Navigating Gendered Prisons: The Custodial Experiences of Transgender and Non-binary Individuals

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Abstract

There is a complex relationship between transgender and non-binary (trans+) individuals and the Criminal Justice System (CJS). Research notes how experiences of discrimination, social exclusion, and institutional biases impact interactions with legal systems. Research also highlights how binary, gendered structures within prisons create unique hardships for trans+ individuals serving custodial sentences.

Trans+ individuals report negative experiences of custody at a structural, interpersonal and intrapersonal level. This thesis aims to explore these experiences further. However, due to the paucity of research focusing on trans+ individuals in custody in England and Wales, this thesis begins with a systematic review of a broader pool of literature. It includes previous research which explores the experiences of trans+ individuals detained in countries with a comparable CJS to England and Wales. It also considers factors which may influence trans+ individuals experiences such as custodial settings, policies, and geographical locations. Seventeen studies were identified, the findings of which were stratified into three main themes and seven sub-themes. These pieces predominantly focus on trans women in male prisons, with limited applicability to all trans+ people, especially those in women's prisons. The systematic review identified several research gaps, shaping the empirical study.

To address the research gaps identified, the empirical study contained within this thesis explored the lived experiences of trans+ individuals within the women's prison estate in England and Wales. A qualitative methodology was used, and purposeful sampling identified seven trans+ participants from across four women's prisons. Using Interpretative Phenomenological Analysis (IPA), four Group Experiential Themes (GETs) and nine sub-themes emerged. These identified trans+ people in women's prisons often felt unsupported, with their needs inadequately addressed. Positive experiences were reported, however these connected to key staff members where participants felt listened to and respected. Overall, participants felt staff lacked understanding of TGD needs, impacting access to gender-affirming items and effective management of discrimination. Consequently, the study suggested the necessity of enhancing staff understanding and training, fostering interpersonal connections, promoting person-centred support, and reducing victimisation.

The findings from this thesis have led to recommendations shared with participants, senior management in the women's prison estate, and HMPPS stakeholders, aiming to improve policies and support implementation.

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Finally to my beautiful children and nibling, this is for you. Continue to be the amazing, kind and inquisitive people you are. Remember to always dream, and stand up for what matters. I will be here, cheering you on and standing beside you.

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Conference Proceedings

Evans, S., Jones, B., Lopresti, S., & McDermott, D. (April 2022). *Trans and gender diverse prisoners' experiences of custody*. Research Proposal presented at the Outside/rs Conference 2022 at the University of Brighton, England.

Evans, S., Jones, B., Lopresti, S., & McDermott, D. (June 2022). *Exploring the lived experiences of trans and gender diverse prisoners residing in the women's prison estate in England and Wales.* Poster presented at the Research and Knowledge Exchange Conference at the University of Suffolk, England.

Evans, S., Jones, B., Lopresti, S., & McDermott, D. (June 2024). *Exploring the lived experiences of trans and gender diverse prisoners residing in the women's prison*

estate in England and Wales. Pre-recorded presentation for the LGBTQ Health and Wellbeing partnership development event 2024, Nottingham University, England.

Evans, S., Jones, B., Kitson-Boyce, R., McDermott, D. (July 2024). *Exploring the lived experiences of trans and gender diverse prisoners residing in the women's prison estate in England and Wales.* Presentation at the Division of Forensic Psychology Annual Conference, Cardiff, Wales.

Evans, S., Jones, B., Kitson-Boyce, R., McDermott, D. (October 2024). *Exploring the lived experiences of trans and gender diverse prisoners residing in the women's prison estate in England and Wales.* Presentation at the LGBTQ+ Lifecourse Webinar Series.

Evans, S., Jones, B., Kitson-Boyce, R., McDermott, D. (February 2025). *Exploring the lived experiences of trans and gender diverse prisoners residing in the women's prison estate in England and Wales.* Presentation at Researching the Rainbow, Student Pride 2025.

Evans, S., Jones, B., Kitson-Boyce, R., McDermott, D. (November 2025). *Exploring the lived experiences of trans+ people residing in the women's prison estate in England and Wales.* Poster presented at the Violence Reduction Academy Symposium, London.

Publications

Charlton, K., & Evans, S. (2023). An essay in conversation: Queer and queering the prison service. *Excursion Journal, 13*(1), 73-87. https://doi.org/10.20919/exs.13.2023.379

Evans, S.M., Jones, B.A. & McDermott, D.T. (2024) Trans and gender diverse offenders' experiences of custody: A systematic review of empirical evidence. *The Howard Journal of Crime and Justice,* 1-29. https://doi.org/10.1111/hojo.12567

Chapter 1: Thesis Introduction

1.1 Thesis Structure and Overview

Of the 87,869 people incarcerated in prisons in England and Wales in March 2024, at least 295 identified as transgender and non-binary (trans+). Of these only 10 were known to have a Gender Recognition Certificate (GRC; HMPPS, 2024a). Therefore, the majority of trans+ individuals reside within an establishment which does not align with their gender identity. These statistics are likely to be an underestimation given many people choose to conceal their affirmed gender identity, potentially due to fears of experiencing transnegativity (negative attitudes, beliefs, and behaviours directed toward trans+ individuals) (Hebert, 2020; White Hughto et al., 2018).

This thesis explores the experiences of trans+ individuals in custody. The focus emerged from my experiences as a practitioner forensic psychologist, where I observed limited understanding of the unique needs and experiences of trans+ individuals in custody. As a cisgender researcher, my approach is inquisitive and open, seeking insights through academic research and broader literature, including personal narratives, podcasts, and participation in relevant webinars and conferences. I approach this thesis with the intention to enhance practitioners and academics understanding of trans+ individuals' experiences, within custody and broader society, and how these experiences may contribute to offending pathways. By adding to the research already conducted, I aim to provide an additional platform for the voices of trans+ individuals in prison to be heard.

The thesis will seek to address the following aims:

1. To explore the experiences of trans+ individuals in custody
2. To explore the impact of transgender policies on trans+ individuals' experiences in custody
3. To make recommendations for prison staff around effectively supporting and managing trans+ individuals

This thesis is structured across seven chapters. Chapter 1 introduces key terminology and examines how the evolution of language has influenced trans+ individuals' experiences. This chapter sets the foundation for understanding how

structural inequalities based on cisnormative (i.e., assuming all people using the service are cisgender; Vincent, 2020) and heteronormative (i.e., assuming all people using the service are heterosexual; Vincent, 2020) assumptions can impact access to services and processes relevant to trans+ individual's needs, particularly in relation to legal and medical transitioning.

Chapter 2 builds on this foundation by providing a comprehensive exploration of the lived experiences of trans+ individuals, considering the social, psychological, and institutional challenges they face across a range of community settings. Drawing on theoretical frameworks like the Gender Minority Stress Model (GMSM; Hendricks and Testa, 2012) and Rejection Sensitivity Model (RSM; Downey & Feldman, 1996), the chapter examines how both external pressures, such as discrimination and structural inequalities, and internal struggles, including internalised stigma, can create significant physical and mental health burdens for trans+ individuals.

Chapter 3 aims to explore the complex relationship between trans+ individuals and the Criminal Justice System (CJS), highlighting how experiences of discrimination, social exclusion, and institutional biases can impact trans+ people's interactions with legal systems. It provides insights into the experiences of trans+ individuals within prison settings, where the rigidity of binary gendered structures creates unique barriers. It also considers how prison policies and practices, often designed around cisnormative assumptions, fail to accommodate trans+ individuals' needs. This lack of consideration of needs can lead to adverse physical and psychological outcomes, such as barriers to appropriate healthcare, denial of gender-affirming items, heightened risks of abuse, and extreme isolation.

Chapter 4 reports a systematic review of trans+ individuals' experiences of custody. It provides an understanding of the experiences of trans+ individuals being detained in countries with a comparable CJS to England and Wales. Seventeen studies were included from across Australia, Canada, Scotland, the USA, and one study from England and Wales. Recommendations are suggested for custodial settings to create policies which meet the needs of trans+ people, reducing the requirement for them to implement survival strategies and enable more informed decision-making regarding housing. Through the systematic review it was identified further research is needed into the lived experiences of trans+ individuals within England and Wales.

In response to these recommendations, chapter 5 outlines an empirical study which explores the lived experiences of trans+ individuals within the women's prison estate in England and Wales. A qualitative methodology with purposeful sampling identified seven trans+ participants from four women's prisons. Interviews explored their experiences in custody, awareness of gender identity by both participants and the prison, interactions with peers and staff, plans including release preparation, and suggestions for improving custodial experiences for trans+ individuals. Using Interpersonal Phenomenological Analysis (IPA), four Group Experiential Themes (GETs) and nine sub-themes emerged. Key findings included trans+ individuals in custody often felt unsupported, with their needs inadequately addressed. The positive experiences reported were connected to key staff members where trans+ individuals felt listened to and respected. However, participants felt most staff lacked understanding of trans+ needs, impacting access to gender-affirming items and the handling of discrimination and abuse. Consequently, the study suggested the necessity of enhancing staff understanding and training, fostering interpersonal connections, promoting person-centred support, and reducing victimisation. Further suggestions are put forward for amendments within the prison estate to allow for increased support and safety for trans+ prisoners.

The findings of the two studies are brought together in chapter 6, where findings are discussed against the aims of the thesis. This thesis underscores the urgent need for reforms to better support trans+ individuals both within and outside of custodial settings, advocating for inclusive policies and interventions that respect their rights and dignity. Recommendations for policy change and future research are explored. Evidence is included of these being shared with key stakeholders, practitioners, participants and people with lived experience.

The final chapter provides a summary of my reflective observations throughout the period of study.

1.2 Sex and Gender

Sex refers to a collection of different biological factors including genitalia, gonads, internal reproductive structures, hormone ranges and secondary sexual characteristics related to puberty (Vincent, 2018). An individual's sex is assigned at

birth, identifying a "person's status as male, female, or intersex based on physical characteristics. Sex is usually assigned at birth based on appearance of the external genitalia" (Coleman et al., 2022, p.252). However other dimensions of someone's sex may contradict this initial assignment, (i.e., internal reproductive structures or chromosomes; Anderson, 2025). It is argued by Butler (2025) that sex assignment at birth is not an announcement of the sex a child is perceived to be but is actually a communication of the desires and expectations placed upon these anatomical facts of what that should mean in terms of how an individual will present and behave (i.e., a social construction of gender). Gender identity however should refer to "a person's deeply felt, internal, intrinsic sense of their own gender" (Coleman et al., 2022, p.252).

A cisgender individual is someone who's gender identity aligns with the sex they were assigned at birth. For individuals whose gender identity is different to the expectations associated with the sex they were assigned at birth, the term trans and non-binary (trans+) is used (Anderson, 2025; Lopez & Scaramanga, 2024). According to the England and Wales Census, in March 2021 there were 262,000 people who identified with a gender different from their sex registered at birth (Office for National Statistics, 2023). It is important to note however there is concern regarding the accuracy of this data, with ONS acknowledging there are levels of uncertainly in these estimates. Potential reasons for this include respondent errors and "some respondents may not have interpreted the question as intended, notably those with lower levels of English language proficiency" (Office for National Statistics, 2024).

For individuals whose gender identity differs from their sex as assigned at birth, there is a variety of terminology to describe their "intrinsic sense of their own gender" (Coleman et al., 2022, p.252). Being transgender refers to someone who does not conform to society's view of being male or female; a trans woman is a person who was assigned male at birth (AMAB) but has a female gender identity and a trans man is a person who was assigned female at birth (AFAB) but has a male gender identity. People who identify as non-binary have gender identities outside the gender binary and "may identify as partially a man and partially a woman or identify as sometimes a man and sometimes a woman, or identify as a gender other than a man or a woman, or as not having a gender at all" (Coleman et al., 2022. p.252). Other terms used include genderfluid (i.e., moving between genders), genderqueer (i.e., identifying as outside of

the gender binary; Coleman et al., 2022; Serano, 2016) or bigender (i.e., having a mixture of femininity and masculinity; Serano, 2016).

Throughout this thesis the umbrella terminology transgender and non-binary, abbreviated to trans+ hereafter, will be used to describe people whose gender identity and/or expression differ from the gender socially attributed to their sex as assigned at birth (Anderson, 2025; Coleman et al., 2022; Lopez & Scaramanga, 2024). Previously trans and gender diverse (TGD) was used as an umbrella term (Coleman et al., 2022) and was included within the publication of the systematic review (see Appendix K). It was considered that this broad, more inclusive, language reflected variety in gender (Bouman et al., 2017b). However, gender diversity is considered relevant to both transgender and cisgender individuals regarding expression of gender identity, as it recognises there is space for flexibility, exploration, and potential rejection of stereotypical gendered behaviour (Vincent, 2018). Therefore, the more recent use of trans+ has evolved from TGD and this continued development of language towards terminology which promotes increased inclusivity is important to assist in moving away from the marginalisation of trans+ people (Jones et al., 2024). This has been demonstrated through evolving from the use of TGD within the published systematic review (see Appendix K) to trans+ within the main body of this thesis.

This thesis may however also include some terms now considered outdated, in particular within the search terms used for the systematic review. This was to ensure as many relevant research examples were identified as possible. An example is 'gender variant', which is considered to have negative connotations through being pathologising and describing people as not conforming to the norm; suggesting nonconforming people are abnormal (Coleman et al., 2022).

Evolving terminology recognises departures from a binary gender, however this has reportedly raised concerns among healthcare providers about whether individuals can successfully transition to more diverse gender identities. This is due to healthcare in the 1960s-1990s focusing on attempting to alleviate symptoms of gender dysphoria (i.e., distress and discomfort which may be caused by the lack of alignment between someone's experienced and assigned gender; Beek et al., 2016; Butler, 2020), through encouraging individuals to align with a binary gender, either which aligned with their sex as assigned at birth or the opposite gender. Discouraging identification outside of the

gender binary, which caused barriers to accessing treatment, including hormones and surgery. Healthcare providers are seen as the gatekeeper of trans+ individuals accessing treatment and with them potentially endorsing, or being encouraged to endorse by their employers, the gender binary system, individuals identifying outside of the gender binary report experiencing difficulties accessing treatment (APA, 2022). For example, non-binary individuals have documented how they felt compelled to identify with a binary gender to gain access to treatment, to meet the requirements outlined by healthcare providers (Vincent, 2020). They also viewed clinicians as gatekeepers to them accessing gender-affirming care, rather than advocates (Collazo et al., 2013).

Terminology continues to be an area of discussion and development within the field of healthcare. Individuals who want to access gender affirming healthcare, which may include gender affirming hormones or surgery, need to engage with the medical model (Holland et al., 2024). It is argued that trans+ individuals are therefore pathologised, needing to navigate healthcare systems (Richards et al., 2015; Wesp et al., 2019). This is emphasised through professionals' use of the ICD and DSM classification systems for diagnosing mental disorders within the gatekeeping process towards accessing gender affirming healthcare.

The ICD-11 is a global health classification developed by the World Health Organisation (WHO) and it is intended to be used by healthcare providers worldwide (WHO, 2024). The DSM-5 is published by the American Psychiatric Society (APA) and although primarily used within the USA (APA, 2013) is also used in other countries with connections to USA medical research, including the UK (First et al., 2021). The most recent publications of these classification systems articulate that someone's identity should not be considered problematic, but consideration should instead be given to the level of distress they experience due to their gender identity (APA, 2013; WHO, 2024). However, variations in the two classification systems, regarding trans+ individuals, comes in the use of terminology. The DSM-5 uses the term 'gender dysphoria' which describes the distress some people may feel from the mismatch between their gender identity and sex as assigned at birth (APA, 2013; Collazo et al., 2013). Although the DSM-5 has de-pathologised gender identity, gender dysphoria persists within the mental health framework (APA, 2013). Remaining with this framework and the use of the word 'dysphoria', continues to suggest there is a focus on distress.

The ICD-11 has moved away from a mental health category and instead included their definition into the 'conditions related to sexual health' chapter of publication. Furthermore, they have moved away from the term dysphoria and instead use gender incongruence, which focuses on the lack of alignment between someone's experienced and assigned gender. The ICD-11 highlights the incongruence more than the distress experienced (WHO, 2024).

As discussed, focusing on gender dysphoria can pathologise gender diversity (WHO, n.d). Pathologising in this way results is stigmatisation and discrimination towards trans+ people and can hinder access to services, such as healthcare (Beek et al., 2016; Butler, 2020). Through amending terminology used within the ICD-11 it aims to reflect modern understanding of gender diversity (WHO, n.d.). Furthermore, separating out the dysphoria experienced from gender incongruence is proposed to allow for a more supportive therapeutic alliance between clinicians and trans+ individuals, helping to focus on enhancing coping skills and wellbeing (Collazo et al., 2013). Engaging in this medicalised approach is argued however to be dehumanising for trans+ individuals and restricts options for those who do not desire gender affirming hormones, surgery or care (Wesp et al., 2019).

1.3 Medical and Social Transition

Terms used within the ICD-11 and DSM-5 are reflected within the legal context and therefore become particularly relevant to those who wish to medically transition. Transitioning refers to the steps someone takes to live in the gender with which they identify (Stonewall, n.d). Medical transitioning can include gender affirming hormone treatment and a variety of surgeries, with such procedures needing to be supported by healthcare providers (Evans et al., 2021). Gender dysphoria may be experienced due to primary and secondary sex characteristics that are "incongruent with their gender identity" (Collazo et al., 2013, p.230). Surgery which helps physical characteristics to become more closely matched with the features of their affirmed gender is reported to reduce feelings of gender dysphoria (Collazo et al., 2013). However, trans+ individuals are likely to encounter barriers to accessing appropriate gender-affirming care. This can include not wanting to seek out support from medical services due to past experiences of rejection and trauma and/or being overwhelmed with feelings of gender dysphoria

and the decisions they would need to make regarding medical transitioning (Collazo et al., 2013). Not all trans+ individuals will seek gender-affirming treatment, due to a combination of internal and external factors. They may feel no personal need for medical intervention, are satisfied with their bodies, or identify outside the binary in ways that do not align with traditional transition pathways. Others may be deterred by external factors such as fear of discrimination, health risks, surgeries being underdeveloped, or due to systemic/financial barriers in accessing care (Nieder et al., 2020). In recognition of the difficulties outlined regarding implementation of a medical model, in the UK there is a move away from a medicalised approach in gender care towards a more holistic model. This has been suggested in young people's services and it is anticipated this will also be adopted by adult services. This holistic approach may still involve access to medical interventions as part of a full package of care which aims to address the needs of the individual (National Health Service, 2024a).

Social transitioning involves "reorienting oneself through using a self-chosen identity" (Evans et al., 2021, p.4653). This can include changes to names, pronouns and how an individual chooses to express themselves, (i.e., through their clothes). Research identifies how social transitioning has positive effects on mental and psychological wellbeing (Strain & Shuff, 2010) including lowering levels of depression and increasing self-esteem (Glynn et al., 2016).

Individuals may choose to describe themselves using one or more of the terms outlined above, for example non-binary, gender fluid, trans, or gender-queer. The importance of having inclusive language which supports describing our gender to ourselves and others is documented by Perales et al. (2022) who found positive effects on trans+ individuals wellbeing when inclusive language was used within the workplace. Robinson (2019) emphasised the importance of inclusive language through their research into the 'stolen generation'. They described how Indigenous people's ability to understand their gender identity was reduced when Indigenous children were placed into non-Indigenous homes in the 1900's. Their native language was inclusive of gender diversity, providing a greater understanding of gender. However, they were immersed into the Settler culture, which included being forced to speak either English or French. Children would receive punishments for using their native language and this affected the way they understood the world, including gender. Being forced to talk about and

understand gender in the binary terminology used at the time within English and French languages (Robinson, 2019).

1.4 Legal Transitioning

Currently, social transitioning within the UK allows individuals to change their name and pronouns with several services without the need to legally change their gender. This includes on a passport and driving licence (Government Equalities Office, 2018). Changing their legal name can be very important to many trans+ people as this name corresponds with their sex as assigned at birth, not their affirmed gender, which can cause significant distress when used (Collazo et al., 2013). However, to legally change their gender in the UK, an individual needs to meet several requirements and obtain a gender recognition certificate (GRC). From the date a GRC is issued an individual is considered in law to have their affirmed gender (Fairbairn et al., 2020). GRC's were introduced in the UK in 2005, under the 2004 Gender Recognition Act, one of the first legal frameworks globally to allow trans+ people to change their legal gender. Prior to this trans+ people within the UK had no legal means to amend their birth certificates.

