"I guess the trans identity goes with other minority identities": An intersectional exploration of the experiences of trans and non-binary parents living in the UK

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ABSTRACT

Background: Research on trans and non-binary parents has identified challenges in integrating parenting and gender identities, and in navigating stigmatizing environments. Studies have also highlighted the unique experience of transmasculine pregnancy and its violation of cisheteronormative ideals, yet little is known about either the experiences of trans and non-binary parents who have used diverse routes to parenthood or their experiences beyond the transition to parenthood. Research on the way in which gender intersects with other identity categories to shape the experiences of trans and non-binary parents is also lacking.

Aims: This study aimed to explore the experiences of trans and non-binary parents in the UK within different parenting spaces both during and after the transition to parenthood, using an intersectional framework.

Methods: Eleven semi-structured interviews were conducted with trans and non-binary parents and analyzed according to the principles of thematic analysis.

Results: Three main themes were identified, reflecting participants' experiences within the "highly normative world" of parenting, and the strategies of "being a pragmatic parent" and "being a pioneering parent" used to navigate this.

Discussion: The findings of this study highlight the usefulness of an intersectional approach for research on this topic. Findings also evidence a need for inclusive, and queer, parenting spaces for trans and non-binary parents, so that parents and children can enjoy the benefits of trans parenting.

Introduction

Within the UK, the existence and rights of trans and non-binary parents have been denied, both historically and contemporarily. Although people with diverse expressions of gender have always existed (Burns, 2018) and thus have always parented, cultural representations regularly emphasize the "newness" of trans and non-binary parents, and of transmasculine people becoming pregnant in particular. Transmasculine pregnancy can be seen as disruptive to cisheteronormative ideals, with the multiple "first pregnant men" within UK media evidencing a sensationalizing of trans parents that contributes to their erasure in the public domain (Lampe et al., 2019; Pearce & White, 2019).

Within legislation, trans and non-binary parents are also erased. Provision for trans parents who conceive after obtaining a Gender Recognition Certificate is lacking; existing legislation focuses on those who have children before transitioning, and even then, is inflexible (White, 2018). In some instances, legal gender recognition has been coupled with the requirement of sterilization, amounting to a eugenic practice (Dunne, 2017). Some scholars have suggested that legal gender recognition, and the benefits it affords, is primarily available to white, (upper) middle-class, able-bodied, binary-trans people (Lowik, 2018). Indeed, individuals identifying as neither male nor female in the UK are prohibited from legal identity recognition of any kind.

Such erasure of trans and non-binary parents overall reflects the cisnormative assumption that sex corresponds to gender, and heteronormative assumptions embedded within hegemonic ideas about the family (Norwood, 2012). Recent research has also highlighted a hierarchy of trans parenting in the public sphere, such that those who are considered "just the same" as cis parents are normalized, while others may be further pathologized (Lampe et al., 2019).

Much of what is known about the transition to parenthood has been established from studies of transmasculine pregnancy. Studies have shown that the experience of pregnancy can be isolating for trans and non-binary people, with identity and bodily changes found to present particular challenges, both personally and in terms of public scrutiny (Charter et al., 2018; Ellis et al., 2015). Within reproductive services, although examples of positive experiences, including correct pronoun use and a willingness to learn have been found (Hoffkling et al., 2017), a number of studies have noted that clinicians often lack basic knowledge of gender/family diversity and that negative experiences go unchallenged by prospective parents for fear that access to services may be denied (Charter et al., 2018; James-Abra et al., 2015).

There has been less academic attention given to the experiences of the transition to parenthood among trans and non-binary parents who have not experienced pregnancy. Cisheteronormativity assumes that the partner of a pregnant person is a man, and despite research having explored the lack of social recognition for lesbian, bisexual, and queer non-birth parents (Abelsohn et al., 2013), the experiences of trans and non-binary non-birth parents have not yet been explored. Trans and non-binary individuals may also decide to adopt. Although one recent UK study found that trans and non-binary adults may decide against adoption due to systemic stigma (Tasker & Gato, 2020), the experiences of parents who *have* pursued adoption remain relatively unexplored. Given that one US survey of 156 trans and gender-nonconforming adolescents found that only 36% were interested in future biological parenthood, while 71% were interested in adopting (Chen et al., 2018), this is significant.

