Douglas College Psychology Society
LGBT2SQ+ Workshop

Facilitated by Brett Collins

Materials Collected By:

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INTRODUCTION

This workshop aims to supply attendees with a foundation of knowledge regarding LGBT2SQ+ issues and experiences that will inform their work in the mental health care field.

Schedule

1. Introductions & Self-locations
2. What is Safe Space? Is it desirable in this setting?
   a. Booklet: Classroom Discussion and Research Ethics
3. Sex, Gender, & Gender Identity
   a. Booklet: Intersectional Analysis: Rethinking the Binaries
4. Terminology - History, Politics, & Variation
   a. Handout: Queer Terminology from A to Q, QMUNITY
   b. Booklet: Definitions of Gender
5. Pronouns - Activity
6. General Case Studies
7. Confirmed Break
8. Mental Health
   b. Handout: Standards of Care, v.7; WPATH
   c. Handout: G&M Article
9. Intersections
   a. Handout: “Two Spirit . . .”, UNYA
   b. Handout: Answering Nature's Call, UBC
Classroom Discussion & Research Ethics

We recognise that we come with many different experiences and perspectives and respect our differences even as we can not know in advance precisely what they are and the full story of how they are affecting how we relate to one another.

We will treat disagreements of opinion as an opportunity to learn from one another, rather than as a showdown in which one person wins and others lose. When we do so, no judgement or shaming will be done for the expression of opinion regardless of their alignment with our own views and beliefs.

We will listen actively and practice good interpersonal communication skills.

We will allow one another to finish speaking and wait for others to give their opinions.

We will speak from our own experience and refrain from speaking for the other.

We will avoid ‘othering’ — constructing dialogue around “us” and “them”. In doing so, we will avoid marginalising any group and the power dynamics that are created, enforced and activated as a result of marginalisation.

We will be attentive to the power of naming.

We will refrain from assuming that individual opinions reflect the beliefs of the group. In order to do so, we will acknowledge where and when our own experiences are being presented and speak from our personal position.

We will observe appropriate and respectful behaviour should be observed outside of class as well.

We will respect people’s silence if they wish to be silent, respect those who wish to speak and make time for many voices to be heard.

We will address in a timely and respectful way our ongoing struggle to live up to all of the above
stated goals and be open to the possibility that a safe learning environment is one in which risk, mistakes, and change are recognised not as the failure of education, but as integral parts of the process.

**Intersectional Analysis: Rethinking the Binaries**

Sex

![Sex Diagram]

Gender Identity

![Gender Identity Diagram]

Gender Expression

![Gender Expression Diagram]

Sexual Orientation

![Sexual Orientation Diagram]

*All of these can change over the life course.*
Various Definitions of Gender

Queer Dictionary (tumblr):

Gender is the name for a grouping of behavioural and social norms that are applied to people based on the gender they are perceived as having. The conduct shown by people in light of these norms, this accountability is not produced by gender: it is gender. Gender is thus also someone’s identity: the gender someone identifies with (and as) forms the internal framework for that person’s behaviour.

Court Smith (Oregon State U.)

the socially constructed roles, behaviors, activities, and attributes that a culture considers appropriated for men and women.

INSTRAW

. . . gender is an acquired identity that is learned, changes over time, and varies widely within and across cultures. Gender is relational and refers not simply to women or men but to the relationship between them . . .

A Marxist Definition

A system by which labour is divided. Often based on judgements of relational value, e.g., whether it is worth the risk of losing a “woman” in the risky task of hunting as compared to losing a “man”.

What unites these definitions? What sets them apart?
Suggested Reading

http://suggestedreading.bitballoon.com - a small website with suggested resources


THE TRANS* AND GENDER VARIANT INCLUSION WORKING GROUP. (2014). Building a Path to Parks & Recreation for All: Reducing Barriers for Trans* & Gender Variant Community Members


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Queer Terminology
- from A to Q

Ally: A heterosexual and/or cisgender and/or cissexual person who supports and celebrates queer identities, interrupts and challenges queer-phobic and heterosexist remarks and actions of others, and willingly explores these biases within themselves. Coming Out: Or, ‘coming out of the closet,’ is the process of becoming aware of one’s queer sexual orientation, one’s 2-spirit or trans* identity, accepting it, and telling others about it. This is an ongoing process that may not include everybody in all aspects of one’s life. ‘Coming out’ usually occurs in stages and is a non-linear process. An individual may be ‘out’ in only some situations or to certain family members or associates and not others. Some may never ‘come out’ to anyone beside themselves. Gender Binary: The view that there are only two totally distinct, opposite and static genders (masculine and feminine) to identify with and express. While many societies view gender through this lens and consider this binary system to be universal, a number of societies recognize more than two genders. Across all societies there are also many folk who experience gender fluidly, identifying with different genders at different times. Homophobia: Fear or hatred of, aversion to, and discrimination against homosexuals or homosexual behaviour. There are many levels and forms of homophobia, including cultural/institutional homophobia, interpersonal homophobia, and internalized homophobia. Many forms of homophobia are related to how restrictive binary gender roles are (see ‘oppositional sexism’). An example of this might be a lesbian who is harassed with homophobic language for being perceived to be masculine. Many of the problems faced by lesbian, gay, bisexual and transgender people, including health and income disparities, stem from homophobia and heterosexism. See also biphobia, lesbophobia, transfobia and LGBT-phobia. LGBT: Acronym used to refer to Lesbian, Gay, Bisexual, and Transgender people, interchangeable with GLBT, LGTB, etc. Additional letters are sometimes added to this acronym, such as LGBTIQQ2S to refer to Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Questioning and 2 Spirit folk. Making fun of the length

This glossary was developed by QMUNITY staff and volunteers as a suggested guide for inclusive language regarding queer and trans* issues. Queer terminology is fluid and evolving; the appropriateness, meaning and impact of this language continually changes over time. We also acknowledge that power, privilege and oppression exist in the context of space and time and may be experienced differently by individuals.

If you would like more information about, or to suggest changes to this glossary, please contact QMUNITY at education@qmunity.ca - we welcome your comments!

It is important to highlight that the individual is always the expert on how they identify and on what language they consider respectful and inclusive of themselves. Always work to avoid making assumptions about people’s identities!

QMUNITY
BC’S QUEER RESOURCE CENTRE
Ally: A heterosexual and/or cisgender and/or cissexual person who supports and celebrates queer identities, interrupts and challenges queer-phobic and heterosexist remarks and actions of others, and willingly explores these biases within themselves.

Androgyne: A person identifying and/or expressing gender outside of the gender binary. Other terms used include gender variant, genderqueer, and gender non-conformist.

Asexual: Someone who does not experience sexual desire for people of any gender. Some asexual people desire romantic relationships, while others do not. Asexuality can be considered a spectrum, with some asexual people experiencing desire for varying types of intimacy. This desire may fluctuate over time. Asexuality is distinct from celibacy, which is the deliberate refraining from sexual activity. Asexual people experience high levels of invisibility and trivialization.

Biphobia: Fear or hatred of, aversion to, and discrimination against bisexuals and bisexual behaviour. Biphobia exerts a powerful, negative force on the lives of bisexual people. Some examples of biphobia in action are disparaging jokes, verbal abuse or acts of violence targeted at bisexual people, or the dismissal of bisexuality as an inferior, invalid or irrelevant expression of sexuality. Bisexual people often face biphobia and discrimination in both queer and non-queer communities.

Bisexual: An individual who is attracted to, and may form sexual and romantic relationships with women and men. A bisexual person may feel equally attracted to each gender, or may experience stronger attractions to one gender while still having feelings for another; this ratio of attraction may vary over time. Bisexuality, like homosexuality and heterosexuality, may be either a period in the process of self-discovery, or a stable, long-term identity. It is not necessary for somebody to have or have had sex with both men and women to identify as bisexual.

