workers and/or carers reading publications or attending events such as conferences I spoke at. In furthering personal understanding of the workings of cisgenderism in adoption and fostering services, staff and carers may feel better equipped to highlight potential issues within processes that could act as barriers for trans carers. However, as discussed, it is likely that embedded cisgenderism is difficult to identify and challenge. Medium-long-term outcomes may then result from social workers and potential carers coming together through future research to develop the knowledge and practice-based conversation about practice improvement. Therefore, this thesis aims to contribute to a long-term aim of growing a robust knowledge base that can be used to argue for national policy and law to make change and produce guidance to more explicitly include trans and non-binary carers and adopters.

**8.8 Chapter summary**

The project’s research objectives have been addressed throughout discussion in this chapter. The research has contributed towards the knowledge base on how trans people make sense of their experiences of family, unpacking the impact that cisgenderism has within family life. It has examined the barriers that trans people face in trying to access adoption and fostering services to apply to adopt/foster. Barriers appear greater for those who do not fit within binary gender norms, as such it is put forward that specific attention should be given to how agencies can adapt their processes, procedures and modes of communication to be inclusive of trans people. Several specific practice-based recommendations were set out that I argue would involve extra but not excessive effort to adopt (Airton, 2018). However, it is also argued that alterations to processes and procedures are insufficient to promote the true understanding and acceptance of trans identities. A new culture must be embedded that promotes understanding, acceptance and appreciation of people who identify outside of the binary gender norms within adoption and fostering social work.

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**Appendix 1: Glossary of terms**

*This glossary of terms includes necessarily simplified working definitions that are based on information from a range of texts.*

AFAB/FAAB: Assigned female at birth/Female assigned at birth.

AMAB/MAAB: Assigned male at birth/Male assigned at birth.

Assigned sex at birth: when a baby is born within the UK, a doctor usually decides based on the baby’s external genitals that the baby is a boy or a girl (though this may not be the case if a baby is born with visible characteristics of being intersex).

Androgynous: a person who may appear as gender neutral and exhibit traits traditionally associated as both feminine and masculine, or as neither feminine nor masculine, or as in between feminine and masculine.

Asexual (also abbreviated to Ace): a person who does not experience sexual attraction to others.

Bisexual: a person who is attracted to more than one gender.

Butch/femme: descriptors relating to the extent a person is masculine or feminine.

Cisgender (abbreviated as cis): describes a person whose experience of gender identity aligns with the descriptor that was assigned to them at birth. Cisgender is the word used to describe anyone who is not transgender.

Cisgenderism: the view that identities that differ from the gender ascribed to a person at birth and defined by social conventions are less valid than cisgender identities.

Cissexism: a set of normative views that assume everyone identifies with the sex assigned to them and birth and enforces binary gender ideas within society.

Crossdresser: a person who sometimes wears clothing/make-up/accessories that are not traditionally associated with the sex they were assigned at birth (transvestite is an alternative term).

FTM/MTF or ftm/mtf (abbreviated from female-to-male, and vice versa): transsexual man or woman.

Gay: this term can be used for a man attracted to other men but can also be used for a woman who is attracted to other women.

Gender: in UK society usually referring to the state of being a man, woman or non-binary (plus a multiplicity of further subcategorised identities). The term ‘gender’ is often used within society in relation to others’ perceptions of a person, however, on the basis that it is not possible to determine someone’s gender by their physical presentation it follows that gender should only be self-perceived and designated.

Gender binary: the gender binary model classifies all people into one of two genders; woman or man.

Gender dysphoria: a word used to describe the discomfort or distress caused by some aspect of their gender experience. This can relate to the body (e.g., distress at having a penis, facial or body hair) or it could be social dysphoria (e.g., when assumptions are made and binarily gendered language is used to refer to a non-binary person).

Gender diverse: a term that can be used to describe anyone who is not cisgender.

Gender expression: describes all the external aspects of how a person displays their gender; it can be demonstrated through the ways that a person acts, dresses, behaves and interacts in the world.

Gender fluid: a person whose experience of gender is not static, rather they feel they have different gender identities at different times.

Gender identity: the self-perception of belonging to a binary masculine or feminine gender category, or to a transgender category.

Gender neutral pronoun: a pronoun that is not associated with a particular gender.

Gender neutral language: inclusive language that avoids nouns that are gender specific.

Gender non-conforming: may be used to describe a person whose gender does not conform to the man/woman binary.

Gender normativity: relates to the social construction of a binary man/woman gender categorisation as ‘normal’ and positioning of any divergence from this as anomalous.

Gender questioning: where a person is processing or exploring how best to express their gender identity.

Gender reassignment: is the language used by the Equality Act 2010 to refer to a process of transition to live in a different gender (irrespective of whether any hormone or surgical treatment is undertaken). ‘Gender confirmation’ is an often-preferred terminology used to refer to the process of transition a person may undertake to confirm their internal sense of gender identity via changes to their external presentation.