In terms of experiences of parenting itself, studies have so far tended to focus on familial experiences during a transition, and how this is negotiated by parents (Hines, 2006; von Doussa et al., 2020), and experienced by children (Veldorale-Griffin, 2014; Zadeh et al., 2019). There has been less research on the experiences of trans and non-binary parents who have identified as trans and/or non-binary since before having their children. Given that more young people in the UK are socially transitioning at a younger age (GIDS, 2020), it seems likely that the number of people identifying as trans and/or non-binary before having children will increase over time. Initial studies have found that parents find it difficult to align their gender identity with their parental status given others' expectations and/or confused responses (von Doussa et al., 2015), and that they manage the disclosure of their identity in different spaces accordingly (Haines et al., 2014).

Research on trans and non-binary individuals has predominantly focused on white, middle-class, and non-disabled populations (Vincent, 2018), and this is also true of research on trans and non-binary parents. An intersectional framework, where multiple axes of identity are considered in analysis, may be most useful when exploring the experiences of trans and non-binary parents (Hafford-Letchfield et al., 2019). Existing research has used an intersectional approach to highlight the unique experiences of trans parents, finding that parents' experiences both reflect the societal privilege associated with being a parent, and the oppression associated with being trans and/or non-binary in a cisgenderist context (see Haines et al., 2014). There is a need for research which integrates further axes of identity into analyses of the experiences of trans and non-binary parents.

Aims and theoretical perspective

This article reports findings from a UK study of trans and non-binary parents who have identified as trans and/or non-binary since before having children. It focuses on the social experiences of trans and non-binary parents within parenting spaces, and considers how parents experience identity within these spaces. In so doing, it draws

upon the theoretical frameworks of structural symbolic interactionism (Stryker, 1980), which holds that identity exists in, and is formed through, social interaction, and intersectionality (Crenshaw, 1991; De Vries, 2012), which acknowledges that one cannot only see gender, for example, without also taking into account ethnicity, class, and ability. An intersectional approach means that rather than analyzing a "single axis" of oppression (such as cisgenderism), multiple axes of oppression must be considered, with identities being thought of as "both/and," rather than "either/or" (Cho et al., 2013; Crenshaw, 1991). Although all of the parents in this study were marginalized by their gender identity, intersectionality allows us to explore the impact of multiple components of parents' identities on their experiences within parenting spaces, and to place individual experiences within their sociohistorical context (Bowleg, 2008). In order to examine experiences within *parenting* spaces specifically, this article explores how multiple "priority categories" that are relevant to all people (here gender, sexuality, race, class, and ability), and "parenting categories" (that are particularly relevant to parents, here age, number of parents, family set-up, and route to parenthood) interact to impact upon parents' experiences (see Choo & Ferree, 2010).

Overall, the aims were (i) to understand whether different parenting spaces (e.g. fertility clinics, health and social service settings, school/nursery, home) offer different experiences for trans and non-binary parents and (ii) to explain how parents' different identities interact, and how these identities impact upon their experiences.

Materials and methods

Recruitment

Participants were recruited for this study via social media and through snowballing. Flyers, the wording of which was approved by a trans not-for-profit organization, were posted on Twitter and Facebook by the University of Cambridge Centre for Family Research, and by two charities: Stonewall, which supports LGBT individuals, and Gendered Intelligence, which aims to increase

understanding about gender diversity. Stonewall and Gendered Intelligence also posted this flyer in online groups for queer parents. The flyer was also included in an online newsletter by Pride Angel, a connection Web site for co-parents and gamete donors. Parents were invited to take part in the study if they had a child aged 0–10 years old, and they (or their partner(s)) identified as trans and/or non-binary, and had identified as such since before their child was born or adopted.

