

8-2019

"We've been here all along" : the standpoint and collective resilience of transgender U.S. service members.

Jacob R. Eleazer
University of Louisville

Follow this and additional works at: <https://ir.library.louisville.edu/etd>

 Part of the [Counseling Psychology Commons](#), [Gender and Sexuality Commons](#), [Military and Veterans Studies Commons](#), and the [Multicultural Psychology Commons](#)

Recommended Citation

Eleazer, Jacob R., "'We've been here all along' : the standpoint and collective resilience of transgender U.S. service members." (2019). *Electronic Theses and Dissertations*. Paper 3263.
<https://doi.org/10.18297/etd/3263>

This Doctoral Dissertation is brought to you for free and open access by ThinkIR: The University of Louisville's Institutional Repository. It has been accepted for inclusion in Electronic Theses and Dissertations by an authorized administrator of ThinkIR: The University of Louisville's Institutional Repository. This title appears here courtesy of the author, who has retained all other copyrights. For more information, please contact thinkir@louisville.edu.

“WE’VE BEEN HERE ALL ALONG:”
THE STANDPOINT AND COLLECTIVE RESILIENCE OF TRANSGENDER U.S.
SERVICE MEMBERS

By

Jacob R. Eleazer
B.A., Eastern Kentucky University, 2010
M.Ed., University of Louisville, 2016

A Dissertation
Submitted to the Faculty of the
College of Education and Human Development
in Partial Fulfillment of the Requirements
for the Degree of

Doctor of Philosophy
in Counseling and Personnel Services

Department of Counseling and Human Development
University of Louisville
Louisville, Kentucky

August 2019

Copyright 2019 by Jacob R. Eleazer

All rights reserved

“WE’VE BEEN HERE ALL ALONG:”
THE STANDPOINT AND COLLECTIVE RESILIENCE OF TRANSGENDER U.S.
SERVICE MEMBERS

By

Jacob R. Eleazer
B.A., Eastern Kentucky University, 2010
M.Ed., University of Louisville, 2016

A Dissertation Approved on

July 22, 2019

by the following Dissertation Committee:

Dissertation Director: Laurie McCubbin, Ph.D.

lore dickey, Ph.D.

Ahmad Washington, Ph.D.

Amanda Mitchell, Ph.D.

Brynn Tannehill, M.S.

DEDICATION

This dissertation is dedicated to the memory of
Staff Sergeant Jess Shipps and Petty Officer Britt Davidson
and in gratitude to
the transgender Soldiers, Sailors, Airmen, and Marines who trusted me with their stories.
Bearing witness to your journeys has been an honor.

ACKNOWLEDGEMENTS

This work was made possible by financial support from the Palm Center, the APA Society for the Psychology of Sexual Orientation and Gender Diversity, and the World Professional Association for Transgender Health. Special thanks go to Dr. Aaron Belkin and Indra Lucero for believing in this project.

Dr. Lali McCubbin, thank you for your consistent encouragement. I might have quit a hundred times without you. Thanks for (kindly) kicking my butt across the finish line.

Thank you to Drs. Abbey Poffenberger, Colt Keo-Meier, Fiona Halloran, lore dickey, and Stephanie Budge, and Marta Miranda, for mentoring me as a scholar, psychotherapist, and activist. You have opened doors for me and other aspiring feminist, trans, and queer professionals. Thank you all for being my possibility models and for changing my life.

To my families: the families I chose and the families who chose me for all of who I am. I have scraped through this mess only through luck, sass, and your steady support. You had my six and helped me pick up the pieces through my own trans military journey. My deepest gratitude goes to Dad, Meridith, Miriam, Mom, Rebekah, the nerds of T*STAR Lab, the transgender Service Members and leaders of SPART*A, and the queer folk of Wilgus Avenue. Thank you for giving me a place to come home.

My undying respect goes to the transgender Service Members, Veterans, and allies in the fight for open trans service. Our community and nation owe an irreparable debt to the courage and selfless service of Allyson Robinson, Blake Dremann, Bridget Wilson, Brynn Tannehill, Fiona Dawson, Paula Neira, Sheri Swokowski, Sue Fulton, and countless others. Thank for your commitment to not leaving anyone behind.

Finally, thank you a thousand times over to my incredible dissertation committee and to the transgender Service Members, Veterans, and allies of the TMS Lab. Ali Sommer, Amber Kizewski, Genevieve Ard, Hanna Tripp, Hayden Myers, Jessica Dowell, Julianne Sutton, Landon Marchant, Mac McEachin, Mel Lesch, and Stephanie Waterhouse: this project would not have been possible without your invaluable insights, dedication, and hard work. To you and all the other queer research nerds out there reading this, thanks for joining me on this journey and for picking up the torch.

ABSTRACT

“WE’VE BEEN HERE ALL ALONG:” THE STANDPOINT AND COLLECTIVE RESILIENCE OF TRANSGENDER U.S. SERVICE MEMBERS

Jacob R. Eleazer

July 22, 2019

The 2010 repeal of the Don’t Ask, Don’t Tell (DADT) policy ended the ban on open lesbian, gay, and bisexual (LGB) military service (Alford & Lee, 2016). However, prior to 2015 transgender military personnel were still considered medically and psychologically unfit for service (Kerrigan, 2012; Yerke & Mitchell, 2013). From 2015 through 2017, the Department of Defense (DoD) researched the implications of policy change, developed new policies and trainings, and implemented open service for transgender persons (Belkin, 2016; Carter, 2015). The purpose of this study was to explore the experiences of transgender military service members prior to this transition in military policy. Researchers interviewed actively serving transgender military personnel ($N = 40$) about their gender identity process and military service. Researchers aimed to better understand how service members made sense of their experiences of oppression and resilience from their own standpoint as they negotiated their gender identity and military career. Transgender service members’ individual perspectives and collective standpoint provided insight into intrasubjective and intersubjective experiences of

surviving institutionalized oppression. Superordinate themes included: (a) understanding oppression; (b) survival strategies; (c) individual resilience factors; and (d) collective resilience factors.

Public Significance Statement

This qualitative study seeks to amplify the voices of actively serving transgender military service members. Results are timely given the recent implementation of *DTM-19-004: Military Service by Transgender Persons and Persons with Gender Dysphoria*, which reinstated the ban on open transgender military service (DoD, 2019). Results present unique strategies for resistance and considerations from the perspective of stakeholders that may assist researchers, community organizations, and care providers in better understanding and serving the transgender military community.

Keywords: transgender, military, standpoint, oppression, collective resilience

TABLE OF CONTENTS

	PAGE
DEDICATION	iii
ACKNOWLEDGEMENTS	iv
ABSTRACT	v
LIST OF TABLES	viii
CHAPTER 1: INTRODUCTION	1
CHAPTER 2: LITERATURE REVIEW	8
CHAPTER 3: METHODOLOGY	20
CHAPTER 4: RESULTS	33
CHAPTER 5: DISCUSSION	58
REFERENCES	63
APPENDICES	80
Appendix A	80
Appendix B	84
Appendix C	85
CURRICULUM VITA	86

LIST OF TABLES

TABLE	PAGE
1. Participant Demographics	22
2. Oppression and Resilience: Superordinate Themes, Themes, and Meanings	34

CHAPTER I

INTRODUCTION

Finding Our Voice: The Need for a Trans-military Standpoint

“If I didn't define myself for myself, I would be crunched into other people's fantasies for me and eaten alive.” -Audre Lorde¹

Research for People Like Me

My first experience attending the American Psychological Association's Annual Convention cemented my resolve to complete this project unapologetically and on my own terms. I was brimming with anticipation after I had successfully arranged a face-to-face meeting during the conference with one of my academic heroes. After an awkward introduction over coffee, the conversation quickly turned to a mutual passion for policy research. However, as I listened to them describe their new project on “transgendered” people, my admiration shifted to disappointment. Without thinking, I blurted out: “What made you want to study trans people?” Only a well-practiced habit of military deference in the presence of authority curbed my tone and muted the question I did not ask: *What makes you, a cisgender person, with no prior experience or interest in this field, think you are qualified to conduct research on my community?* Seemingly unaware of my

¹ From “Learning from the 60s” a speech given by Audre Lorde at Harvard University in 1982, printed in *Sister Outsider: Essays and Speeches* (Lorde, 2007, p. 127).

consternation, the researcher proceeded to speak at length about the lack of existing research, how trans² issues were becoming a “hot topic” in academia, and their moral responsibility to address the needs of a vulnerable population. Their response struck me as an unsavory blend of rank opportunism and a paternalistic savior complex. However, it was the following offhanded comment that burrowed its way into my consciousness and proceeded to nest there for the next several years of my journey to becoming a psychologist: “It will always be more important for people like me to do this work than people like you.”

At this point, my congenial façade must have slipped a bit, because their expression softened as they began to carefully explain why marginalized persons will never be considered objective or—consequently—authoritative producers of research when studying their own identities and communities. I do not believe this researcher intended to be hurtful or demeaning. However, the encounter caused me to seriously reconsider pursuing a doctorate. The interaction haunted me because I recognized my own unspoken fear lurking between the lines of their argument. In the face of seemingly insurmountable challenges and in moments of crippling self-doubt, I heard the echo of that feared truth: *people like you were never meant to be scientists.*

“Your Theories are Covered in our Blood³” Linking Epistemic Oppression to Harm

Although transgender military service was the subject of the present study; this project was—by necessity—epistemological in nature. The knowledge of marginalized communities has been difficult to access and routinely invalidated within the context of

² The terms ‘trans’ and ‘transgender’ are used interchangeably throughout this dissertation.

³ An unknown community activist, as quoted by feminist scholar Vivian Namaste (2009, p. 27).

mainstream academia's largely positivist discursive practices (Bailey, 2014; Dotson, 2015; Collins, 2000; Hook, 2001; Spillers, 1984). Hegemonic systems of knowledge production (e.g., universities, peer-reviewed publications, grantors) have historically encumbered and devalued the work of researchers operating outside existing paradigms (Foucault, 1981; Kuhn, 1962). Such epistemic oppression has functioned to silence researchers who hold marginalized identities (Castillo-Garsow, 2012; Collins, 2000) and research about marginalized communities (Dotson, 2015; Fairclough, 1993; Gould, 1996; Haraway, 1991; Harding, 1986; 1998; Hartsock, 1983; Spillers, 1984).

Existing academic paradigms have delimited researchers' conceptualizations, hypotheses, and interpretations regarding the experiences of oppressed groups to those benefiting or substantiating the current reigning paradigm (Kuhn, 1962). From this framework, members of oppressed populations served as the objects of study as opposed to valid producers of knowledge (Harding, 1986; 1998; Hartsock, 1983). However, the experiences of 'abnormal' persons has titillated the curiosity of mental health researchers belonging to the dominate group since the field's inception (Fisher, 2007; Georgaca, 2014). From Freud's dismissal of women's reports of sexual abuse in lieu of more inventive etiologies for their distress (Kitzinger, 1996; Masson, 1985; Rush, 1996), to the active involvement of psychologists in the eugenics movements of the early 20th Century (Gould, 1996; Louçã, 2009; Nourse, 2011; Yerkes, 1923), to the pathologization of sexual orientation and gender diversity in the DSM (American Psychiatric Association, 1980; American Psychiatric Association, 1995; Bailey, 1999; Meyer, 2003), the fields of psychology and psychiatry have contributed more than their fair share to the epistemic oppression of marginalized groups. Within the hierarchical context of positivism, those

truths which (and subsequently those persons whom) did not fit within the existing paradigm were deemed illogical, abnormal, or—in the language of the field—pathological (Foucault, 1965).

Traditional positivist methods of scientific inquiry have been far from epistemologically neutral and remain better suited to reproducing rather than subverting dominant narratives (Bauer et al., 2009; Collins, 2000). Positivist discursive practices corrupted the current body of research on transgender identity (Bauer & Scheim, 2013; Reisner et al., 2014), specifically in the field of psychology (Bailey, 1999; Smith, Shin, & Officer, 2011). In fact, the pathologization and objectification of transgender persons by the mental health field is perhaps one of the most explicit examples of how a positivist epistemology is not neutral, objective, or harmless (Bailey, 2014; Foucault, 1981; Namaste, 2009). Given the application of psychological research to mental health policy and practice, these seemingly remote theoretical problems have had direct implications for the healthcare of transgender persons, for good (Mattocks et al., 2014) or for ill (Bauer et al., 2009; Smith, Shin, & Officer, 2011).

Due to the pervasive influence of epistemic oppression on the transgender population, it was necessary to begin this project by intentionally deconstructing existing discourse and reconstituting epistemological assumptions about transgender service members. Unfortunately, identifying epistemic oppression was much simpler than unraveling its progeny. Lacking a theoretical foundation of valid existing discourse from which to launch novel scientific inquiry, this researcher set about developing an understanding of transgender service members' experiences from their own collective standpoint. In her book, *Black Feminist Thought* Patricia Hill Collins' used collective

standpoint theory to build a Black Feminist Epistemology (2000). For this study, Collins' approach to constructing epistemologies was adapted as a blueprint for initiating and sustaining academic discourse about transgender military service (Gines, 2015).

Standpoint theory is a poststructuralist epistemology in which researchers examine inter-subjective discourse from a unique position within contextual matrices (Harding, 1986). Standpoint theory posits that all knowledge is partial, non-generalizable, and contingent upon both researchers' and subjects' unique location within a broader cultural and temporal context (Sprague, 2016). The theory, as defined by feminist scholar Sandra Harding, operates under three primary assumptions: there is no objective truth, no two people have the same exact view, and we should not misinterpret our own standpoint as objective fact.

Traditional feminist standpoint theorists sought to privilege the voices of marginalized persons; however, Collins argued that centering the perspectives of individuals served to perpetuate White, western values of individualism, limiting researchers understanding of marginalized communities from the position of collective identities (Collins, 2000). Collins emphasized the heterogeneity of identities and experiences within marginalized communities, acknowledging that a collective standpoint could not be universally applied (2000). However, she also asserted that understanding the collective standpoint of a marginalized community was still salient, arguing that the identities, cultural norms, and values of marginalized groups are shaped by their experiences of oppression (Collins, 2000; Martinez, 2005). For example, communities of color have historically resisted oppression by constructing oppositional cultures from existing cultural narratives (Martinez, 2005).

The Transgender Military Service Study and the Trans-Military Movement

During the roughly two-and-a-half-year period of data collection for the Transgender Military Service (TMS) study, the transgender military community went from barely existent to the apparent verge of mission success. When this project was launched in 2013, actively serving transgender military personnel were just beginning to come together as a community. In 2009, Outserve, the largest member-based organization for LGBTQ+ military personnel, started Outserve Trans, a covert online chapter exclusively for actively serving transgender members. In 2013, the membership of Outserve Trans, just over 100 members, joined with other community leaders to form SPART*A, a new LGBT military organization committed to fighting for open transgender service. Just one year later, membership had grown to upwards of 400 members and, with the support of allied funders and LGBTQ* organizations, SPART*A hosted the first in-person meeting of actively serving U.S. military personnel. Starting mere days after the last TMS interview was completed, one-by-one each branch of the U.S. military started freezing the discharge process for transgender service members. In June of 2015, Secretary of Defense Ashton Carter announced his plan to study, then implement, his open transgender military service policy (Carter, 2015).

Using collective standpoint theory as a framework, this researcher designed the TMS study to uncover the collective standpoint of the emerging transgender military community and increase knowledge about the lived experiences of transgender service members from their own standpoint. Data collected from members of this hidden demographic at this unique time period provided an unprecedented opportunity to

illuminate the experiences of transgender service members as the trans-military community's collective identity emerged.

CHAPTER II

LITERATURE REVIEW

In December 2010, the 111th United States (U.S.) Congress repealed the Don't Ask, Don't Tell (DADT) policy which barred lesbian, gay, and bisexual (LGB) persons from serving openly in the military (Alford & Lee, 2016). However, unlike 'homosexuality' under DADT, transgender identity was not prohibited by a single congressional act (Alford & Lee, 2016), but through a complex web of regulations, case law, and military policies (Kerrigan, 2012). The U.S. Department of Defense (DoD) maintained and enforced these discriminatory practices which barred transgender persons from joining the military and mandated the involuntary discharge of transgender persons discovered in the ranks (DoD, 1982; 2004; 2011a; Elders, Brown, Coleman, Kolditz, & Steinman, 2015; Kerrigan, 2012).

Transgender Military Service

Despite military policy, transgender persons have served at higher rates as compared to the general population (Gates & Herman, 2014; Harrison-Quintana & Herman, 2013; Shipherd, Mizock, Maguen, & Green, 2012). Data from the first large study of U.S. transgender military veterans ($N = 70$) indicated that veterans assigned male at birth were perhaps twice as likely to identify as transgender as compared to the civilian population (McDuffie & Brown, 2010). Another study found that 33% of transgender women sampled ($N = 141$) were also veterans (Shipherd et al., 2012). Gates and Herman

(2014) estimated that there were over 15,000 transgender persons currently serving on active duty or as an active member of a reserve component, despite military policy indicating that transgender service members did not exist. Further analysis of data from the National Transgender Discrimination Survey (NTDS; Harrison-Quintana & Herman, 2013) revealed that 20% of participants reported current or past military service ($N = 6,456$). To provide some context for these figures, according to data from the most contemporary U.S. Census, the overall rate of veteran status among the general U.S. population was 10.1% (U.S. Census Bureau, 2011).

Systemic Oppression

Oppression is a restrictive, prohibitive, and punitive social phenomena made tangible through both explicit and covert operations within systems of power (Foucault, 1979; Frye, 1983). Systems of oppression are collections of coercive practices, which limit choice (Frye, 1983). Patricia Collins described systemic oppression as overlapping layers of domination which function in concert to delimit the choices of marginalized persons (Collins, 2000). She defined an oppressive system, or *matrix of domination*, as characterized by structural, disciplinary, hegemonic, and interpersonal domains of power (Collins, 2000, p. 276). Often the overwhelming complexity of systemic barriers function to obscure the connection between these processes and a person's lived experience (Frye, 1983; Hillard, 1988). This phenomenon was perhaps best articulated by feminist theorist Marilyn Frye using the metaphor of a bird cage (Frye, 2008). When looking at each individual metal bar, an observer cannot discern how one single barrier might inhibit movement. However, when the cage is examined holistically, the observer perceives the

interlocking network of barriers which function collectively to prevent the bird's escape (Frye, 2008).

History of Transgender Discrimination in Military Policy

Within the context of their military service, transgender persons faced systemic barriers through informal practices, explicit policies which pathologized and criminalized gender non-conformity and transgender identity, and increased risk of harassment and victimization. For many transgender service members, separation from military service could occur as quickly as a matter of days (Kerrigan, 2012, Meyer, 1990). In one well-circulated primer to military leadership, *Company Command: The Bottom Line*, the author recommended that when initiating separations for “high visibility cases – such as drug abusers, homosexuals, and thieves” that commanders should “move quickly” to execute discharges in order to minimize disruption to the unit (Meyer, 1990, p. 62). This process would often leave service members without adequate time for due process or even prepare to meet their basic needs (such as housing, employment, VA health care benefits enrollment, etc.) following their abrupt transition from military to civilian life (Kerrigan, 2012).

Depending on the circumstances of the case, commanders could initiate separations through three primary avenues: medical, administrative, and criminal. Each approach involved different risks, consequences, and legal rights for transgender persons over the course of their investigation and separation. However, the rationale for all separation procedures was predicated on two fundamental assumptions about gender identity and expression: (1) that transgender persons were psychologically impaired and, as such, medically unfit for military service and (2) that gender non-conformity was

disruptive to good order and discipline and, as such, a violation of the *Uniform Code of Military Justice* (UCMJ; Kerrigan, 2012).