One means of obtaining a GRC within the UK has previously included needing a medical diagnosis of gender dysphoria, a report from a medical professional outlining the treatment an individual was undertaking, a statutory declaration from the individual they intended to live in their affirmed gender until death, and, if the individual was married, consent from their spouse (Government Equalities Office, 2018). An alternative method of acquiring a GRC for individuals who had already socially transitioned included acquiring a medical report outlining either a diagnosis of gender dysphoria or surgery undertaken, to have lived in their affirmed gender for at least 6 years and have been in a protected marriage or civil partnership (Fairbairn et al., 2020).

Requirements for obtaining a GRC have changed over recent years. The requirement for a gender dysphoria diagnosis was removed, aiming to bring the process closer to self-declaration (Women and Equalities Committee, 2021). The stipulation for someone to have lived in their affirmed gender for a minimum period was also removed. It was outlined within documentation from the House of Commons Women and Equalities Committee, this was due to there being "no clear, accepted or agreed

definition of what living like a man or a woman is" (Women and Equalities Committee, 2021, p.35). This still refers to a binary concept however and does not appear to account for individuals who do not subscribe to a binary gender.

The requirements around obtaining a GRC and legally amending names/pronouns on documentation can create barriers for many trans+ people. Research from the USA suggests 33% of individuals who had transitioned had not updated legal documents to reflect their affirmed gender. With individuals also updating some but not all documentation it was suggested 41% were living with documentation which did not reflect their affirmed gender (Collazo et al., 2013). Although, this data is derived from the USA, with different systems in place to change legal documentation, it is proposed the requirements set up by the UK Government would have similar consequences.

In 2018 the UK Government held a consultation on reforming the Gender Recognition Act 2004 (GRA; King et al., 2020) with trans respondents and advocacy groups criticising the existing process as bureaucratic, costly, and psychologically harmful (King et al., 2020). However, the consultation also became a focal point for trans-exclusionary campaigns, such as Fair Play for Women, which framed trans inclusion as a threat to cisgender women's safety in single-sex spaces (Fair Play for Women, 2018). These narratives contributed to a broader climate of negative rhetoric, amplifying societal anxieties around gender nonconformity and trans visibility.

Furthermore, in April 2025 the Supreme Court made a judgement on the meaning of the terms sex, man and woman in relation to the Equalities Act 2010 (EA2010), following an appeal by For Women Scotland Ltd against The Scottish Ministers (UK Supreme Court, 2025). The UK Supreme Court ruled that the term "woman" in the Equality Act 2010 refers strictly to biological sex, even in cases where a Gender Recognition Certificate (GRC) has been issued. This decision creates a legal tension between the Equality Act and the GRA, which stipulates that individuals with a GRC must be treated "for all purposes" as their acquired gender.

This interpretation undermines the legal recognition afforded by Gender Recognition Certificates (GRCs) under the GRA, particularly in contexts involving single-sex exemptions. Although the Equality Act continues to protect individuals undergoing gender reassignment, the ruling introduces legal ambiguity and may legitimise

exclusionary practices. Human rights experts have raised concerns about the coherence of UK law, noting that the decision prioritises biological definitions over lived experience and legal identity (United Nations, 2025).

The GRA consultation and subsequent legal developments reflect the contested nature of trans+ rights in the UK. While reform efforts aimed to improve access to legal gender recognition, they also exposed deep societal divisions. The Supreme Court's ruling further complicates the legal landscape, raising critical questions about the relationship between gender identity, legal recognition, and equality protections.

1.5 Access to medical services

While there have been some positive changes in legislation regarding legal transitions, accessing services for those who want to medically transition remains a lengthy process, with many services unable to provide all treatment options an individual may require. For example, those wanting to access medical transitioning through the NHS can expect a waiting list of approximately 6-7 years for an initial appointment. Those who are accepted for treatment face an additional wait of about one year for their second appointment (National Health Service, 2024b). Through NHS England services, gender affirming hormones are available, though access to surgery requires a referral from a lead professional at a gender clinic (i.e., the only place a diagnosis of gender incongruence can be made within the NHS). However, several surgeries, particularly those relevant to trans women, are not available through the NHS. These include breast implants, facial feminisation surgery, body hair removal, and hair transplantation (National Health Service, 2024c). As a result, some individuals may not have access to the full range of medical procedures that could assist their transition.

For those individuals that can afford it, private medical healthcare is available with a significantly shorter waiting time of 2 years (Nottingham Centre of Transgender Health, accessed October 2024) or 6-12 weeks (Harley Street Gender Clinic, accessed October 2024). All medical procedures are available, however prices vary with initial gender affirmatory surgery costing approximately £30,000 and additional surgeries such as cosmetic surgery and laser hair removal between £150 - £8000 (The London Transgender Clinic, accessed October 2024). These costs therefore make it unavailable

to many trans+ individuals or could result in high levels of debt. It is important to hold in mind that not all trans+ individuals intend to engage in medical transitioning.

1.6 The influence of language on individuals' experiences

Requirements to access services, such as those outlined above, and narratives around what it is to be transgender, have influenced the trans+ community, impacting upon how accepted individuals feel if they do not conform to that narrative. For example, it is reported by Vincent (2020) some non-binary individuals feel they are not "trans enough" to meet society's expectations of being transgender and this has influenced how they interact with clinicians if they choose to receive gender-affirming healthcare. Individuals have reported in order to meet expectations of healthcare providers and receive any desired gender-affirming healthcare they would present as a trans man/woman, instead of non-binary, and used binary terms to discuss experiences. Vincent (2020) reported individuals who identify as non-binary are at a disadvantage in situations informed by historical binary concepts, such as the NHS and CJS. The use of cis- and heteronormative language within public services, including the NHS, CJS and educational settings, also create barriers for trans+ people. Reinforcing narratives of binary gender identities being normal and identifying outside of these as abnormal. This links to previous discussions around the diagnosis of gender dysphoria and how the use of language can be suggestive of abnormalities (Coleman et al., 2022).

The use of such non-inclusive language fails to accommodate the needs of trans+ people. For example, when accessing resources and services cis- and heteronormative language can limit the level of appropriate and relevant support and treatment trans+ people receive. To consider whether the needs of individuals outside of the cis- and heteronormative narrative are met by healthcare services, McDermott et al. (2021) considered access to general healthcare for LGBTQ+ patients, focusing on cancer care, palliative care and mental health. It was found clients accessing cancer care received the most inadequate treatment with suggestions the service was cis- and heteronormative focused. For example, information received regarding treatment and care available was based on cis-heteronormative assumptions, causing patients to feel unseen and discriminated against. Although the evidence base was small, the studies found there were inequalities regarding healthcare provisions between LGBTQ+ and cis-

heterosexual people. It was commented that healthcare providers were not well trained and misunderstood the needs of LGBTQ+ people, especially those who are trans+ (McDermott et al., 2021).

Being misunderstood by services can start from a young age. In a sample of 789 LGTBQ+ young people within the UK, Pattinson et al. (2021) reported that a fifth sought support for mental health difficulties. However, they found it difficult to disclose their sexual orientation or gender identity due to fears these identifies would be "blamed" for their mental health difficulties. Participants reported being fearful of being misunderstood and that the stigma around their sexuality or gender identity would hinder receiving appropriate support for mental health difficulties. Further research has also documented inequalities in the support young people receive within juvenile justice facilities due to their gender identity, including the CJS and welfare (Clark et al., 2022; Mountz, 2020). Although these studies included samples of young people accessing services within America, these are similar experiences to young people accessing UK services. For example, such experiences were emphasised within a systematic review of mental health services available for young people within the UK (Harrison et al., 2020). This review identified only 14 of 111 mental health services (12.6%) had provisions to specifically support trans+ young people. Many reported such provisions were available within their main services, however it was considered these did not adequately meet trans+ young people's needs (Harrison et al., 2020). Young people therefore found they needed to navigate heteronormative systems, where they would struggle to explain their experiences effectively, to be able to obtain appropriate support (McDermott et al., 2018). Such cis- and heteronormative assumptions by institutions and society cause experiences of transprejudice (i.e., discrimination, harassment and/or abuse due to someone's gender identity and/or expression; McDermott et al., 2018; Morrison et al., 2018).

Studies which have specifically focused on trans+ peoples experiences of transnegativity, especially when accessing health services, identified a lack of support provided by physicians and limited communication regarding care options available for clients (e.g. Harrison et al., 2020). This study by Harrison et al. (2020) was completed within the UK and qualitatively explored the lived experiences of eight trans participants in the process of transitioning. In contrast, quantitative research completed in the USA

explored the attitudes of healthcare professionals towards trans+ people and identified more positive results regarding acceptance of, and ease of interaction with, trans+ clients. Kanamori and Cornelius-White (2016) suggested from their sample of 243 healthcare professionals there was favourable attitudes towards trans+ people and participants themselves felt an ease interacting with trans+ clients. They did however find male healthcare professionals were more fixed on their views supporting the gender binary system, and although their general attitudes were positive there was room for improvement. Markovic et al. (2021) also reported that healthcare providers would attempt to fit trans+ patients into binary protocols, demonstrating further evidence of continued support for the gender binary system. Such support may reinforce biases held towards trans+ patients by some healthcare providers, as reported by Patterson et al. (2019). Although these healthcare staff reported they would aim to provide competent care, biases continued to be expressed through microaggressions towards trans+ patients (Patterson et al., 2019).

A key development found by Kanamori and Cornelius-White (2016) was in the positive progress of views held compared to research data from 30-50 years ago. Although they identified there were "less-negative views" (Kanamori & Cornelius-White, 2016, p.173) rather than identifying more positive views, these were based on two areas explored; "sex reassignment surgery and mental health potential for transgender persons" (Kanamori & Cornelius-White, 2016, p.173). This provides some evidence change is occurring, however this is glacial. For example, when comparing attitudes towards transgender people with views held 50 years previously, Kanamori and Cornelius-White found there continued to be "a small percentage of healthcare professionals [who] associate transgender identity with moral depravity" (Kanamori & Cornelius-White, 2016, p.172). Although they identified this percentage as a significant minority, it has been consistent over the past 50 years and they suggested this could explain continued health disparities and discrimination towards trans+ people.

It is important to consider the limitations of this study and the impact this has on understanding and applying their findings. The sample consisted of individuals who self-identify as healthcare providers, volunteering their details on a database which can be used to advertise research. Advertising of the research emphasised the exploration of attitudes towards trans+ people, therefore encouraging participation of those

interested in this area. No information was available regarding the area of healthcare participants worked in, and researchers trusted they had been honest about their status as healthcare providers. Furthermore, no information was available regarding the level of socialisation or contact participants had with trans+ people (Kanamori & Cornelius-White, 2016). As there are barriers to trans+ people accessing healthcare (APA, 2022; Coleman et al., 2022; Collazo et al., 2023) it is proposed some healthcare providers may have limited exposure to trans+ patients. These methodological considerations impact upon the generalisability of the findings and limit a more in-depth interpretation of the attitudes held towards trans+ people within different healthcare professions, for example. It would therefore be interesting to understand whether there is a link between attitudes held by healthcare providers and the level of contact with trans+ patients.

It is important to acknowledge these studies examined the attitudes and support provided by healthcare professionals in two different countries, each with varying healthcare systems and provisions (UK vs. USA). Additionally, there was a difference in the focus of the studies: Harrison et al. (2020) conducted a qualitative exploration of the lived experiences of eight trans individuals undergoing transition, while Kanamori and Cornelius-White (2016) carried out a quantitative study on the attitudes of healthcare professionals. Comparing the findings suggests healthcare professionals may not intentionally create negative experiences for trans+ clients, as noted by Harrison et al. (2020). Instead, they may be influenced by cis- and heteronormative structures within their services or unconsciously express biases in their interactions with clients, as reflected in the psychometric measures used by Kanamori and Cornelius-White (2016). It is also worth noting Harrison et al.'s qualitative study focused on a single healthcare service, which limits its generalisability to the broader experience of trans+ clients across all healthcare services. Overall, it can be concluded that, in general, healthcare professionals affirm the intrinsic values of trans+ individuals, and this support can contribute positively to fostering a more trans-affirmative culture within healthcare settings (Collazo et al., 2013).

1.7 Conclusion

This chapter provided essential context by discussing key definitions related to trans+ identities applied throughout this thesis. Through exploring the processes of

legal and social transitioning it provides an understanding of how trans+ people are required, from a young age, to negotiate communities and services built around cis- and heteronormative language. This includes the impact non-inclusive language has on individuals, including how they can access medical services, the level of appropriate support received, which can be based on how professionals understand their gender identity and experiences, as well as the impact on their mental wellbeing. It establishes a foundational understanding of how trans+ individuals experience their transition, highlighting factors that shape their decisions and the interactions they are required or choose to have with others.

The next chapter builds on this foundation by examining trans+ peoples' lived experiences within the broader community, focusing on how these experiences impact their mental wellbeing. It will also consider how the language discussed in this chapter influences the services and spaces trans+ individuals engage with, as well as their interactions with others, ultimately shaping their experiences and transitions, whether medical, legal, or social. These chapters together set the foundations for the thesis and particularly the empirical study, through understanding experiences trans+ people have encountered even prior to their contact with the CJS.

Chapter 2: Trans+ People's Lived Experiences

2.1 Introduction

The true percentage of the population within the UK who identify as trans+ is unknown, due to the lack of robust prevalence data (Biggs, 2024). Part of this can be explained by a lack of any systematic population-based estimations taking place prior to 2020. England and Wales included options to identify gender outside of the male/female binary for the first time in the 2021 Census, where it was reported 262,000 people identified with a gender different from their sex as registered at birth (Office for National Statistics, 2023). However, a UK wide Lesbian, Gay, Bisexual and Transgender (LGBT) survey in 2018 identified 67% of trans+ people responding stated they avoided being open about their gender identity, fearing a negative reaction from others (Government Equalities Office, 2018). Therefore, it is argued despite positive steps towards more systematic data gathering within the census some trans+ people may continue to be reluctant to share their gender identity (Baume, 2021).

This chapter explores various issues trans+ people encounter. It begins by introducing Government Acts and Bills relevant to trans+ individuals and explores how despite these this minority group continues to experience discrimination, including throughout childhood, within the workplace and with the use of single sex spaces. The lived experiences of trans+ people can be understood through theoretical perspectives, such as the Minority Stress Theory, Gender Minority Stress Model, Rejection Sensitivity Model and the Theory of Decompensation. Each of these are explored in relation to their explanation of the effect challenges, including discrimination, have on trans+ people regarding both their physical and mental health and access to essential services.

2.2 Equality Act

Within the UK, the Equality Act 2010 legally protects people with minority identities from discrimination. Discrimination is defined as treating someone less favourably than others due to defined protected characteristics, including through direct and indirect discrimination, harassment and victimisation. Within the Equality Act 2010 nine protected characteristics are identified, making it illegal to discriminate against someone due to these, one of which is Gender Reassignment. It has however

been recognised discrimination against this protected characteristic continues to occur (Dovidio et al., 2010).

In response to continuing concerns regarding the treatment of LGBTQ+ people in society, the UK Government launched an LGBT Action Plan (Government Equalities Office, 2018) with a four-year plan covering a variety of key areas including health, education, safety, the workplace, and data and monitoring. Since the introduction of this plan there has been progress, particularly in relation to data and monitoring with the inclusion of gender identity in the 2021 UK census. However, continued implementation of the LGBT action plan does not appear to have been a priority for the UK Government, potentially due to successive leadership, which could be a contributing factor towards continued discrimination and abuse directed at trans+ individuals (Parsons, 2021). For example, official statistics on hate crime in England and Wales identified there has continued to be an increase in the number of recorded hate crimes related to gender identity from 2017 to year ending March 2023 (see table 2.1) despite the introduction of the plan in 2018.

Table 2.1

Number of reported hate crimes relating to transgender identity

Year ending March	Number of reported hate crimes relating to transgender identity
2017/2018	1703
2018/2019	2185
2019/2020	2542
2020/2021	2799
2021/2022	4355
2022/2023	4889

Home Office, 2021 & 2023

Within the UK, Scotland has led the way in attempting to address such discrimination, through the introduction of The Hate Crime and Public Order (Scotland) Act 2021 which came into force in April 2024 (The Scottish Parliament, 2024). The act updates existing laws, incorporating them into one Bill, and introduces new offences for the use of threatening or abusive behaviour which is intended to stir up hatred based on

a prejudice towards individuals with protected characteristics. These protected characteristics include disability, race, age, religion, sexual orientation and transgender identity. Positive outcomes have been reported from the introduction of this new act, including a 63% increase in reporting hate crimes to the police (Brooks, 2024b). This is proposed to be in response to an increase in public confidence in reporting incidents, however concerns have been raised regarding the extra strain placed on police resources (Brooks, 2024b).

There has however been controversy around the introduction of the new Act, particularly in relation to transgender identity being a protected characteristic. It has been argued the new act challenges the right to freedom of speech, which can include expressing ideas that may offend, shock or disturb (Cook, 2024). Two particularly high-profile cases include comments made by the author J. K. Rowling, who challenged the legislation by posting on social media about high-profile trans women (Brooks, 2024a), and First Minister Humza Yousaf, due to the contents of a speech he made in the Scottish Parliament in 2020 (Dewar, 2024). Complaints were made to the police stating both individuals had violated the new act, police decided however no crime had been committed in both cases (Brooks, 2024a; Dewar, 2024).

Further challenges to the attempted progress in supporting trans+ people occurred when the Scottish government passed the Gender Recognition Reform (Scotland) Bill in December 2022. This Bill proposed to improve the system by which trans people in Scotland could apply for recognition, removing the need for a diagnosis of gender dysphoria. With the proposed introduction of this Bill the focus had been on making the gender recognition process easier and more inclusive, with discussions around trans rights. However, as opposition grew, particularly from feminist groups, the rhetoric shifted away from trans+ people's needs towards cis women's safety, single-sex spaces, and the potential impact on vulnerable cis women (e.g., in prisons, shelters, and changing rooms; Love, 2022).

The Gender Recognition Reform (Scotland) Bill was blocked by the UK government under section 35 of the Scotland Act, the first time this order had been used. Section 35 grants the UK government in Westminster the power to block or prevent the Scottish Parliament from legislating in certain areas. In relation to this Bill, it was argued it would have a significant impact on GB-wide matters in Scotland, England

and Wales (UK Government, 2023). This blocking of the Bill caused a further change in rhetoric based around constitutional tensions between Scotland and the rest of the UK, being framed as Westminster overriding Scotland's democracy (Clear, 2023). Lack of support at a government level for progression on the treatment of trans+ individuals is likely to filter down to the public, reinforcing attitudes and beliefs which support discrimination.

In April 2025 the Supreme Court made a judgement on the meaning of the terms sex, man and woman in relation to the Equalities Act 2010 (EA2010), following an appeal by For Women Scotland Ltd against The Scottish Ministers (UK Supreme Court, 2025). This judgement stated the meanings for these terms is biological and not certified sex. The judgment went on to state that "gender reassignment and sex are separate bases for discrimination and inequality" (UK Supreme Court, 2025, p. 85) explaining that combining these would mean that trans+ individuals who have a GRC would have "greater rights than those who do not" (UK Supreme Court, 2025, p.85) due to coming under both protected characteristics. Following this judgment the UK Government claimed this provided clarity, and the next steps would involve ensuring the ruling was applied clearly across a range of setting including healthcare, prisons and single sex support groups. Whilst highlighting that trans+ individual would continue to be protected based on their gender reassignment (UK Parliament, 2025). However, concerns arisen from this judgment again revolve around how this would filter down to the public, reinforcing attitudes and beliefs which support discrimination. This was highlighted within a statement from TransActual (a national trans-led organisation) who expressed their concern that this ruling may now be used as an excuse by individuals to exclude trans+ people and they would "no longer be permitted access to certain spaces, whether the letter of the law means this or not" (Belcher, 2025).

The Equality and Human Rights Commission (EHRC) initiated a review of its statutory and non-statutory guidance under the Equality Act 2010, following the Supreme Court ruling (Equality and Human Rights Commission, 2025). The EHRC has confirmed that it is revising its Code of Practice for services, public functions, and associations to reflect the implications of the judgment. A public consultation on the proposed changes closed in June 2025 and the finalised draft has since been submitted

to the Equalities Minister and is awaiting ministerial review before being laid before Parliament by autumn 2025. In the interim, public bodies and service providers are advised to seek legal counsel and await formal guidance, as the revised Code will have statutory standing under the Equality Act 2006. The lack of clarity has led to widespread uncertainty across sectors, with many organisations unsure how to interpret their obligations regarding trans+ individuals. Human rights groups have raised concerns about the transparency of the process and the potential for exclusionary outcomes, urging parliamentary scrutiny and public engagement (Hansford, 2025).