Participants

This article focuses on the experiences of 11 parents within 8 families. All participants lived within England, in both urban and rural settings. Of the total number, six were birth parents, three were non-birth parents, and two were adoptive parents. They had used a range of routes to parenthood, including adoption, IVF, known donation, and unassisted conception, and were members of single parent, two-parent, and multi-parent families. Participants had a range of gender identities, including non-binary ($n = 7$), trans woman ($n = 3$), and trans man ($n = 1$). Six participants were not experiencing a disability, and five were (including sight conditions, autism, and chronic illnesses). In terms of financial circumstances, six participants reported difficulties, and five did not. The majority of participants identified as white. Due to the small sample and participants' unique family circumstances, further details that may make them identifiable are not given. Pseudonyms assigned by the authors and confirmed/amended by participants have also been used in order to protect participants' identities.

Methods

Once a participant had indicated interest in the study, each parent in the family was invited to take part in an individual, semi-structured interview. Participants chose where they wanted the interview to take place; seven took place in participants' homes, two at the university, and two by telephone. Interviews were audio-recorded and ranged from 58 minutes to 3 hours 39 minutes, with an average length of just under

2 hours. They covered a wide range of topics, including participants' route to parenthood, experiences as a parent, and relationship with their child(ren). Where relevant, participants were also asked about their experiences of being pregnant and giving birth, experiences of fertility and pregnancy care, and experiences of adoption.

Positionality and ethics

It is recognized that all stages of data collection and analysis are framed by researchers' own experience and identities (Mccorkel & Myers, 2003). The authors (SBB and SZ) are both cisgender, trans allies. Interviews were conducted by the first author, who is a queer, cisgender researcher, although in families with multiple participants a second researcher interviewed one parent. Based on observations during data collection, it seemed that participants assumed a shared queer experience, but not a shared experience of being trans and/or non-binary or being a parent. Given that the first author is white, middle-class, young, and non-disabled, depending on participants' unique identities, she might have been perceived as an outsider and/or insider, and this may have varied throughout the interview depending on the topic discussed.

This study received ethical approval from the University of Cambridge Psychology Research Ethics Committee. Due to a problematic history of research being done "on" trans populations by cisgender researchers, this research followed the guidelines set out by Galupo (2017) and Vincent (2018) on ethical research with trans populations. This reflexive research process included (but was not limited to) taking trans awareness training; partnering with trans organizations throughout the study; paying attention to language in the interview and avoiding, where possible, making assumptions about participants or their family members (by asking about gender identity, and pronouns, in each case); incorporating participant observations into the interview schedule over the course of the study; and asking participants to review the findings. It is recognized, however, that it would not have been possible to account for all potential bias and that a researcher with a different experience, background, or identity may have obtained different results.

Analysis

Interviews were analyzed according to the principles of reflexive thematic analysis (Braun & Clarke, 2006, 2019), which aims to generate patterns of meaning across a dataset. Once six interviews had been conducted, all were transcribed and initial line-by-line open coding was undertaken using Atlas.ti. Codes relating to becoming and being a parent were grouped together, and a thematic framework was drawn up. An iterative approach to data collection and analysis was employed; new codes were generated, and themes revised, upon the inclusion of further data. The themes and subthemes were also reviewed using the theories of structural symbolic interactionism and intersectionality. An intracategorical approach to intersectional analysis was adopted, focusing on the experiences of one group (trans and non-binary parents) and exploring within-group variation (based on the priority categories of race, class, sexuality and ability, and the parenting categories of age, family set-up, number of parents and route to parenthood) (McCall, 2005).

The data and themes were discussed between authors throughout data collection and analysis. In accordance with Braun and Clarke's (2019) guidelines for quality reflexive thematic analysis, the authors aimed to engage with the *process* of analysis throughout, reflecting on their own positionality and potential assumptions about the data. Participants were also invited to review the findings, to indicate whether they were happy with the quotations used, and to offer general comments. Seven participants read the article or a summary of the results; all indicated that they agreed with the findings overall and a small number of minor revisions and clarifications were made based on their feedback.