Medical and mental health policies. Medical regulations constituted the most blatant example of discriminatory military policies. Regardless of transition status or transition goals, Department of Defense (DoD) regulations mandated that transgender service members be involuntarily separated based on gender identity alone (DoD, 2011a). Department of Defense Instruction (DODI) 6130.03 *Medical Standards of Appointment, Enlistment, and Induction in the Military Services* listed “transsexualism” and “transvestism” in the same category psychosexual paraphilias (DoD, 2011a, p. 48). Under these criteria, transgender persons failed to meet medical standards for induction or retention in the U.S. Armed Forces. Medical standards for induction also considered any “major abnormalities and defects of the genitalia” to be disqualifying conditions, specifically changes resulting from gender confirming surgery or hormone therapy, as well as congenital differences in genitalia (DoD, 2011a). Those attempting to hide past diagnoses, prescriptions, or surgeries could be charged with fraudulent enlistment or falsifying information on medical paperwork, crimes punishable by a fine of up to \$10,000 and/or 5 years of military confinement and/or dishonorable discharge (DoD, 2011b).

Gender performance and presentation. The reinforcement of traditional gender performance in regulations on appearance and military uniforms put transgender persons at risk of punitive action (Kerrigan, 2012). Branch-specific regulations outlined uniform and appearance standards based upon gender, including: cut of uniform, length of hair, shaving practices, wear of make-up, and even the color and style of underwear (Kerrigan,

2012). Beyond uniform and grooming regulations, *U.S. v. Davis* set a precedent in case law when a military court upheld cross-dressing as “disruptive to good order and discipline” and a violation of Article 134 of the *UCMJ* (Kerrigan, 2012). In this case the court cited the discomfort of fellow sailors as evidence that Davis’s cross-dressing was disruptive, punishing Davis with a bad-conduct discharge (Kerrigan, 2012). Under these specific policies and the broad scope of Article 134, service members dressing in a manner congruent with their gender identity did so at the risk of criminal charges, even when off duty and outside the physical boundaries of a military installation (Kerrigan, 2012).

Oppression and LGBTQ+ Psychology

Historically, mental health disparities experienced by sexual and gender minorities have been used as justification for the pathologization of sexual orientation and gender diversity (Meyer, 2003). In response, Meyer’s Minority Stress Theory (MST) offered the scientific community a framework for understanding the relationship between systemic oppression and psychological distress (Meyer, 2003). Meyer situated his model within the historical context of epistemic oppression, arguing that the body of research was based on “flawed logic” leading researchers to ask the wrong questions or not ask any questions at all (Meyer, 2003, p. 1). Meyer asserted that while lesbian, gay, and bisexual (LGB) persons experienced higher rates of mental health disorders, these negative mental health outcomes resulted from exposure to minority stressors (Meyer, 1995; 2003). The model included a taxonomy of oppression which encompassed prejudice events, rejection, institutional barriers, microaggressions, fear of discrimination, and internalized shame as unique sources of distress experienced by LGB

persons (Meyer, 2003). In short, Meyer effectively operationalized for mental health researchers a concept that marginalized communities had long understood: surviving oppression leaves scars.

Similar to LGB persons, transgender persons have experienced mental health disparities, such as increased rates of depression, anxiety, suicidal ideation, and suicide attempts (Bockting, Huang, Ding, Robinson, & Rosser, 2005; Budge, Adelson, & Howard, 2013; Clements-Nolle, Marx, & Katz, 2006; Grossman, D'Augelli, Salter, & Hubbard, 2006). Research investigating the impact of gender identity related trauma supported the use of the MST model with the transgender population (Hendricks & Testa, 2012). Trauma and minority stressors have been linked to mental and physical health disparities for transgender persons (Blosnich et al., 2013; Clements-Nolle et al., 2006; Hendricks & Testa, 2012; Testa, Jimenez, and Rankin, 2014). Researchers investigating the impact of minority stress on suicidality found that transgender survivors of gender-based victimization were four times more likely to have attempted suicide (Testa et al., 2012).

The deleterious impact of minority stress on physical and mental health has also been identified among transgender veterans. Researchers with the Veterans Health Administration (VHA) found that transgender veterans experienced higher mortality rates as compared to other veterans (Blosnich et al., 2013). Qualitative research on the experiences of transgender veterans identified several themes reflective of minority stressors including verbal harassment, physical violence, and sexual violence (Chen, Granato, Shipherd, Simpson, & Lehavot, 2017). Another study found that transgender

veterans living in states and municipalities without non-discrimination policies experienced higher rates of suicidality (Blosnich et al., 2016).

However, there is a dearth of research specifically investigating the experiences of transgender people who are actively serving in the military. Dietert & Dentice's (2015) qualitative study included transgender participants who were actively serving in the U.S. military as well as in the militaries of foreign allied nations. This study explored nuances in service member's experiences of workplace discrimination as compared to transgender persons serving in militaries allowing open service. Another qualitative study identified seven themes researchers interpreted as experiences unique to transgender service members: pronoun usage, dress and personal appearance, clarity of identity, double standards, performance, relationships, and hormone usage (Parco, Levy, & Spears, 2015). Both studies identified that transgender service members experienced discrimination due to military policy and faced barriers to gender transition and gender affirming healthcare (Dietert & Dentice, 2015; Parco et al., 2015).

A Socio-Ecological Definition of Resilience

In his commentary on the *Psychology of Sexual Orientation and Gender Diversity* special issue on LGBT resilience, Meyer emphasized that “understanding resilience as a partner in the stress to illness causal chain is essential for LGBT health research” (2015, p. 209). In support of this framework, researchers investigating the resilience of transgender people in the context of minority stress found that greater resilience was correlated with better mental health outcomes (Gonzalez, Bockting, Beckman, & Durán, 2012). Understanding resilience is clearly critical to understanding how oppressed persons and communities survive and heal; however, scholars have been inconsistent in

defining resilience as a measurable construct (Hartling, 2005). The U.S. Army has implemented mandatory resiliency training as a preventative intervention to bolster operational readiness and combat mental health stigma (Reivich, Seligman, & McBride, 2011). Military psychologists defined *resiliency* as the ability of service members to “bounce back” (rather than break) when faced with adversity (Griffith & West, 2013, p. 140; Reivich, Seligman, & McBride, 2011, p. 25). Extant psychological research on transgender and gender non-conforming persons employed the same “bounce back” language to define *resilience* (Puckett, Matsuno, Dyar, Mustanski, & Newcomb, 2019, p. 2; Singh, 2013, p. 190). However, the predominate focus on resilience as an individual construct (Ungar, 2013) and the presumption of an a priori state of wellness that individuals can bounce back to (Downes, 2017) have perpetuated a limited scientific understanding of how marginalized persons negotiate their lives within the social-ecological context of systemic oppression.

Moving beyond the ‘bounce back’ conceptualization, researchers have moved toward considering relational factors of resilience, particularly when studying marginalized groups (Hartling, 2005; Singh, 2013). Such relational conceptualizations of resilience have intentionally considered social factors and the agency of individuals in accessing external support resources (Singh, 2013). Resilience scholars Singh and McKleroy argued that research approaching resilience through a predominately White Western lens has resulted in relational factors being overlooked and an overemphasis on “internal control and individual mastery” (2011, p. 40). Research on the relationship between minority stress and resilience has approached a deeper understanding of how social support has increased overall resilience for transgender persons (Singh, 2013;

Singh, Meng, & Hansen, 2014) and functioned as “buffers” against the negative mental health outcomes associated with minority stress (Breslow et al., 2015, p. 253). Inversely, results from a recent study showed that transgender persons who reported low levels of social support were eight times more likely to experience severe depression as compared to transgender persons who reported high levels of social support (Puckett et al., 2019). Puckett and colleagues also found among various types of social support (friends, family, and community) that support from family members was the best predictor of mental health outcomes for transgender participants (2019).

Although these studies demonstrated an important link between individual resilience and transgender persons’ social context, a relational model of resilience falls short of capturing the full nuance of relationships amongst individuals and their social environments. Ungar posited a more dynamic social-ecological definition, describing resilience as “the capacity of both individuals and their environments to interact in ways that optimize developmental processes” (2013, p. 256). This model emphasized that resilience is a process of active negotiation between individuals and their social environments as opposed to a static preexisting individual trait (Ungar, 2005; Ungar, Ghazinour, & Richter, 2013; Ungar, 2013). Ungar also highlighted that resilience may result in behaviors that appear prosocial or pathological depending upon the individual’s socio-ecological context (2013). As such, for this analysis, all resilience strategies employed by participants were coded and included for analysis and were not organized based on researcher assumptions about the social adaptivity or functional efficacy of the identified strategy.

Collective Resilience

In addition to considering the socio-ecological factors impacting the resilience of individuals, this analysis also investigated the collective resilience of the emerging transgender military community. *Collective resilience* is a newer construct build upon theories of community resilience (Berkes & Ross, 2013; Magis, 2010). Studies have found that resilient collectives thrive by leveraging members' agency and skills for the benefit of both individual members and the group as a whole (Lyons, Fletcher, & Bariola, 2016). Research suggests that groups can foster resilience by building a shared identity, unity of purpose, and a sense of connectedness amongst group members (Lyons et al., 2016; Poortinga, 2012).

Delineating individual and collective resilience factors was critical for this analysis because at the collective and individual levels specific strategies may, in fact, work at crossed purposes. For example, one study found that high involvement in collective action significantly strengthened the positive relationship between internalized transphobia and psychological distress for transgender persons (Breslow et al., 2015). Breslow and colleagues suggested that transgender persons engaging in collective action may have experienced greater rates of discrimination, that transgender persons who experience high rates of discrimination may be more likely to engage in collective action, or possibly both (Breslow et al., 2015). While engagement in advocacy work and collective action is often presented as a path to agency and empowerment, resisting oppressive systems may not lead to uniformly positive individual outcomes for group members.

The Transgender Military Service Study

Data included in the present study were collected as part of the Transgender Military Service (TMS) study, a larger qualitative doctoral dissertation dataset. The study was designed using collective standpoint theory—a poststructuralist feminist epistemological approach (Collins, 2000; Martinez, 2005). The purpose of the TMS Study was to gain a deeper understanding of the dynamic power relationships amongst individuals, marginalized communities, and broader systems from the standpoint of transgender service members. The TMS study aimed to shed light on transgender service members' experiences and collective standpoint during the movement for policy change. In the course of data analysis, three domains pertaining to transgender service members' experiences emerged: (a) access to health and mental health care, (b) vocational decision-making, and (c) oppression and resilience.

The Present Study

The present study utilized an IPA qualitative research design and included analysis of service members' experiences of oppression and resilience. The aim of IPA is to conduct a thorough and systematic analysis of the phenomena of interest as understood by the participants recruited. As such, researchers did not seek to make claims or generalizations at the population level. Interviewers utilized semi-structured interview protocols which included one item explicitly designed to prompt participants to share their experiences of discrimination. The study protocol did not include items designed to elicit service members' experiences of resilience; however, these themes emerged organically from participant narratives about their experiences of discrimination and oppression. However, it is important to note that due to the volume of data produced,

themes connected to service members access to healthcare or the vocational decision-making process were not included for this initial analysis.

Collins argued that marginalized communities are formed in reaction to hegemonic matrices of oppression (2000). Through these communities, members develop shared knowledge to facilitate not only survival but active resistance (Collins, 2000). By studying transgender service members' experiences through their own standpoint, this researcher sought to expose the multi-directional nature of relationships amongst participants, their communities, and institutionalized systems of oppression. Through this epistemic lens, the present analysis offered a unique opportunity to explore transgender service members' individual and collective experiences of oppression and resilience.

Research Questions

1. How do actively serving transgender military personnel make sense of and navigate systemic oppression?
2. How do actively serving transgender military personnel experience resilience as individuals and as a collective?

CHAPTER III

METHODOLOGY

Participants

The TMS Study followed a cohort of actively serving transgender military personnel (hereafter referred to as service members or participants) during the movement for open transgender service in the United States. Service members were recruited using an advertisement and a recruitment letter, both of which were distributed electronically via social media; through lesbian, gay, bisexual, transgender, and queer (LGBTQ+) military community listservs; LGBTQ+ military community organizations; and in print at the first community organizing event for actively serving transgender military personnel. To be included in the TMS study, participants had to indicate that they were over the age of 18, that their gender identity was not congruent with their sex assigned at birth (SAB), and that they were actively serving in the United States military at the time of their recruitment. Individuals who did not meet inclusion criteria were excluded from this study. Interviews were conducted either by telephone or in person.

Data for the present analysis included information collected from all TMS study participants ($N = 40$) obtained from September 2013 to May 2015—before Secretary of Defense Ashton Carter’s open service policy was first announced in June 2015. All service members were actively serving in the Army ($n = 21$), Navy ($n = 12$), Air Force ($n = 5$), or Marine Corps ($n = 2$). At the time of recruitment, all service members were in an

active military status, including members on active duty ($n = 25$), as drilling or active duty members of a reserve component (Reserve, $n = 9$; National Guard, $n = 3$), or as contracted members of a Reserve Officer Training Corps (ROTC) program or military service academy ($n = 3$). Fifteen service members reported a history of serving in multiple military branches and/or components, including one former coast guardsman. Service members were grouped with the branch and component in which they were serving at the time of their recruitment; however, their responses to items reflected experiences from all branches or components in which they served. Between the time of recruitment and completion of initial interview, one service member was involuntarily discharged from active duty due to transgender identity and two participants transferred from active duty to inactive status as members of the retired reserve. One active duty participant was on terminal leave pending medical retirement due to injuries sustained in the line of duty.

Most service members described their gender as binary⁴, with 50% identifying only as female (woman, female, transsexual woman, and/or male-to-female transgender; $n = 20$) and 43% identifying only as male (man, transsexual male, female-to-male transgender, and/or trans man; $n = 17$). One participant described her gender as being both intersex and male-to-female ($n = 1$). Two participants described their gender as being both female-to-male and genderqueer ($n = 2$). Ages ranged from 22 to 63 years-old ($M = 30.98$; $SD = 9.64$). Sixty-eight percent ($n = 27$) of service members described their race and ethnicity as only White (White, White-European, Caucasian). Seven service

⁴ In this paper, the term *binary* is used to refer to a transgender person whose gender identity generally aligns with a traditionally masculine or feminine conceptualization of gender.

Table 1
Participant Demographics

Pseudonym	Gender	Age	Sexual Orientation	Race/Ethnicity	Branch of Service/Component
Aaron	Male	32	Straight	White	Navy/Active Duty
Alex	Male	27	Straight	White	Army/Active Duty
Alice	Female	28	Bisexual	White	Army/Active Duty
Allison	Female	63	Lesbian	White	Army/Active Duty*
Andrea	Female	26	Bisexual, Pansexual	White	Army/Active Duty
Ash	Male	24	Straight	White/Latino	Navy/Active Duty
Audre	Female	40	Lesbian	White	Army/Active Duty
Brian	Male	27	Straight	African American	Army/Reserve
Bridget	Female	32	Lesbian	White	Air Force/Active Duty
Colton	Male	26	Bisexual	White	Navy/Academy

**Retired or discharged after recruitment but prior to data collection.*

Table 1 (continued)
Participant Demographics

Pseudonym	Gender	Age	Sexual Orientation	Race/Ethnicity	Branch of Service/Component
Daniel	Male	23	Pansexual	White	Army/Reserve*
Damien	Male	23	Pansexual	Black/Hispanic	Marine Corps/Active Duty
Diego	Male	26	Straight	White/Latino	Army/Reserve
Fiona	Female	23	Bisexual	White	Navy/Academy
Gwen	Intersex, Female	50	Asexual	Native American, White	Navy//Reserve*
Ian	Male	40	Gay	White	Army/Reserve
Jac	Male	26	Queer, Pansexual	Black, White, Native American	Marine Corps/Active Duty
Jay	Genderqueer, Male	25	Queer, Pansexual	Black, White	Army/ROTC
Jayden	Genderqueer, Male	24	Bisexual, Queer	White	Army/National Guard
Judith	Female	24	Lesbian	White	Navy/Active Duty

**Retired or discharged after recruitment but prior to data collection.*

Table 1 (continued)
Participant Demographics

Pseudonym	Gender	Age	Sexual Orientation	Race/Ethnicity	Branch of Service/Component
Julia	Female	39	Uncertain	White	Army/Active Duty
Katy	Female	31	Bisexual, Pansexual	White	Army/Active Duty
Karen	Female	25	Gay, Straight	White, Native American	Army/Active Duty
Lana	Female	25	Straight	Pacific Islander/ Hispanic	Army/Active Duty
Leon	Male	22	Queer	White	Air Force/Active Duty
Leslie	Female	32	Bisexual	White	Army/Active Duty
Malik	Male	27	Queer	African American	Army/Reserve
Mara	Female	45	Lesbian	White	Air Force/National Guard
Maria	Female	25	"I don't know"	Mixed/Latina	Army/Active Duty
Marta	Female	25	Bisexual	White/Latina	Army/Reserve

**Retired or discharged after recruitment but prior to data collection.*

Table 1 (continued)
Participant Demographics

Pseudonym	Gender	Age	Sexual Orientation	Race/Ethnicity	Branch of Service/Component
Marylin	Female	55	Pansexual	White	Air Force/Reserve*
Matt	Male	25	Straight	White	Navy/Active Duty
Paula	Female	29	Lesbian	White	Navy/Active Duty
Sandra	Female	28	Bisexual	White	Army/Active Duty
Scott	Male	26	Queer	White	Air Force/Active Duty
Sharon	Female	32	Straight	White	Army/National Guard
Sean	Male	43	Straight	White	Navy/Active Duty
Sue	Female	45	Lesbian	White	Navy/Reserve
Tom	Male	27	Straight	Hispanic/Hispanic	Navy/Active Duty
Will	Male	24	Bisexual	White	Navy/Active Duty

*Retired or discharged after recruitment but prior to data collection.

members ($n = 7$) listed Hispanic or Latinx as part of their race and/or ethnicity. Five service members ($n = 5$) included Black or African American as part of their race and/or ethnicity. Three participants ($n = 3$) included Native American as part of their race and/or ethnicity and one participant ($n = 1$) described their race as Pacific Islander. A total of four service members ($n = 4$) reported more than one race (including Black, Native American, Hispanic, Mixed, and/or White). See Table 1 for additional information regarding participant demographics.

Instruments

Multiple data sources were used to triangulate transgender service members' narratives in the context of their specific interpersonal, institutional, and cultural location. Data collection consisted of: (1) a demographic questionnaire (see appendix A), (2) in-depth semi-structured interviews (3) field observations, and (4) documentary evidence (Creswell & Poth, 2017). The interview protocol was constructed using active interviewing techniques such as repositioning, open-ended questions, and making service members' vocabulary salient (see appendix B; Hesse-Biber & Leavy, 2007; Holstein & Gubrium, 1995). Interview questions addressed service members' transgender identity and military service. Items included in the protocol were designed to attend to the nuance of service members' experiences from their position within the military *matrix of domination*⁵ (Collins, 2000). Observation consisted of field notes taken by researchers throughout the data collection process. Documentary evidence used to contextualize service members' narratives included military policy, court records, press releases, public statements, online and print media, and other sources which were publicly available at the

⁵ Collins uses the term *matrix of domination* in reference to the "overall social organization within which intersecting oppressions originate, develop, and are contained" (2000, p. 228).

time of data analysis. All participants were provided a list of crisis and community support resources for transgender service members (see appendix C).

Analytic Method

The TMS Study utilized an IPA design to shed light on transgender persons' experiences serving in the U.S. military. As a methodology, IPA seeks to illuminate hidden truths (Shinebourne, 2011) and problematize social institutions through inductive processes (Smith et al., 2009). This is achieved using in-depth interviews in conjunction with other primary and secondary sources in order to connect participants' lived experiences to global issues (Smith et al., 2009). An IPA approach embodies the mantra of feminist consciousness raising 'the personal is political'⁶, seeking to uncover the relationship between subjective experiences and larger hegemonic systems of power.