Butch: ‘Butch’ is a word that some queer people use to describe gender expression and/or social and relationship roles that are perceived by many as being masculine.

Ciscentrism: A system of attitudes, bias and discrimination in favour of cisgender identities that marginalizes and renders invisible trans* people and treats their needs and identities as less important than those of cisgender people.

Cisgender: Identifying with the same gender that one was assigned at birth. A gender identity that society considers to match the biological sex assigned at birth. The prefix cis- means “on this side of” or “not across from.” A term used to call attention to the privilege of people who are not trans*.

Cissexism: The belief that cisgender and cissexual people represent the ‘norm’ and so are superior to trans* folk. This results in a systemic oppression that privileges cisgender and cissexual folk over transgender and trans* folk.

Cissexual: Identifying with the same biological sex that one was assigned at birth.
**Coming Out:** Or, ‘coming out of the closet,’ is the process of becoming aware of one’s queer sexual orientation, one’s 2-Spirit or trans* identity, accepting it, and telling others about it. This is an ongoing process that may not include everybody in all aspects of one’s life. ‘Coming out’ usually occurs in stages and is a non-linear process. An individual may be ‘out’ in only some situations or to certain family members or associates and not others. Some may never ‘come out’ to anyone beside themselves.

**Cross-dresser:** Refers to people who wear clothing traditionally associated with a different gender to that which they identify with. Some prefer to cross-dress privately, while others cross-dress publicly all or part of the time. Cross-dressers may or may not have a gender identity related to the clothing they are wearing. Some cross-dressers identify trans* while others do not. ‘Cross-dresser’ has generally replaced the term ‘transvestite’ (see below for definition).

**Drag:** Refers to people who dress in a showy or flamboyant way that exaggerates gendered stereotypes, often for entertainment purposes. ‘Drag’ is a term that is often associated with gay/lesbian communities and is often replaced with ‘Drag King’ and ‘Drag Queen.’ Some people who perform professionally outside gay/lesbian communities prefer the term ‘male/female impersonator.’

**Dyke:** A lesbian. This term can be used as an insult, or reclaimed by lesbians as a positive term.

**Dag, faggot:** A gay man. This term can be used as an insult, or reclaimed by gay men as a positive term. Derived from the word faggot (literally "small bundle of sticks"), an allusion to the Inquisition-era practice of burning people at the stake for suspected homosexual practices.

**Female-to-Male Spectrum (FTM):** Generally used to refer to anyone assigned female at birth, but who identifies or expresses their gender as male all or part of the time. Some people prefer the term ‘transitioning to male’, as this does not imply that they were once female-identified.

**Femme:** A term that some queer people use to describe gender expression and/or social and relationship roles that are perceived by many as being feminine.

**Gay:** A person who is mostly attracted to those of the same gender; often used to refer to men only.

**Gender:** The social construction of concepts such as masculinity and femininity in a specific culture in time. It involves gender assignment (the gender designation of someone at birth), gender roles (the expectations imposed on someone based on their gender), gender attribution (how others perceive someone’s gender), and gender identity (how someone defines their own gender). Fundamentally different from the sex one is assigned at birth.

**Gender Attribution / Gender Perception:** The process of making assumptions about another person’s gender, based on factors such as choice of dress, voice modulation, body shape, etc.
A related term is ‘reading,’ which refers to the process where factors such as someone’s body shape, voice, gender expression, etc. are used to make assumptions about that someone’s gender identity, sex assigned at birth, or sexual orientation. Making assumptions is a major cause of exclusion and disrespect towards others.

**Gender Binary:** The view that there are only two totally distinct, opposite and static genders (masculine and feminine) to identify with and express. While many societies view gender through this lens and consider this binary system to be universal, a number of societies recognise more than two genders. Across all societies there are also many folk who experience gender fluidly, identifying with different genders at different times.

**Gender Expression:** How one outwardly manifests gender; for example, through name and pronoun choice, style of dress, voice modulation, etc. How one expresses gender might not necessarily reflect one’s actual gender identity.

**Gender Identity:** One’s internal and psychological sense of oneself as male, female, both, in between, or neither. People who question their gender identity may feel unsure of their gender or believe they are not of the same gender as their physical body. Gender non-conforming, gender variant, or genderqueer are some terms sometimes used to describe people who don’t feel they fit into the categories of male or female. ‘Bi-gender’ and ‘pan-gender’ are some terms that refer to people who identify with more than one gender. Often bi-gender and pangender people will spend some time presenting in one gender and some time in the other. Some people choose to present androgynously in a conscious attempt to challenge and expand traditional gender roles even though they might not question their gender identity.

**Gender Non-Conforming:** This term refers to people who do not conform to society’s expectations for their gender roles or gender expression. Some people prefer the term ‘gender-variant’ among other terms.

**Gender Policing:** The imposition or enforcement of normative gender expressions on an individual who is perceived as not adequately performing, through appearance or behaviour, the gender that was assigned to them at birth. Gender policing can be done by peers, family, media, educators, institutions and others. Gender policing may occur through ridicule, trivialization, exclusion or harassment of, or violence towards, gender non-conforming folk. It may also occur through social messages that privilege cisgender expression and gender roles.

**Gender Roles:** The socially constructed and culturally specific behaviours such as communication styles, careers, family roles, and more, imposed on people based on their biological sex assigned at birth. It is important to note that gender interpretations and expectations vary widely among cultures and often change over time. It is important to note that some cultures have more than two gender roles.

**Genderqueer:** A term under the trans* umbrella which refers to people who identify outside of the male-female binary. Genderqueer people may experience erasure if they are perceived as cisgender. Genderqueer people who are perceived as genderqueer are often subjected to gender policing. Related but not interchangeable terms include ‘gender outlaw’, ‘gender variant’, ‘gender non-conformist’, ‘third gender’, ‘bigender’, and ‘pangender’.
Heteroflexible and Homoflexible: A term used by some to identify that they are primarily attracted to one gender but open to possible attractions or relationships with people of other genders.

Heteronormative: Refers to social roles and social structures that reinforce the idea that heterosexuality is the presumed norm and is superior to other sexual orientations.

Heterosexism: A system of attitudes, bias, and discrimination in favor of opposite-sex sexuality and relationships. This includes the assumption that everyone is, or should be, heterosexual and that heterosexuality is inherently superior to homosexuality or bisexuality. Heterosexism also refers to organizational discrimination against non-heterosexuals or against behaviors not stereotypically heterosexual. One example of this might be a girl who is told that when she grows up she will have a husband and not presented with any other options to consider.

Heterosexual: A person who primarily feels physically and emotionally attracted to people of the ‘opposite’ gender; also sometimes referred to as ‘straight’.

Homophobia: Fear or hatred of, aversion to, and discrimination against homosexuals or homosexual behaviour. There are many levels and forms of homophobia, including cultural/institutional homophobia, interpersonal homophobia, and internalized homophobia. Many forms of homophobia are related to how restrictive binary gender roles are (see ‘oppositional sexism’). An example of this might be a lesbian who is harassed with homophobic language for being perceived to be masculine. Many of the problems faced by lesbian, gay, bisexual and transgender people, including health and income disparities, stem from homophobia and heterosexism. See also biphobia, lesbophobia, transphobia and LGBT-phobia.

Homosexual: A person who is mostly attracted to people of their own gender. Because this term has been widely used negatively and/or in a cold and clinical way, most homosexuals prefer the terms ‘lesbian’, ‘gay’ or ‘queer’.

Inclusive Language: The use of gender non-specific language (e.g. ‘partner’ instead of ‘husband’, or ‘they’ or ‘ze’ instead of ‘she’) to avoid assumptions around gender identity and sexual orientation, and to enhance the accessibility of information and services. Educational, social service, and health professionals are especially encouraged to use inclusive language until advised otherwise by the person they are talking to or about.