Results

Three main themes were identified, reflecting participants' experiences within the "highly normative world" of parenting, and the strategies of both being a "pragmatic parent" and "pioneering

parent" that were used to navigate this. Within the first theme, "parenting in a highly normative world," subthemes that together capture participants' experiences of parenting spaces were "assumptions" and "being an outsider." The second theme, "being a pragmatic parent: negotiating norms and balancing identities" includes the subthemes of "disclosure negotiation," "space avoidance," "detachment," and "erasure." The third theme, "being a pioneering parent: changing and creating spaces," includes the subthemes of "precarity and tension," "isolation/connection," and "time." The three themes are explained and discussed in detail below. Given that the subthemes within each theme were interrelated, they are discussed together.

Parenting in a highly normative world

This theme highlights the way in which parenting spaces were experienced as "highly normative" by participants, due to the way in which they were constrained by norms that seemed to relate to both priority categories and parenting categories. For example, participants articulated having a sense that upon beginning their journey to parenthood, they were entering "a highly gendered world" (Max). Participants who had been pregnant described pregnancy spaces as "completely taken over, dominated by cis bodied women" (Amal). In describing how "support networks and breastfeeding support and toddler groups and baby groups and hospital, like anything, it was all very much mums and women" (Jemma), participants highlighted the way in which such spaces may be governed by repro/cisnormative assumptions and thus may be unsuitable for trans and non-binary parents. Non-birth parents also expressed feeling excluded during pregnancy due to heteronormative assumptions about families:

> It wasn't put like 'this is the space for people giving birth', it was 'this is the female space', right? And the male space is sitting by the side of the bed and not being comfortable and staying out of the way and not using any of the facilities and just being like invisible, and then that made me feel really, really sort of anxious. (Lil)

> It would have been nice before the birth when all these medical things were happening for it to be less

of a medical setting … but because we weren't [co-parent]'s partner we were never invited and there was never kind of an assumption that we would be shared in that. (Kim)

Similarly, participants who had adopted their children encountered cisheteronormative assumptions. Some described having entered highly cis-genderist spaces, with gender identity being used by others to deny parental rights:

> There would be people who would be really interested in me and really positive about me, and then find out I was trans and suddenly not be interested … There were a couple of matches where they explicitly wouldn't match with me because I was trans, they thought it was too complicated. (Charlie)

> Also then our adoption ended up being a contested adoption which was horrific, but the local authority used homophobia and transphobia to suggest that we shouldn't be parents … It was eviscerating, to be honest. Yeah. But also, like, quite shit-ly unsurprising. (Max).

Participants with disabilities also spoke about others' expectations of parents as able-bodied ("I'll see things posted on the internet and on Facebook about how disabled people shouldn't have children" (Finn)) as well as cisgender:

> I get annoyed that the parents in her class don't seem to get that you can be disabled and a parent … and I'll often wear a lot of pride based stuff. And you can just tell they're talking amongst themselves. (Ali)

One participant described being denied treatment in a fertility clinic due to a number of factors, including disability, being in a multi-parent family, and being trans:

> We felt it was a little bit eugenic to be honest, that we were told that we weren't good enough to be parents and that these people had formed some kind of opinion based on their prejudices. (Kim)

Kim's experience should be understood within the historical context of sterilization against trans and non-binary people (Dunne, 2017), and the experiences described above should also be understood in relation to the extensive history of sterilization against people with disabilities (Rowlands & Amy, 2019). Such findings also suggest that cisheteronormativity has particular consequences in settings that are characterized by vast power imbalances, such as when clinicians

are charged with making decisions about whom to offer treatment.