Data were analyzed using procedures recommended by Smith and colleagues (2009). The validity of results was evaluated using criteria for community-based research recommended by Collins (2000). Adherence to transgender and gender non-conforming (TGNC)-affirmative research practices was evaluated using the American Psychological Association's *Guidelines for Psychological Practice with Transgender and Gender Nonconforming People* (2015) and TGNC-affirmative research considerations outlined by dickey, Hendricks, and Bockting (2016) and Sevelius, dickey, and Singh (2017).

Transgender service members and veterans participated as active collaborators on the research team. Data were analyzed through a continuous iterative process which used

⁶ This phrase first emerged in published works during the second wave of the feminist movement in the United States; however, the original author is unknown. The phrase has been attributed to and/or included in works by a number of feminist writers, including Gloria Anzaldúa, Kerry Burch, the Combahee River Collective, Kimberlé Crenshaw, Shulamith Firestone, Carol Hanisch, Anne Koedt, Audre Lorde, Cherrie Moraga, Robin Morgan, Gloria Steinem, and many others. However, these authors have repeatedly denied coining the phrase, instead attributing collective authorship to the feminist movement or, in the words of Kerry Burch, "millions of women in public and private conversations" (2012, p. 139).

open and axial coding to identify themes across service members. These themes were then interpreted within the broader context of formal and informal systems of oppression impacting transgender service members. To facilitate the iterative process of data interpretation all coding teams consisted of two researchers, one researcher approaching data interpretation from the position of an insider and the second researcher approaching data interpretation from the position of an outsider. All insider researchers were transgender service members or transgender veterans. Outsider researchers were not transgender service members or transgender veterans. Coding teams shared codes and interpretations with the broader research team for review and consolidation into superordinate themes. This analytic process was repeated until distinct themes emerged (Smith et al., 2009). Themes were identified using the processes of abstraction, polarization, contextualization, numeration, or function as outlined by Smith and colleagues (2009). Interpretations were then presented to service members for verification through an iterative member checking process. Feedback from all phases of the analytic process was reviewed by the research team and incorporated into the final analysis. Final interpretations, themes, and results were then presented to data auditors for review. Auditing was conducted by a team consisting of the doctoral dissertation chair and a transgender service member.

Due to the large sample size, coding thresholds were established in order to accurately identify and describe the prevalence of unique themes across the sample or a specified sample subgroup. Unless otherwise indicated, codes present in 100% of the sample or subsample were described as occurring for “all” identified participants. The language “almost all” was used to describe codes present for 88-99% of identified

participants. The term “most” was used to describe codes meeting the minimum threshold for theme identification and indicated the presence of a theme in 70-87% of the sample or specified subsample. Codes falling below this minimum threshold but present for 50-69% of a specified group were included to discuss nuances within established themes and were described as occurring for “most” of the identified group.

Positionality of Researchers

The author for this study was a White, queer transgender man who completed 12 years of service as an officer in the Army National Guard. Researchers participating in data analysis were predominantly White. The author was actively serving in the U.S. military at the time this study was designed and conducted. Transgender service members and veterans contributed to study design, recruitment, data collection, data analysis, and auditing of study results. All researchers involved in the study design, data collection, and data analysis recorded their biases throughout their active engagement in this project. Recorded biases were analyzed prior to coding and submitted to auditors for review.

Validity

The purpose of this study was emic and exploratory; as such, results reflected the experiences of service members from their perspective and were not intended to be generalizable to the entire population of transgender military personnel. Collins (2000) developed four criteria to determine the epistemological validity of knowledge production: (1) meaning, (2) assessment, (3) community members, and (4) knower adequacy (Dotson, 2015). The use of transgender service members’ lived experiences as the primary data source grounded knowledge claims, meeting the criterion on meaning (Collins, 2000). Member-checking was used to ensure that results accurately reflected the

perspective of service members. This assessment process included service members' review of identified themes and the final manuscript. This collaborative and engaged dialogue with service members over the course of the study ensured claims were vetted by service members (Collins, 2000). Meeting criterion three required researchers to engage community members in the study design process; particularly regarding sampling and recruitment procedures. Members of the transgender military community were engaged throughout all phases of the research process (study design, recruitment, data analysis, data collection, and manuscript production). Transgender military community members were intentionally engaged at all levels of power on the research team (research assistants, primary researcher, auditor, and dissertation committee member). Knower adequacy required the knower, in this case the primary researcher, to have moral and ethical connections to study claims (Collins, 2000). This researcher's moral and ethical connection to knowledge claims were grounded in his own positionality as a transgender man, psychologist-in-training, and military leader.

The TMS Study and Liberatory Research Praxis

The inclusion of transgender service members and veterans as researchers was critical to the study design and validity of results. However, a concurrent objective of community inclusion was to provide empowerment, academic opportunity, and science education to transgender service members and veterans. The TMS data analysis team included researchers pursuing bachelors, masters, and doctoral degrees. The team was interdisciplinary, including researchers with educational backgrounds in sociology, economics, gender studies, computer science, mental health counseling, psychology,

social work, political science, and public health. The author served both as team leader and as a member of a coding team.

In addition to trainings required by the Institutional Review Board, all members of the research team completed two study-specific trainings provided by the author. The first addressed military policy and scientific knowledge related to transgender military service. The second provided foundational information about social justice research ethics and specific procedures for IPA qualitative data analysis. After completing training, team members identified their personal academic/vocational goals and learning objectives for their participation. In-group researchers were then paired with a coding partner and mentor based on their previous research experience, level of educational, and self-identified learning objectives. The author supervised and assisted all teams as they met to record biases and complete a practice coding assignment. After the completion of initial training, team members attended monthly lab meetings. During meetings, coding teams received and provided feedback on the coding process and discussed emerging themes. As part of their participation, team members also provided one presentation to the rest of the lab on a topic related to emerging themes (minority stress theory, trans/queer theory, resilience, etc.).

The author also supported team members in obtaining academic credit and appropriate recognition for their contributions to the study. This included collaboration with faculty at team members' academic institutions and the development and supervision of appropriate assignments. Based on their expressed goals and interests, team members were mentored in developing their curriculum vitae, grant writing, applying for graduate school, writing conference proposals, manuscript writing, public

speaking, and communicating with both academic and lay audiences about scientific findings. The author intentionally committed to providing opportunities for community members to present at academic conferences and contribute as authors for academic publications related to this project.

CHAPTER IV

RESULTS

Interviews yielded an abundance of rich and thick data describing service members' experiences of survival and resilience. Four broad super-ordinate themes emerged: (a) understanding oppression, (b) survival strategies (c) individual resilience factors and (d) collective resilience factors (see Table 2). It is important to note that these broad categories were deeply enmeshed. Service members' unique experiences of oppression informed the tools they used to survive and navigate those experiences. The specific survival strategies that service members employed, in turn, shaped their future experiences of oppression. Furthermore, the grouping and ordering of themes as discussed below does not imply a specific model of coping or adaptive hierarchy for survival strategies employed by service members.

Superordinate Theme 1: Understanding Oppression

The theme *Understanding Oppression* captured how transgender service members experienced and made sense of oppression in the context of their identities, military service, and broader socio-political context. This superordinate theme consisted of four themes: (a) defining discrimination, (b) no one knows, (c) view from the closet, and (d) expectations and epiphanies.

Defining discrimination. Contrary to this researcher's assumptions, when asked directly about their experiences of discrimination most service members initially denied

Table 2

Oppression and Resilience: Superordinate Themes, Themes, and Meanings

Superordinate Themes	Themes/Subthemes	Meaning/Interpretation
Understanding oppression	Defining discrimination	Institutional erasure
	No one knows	Invisibility
Survival strategies	View from the closet	Observations as an outsider within
	Expectations & epiphanies	Salience of positionality
	Pushing it down	Internalized transnegativity
	Camouflage	Hiding identity
	Flying under the radar	Passing
	Playing it straight	Passing
	Just gay	Passing
	Super soldier	Covering
	Living a double life	Compartmentalization
	Pushing regulations	Approaching identity
Individual resilience factors	Pop smoke	Contingency planning
	Alone in hostile territory	Social isolation & rejection
	Battle buddies, shipmates, and wingmen	Role of allies
	Blue falcons	Impact of prejudice
	Warrior mentality	Military identity & values
Collective resilience factors	Thwarted belongingness	In-group policing and divisiveness
	Part of a trans-military family	Establishing a collective identity
	Trained to fight	Leadership and teamwork Military training and expertise

that they had experienced any discrimination. Further analysis revealed several unique factors impacting how transgender service members' conceptualized discrimination within a military cultural context shaped their responses. For many service members, military cultural factors, military policy, and military equal opportunity training informed how they defined discrimination and made sense of their experiences. For example, when

asked about his experiences of discrimination, Tom⁷, an active duty Navy officer, reflected:

I'm not even sure how to respond to that. I mean, [the Navy] defines what discrimination even means don't they? Even if they kicked me out tomorrow because I'm trans that wouldn't be discrimination, not to the Navy anyway (Tom, 27, Navy, officer).

Prior to June 2015, the DoD did not include sexual orientation as a protected class within Military Equal Opportunity (MEO) policies for uniformed service members (DoD, 2016). Discrimination based on gender identity was first considered to be discrimination based on sex with the publication of Secretary Carter's transgender inclusion policy in June 2016 (DoD, 2016). As such, at the time of data collection service members' experiences of discrimination based on sexual orientation and/or gender identity did not meet the military's definition of discrimination. Tom's response reflected insight into the disparities between DoD's operational definition of discrimination and his own lived experiences of institutionalized oppression as a transgender sailor.

No one knows. The most pervasive factor impacting service members' understanding of discrimination were institutional silencing and hiding their identities. Transgender service members' positions were unique in that policy prevented service members from coming out in order to continue serving. Most service members indicated that hiding their identity prevented them from experiencing any discrimination based on their gender identity. For example, when asked about experiences of discrimination, Sharon, a noncommissioned officer (NCO) in the Army National Guard, responded:

You know I live closeted....it's a secret that like nobody knows and so [discrimination] is something that I don't experience because of where I have to keep [my identity] secret (Sharon, 32, Army National Guard, NCO).

⁷ Pseudonyms are used throughout this paper to protect the privacy of study participants.

When asked to rate where they were in their transition process on a scale of 0 to 100, service members responded with scores ranging from zero up to 95; with a median score of 30. When asked why they selected their chosen rating, 20 participants specifically mentioned how military policies impeded their social, legal, and/or medical gender transition process. Bridget, an active duty warrant officer in the Army, wrote the following:

I put a score of 30 because I cannot do any hormone regiment legally with the military, so right now that is holding me back. As far as presenting, [military policy] holds me back because I have to present in a hypermasculine role. I have to present as the typical alpha male in my job to avoid discrimination and being teased (Bridget, 32, Army, warrant officer).

All service members were aware that they would be discharged if their identity were discovered. One participant stated, “It would end my career in a heartbeat if I tried to come out about it” (Paula, 29, Navy, officer). When asked about her decision to delay transition, another participant responded, “...[transitioning] would mean throwing my whole life away and everything that I’ve accomplished just going to hell” (Karen, 25, Army, lower enlisted). Although most service members did not consider hiding their identity as a form of discrimination, results clearly indicated: (1) that service members were aware of how institutionalized discrimination impacted their experiences; (2) that service members put tremendous effort into hiding their identity; and (3) that these efforts and fear of being discovered profoundly impacted service members’ daily lives, transition process, and overall well-being.

View from the closet. In addition to impacting their conceptualization of oppression and discrimination, hiding also impacted transgender service members’ perceptions of how oppression and discrimination operated in their social environments.

For all but two participants, hiding their identity meant spending the majority of their career presenting as their SAB. For transgender women, presenting as their SAB meant that they were often perceived as “insiders” within a hypermasculine culture. From this position as an outsider within⁸, service members were able to observe the operation of gender-based oppression with a unique degree of transparency. For example, when asked about factors impacting her decision to hide her identity while serving, Sandra, an active duty officer in the Navy, shared the following narrative from her childhood: “My stepdad [a Marine] was part of hit squads that would go into gay bars or single out the gay troop and if they didn’t kill them the person would be pretty much bleeding to death” (Sandra, 32, Navy, officer). Sandra explained how listening to her father’s stories of perpetrating violence against LGBTQ+ community members shaped her assumptions about how fellow service members would react if they discovered her transgender identity.

Service members also described their experiences of directly witnessing misogyny, homophobia, and transphobia from other members of their units. These observations were particularly salient when examined in the context of participants’ time in service and assigned gender. Most participants who served prior to the repeal of DADT shared about how the policy impacted members of their unit and community. Gwen, a retired Navy petty officer described her experience surviving witch hunts of LGBTQ+ service members:

⁸ Collins coined the term “outsider within” when describing the unique perspective of Black domestic workers who were “privy to some of the most intimate secrets of white society” but still outsiders in white culture (Collins, 1986, p. S14). Collins asserted that such roles yielded both psychological costs and benefits.

This girl come [sic] into [the commander's] office and told this outlandish story about how these girls took her to this club where everybody is lesbian, everybody's gay, and it's like girls dressed like guys and guys are dressed as girls and they all dancing with each other and it's just so satanic! And that actually ended up leading to the largest witch hunt I'd ever saw. I was on watch⁹ when they put them up to Captain's Mast¹⁰....at the very end the commanding officer came down and sat down next to me and asked me about the person I'd been watching and then he turned to me and asked me about me about whether I was gay. At the time he couldn't, he wasn't allowed to ask anything like that out loud, but what was I supposed to say? By the end of it all he'd discharged over 30 people (Gwen, 50, Navy, NCO).

Many transgender women described their experiences serving in all-male combat arms units and linked a hypermasculine command climate to their safety. Karen, a lower enlisted active duty soldier, observed how a culture of homophobia and heterosexism informed hazing practices among fellow soldiers in her combat arms unit:

Some guys get [harassed about sexual orientation], even though they're clearly not [gay], they go through it. It's to the point where it's almost sexual assault but it's all fun and games because nobody's really gay (Karen, 25, Army, lower enlisted).

These experiences shaped service members' assessment of risk and factored heavily into their decision-making regarding identity disclosure. When asked what advice she might give to a soldier considering coming out as transgender, Julia, an Army NCO responded, "I would say that you should expect to be putting your life in danger" (Julia, 39, Army, NCO). When asked how she expected other soldiers would react if she came out, Sharon responded, "if I come out there will be physical harm. You know just like beating, as well as physical sexually. I mean that is how dangerous I would see coming out to them would be" (Sharon, 32, Army National Guard, NCO). All service members acknowledged fear of discharge if their identity were discovered. However, almost all service members who

⁹ Military term for guard duty.

¹⁰ In the military, commanding officers have the legal authority to discipline service members under their command without trial. In the Navy, such non-judicial punishment is informally termed 'Captain's Mast.'

reported serving in all male units also shared fears that their fellow service members might physically harm or sexually assault them.

Expectations and epiphanies. When examining service members' experiences in the context of intersecting identities, it became clear that race, ethnicity, and sex assigned at birth impacted how service members made sense of their experiences. Specifically, most service members who were assigned- male-at-birth (AMAB) and identified their race and ethnicity as only White described an epiphanic moment when they became aware of how misogyny and transphobia had or might shape their lives as transgender women. For example, Leslie shared about her process of coming to terms with how coming out might impact her career:

You know, it gets beaten into you from the moment you hit the deck at basic, that when you put the uniform on everyone's the same, we're all equal, and that if you do the right thing and work hard there are no limits. So, I've always been a hard charger. I maxed my PT, honor graduate, the whole deal. And so it's crushing, the moment you learn that no matter how good you are, all that work, it doesn't matter. Because of this one thing, now you don't matter (Leslie, 32, Army, warrant officer).

Similarly, Andrea described a shift in her personal feelings of safety after surviving sexual assault when leaving a bar outside her post in women's clothing.

I mean, I knew that these things happened to women, but it never really hit home for me, you know? I remember being scared that someone might recognize me but not this. I never used to be scared to walk down the street at night. And you want to know the fucked-up thing...one of my first thoughts was, well, I guess I really know what it means to be a woman now (Andrea, 26, Army, NCO).

For Andrea, and several other participants, gender-based violence and harassment were disturbingly paired with experiences of validation regarding their gender presentation.¹¹

¹¹ Emerging research on transgender persons' experiences of privilege and oppression described these phenomena using the term *oppressive validation* (Rossman, Chism, Gervasi, Sherwood, & Budge, 2015).

However, this theme was not present amongst transgender men, genderqueer participants, or racial/ethnic minority (REM) transgender women. In contrast, most service members who were assigned-female-at-birth (AFAB) and/or those with marginalized racial or ethnic identities expressed a greater awareness of how misogyny and racism impacted their military service and identity process. For example, when asked about his experiences of discrimination, Malik an officer in the Army Reserve, responded:

I knew it was going to be like this. [The military] is a good old boys club. I feel like it's 20 years behind. I come from such an open community both for sexual orientation and racially so I can't figure out why the hell I thought [joining the military] was a good idea [laughs] (Malik, 27, Army Reserve, officer).

Overall, service members' positionality within the matrix of domination in the military hierarchical power structure shaped how they made sense of their experiences of oppression.

Superordinate Theme 2: Survival Strategies

Pushing it down. Almost every service member described a period of attempting to deny or suppress their gender identity in order to protect their careers; conform with social, cultural, or familial expectations; or adhere to their religious beliefs. Service members described these behaviors using terms such as “numbing,” “turning it off,” “pushing it down,” or “purging.” These experiences were uniformly characterized by intense feelings of shame and internalized transnegativity (i.e. transgender-specific internalized prejudice, shame, or stigma; Staples, Neilson, Bryan, & George, 2018). Allison, a retired Army NCO, described how she would repeatedly purchase and secretly wear feminine clothing until she experienced moments of intense shame and destroyed these items.

I felt awful, I felt like I was evil....[wearing feminine clothes] would just disgust me and make me feel sick. So, I would throw everything away as soon as I did it...I just told myself you can hide this, you can suppress it (Allison, 63, Army, NCO).

Paula, an active duty officer in the Navy, described times when she would approach accepting her identity until experiencing similar feelings of intense shame and “would resolve to end all of this gross taboo behavior and try to be the boy I was supposed to be” (Paula, 29, Navy, officer). Several participants described this process as a cyclical pattern of approaching, then attempting to suppress or deny their transgender identity. In many cases service members identified this pattern as recurring over a period of several years during their military service.

When reflecting on her experiences of approaching her identity, Paula stated “I needed to take a break from [hiding my identity] because it was a job, and unlike being in the military being a job, it was a job I was doing just to survive.” (Paula, 29, Navy, officer). She described the act of suppressing her identity as “turning off everything” including her emotions as a means of coping with the tension between her gender identity and military regulations:

[I am] trying to be an example, trying to be an officer where you need to have your shit together....it stinks that you have to essentially turn into this hollow husk in order to survive....it's like in order to [serve in the military as a transgender person] you have to come up with some sort of coping mechanism for what it means to be human (Paula, 29, Navy, officer).

For Paula, and many participants, survival meant detaching from her internal experience and social engagement in order to suppress an important part of her identity.

Camouflage. All participants engaged in one or more practices designed to hide, minimize, or deflect attention from their gender presentation and/or gender identity.

Strategies service members used to hide their identity were grouped into three interpretive subgroups: passing, covering, and compartmentalization.

Passing: Flying under the radar, playing straight, and just gay. The definition of the term ‘passing,’ is one problematized by military law and policy, the gender transition process, and the historical connection of the term to cis- and ethnocentric values of gender and cultural assimilation. In the context of this sample, most participants used the term ‘passing’ to describe the act of presenting as their assigned gender after accepting their transgender identity. Given that all participants self-identified as a gender different from their SAB, all participants expressed some degree of openness to identifying themselves as a transgender person at the time of data collection. However, all service members restricted who they told about their identity, delayed social or medical gender transition, and took extreme precautions to prevent others from discovering their identity. In the course of data collection, three service members disclosed that participating in the TMS study constituted the first time they had spoken about their transgender identity to anyone:

I’m sorry....I’m just feeling really shaky right now and a little scared. I’m [pause] I’m a woman. And that’s the first time I’ve ever said that out loud to anyone (Sharon, 32, Army National Guard, NCO).