Internalized Homophobia: The experience of shame, guilt, or self-hatred in reaction to one’s own feelings of sexual attraction for a person of the same gender.

Intersex: Intersex people may have: external genitalia which do not closely resemble typical male or female genitalia, or which have the appearance of both male and female genitalia; the genitalia of one sex and the secondary sex characteristics of another sex; or a chromosomal make-up that is neither XX or XY but may be a combination of both. ‘Intersex’ has replaced the term ‘hermaphrodite’, which is widely considered to be outdated, inaccurate and offensive. An intersex person may or may not identify as part of the trans* community, however the terms ‘intersex’, ‘transsexual’ and “trans” are distinct and should not be used interchangeably.
LGBT: Acronym used to refer to Lesbian, Gay, Bisexual, and Transgender people, interchangeable with GLBT, LGTB, etc. Additional letters are sometimes added to this acronym, such as LGBTIQ2S to refer to Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Questioning and 2 Spirit folk. Making fun of the length of this acronym can have a trivializing or erasing effect on the group that longer acronyms seek to actively include.

LGBT-phobia: A term used to include all forms of homophobia, lesbophobia, biphobia and transphobia; queerphobia is also used.

Lesbian: A woman who is primarily romantically and sexually attracted to women. The term originates from the name of the Greek island of Lesbos which was home to Sappho, a poet, teacher, and a woman who loved other women. Although not as common, sometimes the term ‘gay woman’ is used instead.

Lesbophobia: Fear or hatred of, aversion to, and discrimination against lesbians or lesbian behaviour. This can take place from outside of the queer community, but may also be a product of stereotyping, internalized queerphobia, or misogyny within the queer community. An example of this may be a gay man who believes that all lesbians are aggressive.

Male-to-Female Spectrum (MTF): Generally used to refer to anyone assigned male at birth but who identifies or expresses their gender as a female all or part of the time. Some people prefer the term ‘transitioning to female’, as this does not imply that they were once male-identified.

Metrosexual: Often mistakenly thought to refer to a sexual orientation, this term is in fact a mix of the words ‘heterosexual’ and ‘metropolitan’. It refers to a well-groomed style popular with non-queer men that was previously stereotypically associated with queer men.

Oppositional Sexism: The belief that masculinity and femininity are rigid, mutually exclusive, categories. Also the idea that men should not display any behaviours or characteristics commonly associated with women, and vice versa.

Outing someone: Accidentally or intentionally publicly revealing another person’s sexual orientation or gender identity without their permission. This can cause social, physical, emotional, or economic danger for the person being ‘outed.’ Outing someone can sometimes be done as an act of hate.

Pangender: Refers to people who identify and/or express the many shades of gender. Multi-gender and omni-gender are other terms that may be used.

Panphobia: The fear and dislike of pansexuality. Panphobia exerts a powerful, negative force on the lives of pansexual people. Some examples of panphobia in action are disparaging jokes, verbal abuse, acts of violence targeted at pansexual people, or the dismissal of pansexuality as an inferior, invalid or irrelevant expression of sexuality. Pansexual people often face panphobia and discrimination in both queer and non-queer discourse. (This word also has a different and separate meaning: an irrational fear of everything.)
**Pansexual**: An individual who is attracted to and may form sexual and romantic relationships with men, women, and people who identify outside the gender binary. Omnisexual is another term that can be used.

**Passing/To Pass**: A term sometimes used to refer to the state of an LGBT person not being visibly recognizable as LGBT. This term is most commonly used in relation to trans* people. People who ‘pass’ may experience less queer-phobia and discrimination. Some LGBT people consider ‘passing’ to be very important for them, while others feel that choosing not to pass is an act of rejecting heterosexism, cissexism and ciscentricism. ‘Passing’ is a contested term since it may connote ‘a passing grade’ or ‘passing something illegitimate off’, or it may imply external pressure to strive towards being ‘read’ a certain way (See: Gender attribution).

**Patriarchy**: Patriarchy refers to a social system where the bulk of power, authority, and control in society is held by men. This assigns greater importance to male identities and issues than to people of other gender identities.

**Privilege**: Refers to the social, economic and political advantages or rights held by people from dominant groups on the basis of gender, race, sexual orientation, social class, etc. For example, men often experience privilege that people of other genders do not have.

**QPOC**: An acronym for Queer People Of Colour. Another term used is QTIPOC (Queer, Transgender, and Intersex People of Colour). Queer people of colour often experience intersecting oppressions on the basis of race, gender, sexual orientation and other factors.

**Queer**: A term becoming more widely used among LGBT communities because of its inclusiveness. ‘Queer’ can be used to refer to the range of non-heterosexual and non-cisgender people and provides a convenient shorthand for ‘LGBT’. It is important to note that this is a reclaimed term that was once and is still used as a hate term and thus some people feel uncomfortable with it. Not all trans* people see trans* identities as being part of the term ‘queer’.

**Queerphobia**: A term used to include all forms of homophobia, lesbophobia, biphobia and transphobia. The term ‘LGBT-phobia’ is also used and may more clearly express the idea of transphobia.

**Questioning**: A term sometimes used by those in the process of exploring personal issues of sexual orientation and gender identity as well as choosing not to identify with any other label.

**Rainbow Flag/Colours**: A symbol of queer presence, welcome, and pride which represents the diversity of queer communities.

**Reclaimed Language**: Language that has traditionally been used to hurt and degrade a community but which community members have reclaimed and used as their own. Reclaimed language can be extremely important as a way of taking the negative power out of a word, claiming space, and empowering oneself. However, reclaimed language is also tricky and, depending on the context and the speaker, can be hurtful and dangerous. Some examples are ‘dyke’, ‘fag’, ‘homo’, ‘queen’, and ‘queer’. Although these terms can be used in a positive way by those reclaiming them, it is still offensive to hear them used by others whose intent is to hurt.
Sex: Refers to the biological characteristics chosen to assign humans as male, female or intersex. It is determined by characteristics such as sexual and reproductive anatomy and genetic make-up.

Sexual orientation: Refers to a person's deep-seated feelings of sexual and romantic attraction. These attractions may be mostly towards people of the same gender (lesbian, gay), another gender (heterosexual), men and women (bisexual), or people of all genders (pansexual). Many people become aware of these feelings during adolescence or even earlier, while some do not realize or acknowledge their attractions (especially same-sex attractions) until much later in life. Many people experience sexual orientation fluidly, and feel attraction or degrees of attraction to different genders at different points in their lives. Sexual orientation is defined by feelings of attraction rather than behaviour.

Sexual preference: Refers to whomever one prefers to have sexual and romantic relationships with (homosexual, bisexual, heterosexual, pansexual, etc.). It is sometimes used interchangeably with ‘sexual orientation’, but is considered by many to be inaccurate because the word ‘preference’ implies choice.

Traditional Sexism: The belief that male gender identities and masculine gender expressions are superior to female and/or feminine ones.

Transfeminine: This term may describe people who identify as trans*, and who identify their gender expression as feminine.

Transgender (Trans, Trans*): Transgender, frequently abbreviated to ‘trans’ or ‘trans*’ (the asterisk is intended to actively include non-binary and/or non-static gender identities such as genderqueer and genderfluid) is an umbrella term that describes a wide range of people whose gender identity and/or expression differs from conventional expectations based on their assigned biological birth sex. Some of the many people who may or may not identify as transgender, trans, or trans* include people on the male-to-female or female-to-male spectrums, people who identify and/or express their gender outside of the male/female binary, people whose gender identity and/or expression is fluid, people who explore gender for pleasure or performance, and many more. Identifying as transgender, trans, or trans* is something that can only be decided by an individual for themselves and does not depend on criteria such as surgery or hormone treatment status.