Gender role: often refers to society’s concept of how ‘women’ and ‘men’ are expected to act and behave on the basis of their assigned sex. Used to describe a range of forms of self-expression (e.g. mannerisms, clothing style, activities undertaken) that are usually understood to convey membership of a binary gender or transgender category. It should be noted however that a transgender role may combine a wide range of modes of self-expression that cannot be homogenised in the way that stereotypical binary masculine or feminine behaviours may be grouped.

Heteronormativity: refers to the assumption of heterosexuality as the ‘norm’ and homosexuality as deviant.

Heterosexism: describes the privileging of heterosexual identities and norms and the diminishing of homosexual identities, including the failure to accept that sexuality can be fluid or context dependent.

Intersex: an umbrella term used for a person born with both male and female sex organs or other sexual characteristics.

Lesbian: a woman who is attracted to other women.

LGBTQ+: an initialism that stands for lesbian, gay, bisexual and transgender.

LGBTQ++: this term is used to be more inclusive than LGBTQ+ and to encompass a spectrum of sexuality and gender, including people who identify using other terms such as queer, questioning, asexual, and intersex.

Misgender/misgendering: when incorrect assumptions are made about a person’s gender or there is a refusal to accept it.

Non-binary: understanding gender in a way that is not exclusively about men and women. A non-binary person is someone who identifies as having a gender which is in-between or beyond the two categories ‘man’ and ‘woman’, that fluctuates between ‘man’ and ‘woman’, or they have no gender (either permanently or some of the time).

Other terms that fall under the non-binary umbrella include (but are not limited to) a-gender, androgyne, ambiguous, androgyne, bi-gender, dynamically gendered, genderless, gender fluid, gender neutral, gender outlaw, gender queer, gender terrorist, hermaphrodyke, intergendered, intersex by design, intentional mutation, neutrois, neutral-gender, neither male or female, nonbiological intersexed, null-gender, pan-gender, poly-gender, omni-gender, third gender, queer trannie boy, shemale, in-between and beyond.

Pansexual: a person who experiences attraction to others that is not limited or directed by gender.

Passing: this term refers to being read as a certain gender, usually the gender with which you identify e.g., a trans man is read as a man. It can however also involve avoiding having to out yourself e.g., a non-binary person may try and pass as either a man or woman.

Pronouns: units of language that are used to refer to someone in a gendered manner. The most used pronouns are ‘she/her/hers’ for women and ‘he/him/his’ for men. Gender neutral pronouns such as the singular ‘they/them/theirs’ or ‘ze/hir/hirs’ are often used by non-binary people. It should be noted that is not always possible to denote someone’s gender identity by the pronouns they use.

Queer or genderqueer: a person whose gender does not fit within the confines of ‘man/woman’

Sex: a term usually used for ‘biological sex’: a state of biological variables that can be described as male-typical, female-typical or intersex. Sex is usually determined at birth, based on medical observation of your genitals. However, chromosomes, hormones, genes and internal sex organs also contribute to the makeup of your biological sex.

Sexuality: a person’s sexual preference or orientation.

Social care: describes a range of paid or voluntary services that offer advocacy, protection or support to children and vulnerable adults. These can be formally provided (after assessment of need) by local authority or voluntary agencies, or can be informally provided e.g., by a friend or family member.

Social work: a profession that aims to promote social change, development and cohesion, as well as supporting the empowerment and liberation of people. Core principles of social work are social justice, human rights, collective responsibilities and respect for diversity.

Transgender (abbreviated as trans): a person whose self-identification in relation to gender is different to the label which was assigned to them at birth. Trans is an umbrella term to describe used to encompass a wide range of gender diverse identities. It is a term accessible to anyone who does not feel comfortable with the gender label credited to them at birth by formal authorities. (Other terms include gender diverse and gender non- conforming).

Trans\* woman/man: a person who’s assigned gender at birth does not align with their own experience of gender (also includes transgender woman/man, woman/man with a trans history, transsexual woman/man, trans female/male).

Transfeminine: a person who identifies as non-binary but does not feel 100% gender neutral, rather they lean a little more towards the feminine side of the gender spectrum.

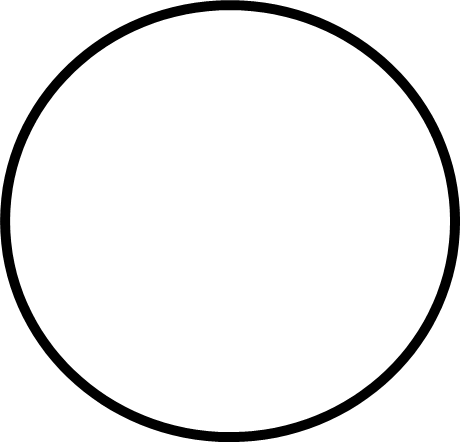
Transmasculine: a person who identifies as non-binary but does not feel 100% gender neutral, rather they lean a little more towards the masculine side of the gender spectrum.