Most participants disclosed their identity to at least one other person; however, all participants put forth considerable effort in order to hide their transgender identity during their military career, particularly from other service members. Like most participants, Karen described her decision to pass by succinctly stating, “I’m smart enough to know that it would be an issue if my situation came out, so I keep it all under the radar” (Karen, 25, Army, lower enlisted).

Many participants feared that fellow service members might guess that they were members of the LGBTQ+ community. In order to mitigate this risk, participants engaged in behaviors designed to pass as cisgender and straight. To this end, many service members put tremendous effort into conforming with their assigned gender. For example, Allison, shared a story about “picking up” women at a bar with her fellow squad members to reinforce their perception of her as a straight man (Allison, 63, Army, NCO). Diego, an NCO in the Army Reserves shared that he wore make-up to drill as often as possible and kept his hair long specifically to prevent fellow soldiers from perceiving him as a lesbian (Diego, 26, Army, NCO).

Although the repeal of DADT did not prevent transgender service members from being discharged based on their identity, many participants reported that the policy change created more space for them to pass as being ‘just gay.’ When asked about the impact of repeal on his military service, Malik stated, “DADT repeal has paved the way for me to be a little more relaxed. Because I’m seen as the aggressive¹² lesbian nobody really suspects that I am trans” (Malik, 27, Army Reserve, officer).

Covering: super-soldier. Legal scholar Kenji Yoshino used the term *covering* to describe actions taken by lesbian and gay people in an effort to assimilate with straight society by means of exaggerating conformity with mainstream culture and/or minimizing their queer identity (Yoshino, 2002). Yoshino described covering as dialectic between the agent and the audience in which some behaviors may simultaneously function as both an act of passing to the observer who is unaware of the agent’s queer identity and an act of

¹² *Aggressive* is an identity label used predominately in black lesbian communities. Similar to “butch” identities, the term is used to describe women who identify as “masculine in appearance, behavior, erotic expression, and/or relationship role” (Wilson, 2009, p. 299).

covering to the observer who is aware of the agent's identity. In the context of this sample, covering behaviors (as defined by Yoshino) were not prevalent as very few service members disclosed their transgender identity to other service members. However, many participants did report that they engaged in behaviors intended to cover for their assumed LGB identity or known gender non-conformity if not an explicitly known transgender identity.

This adaptation of covering emerged almost uniformly across the sample as a drive to military excellence or being seen by peers as a "super-soldier." This strategy benefited service members not only in misdirecting the attention of others away from their gender non-conformity, but also advanced service members in their military career. Audre, an Army officer, shared that her desire to prove herself as the "hardest, baddest, mother fucker out there" prevented other soldiers from "messing with [her]" and resulted in glowing evaluations, awards, and advancement during her military career. Unfortunately, excellent performance in her military duties ultimately did not protect her. Between the time of her recruitment for this study and completion of her initial interview, Audre's command had initiated an administrative discharge process after she came out as transgender. When sharing about her reaction to the notification of discharge proceedings she said, "I don't know why, but I guess I somehow convinced myself that if I was just a good enough soldier, then maybe they wouldn't care" (Audre, 40, Army, officer).

Compartmentalization: Living a double life. Service members also employed compartmentalization as a strategy for negotiating their gender identity and military service. However, service members varied on where they set those boundaries when compartmentalizing their identities. For some service members, online communities were

the only spaces where they felt safe to explore their identity. Participants created covert profiles that reflected their gender identity on social media platforms or when participating in online gaming communities. Through online community spaces, service members learned about transgender identity and made important connections with other members of the transgender community. Other service members delineated their identity boundaries based on physical location; such as on-post versus off-post, or at home versus at work. Maintaining the boundaries between service members' transgender and military lives was fraught with challenges and service members employing compartmentalization as a survival strategy described a near constant fear that their worlds would—eventually—collide.

Pushing regulations. Several participants shared about their attempts to push the limits of military regulations in order to alleviate gender dysphoria. This theme most commonly emerged in the context of uniform and grooming regulations. While specific standards differed for each branch of service, all military branches enforced gender-specific regulations regarding dress and appearance. Amongst service members who reported pushing gender norms, lower ranking individuals and transgender women more frequently reported experiencing harassment from peers or disciplinary action. After coming out as transgender prior to his retirement, Shawn, an Army officer, shared about the impact of his privilege due to rank on his experiences transitioning:

I have it easier, you know, I'm an officer. I almost always have a private room, people don't really question me if I'm pushing the limits of grooming regs. I feel bad for the junior enlisted folks who have to make it in the barracks, who can't push back if someone senior or God forbid someone in their chain decides to make their life hell. I guess that's why I feel like it's important for me to be here [at community organizing event], doing something about it (Shawn, 40, Army, officer).

Here, Shawn referred to the close living quarters for lower enlisted soldiers and the considerable power that supervisors have over the daily lives of junior enlisted service members.

After cutting his hair short, Colton, a midshipman at the U.S. Naval Academy, felt trapped between military policy requiring him to use female restrooms and gender policing from peers and staff:

I've had professors and other midshipmen yell at me loudly in the hallway saying, "Hey, dude, you're walking into the women's head¹³." Or, "hey, get the fuck outta there!" I've had people grab me and pull me out. I've had people push me while in the restroom telling me to get out (Colton, 26, Navy, midshipman).

Paula reported similar experiences of having her gender presentation policed beyond military regulatory guidance. Although her superiors were not aware of her transgender identity, she perceived that her supervisor was uncomfortable with her effeminate gender presentation and repeatedly ordered to cut her hair even when she was within Navy grooming standards:

It was almost like clockwork where as soon as the gate guards or the marines on the base were saluting me using female pronouns, I knew that in about four or five days I was going to be told to go cut my hair (Paula, 29, Navy, officer).

For Paula, and many participants, positive experiences of having their gender validated were inherently paired with punishment and/or fear of discovery.

Pop smoke. In Army lingo, 'popping smoke' refers to using a smoke grenade to provide concealment from enemy forces and enable friendly troops to maneuver or tactically withdraw. Informally soldiers use this term as slang to mean 'get out' or escape from a potentially distressing situation as quickly and safely as possible. Although many

¹³ 'Head' is a naval term meaning 'restroom.'

service members planned to stay in the military as long as they were able, several coped by developing contingency plans for how they would pop smoke in the event of being discovered. Some service members set career milestones for when they would voluntarily leave the service (such as achieving a certain rank, completing deployment, meeting eligibility for retirement, etc.). Others developed plans for how they would respond if leadership discovered their identity or that they were pursuing gender affirming medical care. For many, having a clear plan of egress and contingency plans made enduring the hardship of hiding their identity more tolerable and generated hope for a future when they could live authentically.

Superordinate Theme 3: Individual Resilience Factors

Alone in hostile territory. The most robust finding for this analysis was the pervasive social isolation and rejection experienced by service members due to their gender identity. Service members shared about the loss of parents, spouses, children, and friends after disclosing their transgender identity. For example, when asked about her social support system, Leslie, an Army warrant officer, shared the following:

I never did a support group. I'm literally on my own feeling like I really can't relate to anyone. It leads to a lot of self-segregation and solitude....to spend quality time with someone I feel like I have to lie to them....and not really be authentic with them and I really hate lying to people. So to avoid that I just avoid people and that's not good (Leslie, 32, Army, warrant officer).

Gwen also shared about the impact of institutional silencing and the resulting social isolation has on transgender service members,

...a person who can't talk to anybody about anything because of the fear of being outed. You know they're already at the very top level of stress in a warzone, if you add that it's just a matter of time before they pop (Gwen, 50, Navy, NCO).

All participants described extended periods of time when they experienced overwhelming feelings of loneliness due to the impact of hiding their identity—or revealing their identity and experiencing discrimination or rejection—had on their interpersonal relationships, self-worth, and overall wellbeing.

Battle buddies, shipmates, and wingmen. Each branch of service has a unique term for identifying a sibling in arms, soldiers call their fellow service members ‘battle buddy.’ Sailors use the term ‘shipmate.’ In the Air Force you might lend a hand to your ‘wingman.’ Regardless of branch of service, these cisgender allies in uniform played an important role in providing social support and protection for transgender service members. Most participants reported having told at least one fellow service member about their transgender identity. However, despite positive experiences with many peers, service members also described constant worry about the implications of being accidentally outted:

I've been very picky about who I tell....because what if someone slips up? What if my wife yells, "Hey, can I borrow your lipstick?" Or whatever and I'm like—"oh shit!" And so you can't really be comfortable around people you haven't told. The people I have told it's such a relief. It's sort of nice because then you don't worry about that. But all it takes is one person that you were a little too open with to destroy your life. At this point I have ten years in the Army that's halfway to retirement. And so, I'm just very careful about who I trust with anything (Alice, 28, Army, officer).

Despite the high risk, Alice shared that having fellow soldiers who knew about her identity was a critical source of social support:

...the ones that are in the military that I've told especially have just been very supportive and that helped so much and I think one thing that's helped me in my life is telling other people when I'm having a shitty day or when I'm having problems. I can talk to them and it's not always just [my wife] that I'm leaning on (Alice, 28, Army, officer).

Alex, an active duty Army NCO, described the familial bond he had with the members of his squad who knew about his gender identity:

It was like the elephant in the room. Everybody knew about it. I had one little Lance Corporal...he would joke with me as I took [testosterone]. He was like, "man, I need to bulk up." That's how dynamic it was. It was very family like. And I miss that squad so much. I'm about to get a tattoo for them (Alex, 27, Army, lower enlisted).

Scott, a lower enlisted airman, told about how his wingman offered support when he was being misgendered or harassed due to his gender presentation:

It was comforting I guess, because with him if we were in a group setting and somebody new came in and said, "Hey what's going on man?" And like this new person was using male pronouns but everybody else was like, "Don't you know that's a girl?" And they don't know my scenario. Like my buddy would look at me and then say something like "what the hell bro?" And then it wouldn't bother me as much you know? Like now it's just kind of funny. I even told him that I just got a surgery date, and he was happy just like you would talk to any friend in the military (Scott, 26, Air Force, lower enlisted).

For many service members, allies were important sources of comradery and social support. In some cases, these allies were also members of the LGBTQ+ military community, but most often they were straight cisgender soldiers, sailors, airmen, or marines who were simply looking out for their battle buddy. Allies helped transgender service members diffuse tension, avoid detection, and occasionally protected them from potential harassment or physical harm.

Blue falcons. 'Blue falcon' is military slang for an individual who has harmed fellow service members, often for their own benefit. Several participants described occasions when they came across other service members who would go out of their way to uncover knowledge about their identity or get them kicked out. A few described occasions when the actions of such individuals led to violence, harassment, and/or formal investigation. For example, one service member reported that a fellow sailor found a

picture of her wearing “women’s clothing” on social media. This fellow sailor then shared her picture with other members of the unit and asked them, “would you hit that?” before disclosing the service member’s identity. Another service member reported that a fellow soldier posted an image of her on a social media military hate group, along with her address and cell phone number. This service member reported receiving very explicit rape and death threats for over three months until the post was removed. Another service member reported that he disclosed his identity to a supervisor he trusted seeking support. The supervisor then sexually assaulted him and told him that if he reported the assault that command would be notified that he was transgender and that he would be discharged. Overall service members reported high regard and positive interactions with their peers, despite having to hide their identity. However, almost all service members indicated that current policies left them vulnerable to malicious actors and without legal recourse or support when experiencing violence and harassment in their units.

Warrior mentality. Military values emerged as an important component of how participants made sense of their experiences in the context of conflicting identities. Each branch of military service (Army, Navy, Marine Corps, Air Force, Coast Guard) has an established set of core values (e.g., the U.S. Navy core values are honor, courage, and commitment). Some military leadership roles and duty positions also have creeds or oaths that service members are expected to embody when serving in that specific capacity. Service members almost uniformly leveraged these tenets of military identity when attempting to make sense of their experiences. This most commonly occurred when service members described times when they endured hardship or were resilient in the face of personal sacrifices. Alex, a 27-year-old Army NCO referenced his role and

responsibilities as an Army when discussing the challenges he faced leading his team after being involuntarily outted:

As an NCO, my job is to lead people. My job is to seem like I've got everything under control. And to walk into the shop and them....just....you can feel it in the air. It feels like I'm walking into a freezer.... everybody stops and kind of stares at me and you can feel the oppression like radiating off of them. But you still have to keep that face if you're [an NCO]. I still need them to do this, this, and this... (Alex, 27, Army, NCO).

Many service members also reported feeling betrayed by military leadership and policies which compelled them to live in a manner incongruent with shared military values. Scott, a 26-year-old enlisted airman shared about sacrificing his authenticity and integrity, as he prepared for an upcoming deployment:

It's a sacrifice I think about every day, but it's a good sacrifice. It's for the greater benefit. Yes, I do live a double life. No, I can't fully be myself....and the lying.... I don't like saying 'lying' but I avert the situation to something else. Yes, it definitely holds you back, but it's worth it—for now. And if it wasn't me [deploying to Afghanistan] it would've been somebody else (Scott, 26, Air Force, lower enlisted).

Thwarted belongingness. Participants uniformly reported that being a transgender service member was a barrier to fully participating in military, transgender, and broader LGBTQ+ communities. Similar to cisgender lesbian, gay, and bisexual service members prior to the repeal of DADT (Barber & Schwartz, 2012), fear of discharge prevented participants from engaging with the military community. Alice, a 28-year-old Army officer, described the impact military policy had on both herself and her family:

We avoid being around large groups of military, especially any sort of events that the battalion puts on because there is that worry....it's like if one of the kids even makes a mistake and says something wrong, now you're trying to explain that to a group of 20 or 30 people in the Army, where if you sort of remove yourself from that environment then it's just one less worry. So yeah, we are definitely a step removed from the Army community (Alice, 28, Army officer).

Alice went on to describe how this caused additional hardship and social isolation for her wife during her deployment to Afghanistan:

When people are deployed, all the wives sort of get together, they have a support group and [my wife] went to a couple of those but I think she felt like she wasn't part of the conversation because...she's worried if she slips up and says something then, yeah, then what do you say next? Especially since she's trying to make herself more comfortable using my other name and saying 'my wife.' But when you're around military people, you have to completely shut away from it. And so, the easier thing to do is just not attend any of those and not put yourself in the situation (Alice, 28, Army officer).

For Alice and other service members, hiding their identity meant withdrawing from important community resources and supports that other service members and their families relied upon.

All service members made attempts to connect with LGBTQ+ or trans specific support organizations. Most engagement occurred online through social media, message boards, and web publications. Some service members attended events or groups in person; however, those who did so reported driving far from base to reduce the likelihood of encountering other service members. For many, non-military community support organizations were critical lifelines where service members could get support.

I finally found a LGBT center that I could go to on my off time for a support group. That's really where I started to explore my identity...I wasn't much of a talker and was very reserved...but having that space really helped me get through a difficult time (Paula, 29, Navy, officer).

However, many service members also experienced alienation and/or rejection from LGBTQ+ community groups due to their military service and/or transgender identity.

Damien, a Marine Corps NCO shared about attending an LGBTQ+ conference and witnessing other transgender community members protesting against open transgender service,

It was really hurtful because I drove all this way, lied about why I was taking leave, just so I could finally be in a space where I could be just be me, you know? Then just to feel like I was on the outside all over again, it really sucked. What was worse, is that no one said anything back to them, and I couldn't even say anything because if I spoke up and said, "hey I'm in the military here's what it's really like" then I would be putting myself at risk (Damien, 23, Marine Corps, NCO).

Several service members described similar experiences of being excluded from transgender spaces due to formal or informal in-group policing. For example, Maria, a lower enlisted soldier, was asked not to return to an in-person support group unless she was dressed in traditionally feminine attire:

I told them that I couldn't and why, but they just didn't get it. They told me that if I was really committed that I would find the courage to do it. I didn't have anyone else who knew and I was so alone, but after that I didn't try a support group again for years (Maria, 25 Army, lower enlisted).

Although she did not experience rejection, Karen felt that members of the civilian LGBTQ+ community did not understand the impact of military policy and obligations on her identity:

My civilian trans friends just didn't understand that I couldn't come out to watch their drag events, do my eyebrows, or wear make-up during the week because I'd have formation the next day....they couldn't fathom what I had to go through just to get far enough from post to be marginally safe (Karen, 25, Army, lower enlisted)

These barriers to community inclusion occurred within the LGBTQ+ military community as well. Julia expressed her perspective that the transgender community has been left out when it comes to mainstream advocacy organizations:

I see what's happened with HRC and Outserve and we get left behind a lot. When DADT was repealed [organizations working to end DADT] left us behind and then being dropped off of ENDA¹⁴ was horrible. It's like we're in the same choir

¹⁴ In 2007, when lobbying to move the *Employment Non-Discrimination Act* forward for a vote in the House of Representatives, national LGBT human rights organization the Human Rights Campaign (HRC) supported the removal of protections for transgender persons from the final version of the bill (Currah, 2008).

but we're singing two different songs. And [trans] voices are being drowned out by a bunch of rich gay people.... it's hard when [LGB] people group us in the 'other' column because many of us aren't other, we're also lesbian, gay, bisexual, and queer. But our voice is lost, we're not getting a chance to be heard (Julia, 39, Army NCO).

Many service members discussed the response of community groups to high profile cases of police violence against people of color. Among racial/ethnic minority (REM) participants, all but one reported leaving a at least one community support space due to repeated exposure to racial microaggressions. Brian, an officer in the Army reserve expressed frustration with the hesitance of community leaders to address racism in community spaces:

I just got sick of seeing the same blue lives matter crap day after day. It's hard enough getting shit from everyone else, do we have to get it from our LGBT people too? These places are supposed to be a safe haven from that stuff, and leadership never jumps in to address the problem. And I feel like that's part of the other issue, which is that the admins are almost always—no offense—white. We ended up just making our own group and doing our own thing for a while, you know? But then when it comes to actually start advocating, now we're left out of the conversation (Brian, 27, Army, officer).

Superordinate Theme 4: Collective Resilience Factors

The final superordinate theme explores factors impacting resilience of transgender service members as a discrete collective. The following themes outline how the transgender military community applied their military training and experience in order to build a cohesive team, provide mentorship and support, and organize a grass-roots movement of resistance.

Part of a trans-military family. Service members expressed a sense of belongingness and shared identity with other transgender service members that they found lacking in other LGBTQ+ military and transgender civilian groups. Andrea attempted to gain support from LGBTQ+ military organizations and spaces for

transgender veterans. In these spaces she reported feeling exposed, particularly after the repeal of DADT, knowing that other group members did not experience the same level of risk compared to her as transgender person who was actively serving. When a friend invited her to join an online support group for active transgender service members, she felt like “things just clicked.... with [online support group] I’ve definitely found my niche in the trans military community where I do finally fit someplace.” (Andrea, 26, Army, NCO). When asked about his experiences in the transgender community, Malik responded “it wasn't until I joined the trans military community that I felt really a part of a positive community with resources” (Malik, 27, Army Reserve, officer). Almost all service members reported a sense of shared belongingness and support when joining a community group for active transgender military personnel.

Trained to fight. Previous phenomenological research on resilience in the transgender community identified social activism and being a positive role model for others as important themes (Singh, et al, 2011). Similarly, almost all service members for this study shared about the importance of mentoring others and being involved in activism. In this work, service members relied on their military training in leadership, professional mentorship, and teambuilding in order to effectively organize their community and meet community needs. Service members’ duty positions were not included in participant descriptions to minimize risk of participants being identified. However, it is important to note that overall participants were highly skilled and decorated. Service members reported having served as aviators, logisticians, medical providers, engineers, mechanics, submariners, special operators, intelligence analysts, and linguists. Over 75% of participants reported having completed at least one

deployment, with one service member reporting as many as six combat deployments. Of the participants who served in the Navy, all but three had served at sea (two midshipmen and one lower enlisted sailor). Several participants were entrusted by their superiors to serve in direct command of troops and in other highly competitive assignments during their careers. In short, service members in the transgender military community were highly skilled professionals and leaders. The skills they developed during their military training and service were key assets which enabled members to survive and organize their own community of resistance.