Transition: Refers to the process during which trans* people may change their gender expression and/or bodies to reflect their gender identity or sexual identity. Transition may involve a change in physical appearance (hairstyle, clothing), behaviour (mannerisms, voice, gender roles), and/or identification (name, pronoun, legal details). It may be accompanied by changes to the body such as the use of hormones to change secondary sex characteristics (e.g. breasts, facial hair).

Trans Man: This term describes someone who identifies as trans* and whose gender identity is male.
**Transmasculine**: This term describes people who identify as trans* and who identify their gender expression as masculine.

**Trans-misogyny**: Transphobia directed at trans* women and transfeminine folk that reinforces male power and privilege.

**Transphobia**: The fear and dislike of, and discrimination against, trans* people. Transphobia can take the form of disparaging jokes, rejection, exclusion, denial of services, employment discrimination, name-calling and violence.

**Transsexual**: A person whose sexual identity has moved from male to female or female to male. A transsexual person may change elements of their body through surgery or hormone treatment, but many transsexual people do not make any changes other than their sexual identity. Many folk feel that the word transsexual has medical overtones or is used inaccurately and so prefer the terms ‘transgender’, trans’, or ‘trans*’.

**Transvestite**: A medical term that was historically used to label cross dressing as a mental illness. This term is outdated, problematic, and generally considered offensive. A more inclusive and respectful term currently used is ‘cross dresser’.

**Trans Woman**: This term may describe someone who identifies as trans* and whose gender identity is female.

**Two-Spirit (2-Spirit)**: A term used by some North American Aboriginal societies to describe people with diverse gender identities, gender expressions, gender roles, and sexual orientations. Dual-gendered, or ‘two-spirited,’ people have been and are viewed differently in different First Nations communities. Sometimes they have been seen without stigma and were considered seers, child-carers, warriors, mediators, or emissaries from the creator and treated with deference and respect, or even considered sacred, but other times this has not been the case.

As one of the devastating effects of colonisation and profound changes in North American Aboriginal societies, many Two-Spirit folk have lost these community roles and this has had far-reaching impacts on their well-being.

**Ze / Hir**: Gender-inclusive pronouns used to avoid relying on a gender binary-based linguistic system, or making assumptions about other people’s gender. An example of these terms being used in a sentence is ‘Ze talked to hir partner about pronouns’. Some people instead choose to use plural pronouns such as ‘They’ and ‘Their’, or similar options. An example of this would be ‘They talked to their partner about pronouns’. Some use plural pronouns because they are more widely understood and able to be fluently used by most people. Others, such as omni-gender folk, feel that plural pronouns are most representative of their having more than one gender.
QMUNITY is BC’s Queer Resource Centre – the hub for lesbian, gay, bi, trans* and queer community programs, training and advocacy. Our services include:

- Free counselling
- Youth drop-ins
- Programming for older adults
- Queer Competency Trainings for workplaces and groups
- Out On the Shelves library
- Social and support groups
- Community events

…and much more!

To find out more about QMUNITY’s services, or make a donation to sustain our work, please visit www.qmunity.ca

Privilege: Refers to the social, economic and political advantages or rights held by people from dominant groups on the basis of gender, race, sexual orientation, social class, etc. For example, men often experience privilege that people of other genders do not have. Queer: A term becoming more widely used among LGBT communities because of its inclusiveness. ‘Queer’ can be used to refer to the range of non-heterosexual and non-cisgender people and provides a convenient shorthand for 'LGBT'. It is important to note that this is a reclaimed term that was once and is still used as a hate term and thus some people feel uncomfortable with it. Not all trans* people see trans* identities as being part of the term 'queer'. Questioning: A term sometimes used by those in the process of exploring personal issues of sexual orientation and gender identity as well as choosing not to identify with any other label. Rainbow Flag/Colours: A symbol of queer presence, welcome, and pride which represents the diversity of queer communities. Sexual preference: Refers to whomever one prefers to have sexual and romantic relationships with (homosexual, bisexual, heterosexual). It is sometimes used interchangeably with 'sexual orientation', but is considered by many to be inaccurate because the word 'preference' implies choice. Traditional Sexism: The belief that male gender identities and masculine gender expressions are superior to female and/or feminine ones. Two-Spirit (2-Spirit): A term used by some North American Aboriginal societies to describe people with diverse gender identities, gender expressions, gender roles, and sexual orientations. Dual-gendered, or 'two-spirited,' people have been and are viewed differently in different First Nation communities. Sometimes they have been seen without stigma and were considered seers, child-carers, warriors, mediators, or
A Retrospective Study of Childhood Gender-Atypical Behavior in Samoan Fa’afafine

Nancy H. Bartlett · Paul L. Vasey

Abstract Retrospective studies, mostly conducted in Western cultures, indicate that childhood cross-gender behaviors are strongly predictive of androphilia in adult men. To test the cross-cultural validity of these findings, we conducted a study of fa’afafine in Independent Samoa. Fa’afafine are a heterogeneous group of androphilic males, some of whom are unremarkably masculine, but most of whom behave in a feminine manner in adulthood. A total of 53 fa’afafine, 27 control men, and 24 control women participated. Participants were asked how often they engaged in female- and male-typical behaviors in childhood. Results demonstrated that fa’afafine and women recalled engaging in significantly more female-typical behaviors and significantly fewer male-typical behaviors in childhood compared to the men. Fa’afafine’s recalled female-typical and male-typical behaviors did not differ significantly from those of women. These results suggest that the relationship in males between gender-atypical behavior in childhood and adult androphilia is not unique to Western societies and may be a cross-culturally universal pattern of psychosexual development shared by most males who are predominantly androphilic.

Keywords Childhood gender non-conformity · Independent Samoa · Androphilia

Introduction

Considerable research has examined the association between gender-atypical behaviors in childhood and androphilia\(^1\) in adult males (e.g., for reviews, see Bailey & Zucker, 1995; Zucker et al., in press). In a comprehensive meta-analytic review, Bailey and Zucker (1995) reported that data from prospective and retrospective studies provided strong evidence that androphilic males display significantly more gender-atypical behavior in childhood than do gynephilic males. Despite the strength of this relationship, these findings remain controversial (e.g., Cohler & Galatzer-Levy, 2000; Gottschalk, 2003; Hegarty, 1999; Zucker, 2005; for a review of the controversy, see Zucker et al., in press).

A major criticism of this research is that the vast majority of empirical work on this topic has been conducted in Western, industrialized countries. Only a handful of studies have quantitatively assessed the relationship between childhood gender variance and androphilia in adult males outside of North America. Researchers have examined the relationship between childhood cross-gender behavior and male sexual orientation in two Latin American countries, Guatemala and Brazil, and one south-east Asian country, the Philippines, using a series of dichotomous (yes/no) questions (Whitam, 1980; Whitam & Mathy, 1986; Whitam & Zent, 1984). Compared to self-identified heterosexuals, self-identified male androphilics in all three cultures recalled significantly greater childhood interest in: (1) girls’ toys, games, and activities and (2) cross-dressing in women’s clothes, accessories, and make-up. Cardoso (2005) reported data on childhood

\(^1\) Androphilia refers to sexual attraction to males whereas gynephilia refers to sexual attraction to females. Because the terms homosexual and heterosexual do not carry the same meaning in Samoa as they do in the West, these terms are not employed here.
gender-atypical behaviors in self-identified androphilic males (paneleiros) in a Brazilian fishing village. In an open question, panaeleiros named a female-typical play activity as their favorite significantly more than did other males. Moreover, panaeleiros said that they preferred to play with girls significantly more than did other males.

