

**Past Events and Anticipated Futures around Transgender and Gender Nonconforming
Identity Development**

Mieke Beth Thomeer, University of Alabama at Birmingham; Allen J. LeBlanc, San Francisco State University; David M. Frost, University College London; Anneliese Singh, University of Georgia; and Walter O. Bockting, Columbia University.

Corresponding author: Mieke Beth Thomeer, Department of Sociology, Heritage Hall 460, 1401 University Blvd., Birmingham, AL 35233, (205) 996-2301, mthomeer@uab.edu

The authors acknowledge funding from the NICHD (R01-HD79603, Walter Bockting, PI), the MAC AIDS Fund, and the New York Community Trust.

Do not cite without authors' permission.

Abstract: Gender identity develops over the life course, with this process perhaps most salient among people who identify as transgender or gender nonconforming (TGNC). We suggest that the identification of a contemporary, empirically-based model of TGNC identity development allows us to consider resiliency, stressors, and other risk factors concurrently, alongside other notable events within the lives of TGNC people. We analyze data from Project AFFIRM—a multi-phase, multi-method study of gender identity development and resilience among TGNC populations ($N = 87$)—to ask how TGNC people understand their own gender identity development, both in terms of important events in the past and important events in the future. We categorize the 1,418 past and future events identified by the respondents as important for their gender identity development into twelve categories (e.g., “community involvement,” “medical transition,” “rejection and violence”). There were key differences in the distribution of these event categories by age, race/ethnicity, sex at birth, geography, and current gender identity. Further, there were differences in when these events occurred; for example, “rejection and violence” events tended to be identified as important for gender identity development at younger ages and in the past, whereas “community involvement” were more frequently identified at older ages and in the future. We suggest that future models of TGNC identity development look beyond traditional categories to categories identified by respondents themselves, recognizing the complexities and importance of gender identity across the life course.

Gender identity develops over the life course, with this process perhaps most salient among people who identify as transgender or gender nonconforming (TGNC). Understanding the gender identity development of TGNC people is important in and of itself, but especially given that they are a minority population with documented health inequities (Institute of Medicine 2011). Studies find health disparities among the TGNC population around HIV, depression, suicidal ideation and attempts, smoking, and anxiety (Conron et al. 2012, Herbst et al. 2008). But this emphasis on health disparities—which largely dominates demographic and epidemiological work on TGNC people—obscures the role of resiliency within the lives of TGNC people. Resiliency should be considered alongside the stressors and other risk factors that tend to dominate this literature. For example, a recent study found that lower levels of “outness” were associated with higher levels of felt stigma (Bockting et al. 2013).

We suggest that the development of a contemporary, empirically-based understanding of TGNC identity development allows us to consider resiliency, stressors, and other risk factors concurrently, alongside other notable events within the lives of TGNC people. Most prior considerations of TGNC identity development focus on children and adolescents and are generally limited to events directly and obviously linked to gender (e.g., realization about gender as a child, coming out as transgender; Bockting et al. 2016). We argue that a comprehensive model of TGNC identity development should move beyond these typical categories and look first to the events identified by TGNC people themselves as important. A comprehensive model of TGNC identity development must also encompass the whole life course, including not only information about childhood and recent adulthood but also anticipated events in the future important to TGNC identity development (Thomeer et al. 2018). Further, as suggested by an intersectionality perspective (Collins 2002) and a life course framework (Elder, Johnson and Crosnoe 2003),

experiences of TGNC identity development are situated by more than just a person's gender identity, but additionally predicated on their age, cohort, race, geographic location, and sex at birth. Thus, multiple identities, social positions, and social structures should be considered simultaneously in the study of gender identity development among TGNC people.

In this study, we ask how transgender and gender nonconforming (TGNC) people understand their own gender identity development, both in terms of important events in the past and important events in the future. We further ask how this varies by age and cohort, race/ethnicity, geographic location, sex at birth, and gender identity, and what the general timing of these events is. To address these questions, we analyze data from Project AFFIRM—a multi-phase, multi-method study of gender identity development and resilience among TGNC populations ($N = 87$). We argue that an empirically-driven TGNC identity development model will also allow us to identify periods of both acute and chronic vulnerability and highlight opportunities for tailored interventions to promote resilience.

Theoretical Background

In the twentieth century, gender variant identity and expression typically were viewed by the general public and medical community as fitting into a binary conceptualization of sex/gender as male vs. female, man vs. woman, and masculine vs. feminine (Meyerowitz 2002). In the context of high levels of social stigma for people who were gender nonconforming, transgender identity emerged as a way to affirm gender identity and expression diversity (Vidal-Ortiz 2008). The terms transgender and gender conforming (TGNC) are now overarching terms to refer to the entire spectrum of diverse gender identities and expression (Bockting 2008, Kuper, Nussbaum and Mustanski 2012). They encompass an increasing number of labels such as androgyne, bigender, and genderqueer (Richards et al. 2016).

Bockting and Coleman (2007) proposed five developmental stages of the transgender coming out process, each with specific developmental tasks. These stages include pre-coming out (identified by the challenges of feeling different, stigma, and early resilience or concealment), coming out (identified by the challenges of acknowledging to self and others and taking calculated risks), exploration (identified by the challenges of experimentation, stereotypes notions of femininity and masculinity, personal attractiveness and sexual competence, and transforming shame into pride), intimacy (identified by the challenges of desire for intimacy and first relationships in preferred gender role, facing fear of abandonment, and sexual orientation identity), and identity integration (identified by the challenges of grief, less preoccupation with identity labels, and tolerance of gender ambiguity). According to this model, affirming a TGNC identity in the face of stigma is a psychosocial process that endures for a lifetime, beyond (if applicable) “transition” (a permanent change in gender role with or without medical interventions to feminize or masculinize the body).