Participants additionally explained that access to inclusive spaces was dependent on their resources, whether financial, practical, or physical; such spaces were costly ("the fertility clinic I went to, that was expensive" (Robin)), difficult to find ("we went to an LGBT friendly specific clinic … it was a 2 hour drive at the time" (Erin)), or required energy that some participants found difficult, in Yanniq's experience due to fatigue resulting from their autism (autistic fatigue):

> It would be really, really important [to socialise with other trans parents], but I don't see how to do it any practical way that works for a family of five, for my family of five anyway. And with the autistic issues I don't have much energy to socialise in general. (Yanniq)

Whilst some participants described being able to access appropriate spaces, others explained that some spaces were inaccessible to parents with lower incomes, or to parents who were experiencing a disability. It is also worth noting that given the pay gap between disabled and non-disabled individuals (ONS, 2019), and the increased rates of poverty and unemployment in disabled trans people, compared to non-disabled trans people (James et al., 2016), these factors are interconnected.

Pragmatic parent: negotiating norms and balancing identities

Some participants limited disclosure of their identity or avoided certain parenting spaces – negotiations they deemed necessary due to a lack of acceptance of family diversity. The theme "pragmatic parent" describes how participants emphasized their parenting identity, rather than their gender identity. It is worth noting that the strategy of "inventive pragmatism" was previously identified in Pfeffer's (2012) study of cis people with trans male partners. In this study, the strategy of "being pragmatic" was identified as more readily available to some participants than others: in particular, those who were perceived as part of a "suitable family" based on their belonging to certain priority and parenting categories. This theme highlights the impact of problematic assumptions about parents on the strategies that trans and non-binary parents used to navigate highly normative parenting spaces.

Participants described negotiating disclosure of their identity in order to avoid discrimination within parenting spaces ("I tend to be quite fussy about who knows" (Ali)). Some participants explained that they felt able to use this strategy due to how others perceived them:

> It's not a positive thing for us to pass as cis, but to be able to look like a kind of 'standard family', or like a 'standard couple', meant that people didn't really question it. (Jemma)

> I'm really privileged in the sense that I tend to get that admiring look that people tend to give to single dads who are giving their baby a bottle… people don't doubt my ability in the way that they would if I had a mental illness or if I was disabled, or if I was a person of colour, or if I was non-binary perhaps. (Robin)

Being perceived through a cisheteronormative lens thus enabled parents such as Jemma and Robin to move through some parenting spaces without disclosing their identity. However, as Robin predicted, this was not the experience of other parents:

> I usually undergo some kind of exam before my children are allowed to invite or be invited for play dates … I guess the trans identity goes with other minority identities. I'm a stranger, I have a different accent, I have a different history, I dress differently, I professionally am in an unclear situation. (Yanniq)

> I mean, being in the community I am in … I don't actually know other brown trans people … and that's very isolating. And I know when I go out in this area, people are confused by me, and that's very isolating as well. (Amal)

Amal's experience of isolation and being met with confusion demonstrates the impact of what another participant described as the "very limited representation of … trans and non-binary people who aren't white" (Charlie).

Conversely, as a young parent, Jemma found their age to dominate in others' perceptions:

> There was quite a lot of focus on me being very young, so that it was almost easier not to mention being non-binary and like (pauses) transness as a whole. (Jemma)

Jemma's feelings of being unable to disclose their gender identity should be understood in relation to

existing stigma around young parenthood (Conn et al., 2018), and demonstrates that for some of the participants in this study, 'being pragmatic' was felt to be more of an inevitable consequence of restrictive norms than a deliberate choice.

In addition to disclosure negotiation, participants described pragmatically avoiding certain spaces due to expectations of discrimination. When deciding upon their route to parenthood, for instance, a number of participants avoided adoption because "when you adopt … there is so much checking of people … when you give birth to a child, nobody really checks if you're qualified for it" (Jemma), echoing the findings of Tasker and Gato (2020). One participant stated that these expectations resulted in their rejection of several routes to parenthood:

> If I went through the adoption route or surrogacy I would be subjecting myself to systems that weren't designed for me, and would potentially be quite scary and unpredictable and might just reject me outright. (Robin)

Another participant (with a trans ex-partner) described having pursued IVF treatment, but being asked a number of inappropriate questions:

> 'How would you explain to a child that they've been conceived by donor sperm?' … 'How would explain to a child that you're blind?' … And they were like at one point, 'Is there any chance you could be pregnant?' And we just glared at them going, 'He has no penis! Which part of that haven't you quite grasped? (Ali)

After this experience, Ali decided to "cut out the medical side of things", thus representing a choice constrained by cisgenderist assumptions about reproduction and ableist assumptions about parenthood.