2.3 Trans+ experiences of discrimination

 Bashford et al. (2017) researched trans+ experiences within society and identified 75% of trans+ participants reported experiencing some form of harassment in public, 46% experienced harassment in their neighbourhood and 21% feared going out due to fear of harassment. Experiences of harassment did not only occur in public but also in places where individuals may expect to feel safe, such as school and places of employment. This research aimed to consider whether the health and social care needs of trans+ people were met within the Criminal Justice System (CJS) and although it focused on the experiences of those who had been in contact with the CJS, it identified experiences trans+ people had within the community. It is important to note this may not be a reflection of experiences for all trans+ people, particularly those who have not had contact with the CJS, but provides a snapshot of the levels and types of discrimination experienced.

Experiences of hostility commence at a young age with Bashford et al. (2017) identifying that, from their sample, 64% of young trans men and 44% of young trans women experienced harassment or bullying at school; from pupils, staff, teachers, and parents. For youth growing up and understanding their gender identity, schools have been identified as a site of hostility towards gender diverse youth. Being perceived as trans+ could result in bullying from peers, and staff may either ignore chronic and persistent bullying or misinterpret self-defensive acts by trans+ pupils, resulting in unfair punishments (Mountz, 2020).

To explore these experiences further, Whittle et al. (2007) completed a mixed methods study with young trans+ people who, between 1998 and 2005, had either

sought advice/information or completed an online survey. They concluded young people identifying as trans male received increased levels of bullying and harassment compared to those identifying as trans female. It was considered this was potentially due to the increased discomfort felt by trans males required to dress in feminine clothes for school and due to their developing feminine bodies, thereby receiving more attention from peers and staff for non-conformity. Whereby, trans females were potentially more aware of the discrimination they would experience for presenting as feminine and more consciously hid their gender identity (Whittle et al., 2007).

2.4 Workplace Discrimination

In contrast, trans men may face less workplace discrimination compared to trans women. Whittle et al. (2007) argue this disparity is partly due to the societal preference for masculinity and the relative ease with which trans men can be perceived as male when able to present in gender-affirming clothing. Trans women however often face greater scrutiny due to challenges associated with "passing" as feminine, compounded by societal biases against femininity in professional environments. Although this contrasts with experiences within school (Whittle et al., 2007), it is important to acknowledge this decrease in discrimination occurred when trans+ people were able to present in gender-affirming clothing, compared to their distress at being required to wear sex assigned school uniform.

Workplace discrimination often affects trans+ individuals' career progression, particularly for roles with client-facing responsibilities (Bashford et al., 2017). For trans men, this can manifest as a reluctance to seek promotions due to fears of their gender identity being exposed, especially to those they would supervise (Jeanes & Jones, 2021). However, research suggests trans men often encounter different dynamics once their gender identity is affirmed. Studies by Dozier (2005) and Connell (2006) suggested trans men achieved increased professional value and respect after transitioning, gaining economic and social advantages associated with being perceived as male. The experiences of these trans men serve as evidence of how masculinity is rewarded in professional settings, reinforcing hegemonic masculinity (i.e., a system that privileges men) especially for those who conform to dominant masculine norms (Connell, 2006). These changes therefore may reflect broader societal biases that confer greater

authority and credibility to masculine-presenting individuals. For example, in hierarchical and structured workplaces, trans men have expressed the need to conform closely to traditional masculine norms to navigate professional expectations. In MacDonnell and Grigorovich's (2012) study, one trans man described the pressure to be "a little cookie cutout" (p.7) outlining the expectation to conform to a standardised, predictable professional identity in the workplace. This phrase suggests trans men often feel compelled to suppress aspects of their individuality and conform to the accepted mould of what it is to be male in society. Similarly, Jeanes and Jones (2021) observed trans men often adapt their appearance and behaviour, such as dressing in traditionally masculine attire, when leading meetings or attending conferences to align with workplace norms.

It is important to highlight however that trans+ adults are less likely than cis adults to be in full time employment (Fish, 2012), with Turner et al. (2009) identifying that in some countries up to 50% of trans+ adults were unemployed. A more recent survey conducted in 2023 by Trans Learning Partnership, a trans and non-binary research and development programme, found an increased percentage of trans+ participants aged 16-64 years were employed (72.4%), similar to the general UK population (76.1%). However, only 56.9% of their sample of trans+ working aged people were in full time employment (Trans Learning Partnership, 2023). This would suggest employment rates for trans+ people have increased over recent years, from 50% (Turner et al., 2009) to 72.4% (Trans Learning Partnership, 2023), however trans+ people continue to encounter barriers into full time employment.

One of these barriers is some trans+ people experience not being offered a job because of their gender identity, with research identifying 27% of trans+ people are denied employment or promotion, or were fired because of their gender identity (Velez, 2023). Research conducted within Sweden suggested the opposite of this finding however, through exploring whether information on a CV suggestive of someone being either a trans or cis applicant would affect whether they progressed to interview (Granberg et al., 2020). This study found no significant evidence of discrimination against progressing trans applicants to the interview stage. However, there was some evidence of discrimination when the workplace advertising vacancies was either male or female dominated, compared to when there was a mixed workforce (Granberg et al.,

2020). This study however investigated whether trans+ applicants were invited to interview, not exploring whether they would be offered the position. Therefore, although there was limited evidence of discrimination at the application stage, it is unknown whether applicants would have been offered a job following an in-person interview.

2.5 Single Sex Spaces

Such fears of rejection and discrimination can lead to hypervigilance as well as feelings of embarrassment, depression and anxiety (Cooper et al., 2020). Trans+ people are particularly hypervigilant in shared spaces which tend to be based around cis-genderism and heteronormativity (Clark et al., 2022). Under the Equality Act 2010 sex is defined as a binary concept, with someone's legal sex being identified as their biological sex. Under this Act many services can act as single sex service providers, which are defined as services provided to either; only one sex; separately to each sex; or differently to people of each sex (Equality and Human Rights Commission, 2022). Examples of single sex providers/spaces include single sex toilets, domestic violence refuges, hospital wards, and separate or single sex changing rooms.

What can be perceived as ordinary activities within the community, such as using leisure facilities for fitness or socialising, can feel inaccessible for trans+ people due to fear of discrimination were they to use public changing facilities (Fish, 2012; Jones et al., 2017). This is likely to be more pronounced following the Supreme Court ruling in April 2025 on the definition of sex, man and woman. Whittle et al. (2007) identified 47% of trans+ people did not use leisure facilities due to the risk they would be asked to use other changing/toilet spaces. James et al. (2016) explored the experiences of 27,715 trans+ participants using single sex public toilets. It was found 24% had been told or asked if they were in the wrong toilet, 9% had been denied access to a single sex public toilet, and 12% had been verbally, physically or sexually assaulted in a public toilet. The US transgender survey (James et al., 2016) reported 59% of respondents avoided using public toilets due to fearing such discrimination and harassment, and 32% of respondents limited the amount of food and drink they consumed in public to decrease the chance they would need to use a single sex toilet. As these studies demonstrate, trans+ people make significant changes to their daily habits in response to the risk of discrimination and abuse when using single sex public

24

toilets. When trans+ people did need to use these single sex spaces they reported feelings of increased anxiety regarding which space they should enter and feared potential issues arising from members of the public (McGuire et al., 2021).

Single sex spaces occur where cisgender women are perceived as being vulnerable, such as where there may be full or partial nudity (i.e., a changing room/toilet), where intimate physical contact may occur (i.e., hospital/medical facility) and where they may sleep or seek safety (e.g., hospital, refuge). The rationale put forward for exclusion of trans women from single sex spaces regards taking precaution to increase safety for potentially vulnerable cisgender women (Lawford-Smith, 2023) and has influenced opposition to new Acts and Bills as outlined in section 2.2.

Four main arguments are presented by Lawford-Smith (2023) in support of the need for single-sex spaces. Firstly, it is suggested single-sex spaces are required in situations where there is an increased likelihood of cisgender women who are trauma survivors being present, as they may feel unsafe in the presence of men, particularly in intimate settings where they might fear being sexually objectified. This sense of safety is argued to be compromised if a male assigned at birth is present, regardless of their gender identity (Lawford-Smith, 2023). However, this argument is based on a heteronormative narrative that overlooks factors such as a male individual's sexual orientation, personal morals, or behaviour towards others.

Secondly, Lawford-Smith (2023) argues male privilege allows men to occupy more space in society, both physically and socially, such as by frequently interrupting conversations and dominating time and attention. This is said to be exhausting for cisgender women, who may seek relief from male-dominated environments by utilising single sex spaces. It is proposed because trans women were raised as males in male-dominated societies, they might bring these same attitudes into women's spaces. Furthermore, Lawford-Smith argue single sex spaces allow cisgender women space to self-determine their identity as a woman. This is based upon the idea that womanhood has been defined by men for many years, with powerful men within society deciding what it means to be a woman, including how they should act and speak, and whether they are able to be educated and/or employed. Single sex facilities are argued to allow space for cisgender women to understand themselves, through interactions with other cisgender women, and without the influence of men.

This claim is unconvincing, as the brief time typically spent in single-sex public toilets makes it unlikely that cisgender women would use this period for self-determination. Furthermore, single sex toilets often state they are staffed by both male and female personnel, therefore allowing cisgender males to enter a designated female public toilet area for the purpose of cleaning and maintenance. This practice calls into question the functional integrity of single sex toilet designations, as the presence of cisgender male staff within female designated spaces undermines the intended purpose of single sex facilities. Similarly, although there are single sex wards within hospitals and women's only refuges, there is no guarantee males would not work within these spaces and therefore have a significant influence on how cisgender women would experience the space. It is also important to bear in mind such spaces are likely to have been planned, managed and paid for by male dominated companies, therefore the very fabric of the space has been influenced and determined by males.

Trans+ women encounter high levels of prejudice within public spaces and are often the victims of discrimination and abuse. As highlighted above trans+ individuals often avoid everyday activities, such as using leisure facilities, due to fear of discrimination in gendered spaces, a concern likely heightened by the 2025 Supreme Court ruling on the definition of sex. Research shows that nearly half of trans+ people avoid leisure facilities, reduce food and drink intake, and many experience harassment or denial of access in single-sex toilets (Fish, 2012; James et al., 2016; Jones et al., 2017). Crucially, this evidence challenges narratives that position trans+ people as a risk to others in single-sex spaces. Instead, the data clearly indicates that trans+ individuals are disproportionately at risk of harassment, abuse, and violence, both from cisgender women and from male personnel, when accessing these environments. This heightened vulnerability should be the focus of policy responses that prioritise safety, dignity, and inclusion for trans+ people, rather than their exclusion from such spaces.

Lawford-Smith (2023) continues to argue for single sex spaces by suggesting they ensure cisgender women are not excluded from public spaces and pushed back into the private sphere, as was the case in the past. Price (2020) suggests radical feminists (such as Lawford-Smith) believe powerful or privileged groups, such as men, are presenting themselves as being less privileged, for example as women seeking access to women-only spaces. Such arguments contest that by allowing trans women

into these spaces, the rights and safety of cisgender women are compromised, as it may make them feel excluded from public areas and restricted to private spaces to feel safe and be themselves. This view reflects a concern that society may revert to a time when men dominated public spaces and define what it means to be a woman (Price, 2020).

Framing trans inclusion as a regression to historical gender inequalities overlooks the progress made in recognising the rights of trans individuals to participate fully in public life. Excluding trans women from women-only spaces does not safeguard public access for cisgender women; instead, it creates a hierarchy of womanhood that delegitimises trans identities and fosters division. This exclusion is particularly harmful given that trans+ women already experience disproportionate levels of discrimination, harassment, and violence in both public and private spaces. Crucially, exclusion from women-only spaces does not simply deny access; it effectively pushes trans+ individuals back into the private sphere, isolating them from public life. This mirrors the very historical gendered restrictions that feminist movements sought to dismantle for cisgender women. By limiting access to safe communal spaces, exclusionary policies reinforce structural inequalities and perpetuate social marginalisation. Therefore, instead of reducing risk, such policies increase isolation, heighten vulnerability to violence, and reinforce stigma. Inclusive policies that recognise the lived experiences of all women, cis and trans+, are more likely to promote equity, safety, and dignity in public spaces (Zanghellini, 2020).

2.6 Theoretical Frameworks on Minority Stress and Gender Identity

These examples of discrimination and barriers to either career progression or accessing public services, provide support for the Gender Minority Stress Model (GMSM; Hendricks and Testa, 2012). This proposes there is a build-up of individual stressors over time for trans+ people, commencing as children within their school environment, for example, and continuing into adulthood. Hendricks and Testa (2012) developed the GMSM to consider the impact of being trans+ on individuals' wellbeing and access to services. The model argues trans+ people are disproportionately affected by social stressors due to their minority status within society (Hunter et al., 2021). Stressors include navigating gender transitioning both medically and socially, and

encountering legal barriers (Linander et al., 2024). The GMSM expands on a previously proposed Minority Stress Theory (MST; Meyer, 2003) which considers the impact of minority stress on LGB individuals, by including distinct stressors unique to one's gender identity. Therefore, an overview of the MST will be considered prior to exploring the GMSM in more detail.

2.7 Minority Stress Theory

Meyer's (2003) Minority Stress Theory (MST) suggests stress builds up over someone's lifetime and is accumulative, building from stress previously encountered. Therefore, minority stress encountered during childhood, at school for example, would be built upon through exposure to further discrimination and harassment within adulthood, such as within the workplace and the community (Perry & LeBlanc, 2021). The MST suggests there are two types of factors influencing individuals: distal stressors and proximal stressors.

Distal are external stressors occurring outside of the individual, such as experiences of discrimination, prejudice, harassment, or abuse. This would include bullying experienced by LGB children at school and the misinterpretation by staff of self-defensive acts by LGB pupils, similar to those discussed in section 2.3. These events can impact on general psychological processes, which are the mental and cognitive functions helping us interpret, process, and respond to experiences. When individuals are repeatedly exposed to distal stressors there is a disruption to general psychological processes, such as exposure to chronic stress impacting on the brain's ability to regulate emotions effectively, hypervigilance to discrimination causing cognitive overload, and reducing trust in social institutions and interpersonal relationships. These lead to harmful thinking patterns, pessimistic outlooks, and a heightened risk of mental health challenges, all of which affect an individual's overall wellbeing (Perry & LeBlanc, 2021; Meyer, 2003).

Proximal stressors also impact upon individual's experiences, and these are subjective processes which arise from the individual's perceptions, feelings and thoughts. Proximal stressors often arise from repeated exposure to distal stressors, reflecting the internal psychological impact, and can result in an individual developing an expectation of prejudice and an internalisation of social stigmas (Feinstein, 2020;

Perry & LeBlanc, 2021). For example, LGB individuals may develop an expectation of prejudice when exposed to discrimination in public, such as in response to holding hands with their same sex partner. They may therefore start to expect discrimination in similar situations and be reluctant to show affection to their partner in public. In addition, internalisation of social stigmas may develop from growing up in a community where community members are vocal regarding their condemnation of same sex relationships. These beliefs are internalised and can lead to feelings of shame and guilt about their identity (Feinstein, 2020; Perry & LeBlanc, 2021). Figure 2.1 outlines the interaction between proximal and distal stressors impacting upon LGB individuals.

Figure 2.1

The Minority Stress Theory (Meyer, 2003)

(Frost & Meyer, 2023)
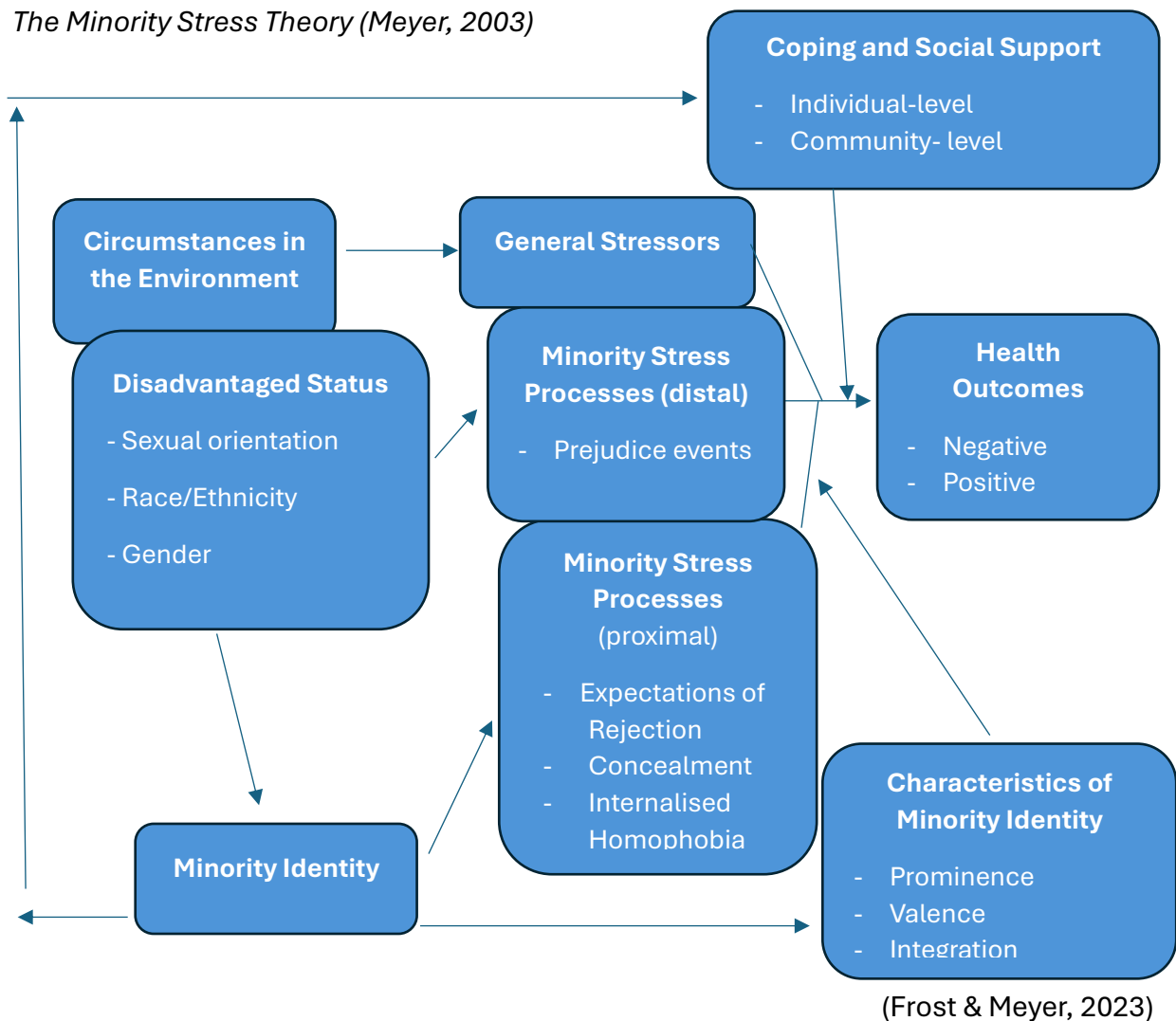
2.8 The Gender Minority Stress Model

The Gender Minority Stress Model (Hendricks & Testa, 2012) expands on the MST by including distinct stressors unique to gender identity, considering the impact of being trans+ on wellbeing and access to services. It is argued that the MST considered the importance of a minority identity for people and the prevalence this has on their lives (Linander et al., 2024), it however focused on the experience of LGB individuals, with limited consideration of the differing experiences for those who are trans+. It is argued trans+ people have further unique stressors and experiences, such as those within the workplace and around single sex spaces, not accounted for with the MST.

The GMSM proposes that for trans+ people many distal stressors were similar to those experienced by sexual minorities, in particular in relation to harassment experienced within the community and difficulties experienced within healthcare, although these would be specifically related to their gender identity. Such as not receiving appropriate gender-affirming healthcare and harassment being directly related to their gender identity and how they express this. There are also additional distal stressors trans+ individuals encounter, including risk of discrimination and violence within public spaces due to concerns of trans+ people using single sex spaces (Fish, 2012; James et al., 2016; Whittle et al., 2007). Furthermore, misgendering (i.e., using incorrect pronouns) and deadnaming, where a trans+ person's birth name is used instead of their chosen name, can cause psychological distress (Coleman et al., 2022).

Some proximal stressors relevant for trans+ people are again similar to those identified for sexual minorities, such as expectations of rejection, concealment (although this would be of their gender identity) and internalised discrimination which focuses on transnegativity within the GMSM. In addition, trans+ individuals also experience the proximal stressors of hypervigilance in public spaces due to risk of violence in response to their gender presentation and fear of confrontations when using single sex spaces (Fish, 2012; James et al., 2016; Whittle et al., 2007). A further significant source of proximal stress for trans+ individuals is often the experience of gender dysphoria, along with the associated emotional distress of seeking a diagnosis. This distress can strongly influence decisions regarding seeking gender-affirming medical care. Although gender dysphoria is sometimes viewed as a proximal stressor, critiques argue that the GMSM fails to consider how the diagnostic process for gender dysphoria, rather than the condition itself, may be linked to negative experiences and expressions of mental health (Linander et al., 2024).