Western concepts of gender and sexual orientation do not translate easily, if at all, into a Samoan context. In Independent Samoa, biological males who manifest gender-atypical behavior are referred to as fa’afafine (pronounced fa-a-fa-fea-nay). Translated literally, this means “in the manner of a woman.” However, based on our own field observations, we have found that fa’afafine are a heterogeneous group in many ways. Most self-identify as fa’afafine, not as men. Some self-identify as women even though they recognize that they differ physically and socially from biological women. In appearance and mannerisms, although most would be considered feminine, they range from remarkably feminine to unremarkably masculine. For example, some fa’afafine adopt feminine modes of gender presentation to the point where they could “pass” as women in public; they wear make-up, jewelry, and women’s clothing, adopt feminine hairstyles, speak with a feminine voice, and move in a feminine manner. Some adopt only certain elements of feminine gender role presentation, such as wearing nail polish or talking in a feminine manner. Some engage in feminine modes of gender presentation on a daily basis whereas some do so only intermittently. Although fa’afafine means “in the manner of a woman,” a small proportion of fa’afafine make no attempt to appear feminine as adults. Nonetheless, members of this latter group self-identify and are identified publicly by others as fa’afafine. They socialize preferentially with other fa’afafine and they may also prefer to engage in female-typical activities (e.g., jobs and hobbies), while avoiding certain male-typical activities. Despite this heterogeneity, fa’afafine are attracted to, and engage in sexual relations with, masculine (“straight”) men, with very few exceptions.

In a Samoan context, “straight” men are those who self-identify as men and are masculine in terms of their gender role presentation. Inclusion in this category is not contingent on exclusive gynephilia. Most “straight” men are gynephilic, but some may be androphilic to some extent, engaging in sexual activity with fa’afafine or other “straight” men on a temporary or exclusive basis, particularly if preferred female sexual partners are unavailable. In Independent Samoa, the category “gay” is not one which androphilic males draw upon to construct their identities. In fact, the overwhelming majority of the fa’afafine participants in this study were quite adamant in their assertion that Samoan “gays” do not exist.

Qualitative evidence suggests that fa’afafine are usually identified in childhood based on their tendency to behave in a gender-atypical manner (Besnier, 1993; Mageo, 1992; Poasa, 1992). As such, Samoans seem to equate a male’s early propensity for female-typical behavior with a fa’afafine gender identity, but this supposition awaits empirical confirmation. It is noteworthy that Samoans do not necessarily equate an early propensity for female-typical behavior in males with adult androphilia (Schmidt, 2003). This likely reflects the fact that inclusion in the category fa’afafine is typically contingent on feminine gender role expression rather than sexuality (Poasa, 1992; Schmidt, 2003; Shore, 1981). Although the vast majority of fa’afafine are androphilic in adulthood, this pattern of attraction is viewed as an optional consequence of being a fa’afafine, rather than as a defining criterion for inclusion in this category (Besnier, 1993). As such, Samoans seem to conceptualize the relationship between childhood gender non-conformity and adult androphilia in males differently than Westerners.

In this study, we hypothesized that fa’afafine would recall engaging in more female-typical and less male-typical behavior in childhood than would men, and that their recollections of such behaviors would be similar to those of women. In contrast to previous cross-cultural research on this topic, we assessed recalled female-typical and male-typical behaviors using multi-item scales designed to evaluate a variety of such behaviors. Moreover, in contrast to previous research, we compared the childhood recollections of gender-typical behaviors in androphilic males not just to those of men, but also to those of women.

There is disagreement in the literature concerning whether common or distinct underlying causal mechanisms characterize androphilic males in different cultures (Johnson, Jackson, & Herdt, 2000). If childhood cross-gender behavior is an inherent antecedent of male androphilia, then this relationship should operate similarly in different societies. As such, the research outlined here may help establish whether the link between childhood gender variance and adult androphilia is a cross-cultural universal. In doing so, it may help elucidate a common pattern of psychosexual development among androphilic males.

Method

Participants

All participants were recruited through a network sampling procedure. A network sampling procedure involves contacting initial participants who display qualities of interest (i.e., status as fa’afafine, men or women), then obtaining referrals from them to additional participants who, in turn, provide further referrals, and so on. The rate of participation for all groups was greater than 90%. Participants were 53 self-identified fa’afafine (M age = 31.4 years, SD = 7.7), 27 control men (M age = 26.1 years, SD = 6.8 years), and 24

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control women (M age = 30.1 years, SD = 10.4 years). All participants had some high school education. In total, 33% of participants had obtained university level education (30% of fa'afafine, 36% of men, and 40% of women).

Kinsey ratings (Kinsey, Pomeroy, & Martin, 1948) of sexual feelings over the previous year were obtained for 49 fa'afafine, 46 (94%) of whom described their sexual feelings as exclusively androphilic (Kinsey rating = 6). Two reported most sexual feelings toward males but some definite feelings toward females (Kinsey rating = 4), and one reported most sexual feelings toward males but an occasional fantasy about a female (Kinsey rating = 5). Of the 17 men for whom Kinsey ratings were obtained, 15 (88%) described their sexual feelings as exclusively gynephilic (Kinsey rating = 0). One reported most sexual feelings toward females but some definite feelings toward fa'afafine (Kinsey rating = 2), and one reported most sexual feelings toward females but an occasional fantasy about a fa'afafine (Kinsey rating = 1). All 13 women for whom Kinsey ratings were obtained reported sexual feelings over the previous year as exclusively androphilic (Kinsey rating = 0). Kinsey ratings were not obtained for all participants, because this measure was not employed during our initial field work in 2003. We used this initial field trip, in part, to determine the cultural appropriate-ness of questioning participants about their sexual feelings. However, all of the men and women in our study, including those who participated in the initial phase, self-identified as “straight.” There were no statistically significant differences between Kinsey-assessed versus Kinsey non-assessed men for mean childhood female-typical or male-typical behaviors. Similarly, there were no statistically significant differences between Kinsey-assessed versus Kinsey non-assessed women for mean childhood female-typical or male-typical behaviors.

Procedure and measures

Data were collected during during two field trips: one in 2003 and the other in 2004. Participants were interviewed regarding their recalled female-typical and male-typical behaviors using a standardized questionnaire. A Samoan-speaking research assistant was present for those interviews for which the participant(s) indicated that they preferred to do the interview in Samoan or for those participants who were deemed by the researchers to be insufficiently fluent in English. Questions were read aloud in English by one of the researchers and in Samoan by a research assistant when he or she was present. The interview questionnaire used in this study was available in written form in English and Samoan, after being translated and back-translated by two fluent Samoan-English speakers.

The Female-Typical Behavior and Male-Typical Behavior Subscales of the Childhood Gender Identity Scale (CGIS) were used to assess the extent to which participants recalled engaging in female- and male-typical behaviors in childhood. The CGIS is a semi-structured self-report questionnaire/interview that was developed by the authors for use in this research. It was designed to assess retrospectively various indicators of childhood gender-typicality. This measure was adapted from the parent-report Gender Identity Questionnaire for Children (Johnson et al., 2004), a parent-report measure used to assess symptoms of Gender Identity Disorder in children. An item pertaining to chores was also included in each subscale. Qualitative research indicates that, in Samoan culture, preference for particular sex-typed chores serves as an important indicator used to classify children as boys, girls or fa'afafine (Besnier, 1993; Poasa, 1992).

Participants were asked how often they engaged in the following six female-typical behaviors in childhood: (1) playing with girls; (2) playing with girls’ toys and girls’ games; (3) taking the female role in pretend play such as when playing house or when imitating female characters; (4) putting on make-up, girls’ accessories or girls’ clothes; (5) talking and acting like a girl; and (6) doing girls’ chores. Participants were also asked how often they engaged in the following five male-typical behaviors in childhood: (1) playing with boys; (2) playing with boys’ toys and boys’ games; (3) taking the male role in pretend play such as when playing house or when imitating male characters; (4) playing rough games and sports; and (5) doing boys’ chores. Participants were told that they were to answer the questions based on how they acted in childhood, before puberty. Responses were based on a 5-point Likert-type scale (1 = never, 2 = less than half the time, 3 = half the time, 4 = more than half the time, 5 = always/every time). Analyses conducted on the Female-Typical Behavior and Male-Typical Behavior subscales of this instrument indicated that they were highly reliable (Cronbach’s alpha = .90 and .87, respectively). In all post-hoc analyses, Cohen’s d’s were calculated using the formula $d = M_1 - M_2/s_{pooled}$ (Cohen, 1988; Rosnow & Rosenthal, 1996).