We build on this stage model through our use of an innovative approach, lifeline interviews and construction (de Vries 2013, de Vries et al. 2017). In this approach, participants create a lifeline in which they define and discuss key events and periods of time over the course of their life and development, including the past, present and future. This can include discrete events as well as important transitions or turning points (Elder, Johnson, and Crosnoe 2003). This approach is grounded in life course and life events research traditions (Dohrenwend 2006, Holmes and Rahe 1967, Settersten 1999). A life course framework views individual lives as composed of life events and trajectories that unfold over time and are embedded within particular social contexts (Elder, Johnson and Crosnoe 2003). By allowing respondents to identify events and rate their importance themselves, rather than providing predetermined measures or event categories as seen in past

survey methods of gender identity development, identified events more fully reflect the lived experience of stressful events and periods. This is especially important for this exploratory study of gender identity development among TGNC people.

This lifeline approach includes not only events from the past but also events anticipated to occur in the future (Thomeer et al. 2018). Our inclusion of the future builds on research in social psychology, sociology, criminology, and epidemiology which considers the role of *anticipatory stress*. Studies of anticipatory stress have not been conducted in a TGNC context (Agnew 2002, García 2018, Grace, Bais and Roth 2018, Monat, Averill and Lazarus 1972, Pearlin and Bierman 2013, Thomeer et al. 2018), but we contend that current understandings of TGNC development (Bockting 2014, Bockting and Coleman 2007)—and the subsequent strain, discrimination, or resilience that may be associated with that development (Barr, Budge and Adelson 2016, Bockting et al. 2016)—can be usefully extended by incorporating a focus on the anticipated future.

As suggested by an intersectionality perspective (Collins 2002) and a life course framework (Elder, Johnson and Crosnoe 2003), experiences of TGNC identity development are situated by more than just a person's gender identity, but additionally predicated on their age, cohort, race, geographic location, and sex at birth. Intersectionality perspectives acknowledge that multiple forms of oppression—including racism, sexism, homonegativity, and ageism—and privilege interact and overlap with one another. To illustrate only briefly, the events identified as important for the gender identity development experienced by a white middle-aged genderqueer person living in urban San Francisco are likely to significantly differ from those of a younger black transwoman living in suburban or rural Georgia. For this reason, in our analysis, we consider the role of age and cohort, race/ethnicity, geographic location, sex at birth, and gender identity in this exploration of gender identity development events.

Data and Methods

To address our research goals, we analyze data from Project AFFIRM—a multi-phase, multi-method study of gender identity development and resilience among TGNC populations. All Project AFFIRM protocols are developed with input from community advisory boards in three study sites (New York City, San Francisco, and Atlanta). In Project AFFIRM’s first phase, 87 people whose gender identity differed from their sex assigned at birth participated in a lifeline study designed to deepen understandings of gender identity development, stress, and resilience.

The lifeline study was designed to be participant-led, encouraging participants to tell their

Table 1: Sample Characteristics (N=87)		Percentage
Site	Atlanta	34.5%
	New York	31.0%
	San Francisco	34.5%
Genderqueer Identity	Genderqueer	28.7%
	Not Genderqueer	71.3%
Sex at Birth	Female	47.1%
	Male	52.8%
Race/Ethnicity	White	39.0%
	African American	21.8%
	Latino	19.5%
	Other	19.5%
Table 1: Sample Characteristics (N=87)		Percentage
Site	Atlanta	34.5%
	New York	31.0%
	San Francisco	34.5%
Genderqueer Identity	Genderqueer	28.7%
	Not Genderqueer	71.3%
Sex at Birth	Female	47.1%
	Male	52.8%
Race/Ethnicity	White	39.0%
	African American	21.8%
	Latino	19.5%
	Other	19.5%

own stories, in their own words. Table 1 shows descriptive statistics for the sample for Phase 1. The average age was 38 years (range: 16-86). We adopt an innovative “lifeline” research method, which has proven to be useful in studies of other populations (Axinn, Pearce and Ghimire 1999, de Vries et al. 2017, Rappaport, Enrich and Wilson 1985). In this lifeline method, TGNC respondents graphically represent key events and periods—both in the past and the anticipated future—related to their gender identity development and categorize or appraise the

degree to which those events and periods were, are, or are likely to be important to their gender identity development. Each event was rated from 0 (not at all important



Figure 1: Timeline

to gender identity development) to 4 (extremely important). This timeline approach is illustrated in Figure 1. Respondents then divided their lines into different stages of gender identity development, in the past, present, and future, and talked through the major accomplishments of each stage. In total, respondents identified 1,051 past events and 367 future events (or 12.22 past events and 4.32 future events on average).

To analyze these timelines, we first read through all past and future events and created subcategories for these events. For example, early subcategories included “coming out to family members” and “moving to a new city.” We then placed events into these subcategories, collapsing subcategories or creating new subcategories as necessary. After events were in subcategories, we then reevaluated the categories and coding of entries. This resulted in 61 subcategories. From those 61 categories, we developed 12 overarching categories. We also created an additional 13th category (“Miscellaneous”) for events that were unclear or did not fit within the 12 primary categories. These categories were (1) Coming out and presentation, (2) Community involvement, (3) Culture and new information, (4) Education, career, and finances, (5) Extracurriculars, (6) Health, (7) Medical transition, (8) Begin new relationship, (9) Ongoing family and friend relationships, (10) Enter parenthood, (11) Place of residence, and (12) Rejection and violence. The categories and subcategories are shown in Table 2, which also shows examples from each subcategory.