Transphobia: fear or hatred of trans people that is manifested in a number of ways including violence, harassment and discrimination.

Transition: a move away from the gender assigned to you at birth and towards your preferred or felt state of gender (or non-gendered) being. This can involve medical transition with use of hormones, hormone blockers and surgery but does not have to include any medical intervention. Social transition may be used to describe the way a person presents themselves to others as their desired gender. This can include (but is not limited to) use of pronouns, preferred name, presentation of visual physical attributes such as hairstyle, clothes, make-up, use of chest binders and prosthetic penis or breasts.

**Appendix 2: Literature review search terms**

*Figure 1: Venn diagram outlining literature search terms*

K**eywords**

Transgender/trans\*

LGBT/LGBTQ+/lesbian, gay, bisexual, queer

Non-binary

Hetero-sexual, hetero normative

Mother/ father

Cisgenderist/ism

Adopt/adopter/adoptive/adoption

Foster/fostering/foster carer/foster care

Social work

Child/children

Assessment/home study

Parent/parenting

**Appendix 3: Participant invitation letter**

Date

Dear participant,

**Title of study:** A narrative inquiry exploring trans and non-binary people's experiences of child adoption and fostering and the narrative of agencies supporting them.

**Name of Researcher:** Claire Brown

This letter details the research I am conducting with the University of Sheffield. An acquaintance of yours may have forwarded this letter onto you as they have identified you as somebody who may be interested in taking part and sharing your experiences with me. I am keen to discuss your experiences and perceptions of what can help or hinder trans and non-binary people who are hoping to adopt or foster or have been through the adoption or fostering process. I would be very happy if you would consider participating in my study and I envisage that the findings from it will help adoption and fostering services improve to enable more trans people to adopt and foster.

Before you decide whether you would wish to participate, you need to understand why the research is being done and what we will be asking you to do. Please take time to read the attached information sheet carefully. If anything you read is not clear or you would like more information, please get in touch using the contact details on the attached sheet, or email me on claire.brown@tees.ac.uk or cmbrown3@sheffield.ac.uk.

Yours faithfully,

**Claire Brown**

**Appendix 4: Participant information sheet**

**PARTICIPANT INFORMATION SHEET**

**Title of study:** A narrative inquiry exploring trans and non-binary people's experiences of child adoption and fostering and the narrative of agencies supporting them.

**Name of Researcher:** Claire Brown

**Invitation paragraph**

|  |
| --- |
| As part of my doctoral research at the University of Sheffield, I am conducting a study which will explore trans and non-binary peoples’ experiences adoption and fostering within the UK. It will also explore the narratives of agencies supporting prospective and approved adopters and foster carers. The research hopes to examine perceptions of barriers that may prevent trans and non-binary people adopting or fostering, as well as what helps or could help in the future.  I would like to invite you to take part in this research study, but before you decide, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully. Please do not hesitate to contact me if there is anything that is not clear, or you would like more information (contact details can be found on the bottom of this sheet). Thank you for reading this. |

**What is the purpose of the study?**

|  |
| --- |
| The purpose of this study is to explore people’s lived experiences of the adoption and fostering process, as well as the narratives of the agencies supporting them. It hopes to ascertain what adoption and fostering agencies can do to enable more trans and non-binary people to adopt and foster. |

**Why have I been invited to take part?**

|  |
| --- |
| You have been invited to take because you are interested in adopting or fostering a child/have adopted/fostered a child in the UK. You may also be invited to take part because you are a social worker, manager or member of support staff with relevant experience in relation to the research topic. |

**Do I have to take part?**

|  |
| --- |
| No, it is up to you to decide whether to take part. Once you have made the decision to participate, I will then ask you to sign a consent form to show that you agreed to take part. You are free to withdraw at any time up to one month after the interview, without giving a reason. If you decide not to take part, then I will respect your decision and it will not affect you in any way. If you wish to withdraw from the research, please contact Claire Brown. |

**What will happen to me if I take part?**

|  |
| --- |
| If you agree to take part, you will be asked to participate in an interview. With your permission, interviews conducted in person will be digitally recorded. Every effort will be made to ensure those interested in participating can take part. As such, interviews can take place at the University of Sheffield, University of Teesside (where I work as a lecturer), a community centre, offices of an organisation you are part of, a public building, hotel or cafe of your choosing (with a suitable quiet space) or at your home. With your permission, all interviews will be digitally recorded. Alternatively, you may choose to have an email interview. This will involve a series of questions posed over an email exchange which will take place over a maximum time period of 3 months.  As noted above, you are free to withdraw at any time, without giving a reason, and to have the information you provided removed from the study.  You can do this by contacting the researcher within 2 weeks of being interviewed. However, the information that you provide during your interview cannot be withdrawn once a report of the research has been published. |