Active engagement of members in mutual support and advocacy work instilled hope and purpose. Service members shared about the profound impact that contributing their skills and knowledge had on both mission accomplishment and members' individual experiences of hope and empowerment. For example, when asked about his own community involvement, Malik responded:

You know it really it wasn't until [group leader] asked me to be on [a] committee that I realized this [trans military] group is a real legit group and got into it. It's different because we're actually moving towards something not just putting out information and posting comments. [trans military group] is different because we have people with expertise and we're professionals and we're actually doing something [about policy] and that's really good...we have officers, people outside the military with connections, and veterans that have really been able to bring in resources and that has made all the difference (Malik, 27, Army Reserve, officer).

Several service members reported that simply participating in this study was an act of resistance, increasing awareness about the successes and challenges faced by the trans military community.

Perhaps the most powerful outcome of service members participation in the trans military community, was an increased sense of belongingness and the knowledge that they were not alone in their experience. Being part of a network of transgender service

members and allies provided members a channel for military comradery, professional development, and networking, in a community where they could be their authentic selves. In many ways, simply knowing that other service members existed across branches of services, ranks, and duty stations, was a constant reminder that they were part of a community and a movement that has survived and succeeded in the most austere conditions. The profound impact of the trans military communities' collective identity and resistance movement was perhaps best articulated by Will, a lower enlisted sailor who had recently come out:

Once I got into the group it was so empowering to see that that there were so many of us, to see that I wasn't alone. After getting to know [community leader], and [community leader], and [cisgender ally], I realized how long this fight has been going on and began to see myself as just part of the next generation to take the torch. It wasn't until then that I realized I was never really alone because, we've been here all along (Will, 24, Navy, lower enlisted).

CHAPTER V

DISCUSSION

Strengths and Limitations

The Transgender Military Service study, from which this analysis was derived, was designed to increase public understanding of actively serving transgender military personnel's lived experiences from their perspective. Scholars promoting affirmative and ethical research practice with transgender participants have called on researchers to employ feminist and participatory action research methodologies (dickey et al., 2016; Singh, 2016; Singh, Richmond, & Burnes, 2013). Perhaps the greatest strength of this study was the intentional centering of community members throughout the research process and across levels of power in knowledge production.

Another strength of the study was the large sample size which allowed for a greater diversity of participants within the sample across racial/ethnic identity, sexual orientation, age, rank, branch/component of service, and socio-economic status. The size and diversity of the sample enabled greater nuance in data analysis, allowing researchers to identify themes unique to sub-groups within the sample. However, critical analysis of themes among racial/ethnic minority participants was limited in that members of the research team were predominately white. Furthermore, almost all participants recruited for this study indicated a binary gender identity. This is particularly salient as military policy requires service members (those who are allowed to continue serving) to comply

with either male or female regulations and standards (DoD, 2016; 2019). Future research on transgender military service should attend to the unique impact of military policies on REM and non-binary service members.

Results of this study were interpreted from the lens of participants who were all U.S. citizens and active members of the U.S. military. Researchers did not specifically ask participants about their experiences or perspectives related to current military conflicts or the role of the U.S. military in domestic or international policy. As such, it is important to acknowledge the limited frame of this analysis with respect to the historic and present reality of the U.S. military industrial complex as a global colonizing force.

Discussion and Future Directions

Overall, results suggest that there may be nuanced differences in how actively serving transgender military personnel experience and navigate oppression as compared civilian members of the LGBTQ+ community. These differences are likely due to transgender service members' unique socio-political context, cultural context(s), and history of military training and experience. This study highlights the need for a more nuanced psychological understanding of how factors of oppression and resilience may differ for transgender service members. Researchers might also investigate more broadly how LGBTQ+ folks may experience oppression and resilience differently when existing in highly punitive institutional or cultural spaces.

Scientific understanding about the experiences and clinical needs of transgender persons could also be advanced by further research on how identity concealment, specifically passing, is constructed and enacted in the context of transgender bodies and identities. This need is particularly salient considering the recent resurrection of the ban

on open transgender service which went into effect in 2019 (DoD, 2019). The new policy allows for service members who come out as transgender to receive counseling services but requires that if transition is pursued or deemed medically necessary that service members will be separated (DoD, 2019). Based on information included in the current policy, it is unclear what such counseling services might entail (DoD, 2019). More broadly, providers serving this population would benefit from further research on clinical considerations and strategies for providing affirming care to transgender persons when legal barriers, or other factors, prevent social and medical transition. Emerging research on transgender veterans suggested that experiences of distal and proximal minority stressors may increase suicide risk (Tucker et al., 2018) and recommended efforts to reduce transgender veterans' exposure to minority stressors during and after service as a prevention strategy. Recent studies have also identified social support and connection as an important strategy for increasing resilience among transgender veterans (Carter et al., 2019).

This study adds to current literature on resilience by highlighting the important role of collective identity and community engagement in fostering resilience and resisting oppressive systems. Several studies have investigated how systemic oppression, or distal minority stressors, have impacted transgender persons' social (Grant et al., 2011; Nadal, Davidoff, & Fujii-Doe, 2014; Nadal, Skolnik, & Wong, 2012), interpersonal (House, Van Horn, Coppeans, & Stepleman, 2011; Klein & Golub, 2016; Koken, Bimbi, & Parsons, 2009; Nadal et al., 2014; Nadal et al., 2012; Yadegarfar, Meinhold-Bergmann, & Ho, 2014), and intrapersonal experiences (Mullen & Moane, 2013). Recent studies have investigated transgender persons' experiences of positivity (Budge, Orovecz, & Thai,

2015) and resilience (Singh, 2013; Singh et al., 2011; Singh & McKleroy, 2011; Testa et al., 2014; Witten, 2014) despite systemic oppression. However, mental health researchers have rarely explored how transgender persons and transgender communities of resistance reciprocally influence their interpersonal, social, and political environments (Craig, Dentato, & Iacovino, 2015; Gates, Russell, & Gainsburg, 2016). As such, academic discourse in the mental health field has generally treated transgender persons as passive subjects enduring systems of oppression rather than as active agents of systemic change. This narrow scope of scientific inquiry implies a unidirectional relationship between the trans subject and their socio-political environment; limiting discourse to trans strategies for survival as opposed to trans strategies for active resistance.

One possible approach for further addressing this gap in the current body of scientific literature might be the intentional inclusion of transgender persons in the scientific process through more widespread use of participatory research methods in psychological research. However, some participatory research designs leverage stakeholders only in recruitment, intervention development, or in a limited advisory capacity (such as focus groups, advisory committees, or member checking). While participatory designs are an improvement on past approaches, these practices often continue to reproduce oppressive paradigms in academia by relegating members of disadvantaged groups to adjunct or subordinate roles in the research process.

In their introduction to the *Counseling Psychologist* special issue on transgender research methods, Singh called for psychologists to move past affirmative research and embrace trans liberatory methodological approaches (2016). It is no longer acceptable for cisgender academics to professionally benefit from maintaining control over the

mechanisms of knowledge production applied to transgender bodies and transgender lives. In many ways, this study is a proof of methodological concept that including stakeholders as equal partners throughout the process of knowledge production is feasible and adds a crucial perspective that is conspicuously missing from the current body of literature on the transgender experience. Although such partnerships require additional effort from primary investigators to provide adequate training and mentorship for community members, genuinely empowering stakeholders is a necessary next step in liberatory research praxis and in building a pipeline for members of marginalized communities to become true colleagues in the advancement of psychological knowledge.

Perhaps the most valuable implication for these results emerges from transgender service members' experiences of finding and building community. At the start of data collection, the grassroots movement for open transgender military service was in its infancy. Since participating in this study, many of same service members have become community leaders and are spearheading the current movement for open transgender service. It is this researcher's hope that amplifying the collective voice of this community might inspire other suppressed groups to engage in collective resilience and resistance. However, results provide an important reminder that inclusivity is critical in all liberatory praxis; this holds true in research, clinical care, community support, and especially in social justice work. Service members shared about the deeply personal and devastating effects of in-group policing, racism, and cissexism they experienced in the transgender community and broader LGBTQ+ movement. These findings should serve as a cautionary tale, reminding community organizations and advocates that "the master's tools will never dismantle the master's house" (Lorde, 2003, p. 27).

REFERNCES

- Alford, B., & Lee, S. (2016). Toward complete inclusion: Lesbian, gay, bisexual, and transgender military service members after repeal of don't ask, don't tell. *Social Work, 61*(3). doi:10.1093/sw/sww033.
- American Psychiatric Association. (1995). *Diagnostic and statistical manual of mental disorders* (4th ed.). Arlington, VA: American Psychiatric Publishing.
- American Psychiatric Association. (1980). *Diagnostic and statistical manual of mental disorders* (3rd ed.). Arlington, VA: American Psychiatric Publishing.
- American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. *American Psychologist, 70*(9), 832–864. doi:10.1037/a0039906.
- Bailey, A. (2014). The unlevel knowing field: An engagement with Dotson's third-order epistemic oppression." *Social Epistemology Review and Reply Collective, 3*(10): 62–68. Retrieved from https://socialepistemologydotcom.files.wordpress.com/2014/09/bailey_unlevel.pdf
- Bailey, J. M. (1999). Homosexuality and mental illness. *Archives of General Psychiatry, 56*. 883–884. doi: 10.1001/archpsyc.56.10.883.
- Barber, M. E., & Schwartz, A. (2012). Don't ask don't tell and gays in the military. *Journal of Gay & Lesbian Mental Health, 16*(4), 289–290. doi:10.1080/19359705.2012.713238.

- Bauer, G. R., Hammond, R., Travers, R., Kaay, M., Hohenadel, K. M., & Boyce, M. (2009). "I don't think this is theoretical; this is our lives": How erasure impacts health care for transgender people. *Journal of the Association of Nurses in AIDS Care*, 20(5), 348-361. doi: 10.1016/j.jana.2009.07.004.
- Bauer, G. R., & Scheim, A. I. (2013). Sampling bias in transgender studies. *Lancet Infectious Diseases*, 13(10), 832. doi:10.1016/S1473-3099(13)70242-1.
- Belkin, A. (2016). *Here today, gone tomorrow: Why the U.S. military's transgender ban unraveled so quickly*. Santa Barbara, CA: The Palm Center. Retrieved from <http://www.palmcenter.org/publication/here-today-gone-tomorrow-why-the-us-militarys-transgender-ban-unraveled-so-quickly/>
- Berkes, F., & Ross, H. (2013). Community resilience: toward an integrated approach. *Society & Natural Resources*, 26(1), 5-20. doi: 10.1080/08941920.2012.736605.
- Blosnich, J. R., Marsiglio, M. C., Gao, S., Gordon, A. J., Shipherd, J. C., Kauth, M., ... & Fine, M. J. (2016). Mental health of transgender veterans in U.S. states with and without discrimination and hate crime legal protection. *American Journal of Public Health*, 106(3), 534-540. doi: 10.2105/AJPH.2015.302981.
- Blosnich, J. R., Brown, G. R., Shipherd, J. C., Kauth, M., Piegari, R. I., & Bossarte, R. M. (2013). Prevalence of gender identity disorder and suicide risk among transgender veterans utilizing Veterans Health Administration care. *American Journal of Public Health*, 103(10), e27-e32. doi:10.2105/AJPH.2013.301507.
- Bockting, W., Barucco, R., LeBlanc, A., Singh, A., Mellman, W., Dolezal, C., &

- Ehrhardt, A. (2019). Sociopolitical change and transgender people's perceptions of vulnerability and resilience. *Sexuality Research & Social Policy: A Journal of the NSRC*. doi: 10.1007/s13178-019-00381-5.
- Bockting, W., Huang, C. Y., Ding, H., Robinson, B. B., & Rosser, B. S. (2005). Are transgender persons at higher risk for HIV than other sexual minorities? A comparison of HIV prevalence and risks. *International Journal of Transgenderism*, 8(2-3), 123-131. doi:10.1300/J485v08n02_11.
- Budge, S. L., Adelson, J. L., & Howard, K. A. S. (2013). Anxiety and depression in transgender individuals: The roles of transition status, loss, social support, and coping. *Journal of Consulting and Clinical Psychology*, 81(3), 545–557. doi:10.1037/a0031774.
- Budge, S. L., Orovecz, J. J., & Thai, J. L. (2015). Trans men's positive emotions: The interaction of gender identity and emotion labels. *The Counseling Psychologist*, 43(3), 404-434. doi:10.1177/0011000014565715.
- Burch, K. T. (2012). *Democratic transformations: Eight conflicts in the negotiation of American identity*. London, England: Continuum.
- Carter, A. (2015). *Transgender Service Members [Memorandum]*. Washington, DC: Department of Defense.
- Carter, S. P., Allred, K. M., Tucker, R. P., Simpson, T. L., Shipherd, J. C., & Lehavot, K. (2019). Discrimination and suicidal ideation among transgender veterans: the role of social support and connection. *LGBT health*, 6(2), 43-50. doi: 10.1089/lgbt.2018.0239.
- Castillo-Carsow, M. (2012). The legacy of Gloria Anzaldúa: Finding a place for women

- of color in academia. *Bilingual Review*, 31(1), 3-11. Retrieved from <https://www.jstor.org/stable/24705991>
- Chen, J. A., Granato, H., Shipherd, J. C., Simpson, T., & Lehavot, K. (2017). A qualitative analysis of transgender veterans' lived experiences. *Psychology of Sexual Orientation and Gender Diversity*, 4(1), 63–74. doi:10.1037/sgd0000217.
- Clements-Nolle, K., Marx, R., & Katz, M. (2006). Attempted suicide Among transgender persons: The influence of gender-based discrimination and victimization. *Journal of Homosexuality*, 51(3), 53–69. doi:10.1300/J082v51n03_04.
- Collins, P. H. (1986). Learning from the outsider within: The sociological significance of Black feminist thought. *Social Problems*, 33(6), s14-s32. doi:10.1525/sp.1986.33.6.03a00020.
- Collins, P. H. (2000). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. New York, NY: Routledge.
- Craig, S. L., Dentato, M. P., & Iacovino, G. E. (2015). Patching holes and integrating community: A strengths-based continuum of care for lesbian, gay, bisexual, transgender and questioning youth. *Journal of Gay & Lesbian Social Services: The Quarterly Journal of Community & Clinical Practice*, 27(1), 100-115. doi:10.1080/10538720.2015.988317.
- Creswell, J. W., & Poth, C. N. (2017). *Qualitative inquiry and research design: Choosing among five approaches*. Thousand Oaks, CA: Sage.
- Currah, P. (2008). Expecting bodies: The pregnant man and transgender exclusion from the employment non-discrimination act. *Womens Studies Quarterly*, 36(3/4), 330-336. doi: 10.1353/wsq.0.0101.

- Dietert, M., & Dentice, D. (2015). The transgender military experience: Their battle for workplace rights. *SAGE Open*. doi: 10.1177/2158244015584231.
- Department of Defense. (1982). *DoD Directive 1332.14: Enlisted administrative separations*. Washington, DC: Author.
- Department of Defense. (2004). *Department of Defense Instruction 6130.4: Criteria and Procedure Requirements for Physical Standards for Appointment, Enlistment, or Induction in the Armed Forces*. Washington, DC: Author.
- Department of Defense. (2011a). *Department of Defense Instruction 6130.3: Medical Standards for Appointment, Enlistment, or Induction in the Armed Forces*. Washington, DC: Author.
- Department of Defense. (2011b). *Report of Medical History (DD Form 2807-1)*. Washington, DC: Author.
- Department of Defense, Press Operations. (2016). *Statement by secretary of defense Ash Carter on DoD transgender policy [Press release]*. Retrieved from <http://www.defense.gov/News/News-releases/News-Release-View/Article/612778>
- Department of Defense. (2019). *Directive-type Memorandum (DTM)-19-004: Military Service by Transgender Persons and Persons with Gender Dysphoria*. Washington, DC: Author.
- dickey, I. M., Hendricks, M. L., & Bockting, W. O. (2016). Innovations in research with transgender and gender nonconforming people and their communities. *Psychology of Sexual Orientation and Gender Diversity*, 3(2), 187–194. doi:10.1037/sgd0000158.

- Dotson, K. (2015). Inheriting Patricia Hill Collins's Black Feminist epistemology. *Ethnic and Racial Studies*, 38(13), 2322-2328. doi:10.1080/01419870.2015.1058496.
- Elders, M. J., Brown, G. R., Coleman, E., Kolditz, T. A., & Steinman, A. M. (2015). Medical aspects of transgender military service. *Armed Forces & Society*, 41(2), 199-220. doi:10.1177/0095327X14545625.
- Fairclough, N. (1993). *Discourse and social change*. Cambridge: Polity.
- Fisher, P. (2007). Experiential knowledge challenges "normality" and individualized citizenship: Towards "another way of being." *Disability & Society*, 22, 283-298. doi:10.1080/09687590 701259591.
- Foucault, M. (1981). The order of discourse. In R. Young (Ed.), *Untying the text: A post-structural anthology* (pp. 48-78). Boston, MA: Routledge & Kegan Paul.
- Foucault, M. (1979). *Discipline and punish: The birth of the prison*. London: Penguin.
- Foucault, M. (1965). *Madness and civilization*. New York: Vintage.
- Frye, M. (2008). Oppression. *The Feminist Philosophy Reader*. Eds. Allison Bailey & Chris Cuomo. New York, NY: McGraw Hill, 2008. 41-48.
- Frye, M. (1983). *The politics of reality: Essays in feminist theory*. Freedom, CA: Crossing Press.
- Gates, G. J., & Herman, J. (2014). Transgender military service in the United States. *The Williams Institute*. Retrieved from <https://escholarship.org/uc/item/1t24j53h>
- Gates, T. G., Russell, E. B., & Gainsburg, J. (2016). Volunteers work for lesbian, gay, bisexual, transgender, and queer rights: Motivations at a Rochester social justice organization. *Journal of Gay & Lesbian Social Services: The Quarterly Journal of*

Community & Clinical Practice, 28(1), 39-53.

doi:10.1080/10538720.2016.1124352.

Georgaca, E. (2014). Discourse analytic research on mental distress: A critical overview.

Journal of Mental Health, 23, 55– 61. doi:10.3109/09638237.2012.734648.

Gines, K. T. (2015). Ruminations on twenty-five years of Patricia Hill Collins's Black

Feminist Thought: Knowledge, consciousness and the politics of

empowerment. *Ethnic & Racial Studies*, 38(13), 2341-2348.

doi:10.1080/01419870.2015.105850.

Gould, S. J. (1996). *The mismeasure of man*. New York, N.Y.: Norton.

Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L., & Kiesling, M. (2011).

Injustice at every turn: A report of the national transgender discrimination survey.

Washington, DC: National Center for Transgender Equality & National Gay and

Lesbian Task Force. Retrieved from

[http://endtransdiscrimination.org/PDFs/NTDS_Report .pdf](http://endtransdiscrimination.org/PDFs/NTDS_Report.pdf)

Griffith, J., & West, C. (2013). Master Resilience Training and its relationship to

individual well-being and stress buffering among Army National Guard

soldiers. *The Journal of Behavioral Health Services & Research*, 40(2), 140–155.

doi: 10.1007/s11414-013-9320-8.

Grossman, A. H., D'Augelli, A. R., Salter, N. P., & Hubbard, S. M. (2006). Comparing

gender expression, gender nonconformity, and parents' responses of female-to-

male and male-to-female transgender youth. *Journal of LGBT Issues in*

Counseling, 1(1), 41-59. doi: 10.1300/J462v01n01_04.