Results

Results of a one-way analysis of variance (ANOVA) indicated that there was a significant age difference among the three groups, $F(2, 97) = 4.14, p < .05$. A Tukey B post-hoc test (p < .05) indicated a significant difference in age between fa’afafine and men. Next, analyses of covariance (ANCOVA) were performed for both the total Female-Typical and Male-Typical Behavior subscale scores with group membership as a factor and age as a covariate. The analyses demonstrated that age was not a significant factor; therefore, it was not included as a covariate in subsequent analyses.
Recalled female-typical behavior in fa’afafine, men, and women

To assess differences in recalled childhood female-typical behaviors in fa’afafine, men and women, a one-way ANOVA was conducted on the Female-Typical Behavior (FTB) subscale scores for these groups. The FTB subscale score was calculated by taking the mean of the six specific recalled childhood female-typical behaviors. Results indicated that there was a significant difference in mean recalled childhood female-typical behavior between groups, $F(2, 101) = 126.75, p < .001$. A post-hoc Tukey B test ($p < .05$) indicated that the fa’afafine and the women recalled significantly more female-typical behavior in childhood than did the men (Cohen’s $d = 4.17$ and $4.18$, respectively). Means for the specific recalled childhood female-typical behaviors as well as the FTB subscale scores for fa’afafine, men, and women are shown in Fig. 1.

Recalled male-typical behaviors in fa’afafine, men, and women

To assess differences in recalled childhood female-typical behaviors in fa’afafine, men and women, a one-way ANOVA was conducted on the Male-Typical Behavior (MTB) subscale scores for these groups. The MTB Subscale score was calculated by taking the mean of the five specific recalled childhood male-typical behaviors. Results indicated that there was a significant difference in mean recalled childhood male-typical behavior between groups, $F(2, 101) = 92.73, p < .001$. A post-hoc Tukey B test ($p < .05$) indicated that the fa’afafine and the women recalled significantly less male-typical behavior in childhood than did the men (Cohen’s $d = -3.60$ and $-3.43$, respectively). Means for the specific recalled childhood male-typical behaviors as well as the MTB subscale scores for fa’afafine, men and women are shown in Fig. 2.

Discussion

The findings of this cross-cultural study of recalled childhood gender-atypicality in Samoan fa’afafine were consistent with previous empirical research that has examined the relationship between childhood gender variance and adult androphia in males (Cardoso, 2005; Whitam, 1980; Whitam & Mathy, 1986; Whitam & Zent, 1984; for reviews, see Bailey & Zucker, 1995; Zucker et al., in press). Adult

Fig. 1. Mean ± SE for Total Female-Typical Behavior (FTB) Subscale score and specific female-typical behaviors for fa’afafine (grey columns), men (striped columns), and women (black columns)
fa’afafine recalled engaging in significantly more female-typical and less male-typical behavior in childhood compared to men. Their recollections of such childhood behaviors were not statistically different from that of women.

The questions posed in this study focused on the extent to which participants recalled engaging in certain childhood behaviors. These quantitative data were enriched by the comments that were made to us by fa’afafine individuals during interviews. Such qualitative data underscore the fa’afafine’s indifference, or often, their intense aversion, towards male-typical activities as well as their marked enjoyment of female-typical activities. For example, one fa’afafine participant remarked, when asked about playing with boys and engaging in boys’ activities in childhood, “I wasn’t interested in playing with boys...only if there were no girls around, and then only for a short period of time. It was better to play with girls’ toys than to go roaming around the village with the boys.” Another commented:

I didn’t really like to be with the boys...I wanted to be with the girls, play with the girls’ toys...and also some fa’afafine friends too, so we wanted to get together and do a play, like for example I’ll be the mother, and the girls—the real girls—they were going to be the daughter, and if they asked me to take the father side [the father’s role], I didn’t like it, it didn’t suit me.

With respect to engaging in rough games such as rugby, numerous fa’afafine participants recounted memories such as this one:

Interviewer [following up on participant’s comments regarding aversion toward rough games]: Were you afraid of getting hurt, if you were playing the rough boy games? Is that one reason that you didn’t like it?

Fa’afafine participant: Yeah, that’s another thing, yeah, because if I was gonna play with the boys, especially rugby, then they were going to come right up to me and then they were gonna push me very hard. So that made me very hurt, because I knew that my body is sensitive to something like that, because I knew that inside of me it’s, you know, a girl’s side, so that’s why if a boy tried to push me and then, you know, I just didn’t feel like it, and then I walked away from them.

With respect to preferred childhood play activities, another fa’afafine remarked: “With cars, it’s just zoom...it’s no use. I loved playing with dolls. When my sister had a Barbie with long hair, it was like a diamond for me.”

It is noteworthy that these preferences persisted despite the fact that many fa’afafine recalled that they were expected to adhere to culturally-prescribed gender roles for boys. For example, one fa’afafine, when asked about playing rough games in childhood, remarked:

They forced me to be on the rugby team. They want me to act “straight” and be on the team. They were too rough and I didn’t want to have anything to do with it. I was
just not interested, and I didn’t want any part. I wasn’t muscular and strong like the “straight” kids, and I hated bumping into somebody with a big body.

Another recalled being encouraged to carry out “boys’ chores: “If they [adult family members] saw me picking up garbage [i.e., removing debris such as palm fronds, coconut shells, and banana leaves from the lawn—a “girl’s” chore], they would try to stop me. They scolded me and urged me to do boys’ jobs.” Given these sorts of gender role expectations imposed on some fa’afafine children, it is striking that the differences between the actual recalled behaviors of fa’afafine and men, and the similarities between fa’afafine and women, were so strong.

We hasten to add, however, that some fa’afafine children were encouraged to behave in a manner that many Western observers would characterize as gender-atypical. The following interview exemplifies this point:

Fa’afafine participant: I normally took showers with the girls in the afternoons, after P.E. [physical education] classes or when it was quite hot in the afternoon.

Interviewer: And did the girls get upset if you took showers with them?

Fa’afafine participant: No.

Interviewer: What did the boys do if you went in their shower?

Fa’afafine participant: The boys would just kick me out of their bathroom. “What are you doing here? Get out!”

Interviewer: So, you were more comfortable in the girls’ shower?

Fa’afafine participant: I was more comfortable with the girls’ bathroom.

Interviewer: And what did the teachers say when they knew you were taking showers with the girls?

Fa’afafine participant: Nothing said at all about it, nothing at all.

Interviewer: Did they prefer you do that?

Fa’afafine participant: They didn’t say it out loud...saying anything to me about it, so I took it for granted that they actually were for the idea of accepting me having a shower in the girls’ bathroom.

In a similar vein, another fa’afafine participant commented:

Fa’afafine participant: Yeah, I knew when I grew up I was going to be a fa’afafine, because I always wore girls’ clothes, and girls’ shoes.
also Schoeffel, 1979). By contrast, none of the fa’afafine we interviewed suggested such an etiology, calling into question the long held notion that fa’afafine are socially created based on the need to fulfill particular labor practices within the family.