**Expenses and payments?**

|  |
| --- |
| There is no payment available for this study. |

**What are the possible disadvantages and risks of taking part?**

|  |
| --- |
| There are minimal risks involved as the information required will be about your past experiences and views about adoption processes and services. As stated above, you are free to withdraw at any time without having to justify your decision. If something that we discuss does upset you, you will be able to contact support services (details at the bottom of this information sheet). |

**What are the possible benefits of taking part?**

|  |
| --- |
| I cannot promise that the study will help you personally, but many people report the therapeutic benefits of telling their story and having their views heard. The information that I get from the interviews may help to improve the services offered to trans and non-binary people. My primary aim, however, is to improve adoption and fostering services for children in the UK. Where there are barriers in place preventing potential adopters and foster carers coming forward, children needing adoptive or foster homes in the UK are losing out on potential families. |

**What if there is a problem?**

|  |
| --- |
| If you have any questions, contact Claire Brown, the researcher, using the information at the end of this sheet. If you have any concerns or complaints, you can contact:  Dr Michaela Rogers, Senior Lecturer in Social Work, Department of Sociological Studies, Elmfield, Northumberland Road, Sheffield S10 2TU Email: [m.rogers@sheffield.ac.uk](mailto:m.rogers@sheffield.ac.uk)  Professor Nathan Hughes, Head of Department, Department of Sociological Studies, The University of Sheffield, Elmfield, Northumberland Road, Sheffield S10 2TU Email: nathan.hughes@sheffield.ac.uk |

**Will my taking part in the study be kept confidential?**

|  |
| --- |
| All the information that I collect about you during the course of the research will be kept strictly confidential. I will use a pseudonym (an alternative name, of your own choosing where preferred) for you and any other person you talk about so that no real names will be kept with the transcripts of the interviews. Specific details such as employment details and places will also be changed so that people cannot be easily identified by demographic information. |

**What will happen to my data if I don’t carry on with the study?**

|  |
| --- |
| If you wish to withdraw your data, you need to inform me of this within 1 month of being interviewed. For email interviews you will need to inform me no later than 1 month after the interview was completed. You are free to withdraw without giving a reason and if you request your data to be withdrawn within 1 month of the interview, I will destroy any information that you have given me. However, the information that you provide during your interview cannot be withdrawn once the data has been included with other data for analysis one month after its collection. |

**What will happen to the data collected, and the results of the research project?**

|  |
| --- |
| The information collected during the study will be kept anonymous and stored securely. We will use a pseudonym (an alternative name) for you so that your real name will not be kept with the recordings or transcripts of the interviews. Information will be stored by the researcher on a password protected computer. When the study is finished all of the information collected will be securely stored, at the University of Sheffield, for a minimum of 3 years and it will then be destroyed.  Information from the interview will then be collated, analysed and included in my thesis, other papers, books and materials for publication. It is hoped that the results of the study will be disseminated through conference presentations and written publications. Your name will not be included on any research reports and all data will be presented anonymously.  *‘According to data protection legislation, we are required to inform you that the legal basis we are applying in order to process your personal data is that ‘processing is necessary for the performance of a task carried out in the public interest’ (Article 6(1)(e)). Further information can be found in the University’s Privacy Notice* [*https://www.sheffield.ac.uk/govern/data-protection/privacy/general*](https://www.sheffield.ac.uk/govern/data-protection/privacy/general)*.’* |

**Are there any inclusion or exclusion criteria?**

|  |
| --- |
| I would like to hear from anyone who self-defines as transgender, as a person with a trans history, non-binary or gender-fluid (and any associated terms) and who has either adopted or fostered, been approved as an adopter or foster carer or who is interested in becoming one. Participants may be just at the stage of thinking about adoption or fostering or you might have approached an agency already. I would also like to hear from social workers, managers or support staff with relevant experience in relation to the research topic.  As the research focuses on UK practice, participants should be residing in the UK at the time of interview. Due to adoption and fostering legislation within the UK stating applicants must be over 21 years of age, the study will also set this minimum age limit for participation. There is no upper age limit to take part. |

**Who is organising or sponsoring the research?**

|  |
| --- |
| This research study is being organised and undertaken by myself, with the support of the University of Sheffield. I am a Therapeutic Social Worker who has been employed by adoption and fostering agencies since qualifying in 2011. I currently work part time at Teesside University as a University Lecturer and for independent fostering agencies in the North. |

**Further information and contact details:**

|  |
| --- |
| Claire Brown, Lecturer in Social Work, School of Social Sciences, Humanities and Law, Clarendon Building, Teesside University, Email: claire.brown@tees.ac.uk  Dr Michaela Rogers, Senior Lecturer in Social Work, Department of Sociological Studies, the University of Sheffield, Elmfield, Northumberland Road, Sheffield S10 2TU Email: m.rogers@sheffield.ac.uk |