Haraway, D. (1991). *Simians, cyborgs, and women: The reinvention of nature*. New

York: Routledge.

- Harding, S. (1998). *Is science multicultural? Postcolonialisms, feminisms, and epistemologies*. Bloomington, IN: Indiana University Press.
- Harding, S. (1986). *The science question in feminism*. Ithica, NY: Cornell University Press.
- Hartsock, N. (1983). *Money, sex, and power: Toward a feminist historical materialism*. New York: Longman.
- Harrison-Quintana, J., & Herman, J. L. (2013). Still serving in silence: Transgender service members and veterans in the National Transgender Discrimination Survey. *LGBTQ Policy Journal*, 3(1), 1-13. Retrieved from <https://lgbtq.hkspublications.org/wp-content/uploads/sites/20/2015/10/LGBTQ-2013.pdf>
- Hartling, L. (2005). Fostering resilience throughout our lives: New relational possibilities. In D. Comstock (Ed.), *Diversity in Development: Critical Contexts that Shape our Lives and Relationships* (pp. 337–354). Pacific Grove: Thomson/Wadsworth.
- Hendricks, M. L., & Testa, R. J. (2012). A conceptual framework for clinical work with transgender and gender nonconforming clients: An adaptation of the Minority Stress Model. *Professional Psychology: Research and Practice*, 43(5), 460–467. 10.1037/a0029597.
- Hesse-Biber, S. N., & Leavy, P. L. (2007). *Feminist research practice: A primer*. Thousand Oaks, CA: Sage Publications.
- Hilliard, A. G. (1988). Conceptual confusion and the persistence of group oppression

- through education. *Equity & Excellence*, 24(1), 36-43. doi:
10.1080/1066568880240106.
- Holstein, J. A., & Gubrium, J. F. (1995). *The Active Interview*. Thousand Oaks, CA: Sage Publications.
- Hook, D. (2001). Discourse, Knowledge, Materiality, History: Foucault and Discourse Analysis. *Theory & Psychology*, 11(4), 521. doi: 10.1177/0959354301114006.
- House, A. S., Van Horn, E., Coppeans, C., & Stepleman, L. M. (2011). Interpersonal trauma and discriminatory events as predictors of suicidal and nonsuicidal self-injury in gay, lesbian, bisexual, and transgender persons. *Traumatology*, 17(2), 75-85. doi:10.1177/1534765610395621.
- Kerrigan, M. F. (2012). Transgender discrimination in the military: The new don't ask, don't tell. *Psychology, Public Policy, and Law* 18(3), 500-518. doi:10.1037/a0025771.
- Kitzinger, C. (1996). 'The Freudian coverup': A reappraisal. *Feminism & Psychology*, 6(2), 251-259. doi:10.1177/0959353596062014.
- Klein, A., & Golub, S. A. (2016). Family rejection as a predictor of suicide attempts and substance misuse among transgender and gender nonconforming adults. *LGBT Health*, 3(3), 193-199. doi:10.1089/lgbt.2015.0111.
- Koken, J. A., Bimbi, D. S., & Parsons, J. T. (2009). Experiences of familial acceptance–rejection among transwomen of color. *Journal of Family Psychology*, 23(6), 853-860. doi:10.1037/a0017198.
- Kuhn, T. (1962). *The Structure of Scientific Revolutions*. Chicago: University of Chicago Press.

- Lefevor, G. T., Boyd-Rogers, C. C., Sprague, B. M., & Janis, R. A. (2019). Health disparities between genderqueer, transgender, and cisgender individuals: An extension of minority stress theory. *Journal of Counseling Psychology, 66*(4), 385–395. doi:10.1037/cou0000339.
- Lorde, A. (2007). *Sister Outsider: Essays and speeches*. New York: Crossing Press.
- Lorde, A. (2003). The master's tools will never dismantle the master's house. In R. Lewis & S. Mills (Eds.), *Feminist Postcolonial Theory: A Reader*. (pp. 25-26). New York, NY: Routledge.
- Louçã, F. (2009). Emancipation through interaction: How eugenics and statistics converged and diverged. *Journal of the History of Biology, 42*(4), 649–684. doi: 10.1007/s10739-008-9167-7.
- Lyons, A., Fletcher, G., & Bariola, E. (2016). Assessing the well-being benefits of belonging to resilient groups and communities: Development and testing of the Fletcher-Lyons Collective Resilience Scale (FLCRS). *Group Dynamics: Theory, Research, and Practice, 20*(2), 65–77. oi:10.1037/gdn0000041.
- Magis, K. (2010). Community resilience: An indicator of social sustainability. *Society and Natural Resources, 23*(5), 401–416. doi: 10.1080/08941920903305674.
- Martinez, T. A. (2005). Making oppositional culture, making standpoint: A journey into Gloria Anzaldúa's borderlands. *Sociological Spectrum, 25*(5), 539-570. doi:10.1080/02732170500176021.
- Masson, J. M. (1985). *The assault on truth: Freud's suppression of the seduction theory*. New York, NY: Penguin Press.
- Matsuno, E., & Israel, T. (2018). Psychological interventions promoting resilience among

- transgender individuals: Transgender resilience intervention model (TRIM). *The Counseling Psychologist*, 46(5), 632–655. doi: 10.1177/0011000018787261.
- Mattocks, K. M., Kauth, M. R., Sandfort, T., Matza, A. R., Sullivan, J. C., & Shipherd, J. C. (2014). Understanding health-care needs of sexual and gender minority veterans: How targeted research and policy can improve health. *LGBT Health*, 1(1), 50-57. doi:10.1089/lgbt.2013.0003.
- Meyer, I. H. (2015). Resilience in the study of minority stress and health of sexual and gender minorities. *Psychology of Sexual Orientation and Gender Diversity*, 2(3), 209–213. doi:10.1037/sgd0000132.
- Meyer, I. H. (2003). Minority stress and mental health in gay men. In L. D. Garnets & D. C. Kimmel (Eds.), *Psychological perspectives on lesbian, gay, and bisexual experiences., 2nd ed.* (pp. 699–731). New York, NY: Columbia University Press.
- Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of health and social behavior*, 38-56. doi:10.2307/2137286.
- Meyer, J. G. (1990). *Company command: the bottom line*. Washington, DC: National Defense University Press.
- McDuffie, E. & Brown, G. (2010). 70 U.S. Veterans with gender identity disturbances: A descriptive study. *International Journal of Transgenderism* 12(1): 21-30. doi:10.1080/15532731003688962.
- Mullen, G., & Moane, G. (2013). A qualitative exploration of transgender identity affirmation at the personal, interpersonal, and sociocultural levels. *International Journal of Transgenderism*, 14(3), 140-154. doi:10.1080/15532739.2013.824847.
- Nadal, K. L., Davidoff, K. C., & Fujii-Doe, W. (2014). Transgender women and the sex

work industry: Roots in systemic, institutional, and interpersonal discrimination. *Journal of Trauma & Dissociation*, 15(2), 169-183. doi:10.1080/15299732.2014.867572.

Nadal, K. L., Skolnik, A., & Wong, Y. (2012). Interpersonal and systemic microaggressions toward transgender people: Implications for counseling. *Journal of LGBT Issues in Counseling*, 6(1), 55-82. doi:10.1080/15538605.2012.648583.

Namaste, V. (2009). Undoing theory: The "transgender question" and the epistemic violence of anglo-american feminist theory. *Hypatia*, 24(3), 11-32. Retrieved from <http://www.jstor.org/stable/20618162>

Nourse, V. (2011). Buck v. Bell: A Constitutional Tragedy from a Lost World. *Georgetown Public Law and Legal Theory*, 12, 101-117. Retrieved from <https://digitalcommons.pepperdine.edu/plr/vol39/iss1/6>

Parco, J. E., Levy, D. A., & Spears, S. R. (2015). Transgender Military Personnel in the Post-DADT Repeal Era: A Phenomenological Study. *Armed Forces & Society*, 41(2), 221-242. doi:10.1177/0095327X14530112.

Pflum, S. R., Testa, R. J., Balsam, K. F., Goldblum, P. B., & Bongar, B. (2015). Social support, trans community connectedness, and mental health symptoms among transgender and gender nonconforming adults. *Psychology of Sexual Orientation and Gender Diversity*, 2(3), 281–286. doi: 10.1037/sgd0000122.

Poortinga, W. (2012). Community resilience and health: The role of bonding, bridging, and linking aspects of social capital. *Health & Place*, 18(2), 286-295. doi: 10.1016/j.healthplace.2011.09.017.

Poortinga, W. (2006). Social capital: An individual or collective resource for

health? *Social Science & Medicine*, 62(2), 292–302.

doi:10.1016/j.socscimed.2005.06.008.

Puckett, J. A., Matsuno, E., Dyar, C., Mustanski, B., & Newcomb, M. E. (2019, July 18).

Mental health and resilience in transgender individuals: What type of support makes a difference? *Journal of Family Psychology*, 34(5). Advance online publication. doi: 10.1037/fam0000561.

Reivich, K. J., Seligman, M. E. P., & McBride, S. (2011). Master resilience training in the U.S. Army. *American Psychologist*, 66(1), 25–34. doi:10.1037/a0021897.

Rossmann, K., Chism, Y., Gervasi, C., Sherwood, P., & Budge, S. L. (2015). A qualitative examination of privilege and oppression in the trans community. Presented at the World Professional Association of Transgender Health Graduate Student Research Symposium, Philadelphia, PA

Reisner S. L., Conron, K. J., Tardiff, L. A., Jarvi, S., Gordon, A. R., and Austin, S. B. (2014). Monitoring the health of transgender and other gender minority populations: Validity of natal sex and gender identity survey items in a U.S. national cohort of young adults. *BMC Public Health*, 14(1244), 1-10. doi: 10.1186/1471-2458-14-1224.

Rush, F. (1996). The Freudian coverup. *Feminism & Psychology*, 6(2), 261-276. doi:10.1177/0959353596062015.

Sevelius, J., Dickey, I. M., & Singh, A. A. (2017). Engaging in TGNC-affirmative research. In A. Singh & I. M. Dickey (Eds.), *Affirmative counseling and psychological practice with transgender and gender nonconforming clients*. (pp.

231–246). Washington, DC: American Psychological Association.
doi:10.1037/14957-012.

Shinebourne, P. (2011). The Theoretical Underpinnings of Interpretative Phenomenological Analysis (IPA). *Existential Analysis: Journal of the Society for Existential Analysis*, 22(1). Retrieved from <https://search-ebshost-com.echo.louisville.edu/login.aspx?direct=true&db=a9h&AN=59243712&site=ehost-live>

Shipherd, J. C., Mizock, L., Maguen, S., & Green, K. E. (2012). Male-to-female transgender veterans and VA health care utilization. *International Journal of Sexual Health*, 24(1), 78-87. doi:10.1080/19317611.2011.639440.

Singh, A. A. (2013). Transgender youth of color and resilience: Negotiating oppression and finding support. *Sex Roles*, 68(11-12), 690-702. doi:10.1007/s11199-012-0149-z.

Singh, A. A. (2016). Major contribution reaction: Yes! And let's move further toward trans liberation. *The Counseling Psychologist*, 44(7), 1050–1061.
doi:10.1177/0011000016669435.

Singh, A. A., Hays, D. G., & Watson, L. S. (2011). Strength in the face of adversity: Resilience strategies of transgender individuals. *Journal of Counseling & Development*, 89(1), 20-27. doi:10.1002/j.1556-6678.2011.tb00057.x.

Singh, A. A., & McKleroy, V. S. (2011). 'Just getting out of bed is a revolutionary act': The resilience of transgender people of color who have survived traumatic life events. *Traumatology*, 17(2), 34-44. doi:10.1177/1534765610369261.

Singh, A. A., Meng, S. E., & Hansen, A. W. (2014). "I am my own gender": Resilience

- strategies of trans youth. *Journal of Counseling & Development*, 92(2), 208–218.
doi: 10.1002/j.1556-6676.2014.00150.x.
- Singh, A. A., Richmond, K., & Burnes, T. R. (2013). Feminist participatory action research with transgender communities: Fostering the practice of ethical and empowering research designs. *International Journal of Transgenderism*, 14(3), 93–104. doi:10.1080/15532739.2013.818516.
- Smith, J. A. (1994). Towards reflexive practice: Engaging participants as co-researchers or co-analysts in psychological inquiry. *Journal of community & applied social psychology*, 4(4), 253-260. doi: 10.1002/casp.2450040405.
- Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative Phenomenological Analysis: Theory, Method and Research*. London, England: Sage.
- Smith, L. C., Shin, R. Q., & Officer, L. M. (2011). Moving counseling forward on LGB and transgender issues: speaking queerly on discourses and microaggressions. *The Counseling Psychologist*, 40 (3), 385-408. doi: 10.1177/0011000011403165.
- Spillers, H. (1984). Interstices: A small drama of words. In C. Vance (Ed.), *Pleasure and Danger: Exploring Sexuality*. Boston, MA: Routledge, 72–100.
- Sprague, J. (2016). *Feminist methodologies for critical researchers : Bridging Differences*. Lanham, MD: Rowman & Littlefield.
- Staples, J. M., Neilson, E. C., Bryan, A. E. & George, W. H. (2018). The role of distal minority stress and internalized transnegativity in suicidal ideation and nonsuicidal self-injury among transgender adults. *The Journal of Sex Research*, 55(4-5), 591-603. doi: 10.1080/00224499.2017.1393651.
- Testa, R. J., Jimenez, C. L., & Rankin, S. (2014). Risk and resilience during transgender

- identity development: The effects of awareness and engagement with other transgender people on affect. *Journal of Gay & Lesbian Mental Health*, 18(1), 31-46. doi:10.1080/19359705.2013.805177.
- Tucker, R. P., Testa, R. J., Reger, M. A., Simpson, T. L., Shipherd, J. C., & Lehavot, K. (2018). Current and military-specific gender minority stress factors and their relationship with suicide ideation in transgender veterans. *Suicide and Life-Threatening Behavior*, 49(1), 155-166. doi: 10.1111/sltb.12432.
- Ungar, M. (2013). Resilience, trauma, context, and culture. *Trauma, Violence, & Abuse*, 14(3), 255–266. doi: 10.1177/1524838013487805.
- Ungar, M. (2010). What is resilience across cultures and contexts? Advances to the theory of positive development among individuals and families under stress. *Journal of Family Psychotherapy*, 21(1), 1–16. doi:10.1111/j.1545-5300.2010.01331.x.
- Ungar, M. (2005). Pathways to resilience among children in child welfare, corrections, mental health and educational settings: Navigation and negotiation. *Child & Youth Care Forum*, 34(6), 423–444. doi: 10.1007/s10566-005-7755-7.
- Ungar, M., Ghazinour, M., & Richter, J. (2013). Annual research review: What is resilience within the social ecology of human development? *Journal of Child Psychology and Psychiatry*, 54(4), 348–366. doi: 10.1111/jcpp.12025.
- Wilson, B. D. (2009). Black lesbian gender and sexual culture: Celebration and resistance. *Culture, Health & Sexuality*, 11(3), 297-313. doi: 10.1080/13691050802676876.
- Witten, T. M. (2014). It's not all darkness: Robustness, resilience, and successful

transgender aging. *LGBT health*, 1(1), 24-33. doi: 10.1089/lgbt.2013.0017.

Yadegarfar, M., Meinhold-Bergmann, M. E., & Ho, R. (2014). Family rejection, social isolation, and loneliness as predictors of negative health outcomes (depression, suicidal ideation, and sexual risk behavior) among Thai male-to-female transgender adolescents. *Journal of LGBT Youth*, 11(4), 347-363. doi:10.1080/19361653.2014.910483.

Yerke, A. F., & Mitchell, V. (2013). Transgender people in the military: Don't Ask? Don't Tell? Don't Enlist! *Journal of Homosexuality*, 60(2-3), 436-457. doi:10.1080/00918369.2013.744933.

Yerkes, R. M. (1923). Eugenic bearing of measurements of intelligence in the United States Army. *Eugenics*, 14, 225-245.

Yoshino, K. (2002). Covering. *The Yale Law Journal*, 111(4), 769-939. doi: 10.2307/797566.

APPENDIX A

NOTE: IF YOU FEEL THAT ANY INFORMATION BELOW WOULD PUT YOU AT A RISK OF EXPOSURE DO NOT ANSWER. YOU WILL NOT BE PENALIZED AND YOU ARE STILL ELIGIBLE TO COMPLETE THE INTERVIEW.

How do you identify your current gender/sex identity (e.g., male-to-female transsexual, female-to-male transsexual, gender queer, gender bender, gender-variant, etc.)?

SAB (sex assigned at birth):

- Male
- Female
- Intersex

Age:

Time in Service:

Age at time of enlistment or commission:

Branch of service:

- Army
- Navy
- Air Force
- Marine Corps
- Coast Guard

Military Component:

- Active Duty
- Guard/Reserve
- IRR
- Discharged
- Retired
- Military Academy
- ROTC

What was the characterization of your discharge (if applicable)?

- Entry Level Separation
- Honorable
- General

- Other-than-honorable
- Bad Conduct
- Dishonorable

Reason cited (medical, administrative, disability, reduction in force, etc.):

Rank:

- Lower enlisted (E1-E4)
- NCO (E5-E6)
- NCO (E7-E9)
- Warrant Officer
- Officer Candidate/Cadet/Midshipman
- Company Grade/Junior Officer (O1-O3)
- Field Grade (O4-O6)
- Flag Officer (O7 and above)

Number of deployments, location, and length of each tour (please indicate if location was considered a combat zone at the time of deployment):

Household income prior to service:

- \$0-\$10,000
- \$10,001-\$20,000
- \$20,001-\$30,000
- \$30,001-\$40,000
- \$40,001-\$60,000
- \$60,001-\$80,000
- \$80,001-\$100,000
- \$100,000 and above

Race and Ethnicity please list all that apply:

Religion, please list all that apply:

Nationality, please list all that apply:

What is your citizenship status?

What is your sexual orientation (e.g., lesbian, gay, bisexual, queer, pansexual, etc.)?

Highest level of education attained:

- Did not complete high school
- High school diploma/GED
- Some college
- Associates Degree
- Bachelors Degree
- Masters Degree
- PhD

Please indicate your current income:

- \$0-\$10,000
- \$10,001-\$20,000
- \$20,001-\$30,000
- \$30,001-\$40,000
- \$40,001-\$50,000
- \$50,001-\$60,000
- \$60,001-\$70,000
- \$70,001-\$80,000
- \$80,001-\$90,000
- \$90,000-\$100,000
- \$100,001 and above

What is your current relationship status? (check all that apply)

(We realize that language currently does not exist to encompass many partnerships when it comes to terms like “married,” “divorced” or “widowed”. However, if you would consider this to be your relationship status, although it is not legally recognized in this way currently, please mark that appropriate box).

- Single
- married
- not married but living with partner
- not cohabitating but in a committed relationship
- currently in more than one relationship
- divorced
- widowed
- separated
- other: _____

What is the gender identity of your current partner(s)? (if in a relationship)

Where do you currently reside?

- On post (CONUS)
- On post (OCONUS)
- Off post (CONUS)
- Off post (OCONUS)
- Currently deployed

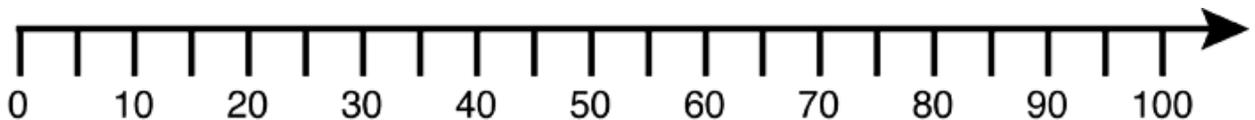
How would you describe the environment where you live (go by home station or home of record if you are currently deployed)?