The research presented here has some advantages over previous cross-cultural work with respect to the methodology employed. Other researchers who have examined the association between childhood gender-atypicality and adult male androphilia cross-culturally have employed scales that assess only two or three cross-sex behaviors (i.e., cross-dressing, cross-gender play/activities, preference for other-sex playmates) and have used either a dichotomous scale or nominations of favorite activities (Cardoso, 2005; Whitam, 1980; Whitam & Mathy, 1986; Whitam & Zent, 1984). Recognizing and respecting the challenges associated with conducting cross-cultural fieldwork, these studies have certain methodological limitations despite the value of their findings. In their meta-analytical review of research examining the association between childhood gender-atypical behavior and adult sexual orientation, Bailey and Zucker (1995) recommend the use of multi-item scales to increase reliability. For this study, we addressed this recommendation by developing and employing reliable continuous rating scales of both male-typical and female-typical childhood behaviors that included at least five items each.

Another methodological advantage of the present study, relative to previous cross-cultural work on this topic, involves how sexual orientation was measured. Previous research has assessed sexual orientation on the basis of an individual’s declared sexual orientation identity, that is, the sexual orientation that an individual feels himself or herself to be (Cardoso, 2005; Whitam, 1980; Whitam & Mathy, 1986; Whitam & Zent, 1984). However, sexual orientation identity is not necessarily concordant with an individual’s sexual feelings and, as such, it is not necessarily an accurate measure of androphilic or gynephilic attraction in adulthood. For example, Cardoso (2005) described a group of masculine males in a Brazilian fishing village who self-identified as heterosexual, but actually preferred feminine males (paneleiros), over women, as sexual partners. Moreover, Western categories of sexual and gender identities are not necessarily relevant or even recognized in non-Western cultures, rendering cross-cultural comparisons of such identities problematic (e.g., Mageo, 1996; Nanda, 2000; Shore, 1981). As mentioned above, the category “gay” is not one which androphilic males in Samoa employ to construct their identities. In contrast, androphilic and gynephilic feelings are cross-cultural universals, facilitating their comparisons between cultures. When feasible, the present study assessed sexual orientation on the basis of the participants’ sexual feelings, in addition to their sexual orientation identity. We believe sexual feelings represent a more precise and cross-culturally valid measure of sexual attraction than does sexual orientation identity.

Most studies that have examined the childhood experiences of androphilic males employ a comparison group of gynephilic males. In this study, the participants were biological males whose gender identity was feminine, raising the question of who is an appropriate comparison group—men, who are of the same biological sex or women who share the same gender identity? The results of this research draw attention to the importance of understanding not only how the childhood experiences of androphilic males differ from those of gynephilic males, but also how similar (or different) their experiences are to those of women. The finding that the fa’afafine’s recall of childhood female-typical behavior was similar to that of women points to the desirability of including women as a comparison group in studies of feminine males. Future studies should compare feminine males not only with men, but also with women, to further examine the differences and similarities based on gender identity as well as biological sex.

Despite the methodological improvements that characterize this study, retrospective studies of cross-gender behavior in childhood have been criticized as flawed because, the critics argue, participants are prone to memory distortion or selective recall (e.g., Cohler & Galatzer-Levy, 2000; Gottschalk, 2003; Hegarty, 1999; Kite & Deaux, 1987; Risman & Schwartz, 1988; Ross, 1980). Some critics might suggest that the more feminine fa’afafine in our study had heightened recall of their cross-gender behaviors in childhood in order to have a consistent personal narrative in which there is a logical progression from a feminine childhood to a feminine adulthood. Although these sorts of concerns seem plausible, it is important to note that no empirical evidence has been advanced in support of the memory distortion or selective recall hypotheses (for review, see Bailey & Zucker, 1995; Zucker et al., in press).

In conclusion, these retrospective data from a Polynesian society lend further support to the conclusion first proposed by Whitam (1980; Whitam & Mathy, 1986; Whitam & Zent, 1984) that the link between childhood gender variance and androphilia in adulthood is indicative of a universal pattern of psychosexual development shared by most males who are predominantly androphilic, regardless of their cultural milieu. Results of this study are remarkably consistent with data collected in North American, Asian, Australian, Central American and South American societies (Cardoso, 2005; for reviews, see Bailey & Zucker, 1995; Zucker et al., in press). As Whitam (1980) has pointed out, gender variant behaviors in childhood should be regarded as normal events in the life cycle of many androphilic males. With respect to future directions for research, despite the strong evidence of a genuine link between childhood gender-atypical behaviors and adult male androphilia reported by Bailey and Zucker
(1995), and supported by the retrospective findings presented here, a longitudinal prospective study which follows young fa’afafine into adulthood would be illuminating.

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References


TWO–SPIRIT YOUTH SPEAK OUT!

Analysis of the Needs Assessment Tool

March 2004

Urban Native Youth Association
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Two-Spirit History

“I do not label myself as a Two-spirited because I’m not sure what my tradition is from my people as a Two-spirited person”

Quote from youth participant

The term “Two-spirit” was used by North American Aboriginal societies to describe what Europeans now call Gay, Lesbian, Bisexual, Transgendered and Transsexual people. “Two-spirit” was used as it was believed that gay men had the female intuition (emotional) and the male body (physical), while lesbian women were blessed with the male physical attributes and still carried with them, the female intuition. The “dual spirits” become even more obvious with the transgendered and transsexual.

Almost 90% of all traditional North American Aboriginal cultures had specific roles for Two-spirit people within their communities. In many cultures, Two-spirit people were viewed as blessed and one of their main roles was that of a spiritual advisor or seer. In some tribes, Two-spirit people were also the mediators of the community because it was believed that they understood “both” sides of disagreements between men and women. Two-spirit men and women tried to keep harmony within the tribe. Two-spirit men generally would help in the raising of the children, while Two-spirit women would go hunting. In some tribes, Two-spirit men were also there for the sexual pleasure of the man whose primary relationship was with a woman; and the Two-spirit woman was there for the sexual pleasures of the woman whose primary relationship was with a man. These were some of their roles within their communities. Since Two-spirit was not seen as “abnormal”, when children began to show traits of being Two-spirit, they were taken under the care of the Two-spirit Elders who would teach them about the history and roles of Two-spirit people within their community.

While there are some common characteristics that Two-spirit people shared within each tribe, each individual tribe also had different slants on the duties of the Two-spirited. For example, in the Cree culture, Two-spirit men opened up the Sundance. This is a very sacred ceremony and only a Two-spirit man could open it. Two-spirit people in the Cree culture also were pipe carriers. To be a pipe carrier in any tribe was an honour that was only bestowed upon those who were highly spiritual.

Most traditional North American Aboriginal cultures also had a different view of sexuality than the Europeans. Aboriginal tribes had a many gender system. Many had 4, 5, 6 or even 7 genders. Many Aboriginal cultures had a six gender system as opposed to the two gender system that we use today. The six genders were: men whose primary relationship was with a woman (hetero/bi man in today’s context); women whose primary relationship was with a man (hetero/bi women); Two-spiritied men (gay men); Two-spiritied women (lesbian women); transgendered people (those who have physical characteristics of a man or woman, but inherently feels like the other); and transsexual people (those who have the physical characteristics of both the male and female, referred to in today’s society as a hermaphrodite). Therefore, the idea of homosexuality in most Aboriginal societies did not, could not, exist because Two-spirit people were seen as completely different genders. Further information can be found through the publications listed in Appendix C.
Analysis and Recommendations of the Needs Assessment Tool (NAT)

There were a total of 44 NAT surveys that were completed and returned. Respondents were 24 years of age or younger. This section will provide a brief analysis and recommendation to the responses to each statement. While some statements and responses are pretty straightforward, some are very revealing. Some questions were geared more to the social service sector, while others were directed more toward the youth, the Recommendations will reflect that.