Subcategories and categories were not mutually exclusive (e.g., “retired and moved to Colorado” would be both the subcategory “retirement” within the category “education, career, and finances” and the subcategory “move to new city or state” within the category “move to new city or state”), and each was coded as multiple lines of data if in more than one category. This first phase of analysis was done within NVivo. Next, using Stata, we created a data set to allow statistical analysis of each event according to its category, gender rating, respondents’

characteristics (age, race/ethnicity, sex at birth, geographic location, and current gender identity), age for each event, and number of events. This data set allowed us to test for statistically significant differences across categories and subcategories and to produce summary statistics.

As key controls in some models, we consider age, race/ethnicity, sex at birth, geographic location, and current gender identity, as well as total number of events, whether an event was in the past or future, and the age at which the event did occur (if past)—or is expected to occur (if future). Age at the date of the interview is self-reported, and respondents also reported their birth year. We consider age in years as a categorical variable with three categories: 16-24 ($n=35$), 25-44 ($n=25$), and 45 and older ($n=27$). Race/ethnicity has four categories: Black ($n=19$), Hispanic ($n=17$), Other ($n=16$), and White ($n=35$). Sex at birth has two categories: assigned female at birth ($n=41$) and assigned male at birth ($n=45$), with one missing. Geography is split across the three locations fairly evenly: Atlanta ($n=29$), New York ($n=28$), and San Francisco ($n=30$). Respondents also reported their current gender identity, and respondents were given the options of FTM, MTF, genderqueer, man, woman, and other and selected as many options as relevant. We then created three categories: man and/or FTM ($n=27$), woman and/or MTF ($n=34$), and genderqueer and/or other ($n=26$). If respondents chose genderqueer or other alongside MTF, FTM, man, and/or woman ($n=12$), we categorized them as genderqueer/other. One respondent selected MTF and man, and we coded this respondent as genderqueer/other. In some models, we also control for total number of events and the reported age for event. Fifty-six past events (4.57%) are missing on age, and 149 future events (34.10%) are missing on age. This a key limitation when considering future events by age.

Table 2: Categories and Subcategories for Events from Timelines ($N = 87$)

Category	Number of Events & Percentage (Categories)		Subcategories	Number of Events (Subcategories)		Sample entries
	Past	Future		Past	Future	
Begin new relationship	85 7.45%	28 6.93%	Friendships	7	3	Past: Governor's honors program exposes me to a lot of cool queer friends Future: Have at least 5-7 close friends
			Marriage (with new partner, <i>if future</i>)	14	15	Past: 1 st marriage Future: When God blesses me with a wife
			Sex, dating, or crush	27	--	Past: Lost virginity
			Start intimate relationship	37	10	Past: First romantic relationship Future: Hopefully fall in love
Coming out and presentation	350 40.27%	64 17.39%	Attitude	10	9	Past: Found myself Future: Thriving
			Chosen name or pronouns	10	9	Past: Started toying with he/him pronouns

					Future: Go by different name/gender neutrals	
			Clothing and appearance	83	6	Past: No more girl clothes Future: Hope to dress female 100% of the time
			Coming out about gender identity	85	14	Past: Came out as trans to a few people Future: Coming out to mum
			Legal change in gender or name	10	5	Past: Went to court to change names Future: Update records and passport
			Outlook or realization about identity	81	13	Past: Absolutely felt I was a boy Future: Get a clearer sense of my gender identity
			Puberty	9	--	Past: First puberty
			Sexuality	38	3	Past: First realize I'm not straight Future: Start dating guys into my gender
			Uncertainty	24	4	Past: Dysphoria kicks in with body changes

						Future: Figuring out how out/stealth I want to be
Community involvement	60 5.06%	42 10.77%	Activism	12	6	Past: Blog on transgender equality Future: Do humans rights work whenever I can
			Informally serving LGBTQ+ community	17	15	Past: Found transgender support group where I am not only able to get support but give back Future: Help other trans folks
			Organization	27	15	Past: PFLAG Future: Start non-profit that empowers LGBTQ+ youth
			Politics	4	6	Past: Got involved in politics Future: Run for political office
Culture and new information	62 5.33%	--	Article, news item, or research	14	-	Past: Vogue magazine article on transsexual
			General new information	7	-	Past: Found the term trans
			Information in school	10	-	Past: Took course on sexuality and trans identities

			Met person or group	11	-	Past: First exposure to TS community
			Pop culture	20	-	Past: Saw Rocky Horror
Education, career, and finances	115 10.35%	100 30.12%	Buy or own house or property	2	11	Past: Bought first house Future: Purchase my own home
			Career	42	37	Past: Unemployment Future: Maybe be art teacher
			Education	50	28	Past: Went to queer friendly college Future: Graduate law school
			Finances	5	4	Past: Filed bankruptcy, financial strain decreased Future: Financial stability
			Publish book or make film	2	15	Past: First new article Future: Publish experiences as transman and activity
			Retirement	4	7	Past: Retired Future: Retire from teaching. Live as [woman] full time.