Other systems of oppression were also found to impact upon participants' choices for parenthood. As Yanniq described, in terms of social class:

> If you come from a working class background, because you have a much, much narrower set of options … You are vulnerable, so it's easier to, to be in relationships that somehow provide you with a role that is, that is easily recognisable by, by others. (Yanniq)

Participants also described avoiding certain spaces once having become parents due to their lack of inclusivity ("I've sat in a lot of quote unquote 'mother and baby groups', and felt like massively othered" (Max)), and several participants described this as difficult ("I have a little bit of reticence of going to things for other parents because they have expectations about 'oh so who's the dad'" (Kim)).

Participants also described having to make difficult decisions regarding balancing their own identity and parenting approach, particularly given that their children may come into contact with unsupportive others:

> I don't always use neutral pronouns, I do sometimes use he/him … I don't really want to have a long conversation about using gender-neutral pronoun … I don't want [child] to have to be affected by that. (Finn)

> Cos I had a good relationship with my grandparents, it's important for [child] to have a good relationship with her grandparents. So I bite my tongue a lot with them. (Ali)

In addition to negotiating disclosure and avoiding spaces, strategies of detachment were used, specifically by birth parents during pregnancy. Due to others' expectations of pregnancy as a "very female coded thing, that someone will look at you and just think you're a woman" (Finn), participants described having difficult feelings ("my body became to my own eyes an unequivocally female body, and I found myself unable to cope with that" (Yanniq)), and thus focusing on their body's function during pregnancy:

> I suppose the way I dealt with my pregnancy was by not thinking about this pregnancy, as this body being a woman's body. This is more of a body that is carrying a child … I got very scientific with it, these are mammary glands meant for feeding a child. These are not in any way female, these are mine. (Amal)

This approach to pregnancy, although described as being "very, very difficult to do" (Amal), allowed participants to navigate pregnancy spaces more easily. Yet pregnancy also complicated some participants' experiences of their gender identity due to a lack of societal understanding:

> Before it felt quite uncomplicated, like I'm just a guy and people understood that. And now I'm like, I'm a dad but I gave birth, and maybe I don't quite have the confidence to state that completely openly. (Robin)

Such findings suggest that distinguishing between the experiences of trans and non-binary parents is important, as trans men, non-binary people, and trans women may have unique experiences (Bower-Brown, forthcoming).

In general, participants who were pragmatic in the face of exclusionary spaces described feeling frustrated and ultimately erased, suggesting that this strategy, although perhaps effective, did not allow participants to experience their gender identity and parenting identity in the way they would have liked:

> There were times when I was upset because someone didn't use the right pronouns, but I didn't make an effort to make them use them or make them say them, which I think was more frustrating for myself than for other people. (Jemma)

> You're in a really difficult situation as an adopter who's family finding cos you can't piss off the social workers … yeah, it was really hard, just like keeping on going and keeping on going and facing constant rejection and discrimination. (Charlie)

Being a pioneering parent: changing and creating spaces

In addition to the strategy of "pragmatic parent," participants also described pioneering through highly normative spaces, and constructing their own spaces, free of cisheteronormativity. Interestingly, although participants' experiences of pioneering outside of the home environment were related to their unique experiences of intersectional marginalization, within the home, participants' experiences were found in many ways to be similarly positive. This theme has been termed "being a pioneering parent" to capture the ways in which participants both changed existing, and constructed new, spaces to improve both their and others' experiences:

> I remember just crossing out signs in the hospital and putting parent. And with all the breastfeeding stuff it was like breastfeeding mums. No, breastfeeding parent. (Ali)