As outlined above core stressors for trans+ individuals include transnegativity, gender dysphoria, misgendering and medical barriers. These stressors can result in negative experiences such as childhood bullying, rejection from family and employment difficulties. Some individuals may internalise the transnegativity experienced, potentially developing low self-esteem and self-blame (Hendricks & Testa, 2012). These experiences can cause the individual to distance themselves from society, becoming more isolated through reducing social support networks and decreasing their sense of

belonging. All of which negatively impacts on wellbeing and mental health (Hendricks & Testa, 2012).

Figure 2.2 outlines the interaction between proximal and distal factors impacting upon trans+ individuals.

Figure 2.2

Gender Minority Stress Model

(Linander et al., 2024)
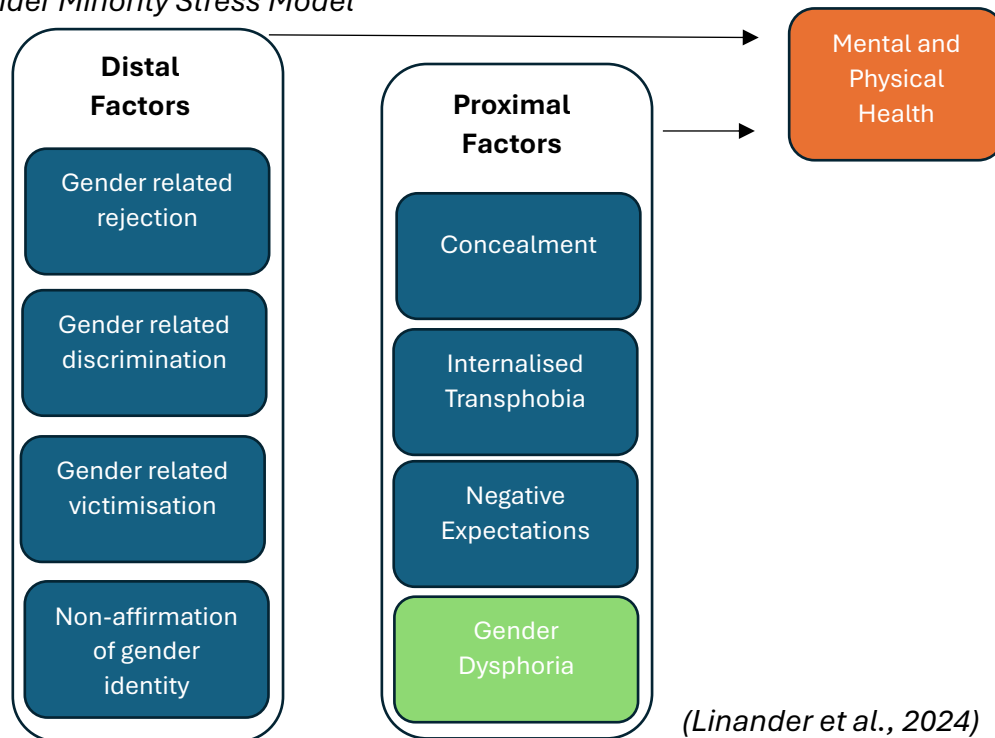
Although some negative experiences may be similar to those experienced by LGB individuals outlined within the MST, the Gender Minority Stress Model focuses on how these are specifically related to an individual's gender identity. Using both models together provides a more comprehensive and accurate understanding of minority stress, leading to better research, policy, and mental health interventions tailored to gender-diverse populations (Testa et al., 2015).

2.9 Rejection Sensitivity Model

A further model to understand the experiences of trans+ people is the Rejection Sensitivity Model (RSM; Downey & Feldman, 1996). This proposes being rejected by significant others influences an individual's feelings, thoughts, and behaviour in

subsequent close relationships. When experiencing early rejection an individual can develop an expectation they will encounter future rejection. This can cause a hypervigilance towards potential situations where they may be rejected (Feinstein, 2020). This is evident in a study by Wells et al. (2020), where participants who had experienced high levels of rejection were more likely to perceive rejection within ambiguous situations and react negatively. Wells et al. (2020) suggest individuals who anxiously anticipate rejection often feel a diminished sense of connection to others. Consequently, they may either withdraw socially or react with anger/aggression. Both responses serve to reduce the risk of facing rejection by effectively "pushing" others away. This behaviour, however, can create a self-fulfilling prophecy in which the fear of rejection leads to actions that ultimately isolate (Feinstein, 2020). Pushing someone away in this manner would reduce the risk of becoming emotionally involved and in turn protect against the possibility of being rejected (Feinstein, 2020).

The RSM provides an explanation for evidence presented by Hendricks and Testa (2012) that negative experiences from childhood relating to one's gender identity, such as childhood bullying and parental rejection, can cause individuals to expect similar rejection in the future. As a result, it is reported some trans+ individuals distance themselves from society (Hendricks & Testa, 2012), which the RSM would argue was with the aim of protecting themselves against future rejection.

A criticism of the RSM is it focuses on the negative consequences of being rejected by individuals. It is argued a similar criticism can be made of the MST, which focuses on the negative actions made by individuals, with neither the RSM or MST fully considering the impact of institutional and systematic oppression. It is argued they do not clearly account for the impact of social norms on shaping how individuals become the target for discrimination (Peel et al., 2022). Evidence of this can be found in the use of heteronormative and cisnormative language used within UK public services, as discussed in chapter 1. The barriers this creates causes trans+ individuals to feel unable to effectively use such services and receive appropriate support and/care, potentially resulting in feelings of rejection by the system.

Hunter et al. (2021) argue a major contribution towards gender minority stress and feeling rejected by services are cis- and heteronormative beliefs. They suggest those who do not fit the norm curated by these beliefs are discriminated against.

Further suggesting within healthcare settings there is evidence of both overt and covert discrimination linked to cis- and heteronormative beliefs and language. Covert examples include a lack of representation of trans+ individuals when advertising medical services or when promoting health campaigns encouraging the public to seek medical support. This lack of visibility can result in trans+ individuals feeling excluded or unwelcome in healthcare spaces, ultimately creating a barrier to seeking medical help when required (Hunter et al., 2021).

2.10 Theory of Decompensation

Riggs and Treharne's (2017) theory of decompensation argues more for the role of institutions on the stress which minority groups suffer. Recognising that individuals from minority groups, such as trans+ people, need to compensate for "considerable and repeated marginalization" (Riggs and Treharne, 2017, p.600) on a daily basis. The theory of decompensation suggests within a society, minority groups need to continually compensate (i.e., counteract against wrong doings or overcome barriers) which occur from the ideology and social norms that sway society and institutions. There is an acknowledgement some identities are privileged over others, for example through racial, gender, sexuality and/or neurotypical privilege. Racial privilege is where White individuals often experience white privilege, which may include advantages such as less racial profiling by police, better job opportunities, and more positive media representation. Gender and sexuality privileges are when cisgender and heterosexual individuals often have more societal acceptance, and do not have to "come out," fear discrimination, or justify their relationships in public. A further example is neurotypical privilege, where society is structured around neurotypical ways of thinking and behaving, making it easier for those without neurodivergence (e.g., autism, ADHD) to succeed in work and social settings (Potter et al., 2019).

The need for minority groups to continually compensate causes a cumulative stress. Decompensation is when individuals can no longer compensate due to a lack of resources and support (Riggs & Treharne, 2017). This reduces wellbeing and increases experiences of psychological distress, such as stress, anxiety, depression and suicide risk (Peel et al., 2022). There is also a higher level of substance misuse for trans+ people

(Grant et al., 2011) potentially in response to experiences of discrimination or as a means of self-managing mental health difficulties.

Riggs and Treharne (2017) argue the theory of decompensation recognises that multiple factors impact upon an individual due to the intersectionality of minority groups they may belong too. They argue the MST focuses specifically on sexual orientation and although recognising people may also be affected by multiple marginalisations, such as race, these tend to be added onto the main underlying minority (sexual orientation). The same could be suggested for the GMSM, where the focus is upon someone's gender identity as their minority status and other intersecting factors being added onto this, rather than considering how all minority identities intersect together.

2.11 Intersectionality

Intersectionality considers how the different identities someone has overlap and are connected (Wesp et al., 2019). First coined by Crenshaw in 1989 to describe how Black women faced discrimination as not just women or Black individuals but in a unique way that combines both factors (Al-Faham et al. 2019). Intersectionality has expanded to include multiple intersecting identities such as race, gender identity, sexuality, disability and class. Considering how identities intersect helps to understand how individuals experience multiple levels of social injustice and greater inequalities (Alcantara et al., 2022).

An individual's experience of discrimination is therefore not limited to just one aspect of their identity rather multiple identities can intersect, creating unique and compounded challenges (Wesp et al., 2019). In contrast to the previous example, an individual with the minority statuses of being Black, gay, trans+ and having a disability would not experience discrimination separately as a Black individual, as a gay individual, as a trans+ individual, or as a disabled individual. Instead, they face a complex and interconnected form of marginalisation arising from the way these identities overlap. For instance, they may encounter a combination of racism, ableism, transnegativity and/or homophobia across a range of spaces and settings. Additionally, having a criminal conviction can further compound experiences of marginalisation. This

status may intersect with other minority identities resulting in heightened stigma and systemic exclusion.

Individuals with a criminal record often face barriers to employment, housing and healthcare, which are exacerbated when combined with racial, gender, and/or disability-related characteristics. Within justice and healthcare settings, these intersecting identities can lead to increased surveillance, reduced access to support services, and greater vulnerability to abuse or neglect. This means their experience of discrimination is not just additive but multiplicative, creating unique struggles that someone with only one marginalised identity might not face in the same way (Alcantara et al., 2022). This greater level of discrimination increases the negative impact on mental health (Hennekam & Dumazert, 2023) and Wesp et al. (2019) reported increased levels of suicide attempts for trans+ individuals, with even higher rates among transgender people of colour and transgender people with disabilities.

2.12 Impacts on Mental Health

Psychological harm is caused because of discrimination and prejudice based upon an individual's minority status and intersectionality of minority status' (Dovidio et al., 2010). Davey et al. (2015) found depression was significantly high amongst trans+ people compared to a control group. They identified predictors of depression to include interpersonal problems, suggesting social interactions may be difficult due to outward presentations differing from someone's gender identity. Interestingly, the study found when trans women's depression was managed effectively, their interpersonal problems were similar to those of cisgender women, a finding which was not replicated for trans men.

Further research into the prevalence of depression, as well as anxiety, in trans+ people was completed with a sample of approximately 900 self-identified trans+ participants who engaged with a transgender health service in the UK over a period of three years (Bouman et al., 2017a; Witcomb et al. 2018). They matched trans+ participants to a sample of over 3000 participants from the general population, with all participants completing a range of psychometrics exploring anxiety and depression symptomology as well as potential predictors, such as self-esteem, social support, and interpersonal problems. The research found trans+ people had a three-fold increased

risk of probable anxiety disorder (Bouman et al., 2017a) and a four-fold increased risk of a depressive symptomology (Witcomb et al., 2018). When considering the predictors of developing anxiety or depressive symptomology, low self-esteem was a predictor for both, whilst difficulties with interpersonal functioning was also a predictor of probable anxiety (Bouman et al., 2017a). Less social support and older age were identified as predictors for depressive symptomology, along with low self-esteem (Witcomb, et al., 2018). Such risk factors were also identified to contribute to an increased risk of suicidal ideation. In a systematic review completed by Marshall et al. (2016) they identified the discrimination and victimisation experienced by trans+ people, causing loneliness and a lack of social support, are likely to contribute to increased suicide rates for trans+ people, compared to cisgender.

These risks are compounded in prison, where individuals often report feeling invisible, forgotten, unseen, and unheard by prison staff, further contributing to psychological distress and vulnerability (Schliehe et al., 2022). Trans+ individuals in prison may experience heightened vulnerability due to enforced separation from supportive networks and the pressure to engage with others with whom they may feel little connection or shared understanding (Schliehe et al., 2022). This sense of isolation and disconnection can amplify feelings of marginalisation and emotional distress.

More broadly, suicidal ideation among incarcerated populations has been shown to be significantly elevated compared to the general community. A systematic review by Zhong et al. (2021) identified key risk factors including current psychiatric diagnoses, previous suicide attempts, remand status, and offence type. As previously noted, psychiatric diagnoses and a history of suicidal ideation may already be prevalent among trans+ individuals, and when these intersect with the experience of incarceration, the risk of suicide is likely to be further intensified. This highlights the compounding nature of intersectionality between being trans+ and being in prison, where multiple vulnerabilities converge to create heightened psychological risk.

2.13 Conclusion

This chapter provided a comprehensive exploration of the lived experiences of trans+ individuals, considering the social, psychological, and institutional challenges they face. Drawing on theoretical frameworks the chapter examined how both external

pressures, such as harassment and workplace discrimination, and internal struggles, including internalised stigma, create significant physical and mental health burdens for trans+ individuals. The next chapter builds on these discussions and explores the complex relationship between trans+ individuals, pervasive societal challenges and the criminal justice system (CJS).

Chapter 3: Trans+ People's Links with the Criminal Justice System

3.1 Introduction

Chapter 2 provided a comprehensive exploration of the lived experiences of trans+ people, considering the social, psychological, and institutional challenges they face within the community. Drawing on theoretical frameworks, the chapter examined how both external pressures, such as discrimination and structural inequalities, and internal struggles, including internalised stigma, can create physical and mental health burdens for trans+ individuals. The current chapter builds on these discussions through exploring the complex relationship between trans+ individuals and the Criminal Justice System (CJS). It provides insights into the experiences of trans+ individuals within prison settings, where the rigidity of binary gendered structures creates unique barriers, and how prison policies and practices, often designed around cisnormative assumptions, fail to accommodate trans+ needs.

The importance of terminology, as discussed in Chapter 1, is also considered within the current chapter in relation to people who have a criminal conviction. Acknowledging the evolving nature of language, this thesis reflects a shift towards more respectful terminology since the publication of the systematic review (see Appendix K). For instance, the systematic review described people in prison as offenders and those released as ex-offenders. The importance of using person-centred language has since been considered as a step towards overcoming stigma, both within prison and upon release. This is due to the powerful impact language can have, for example through reinforcing negative beliefs about someone, which upon release from prison can have serious consequences for an individual obtaining employment or securing housing (Harney et al., 2022).

3.2 Links with the CJS

In consideration of the discrimination and abuse experienced by trans+ people, as outlined in chapter 2, official statistics in England and Wales identified that within the year ending March 2023 there was an 11% increase in recorded hate crimes (Home Office, 2023). A Home Office report suggests the increase may be explained through high profile discussions on trans+ identity occurring within politics, across the media, and throughout social media. A negative response to these discussions may have

resulted in an increased number of offences. A focus on trans+ issues may also have improved police awareness around identifying and recording transgender identity hate crimes (Home Office, 2023).

Reporting hate crimes brings trans+ people into contact with the CJS. Although the focus of this chapter will be on contact with the CJS as someone who has committed an offence, it is important to acknowledge experiencing hate crimes can significantly impact trans+ individuals' mental health and increase their vulnerability (Walters et al., 2020). Although hate crimes are typically committed by strangers, a considerable number of trans+ people who have experienced abuse report knowing their perpetrators, and violence is reported as being the most common offence. Furthermore, the violence often has a transphobic focus, targeting areas such as the chest, genitals, and hair, which are deeply tied to gender expression and identity (White & Goldberg, 2006).

Trans+ individuals face discrimination and conflict not only in public spaces but also within schools (Gorden et al., 2017), within their homes (Gorden et al., 2017; Rogers & Rogers, 2020) and within intimate relationships (Goldenberg et al., 2018; Peitzmeier et al., 2020). Goldenberg et al. (2018) found 45% of trans+ individuals experienced intimate partner violence (IPV). Peitzmeier et al. (2020) provided further details, reporting 37.5% experienced physical IPV and 25% were sexually assaulted by an intimate partner. They concluded trans+ individuals are 1.7 times more likely than cisgender individuals to experience IPV.

Experiences of discrimination and abuse can lead trans+ individuals to run away from home, increasing their likelihood of homelessness and, subsequently, their risk of engaging in criminal behaviour (Gorden et al., 2017). For instance, individuals may engage in acquisitive crimes to obtain money for food, shelter, or drugs. Homelessness, combined with challenges in securing and maintaining employment, as highlighted in chapter 2, can also lead some individuals to turn to sex work as a means of survival (Gorden et al., 2017). A report by Gorden et al. (2017) found 40% of transgender individuals in their study had been involved in prostitution, increasing the likelihood of contact with the CJS (Gorden et al., 2017).

Trans+ individuals may also become involved in violent offences, sometimes as a means of survival (e.g., acquiring money or for self-protection, particularly for those

who are homeless or involved in sex work). Violence may also emerge as a trauma response to past experiences, serving as a coping mechanism for managing anger and frustration (Rogers & Rogers, 2020). According to the Power Threat Meaning Framework (PTMF; Johnstone & Boyle, 2018), violence can be understood as a threat response aimed at maintaining control or providing protection against feelings of abandonment, loss, or harm. The PTMF considers an individual's life experiences and its impacts, suggesting trans+ individuals with histories of trauma related to gender identity, estrangement from family, and lack of secure attachments may use violence as a survival or defensive strategy. This highlights how being a victim of discrimination and hate crimes can influence an individual's pathway into offending. Regardless of the motivations for violence and/or other criminal behaviours, such actions often result in contact with the CJS and may lead to imprisonment.

3.3 Imprisonment

Prisons are gendered establishments, where it is viewed there are only two genders, male and female, and individuals receiving a prison sentence are assigned to an establishment based upon their sex as assigned at birth. Sex segregation initially occurred in the nineteenth century reportedly to reduce females tempting males into inappropriate behaviours, such as sexual relations (Newburn, 2017). Furthermore, there was a view females could not be rehabilitated and were therefore treated differently from males for whom it was considered behavioural change was possible. More recently arguments were provided for sex segregated prisons as a means of protecting women from the risk of violence and sexual abuse by males (Newburn, 2017). This more recent argument links to the discussion around single sex spaces from chapter 2 and provides a justification for trans+ individuals residing in establishments which align with their sex as assigned at birth. The aim being to protect cisgender females in custody from the risk of violence and sexual abuse. However, research has identified trans+ people are at an increased risk of violence in custody compared to cisgender individuals, especially those who reside in prisons which do not align with their affirmed gender (Brömdal et al., 2019). For example, research by Brömdal et al. (2019) identified 43% of trans women residing within the male prison estate had been physically assaulted in custody and 17% has been sexually assaulted. The rate of

sexual assaults against trans women was 9-10 times higher than for the general prison population.

However further exploration of the use of sex segregated establishments, such as prisons, has occurred in consideration of power imbalances and the reinforcement of societies views of masculinity and femininity (Pemberton, 2013). Prisons being gendered are therefore based upon socially created differences between women and men, differences which it is argued are not natural or essential and reinforce the concept of a binary gender system (West & Zimmerman, 1987). Modern prisons have become less overtly gendered with a move away from explicitly gendered policies towards more standardised rules and procedures cross different prisons (i.e., the male and female prison estate). However, instead of the achievement of gender-neutral practices, this has involved the extension of norms from men's prisons to all those in custody, including women and trans+ individuals (Pemberton, 2013). Therefore, while prisons may appear less gendered in policy, they continue to be shaped by masculine norms.

An initial policy within England and Wales entitled 'The care and management of individuals who are transgender' stated allocation of establishments was made based upon an individual's legal gender, although trans+ people without a GRC could request to reside in an establishment which aligned with their gender identity. Consideration would then be given to the risk of harm to both the trans+ individual and others within their requested establishment. However, a reform to the policy in 2022 outlined "any transgender women who have a current or previous conviction for a sexual or violent offence or charge and/or who have birth genitalia will generally be held in a prison which matches their sex registered at birth (those without GRCs), or in separate accommodation within the women's estate (those with GRCs)" (HMPPS, 2024b, p.10).

The majority of trans+ individuals in custody therefore reside within an establishment which does not align with their gender identity. Of the 87,869 people incarcerated in prisons in England and Wales in March 2024, at least 295 identified as trans+ with 227 (77%) identifying as transgender female, 49 (17%) as transgender male, 11 (4%) as non-binary and 8 (3%) self-identifying in a different way or did not respond. However, in consideration of their legal gender, which would inform whether they resided in a male or female prison, 245 (83%) reported their legal gender as male and 50

(17%) reported their legal gender as female (HMPPS, 2024a). An additional 10 people were known to have a GRC and were therefore not included within the above figures (HMPPS, 2024a), meaning the actual number of trans+ individuals would have been at least 300. Therefore, although the majority of trans+ people in custody identified as trans female (77%), they resided within the male prison estate. From the statistics above it is also presumed those identifying outside the male/female binary (7%) were also residing within the male prison estate. The number of people in custody who identify as trans+ is however likely to be an underestimation given many people will choose to conceal their affirmed gender identity, which occurs due to fears of experiencing transnegativity (Hebert, 2020; White Hughto et al., 2018).