			Sex work	10	-	Past: Got fired, went back to survival sex work
Enter parenthood	15 1.24%	29 7.20%	Adopt or foster	1	9	Past: Became a foster mother Future: Become foster parent
			Have/had kids	14	15	Past: Son born Future: Married with children
			Start family	-	5	Future: Married with a family and own a house
Extracurriculars	79 6.89%	19 4.60%	Arts and music	16	4	Past: Went to theater camp Future: Be a musician who is a visible trans person
			Pets	3	1	Past: Got two dogs Future: Dog
			Playing, celebrating, and hobbies	18	-	Past: Love to play with girls
			Religion	15	-	Past: Bahai faith
			Sports	9	2	Past: Played baseball, boys team Future: Bowl in national tournaments as female

			Travel	11	12	Past: Trip to New Zealand Future: Go to Italy
Health	62 5.33%	22 5.37%	Death	-	4	Future: Die an untimely death because of medical abuse
			Health behavior	13	3	Past: Sober 10 years Future: Fitness journey starts
			Health care	10	8	Past: Admitted self to VA Future: Cure for HIV/AIDS
			Health insurance	2	2	Past: Get Obamacare Future: Begin HRT, get insured
			Mental health	30	6	Past: I was institutionalized because I wanted to commit suicide Future: Get a therapist
			Physical health	7	-	Past: Diagnosis of HIV
Medical transition	79 6.89%	63 17.07%	General	11	7	Past: starting medical transition, started life Future: Sex change
			Hormones	41	13	Past: Start T

						Future: Figure out way to get T more easily
			Surgery	27	43	Past: Decided on genital surgery Future: Hopefully going for top surgery
Miscellaneous	45 3.81%	11 2.61%	-	-	-	-
Ongoing family and friend relationships	113 10.15%	31 7.73%	Children	3	5	Past: Son left me due to transition Future: Earliest I can come out, daughter graduates from high school
			Continued relationships with intimate partner	15	13	Past: Wife discovered women's undergarments Future: Marrying my girlfriend of 11 years, what will I wear or call myself?

			End intimate relationship	16	2	<p>Past: Moved out of house and separated from ex spouse</p> <p>Future: Looking forward to divorce and living on my own as a total woman</p>
			Extended family	19	4	<p>Past: Supportive grandmother dies</p> <p>Future: Maybe I will move to be closer to relatives</p>
			Family of origin, parents, siblings	52	8	<p>Past: Parents divorced—went with dad</p> <p>Future: Deaths of parents; dealing with people at funeral who might find me strange</p>
			Friends	8	3	<p>Past: Best friend died in a car crash & I went into a depression</p> <p>Future: Move in with friends</p>
Place of residence	79 6.89%	23 5.62%	General moving	14	5	<p>Past: Homeless</p> <p>Future: Get stable housing</p>
			Move to new city or state	53	15	<p>Past: Transition started, go back to ATL, find the trans community</p>

						Future: Living in a more progressive state
			Move to new country	12	3	Past: Enrolled in US Army—went to Afghanistan Future: Move back to US
Rejection and violence	81 6.61%	--	Discrimination	11	-	Past: Used boys bathroom in jr high, got in trouble
			Isolated or ostracized	32	-	Past: Got name called/bullied for being “diff”
			Kicked out or ran away	7	-	Past: Publicly outed and kicked out
			Sexual violence	15	-	Past: Molested by family member
			Violence	12	-	Past: Assaulted for clothing choices

Results

As shown in Table 2, ten of the categories were present in both the past and the future, but two (“culture and new information” and “rejection and violence”) were only represented in the past. Table 2 also indicates the frequency of events within each category. When considering the past and future categories together, the largest category was “coming out and presentation,” comprising about 25 percent of all events. Next was “education, career, and finances,” which made up about 13 percent of all events, and then “medical transitions” and “ongoing family and friend relationships” (about 9 percent each). Comparing past events and future events, “coming out and presentation” made up 29 percent of past events, but only about 14 percent of future events. Instead, in the future, the most frequently mentioned category was “education, career, and finances.” As other striking differences, “community involvement” comprised only about 5 percent of past events but 11 percent of future events, “medical transitions” only about 6 percent of past events but about 14 percent of future events, and “enter parenthood” only about 1 percent of past events but about 7 percent of future events.

In Table 3, we show the proportion of respondents with at least one event in each category, by age, race/ethnicity, sex at birth, and current gender identity. Geographic location is not included because there are no significant differences in whether or not have events from each category by geography. The vast majority (95%) of respondents mentioned at least one “coming out and presentation” event, and 85% mentioned at least one education, career, or financial event. All but three categories (“community involvement,” “culture and new information,” and “enter parenthood”) were discussed by over half of the respondents. We examined whether there were statistically significant differences in whether respondents mentioned each event, looking first at these descriptive statistics and then considering logistic regression (controlling for age,

race/ethnicity, sex at birth, geography, current gender identity, and total number of events). In this paragraph, we only discuss results that were statistically significant in these descriptive tables, noting that the full logistic models were generally in line with these results. Regarding age, compared to the youngest age group (18-24), more adults in the oldest age group (45 years and older) included a “community involvement,” an “education, career, and finances,” an “ongoing family and friend relationships,” and a “place of residence” event on their timeline. Compared to this youngest age group, respondents in the the middle age group (ages 25-44) were more likely to have mentioned at least one event in the “place of residence” and the “rejection and violence” categories. All racial/ethnic groups were more likely than Black adults to have included an event within the “medical transition” category. Compared to Black adults, fewer Hispanic adults included an event within the “begin new relationship” category. More respondents who identified as another race/ethnicity included an event within the “place of residence” category, and fewer identified an event within the “rejection and violence” category. Compared to respondents assigned female at birth, respondents assigned male at birth were more likely to include at least one event in the “community involvement,” “culture and new information,” and “place of residence” categories. And finally, regarding current gender identity, fewer respondents who identified as genderqueer or another gender identity included as least one event in the “medical transition” category, compared to respondents who identified as man and/or FTM. Also compared to respondents who identified as man and/or FTM, respondents who identified as woman and/or MTF were more likely to include an event categorized as “community involvement” and “culture and new information.”