> I don't really know of any other [South Asian] trans people, least of all parents. So if I get myself out there, there's going to be someone else who sees me and goes 'that person looks like me' … I consider myself to be a trans parent in more than

one way, not just to my son, to younger trans people. (Amal)

> [My child] sits at the intersection of a lot of really complicated and marginalised identities … So I want to do all I can to prepare them to face those challenges and to also try and change the world so they don't have as many challenges. (Charlie)

The quotations from Amal and Charlie here suggest that participants' own intersectional understanding of oppression impacted upon the strategies they used. However, participants noted the "burden on gender divergent people to be educators" (Max) and to be visible, feeling a "pressure to be a 'model minority' … can't get anything wrong otherwise you're letting down all non-binary parents ever" (Charlie). Pioneering was also associated with precarity, with participants highlighting tensions between "pragmatic" and "pioneering" strategies:

> I think to everybody I mentioned 'oh I use they/them pronouns' and they kind of didn't know what that meant, or did and took it on board and then immediately forgot about it or didn't know how to deal with it. So generally it became easier just to not even try to get people to understand that … I wouldn't want like something to happen to [child] because these people had some sort of prejudice against me. (Jemma)

> At one point I did think 'oh I'm such a drag on the ticket'. Maybe my wife should be assessed as a solo adopter and then she could get children and I could be their parent just by stealth essentially. (Max)

These quotations highlight the tension felt by participants between asserting their identity and receiving appropriate support for both themselves and their children. During the transition to parenthood, this was found to be particularly impactful, due in part to the lack of power experienced by participants when either experiencing a pregnancy or engaging with adoption services. Relatedly, some participants felt that they grew in confidence once having become parents, meaning that they were more able to navigate normative environments ("I'm much more willing and comfortable in saying 'I am a trans parent, I'm not a mum, I'm not'" (Jemma)).

Tensions were also associated with being perceived as different, such that participants described feelings of both pride and vulnerability:

When people stare at me in the street and I'm wearing like a gay top and I'm walking with my child and on a good day I'm like 'oh these people are just looking at me, okay that's fine', and on a bad day I'm like 'I feel in danger' and it is definitely because I am not being quiet about being trans or about being queer. (Jemma)

Participants explained that their experiences of 'being a pioneering parent' could be socially isolating ("in [my child's] school…nobody talks to me" (Amal)). In the face of feeling isolated, participants noted the importance of social support, both in terms of family and friends ("having people like my spouse, who understands what it is to be like myself and having other queer people…it's very, very important" (Amal)) and support groups ("we like taking [child] to all the different trans events that we go to…it's given us that sort of support network that we were lacking before" (Lil)). Similarly, allies on the journey to parenthood were described by some participants as enabling them to navigate potentially exclusionary pregnancy and adoption spaces:

[The adoption agency have] put a lot of extra resources into supporting me cos they're having to do many more applications than normal…They arranged for all of the people on my adoption panel to go to trans awareness training. (Charlie)

Alongside articulating the vital role that allies played in the face of structural discrimination, some participants explained the importance of connecting to other trans and non-binary parents ("if you're a nuclear family…everyone knows what your family looks like and it's nice to get a taste of that" (Finn)).

In contrast to their experiences outside the home, which were often determined by participants' unique identities, they enjoyed similar positive experiences at home. Importantly, participants experienced a sense of connection at home, which they had ensured were environments free of cisheteronormativity for themselves and their children:

I'm very much like 'oh, you want to put that on, okay, let's play with that. You look really nice, you look like a princess.' … When you drop the hang ups of what gender is supposed to mean, children experience more and flourish more. (Jemma)

There's no toxic masculinity in this house, he's allowed to have his emotions, he's allowed to be upset. There's no manning up… and we wear nail varnish in this house because we're fabulous. (Amal)