**Appendix 5: Referral information for signposting**

**Referral information for signposting**

**National advice and support lines/groups**

**GIRES (Gender identity research and education society):** An up-to-date list of UK-wide support groups for trans people (including a breakdown of which groups support trans men, women, non-binary, BAME and whether support is available online or in person) can be found at:

<http://www.gires.org.uk/support-groups-uk-wide-matrix-view>

**Stonewall**: working to achieve equality and justice for lesbians, gay men, bisexual and trans people.

Phone: 020 7593 1850

Email: [info@stonewall.org.uk](mailto:info@stonewall.org.uk)

<http://www.stonewall.org.uk/>

**Beaumont Society:** the largest and longest established transgender support group in the UK

Email: [enquiries@beaumontsociety.org.uk](mailto:enquiries@beaumontsociety.org.uk)

Information Line (24/7/365) 01582 412220

Website: <http://www.beaumontsociety.org.uk/>

**Galop**: a national LGBTQ+ anti-violence and abuse charity giving advice and support to people who have experienced biphobia, homophobia, transphobia, sexual violence or domestic abuse.

Email: [info@galop.org.uk](mailto:info@galop.org.uk)

Phone: 020 7704 6767

National LGBTQ+ Domestic Abuse Helpline: 0800 999 5428

Website: <http://www.galop.org.uk/>

**Gender trust**: a support and an information centre for anyone with any question or problem concerning their gender identity, or whose loved one is struggling with gender identity issues.

Phone: 01527 894 838

Email: [info@gendertrust.org.uk](mailto:info@gendertrust.org.uk)

Website: <http://www.gendertrust.org.uk/>

**Switchboard:** information, support and referral service for lesbians, gay men and bisexual and trans people – and anyone considering issues around their sexuality and/or gender identity.

Email: [chris@switchboard.LGBTQ+](mailto:chris@switchboard.lgbt)

Helpline: 0300 330 0630 10am - 11pm every day

Website: [http://switchboard.LGBTQ+/](http://switchboard.lgbt/)

**Trans\*formation:** a networking and advocacy group for professionals who identify as Trans\* and their friends and supporters.

Email: [admin@transformationuk.com](mailto:admin@transformationuk.com)

Website: <http://www.transformationuk.com/>

**Trans masculine Support and Advice UK:** a secret, safe and supportive Group; for all those who identify as Trans Masculine, Non-Binary and Gender Variant AFAB people.

Email: [tmsauk@gmail.com](mailto:tmsauk@gmail.com)

Website: <http://www.tmsauk.org/>

**Trans Bare All:** an organisation that believes in improving the health and wellbeing of trans people.

Email: [contact@transbareall.co.uk](mailto:contact@transbareall.co.uk)

Website: <http://www.transbareall.co.uk/contact-us>

**UK Angels:** Internet-based support network for all trans people, and their partners and allies

Email: [joanna@theangels.co.uk](mailto:joanna@theangels.co.uk)

Website: <http://theangels.co.uk/>

Forum: <http://www.angelsforum.co.uk/phpforum/>

**Wipe Out Transphobia:** an international volunteer led project that aims to wipe out the transphobia in society that affects anyone who strays away from the traditional binary idea of gender as assigned.

Email: [info@wipeouttransphobia.com](mailto:info@wipeouttransphobia.com)

Phone: 0844 245 2317

Website: <http://www.wipeouttransphobia.com/>

**Samaritans**: provides free, confidential emotional support to anyone in distress, around the clock.

Helpline: 08457 90 90 90

Email: [jo@samaritans.org](mailto:jo@samaritans.org)

Website: <http://www.samaritans.org/>

**National Suicide prevention Alliance (NSPA):** n alliance of public, private, voluntary and community organisations in England who care about suicide prevention and are willing to take action to reduce suicide and support those affected by suicide.

**Mind**: information on a range of topics: types of mental health problem, where to get help

medication and alternative treatments, advocacy.

Infoline: 0300 123 3393

Email: [info@mind.org.uk](mailto:info@mind.org.uk)

**SANE**: provides emotional support and information to anyone affected by mental illness, including families, friends and carers.

Helpline: Available on 0300 304 7000 from 4:30pm - 10:30pm every evening

Textcare: arrange messages of support at times that are right for you <http://www.sane.org.uk/what_we_do/support/textcare/>

Support Forum: <http://www.sane.org.uk/what_we_do/support/supportforum/>

**Local advice and support lines/groups**

An up to date list of local support groups can be found at: <http://www.gires.org.uk/north-west>

**Proud 2 B Parents:** Manchester's support and social group for LGBTQ+ parents and parents-to-be. Email: [proud2bparents@hotmail.com](mailto:proud2bparents@hotmail.com)

Phone: 07843913001

Website: <http://www.proud2bparents.co.uk/>

**LGBT Foundation** (formerly known as The Lesbian & Gay Foundation (The LGF): a national charity with Manchester offices and walk-in support, delivering a wide range of services to lesbian, gay and bisexual and trans (LGBTQ+) communities.