Table 3: Proportion of Respondents with at Least One Event in Each Category, by Age, Race/ethnicity, Sex at Birth, and Current Gender Identity

	Total	Age 16-24	Age 25-44	Age 45+	Black	Hispanic	Other	White	Female at Birth	Male at Birth	Man or FTM	Woman or MTF	Gender queer or other
Begin new relationship	0.66	0.65	0.56	0.77	0.79	0.47*	0.60	0.71	0.62	0.69	0.64	0.71	0.62
Coming out and presentation	0.95	0.94	1.00	0.92	0.95	0.88	0.93	1.00	0.95	0.96	0.96	0.97	0.92
Community involvement	0.48	0.38	0.44	0.65*	0.53	0.53	0.40	0.47	0.38	0.58 ⁺	0.40	0.62 ⁺	0.38
Culture and new information	0.45	0.35	0.52	0.52	0.32	0.47	0.40	0.54	0.33	0.56*	0.31	0.62*	0.38
Education, career, and finances	0.85	0.79	0.80	0.96 ⁺	0.79	0.82	0.80	0.91	0.87	0.82	0.84	0.91	0.77
Enter parenthood	0.38	0.35	0.44	0.35	0.42	0.47	0.33	0.32	0.44	0.31	0.44	0.38	0.31
Extracurriculars	0.58	0.59	0.44	0.69	0.58	0.47	0.60	0.62	0.54	0.62	0.48	0.65	0.58
Health	0.53	0.44	0.52	0.65	0.47	0.59	0.40	0.59	0.51	0.56	0.52	0.53	0.54
Medical transition	0.68	0.62	0.76	0.69	0.42	0.76*	0.73 ⁺	0.76*	0.67	0.69	0.88	0.79	0.35***
Ongoing family and friend relationships	0.67	0.56	0.72	0.77 ⁺	0.79	0.76	0.53	0.62	0.69	0.67	0.60	0.71	0.69
Place of residence	0.55	0.32	0.64*	0.77**	0.42	0.47	0.80*	0.56	0.46	0.64 ⁺	0.56	0.71	0.35
Rejection and violence	0.57	0.44	0.76*	0.56	0.68	0.65	0.40 ⁺	0.54	0.55	0.60	0.50	0.62	0.58

⁺ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Table 4 shows the gender identity importance ratings from respondents for each event by category, comparing the past to the future. For the total column, which combines past and future, these ratings are statistically similar across categories with one exception—“medical transition” with a mean rating of 3.56—is rated as significantly more important than events within the other categories ($p < .01$). Within the past categories, “medical transition” (mean: 3.64) is rated as the most important of the other past category events ($p < .001$), whereas “education, career, and finances” (mean: 2.93) and “rejection and violence” (mean: 2.82) are rated as the least important for gender identity development ($p < .10$ and $p < .05$, respectively). Among the future categories, events within “place of residence” (mean: 2.69) are rated as least important ($p < .05$), but the other ratings of the categories were not statistically different from one another.

Comparing ratings for the past to the future, in general, the mean rating for past events is 3.10 and the mean rating for future events is 3.22, in terms of how important for gender identity development. This is marginally statistically significant ($p < .10$), such that future events are rated as more important than past events. Within the categories, the only differences were seen around “education, career, and finances,” in which future events within this category were rated as more important for gender identity development than past events within this category.

Table 4. Importance for Gender Development; Mean and Standard Deviation ($N=87$)

Category	Importance for Gender Identity Development		
	Total	Past	Future
Begin new relationship	3.10 (1.05)	3.04 (1.06)	3.32 (0.99)
Coming out and presentation	3.16 (1.04)	3.15 (1.03)	3.25 (1.07)
Community involvement	3.19 (1.07)	3.15 (1.10)	3.26 (1.02)
Culture and new information	3.20 (1.11)	3.20 (1.11)	-
Education, career, and finances	3.06 (1.10)	2.93 (1.15)	3.27* (0.97)
Enter parenthood	2.95 (1.19)	2.77 (1.35)	3.04 (1.12)
Extracurriculars	3.21 (0.94)	3.17 (0.98)	3.45 (0.52)
Health	3.05 (1.18)	3.11 (1.05)	2.77 (1.69)
Medical transition	3.56 (0.75)	3.64 (0.67)	3.44 (0.84)
Miscellaneous	3.01 (1.10)	3.00 (1.14)	3.06 (0.94)
Ongoing family and friend relationships	3.02 (1.12)	3.02 (1.17)	3.05 (0.90)
Place of residence	2.91 (1.14)	2.96 (1.16)	2.69 (1.01)

Rejection and violence	2.82 (1.13)	2.82 (1.13)	--
------------------------	----------------	----------------	----

As the next step, we considered the timing of these events, in both the past and anticipated future. First, we considered the average age for the past events within each category. Next we considered the relative distributions of events within each category. These are shown in Figure 2, which plots each event within each category. The size of each bubble reflects the relative number of events at that age compared to events at other ages within the same category. Events within the category, “rejection and violence,” are mentioned on average at the youngest age (mean: 18.27 years). Further analysis confirms that this is significantly earlier/younger than events in other categories ($p < .001$). By comparison, events within the category, “community involvement,” are mentioned on average at the oldest age (mean: 41.05 years), which is also significantly later/older than events in other categories ($p < .001$). Events within “begin new relationship,” “coming out and presentation,” “culture and new information,” and “extracurriculars” are—on average—mentioned in the respondents’ early 20s, whereas “education, career, and finances,” “health,” “ongoing family and friend relationships,” and “place of residence” are on average mentioned in the respondents’ mid- to late-20s. “Entering parenthood” and “medical transition” were—on average—mentioned in the respondent’s 30s. These average ages are denoted in Figure 2 as a small blue dot on each event line.