- Questions 1 through 25 were all based on a rating scale of 1 to 5. One being strongly disagree, five being strongly agree and three being a neutral response to the statement.
- Questions 26 to 28 were questions with respect to how youth defined themselves, as well as, their Nation(s)
- Questions 29 to 32 were open-ended questions where the respondents could elaborate more on the question.
- Question 33 simply asked if they were or are a resident of B.C.
- Questions 26 to 33 do not have any analysis or recommendations, due to the statements and questions themselves. All of the responses are included in Appendix B.

Overall we have found that some of the recommendations would apply to many, if not all of the questions or statements, so we have developed a list of recommendations that would apply to the issues and concerns of Two-spirit youth in general. These are followed with further analysis and recommendations for each individual question up to question #25

**General Recommendations:**

1. Everyone – from First Nations individuals and communities to service and health care providers – has a responsibility to educate themselves about Two-spirit/GLBT issues, to support Two-spirit youth, and to confront homophobia.

2. More research and writing must be done about the rich history of Two-spirit people.

3. More education regarding Two-spirit, GLBT, gender identity and sexuality is needed, especially for the heterosexual population.

4. Youth workers, educators, counsellors and health care professionals must fulfill their obligation to help all people by ensuring there are appropriate services and safe spaces for Two-spirit youth.

5. Two-spirit youth need to take steps to build their self-esteem and their support networks, and to make sure they seek out healthy alternatives to behaviours and activities that put their health and lives at risk.
April 17, 2015

Canada's trans people face lengthy wait times for medical care
By KELLY GRANT

A Toronto centre is the lone site for sex-reassignment approvals for all of Ontario and Newfoundland and Labrador

It took years of suffering and soul searching, but when Chrystofer Maillet decided to make the transition out of the female body in which he had never felt comfortable, he knew he was ready for the change.

One thing stood in his way. Mr. Maillet, now 35, was told he would have to wait one to two years for an initial assessment at the Centre for Addiction and Mental Health's (CAMH) Adult Gender Identity Clinic in Toronto, the lone site for sex-reassignment approvals not just for Ontario, but for Newfoundland and Labrador and, until last year, Saskatchewan, too. Unable to endure the wait, Mr. Maillet put nearly $7,500 on a line of credit and paid for a double mastectomy, a procedure the Ontario Health Insurance Plan (OHIP) would have covered if he had managed to secure CAMH's blessing first.

Mr. Maillet is not alone. As the demand for sex-change operations has grown, so too has the line at CAMH. The psychiatrist who leads the small Adult Gender Identity Clinic says the Ontario government's decision to make one facility the sole gatekeeper for these procedures "really isn't working," especially considering that trans people who want to switch genders but have yet to begin the process are at an elevated risk for suicide.

The bottleneck at CAMH is just one example of the barriers to medical care that Canadian trans people still face, despite the fact that every jurisdiction except New Brunswick, Nunavut and the Northwest Territories now publicly funds at least some gender reassignment surgeries. Coverage varies from place to place, and it remains difficult to obtain surgeries and the hormone treatments that should precede them. A private Montreal clinic is the only place in Canada that offers "bottom" surgery – genital reconstruction – while trans people who need estrogen or testosterone to begin their transitions often struggle to find co-operative doctors.

"We're not quite hitting the mark as a country," said Adrian Edgar, a New Brunswick doctor who opened that province's first trans-friendly health clinic earlier this year inside Fredericton's former Morgentaler clinic. "I don't think there's a province that is providing the full gamut of surgeries that would truly decrease the discrimination that people feel on a daily basis."

Waiting for gender reassignment surgery can have serious consequences, said Greta Bauer, an associate professor of epidemiology and biostatistics at the University of Western Ontario in London.

"People's lives are actually at risk," she said.

Dr. Bauer is one of the lead researchers on the Trans PULSE project, which studied 433 Ontario trans people who responded to an 87-page questionnaire in 2009-2010. It found that people who had decided to transition but had not begun to do so were often suicidal – 55 per cent had considered suicide in the past year and 27 per cent had tried to take their own lives. Those figures plunged after people transitioned to their desired gender.

Mr. Maillet found himself in that high-risk category when he decided to pay out of pocket for his double mastectomy on March 3, 2013.

In a Jan. 28 decision dismissing his $7,401.50 OHIP claim, the quasi-judicial board that hears appeals of OHIP rejections acknowledged that Mr. Maillet was suffering as he awaited surgery. "He explained the difficulties he experienced and the delays in obtaining an appointment at CAMH," the decision reads. "He explained that he
made the decision to undergo surgery to 'save his own life.'"

Despite the fact that Mr. Maillet received CAMH's retroactive blessing when he finally secured an appointment – on Dec. 3, 2013, nine months after his surgery – the Health Services Appeal and Review Board ruled against him, writing that although his case was "very compelling," the rules are clear. No CAMH pre-approval, no public funding.

By the time he made his plea to the board, Mr. Maillet had spent nearly a lifetime wrestling with gender dysphoria. He grew up in Riverview, N.B., where, as he put it in an interview, "there weren't even gay people there."

His parents still love him, he said, but they are baffled by his decision to become a man. His father insists on calling him Christine.

"Really, what was I going to do? I always wanted to be a boy. You can see pictures that my family took of me from the age of three until forever. They're all, like, building forts in the backyard or playing Dukes of Hazzard or playing with Transformers. Not typical feminine or female things. I never went for that. I never was interested – at all."

About a decade ago, Mr. Maillet moved to Ottawa to make a fresh start. Identifying as a lesbian, he fell into an abusive relationship from which he eventually escaped. Then he landed a federal government job, made a small circle of friends and gained confidence as a singer performing now and then at pubs in the capital. Meanwhile, he dressed as a man and introduced himself simply as "Chrys."

It was during a month-long solo hike on Spain's Camino de Santiago trail in 2010 that Mr. Maillet finally decided to make the medical transition to become a man. When he returned to Ottawa, he started testosterone treatments, which prompted his voice to drop, his leg hair to thicken and his muscles to bulge. He was sad to lose his female singing voice, but otherwise he "felt amazing."

"It was like, this is exactly how I want to feel," he said.

Unfortunately, his bulked-up chest muscles made his breasts larger; before long he was hunching his shoulders and suffocating under chest binders designed to camouflage his breasts. When he learned about the waiting times at CAMH, Mr. Maillet found an Ottawa plastic surgeon who agreed to perform the mastectomy after spending more than three hours assessing him to ensure he met the criteria for approval set by the World Professional Association for Transgender Health (WPATH) – the same standard of care used by CAMH. (The WPATH standards vary depending on the surgery, but they include a persistent, well-documented diagnosis of gender dysphoria, that the patient be in good mental and physical health and, in some cases, that he or she take hormones and live as the desired gender for a year.)

The surgery was a success, but losing his OHIP appeal made him feel hopeless. "I want to get married. I want to have kids. I don't know if I'm ever going to be able to move into a house with the debt that I'm sitting on," he said.

Dr. McIntosh of CAMH said the Ontario government needs to rethink the approval process as demand continues to surge. The clinic approved 177 surgeries last year, he said, up from 59 in 2010, but staff can't keep pace with the need. The Ministry of Health and Long-Term Care, meanwhile, said it doled out nearly $2.2-million on gender reassignment surgeries in 2014-15, up from just more than $22,000 in 2008-09, the year the procedures were relisted under OHIP after a 10-year hiatus.

"We certainly support people being able to access these services closer to their own communities," Dr. McIntosh said. "We're not tied to this model of us being the only game in town."

For its part, Saskatchewan added a second site – out of province in Edmonton – for surgery approvals last year to increase access. Newfoundland still lists CAMH as its lone approval site. Some other provinces, including Nova Scotia, which only began covering gender reassignment surgeries last year, allow family doctors to grant approvals using the WPATH standards.
David Jensen, a spokesperson for Ontario’s Ministry of Health and Long-Term Care, said by e-mail that "the ministry is aware of concerns related to wait times at CAMH and is exploring options to improve wait times."