3.4 Pains of Imprisonment

In 1958 Sykes considered males' experiences within New Jersey State Prison, USA, and identified five deprivations which Skyes entitled the 'pains of imprisonment'. These included the deprivation of liberty, deprivation of goods and services, deprivation of heterosexual relationships, deprivation of autonomy, and deprivation of security, and were used to summarise the painful implications being imprisoned has on individuals. Aspects of these pains continue to be relevant today. For example, regarding deprivation of liberty Skyes describes how "the prisoner's loss of liberty is a double one - first by confinement to the institution and second, by confinement within the institution" (Sykes, 1958, p.65), referring to restrictions placed on the freedom of movement within prison. These restrictions, still prevalent in modern prisons, are among numerous regulations aimed at controlling behaviour. At the same time, people in prison must navigate an environment where they experience a deprivation of security by living alongside others who may have a history of violence and aggression (Sykes, 1958). Due to the design of prison custody, pains of imprisonment continue to be evident, however some of those outlined by Sykes may not be as relevant as previously proposed.

Sykes (1958) identified the "deprivation of heterosexual relationships" as a key pain of imprisonment, arguing men in prison might experience anxiety because they can only compare themselves to other men. He suggested masculinity is socially constructed through interactions with men and women, meaning without both

interactions, men in prison may struggle to affirm their masculinity and sense of identity. This perspective reflects the idea that identity is shaped both by self-perception and the perceptions of others. However, Sykes' argument is rooted in a heteronormative framework, assuming all men in custody are heterosexual and masculinity can only be validated through relationships with women. He gives little attention to the experiences of non-heterosexual men, who may develop and affirm their identity through interactions with male peers. In this context, the relevance of "deprivation of heterosexual relationships" as a significant pain of imprisonment is questionable today, as understandings of gender, sexuality, and identity have evolved since 1958.

In consideration of limitations with Sykes work, Maycock (2020) explored which 'pains of imprisonment' were relevant to trans+ people in custody. Maycock focused his study within the Scottish Prison Service and identified issues such as pains of being in the wrong hall and in the wrong clothes; pains of transphobia within custody; pains of isolation; and pains of transitioning within custody. The research particularly identified the impact of staff on trans+ people being able to access gender appropriate items such as articles of clothing, or on being treated fairly and with respect. One participant reflected upon what they viewed as the abuse of power by staff to use authority to limit trans+ individuals' access to gender appropriate clothing, stating this related to staff member's transphobic views. Within his participant sample Maycock included trans men alongside trans women, however the findings were discussed in more general terms of trans+ experiences, presenting trans men and trans women participants as more of a homogenous group.

Support for the pains of imprisonment identified by Maycock (2020) comes from other research which indicates trans+ people are significantly more likely to experience challenges during their incarceration compared to cisgender people in prison (Gorden et al., 2017; Sevelius & Jenness, 2017; Simopoulos & Khin Khin, 2014). Unique challenges include breaches of rules by wearing gender appropriate clothing and/or makeup, a risk of sexual, physical and emotional victimisation, and issues with access to healthcare. Evidence for these challenges is documented by Brömdal et al. (2019) who identified people residing in prisons which did not align with their gender identity were at a greater risk of verbal, physical and/or sexual abuse. Trans women residing in

prisons for males are particularly vulnerable with their trans+ identity increasing the risk of being raped, coerced into sexual activity, ridiculed, misgendered and receiving restricted access to gender appropriate clothing as well as gender confirmatory medical care (Drakeford, 2018; Francisco, 2021; Jaffer et al., 2016, McCauley et al., 2018, White Hughto et al., 2018).

Jenness and Gerlinger (2020) also explored how pains of imprisonment impacted upon trans+ people, expanding further on our understanding of the experiences of trans women within the male prison estate in California, USA. In 2008 quantitative and qualitative data was collected from a sample of 315 trans women in custody, and this data has been used within several studies exploring the lived experiences of trans+ people in prison. Jenness and Gerlinger (2020) explored this data focusing on whether trans women perceived their level of femininity had changed as they went into the male custodial estate from the community. They identified a significant number of participants perceived themselves to be more feminine in custody. Explanations for this included how a lack of access to gender-affirming provisions, as commented upon previously, hindered abilities to present as their authentic self. In focusing on achieving this with the limited items available, they expressed femininity through growing their hair long or using pens as a substitute for makeup, as examples. This resulted in them presenting as more feminine than they may have chosen to in the community (Jenness and Gerlinger, 2020).

It was also proposed appearing more 'ladylike' and feminine increased the protection they received from male peers. For example, they felt they received more respect from men within custody when presenting as feminine and if they became involved in a romantic relationship with a male, they would be offered protection against physical and sexual abuse from other males (Jenness & Gerlinger, 2020). Jenness and Gerlinger (2020) reported trans women therefore found themselves presenting as hyperfeminine within a hypermasculine environment.

Exploring further the use of male peers as protection, Jenness et al. (2019) used the same dataset to explore sexual victimisation against trans women in custody. Jenness et al. (2019) reported trans women acted out roles within custody they perceived heterosexual cisgender men wanted to see from a woman. This included presenting as more feminine than within the community and engaging in sexual acts

they did not feel comfortable with but perceived was expected from them as female. As also reported by Jenness and Gerlinger (2020) some participants reported engaging in sexual acts for the promise of protection from verbal, physical and sexual abuse by other males (Jenness et al., 2019). The research highlights how prison dynamics force some trans women to exchange sexual services with dominant males in return for protection, emphasising the coercive environment in which these transactions take place. Some participants explained they entered relationships not necessarily for protection but as a 'side benefit' of companionship, making their time in prison easier. Others described being in marriage-like relationships where their partners provided safety, with the expectation of sexual compliance. However, these protective relationships were not always a safeguard against victimisation, as trans women reported being sexually assaulted by their 'husbands' or 'boyfriends' (Jenness et al., 2019). These findings were also reported in a study by Wilson et al. (2017) where participants stated if they did not engage in sexual activities with their partner this could lead to being physically assaulted. One participant reported "I've been raped so many times it's not funny …sometimes it's better just to do it than get the black eye" (Wilson et al., 2017, p.389).

Although the data used within these studies was collated 11-12 years prior to publication, the exploration of prison experiences for trans+ individuals is still relevant, with minimal changes having occurred in relation to policy and management of trans+ people during the time between data collection and analysis (Jenness & Gerlinger, 2020). However, interviews conducted with participants were not audio recorded, with hand notes being taken at the time of interview. Therefore, there are limitations regarding the qualitative analysis completed as information and nuances may have been missed or not recorded verbatim (Braun & Clarke, 2013). Furthermore, researchers collecting data may have unconsciously highlighted aspects of the interview that align with their expectations while neglecting contradictory or unexpected responses (Miles et al., 2014). Without an audio recording, it is not possible to verify whether written versions accurately represent the original conversation.

3.5 Experiences of custody in England and Wales

The first published study exploring the lived experiences of trans+ people within prisons in England and Wales focused on trans women incarcerated in a male prison (Nulty et al., 2019). Using Interpretative Phenomenological Analysis (IPA), the research provides an in-depth examination of personal narratives of three transgender women, highlighting their experiences of identity, transition, and institutional challenges. Three overarching themes emerged. First the journey of transition revealed participants' early awareness of gender incongruence and the psychological distress of hiding their identity. They also reported on challenges of transitioning within a custodial environment, supporting the pains of imprisonment identified by Maycock (2020). Their second theme, identity in prison, focused on the struggle to express femininity within a male-dominated space, perceptions of "genuine" versus "fake" transgender identities, and the misinterpretation of gender identity as a sexual orientation. Participants reported feelings of frustration and fear due to this misinterpretation and how this could put them at risk of sexual assault. Third, the fight against the system, examined daily discrimination, harassment, and institutional barriers including lack of staff training, inconsistent policies on gender-affirming items, and inadequate mental health support. Participants described frequent sexual harassment and threats, supporting findings from research conducted within the USA (Brömdal et al., 2019; Gorden et al., 2017; Jenness & Gerlinger, 2020; Jenness et al., 2019). Some participants felt reporting abuse was futile due to staff indifference or ignorance (Nulty et al., 2019), which supports suggestions staff lacked training (Nulty et al., 2019), they held transphobic views, or they abused their power to limit trans+ people's access to appropriate support (Maycock, 2020).

The study by Nulty et al. (2019) underscores the vulnerability of trans+ people in custody, highlighting the need for greater institutional support, improved staff training, and policy reform to ensure safety and dignity. While the research provides valuable firsthand accounts, the small sample size and its focus on one establishment limits generalisability, emphasising the need for further studies on experiences of transgender individuals across different custodial settings.

Suhomlinova et al. (2023) also completed research into trans+ people's experiences within male prisons in England and Wales, including participants from a

range of male establishments. This was a longitudinal study which involved corresponding via letter with 15 trans+ participants in custody from 2020-2021, therefore covering the period prisons went into 'lockdown' due to Covid-19 restrictions. Within custody 'lockdown' meant, like within the community, social visits and extracurricular activities were suspended, and social distancing measures were enforced. People in prison were allocated social 'bubbles', enabling them to leave their cells to exercise, collect meals and shower with a set group of people to reduce the risk spreading Covid-19 (MOJ, 2020). These restrictions resulted in many being locked in their cells for 22 hours a day, coming out only for the necessities outlined above. This had a negative impact on mental health and caused feelings of isolation, particularly due to the suspension of social visits. Over time virtual visits were arranged and although this was beneficial, people in prison felt it was insufficient, and they struggled to maintain personal contact with family and friends (HMIP, 2021).

In examining the direct impact of Covid-19 lockdown restrictions on trans+ people in prison, Suhomlinova et al. (2023) identified several additional stressors unique to this minority group. These stressors included the reduced opportunity to purchase essential items for gender presentation, such as makeup and prosthetics. This tied into the broader pains of being in the wrong hall and in the wrong clothes, as highlighted by Maycock (2020). Makeup and feminine clothing would have been more easily accessible within the female prison estate, reinforcing for trans+ participants within this study that they were residing in the 'wrong hall' meaning the wrong prison for their gender identity. They were likely to be aware residing in a prison which aligned with their gender identity would have given them easier access to some gender-affirming items. This level of insight is not available through the study by Suhomlinova et al. (2023) however, as there was limited focus on the effect a lack of access to gender-affirming items had on individuals.

Furthermore, access to gender clinics was impeded during the lockdown, resulting in extended waiting times for services already significantly delayed, as highlighted in chapter 1. This exacerbated the challenges associated with transitioning within custody, as noted by Maycock (2020). Another significant issue identified by Suhomlinova et al. (2023) was the requirement for trans+ people to shower alongside cisgender peers. Previously some trans+ individuals avoided using communal showers

until they were empty or relied on staff to allocate individual shower times. However, lockdown protocols, which restricted groups of peers to shared time slots outside their cells, eliminated these accommodations for approximately 50% of participants who did not have in-cell showers (Suhomlinova et al., 2023). This increased anxiety for trans+ people, who faced heightened vulnerability while undressed and were at greater risk of victimisation in shared spaces. Some participants however identified the positives of lockdown procedures, including reduced contact with peers decreasing the risk of victimisation, although incidences of verbal harassment appeared to increase (Suhomlinova et al., 2023). The research by Suhomlinova et al. (2023) provides evidence for Maycock's (2020) argument that trans+ people in prison experienced stigma, discrimination and exclusion, including the threat of violence and isolation.

Lockdown restrictions further deepened feelings of isolation among trans+ people in prison due to limited access to support networks. Suhomlinova et al. (2023) highlighted that as many trans+ individuals already experience reduced family support, often due to rejection related to their trans+ identity, they rely heavily on LGBTQ+ support systems within custody, such as peer led forums. During lockdown, access to these in-person support networks was curtailed, leaving many feeling isolated. While some external LGBTQ+ support forums were accessible via phone, participants described these as poor substitutes for face-to-face interactions, and such services were not consistently available across all prisons.

Although the study by Suhomlinova et al. (2023) was able to identify some unique experiences for trans+ people within the male prison estate during the period of Covid-19 lockdown, the majority of the paper focused on the general impact of lockdown for all people in custody. This being a unique and unprecedented time, makes the findings of this study difficult to generalise to the experiences of trans+ people in custody more broadly. However, a very important aspect of their study is the sample included 13 trans women and two non-binary participants. This increases the importance of their findings as there is limited peer reviewed research identified worldwide into the impact of custody on non-binary individuals (Richards et al., 2016).

3.6 Custodial Staff Attitudes

As identified within the research by Maycock (2020) the attitudes and behaviour of staff also impact upon trans+ people's experiences in custody. Limited research has been conducted into the attitudes of prison staff and how this may influence their treatment of trans+ people. One area of research which has been completed focused on Canadian correctional officer recruits and explored their understanding of trans+ people in custody and how they perceived they would work with them once employed in a custodial setting (Ricciardelli et al., 2020). Semi-structured in person interviews were conducted with 55 correctional officer recruits from Canada's National Training Academy. The gender breakdown was 56.4% men (*n* = 31) and 43.6% women (*n* = 24), with the majority of participants (78.2%, *n* = 43) identifying as White and the remaining 21.8% (*n* = 12) representing diverse racial backgrounds, including Black, Indigenous, Métis, First Nation, South Asian, Chinese, and Japanese (Ricciardelli et al., 2020). This diverse participant pool allowed for a broad exploration of perspectives on trans+ people's accommodations within the Canadian correctional system using thematic analysis.

This research found there was a limited understanding of trans+ people, including uncertainties on how to appropriately house trans+ individuals in custody while ensuring their safety and institutional order. For example, participants were concerned about the vulnerability of trans+ people, particularly the risk of victimisation from others. Correctional officer recruits raised how they were not sure which establishments trans+ people should reside, i.e., aligning with their gender identity or sex as assigned at birth, and what their needs are. With some participants expressing a lack of awareness, knowledge, or exposure to trans+ individuals. Some participants also worried prison policies on gender identity could be manipulated by cisgender people in custody pretending to be trans+ in order to seek perceived advantages or preferential placement (Ricciardelli et al., 2020). As no further studies could be identified exploring the views and beliefs of staff working with trans+ people in custody, this research represents the limited exploration within academic literature. The understanding of this area is limited further by some participants within the study having had no experience of working within prison establishments (Ricciardelli et al.,

2020). Therefore, their views would be based upon a perception of what custody would be like for trans+ people.

Research by Daken et al. (2023) highlights how the knowledge held by prison staff, presumably influencing how they manage and interact with people in prison, is deeply rooted in a "cisgenderist organisational culture" (Hochdorn et al., 2024, p.2). This lack of knowledge and competence regarding the specific needs of trans+ people creates significant barriers to effectively supporting and working with this population. While Daken et al. (2023) observed staff often had a reasonable understanding of vulnerabilities and needs of trans+ individuals, this knowledge did not consistently translate into practical application when working. In Italy, efforts had been made within some prisons to enhance staff training on the needs of trans+ individuals, such as the importance of accessing gender affirming hormone treatment and gender appropriate clothing, providing guidance on interacting and working with them, and introducing trans women in custody to work and social activities. This training with staff who had daily interactions with people in prison had shown promising results with reports indicating trans+ people have benefited from staff's improved understanding and knowledge (Hochdorn et al., 2024). This supported the argument for implementing similar training programs across Italy and other countries.

Exploring research outside of the prison service, one study by Perez-Arche and Miller (2021) looked into authoritarianism, social dominance and gender ideology as predictors of attitudes towards trans+ people within the USA. Authoritarianism is a strong adherence to traditional morality and a tendency to support established authority, whilst holding prejudicial attitudes towards those perceived as unconventional (Perez-Arche & Miller, 2021). Social dominance orientation is the preference for group-based hierarchy and inequality, predicting negative attitudes towards marginalised groups. It consists of two dimensions; intergroup dominance (overtly oppressive and aggressive tactics) and intergroup anti-egalitarianism (subtle changes to social hierarchy, i.e., through policies that discriminate against minority groups). Gender ideology was also measured as it was considered those who hold more traditional gender ideologies would have more negative attitudes towards trans+ people (Perez-Arche & Miller, 2021).

Perez-Arche and Miller (2021) found traditional masculinity ideology predicted negative attitudes and beliefs towards both transgender and non-binary people, whereas traditional femininity ideology predicted more positive attitudes towards non-binary people and negative attitudes towards transgender people. They identified authoritarianism and the anti-egalitarianism dimension of social dominance contributed towards negative attitudes of transgender and non-binary people. It was reported social dominance orientation had not previously been researched in relation to trans+ people and therefore these were new findings. Whereas their results supported previous research into authoritarianism as a predictor of prejudice towards trans people (Norton & Herek, 2013). Limited research has however been conducted with those who work with trans+ people in custody to assist in understanding their beliefs and attitudes which would influence trans+ individuals lived experiences of custody.

3.7 Trans+ People's Lived Experiences of Imprisonment

Two systematic reviews have previously been published exploring trans+ people's experiences in custody, predominantly within the USA, but also within Latin America, Australia, England and Wales, and Scotland (Gorden et al., 2017 and Brooke et al., 2022). Gorden et al.'s (2017) aim was to explore experiences regarding the quality of care and treatment trans+ people received, to be able to make recommendations for improvements. They included HMP Inspectorate and Ministry of Justice reports from the UK, therefore not focusing only on the lived experiences of trans+ people in custody but including views of staff regarding management and support. However, they did not outline how many articles were considered within the systematic review, stating the majority were from the USA with very few focusing on the UK.

Gorden et al.'s (2017) review of literature explored the placement of trans+ people in prison, as well as the experiences of victimisation, management, and access to healthcare provisions. Four main themes were identified. The first considered prison placement issues, highlighting complexities surrounding the placement of trans+ individuals in prisons, including how being placed according to legal gender rather than gender identity, leads to safety concerns and increased vulnerability. This links to a second theme, victimisation and treatment, which identified trans+ people face higher risks of physical and sexual assault within custody. Healthcare provisions were also

raised as a key theme, finding trans+ people often experience inadequate access to physical and mental healthcare, including gender affirming treatments. This lack of medical care contributes to higher levels of mental health struggles, including depression and suicidality. Finally, the study identified a lack of comprehensive policies to support trans+ people in custody, as well as a general absence of research in the UK context. The authors stressed the need for qualitative studies to better understand the lived experiences of trans+ individuals in prison.

Overall, Gorden et al. (2017) concluded a lack of support available for trans+ people in prison was evident, appearing to be justified by the perception that low numbers within custody did not warrant individualised approaches. Although guidelines had been introduced for the care and managements of trans+ people in custody in England and Wales at the time of Gorden et al.'s study in 2017, they suggested due to a lack of research it was not possible to know how effectively these guidelines were implemented. The small population of known trans+ people in custody in England and Wales meant they became an invisible population, whose needs, Gorden et al. suggest, were not being met.

Although the study effectively outlines the primary concerns faced by trans+ people, including placement issues, victimisation, and inadequate healthcare, Gorden et al.'s systematic review lacks detailed information on how studies were selected, assessed for quality, and analysed. This lack of clear methodology makes it difficult to determine whether the review is exhaustive or if there is selection bias in the included studies.

The more recent systematic review by Brooke et al. (2022) provided a comprehensive methodology outlining how cases were selected and analysed. They focussed on experiences of trans women over the age of 18 living in male prisons and identified 14 papers for analysis which explored experiences of incarcerated trans+ people. Five themes were identified. The first explored femininity in male prison, where they highlighted how trans women in prison struggle to express their gender identity due to the strict gender binary environment of prisons. Many trans women attempt to "pass" as women through self-styling techniques, but prison policies often prohibit feminine expression. Brooke et al. (2022) identified how trans women in custody form friendships with others for support but also experience competition and jealousy within the

transgender community. Under the theme of 'friendships and relationships' they explored how many trans women engage in romantic or protective relationships with males, often referred to as "prison husbands", which provide some safety but can also lead to exploitation and abuse, as discussed by Jenness and Gerlinger (2020) and Jenness et al., (2019). This linked with the third theme of 'harassment, sexual abuse, and physical violence'. They reported trans women in male prisons face frequent harassment, sexual abuse, and physical violence from both peers and staff. They were the victims of sexual advances and assaults, and some developed coping mechanisms such as acting aggressively to gain respect and reduce victimisation. As a consequence of this use of aggression, or as a means of protecting trans women from victimisation, many are placed within solitary confinement, which was explored in the theme 'solitary confinement and housing'. This however led to significant mental health issues and some were housed alongside individuals who had sexually offended or individuals with mental health conditions, which Brooke et al. reported can increase risks of abuse. This aligns with the limitation outlined for the study by Nulty et al. (2019), which found trans women feared victimisation in a prison primarily housing individuals who have sexually offended.

