Challenging the Binary: Gender Characteristics of Trans Ontarians

Background

Gender-related terms represent concepts that are important in how people self-identify and are rooted in social, institutional, and medical histories. Sex and gender have historically been binary -- male and female -- and these terms have been applied to appearance, identities, and anatomies. The assumption of two and only two categories that neatly apply to all aspects of an individual is reinforced by social, medical, religious and legal systems. A sex/gender label is generally carried throughout a person’s life and any desire to change this or expand its boundaries can come at great personal costs, whether financial, emotional, or social. The information gathered by Trans PULSE challenges this binary and suggests that gender presentation and identity are more complicated with a range of diverse presentations. It also makes clear the need for further education for service providers, educators, and the rest of society.

Our Approach

Trans PULSE took a unique approach to capture information about trans people across Ontario, Canada – people with a range of identities, relationships with their bodies, and personal beliefs about the necessity of physical transition. Here, we present information on gender-related characteristics collected from Ontario’s trans communities, using a research method that allowed us to take the most statistically accurate picture possible. Surveys were completed by 433 trans people age 16 or over who live, work or receive health care in the province of Ontario. To increase accessibility, participants completed their surveys either online, via paper copy, or by telephone with a language interpreter. To participate, individuals indicated that they fit under the broad umbrella term of “trans” and were not required to have begun a social or medical gender transition. Several questions about gender identity were asked to make sure the diversity of gender within Ontario’s trans communities was adequately captured.

Key Findings

Gender fluidity

Fifty-four percent of trans Ontarians aged 16 or older were on the female-to-male (FTM) spectrum, and 47% on the male-to-female (MTF) spectrum. Twenty percent did not place...
themselves within the gender binary, considering themselves both male and female, neither, or some fluid position between the two. In a culture that uses gender for classification purposes, this speaks to the appropriateness of using male and female categories on identity documents. This practice creates use barriers for trans people attempting to access facilities that are inherently gendered, such as shelters, sexual assault centres, and sexual health care. Supports for those identifying as genderqueer, for example, need to be in place to allow for equitable access to services.

**Intersexuality**

A medically-recognized intersex diagnosis was reported by 6% of trans people in Ontario. An additional 15% were unsure.

**Living in one’s felt gender**

In Table 2, 48% of trans Ontarians were currently living full-time in their felt gender with another 30% doing so part-time. Twenty-two percent were not living in their felt gender at all. This can also create barriers to services for trans people. Stigma and discrimination expected by trans people potentially lead to a decreased willingness for some to live in their felt gender, which results in a lack of visibility and an underestimation of the number of services and supports needed for trans people. This then acts to further increase stigma for trans people.

Of those currently living in their felt gender, 34% began doing so before the age of 20, and 26% between the ages of 15 and 19. More than half of trans Ontarians (59%) were less than 10 years old when they became aware that their gender did not match their bodies. This highlights the importance of teaching about gender identity and trans issues in both primary and secondary school.

**Medically transitioning**

Approximately one quarter of trans Ontarians had completed a medical transition process. In our study, a “completed medical transition process” was based on each respondent’s own indication that they had completed their medical transition, whatever this meant to them. Additionally, 4% were not planning to medically transition, 10% were unsure if they would, and for 9%, the entire concept of transition was irrelevant. Of those who had undergone or would be undergoing a medical transition of some kind, two-thirds had not completed all the medical treatments they feel they need. For some, this involved only hormones or a single surgery, for others a combination of procedures and hormones.
Many services for trans people are only available to those that have undergone genital surgeries, literally erasing those that identify as gender fluid and those that transition, but don’t undergo all possible medical procedures. We need to redefine societal recognition of gender and how we accommodate all trans people, rather than just those who can check every box on a predetermined checklist of surgeries and hormones that assumes an “all or nothing” approach to transition and transness.

With 59% of trans people indicating they knew their gender identity before age of 10, before puberty began, it is crucial that medical hormone intervention be available prior to puberty when so many irreversible body changes occur.

What can be done?

◆ Gender identity/expression added to elementary and high school curricula
◆ Gender identity/expression added to human rights codes
◆ Pre-puberty hormonal treatment be made more widely available
◆ Training for gendered services (e.g. shelter systems) to understand the specific needs and issues facing trans people

References


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E-Bulletins about a variety of topics as well as presentations and articles can be downloaded at: www.transpulseproject.ca
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