Address: 5 Richmond Street, Manchester, M1 3HF

Email: [info@LGBTQ+.foundation](mailto:info@lgbt.foundation)

Phone: 0845 330 3030

Website: [http://LGBTQ+.foundation/trans](http://lgbt.foundation/trans)

**Transforum:** a discussion group and mutual peer support forum for all Trans\* gender people and all those who are questioning their gender and their family and friends.

Email: [jenny-anne@transforum.org.uk](mailto:jenny-anne@transforum.org.uk)

Phone: 0750 074 1955

Website: <http://www.transforum-manchester.co.uk/>

Meetup dates for 2017 are: 3.30-7pm on May 27th, June 24th, July 22nd, August 19th, Sept 23rd, Oct 28th, Nov 25, Dec 16th.

**Butterflies**: Drop-In, Trans Support Group run by TransForum and Manchester Concord.

Butterflies meet throughout the year on the 1st and 3rd Wednesday afternoon of the month from 2.30pm to 6.00pm.

Venue: The LGBT Foundation Building, 5 Richmond Street, Manchester, M1 3HF.

**MORF**: Manchester’s social and peer support group for trans masculine people who want to meet other trans masculine people, discuss relevant issues, and have fun in a safe environment. The group meets every 4th Monday of the month, 7-9pm at LGBT Foundation.

Email: [morf@morf.org.uk](mailto:morf@morf.org.uk)

Website: [www.morfuk.webeden.co.uk](http://www.morfuk.webeden.co.uk)

**Individual therapists**

**BACP**: The British Association for Counselling and Psychotherapy has a list of individual therapists:

<http://www.itsgoodtotalk.org.uk/therapists>

**Adoption information**

**New Family Social:** the UK network for LGBTQ+ (lesbian, gay, bisexual and transgender) adoptive and foster families.

Phone: 0843 2899457

Website**:** <http://www.newfamilysocial.org.uk/>

**First4adoption**: advice and information about adoption and how to find the right agency for you.

Phone: 0300 222 0022

Website: <http://www.first4adoption.org.uk/find-an-adoption-agency/>

Information on LGBTQ+ adoption: [http://www.first4adoption.org.uk/being-an-adoptive-parent/how-do-i-decide/thinking-about-adoption-LGBTQ+/](http://www.first4adoption.org.uk/being-an-adoptive-parent/how-do-i-decide/thinking-about-adoption-lgbt/)

**CoramBAAF**: focuses on supporting and developing all areas of adoption and fostering in the UK.

Advice Line: 0300 222 5775, Mon – Fri, 9am-1pm

Email: [advice@corambaaf.org.uk](mailto:advice@corambaaf.org.uk)

Website: <http://corambaaf.org.uk/ourwork>

**Appendix 6: Consent form**

**Narrative inquiry: adoption and fostering by trans and non-binary carers - Consent Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Please tick the appropriate boxes*** | | | **Yes** | **No** |
| **Taking Part in the Project** | | |  |  |
| I have read and understood the project information sheet dated 21/05/2019 or the project has been fully explained to me. (If you will answer No to this question please do not proceed with this consent form until you are fully aware of what your participation in the project will mean.) | | |  |  |
| I have been given the opportunity to ask questions about the project. | | |  |  |
| I agree to take part in the project. I understand that taking part in the project will include taking part in an interview. | | |  |  |
| I understand that my taking part is voluntary and that I can withdraw from the study at any time up to one month after the interview; I do not have to give any reasons for why I no longer want to take part and there will be no adverse consequences if I choose to withdraw. | | |  |  |
| **How my information will be used during and after the project** | | |  |  |
| I understand my personal details such as name, phone number, address and email address etc. will not be revealed to anyone but the doctoral researcher. | | |  |  |
| I understand and agree that my words may be quoted in publications, reports, web pages, and other research outputs. I understand that I will not be named in these outputs unless I specifically request this. | | |  |  |
| I understand and agree that other authorised researchers will have access to this data only if they agree to preserve the confidentiality of the information as requested in this form. | | |  |  |
| I understand and agree that other authorised researchers may use my data in publications, reports, web pages, and other research outputs, only if they agree to preserve the confidentiality of the information as requested in this form. | | |  |  |
| I give permission for the interview data that I provide to be deposited in the University of Sheffield’s repositoryso it can be used for future research and learning. | | |  |  |
| **So that the information you provide can be used legally by the researchers** | | |  |  |
| I agree to assign the copyright I hold in any materials generated as part of this project to The University of Sheffield. | | |  |  |
|  |  |  | | | |
| Name of participant [printed] | Signature | Date | | | |
|  |  |  | | | |
| Name of Researcher [printed] | Signature | Date | | | |
|  |  |  | | | |

**Project contact details for further information:**

Claire Brown, Lecturer in Social Work, School of Social Sciences, Humanities and Law, Clarendon Building, Teesside University, Email: claire.brown@tees.ac.uk.