Discussion

This study explored the experiences and identities of trans and non-binary parents in multiple parenting spaces, both during the transition to parenthood and after becoming parents. In terms of experiences within parenting spaces, it is clear that for the participants in this study, the journey to parenthood involved navigating a number of highly unsafe spaces. In accordance with the findings of previous research (Charter et al., 2018; Ellis et al., 2015), pregnancy spaces were found to be particularly difficult for birth parents. However, extending that research, and echoing findings on lesbian, bisexual, and queer non-birth parents (Abelsohn et al., 2013), our findings also highlight feelings of exclusion among trans non-birth parents with pregnant partners. Trans and non-binary adoptive parents also reported navigating services that were cisgenderist and heterosexist, thus confirming the anticipated stigma identified among trans and non-binary prospective parents (Tasker & Gato, 2020). Considering the high proportion of trans and gender-nonconforming adolescents considering adoption (Chen et al., 2018) and rising numbers of children in care in England (Department of Education, 2019), these findings would suggest that the adoption system requires significant improvement if it is to be at all accommodating of prospective trans and non-binary parents, who potentially represent an untapped pool of adopters (Brown & Rogers, 2020).

This study is among the first to consider the strategies used by trans and non-binary parents in negotiating normativities in parenting spaces. As such, it extends the findings of previous research that trans parents balance living authentically with being a parent (Haines et al., 2014), highlighting tensions between the strategies of being a "pragmatic parent" and "pioneering parent." Findings illustrate the difficulties associated with each position: frustration and erasure within the former, and isolation and precarity

within the latter. Importantly, these strategies reflected a tension between participants expressing their authentic identity and receiving appropriate care for themselves and their children. Findings therefore shed light on the difficult everyday decisions made by trans and non-binary parents, and attest to the importance of improving the inclusivity of parenting spaces for trans and non-binary parents.

The findings of this study demonstrate the benefits of adopting an intracategorical intersectional analytical approach and in doing so extend the findings of previous research. As in previous studies (Haines et al., 2014; von Doussa et al., 2015), participants spoke about the challenging intersection of being trans and/or non-binary and a parent when parenting is governed by cisheteronormativity. However, participants also spoke about the numerous other categories that affected their experiences and strategies: Participants, who were deemed to deviate furthest from others' expectations of a 'good parent', associated with whiteness, being cisgender, heterosexual, able-bodied, gender-conforming and middle class, and whose family resembled a nuclear family least in terms of age, the number of parents and family setup, seemed to have particularly negative experiences within parenting spaces. Aspects of participants' identities were also found to impact upon the strategies they used to navigate these spaces: Some participants felt able to choose whether to disclose their identity or engage in certain spaces, whereas others reported feeling consistently othered.

As in previous findings about the shifting relationship between gender identity and parenthood (von Doussa et al., 2015), some participants' experiences of pioneering and pragmatism changed over time. The finding that the transition to parenthood was particularly challenging is perhaps unsurprising given that many participants who used IVF and adoption to become parents were deemed unsuitable by clinicians and those working in adoption services. Once parents, participants were also judged on the basis of multiple priority and parenting categories, and negative experiences seemed to lead participants to navigate spaces more cautiously thereafter. Social support both during and after the transition to parenthood was found to be very important, thus highlighting the importance of staff education within pregnancy and adoptive services, although overarching institutional support for gender diversity would of course relieve both parents and their allies of this work. Considering that a number of parents described feeling somewhat isolated, the findings of this study clearly highlight the need for social and institutional support for trans and non-binary parents living in diverse family forms, both before and after they have become parents.

Limitations

Although this study employed an intersectional analysis to best understand parents' experiences, the majority of participants in this sample were white. Some scholars have suggested that intersectional research that does not engage with racialization is "depoliticised intersectionality" and is limited in that it fails to attend to the interlocking systems of oppression that formed early intersectional analyses (Bilge, 2013). While this study has aimed to engage with experiences of whiteness and of racialization, it will be important for future research to explore the experiences of trans and non-binary parents of different races and ethnicities. Although this study is unique in its approach, engagement with additional perspectives, such as those found in critical race theory and critical disability theory (Delgado & Stefancic, 2001; Pothier & Devlin, 2006), may also help to extend scholarly understandings of the experiences of trans and non-binary parents in future work.

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