- Urban
- Rural
- Suburban

How old were you when you first started recognizing your transgender identity?

How long (months, years) have you identified as (gender identity)?

From a range of 0 to 100, where do you believe you are in your identity (or transition) process, with 0 being “I haven’t begun” to 100 being “I’ve reached the furthest point I can in my process.” Please circle your response:



Describe briefly why you chose the number above:

APPENDIX B

TRANS MILITARY SERVICE INTERVIEW QUESTIONS

1. Tell me about your decision to join the military.
2. Tell me about your process of identifying as (insert gender identity)?
3. What are your experiences being part of a community?
4. Where do you go for information about gender identity?
5. Where do you go for support related to your gender identity?
6. Have you ever sought transition related services from a mental health or medical professional?
 - a) If so:
 - What did you consider when deciding where to receive care?
 - What did you expect when seeking services?
 - What was your experience like?
 - b) If not: why not?
7. What does being a (soldier/sailor/airman/marine) mean to you?
8. What does being (insert gender identity) mean to you?
9. Have you experienced discrimination related to your gender identity/perceived sexual orientation while in the military?
 - If so: What has that experience been like?
 - How has the repeal of DADT impacted your experience?
10. Have you ever told anyone in the military about your gender identity?
11. How has being a (insert gender identity) servicemember caused you to make sacrifices?
12. If a young person who identified as (**insert identity**) was considering joining the military what would you tell them? What advice would you give a young (**Soldier/Sailor/Airman/Marines**) thinking about transitioning?
- 13a. How do you see your military participation going forward?
 - What was your process in coming to this decision?
- 13b. Retired/IRR: How would your career have changed if policies were different?
14. How do you imagine your life would be different (or how is your life different now) after leaving service?
15. Is there anything else you would like to say about your experience serving in the military as a (insert gender identity) identified person?

APPENDIX C

Resources for Transgender Service Members

Legal Resources

*Servicemember's Legal Defense Network

<http://www.sldn.org/>

1-800-538-7418

American Civil Liberties Union

<http://www.aclu.org/lgbt-rights/discrimination-against-transgender-people>

-From the website pick your state/regional affiliate from the drop down box at the right of the screen. This link will send you to the contact information of your local ACLU affiliate where you can obtain legal advocacy or advice.

Transgender Law Center

<http://transgenderlawcenter.org/>

Community Outreach and Support

SPART*A Trans

<http://sparta.nationbuilder.com/>

Suicide Crisis

National Suicide Prevention Lifeline

1-800-273-TALK (8255)

*Veteran Suicide Crisis Line

1-800-273-8255 (press 1)

Trevor Project

1-866-488-7386

Military Sexual Trauma

*RAINN: Safe Helpline

www.safehelpline.org

1-877-995-5247

*These services are military specific but do not report to military officials.

CURRICULUM VITA

Jacob R. Eleazer

COLLEGE OF EDUCATION AND HUMAN DEVELOPMENT
UNIVERSITY OF LOUISVILLE
LOUISVILLE, KY 40292
JACOB.ELEAZER@LOUISVILLE.EDU

CIVILIAN EDUCATION

- PhD** Counseling Psychology (APA Accredited) Expected-2019
University of Louisville
Dissertation: “We’ve Been Here All Along:” The Standpoint and Collective Resilience of Transgender U.S. Service Members
Dissertation Committee:
Chair: Laurie McCubbin, Ph.D. in Counseling Psychology
lore dickey, Ph.D. in Counseling Psychology
Ahmad Washington, Ph.D. in Counselor Education
Amanda Mitchell, Ph.D. in Counseling Psychology
Brynn Tannehill, Project Coordinator, RAND Corporation
- MEd** Counseling Psychology 2016
Graduate Certificate in Women & Gender Studies
University of Louisville
Second Year Project: “I’m Afraid of my Therapist:” Access to Care for Transgender Military Service Members
Advisor: Stephanie Budge, Ph.D. in Counseling Psychology
- BIS** Gender Studies 2010
Eastern Kentucky University
- BA** History 2010
Eastern Kentucky University

MILITARY EDUCATION

- Adjutant General Captains Career Course** 2015
Soldier Support Institute: Fort Jackson, NC
- Certified Army Instructor** 2013
Alabama Military Academy

Adjutant General Basic Officer Leadership Course 2012
Soldier Support Institute, Fort Jackson

Officer Candidates School
2009
Kentucky Military Academy 238th Training Regiment

HONORS AND AWARDS

Army Achievement Medal-Bronze Oak Leaf Cluster 2015
Awarded for being selected TAC officer of the year for Officer Candidates School at the 238th Regional Training Institute.

**World Professional Association for Transgender Health (WPATH)
Student Award for Contributions to Transgender Health** 2014
Awarded for research and advocacy work on behalf of transgender military Service Members.

Army Commendation Medal 2013
Awarded for excellence in service to the 238th Training Regiment, Officer Candidates School.

Palm Center Research Fellowship 2013
Awarded three-year fellowship with the Palm Center for research on sexual orientation and gender diversity in the military.

APA Division 44 Transgender Research Award 2013
Awarded for doctoral second-year project entitled: "If I'm Just a Good Enough Soldier then Maybe They Won't Care: Uncovering the Standpoint of Trans* Military Service Members."

Anne-Braden Institute Social Justice Research Paper Award 2013
Awarded for research paper entitled: "Ethical Considerations for Professional Psychologists working with Transgender Military Service Members."

Army Achievement Medal - Bronze Oak Leaf Cluster 2012
Awarded for training Soldiers in preparation for deployment and improving student performance outcomes in both classroom and field performance evaluations.

Army Achievement Medal 2011
Awarded for excellence in service to the Kentucky Equal Opportunity Leaders' Program as guest lecturer and instructor.

Public Leadership Education Network (PLEN) Ambassador 2009
Represented Eastern Kentucky University in Washington, DC as part of the PLEN ambassador program for women in public policy leadership.

Military Order of the World Wars Award 2009
Awarded concurrently with the Kentucky Commendation Ribbon for outstanding performance during Officer Candidates School.

Association of the United States Army Award for Excellence in Leadership 2009
Awarded concurrently with the Kentucky Merit Ribbon for excellence in leadership during Officer Candidates School.

Presidential Scholarship 2004
Awarded for acceptance into the Eastern Kentucky University Honors Program.

CLINICAL EXPERIENCE

Theoretical Orientation: Feminist-Interpersonal Psychotherapy

VA Puget Sound Health Care System, American Lake Division 2018-Present
Predoctoral Psychology Intern

Currently completing an APA accredited VA psychology predoctoral internship training program.

Major Rotations:

- Telemental Health (TMH)
- Primary Care Mental Health Integration (PCMHI)
- Mental Health Clinic (MHC)

Training Emphasis in LGBT+ Veterans Care:

Co-facilitated group therapy for transgender Veterans. Provided individual therapy and psychological assessment with transgender Veterans. Served on VA Puget Sound interfacility LGBT+ Workgroup. Developed resource guide for providers serving LGBT+ Veterans in Tacoma, WA. Completed Transgender SCAN-ECHO Consultation cohort. Provided didactic trainings on transgender Veterans and transgender affirmative care for both the American Lake Division psychology staff and as part of the VA Puget Sound telehealth didactic series. Started LGBT+ Veterans psychotherapy and health education group in the PCMHI clinic.

Research Projects:

- Collaborated with LGBT Veteran Care Coordinator in completing the Healthcare Equality Index. Preliminary results suggest an increase in score from 35/100 to 95/100, reinstating VA Puget Sound's status as an LGBT Healthcare Top Performer with the Human Rights Campaign. Completed report reviewing results and recommendations for improving LGBTQ+ care to be presented to administrative and clinical leadership for the VA Puget Sound Health Care System.

Lexington Veterans Affairs Medical Center 2017-2018

Psychological Assessment Practicum Student

Administered, scored, and interpreted psychological assessments. Received specific training in the assessment and diagnosis of ADHD. Co-facilitated Lexington VA PRIDE group for LGBT+ Veterans. Assisted in submission of the Human Rights Campaign's Healthcare Equality Index (HEI) facility assessment. Supervisor: Dr. Keli Blankenship, Psy.D.

Bluegrass.org Housing First Program, SMI Operations 2016-2018

Outpatient Therapist

Served in full-time position as a Licensed Professional Counseling Associate (License #: 168725) for a Pathways Housing First treatment team in Lexington, KY. Target populations for this SAMHSA funded project were persons with an SMI (serious mental illness) diagnosis, SUD (substance use disorder) diagnosis, and/or prior service in the U.S. military. Conducted street outreach, administered screenings for housing services, and provided appropriate referrals to community resources in partnership with the Lexington Office of Homelessness Prevention and Intervention. Conducted clinical intakes, administered diagnostic and level of care assessments, developed person-centered treatment plans, and provided assertive community treatment for Housing First patients. Provided psychotherapy services in the field (at homeless shelters, in clients' homes, and in the community). Developed a partnership with Arbor Youth Services to provide group psychotherapy and independent living services for homeless young adults ages 18-26.

Clinical Supervisor: Erin M. Rooks Ed.S., LPCC

Robley V. Rex Veterans Affairs Medical Center 2015-2016

Psychology Practicum Student

Provided group therapy interventions at outpatient, intensive outpatient, and residential levels of care as part of an interdisciplinary VA substance abuse treatment center. Co-facilitated daily interpersonal process group psychotherapy and weekly "fish bowl" group process sessions. Led skills-focused group therapy on a variety of topics, including: relapse prevention, facilitative coping skills, and mindfulness meditation. Attended didactic trainings in neuropsychological assessment, traumatic brain injury, dual diagnosis of PTSD and substance use disorders, dialectical behavior therapy, and grief. Provided consultation and didactic training for mental health and medical providers on affirmative care for lesbian, gay, bisexual, and transgender Veterans.

Supervisor: Dr. Stephen Bliss, Ph.D.

Ireland Army Hospital, Behavioral Health Clinic 2015-2016

Psychology Practicum Student

Provided individual psychotherapy for military Service Members, retirees, and their family members. Gained experience treating a variety of presenting problems, including: posttraumatic stress disorder (due to combat trauma and military sexual trauma), traumatic brain injury, terminal illness, relational/marital

problems, grief, serious mental illness, and personality disorders. Provided professional development training for clinical staff members on affirmative practice with transgender Service Members. To the best of my knowledge, this was the first official training for Department of Defense mental health providers addressing the affirmative treatment of transgender Service Members.
Supervisor: Dr. Charles Thomas, Ph.D.

Cedar Lake Lodge

2015

Psychological Assessment Practicum Student

Administered, scored, and interpreted psychological assessments for residents of a non-profit religiously-affiliated residential treatment facility for persons with intellectual and developmental disabilities. Selected measures for the evaluation of residents' intellectual and adaptive functioning. Completed integrated reports for eight residents. Assessment reports met requirements for state mandated annual review of residents' diagnosis, adaptive functioning, and ability to complete activities of daily living.
Supervisor: Dr. Jeffery Hicks, Ph.D.

Survivors of Torture Recovery Center

2015

Psychology Practicum Student

Provided individual and group therapy for refugees and asylees who survived torture and immigrated to the United States. Conducted family and community level interventions and worked with clients in their homes and in community settings. Administered cognitive assessments and wrote reports to evaluate clients' ability to complete citizenship application and examination process. Gained experience conducting psychotherapy with translators both in the room and over the phone. Collaborated with community brokers to provide culturally informed care. Completed didactic trainings and gained experience in: intellectual assessment, mindfulness interventions for trauma, trauma-informed care, and culturally informed care with Nepali-Bhutanese, Iraqi, Afghan, Cuban, Congolese, and Somali refugees and their families.
Supervisor: Dr. John Shealy, Psy.D.

Communicare Services, Inc.

2013- 2014

Psychology Practicum Student

Provided individual and group therapy in a rural community mental health setting in Western Kentucky. Gained experience treating a variety of presenting problems, including: crisis intervention, serious mental illness, and gender dysphoria.
Supervisor: Dr. Jillian Carden, Ph.D.

Maryhurst

2010- 2012

Youth Counselor

Worked as a direct care provider at a residential treatment facility for at-risk teen girls with intellectual or developmental disabilities. Submitted behavioral observation notes to treatment team and provided daily supervision and care.

Advocated for gender inclusive dress code policies for staff members. This policy was successfully changed in 2012. Completed certification in *SAFE, Crisis Prevention Intervention* and *Risking Connections* crisis prevention and management.

University of Louisville, LGBT Center 2011- 2012
Social Work Graduate Intern

Completed graduate-level social work practicum placement providing advocacy, training, and support for LGBT students. Facilitated Transformations (a support group for transgender students) and T2: Gender Activists (transgender education, awareness, and activism group). Represented the LGBT Center in educational outreach, trained students for speak-out panel participation, mentored and developed student leaders, engaged in community organizing, and compiled resources for LGBT students.

Eastern State Psychiatric Hospital 2009-2010
Mental Health Associate

Provided direct care for residents with serious mental illness (SMI) diagnoses at an in-patient psychiatric hospital setting. Completed certification in Crisis Prevention Intervention (CPI).

RESEARCH EXPERIENCE

Transgender Military Service Study 2016-Present
Doctoral Dissertation

Designed and launched an independent study for doctoral dissertation. Gained experience with qualitative research design using Interpretative Phenomenological Analysis. Study follows the experiences of 40 actively serving transgender military Service Members from 2013-2017.

Dissertation Chair: Dr. Laurie McCubbin, Ph.D. in Counseling Psychology

United States Transgender Discrimination Study 2014-2015
National Center for Transgender Equality

Provided recommendations and feedback on items designed to assess experiences of discrimination among transgender Service Members and Veterans for the largest national dataset on the experiences of transgender persons ($N = 27,573$).

Transgender Military Service Initiative 2013-2016
The Palm Center for Public Policy Research

Selected as a research fellow for a national research institute investigating gender and sexuality in the armed services. The Palm Center received a 1.3-million-dollar grant from the Tawani Foundation to study the policy and health care implications of integrating out transgender persons into the U.S. military. Assisted primary investigators for the initiative and conducted my own independent research in conjunction with doctoral degree program.

Director: Aaron Belkin, Ph.D. in Political Science

Transgender Military Service Multiple-Case Analysis 2012-2016

Second Year Research Project

Designed and executed study to meet requirements for second year research project. Designed Grounded Theory and Multiple-Case Analysis protocols, prepared and submitted all IRB materials and subsequent amendments. Applied for and was awarded several grants to support recruitment and data analysis. As a result, project exceeded expected recruitment goals of 10-12 participants to achieve a total sample of 40 in-depth interviews of actively serving transgender military personnel.

Research Supervisor: Dr. Stephanie Budge, Ph.D. in Counseling Psychology

Transgender Military Discrimination Study 2014-2015

Assisted in adapting validated measures of microaggression, command climate, and sexual harassment used by the Defense Equal Opportunity Management Institute for use with the transgender population. Provided feedback regarding transgender affirmative demographic items for study design.

Primary Investigator: Dr. Bonnie Moradi, Ph. D.

Trauma-Informed Group for Bhutanese Survivors of Torture 2015

Survivors of Torture Recovery Center

Administered psychometric measures, screened participants, and co-facilitated group therapy intervention.

Primary Investigator: Dr. Susan Rhema, Ph.D. in Social Work

Leadership & Frontline Culture Change in ‘Undercover Boss’ 2015

Department of Educational Leadership, Evaluation, and Organizational Development

Completed transcription, phenomenological coding of videos, consensus coding, and data analysis.

Primary Investigator: Dr. Meera Alagaraja, Ph.D.

Interpersonal Psychotherapy Study 2014

Department of Educational and Counseling Psychology

Coded psychotherapy videos and transcripts for adherence to theoretical orientation.

Primary Investigator: Dr. Jesse Owen, Ph.D.

Transgender Youth and Families Study 2013- 2014

*T*STAR Lab*

Work completed as part of graduate research assistantship with Dr. Stephanie Budge. Provided administrative and organizational support for T*STAR (Trans* and Sexuality: Teaching, Advocacy, and Research) Lab. Managed undergraduate research internship program. Assisted with data collection, qualitative coding, and manuscript writing. Conducted in-depth interviews, qualitative coding, and transcription.

Primary Investigator: Dr. Stephanie Budge, Ph.D.

Gender Identity and Privilege Study 2012- 2014

*T*STAR Lab*

Assisted with research design and literature review.

Primary Investigator: Dr. Stephanie Budge, Ph.D.

Transgender Emotions and Positivity Study 2012- 2014

*T*STAR Lab*

Conducted qualitative semi-structured in-depth interviews, transcribed interviews, coded interviews consistent with grounded theory design.

Primary Investigator: Dr. Stephanie Budge, Ph.D.

Genderqueer Identity Study 2012-2014

*T*STAR Lab*

Conducted qualitative semi-structured in-depth interviews, transcribed interviews, coded interviews consistent with grounded theory design.

Primary Investigator: Dr. Stephanie Budge, Ph.D.

Claims, Evidence, Reasoning Study 2012- 2013

Department of Educational Leadership, Evaluation, and Organizational Development

Worked as a graduate research assistant for the University of Louisville's Department of Educational Leadership, Evaluation, and Organizational Development. Assisted in managing the University of Louisville Signature Partnership with Portland Elementary School. Contributed to research on inquiry based pedagogy, lesson study, and Positive-Based Intervention Systems. Administered needs assessment, conducted in-depth interviews, compiled literature, transcribed, and assisted in the implementation of study interventions.

Primary Investigators: Dr. Ingrid Wieland, Ph.D. and Dr. Justin Cooper, Ph.D.

Lesson Study in Elementary Science Education Project 2012- 2013

Completed literature search and annotated bibliography.

Primary Investigator: Dr. Ingrid Wieland, Ph.D.

TEACHING EXPERIENCE

238th Regional Training Institute-Kentucky Army National Guard 2012-2016

Platoon Trainer/Officer Candidates School Instructor

Served as Lead TAC (Teach, Assess, Counsel) Officer for class 58-16 of the 238th Regional Training Institute's Officer Candidates School. Completed training as a Certified Army Instructor. Instructed future Army officers in a variety of classroom and field requirements, including: military leadership, squad and platoon level tactics, land navigation, military law, military ethics, etc. Awarded the TAC Officer of the Year award in 2014 based on nominations from trainees, subordinates, and peers. Assisted in preparing the OCS program and Kentucky

Military Academy for accreditation review and inspection. The OCS program successfully received accreditation without reservations, contributing to the 238th Regional Training Institute's qualification as an Army Institute of Excellence. The 238th RTI was the only reserve component training institute to qualify for this honor.

Department of Educational and Counseling Psychology-University of Louisville

2013-2015

Teaching Assistant

Served as co-lecturer and teaching assistant for the following courses:

- ECPY 629: Intellectual Assessment
- ECPY 692: Differential Diagnosis
- ECPY 671: Advanced Vocational Psychology

Department of Educational Leadership, Evaluation, and Organizational Development-University of Louisville

2013-2014

Teaching Assistant

Served as co-lecturer and teaching assistant for the following courses:

- ELFH 620: Advanced Research Methods & Design
- ELFH 323: Theories of Education

138th Field Artillery Brigade-Kentucky Army National Guard

2012

Pre-deployment Instructor:

Served as primary instructor in land navigation for mobilizing Soldiers in the 2/138th Field Artillery Battalion. Students accomplished a 98% first attempt pass rate for both the written examination and field problem exercise with classroom sizes of 100-130 students.

Equal Opportunity Leader's Course-Kentucky Army National Guard

2011

Instructor

Instructed and guest lectured for a course designed to prepare military personnel as initial responders to reports of discrimination and sexual harassment.

Women and Gender Studies Program-Eastern Kentucky University

2008- 2009

Teaching Assistant

Served as primary lecturer for two sections of WGS 201: Introduction to Women's Studies.