PhD student at the University of Sheffield, supervised by:

Dr Michaela Rogers, Senior Lecturer in Social Work, Department of Sociological Studies, Elmfield, Northumberland Road, Sheffield S10 2TU Email: m.rogers@sheffield.ac.uk

In the event of a complaint, please contact Professor Nathan Hughes, Head of Department, Department of Sociological Studies, Elmfield, Northumberland Road, Sheffield S10 2TU, nathan.hughes@sheffield.ac.uk

**Appendix 7: Interview Schedules**

**For participants with lived experience**

1. Biographical information and social characteristics

* Age, ethnicity, geography/socioeconomic location, health/ability, family role, dependents
* How would you define your gender? (E.g. trans, man, woman, other - please specify)

1. Experiences of and thoughts about adoption or fostering

* Tell me what you think about adoption/fostering in general
* Do you know anyone who has adopted/fostered or been adopted/fostered?
* When did you first consider adopting/fostering a child?
* Have you ever applied to adopt/foster?

1. Personal barriers and enablers

* What would the motivators be?
* Is there anything external that would/has put you off? E.g., response of someone.
* Is there anything internal that could prevent you applying?
* Anything that has encouraged you to go forward?

1. General barriers and enablers

* Do you feel there are barriers generally that would discourage trans people from applying to adopt/foster?
* Can you think of anything that helps encourage people to come forward?

1. Impact

* What is the impact of this on you emotionally?
* What is the impact on social and other relationships?
* Identity?
* Hopes, dreams, aspirations?

1. Service improvements

* When you consider your experience of service use overall, do you think adoption/fostering services are better or worse than other health or social care services? Why?
* What could be done to improve the way adoption/fostering agencies provide a service for trans people hoping to adopt/foster?
* Is there anything you would personally need?

1. Summary and reflection

* Thinking back on what we’ve discussed, how would you sum up the way you feel about adoption/fostering services for trans people?
* Is this the kind of thing you thought we would discuss? If not, what did you think we would talk about? Is there anything else you’ve thought of that you want to discuss?

**For participants with work experience in adoption and fostering**

* Experience of adoption or fostering
* Experience of working with/supporting trans people
* Similarities and differences in the way you have worked
* Barriers/challenges to trans people adopting/fostering
* Enablers – positive measures services put in place
* What do you think will/could help in future?
* Summary and reflection
* Is this the kind of thing you thought we would discuss? If not, what did you think we would talk about? Is there anything else you’ve thought of that you want to discuss?

**Appendix 8: Coding manual**

This research used Braun and Clarke’s (2006) six phases of thematic analysis in the manner indicated, whereby the approach does not require linearity. Rather, analysis was undertaken as a recursive process involving constant review and revisiting of each step. In doing so, I sought to ensure analytical rigour by engaging in the processes of continual evaluation and comparison of themes that Braun and Clarke (2013) highlight as being integral to the method.

Braun and Clarke’s (2006) stages were applied in a systematic manner, making use of code and theme organisational methods identified in several recent papers that employed their method of thematic analysis (Maguire and Delahunt, 2017; Karlsen et al.,2017; Gagnon and Roberge, 2012).

The six phases of coding and analysis based on Braun and Clarke’s (2006) framework were as follows:

1. **Familiarisation with the data:**

All data was transcribed verbatim from audio by the researcher. Following this, each transcript was read at least 5 times, with a minimum of 2 readings taking place with the audio alongside them. Initial analytic observations were noted.

1. **Coding:**

Inductive line-by-line coding took place whereby initial labels were generated for important features of the data that were of relevance to the broad research question. To achieve methodological rigour for the large and complex dataset, each data item was coded via two methods: using NVivo and via hand-coding. Using NVivo nodes were identified and collapsed into codes as similarity among the nodes became evident. A similar process was employed when hand-coding; notes on initial codes were entered into the page margins. These were then grouped as familiar codes emerged that could be collapsed. As Braun and Clarke (2006) set out, coding involved an analytic process that captured a semantic and conceptual reading of the data. This phase was ended by collating all the codes and data extracts of relevance.

1. **Searching for themes:**

During this stage, meaningful patterns in the data were identified via a process of coding the codes to identify similarity within the data. Themes were as such constructed by the researcher and all the data relevant to each theme was collated.

1. **Reviewing themes:**

This stage involved reflection on whether the themes worked for the particular coded extracts as well as the dataset as a whole. There was a process of checking back on whether the themes told a compelling story about the data.