The final theme explored by Brooke et al. (2022) regarded limited access to transgender healthcare. The studies included within their systematic review explored how many trans women struggle to access gender affirming hormone treatment and other medical treatments for gender dysphoria while incarcerated. It was identified how healthcare professionals within prisons often lack training on transgender health issues, leading to misgendering and neglect. Although they explored access to healthcare and the relationships with healthcare staff, they provided limited exploration of relationships and interactions with other prison staff with whom trans women would have more regular daily contact. The importance of understanding custodial staff attitudes and their daily interactions with trans+ individuals on their lived experiences is discussed within section 3.6.

Brooke et al. (2022) applied a contemporary socio-ecological model, exploring each theme in turn at a structural, interpersonal and individual level. They concluded there was a need to include a comprehensive understanding of trans women's experiences within male prisons when making amendments to policies and procedures

within UK prisons. Suggesting this would assist in addressing and changing the gender binary culture of prisons, which have a negative impact on experiences of trans+ people. This systematic review focuses on papers from across the USA, Latin America, and Australia with only one paper included exploring experiences for prisoners within England and Wales by Nulty et al. (2019). Although this represents the limited research which has been conducted in England and Wales, Brooke et al. (2022) focus their discussion on the implications for policies relevant for prisons within England and Wales. Such generalisation is difficult from the studies included considering the variations in CJS from the countries within which articles focused, in particular Latin America. Brooke et al. provide minimal discussion of the impact of these limitations.

These systematic reviews highlight how there is a paucity of research into the actual lived experiences of trans+ people in custody and most research has been conducted with trans women residing in male prisons and within the USA, whose prison system and policies vary by state. Both factors limit the applicability of findings. The difference in trans+ individuals' experiences may, in part, be related to the content of these policies, hitherto the care and management of trans+ people in custody within different countries and contexts. For example, at the time of writing, current policies across all Australian jurisdictions agreed trans+ people in prison should be able to state their preference for the gender of staff conducting body searches and that affirmed names and pronouns should be used. However, policies from two Australian jurisdictions set out the correct use of names and pronouns can be ignored if there is a lawful reason to do so. Further variations between policies across Australian jurisdictions include whether trans+ people should have access to private showers and toilets, how segregation should be used as a form of protection, and whether personal items (e.g., cosmetics) affirming someone's gender identity are allowed (Winter, 2023).

In the USA, trans+ people are typically allocated to prisons based on their sex as assigned at birth, with very few examples of trans+ people being housed in establishments which align with their gender identity (MacDonald et al., 2022). However, within California the 'transgender respect, agency, and dignity act' passed in 2021 states trans+ people should reside in their preferred establishment, unless security concerns prevent this (The Moss Group, 2022) and an initial policy within England and Wales had a similar allocation policy. However, significant reforms to these

policies have occurred, as outlined in chapter 2 and section 3.3 of this chapter. This resulted in some trans+ people moving out of an establishment which aligned within their gender identity. This likely compromised their physical safety and mental health, due to the increased risk of being victimised when residing within an establishment which does not align with their gender identity (Brömdal et al., 2019). Being moved establishments would also likely disrupt any support networks they had developed, the importance of which has been discussed within this chapter.

3.8 Conclusion

The current chapter has explored the complex relationship between trans+ individuals and the CJS, highlighting how experiences of discrimination, social exclusion, and institutional biases can impact trans+ people's interactions with legal systems. It provided insights into the experiences of trans+ individuals within prison settings, where the rigidity of binary gendered structures creates unique hardships. It also considered how prison policies and practices, often designed around cisnormative assumptions, fail to accommodate trans+ needs.

In consideration of the variations in policies and practices across countries, chapter 4 focuses on developing a greater understanding of trans+ people's experiences within custody in England and Wales. It reports a systematic review of trans+ individual's experiences of custody for those detained in countries with a comparable CJS to England and Wales. It also considers factors which may influence trans+ individual's experiences such as custodial settings, policies, and geographical locations.

Chapter 4: Trans+ Individuals' Experiences of Custody: A Systematic Review of Empirical Evidence

4.1 Introduction

Despite the variations in policies and known victimisation of trans+ people in custody discussed in chapter 3, there is a paucity of research into their experiences living under supervision. Additionally, most research has been conducted with trans women residing within male prisons and within the USA, whose prison system and policies vary by state. As discussed within chapter 3, to the author's knowledge, there have been two systematic reviews completed into the lived experience of trans+ individuals. As highlighted, these systematic reviews have several limitations. Gorden et al. (2017) lacked a clear methodology, making it difficult to assess the exhaustiveness or potential selection bias of the included studies. While Brooke et al. (2022) offered a more comprehensive methodology, they focused primarily on policy implications for prisons in England and Wales, despite including studies from the USA, Latin America, and Australia, with only one paper from England and Wales. This limited focus on England and Wales reflects the scarcity of relevant research, but the generalisation of findings is challenging due to the differing Criminal Justice Systems (CJS) across the countries, particularly in Latin America. Both reviews also focused on the experiences of trans women prisoners over the age of 18 residing in male prisons.

The current systematic review aims to address the significant gap in research regarding the lived experiences of trans+ individuals in custody by taking a broader approach than previous systematic reviews. The intention is to include studies whose samples focus on trans+ individuals (i.e., not just trans women), of any age, and from more diverse custodial settings. This is important as it ensures a comprehensive understanding of the unique experiences and challenges faced by trans+ people, irrespective of their gender identity, age or the type of custodial environment. This broad approach helps capture a wider range of perspectives and insights, which are crucial for addressing the specific needs and vulnerabilities of trans+ individuals in different contexts, such as juvenile detention, adult prisons, and other institutional settings. It also takes into consideration how these contexts, as well as geographical location and relevant policies, may impact upon trans+ individuals' experiences. By focusing on a broader spectrum of experiences, the review contributes to a more inclusive and

representative understanding of the issues faced by trans+ people in custody. The findings will provide valuable insights into how gender diversity policies are implemented and perceived in custody, offering more targeted recommendations for improving trans+ individuals' wellbeing and access to support and appropriate management. This review will contribute significantly to the literature by addressing the gaps in research and offering nuanced perspectives currently lacking.

The current review aims to explore the experiences of detained trans+ people in countries with a comparable CJS to England and Wales. Specifically, it seeks to:

1. Identify existing research on the experiences of trans+ people in custody in these countries.
2. Develop a deeper understanding of how trans+ individuals interpret the services they receive and the effectiveness of gender diversity policies in custody.

Ultimately, the review aims to answer the following research question:

What are trans+ individuals' experiences of being detained in countries with a comparable CJS to England and Wales?

4.2 Method

Protocol registration

The review protocol was registered with the PROSPERO International Prospective Register of Systematic Reviews on 8th November 2022 (registration number: CRD42022370415). Registering a systematic review with PROSPERO is essential for ensuring transparency, credibility, and methodological rigor. It prevents unnecessary duplication by allowing researchers to identify existing reviews, reduces the risk of bias by pre-specifying methods, and improves the visibility and impact of research (Page et al., 2018).

Review method design

A systematic review process was employed, following PRISMA (Page et al., 2021) and ENTREQ (Enhancing transparency in reporting the synthesis of qualitative research; Tong et al., 2012) guidelines. Meta-ethnographic synthesis was applied allowing for a

systematic comparison of qualitative studies enabling identification of overarching themes (France et al., 2019). Meta-ethnographic synthesis, developed by Noblit and Hare (1988), is a qualitative research method used to systematically interpret and integrate findings from multiple qualitative studies. It employs an interpretative approach, using reciprocal translation to compare concepts across studies, refutational synthesis to examine contradictions, and line-of-argument synthesis to construct broader theoretical insights. This method preserves the richness of qualitative data while generating new theoretical understandings, making it particularly valuable in health, social sciences, and education research (France et al., 2019).

Noblit and Hare (1988) outlined seven stages of meta-ethnographic synthesis: (1) Getting started, which involves identifying the research focus; (2) Deciding what is relevant by selecting qualitative studies for inclusion; (3) Reading the studies and immersing in the data to understand key concepts; (4) Determining how studies relate through comparing and mapping findings; (5) Translating studies into one another by identifying shared meanings; (6) Synthesising translations through developing broader interpretations; and (7) Expressing the synthesis by presenting findings in a coherent framework. The current systematic review followed these stages to ensure interpretations were explicit and transparent.

Search strategy

A comprehensive search strategy was employed, using different terms to capture research associated with trans+ people in custody (see table 4.1). These were identified as relevant terms through the broader reading of literature and research into trans+ peoples experiences, and research focusing on incarceration of individuals.

Boolean "AND" and "OR" operators were used for all search terms. The use of these operators is essential in systematic reviews and database searches to refine and optimise results. The "AND" operator narrows searches by retrieving only records containing all specified terms, increasing precision and relevance (Bramer et al., 2017). In contrast, the "OR" operator broadens searches by including records containing at least one of the specified terms, ensuring comprehensive coverage of related concepts (Grewal et al., 2016). By strategically combining these operators, it was possible to

balance sensitivity and specificity in this literature search, reducing the risk of missing critical studies and avoiding an overload of irrelevant results.

Table 4.1

Systematic Review Search Strategy Concepts

Concept 1 (OR)	Concept 2 (OR)
"gender diverse"	prison*
gender-divers*	custod*
gender*divers*	incarcerat*
"non binary"	Jail
non-binary	gaol
nonbinary	perpetrat*
"gender queer"	hospital
gender-queer	offend*
genderqueer	detain*
"gender fluid"	Inmate
gender-fluid	Imprisonment
genderfluid	"correctional facilities"
"trans m*n"	
trans-m*n	
transm*n	
"trans wom*n"	
trans-wom*n	
transwom*n	
"trans gender"	
trans-gender	
transgender	
"trans people*"	
trans-people*	
transpeople*	
"trans individual*"	
trans-individual*	

transindividual*
"gender nonconform*"
gender-nonconform*
"gender non-conform*"
"trans masculine"
trans-masculine
transmasculine
"trans-feminine"
trans-feminine
transfeminine
transex*
transsex*
"gender incongruence"
"gender minority"
"gender dysphoria"
"gender variant*"

A structured review protocol was designed with the inclusion/exclusion criteria created in line with a modified PICo tool (Joanna Briggs Institute, 2014): **P**opulation, **I**nterest, **Co**ntext and incorporating **S**tudy design (PICS) to capture qualitative and mixed methodologies. The Joanna Briggs Institute (2014) recommends PICo for qualitative evidence synthesis, as it allows for a nuanced exploration of experiences, perceptions, and social phenomena. The inclusion of 'study design' enhances methodological transparency, ensuring a diverse range of qualitative and mixed-methods studies are captured while maintaining relevance and rigor. This approach was chosen as it is essential for synthesising complex evidence, improving the credibility and applicability of findings, and ensuring alignment with best practices in systematic reviews of qualitative research (Lockwood et al., 2015).

Seven electronic databases were searched between 15th and 25th November 2022, and again on 5th January 2024 including a review of grey literature. Grey literature refers to evidence not published through commercial publishers, encompassing materials such as legislation, government documents, annual reports, dissertations, and theses,

among others. Including grey literature allows access to diverse evidence sources and therefore reduces the risk of publication bias (Dundar & Fleeman, 2017).
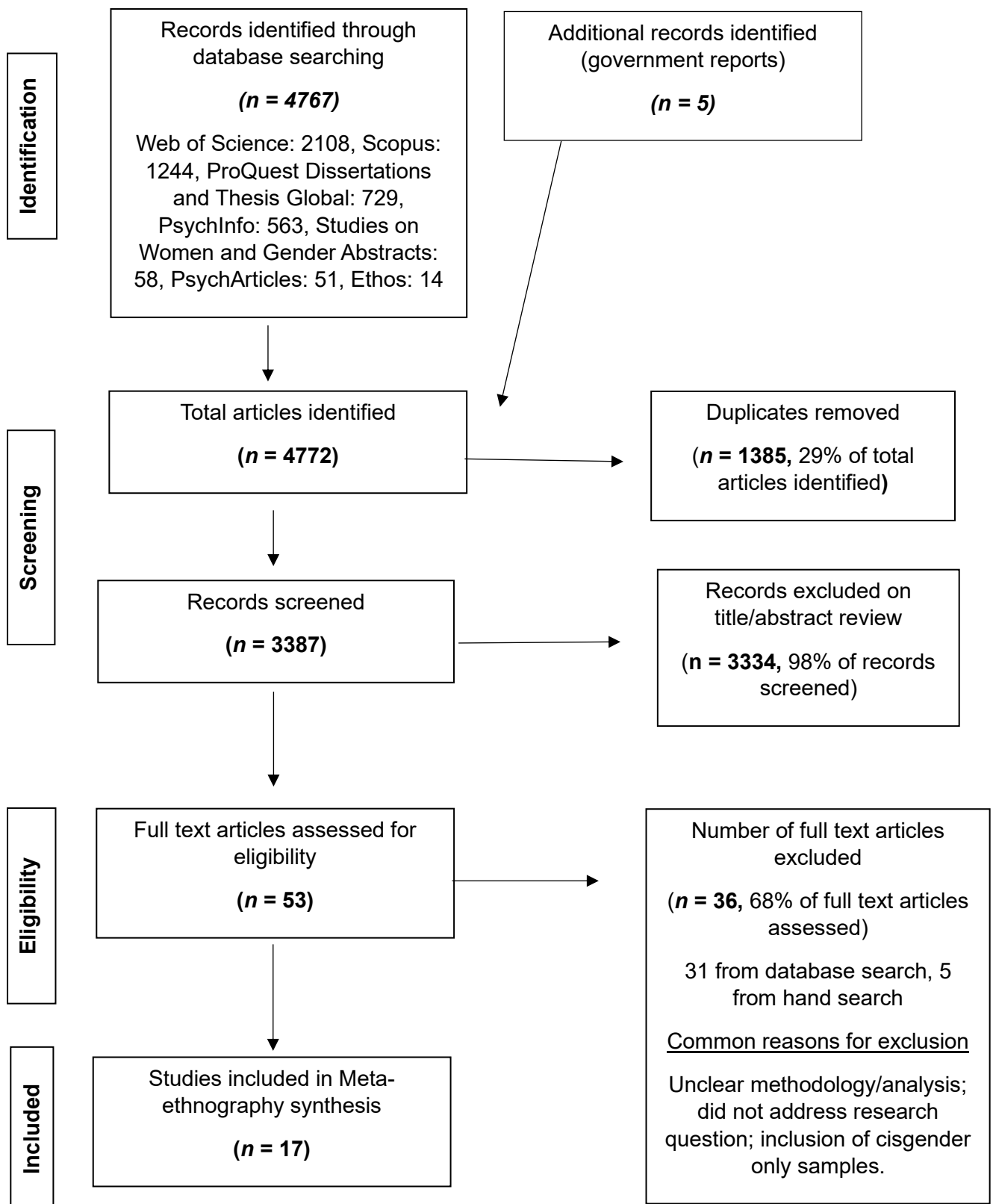
To widen the search within the current systematic review hand-searching of reference lists and correspondence with experts was undertaken. The aim of correspondence was to enquire whether prominent researchers in the area were aware of unpublished relevant research or data of relevance to this reviews question (Dundar & Fleeman, 2017). Furthermore, a search of the gov.uk website was conducted to seek relevant legislation and government documents. Five government reports were found under the topic of 'crime, justice and law' and the sub-topic 'prisons and probation'.

Article selection

Figure 4.1 outlines the article selection process, including the number of records initially identified, those excluded, and the number included in the final analysis.

Figure 4.1

PRISMA 2009 flow diagram

Identification

Records identified through database searching

(n = 4767)

Web of Science: 2108, Scopus: 1244, ProQuest Dissertations and Thesis Global: 729, PsychInfo: 563, Studies on Women and Gender Abstracts: 58, PsychArticles: 51, Ethos: 14

Additional records identified (government reports)

(n = 5)

Screening

Total articles identified

(n = 4772)

Duplicates removed

(n = 1385, 29% of total articles identified*)*

Records screened

(n = 3387)

Records excluded on title/abstract review

(n = *3334,* 98% of records screened)

Eligibility

Full text articles assessed for eligibility

(n = 53)

Number of full text articles excluded

(*n = 36,* 68% of full text articles assessed)

31 from database search, 5 from hand search

Common reasons for exclusion

Unclear methodology/analysis; did not address research question; inclusion of cisgender only samples.

Included

Studies included in Meta-ethnography synthesis

(n = 17)

Full text articles were accessed and assessed for eligibility against the inclusion/exclusion criteria. To ensure consistency and rigour in the application of inclusion/exclusion criteria, particularly in liminal cases where eligibility was unclear, decisions were discussed with my supervisors. This process supported quality assurance and helped mitigate potential bias in study selection.

The inclusion criteria specified studies were to include samples of trans+ people with a criminal record of any age, nationality and ethnicity; settings included prison, young offender institutes, police custody, mental health hospitals and military training centres; within countries identified as comparator territories with England and Wales. As identified, the literature into trans+ individuals' experiences of prison custody within England and Wales is limited. It is therefore proposed that reviewing literature from justice systems similar to England and Wales may enable us to learn more about trans+ individuals' experiences. Countries included Australia, Canada, Finland, France, New Zealand, Northern Ireland, Republic of Ireland, Scotland, The Netherlands and The United States. Comparator countries were identified by the National Audit Office as advanced democratic nations used for a comparison briefing paper on International CJS's. These countries were identified through analysis of published data regarding offences brought to justice, sentencing, prisons, reoffending, legal aid and criminal justice system costs (National Audit Office, 2012).

Studies included in the systematic review were published between 2004 and 2023. These dates were chosen to align with the implementation of significant legislation and policy frameworks that have shaped the rights and recognition of trans+ populations. Key legislative milestones, such as the Gender Recognition Act (2004) in the UK, the Yogyakarta Principles (2007) in the EU, and the Equal Employment Opportunity Commission (2009) in the USA, mark pivotal moments in the recognition of gender rights and the advancement of equality policies. These dates were selected to ensure studies reviewed reflect the evolving legal landscape and socio-political contexts surrounding gender identity and expression in comparator countries.

Fifteen studies using qualitative analysis and two mixed-methods studies were included in the meta-ethnographic synthesis. Inclusion of two mixed-methods studies followed consideration of the emphasis on qualitative analysis within their methodologies. Both studies included interviews with 315 transgender women

incarcerated in California, USA, totalling approximately 300 hours of interview data. It was considered this provided rich information regarding their experiences of being incarcerated.

Quality assessment

A quality assessment was carried out on studies included. The Critical Appraisal Checklist (Critical Appraisal Skills Programme (CASP), 2018) was used to assess all qualitative aspects. This framework was developed to support in assessing both the methodological soundness and the applicability of evidence. The checklist consists of a set of structured questions guiding users through the process of critically evaluating key aspects of research studies, including the research design, sample selection, data collection methods, ethical considerations, and the clarity of results and conclusions. Using the Critical Appraisal Checklist within the current study ensured only high-quality evidence, with clear methodology and well-documented findings, were included.

Through completion of the Critical Appraisal Checklist key strengths were identified. This included data analysis within studies being sufficiently rigorous (n = 8, 53%), for example providing an in-depth description of the analysis process and sufficient data within findings to support themes generated. Another key strength related to consideration of ethical issues (n = 7, 47%) including outlining informed consent processes, identifying whether pseudonyms were used and being transparent regarding monetary compensation provided to participants. Weaknesses related to not adequately considering the relationship between the researcher and participants (n = 11, 73%). For example, being unclear on whether the main author was part of the team of interviewers, and limited exploration into the impact of being employed by the prison estate where research was conducted.

For studies using a mixed-methods design the Mixed-Methods Appraisal Tool (MMAT; Hong et al., 2018) was also utilised. This ensures studies' qualitative and quantitative components are rigorously evaluated, and findings are robust and reliable. Two studies were reviewed using the Critical Appraisal Checklist and MMAT. Strengths included an adequate rationale for a mixed methods approach (n = 2, 100%) and components of the study were effectively integrated (n = 2, 100%). The main weakness related to not adequately addressing divergences and inadequacies between

quantitative and qualitative elements (*n* = 2, 100%). For example, it was unclear within both studies why quantitative data was being used alongside qualitative to answer the research questions put forward.