Figure 2 also indicates the general distribution of these events, by age mentioned. Notably, “ongoing family and friend relationships” is fairly evenly distributed across the ages, whereas “begin new relationship” and “enter parenthood” is largely concentrated in the respondent’s 20s and 30s. “Education, career, and finances” is also fairly evenly distributed across ages, but there is a concentration around 18, when many respondents discussed graduating high school and/or

entering college. “Culture and new information” and “coming out and presentation” were both more often discussed around childhood, adolescence, and early adulthood, although they were still occasionally mentioned in mid- and later-adulthood. Also, “medical transition” events typically begin to be mentioned in early adulthood but continue through the end of the timelines.

Figure 2: Relative Distribution of Past Events by Age and Category

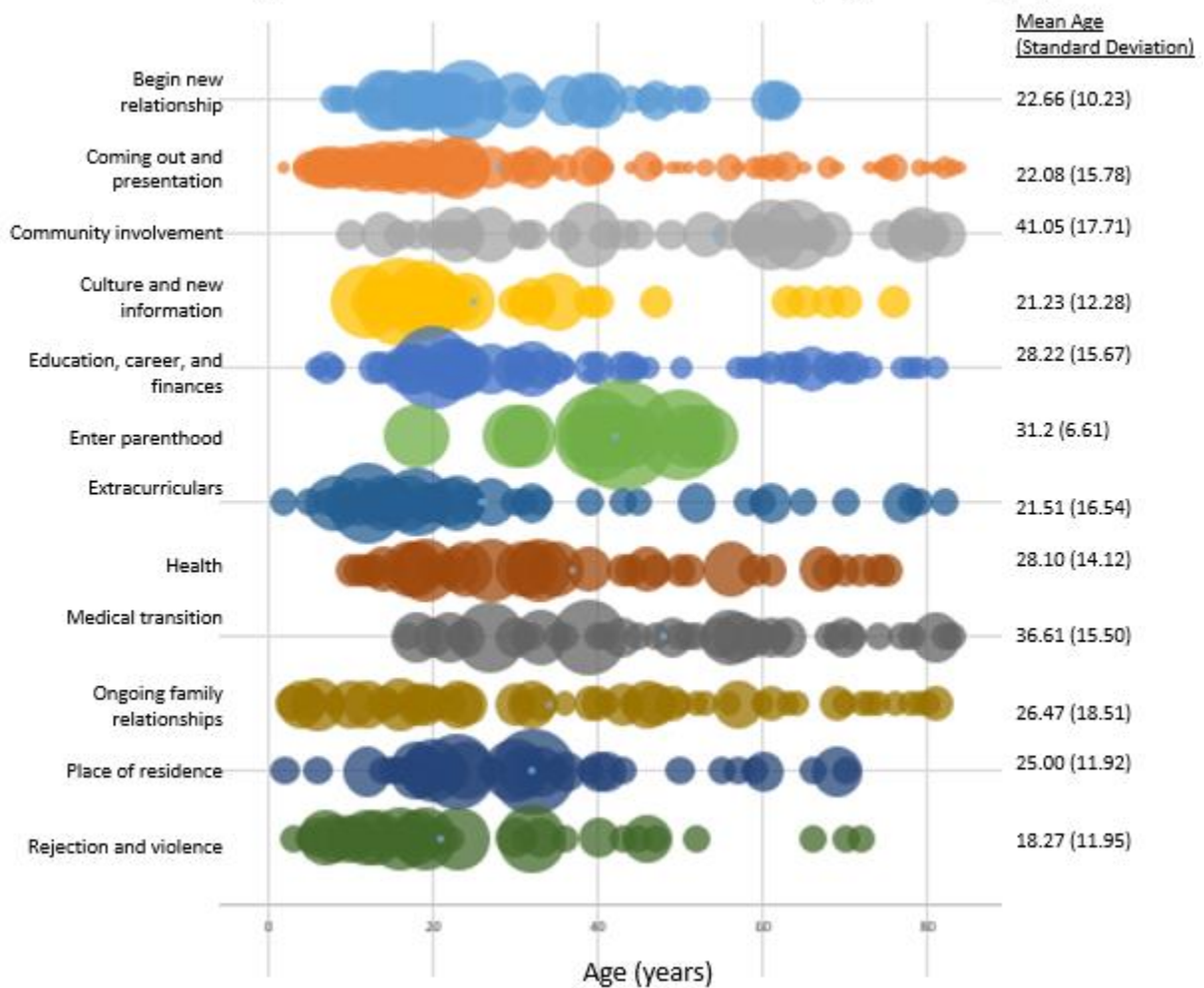
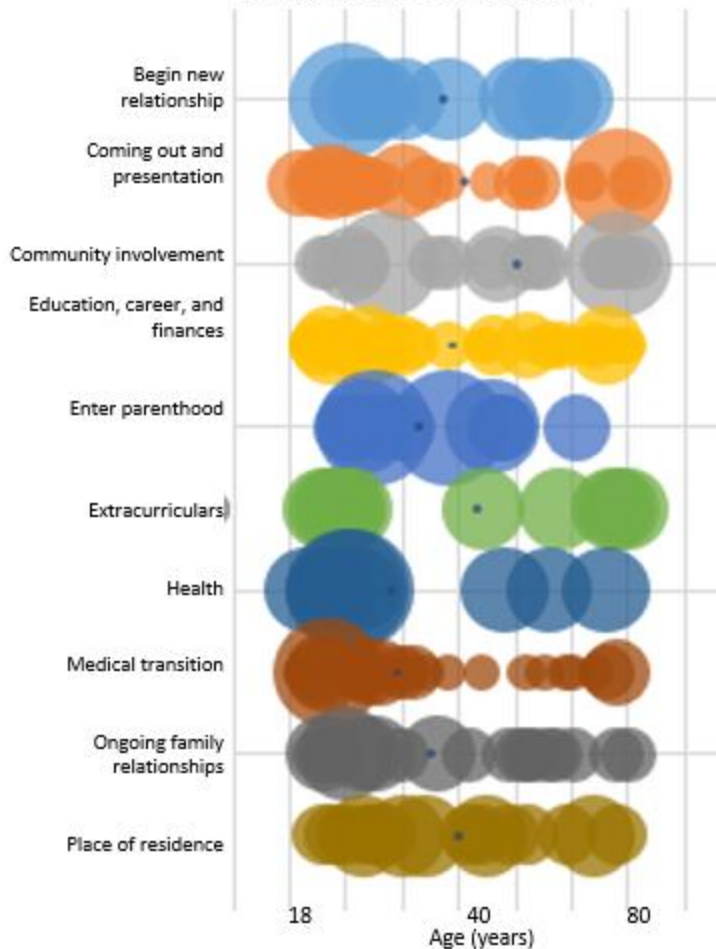