Step 4 was supported by tabularising the main themes (see *Appendix 9)* identified to alongside the corresponding codes that each theme was comprised of (Maguire and Delahunt, 2017; Karlsen et al., 2017; Gagnon and Roberge, 2012). This method helped check back that each theme worked in relation to the coded extracts. It also helped to define the nature of each theme and its relationship to other themes. During this phase some themes were collapsed, some were split into multiple themes and themes were discarded altogether and the process begun again. This constant checking back aimed to develop the themes throughout analysis.

1. **Defining and naming themes:**

Requires the researcher to conduct and write a detailed analysis of each theme (the researcher should ask ‘What story does this theme tell?’ and ‘How does this theme fit into the overall story about the data?’), identifying the ‘essence’ of each theme and constructing a concise, punchy and informative name for each theme. A thematic map was created to aid step 5 (Maguire and Delahunt, 2017). This helped identify what the theme was saying, to set out subthemes and illustrate how they interact (see *Appendix 9).*

1. **Writing-up:**

In-line with Braun and Clarke’s (2006) framework, the process of writing up was viewed as an integrated essential element of the analytic process. This stage involved weaving strands of analytic narrative with data extracts to build up a coherent story about the data that. Contextualisation in relation to existing literature is interwoven to help offer a persuasive and evidentially grounded picture for the reader.

**Appendix 9: Coding and theming**

**Table 3: Coding**

|  |  |  |
| --- | --- | --- |
| Codes | Number of transcripts referring to the code | Number of incidences of the code across the dataset |
| 1. Social workers’ anxiety about new gender terms 2. Children already in the family 3. Children and gender 4. Coming out 5. Complicating factors for adoption/fostering outside of gender 6. Desire to adopt or foster 7. Internalised beliefs about discrimination 8. Factors in agency choice 9. Gender focus in the adoption or fostering process 10. Gender identity definitions 11. Hiding parts of you in the adoption or fostering process 12. Hypocrisy and unfairness of social workers 13. Identity outside of gender 14. Improvements services can make 15. Matching 16. Medical narratives and transitioning 17. Stories of one’s own personal and sibling relationships 18. Perceptions of trans as a barrier to adoption or fostering 19. Points made about other non-traditional families 20. Stories of romantic relationships 21. Societal level change needed 22. Strengths to an adoption or fostering application 23. Struggles with gender identity 24. Success stories 25. Support 26. Transphobia and mis-gendering 27. Where one’s knowledge of adoption comes from 28. Work | 1  3  6  6  6  6  4  2  2  5  4  4  3  5  2  5  2  5  3  3  4  4  2  4  6  5  4  2 | 6  22  21  36  44  53  14  13  14  15  20  31  22  58  44  18  8  84  6  17  14  26  8  15  28  68  15  14 |

28 initial codes were generated, and these were then collated into groups that allowed the identification of sub-themes. This allowed for patterns to be considered that led to the grouping together or subthemes to construct overarching themes that represent stories within the data.

The three primary theoretical paradigms drawn on throughout the analysis are cisgenderism (Ansara and Hegerty, 2014), stigma (Goffman; 1963; Tyler and Jensen, 2018; Paton, 2018; Tyler, 2018) and concepts of discourses of power (Foucault, 1979).

**Table 4: Theming**

|  |  |  |
| --- | --- | --- |
| Theme 1: Narratives of family | Theme 2: Narratives of personal identity | Theme 3:  Adoption and fostering narratives |
|  |  | Subtheme: Desire to adopt or foster (moved from ‘starting or growing your family subtopic to a subtheme in itself 19.02.20 as the content fit better in this section) |
| Subtheme: Starting or growing your family  Children already in the family  10.02.20 – this is a large section covering birth & pseudo-adopted children as well as step. Split via type of relationship or via some other way? Maybe by having children pre or post transition?  NB large section focuses primarily on 2 narratives in detail. | Subtheme: Gender identity  Struggles with gender identity  Coming out  Medical narratives and transitioning  Gender identity definitions | Subtheme: Cisgenderism of social workers  Social worker anxiety about new gender terms  Hypocrisy and unfairness of social workers  Gender focus in the adoption or fostering process  Matching made more difficult |
| Subtheme: Adult personal relationships  Stories of one’s own personal and sibling relationships  Stories of romantic relationships | Subtheme:  Identity outside of gender | Subtheme: internalised beliefs resulting from cisgenderism  Perceptions of trans as a barrier to adoption or fostering  Complicating factors for adoption and fostering outside of gender (but related to trans identities)  Hiding parts of you in the adoption or fostering process |
| Subtheme: Resisting assimilation  Children and gender  Points made about other non-traditional families | Subtheme: transphobia  Transphobia and mis-gendering (possibly split into ‘in SW’ and ‘in society’.  Expecting assumptions: Internalised beliefs about discrimination  Societal level change needed | Subtheme: choice and agency  Factors in agency choice  Improvements services can make  Strengths to an adoption or fostering application  Success stories  Where one’s knowledge of adoption comes from |

**Figure 1: Thematic map**