Each study was categorised as high, moderate, or low quality (see table 4.2). One study was rated as high quality, and three studies were rated as moderate/high quality. Eight studies were of moderate quality, four studies rated as low/moderate quality and one as low quality.

Table 4.2

Quality assessment of Included Articles

Authors	Overall quality assessment	Strengths and weaknesses
Brömdal et al. (2022)	Moderate-High	Strengths Participant eligibility criteria outlined. Justification for use of Thematic Analysis. Inclusion of appropriate quotes to support themes. Clear statement of findings presented. Weaknesses No justification for comparison between USA and Australia. Relationship between researcher and participants not adequately considered.
Clark et al. (2022)	Moderate	Strengths Clear statement of research aims. Justification for use of Thematic Analysis. Relationship between researcher and participants considered. Ethical issues considered. Weaknesses No justification for comparison between USA and Australia.

		Very broad themes generated.
Greene (2023)	Low	**Strengths**
		Appropriate recruitment strategy.
		Strong links to previous research.
		Relationship between researcher and participants considered.
		Weaknesses
		Ethical issues not considered.
		Unclear how themes generated.
		Unclear why Grounded Theory was applied to address research goal.
		Details regarding data collection not included.
Hebert (2020)	Low-Moderate	**Strengths**
		Research design appropriate to address aims of the research.
		Weaknesses
		Data analysis not specified.
		Ethical issues not considered.
		Relationship between researcher and participants not adequately considered.
Jenness & Fenstermaker (2014)	Moderate	**Strengths**
		Appropriate recruitment strategy to address aims of the study.
		Strong links to previous research.

		Weaknesses
		Data analysis not specified.
		Details of the study were not included, e.g. methodology and data collection.
Jenness & Gerlinger (2020)	Moderate	Strengths
		Adequate rationale for mixed methods approach.
		Qualitative and quantitative components effectively integrated.
		Clear summary of findings linking to previous research.
		Weaknesses
		Unclear how themes generated.
Jenness et al. (2019)	Moderate	Strengths
		Adequate rationale for mixed methods approach.
		Qualitative and quantitative components effectively integrated.
		Strong links between literature review and discussion.
		Weaknesses
		Interviews not audio recorded.
Lea et al. (2017)	Low-Moderate	Strengths
		Data analysis sufficiently rigorous.

		<u>Weaknesses</u>
		Relationship between researcher and participants not adequately considered.
		Findings not clearly discussed in relation to original questions.
Mallon & Perez (2020)	Low-Moderate	<u>Strengths</u>
		Ethical issues considered.
		Appropriate data collection.
		<u>Weaknesses</u>
		Unclear how themes generated.
Maycock (2020)	High	<u>Strengths</u>
		Appropriate recruitment strategy.
		Ethical issues considered.
		All identified trans+ people in prison in Scotland approached.
		<u>Weaknesses</u>
		Relationship between researcher and participants not adequately considered.
McCauley et al. (2018)	High-Moderate	<u>Strengths</u>
		Ethical issues considered.
		Data analysis sufficiently rigorous.
		Appropriate data collection.

		<u>Weaknesses</u>
		Relationship between researcher and participants not adequately considered.
Nulty et al. (2019)	Moderate	<u>Strengths</u>
		All identified trans women in the prison were approached.
		Appropriate data collection.
		<u>Weaknesses</u>
		Unclear who completed data analysis.
		Relationship between researcher and participants not considered.
Sanders et al. (2022)	Moderate	<u>Strengths</u>
		Relationship between researcher and participants considered.
		<u>Weaknesses</u>
		Unclear why data was collected across USA and Australia and then combined into one data set.
Smoyer et al. (2020)	Moderate	<u>Strengths</u>
		Appropriate data collection.
		Ethical issues considered.
		Data analysis significantly rigorous.

		Weaknesses
		Data collected from small urban area.
		Participants eligible if incarcerated in last 5 years, rationality not explained.
Sumner & Sexton (2016)	Moderate	Strengths
		Appropriate research design to address identified aims.
		Appropriate data collection.
		Weaknesses
		Relationship between researcher and participants not adequately considered.
White Hughto et al. (2018)	Moderate-High	Strengths
		Ethical issues considered.
		Theoretical basis for data analysis outlined and detailed process recorded.
		Weaknesses
		Participants eligible if incarcerated in last 5 years, rationality not explained.
		Relationship between researcher and participants not adequately considered.
Wilson et al. (2017)	Low-Moderate	Strengths
		Interview guide included.
		Discussion of modification to investigate themes raised by participants.

<u>Weaknesses</u>

Details of study not included, e.g. methodology and data collection.

Relationship between researcher and participants not adequately considered.

Limited consideration of ethical issues.

4.3 Results

Study characteristics

The oldest paper was published in 2014 (Jenness & Fenstermaker, 2014) and the most recent was published in 2023 (Greene, 2023). Of the 17 papers which met the criteria for inclusion in this systematic review, 10 were conducted within prisons (Hebert, 2020; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020, Jenness et al., 2019; Lea at al., 2017; Maycock, 2020; McCauley et al., 2018; Nulty et al., 2019; Sumner & Sexton, 2016; Wilson et al., 2017) and seven within the community (Brömdal et al., 2022; Clark et al., 2022, Greene, 2023, Mallon & Perez, 2020; Sanders et al., 2022; Smoyer et al., 2020; White Hughto et al., 2018). With respect to locations where these studies were conducted, 13 used US samples (Brömdal et al., 2022; Greene, 2023; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020, Jenness et al., 2019; Lea et al., 2017; Mallon & Perez, 2020; McCauley et al., 2018; Sanders et al., 2022; Smoyer et al., 2002; Sumner & Sexton, 2016; White Hughto et al., 2018). Four used samples from Australia (Brömdal et al., 2022; Clark et al., 2022; Sanders et al., 2022; Wilson, 2017), two from the UK (Maycock, 2020; Nulty et al., 2019) and one from Canada (Hebert, 2020). Three papers used the same data set (Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020, Jenness et al., 2019) and one paper (Clark et al., 2022) utilised datasets from two other papers (Brömdal et al., 2022; White Hughto et al., 2018).

With respect to the methodologies applied, 15 papers used qualitative analysis including Grounded Theory, Interpretative Phenomenological Analysis (IPA) and Thematic Analysis (Brömdal et al., 2022; Clark et al., 2022; Greene, 2023; Hebert, 2020; Jenness & Fenstermaker, 2014; Lea et al., 2017; Mallon & Perez, 2020; Maycock, 2020; McCauley et al., 2018; Nulty et al., 2019; Sanders et al., 2022; Smoyer et al., 2002; Sumner & Sexton, 2016; White Hughto et al., 2018; Wilson, 2017) and two adopted a mixed methods approach using a combination of self-reported survey responses, semi-structured interviews as well as using logistic regressions on data from official prison records (Jenness & Gerlinger, 2020; Jenness et al., 2019). Three studies had samples of 5 or less (Nulty et al., 2019; Smoyer et al., 2002; Wilson, 2017), with optimal sample sizes for IPA and Thematic Analysis (the analysis tools used) suggested to be between 4-10 (Smith et al., 2022) and 6-10 respectively (Fugard & Potts, 2014). Table 4.3 outlines the key findings extracted from the data.

Table 4.3

Data extraction

Authors, date, country	Sample and setting	Data collection	Analysis	Findings
Brömdal et al. (2022)	4 trans women (Australia) 20 trans women (USA).	Semi-structured interviews	Thematic Analysis	Trans institutionalism (self and the total institution), trans intimacy (self and relations with others) and trans bodily sovereignty (expressing femininity) were
Australia & USA	Community			identified as factors defining the relationships incarcerated trans women navigated when enacting their intimate citizenship.
				Narratives illustrated self-sufficiency, and innovative and proactive ways to subvert institutional policies and practices by exerting influence over spatial assignment, embodying,

				expressing and enacting femininity, and engaging in socio-emotional, strategic, romantic and friendly relationships.
Clark et al. (2022) Australia & USA	9 trans women (USA) 3 trans women (Australia) Community	Semi-structured interviews	Thematic Analysis	The oppression-to-incarceration cycle developed through interviews with Black American and First Nations Australian trans women documents how trans health inequities are produced, maintained, and exacerbated by the carceral system and presents an application of the Research for Transgender Health Justice framework. This conceptual model seeks to name intersecting power relations, disrupt the status quo and centre embodied knowledge in the lived

				realities of formerly incarcerated Black American and First Nations Australian trans women.
Greene (2023)	32 trans people or within the spectrum of trans femme	Semi-structured interviews	Grounded Theory	This article shines attention on the experiences and subjective meanings of incarcerated trans women.
USA	Community			Examining incarcerated women's insurgent agency through their engagement in everyday life clarifies the multiple structures of domination institutionalised by the prison. It is not patriarchy alone but intersections of race, gender, and class oppression that prisons consolidate and that incarcerated trans women navigate in the course of making lives behind bars.

Hebert (2020)	13 trans+ people in prison	Anthropological fieldwork	*Does not specify*	Participants were invested in a process of balancing the possible benefits of new rights-based accommodations against their possible consequences.
Canada	Prison			
				Gender self-determination is one among many aspects of life in prison that trans+ people contend with to survive.
				Participants were engaged in balancing acts involving mitigating immediate threats to their safety and staff's "arbitrary exercises of power" and managing the emotional and interpersonal dimensions of prison life.
Jenness & Fenstermaker (2014)	315 trans women	Semi-structured interviews	*Does not specify*	The prison environment sets the stage for embodiment to be understood as unforgiving

USA	Prison			("Everyone knows") and eminently deniable ("Who cares?"). Through the pursuit of the real deal, gender expectations remain and demand trans+ people's behaviour reflects an inherent femininity.
Jenness & Gerlinger (2020)	315 trans women	Semi-structured interviews	Mixed-methods analytic strategy	Participants revealed a commitment to an authentic self that is as essential as it is undeniable. They revealed considerable attentiveness to expressions of femininity as an expression of identity.
USA	Prison			Transgender women in prison perceived themselves to be more feminine while incarcerated than prior to incarceration. Feminine behaviour and their presentation of self was identified as a method

				whereby respect could be accrued in prison.
Jenness et al. (2019)

USA | 315 trans women

Prison | Semi-structured interviews | Mixed-methods analytic strategy | Incident reports of transgender women being groped and fondled in unwanted ways and against their will were frequently narrated by participants as part and parcel of being trans+ in prison.

Sexual victimisation began as a consensual relationship and evolved to become recognisable as sexual assault. Transgender women navigate these experiences in complex ways, as they frequently occur in a context where the pursuit of male companionship is significant, often involving men with whom they seek consensual, intimate, |

				romantic, and monogamous relationships.
Lea et al. (2017) USA	17 cis men or trans women Prison	Secondary analysis of semi-structured interviews.	Grounded theory	Findings illuminate participants' experiences concerning how the correctional facility shaped their sexual choices and behaviours, and the HIV-risk reduction strategies they employed.
Mallon & Perez (2020) USA	15 young people Community	Semi-structured interviews/focus groups.	Grounded theory	Trans+ youth expressed frustration about the ignorance of the juvenile justice professionals they encountered. Preventing trans+ youth from expressing their gender identity or punishing them for doing so increases the distress they experience; undermines their emotional stability; and interferes

				with their care, treatment and rehabilitation.
Maycock (2020) Scotland	13 trans+ people (11 trans women and 2 trans men) Prison	Semi-structured interviews.	Inductive Thematic Analysis.	The study looked at the 'pains of imprisonment' specifically for trans+ people. It identified the pains of being in the wrong hall and in the wrong clothes, the pains of transitioning in custody, the pains of isolation and the pains of transphobia. The influence of prison staff culture on trans+ people having negative experiences was highlighted throughout.
McCauley et al. (2018) USA	10 trans women Prison	Semi-structured interviews	General inductive approach.	Respondents reported issues with special housing assignments and the use of segregation or solitary confinement.

				Participants reported struggling with mental health issues, experiencing a lack of access to adequate mental healthcare, and an increase in mental health symptoms during imprisonment.
Nulty et al. (2019) England & Wales	3 trans+ people in prison Prison	Semi-structured interviews	Interpretative Phenomenological Analysis (IPA)	Three subordinate themes were identified linking to accounts of struggling against victimisation, fighting for their rights and their struggle to comprehend the practicalities involved in transitioning. The ways in which trans+ people in prison express their own identity, and how others view them, was an important theme within the analysis.

| Sanders et al. (2022) | 4 trans women (Australia) 20 trans women (USA). | Semi-structured interviews | Thematic Analysis | The paper identified that while the function of the prison cell enabled by the single occupancy policy seeks to protect the trans+ person from harm, the determination towards and reliance upon uncovering the trans+ person's gender origin puts trans+ people further in harm's way. |
| Australia & USA | Community | | | The curiosity of the Other denotes a marked departure from a space where trans+ people are at risk and use their body as a commodity with other incarcerated persons or prison officers to survive their prison sentence, to gain protection, to be free from various forms of punishment and |

				victimisation, for food, canteen and other commissary items.
Smoyer et al. (2020)	5 (3 cisgender women and 2 trans men)	Semi-structured interviews	Thematic Analysis	Narratives were shared about the challenges of living in a masculine body under the belligerent and incessant gaze of the Custodial
USA	community			Officers.
				A defining characteristic of the carceral experience for the transgender men was the overwhelming attention they received from incarcerated women.
Sumner & Sexton (2016)	10 trans+ people in prison	Semi-structured interviews/focus groups	Inductive Analysis	While respondents' descriptions of trans+ people on prison implicitly addressed how this group is
USA	Cisgender people in prison/staff.			situated within the larger prison culture, these descriptions were often followed by more explicit

	Prison			discussions about the position trans+ people occupy relative to others.

The strong stated and desired commitment to equity through equal application of the same policies and rules stands in stark contrast to the reality transgender women are uniquely situated in men's prisons. |
| White Hughto et al. (2018)

USA | 20 trans women

Community | Semi-structured interviews | Iterative and inductive approach | The study highlighted an institutional culture in which transgender women are regularly ridiculed for having a feminine gender expression.

Participants' prior and anticipated experiences of mistreatment in correctional settings, including with healthcare providers, shaped |

				their behaviour while incarcerated. For some participants, the fear of being treated poorly by providers, custody staff, and peers led them to conform to male gender norms and reinforced the gender binary, while others actively resisted the gender binary by maintaining and/or amplifying their feminine gender expression.
Wilson et al. (2017) Australia	5 trans+ people in prison Prison	Semi-structured interviews	*Does not specify*	Findings focused on experiences of sexual violence including links with violent assault, everyday harassment and coercion, diversity and ambiguities for sex, personal/individual strategies for keeping safe and upholding dignity, placement in women's prison as policy strategy for keeping safe.

Three superordinate themes were apparent relating to the structural, interpersonal and intrapersonal influences of trans+ people's lived experiences in custody. The structural level refers to the influence of factors such as legislation set at a national level and policies that exist across the prison service and within prisons on aspects such as where trans+ people reside whilst in custody. The interpersonal level explores the relationships between trans+ people and others within custody, including trans+ peers, cisgender peers and staff. It examines, for instance, trans+ individuals seeking companionship while navigating relationships with professionals and facing victimisation due to their gender identity. The third level, intrapersonal, focuses on personal characteristics of participants and how these influence, or are influenced by, their experiences. A summary of superordinate and subordinate themes is available in table 4.4.

Table 4.4

Summary of identified themes

Superordinate Themes	Subordinate Themes
1. Structural level	a. Knowledge and implementation of gender diversity policies
	b. Living spaces
2. Interpersonal level	a. Victimisation
	b. Companionship
	c. Interactions with professionals
3. Intrapersonal level	a. Transitioning when detained within a gendered establishment
	b. Strategies for survival

1. Structural level

The first superordinate theme considered how structural and systematic factors, including legislation, policies, and decisions made by prison management in relation to the care of trans+ people, influenced lived experiences.

1a. Knowledge and implementation of gender diversity policies

Trans+ people in prison expressed scepticism of policy implementation, suggesting some staff exerted discretion which they felt resulted in limited access to their entitlements (Sumner & Sexton, 2016). For trans women, examples included access to make-up and prosthetics, which trans+ participants felt were not authorised due to a lack of motivation to complete necessary administrative processes (Maycock, 2020). When attempting to meet their own needs they felt challenged by staff for policy violation, for example, wearing make-up (Clark et al., 2022; White Hughto et al., 2018). Some trans+ people also developed a detailed understanding of current policies to ensure awareness of their rights and enable them to make informed decisions. For example, Brömdal et al. (2022) reported some trans+ participants were aware of a choice to reside within the general population or protective custody, despite feeling staff tended to actively encourage the latter. Trans+ people perceived "policies of segregation seeking to contain TGD persons in physical enclosures such as sole occupancy cells and isolation attempt to keep the whole cisnormative institution safe from being marred or blurred by trans-ness" (Sanders et al., 2022, p.12). It was clear they felt a need to have a detailed knowledge of the policies within their establishments to be able to advocate for their own rights, rather than policies providing adequate care and management.

Many studies which identified difficulties relating to policy implementation were conducted in Australia and/or the USA (Brömdal et al., 2022; Sanders et al., 2022; Sumner & Sexton, 2016; White Hughto et al., 2018), where policies varied by state/jurisdiction. As noted above, some trans+ individuals developed a detailed understanding of policies to assist them in making informed decisions and/or advocating for themselves. Therefore, people residing in prisons across states/jurisdictions may find it difficult to develop such as detailed understanding due to the variation in policy content. For example, in both Australia and the USA guidance varied across states/jurisdictions on the use of segregation, access to personal items that facilitate gender affirmation (e.g., cosmetics), and accommodations being made for gender identity or expression (MacDonald et al., 2022; Winter, 2023). Therefore, trans+ people may have rights within a state/jurisdiction they were previously located which are not relevant to their current location.

When implementing policies which meet the needs of trans+ people, it was unclear whether staff discretion was, overall, perceived as positive or negative. Trans+ participants considered all decisions were subject to staff discretion (Wilson et al., 2017) and although they expressed concerns regarding policy implementation, it may be inferred they would prefer staff to exert discretion to meet individual needs and avoid being treated as a homogenous group.

1b. Living spaces

Published work reviewed included views on the most appropriate living spaces for trans+ people in prison. Trans+ participants within three studies perceived being placed in a male facility as positive. One reason presented by trans women included enjoying the company of males, which was felt to be associated with their sexual attraction towards men (Mallon & Perez, 2020). The risks of sexual and physical abuse trans women residing in the male estate may be vulnerable to was acknowledged in one study (Wilson et al., 2017) and for such reasons trans+ individuals in male estates were offered protective custody. This did not only refer to isolation but to shared spaces with vulnerable peers, including those who had committed sexual offences. Trans+ participants reported that sharing living spaces with vulnerable peers placed them at risk of sexual abuse (McCauley et al., 2018) and in response some refused protective custody (Brömdal et al., 2022). Through such refusals they were likely to be housed in the general prison population, where they are perceived to be at greater risk.

Despite these concerns some trans+ participants chose to remain in a male establishment, perceiving women's prisons as more aggressive. They reported the women's estate to be 'rougher' and considered they would be at greater risk of harm from cisgender women residing there (Jenness & Fenstermaker, 2014). Concerns were also expressed by trans women regarding sharing spaces with cisgender women due to the non-empirically supported theory they would be experiencing hormonal changes at the same time because of syncing menstrual cycles. They perceived this would cause cisgender women to behave more viciously. Trans women were torn regarding their preferred location, wanting to spend time with women but being unsure how well they would get along, potentially due to a lack of experience of socialising in a female space whilst in a female gender role. They were also concerned with women's prisons being an

unknown environment compared to male prisons, where they were more familiar with both the daily regime and interactions with male peers (Jenness & Fenstermaker, 2014; Wilson et al., 2017). Such discussions were however hypothetical, as participants who identified these concerns resided in countries where there were limited options for them to choose to reside in an establishment which aligned with their gender identity. This was due to the countries where these findings originated (Australia and USA) having policies which outlined allocation of trans+ people to be based on their sex as assigned at birth (MacDonald et al., 2022; Winter, 2023).

An alternative perspective regarding living spaces was presented by two participants within separate studies suggesting all trans+ people should be housed together in prison. The rationale being this would create a harmonious environment through eliminating real and perceived gender identity-based risks from peers, through removing those considered to be 'at risk' (McCauley et al., 2018; Wilson et al., 2017). The views expressed suggested trans+ people were a homogenous group who would 'harmoniously' live together. Such a simplistic view that removing trans+ people from the main prison population would reduce risks posed to them, and others, does not however address the underlying transprejudice experienced by trans+ people.