Figure 3 shows the future events by age, keeping in mind that about one third of the future events did not have a designated age. As in Figure 2, the average ages are denoted in as a small blue dot on each event line. These ages are also influenced by the age of the respondent at the time of the interview, which is why one these future timelines begin at age 18. Some of these lines

Figure 3: Relative Distribution of Future Events by Age and Category



suggest a continuation of trends that begun in the past events timelines. For example, “community involvement” is both more often seen at older ages in the past timelines and is also frequently discussed in the future, with a surge at the oldest future ages. “Medical transition,” “begin new relationship,” and “health” are largely concentrated in early adulthood futures, representing that these are viewed as a key priority for the immediate future.

We also considered these future

events in terms of number of years since interview, which confirmed that these three categories tended to be viewed as more immediate goals. Additionally, “place of residence” and “ongoing family and friend relationships” are steady presences in the future timelines, as they were in the past timelines.

Future Analysis Plans

Moving forward, we plan to focus our analysis on disaggregating the subcategories within “coming out and presentation,” given the number and diversity of events within this category. We will conduct a more thorough comparison of the events in the past and future categories, using

qualitative methods for timeline analysis and statistical comparisons (see Thomeer et al. 2018 for examples). We will also consider the number of events and importance of events by the sociodemographic characteristics.

Discussion and Conclusion

In this analysis, using an innovative dataset—Project AFFRIM—and method—lifeline analysis—we considered the types of events transgender and gender nonconforming (TGNC) people identified as important to their own gender identity development, the timing of these events, and how these events varied by age and cohort, race/ethnicity, geographic location, sex at birth, and gender identity. This study is an extension of Bockting and Coleman’s (2007) developmental stage model for transgender identity development. Like Bockting and Coleman, we identify that TGNC identity development encompasses more than just traditional ideas of “coming out” or “transitioning.” Respondents identify a wide-range of events, including events around their own educational attainment and experiences, family support and rejection, financial and career milestones and goals, moving to new locations, friendship and intimate relationship formation, among many others. Additionally within these categories are events around stigmatization and rejection, yet these make up a small proportion of events and are concentrated within the past, rather than anticipated for the future. Instead, future events deemed as important for TGNC identity development largely consist of positive and hopeful goals. For example, education, career, and finances was the largest category in the future, with these events viewed as important to respondents for their future TGNC identity development. Notably, futures also include some goals of “medical transition” events, although here there is strong variation by gender identity and race/ethnicity, with genderqueer and Black respondents least likely to discuss these “medical transition” events as part of their gender identity development.

In conclusion, we suggest that future models of TGNC development look beyond traditional categories to categories identified by respondents themselves. By looking at respondents' own identified events, giving them full liberty to express whichever events they denoted as important, we are better able to move beyond the traditional focus on stressors, like stigma and violence, to more examples of resilience and even the seemingly mundane. Our analysis of these respondent-driven timelines which include diverse and multiple event highlight that gender is complex, encompassing both individual and institutional factors. We also argue that researchers should continue to examine the role of the future, as these anticipated futures have key implications for a person's current view of their own identity and desires. And finally, we point to the importance of remembering the intersecting identities for TGNC individuals, not trying to fit all within one model. In addition to the wide range of gender identity diversity within our sample and the broader community, respondents also live in geographically distinct places, were born into different historical contexts through their cohort, and have diverse racial/ethnic identities. Each is important in shaping their past and future TGNC identity development.