OUTREACH, ADVOCACY, AND CONSULTATION EXPERIENCE

SPART*A: An LGBT Military Organization

2015-Present

Director of Research and Wellness Outreach; Executive Board Member

SPART*A is a national association of actively serving transgender U.S. Soldiers, Sailors, Airmen, and Marines. Our organization represents the largest community (over 750 members) of actively serving transgender military Service Members. We also provide mentorship and support for military parents of transgender

children, transgender spouses of Service Members, and family members of actively serving transgender Service Members. As a member of the board of directors, I collaborate with regional directors to support our members, provide outreach at community events, engage in fundraising activities, craft policy recommendations, and engage in direct political advocacy. One of the projects I took point on was outreach to the Trevor Project to provide trans-affirmative mental health crisis services for our members. During this time, I also served as a content advisor for “Transgender at War and in Love,” an Emmy-nominated opinion documentary produced by the *New York Times* and subsequent full-length documentary *TransMilitary*. In November 2015, our organization won the Mission Complete Veterans Award for our advocacy work in support of open transgender military service. Of our organization’s many accomplishments, I am most proud of our efforts in mentorship and leadership development. Members went on to serve in regional director and chapter leader positions within our organization. Several are now leading support groups for LGBT+ Service Members on their military installation/ship, at their local Veterans Affairs Medical Center, or at military service academies. Others have earned Point Foundation fellowships, worked full-time as LGBT advocates, and completed prestigious internships with other LGBT advocacy organizations, such as: Lambda Legal, the National Center for Transgender Equality (NCTE), Gay and Lesbian Alliance Against Defamation (GLAAD), TransMilitary, the Transgender American Veterans Association (TAVA), and the Transgender Law Center.

Louisville LGBT Youth Group (LYG) 2015-2016
Youth Mentor

Mentored LGBT youth ages 13-20 in Louisville, Kentucky. Supported full-time staff by chaperoning weekly meetings and events, assisted with fundraising efforts, and provided group leadership development for youth in the Louisville-Metro area and surrounding counties.

Rowland Hall Private Academy 2015
Consultation

Provided resources and consultation to Rowland Hall Private Academy efforts to create a more welcoming campus climate for transgender students at. Key policy challenges included: facility use, uniforms, curriculum, staff and faculty training, community and parent engagement, and counseling services.

SPART*A: An LGBT Military Organization 2013-2015
Regional Director

Appointed as regional director for SPART*A Trans, a covert group of actively serving transgender military personnel. Developed an organizational structure which met our community’s unique needs and mentored transgender members as future organization leaders. Established committees for membership, policy and legal issues, information technology, transitioning Veterans, and Wellness. Worked with committee chairs to establish a mentorship program and conduct training for new mentors. During my leadership, our community grew from 82 to

over 350 members. Expanded organization by creating new communities for family members of transgender Service Members and transgender Veterans. Assigned outreach coordinators in areas with high concentrations of membership to facilitate in-person support and community outreach. Developed a medical and mental health referral network so Service Members could locate gender affirming treatment. Data collected for this project were then used in collaboration with R.A.D. Remedy, making resources publicly available to transgender persons outside of our organization. Established and raised money for an emergency fund to provide immediate assistance for members facing homelessness or financial hardship following involuntary discharge. Policy committee established election procedures, issued technical guidance, and facilitated legal referrals for members under investigation or experiencing harassment due to their gender identity.

Outserve/ Servicemembers Legal Defense Network

2012- 2013

Chapter Leader

Elected chapter leader for the transgender chapter of Outserve/SLDN. During this period, the organization underwent major changes in leadership and mission following the repeal of Don't Ask, Don't Tell. Advocated that the voices of transgender members should be included when planning national policy agenda moving forward. As it became apparent that the needs of transgender members were not prioritized in these changes, our members made the very difficult decision to form a new organization. SPART*A is now the largest national advocacy organization for transgender military Service Members and is the only national non-profit led exclusively by transgender Service Members and Veterans.

EKU Women & Gender Studies Program

2008-2009

Student Organizer

Organized events, liaised with leadership of student groups, managed project budgets, conducted fundraising, planned lecture events, and coordinated volunteers. Served as student organizer for the ECU production of *The Vagina Monologues*. This production was designed to raise community awareness about issues impacting women locally and abroad. Successful execution required developing relationships with community donors, university administrators, student leaders, and cast members. Managed project budget, logistics, timeline, and over 50 volunteers from the campus and local communities. Raised over \$6,000 on behalf of the Bluegrass Rape Crisis Center.

Wilderness Road Girl Scouts (Volunteer)

1998–2005

Troop 596-603

Received excellent training in teamwork and leadership as a member of the Wilderness Road Girl Scouts. Achieved Silver Award, requiring completion of independent project including 100 hours of community service. Volunteered with Camp Shawano as Program Aid, Unit Leader, and eventually as Assistant Director at the age of 19. Developed training materials for camp staff, conducted

training, planned camp activities, and managed staff and volunteers while camp was in session.

Select Media Engagements

National Media:

Vocativ March 2014
<http://www.vocativ.com/culture/lgbt/next-dont-ask-dont-tell/index.html>

Last Week Tonight with John Oliver June 2015
<https://www.youtube.com/watch?v=hmoAX9f6MOc>

Monitor on Psychology November 2016
<http://www.apa.org/monitor/2016/11/people-eleazer.aspx>

Vanity Fair August 2017
<https://www.vanityfair.com/news/2017/08/transgender-troops-react-to-trumps-ban>

NPR Morning Edition August 2017
<http://wunc.org/post/legal-questions-over-trumps-ban-transgender-people-military#stream/0>
<http://kuow.org/post/legal-questions-over-trumps-ban-transgender-people-military>

People Magazine September 2017
<http://people.com/bodies/transgender-military-members-proposed-ban/national-guard-cpt-jacob-eleazer>

Mother Jones November 2017
<http://www.motherjones.com/politics/2017/11/with-trumps-ban-looming-transgender-service-members-talk-about-what-the-military-has-meant-to-them/>

Local Media:

WEKU Eastern Standard August 2017
<http://weku.fm/post/kentuckian-facing-uncertain-future-national-guard-following-trump-transgender-tweets>

WFPL Local/Regional News August 2017
<http://wfpl.org/transgender-kentuckian-trumps-military-ban-kills-dream/>

WLEX 18 Evening News August 2017
<http://www.lex18.com/story/35981712/local-transgender-soldier-reacts-to-presidents-announcement>

MILITARY WORK EXPERIENCE

198th Military Police Battalion

2016-2018

Battalion S1; Rank: Captain

Assumed responsibility for the timely and accurate execution of Army personnel policy as the senior human resources and personnel services staff officer for the Soldiers of the 198th Military Police Battalion. The 198th MPBN is the largest battalion in the Kentucky Army National Guard and comprised of over 1,000 Soldiers, officers, and federal/state contractors. Provided technical guidance on human resources, medical readiness, and personnel services delivery to the battalion commander. Developed recommendations on command policy and key decisions impacting personnel. Wrote and published standard operating procedures on human resources management. Disseminated command policy to subordinate company commanders and administrative staff. Trained, supervised, and evaluated all staff assigned to the battalion S-1 section. Responsible for administrative, personnel, and medical readiness in support of several federal and state active duty missions. Battalion and Company elements were deployed for the following: disaster relief in the U.S. Virgin Islands, Houston, TX, and Puerto Rico. Subordinate units also provided police force augmentation for the Kentucky Derby, Thunder Over Louisville, and community protection during a White-Supremacist rally in rural Kentucky. During the battalion's most recent Command Readiness Examination (CRE), personnel readiness for all of our units were ranked in the top 10 nationally as compared to similar units. Personnel readiness for three of our units was ranked first nationally as compared to similar units.

Headquarters 238th Training Regiment

2016-2018

Assistant Regimental S1; Rank: Captain

Served as assistant human resources and personnel services officer for the 238th Regiment. Provided technical guidance on human resources and personnel services delivery to the regimental S1 and developed recommendations on command policy and key decisions impacting personnel. Wrote and published standard operating procedures on human resources management. Disseminated command policy to subordinate battalion commanders and administrative staff. Provided training and supervision of staff assigned to the regimental S-1 office. Prepared the Kentucky Military Academy/238th Regional Training Institute for accreditation review and inspection. The 238th Training Institute successfully met qualification standards as an Army Institute of Excellence.

Officer Candidates School, 238th Training Regiment

2012-2015

Platoon Trainer/Lead TAC (Teach, Assess, Counsel) Officer; Rank: First Lieutenant-Captain

Responsible for training future officers in the United States Army. Led a team of highly qualified cadre (instructors) to create a controlled and professional high-stress training environment. Developed program training schedule and

collaborated with staff to coordinate logistics and personnel administrative tasks. Responsible for the safety and performance of instructors, support staff, and officer candidates. Trained subordinate officers on program standards and requirements. Provided direct instruction, mentorship, and supervision for officer candidates. Conducted daily evaluations of student leadership and course performance. Ensured that all personnel and activities adhered to Army regulations and course standards established by accrediting organizations (TRADOC, OCS Command, and 238th Regional Training Institute).

103rd Brigade Support Battalion

2009-2012

Battalion S1; Rank: Second Lieutenant-First Lieutenant

Assumed responsibility for the timely and accurate execution of Army personnel policy as the senior human resources and personnel services staff officer for the Soldiers of the 103rd Brigade Support Battalion under the 138th Fires Brigade. Battalion Command Readiness Examination (CRE) resulted in 100% “green” rating for all personnel readiness and human resources criteria.

617th Military Police Company

2006-2007

31B, Military Police; Rank: Private First Class

Enlisted Soldier with the 617th Military Police Company.

Additional Duty Assignments

Suicide Prevention & Intervention Officer (ASIST Certified)

OCS Program S1 (administrative officer)

OCS Program S3 (operations and training officer)

Battalion Safety Officer

Rape and Sexual Assault Unit Victim Advocate

Equal Opportunity Leader

PUBLICATIONS

Eleazer, J. R. (2016). Transgender Service Members and Veterans. In N. Ainspan & C. Bryan (Eds), *The Oxford Handbook of Psycho-social Interventions for Veterans*. London: Oxford University Press.

MANUSCRIPTS IN PROGRESS

Eleazer, J. R., Tannehill, B., & McCubbin, L., “*We’ve Been Here All Along:*” *The Standpoint and Collective Resilience of Transgender Service Members*.

McCann, R. & **Eleazer, J. R.** *Disparities in Access to Telehealth Services for Transgender Veterans*.

Eleazer, J. R., Marchant, L., & McCubbin, L. *Transgender military service-members’ experiences of identity and vocational integration*.

Eleazer, J. R., Kizewski, A., & Lesh, M. *“I’m afraid of my therapist”: Military policy and access-to-care for transgender U.S. Service Members.*

ACKNOWLEDGEMENTS

Dawson, F. (2015, June 4). Transgender at war and in love. *New York Times*. Retrieved from <http://www.nytimes.com/video/opinion/100000003720527/transgender-at-war-and-in-love.html>

*Emmy-nominated in 2016

Tannehill, B., Fulton, S., & Robinson, A. D. (2015). *SPART*A Guidelines for Implementation of Transgender Military Service*. Washington, DC: SPART*A.

Elders, M. J., Brown, G. R., Coleman, E., Kolditz, T. A., & Steinman, A. M. (2014). Medical aspects of transgender military service. *Armed Forces and Society*, 1–22.

EDITORIAL EXPERIENCE

Director of Research and Wellness Outreach for SPART*A	2018-Present
<i>Everything you Wanted to Know about Trans* but were too Afraid to Ask</i>	2017-2018
APAGS Leadership Institute Applications	2016
APAGS Committee on Sexual Orientation and Gender Diversity Education and Awareness Project Grant	2015
APA Division 44 Malyon-Smith Research Award	2013-2014
APA Division 44 Bisexual Foundation Research Award	2013-2014
Student Review Committee for <i>Psychology of Women Quarterly</i>	2013-2015

GRANTS AND FUNDRAISING

Rally Point Conference Funding Project-\$36,250.00 (awarded) 2013
Co-authored funding proposal for *Rally Point*, the first convention of actively serving transgender US military personnel. Funds obtained from multiple foundations, advocacy organizations, and individual private donors.

Palm Center Research Grant-\$500 (awarded) 2013
Transgender Military Service Study

EKU Vagina Monologues-\$6,000 (raised) 2009
Served as the project manager for the 2009 Vagina Monologues performance at Eastern Kentucky University. Performance raised public awareness about important issues impacting women in our communities and across the world. Proceeds donated to the Bluegrass Rape Crisis Center to support a 24-hour crisis hotline providing emergency support services to survivors of sexual assault.

WORKSHOPS, TRAININGS AND SPEAKING ENGAGEMENTS

Eleazer, J. R. (2018). Transgender military service. Keynote lecture provided for the University of Madison-Wisconsin QLaw Annual Gala, Madison, WI

Eleazer, J. R. (2017). Trans[in]formation: Transforming military policy on transgender military service. Invited lecture provided for the Eastern Kentucky University Lecture Series, Richmond, KY

Eleazer, J. R. (2017). Psychological practice with transgender Service Members. Training provided for the University of Purdue Department of Educational and Counseling Psychology, LaFayette, IN

Eleazer, J. R., Roane, S., & Barr, S.M. (2016). Transgender affirmative care in the Military Healthcare System. Workshop provided for the Ireland Army Hospital Department of Behavioral Health, Fort Knox, KY

Eleazer, J. R. & Cornell, D. (2016). Caring for LGBT Veterans. Training provided for the Robley V. Rex Veterans Affairs Medical Center, Louisville, KY

Eleazer, J. R. (2015). Finding your voice: LGBT advocacy and how to change your community and the world. Lecture presented at Rowland Hall High School, Salt Lake City, UT

Eleazer, J. R. (2015). Transgender Service Members and VA healthcare. Keynote presentation for the Louisville Veterans Affairs Pride Celebration, Louisville, KY

Eleazer, J. R. & Thai, J. (2015). Gender identity in mental health. Lecture presented at University of Louisville Women & Gender Studies Department, Louisville, KY

Eleazer, J. R. (2014). Role of the therapist in transgender medical care. Workshop presented at Communicare Services, Inc., Elizabethtown, KY

Budge, S.L., **Eleazer, J. R.,** Jones, A.J., & Rossman, K. (2014). Working with LGBTQ patients. Workshop presented at University of Louisville Campus Health Services, Louisville, KY

Weiland, I., & **Eleazer, J. R.** (2014). Claims, evidence, reasoning. Workshop presented at Portland Elementary School, Louisville, KY

Eleazer, J. R., Thai, J., & Keller, B. (2013). Trans* 101. Workshop presented at the University of Louisville College of Education and Human Development, Louisville, KY

Eleazer, J. R., Thai, J., & Keller, B. (2012). Trans* 101. Workshop presented at the University of Louisville College of Education and Human Development, Louisville, KY

CONFERENCE PRESENTATIONS AND SYMPOSIA

Eleazer, J. R. & Neira, P. (2018). Transgender service: Implications for ethics and law in psychology In A. Getsinger (Chair), *Legal Issues for Transgender Military Service*. Panel presented at the Wisconsin Journal of Law, Gender and Society's Annual Symposium, Madison, WI

Tannehill, B., Fitzgerald, D., Ford, Z., Goldberg, N., & **Eleazer, J. R.** (2017). How research is (mis)used to harm transgender people. Presented at Creating Change, Philadelphia, PA

Eleazer, J. R. (2016). Integrating transgender military Service Members and the Military Healthcare System, In K. Ervin (Chair), *Diversity in the Military*. Panel presented at the Annual Convention of the American Psychological Association, Denver, CO

Tannehill, B. & **Eleazer, J. R.** (2016). Busting trans myths in the media. Presented at the Philadelphia Trans-Health Conference, Philadelphia, PA

Eleazer, J.R., Robinson, A.D., Tannehill, B., Fulton, S., &. (2016). Ending the ban on transgender military service. Presented at Creating Change, Chicago, IL

Belkin, A, **Eleazer, J. R.**, Beck, K., Neira, P., & Fox, S. (2014). Next steps for America: Applying allied lessons learned in the U.S.. Presented at Perspectives of Transgender Military Service from Around the Globe. Panel presented at the International Conference on Transgender Military Service, Washington, DC

Eleazer, J. R., Nguyen, Y., & Budge, S.L. (2014). "I'm afraid of my therapist": Military policy and access-to-care for transgender U.S. Service Members In **J. R. Eleazer & C. Keo-Meier** (Chairs), *Mental Health Policy and Access-to-Care for Transgender Service Members and Veterans*. Symposium presented at the Annual Convention of the American Psychological Association, Washington, DC

Eleazer, J. R., Nguyen, Y., & Budge, S.L. (2014). "[Therapy] would mean the end of my life:" Barriers to care for trans* U.S. military personnel. Presented at the Philadelphia Trans-Health Conference, Philadelphia, PA

Tannehill, B., **Eleazer, J. R.**, & Fulton, S. (2014). Building trans inclusive organizations. Presented at Transgender Leadership Summit, Northridge, CA

Tannehill, B., Fulton, S., & **Eleazer, J. R.** (2014). Trans inclusion: Bridging the gap between LGB and T in advocacy. Presented at Creating Change, Houston, TX

Barr, S., Nguyen, Y., **Eleazer, J. R.**, & Budge, S.L. (2014). "I just want to deal with it on my own:" Learning helpful coping strategies related to LGBTQ stressors. Workshop provided at Rally Point: The First Convention of Actively Serving Transgender U.S. Military Personnel, Houston, TX

Eleazer, J. R. (2013). I will never leave a fallen comrade: Ethical considerations for medical and mental health professionals working with trans* U.S. Service Members. Workshop provided at the Philadelphia Transgender Health Conference, Philadelphia, PA

Rossmann, K., **Eleazer, J. R.**, & Budge, S.L. (2013). Trans* persons' perceptions of privilege. Presented at the Philadelphia Trans-Health Conference, Philadelphia, PA

Eleazer, J. R., Lingerfeld, D., & Grant, R. (2013). Queer Service Members speak out. Panel presented at Come Together Kentucky, Louisville, KY

Eleazer, J. R. (2013). Intimate partner violence in the queer community. Workshop provided at Come Together Kentucky, Louisville, KY

Eleazer, J. R. (2011). Pathologizing gender identity: Institutionalizing and enforcing the gender binary in health care. Presented at Healthy Women, Healthy World: A Conference Designed by Women for Women, Louisville, KY

Eleazer, J. R. (2011). Masculinity, Trauma, and the Psycho-Social Impact of War-fighting. Presented at International Interdisciplinary Social Sciences Conference, New Orleans, LA

Eleazer, J. R. (2009). Consequences of Protecting *The Borderlands*. Female Masculinity at Stake in the Butch-FTM Conflict. Presented at Eastern Kentucky University Honors Thesis Presentation, Richmond, KY

Eleazer, J. R. (2009). Apologetic saviors: The Women's Auxiliary Army Corps' true legacy of sacrifice. Presented at Eastern Kentucky University Herstory Conference, Richmond, KY

POSTER PRESENTATIONS

Eleazer, J. R. & Budge, S. L. (2013). "It would be better for them to have a dead hero for a father than a freak:" Suicidality and trans* military service. Poster presented at the Kentucky Psychological Association Spring Academic Conference, Louisville, KY

PROFESSIONAL SERVICE AND AFFILIATIONS

American Psychological Association

Division 19: Society for Military Psychology
Division 44: Society for the Psychological Study of LGBT Issues
American Psychological Association of Graduate Students (APAGS)
Committee on Sexual Orientation and Gender Diversity (past)
Leadership Institute Development Committee (past)

SPART*A: An LGBT Military Organization

Director of Research and Wellness Outreach
Executive Board Member

World Professional Association for Transgender Health

Association of VA Psychologist Leaders

Founding Co-chair of the AVAPL LGBTQ Special Interest Group

National Women's Studies Association