Works Cited

- Agnew, Robert. 2002. "Experienced, Vicarious, and Anticipated Strain: An Exploratory Study on Physical Victimization and Delinquency." *Justice Quarterly* 19(4):603-32.
- Axinn, William G, Lisa D Pearce and Dirgha Ghimire. 1999. "Innovations in Life History Calendar Applications." *Social Science Research* 28(3):243-64.
- Barr, Sebastian M, Stephanie L Budge and Jill L Adelson. 2016. "Transgender Community Belongingness as a Mediator between Strength of Transgender Identity and Well-Being." *Journal of Counseling Psychology* 63(1):87.
- Bockting, Walter. 2014. "The Impact of Stigma on Transgender Identity Development and Mental Health." Pp. 319-30 in *Gender Dysphoria and Disorders of Sex Development*: Springer.
- Bockting, Walter, Eli Coleman, Madeline B Deutsch, Antonio Guillamon, Ilan Meyer, Walter Meyer III, Sari Reisner, Jae Sevelius and Randi Ettner. 2016. "Adult Development and Quality of Life of Transgender and Gender Nonconforming People." *Current Opinion in Endocrinology, Diabetes, and Obesity* 23(2):188.
- Bockting, Walter O and Eli Coleman. 2007. "Developmental Stages of the Transgender Coming out Process: Toward an Integrated Identity." *Principles of Transgender Medicine and Surgery*:185-208.
- Bockting, Walter O, Michael H Miner, Rebecca E Swinburne Romine, Autumn Hamilton and Eli Coleman. 2013. "Stigma, Mental Health, and Resilience in an Online Sample of the Us Transgender Population." *American Journal of Public Health* 103(5):943-51.
- Bockting, WO. 2008. "Psychotherapy and the Real-Life Experience: From Gender Dichotomy to Gender Diversity." *Sexologies* 17(4):211-24.

- Collins, Patricia Hill. 2002. *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment*: Routledge.
- Conron, Kerith J, Gunner Scott, Grace Sterling Stowell and Stewart J Landers. 2012. "Transgender Health in Massachusetts: Results from a Household Probability Sample of Adults." *American Journal of Public Health* 102(1):118-22.
- de Vries, Brian. 2013. "Lifelines: A Review of Content and Context." *The International Journal of Reminiscence and Life Review* 1(1):31-35.
- de Vries, Brian, Allen J LeBlanc, David M Frost, Eli Alston-Stepnitz, Rob Stephenson and Cory R Woodyatt. 2017. "The Relationship Timeline: A Method for the Study of Shared Lived Experiences in Relational Contexts." *Advances in Life Course Research* 32:55-64.
- Dohrenwend, Bruce P. 2006. "Inventorying Stressful Life Events as Risk Factors for Psychopathology: Toward Resolution of the Problem of Intracategory Variability." *Psychological Bulletin* 132(3):477.
- Elder, Glenn H. Jr., M. K. Johnson and Robert Crosnoe. 2003. "The Emergence and Development of Life Course Theory." Pp. 3-19 in *Handbook of the Life Course*, edited by J. T. Mortimer and M. J. Shanahan. New York: Kluwer Academic/Plenum Publishers.
- García, San Juanita. 2018. "Living a Deportation Threat: Anticipatory Stressors Confronted by Undocumented Mexican Immigrant Women." *Race and Social Problems* 10(3):221-34.
- Grace, Breanne L, Rajeev Bais and Benjamin J Roth. 2018. "The Violence of Uncertainty—Undermining Immigrant and Refugee Health." *The New England Journal of Medicine* 379(10):904-05.
- Herbst, Jeffrey H, Elizabeth D Jacobs, Teresa J Finlayson, Vel S McKleroy, Mary Spink Neumann, Nicole Crepez and HIV/AIDS Prevention Research Synthesis Team. 2008.

- "Estimating Hiv Prevalence and Risk Behaviors of Transgender Persons in the United States: A Systematic Review." *AIDS and Behavior* 12(1):1-17.
- Holmes, Thomas H and Richard H Rahe. 1967. "The Social Readjustment Rating Scale." *Journal of Psychosomatic Research* 11(2):213-18.
- Institute of Medicine. 2011. *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*. Washington, DC: National Academy of Sciences.
- Kuper, Laura E, Robin Nussbaum and Brian Mustanski. 2012. "Exploring the Diversity of Gender and Sexual Orientation Identities in an Online Sample of Transgender Individuals." *Journal of Sex Research* 49(2-3):244-54.
- Meyerowitz, Joanne. 2002. *How Sex Changed: A History of Transsexuality in the United States*. Cambridge, MA: Harvard University Press.
- Monat, Alan, James R Averill and Richard S Lazarus. 1972. "Anticipatory Stress and Coping Reactions under Various Conditions of Uncertainty." *Journal of Personality and Social Psychology* 24(2):237.
- Pearlin, Leonard I. and Alex Bierman. 2013. "Current Issues and Future Directions in Research into the Stress Process." in *Handbook of the Sociology of Mental Health*. New York: Springer.
- Rappaport, Herbert, Kathy Enrich and Arnold Wilson. 1985. "Relation between Ego Identity and Temporal Perspective." *Journal of Personality and Social Psychology* 48(6):1609.
- Richards, Christina, Walter Pierre Bouman, Leighton Seal, Meg John Barker, Timo O Nieder and Guy T'Sjoen. 2016. "Non-Binary or Genderqueer Genders." *International Review of Psychiatry* 28(1):95-102.

Settersten, Richard A. Jr. 1999. *Lives in Time and Place: The Problems and Promises of Developmental Science*. Amityville, NY: Baywood Publishing Company, Inc.

Thomeer, Mieke Beth, Allen J LeBlanc, David M Frost and Kayla Bowen. 2018. "Anticipatory Minority Stressors among Same-Sex Couples: A Relationship Timeline Approach." *Social Psychology Quarterly* 81(2):126-48.

Vidal-Ortiz, Salvador. 2008. "Transgender and Transsexual Studies: Sociology's Influence and Future Steps." *Sociology Compass* 2(2):433-50.