With respect to the trans men included within reviewed studies, Hebert (2020) reported a risk of sexual assault if placed in a male prison, suggesting a female establishment would be more appropriate. Concerns were also expressed regarding a risk of pregnancy and the lack of provisions to care for those who were pregnant within the male estate. Concerns regarding pregnancy were also expressed for the women's estate, despite available provisions. Such views are reflected within the reformed HMPPS 'care and management of individuals who are transgender' policy, which outlines trans women with male genitalia should not reside within the women's prison estate (HMPPS, 2024b). It is assumed such concerns relate to trans women who have not physically transitioned, based on a supposition they could impregnant cisgender women. The focus appeared to relate to the biological function of individuals' anatomy, with limited consideration of potential desires to transition, sexual orientation and/or feelings towards their anatomy.

2. Interpersonal

Interpersonal relationships between trans+ people and others (cisgender people, LGBTQ+ people and staff) within prison were identified through all studies analysed, including how these impacted upon their experiences of custody.

2a. Victimisation

Trans+ participants across all studies reported victimisation based on their gender identity, by both staff and by peers in prison.

Victimisation by staff

Trans+ people in prison felt targeted by staff because of their trans+ status, experiencing transnegativity and misgendering. Sexual behaviour and assaults by staff were reported within four studies (Brömdal et al., 2022; Clark et al., 2022; Greene, 2023; Smoyer et al., 2020). As well as direct sexual abuse, it was perceived staff did not protect trans+ individuals from abuse by ignoring complaints or concerns for safety and only accommodating individual needs when legally required (Mallon & Perez, 2020).

Only one account within Sumner and Sexton (2016) identified how staff positively assisted trans+ people, such as using discretion and being respectful; "Courtesy" of letting "girls with very large breasts...wear a t-shirt in the shower" or taking extra care to be professional in searches in order to pre-empt the potential filing of a grievance" (Sumner & Sexton, 2016, p.635). However, the motivation appeared to be the avoidance of negative repercussions for staff rather than out of a desire to respect trans identities.

Victimisation by peers

Trans women reported experiencing violence (physical and sexual) and threats to kill both within and outside of intimate relationships within custody (Jenness at al., 2019; Sumner & Sexton, 2016). Even when isolated, a trans+ participant reported not being protected as others would make unsolicited comments and bang on their door (Sanders et al., 2022). When comparing their lived experience within custody to within the community, there were mixed reports of where individuals felt safer. For some custody was a safer environment to transition, experiencing less hate crime than within the community (Sumner & Sexton, 2016). Others experienced higher levels of

transnegativity within custody, making transitioning more difficult (Maycock, 2020). These experiences focused within male prisons, and although some participants felt safer within custody, this did not mean they felt safe.

A focus within the studies by Wilson (2017) and Hebert (2020) of experiences within women's prisons identified trans+ participants did not feel scared; "sexual violence in the women's centres is non-existent really" (Wilson, 2017, p.393). However, this contrasts other accounts within Hebert (2020) which reported denigrating comments and harassment from both staff and people living in prison. In general, higher levels of victimisation were reported within the male prison estate, with more varied reports from the women's estate.

2b. Companionship

The reviewed studies suggest for some trans+ people, particularly those expressing their gender identity for the first time in custody, seeking companionship with peers may serve as a way to explore their sexual orientation. Since gender identity and sexual orientation are distinct, trans+ people may navigate this exploration within their expressed gender identity, as some may experience shifts in sexual orientation upon its expression.

Some trans+ people sought companionship through relationships representative of a traditional husband/wife and although participants felt supported by their partners these were not necessarily described as loving, potentially being more practical in nature to affirm their gender identity (Brömdal et al., 2022; Jenness & Fenstermaker, 2014). Some trans+ participants did however report experiencing loving relationships (Wilson et al., 2017). They also experienced companionship through sexual relationships, although this was not sought by everyone, with some participants wanting to avoid sexually transmitted infections whilst others "set particular standards" and did not want to "bend over" for anyone as it would be "denouncing"" (Brömdal et al., 2022, p.17).

Despite some trans+ participants wanting sexual and romantic relationships there were reports of abuse, including threats, violence and jealousy. One survival strategy was the use of sex to appease male partners, such as performing oral sex as a means of calming partners or reassuring them (Jenness et al., 2019).

2c. Interactions with professionals

Most studies provided details regarding trans+ peoples interactions with professionals in custody. This focused on negative interactions, including poor communication, transprejudice and a lack of understanding of trans+ individual's needs. When interacting with healthcare staff, trans+ participants reported a lack of respect for feminine gender identity, use of male pronouns and being denied hormone treatment (Clark et al., 2022; Greene, 2023; McCauley et al., 2018; White Hughto et al., 2018). When discussing interactions with custodial officers, views of mistreatment were commonplace. Trans+ participants reported avoiding contact, where possible, with officers who negatively targeted them because of their gender identity (Mallon & Perez, 2020; Smoyer et al., 2020). It was also perceived staff misinterpreted the behaviour of some trans women who felt they needed to present as hyper-feminine to be accepted by others (Hebert, 2020), as attention seeking, being flamboyant and promiscuous (Mallon & Perez, 2020; Sumner & Sexton, 2016).

Trans+ participants interpreted their interactions with staff to be influenced by transprejudice and a lack of understanding. One respondent felt "they have no, no special insight whatsoever into transgenders[i]" (Wilson, 2017, p.393). Some participants expressed their gratitude for staff who took time to know them and work with them effectively (Nulty et al., 2019; White Hughto et al., 2018).

In response to negative interactions with staff, protocols are in place for people in prison to submit complaints. Five papers included comments by trans+ participants on staff responses to complaints, with them feeling these were either ignored or staff did not address them due to policy restrictions. It was also considered there would be negative consequences for trans+ individuals raising concerns, such as being moved establishments, being placed in protective custody or staff making life difficult, such as finding reasons to suggest a failure to comply with prison policies (Brömdal et al., 2022; Maycock, 2020). These examples support concerns raised by trans+ participants that policies either were not adhered to or could not be relied on for support and protection.

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[i] Participants own words and not terminology endorsed by the researchers.

3. Intrapersonal

Experiences at an intrapersonal level were reported, with the analysis considering how these would be influenced by others.

3a. Transitioning when detained within a gendered establishment

Participants explored their understanding of their gender identity and experiences of transitioning within custody. It was evident there was a contrast in what participants understood by the term 'transitioning', whether this referred to social transitioning, for example a change in identity presentation, or medical transitioning, e.g., changes endorsed by hormones or undergoing surgery.

For one trans woman understanding their gender identity included feelings of having "tendencies as a girl" (Jenness & Fenstermaker, 2014, p.15), and recognising themselves as different from cisgender women due to their internal anatomy. One participant described themselves as an illusion due to presenting as female but having male anatomy (Jenness & Fenstermaker, 2014). To express femininity, individuals identified creative means such as using everyday items to make jewellery and drawing on feminine eyebrows with pen (Brömdal et al., 2022; Clark et al., 2022; White Hughto et al., 2018). Participants in the study by Nulty et al. (2019) identified after hiding their gender identity they experienced feelings of joy and liberation when able to authentically express themselves in custody. In contrast other studies generally reported negative experiences of transitioning in prison, including a lack of access to hormones (Maycock, 2020; McCauley et al., 2018; White Hughto et al., 2018) and feeling the only difference was a name change (Maycock, 2020).

3b. Strategies for survival

Across most studies was evidence of trans+ people adopting strategies to survive discrimination and abuse experienced within custody. Many would be considered maladaptive coping strategies, such as avoiding others, concealing femininity, suicidal ideation and use of violence. Strategies for survival also included refusing to share living spaces, or trans women not taking prescribed hormones to 'butch up' and remain within the general prison population. Trans+ participants perceived if they showed they were willing to use violence, others would understand they could stand up for themselves (Brömdal et al., 2022). Despite the expressed

importance of femininity, trans women identified embracing masculinity when beneficial "when I'm mad, the dude part would always come out" (Smoyer et al., 2020, p.180), taken to mean using aggressive behaviour. Trans women reported not wanting to fight as this went against their idea of femininity, however if physically assaulted or disrespected would be unapologetic about responding with violence to defend themselves (Brömdal et al., 2022; Greene, 2023; Jenness & Fenstermaker, 2014; Wilson et al., 2017). Trans+ participants also aimed to defend what they felt entitled to within custody, either challenging the system themselves or involving lawyers (Nulty et al., 2019; White Hughto et al., 2018).

To survive, trans+ participants identified a need to remain psychologically strong through refusing to comply with inappropriate requests for sexual acts from staff and peers (Mallon & Perez, 2020; Nulty et al., 2019) or using the perception "everyone's vying for your attention...you're literally a star" to their advantage (Sanders et al., 2022, p.17). Some became involved in relationships for protection, identifying cisgender males who wanted to take care of them (Greene, 2023; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Wilson et al., 2017). Although as discussed within the sub-theme 'companionship' (p.92) some such relationships included sexual abuse, threats, violence and jealousy.

From the literature it suggests trans+ people were required to rely on their own strategies for survival. These did however appear to serve as short term solutions, with more long-term negative consequences likely to emerge.

4.4 Discussion

The aim of this review was to critically and systematically analyse the available international literature examining experiences of detained trans+ people in countries with comparable CJS's to England and Wales. Overall, this review found trans+ people generally reported negative experiences of custody at a structural, interpersonal and intrapersonal level.

The majority of studies included in the meta-ethnographic synthesis explored experiences of trans women residing in male prison establishments. Therefore, the focus was on femininity with less exploration of experiences of trans men or non-binary people in custody. Also, as most research came from prisons in the USA, specifically

California, there are cultural differences to consider in prison management between the USA and UK. Prisons in the USA tend to be run through more coercive means, including allowing prison staff to carry firearms (James et al., 1997). Gorden at al. (2017) also suggest much USA research on trans+ people is within state prisons, described as being overcrowded with minimal purposeful activities. It is therefore anticipated experiences reported within these studies would be more negative compared to those within the UK as, for example, the HMPPS policy for England and Wales at the time of the study by Nulty et al. (2019), in principle supported trans+ people residing within appropriate establishments and allowed for their gender expression. However, through review of the study it was considered such support was not always available. It is important to consider Nulty et al. (2019) had a small sample size from one male establishment, making it difficult to develop a clear understanding of how effectively the policy is implemented across HMPPS. Furthermore, as considered within the results, since 2022 this policy has been reformed, making it more difficult for trans women to request to reside in the women's prison estate.

The variation in policies across countries, as well as within countries, potentially impacted upon the ability to compare lived experiences of trans+ people in custody. However, regardless of the geographical location of prisons included within studies, the effective implementation of policies was called into question through this analysis. For example, the use of negative survival strategies was reported throughout studies due to ineffective implementation of policies to support the needs of trans+ people in custody. Developing policies which meet the needs of trans+ people would work towards reducing the need for survival strategies. Developing positive means of coping, such as support groups and developing positive interpersonal relationships, would minimise the need for trans+ people to put themselves at risk within abusive relationships or through protective custody.

Within the UK and the USA, trans+ peoples living spaces in prison is a contentious issue, not only discussed and considered by those with lived experiences but also within political contexts. This is evidenced through the 2022 UK policy reform, as discussed in the sub-theme 'living spaces', and through the 2025 USA Presidential action entitled 'Defending women from gender ideology extremism and restoring biological truth to the federal government' (The White House, 2025). This Presidential

action outlines "the administration will defend women's rights and protect freedom of conscience by using clear and accurate language and policies that recognise women are biologically female, and men are biologically male" (The White House, 2025). To comply with this action all trans women residing within women's prisons have been transferred to the male estate, including individuals who had gender-affirming surgeries prior to incarceration (Johnson & Levin, 2025). The exception is a small number of trans women taking legal action against this reform, arguing irreparable harm would occur were they to reside within the male prison estate (Johnson & Levin, 2025). The impact on prisons in the UK of the April 2025 Supreme Court ruling is yet unknown.

Decisions made regarding trans+ peoples living spaces in prison are dependent upon perceptions of risk to others, with trans+ people expressing that a risk to them is managed through isolation. From the findings discussed it would appear there is a lack of knowledge around housing policies and what factors should be considered when making decisions about the housing of trans+ people in prison. A lack of understanding of challenges faced by trans+ individuals can lead to decisions that either inadvertently harm or neglect their well-being, safety, and rights. Without a comprehensive understanding, policies could be ineffective or even discriminatory, an argument supporting the legal action brought by trans women in prison against the 2025 USA reform (Johnson & Levin, 2025). Further research exploring trans+ peoples experiences in custody, needs and risks (to themselves and others), would assist in developing such understanding. It is important research is used to inform policies which affect trans+ people in custody and training programmes for staff. This is especially relevant for the UK and USA where recent policy reforms have had direct implications for where trans+ people are able to reside in prison.

As identified through this systematic review there is a paucity of research regarding trans+ peoples experiences of prison custody, especially within England and Wales. The aim of this review was to compare experiences of trans+ people within CJS comparable to England and Wales, to assist in developing some understanding of their experiences within these countries. As identified, there are difficulties in undertaking such a comparison due to cultural differences and variations in policies, for example.

Empirical contributions can be made however through using the findings to develop policies which more effectively support and manage trans+ people in prison.

For example, developing staff understanding around trans+ people's needs and experiences would improve life for those in prison, with suggestions that reducing victimisation can increase individual's confidence in successful reintegration into society (Cid et al., 2021). It is proposed reviewing staff training would help ensure it is fit for purpose and avoids risking either not fully addressing/challenging prejudices and negative attitudes or is perceived as a token offering. This systematic review further highlights the importance of trans+ individuals' needs being met, such as having access to gender-affirming items and consistent use of correct pronouns. It is therefore proposed policies should ensure limited ambiguity or options for staff discretion, which could have negative impacts on trans+ individuals. Such considerations would work towards creating gender inclusive environments.

Through review of the current international literature, whether there are consistent psychological theories underpinning policies addressing the care and management of trans+ people in custody is unclear. To inform a gender inclusive environment and effectively implement policies, reviewing psychological theories which influence content of policies would be beneficial in understanding what informs decision making. Consideration of how theories which influence behaviour change and help seeking behaviour could assist in developing policies, would also be beneficial. However, in the context of increasingly trans-oppressive policies emerging in many parts of the world, these considerations take on a heightened urgency. In many instances, policies are being developed and implemented in ways that fail to account for the specific psychological needs of trans+ individuals, or worse, actively exacerbate the challenges they face. The rise of such policies is often influenced by broader societal shifts towards transnegativity, which manifests in institutional practices overlooking or actively harming trans+ people in prison. Without integrating psychological theories promoting inclusivity, equity, and mental well-being, these policies risk further marginalising an already vulnerable group.

Alongside this further research into the lived experiences of non-binary people within prison in England and Wales would improve understanding of what works and how the service could be improved. Existing research often frames trans+ individuals as a homogenous group, applying a transnormative narrative to understand their experiences (Tatum et al., 2020). Research conducted into the experiences of trans+

people in prison has mostly focused upon trans women residing in male prisons, however we cannot automatically assume this would relate to all trans+ people in prison and to those residing within women's prisons. Therefore, further research would also benefit from exploring this underrepresented group. Understanding how a minority group within custody interprets services delivered and their views on improvements would assist in evaluating how effectively gender diversity policies are implemented, suggest further recommendations for amendments to relevant policies, and identify potential training needs.

Limitations

A limitation of the present systematic review is the potential for publication bias, which may have influenced the comprehensiveness and representativeness of studies included. Despite an intentional effort to incorporate grey literature, only five articles were identified during the initial search, all of which were sourced from the UK Government website. Upon further assessment of these articles for eligibility all five were excluded, primarily due to their lack of clarity regarding methodology and/or analysis. As a result, the final sample lacked sufficient representation of grey literature, thereby raising concerns about possible publication bias.

Another limitation concerns the application of meta-ethnographic synthesis, which serves as the methodological framework for this review. Meta-ethnography is inherently focused on the synthesis of qualitative data, yet studies included in this review employed varying research methodologies and were situated within diverse contextual frameworks. This variation posed challenges in applying a coherent and consistent qualitative synthesis across studies. Furthermore, this diversity in study designs and contexts introduces the risk of interpretation bias, as the synthesis process may inadvertently prioritise certain findings over others due to nuances in methodology and researchers' interpretations of qualitative data. This should be acknowledged as a limitation when drawing broad conclusions from the synthesised findings.

4.5 Conclusion

In response to these recommendations, chapter 5 reports an empirical study which explores the lived experiences of trans+ people within the women's prison estate in England and Wales. Variations in policies across countries, identified within this

systematic review, potentially impacts upon the ability to compare lived experiences of trans+ people in prison. This is due to cultural differences influencing policy content and implementation, as well as variations in policies within countries by state or jurisdiction for example. Therefore, focusing on prisons within England and Wales reduces the potential impact of policy variations on people's experiences.

A qualitative methodology is used for an in-depth exploration of participants' perspectives and experiences (Brooks et al., 2018). It is considered such depth is required to understand the complex phenomena of being trans+ in custody and give voice to this marginalised group. Purposeful sampling identified trans+ people within the women's prison estate. Including trans and non-binary people within the study aimed to understand of the impact of gendered prisons on those who do not fit a gender binary system. Through this study a rich understanding of the lived experience of trans+ people within the women's prison estate in England and Wales is gained and suggestions put forward for amendments to allow for increased support and safety for trans+ people in prison.

Chapter 5: Exploring the lived experiences of trans+ people residing in the women's prison estate in England and Wales

5.1 Introduction

As identified through the systematic review (chapter 4) there is a paucity of research regarding trans+ people's experiences of prison custody, especially within England and Wales. Also, research which has been completed often frames trans+ individuals as a homogenous group, applying a transnormative narrative to understand their experiences (Tatum et al., 2020). With research conducted into the experiences of trans+ people mostly focusing upon trans women residing in male prisons (e.g. Brömdal et al., 2022; Clark et al., 2022; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Jenness et al., 2019; McCauley et al.; 2018; Nulty et al., 2019; White Hughto et al., 2018), it cannot automatically be assumed this would relate to all trans+ people in custody and to those residing within women's prisons.

Furthermore, to date there has been no specific empirical work completed within women's prisons, especially with trans men, non-binary, and/or gender fluid individuals. It is presumed this may be due in part to the small sample size available, with official 2023 statistics reporting there were 227 trans+ people in custody and of these only 49 reported their gender identity as transgender male and 11 as non-binary (HMPPS, 2024a). An additional reason may be how concerns are discussed within political contexts regarding the potential risks posed by trans women towards cisgender women, including a perception of an increased risk of violence and sexualised behaviour (Lawford-Smith, 2023). Therefore, research resources may have focused more on trans women in prison compared to trans men, regarding whom less concerns are raised. With most people in custody residing in prisons which align with their sex as assigned at birth, the majority of trans women are located within the male prison estate (HMPPS, 2024b; Newburn, 2017).

The current study therefore aims to address the issue that we do not understand experiences of trans+ people within women's prisons. To include all trans+ identities within this study would explore the impact of gendered prisons on those who do not fit a gender binary system based upon sex as assigned at birth. For example, research conducted by Bolger et al. (2014) in Australia suggested those who identify as genderqueer find the social constructions of binary gender identities oppressive and

distorting. Therefore, exploration into how these feelings manifest or are dealt with within gendered prisons would expand our understanding of the impact of such systems. This would provide valuable insight into the lived experiences of non-binary and gender fluid people in prison, for which there is very limited peer reviewed research identified worldwide (Richards et al., 2016). The main aim of the current study will therefore be to explore the lived experiences of all trans+ people residing in the women's prison estate.

As identified from the systematic review, variations in policies across countries potentially impact upon the ability to compare the lived experiences of trans+ people in prison. This is due to cultural differences influencing policy content and implementation, as well as variations in policies within countries by state or jurisdiction for example. The current study therefore aims to focus on prisons within England and Wales, to reduce the potential impact of policy variations on experiences.

This study will seek to answer the question; what is the lived experience of trans+ people residing in the women's prison estate in England and Wales?

5.2 Method
Design

A qualitative methodology was used to answer the research question posed. Qualitative methodology allowed for an in-depth exploration of participants' perspectives and experiences (Brooks et al., 2018). Such depth is required when understanding complex phenomena, such as experiences of a marginalised group within prison custody and gives a voice to marginalised and underrepresented groups. Hale (2006) recognises the importance of incorporating the voices and personal accounts of trans+ people into research recognising them as the experts in their own lives. To enable participants to tell their stories in their own words, semi-structured interviews were utilised with framing questions designed to elicit discussions. Facilitating an interaction which would allow participants to provide in-depth, detailed, accounts of their experiences within prison was considered imperative to gain the understanding which is missing from the current literature base.

When deciding on the most suitable qualitative tool to address the research question of exploring individuals' experiences, consideration was given to Grounded

Theory (Glaser & Strauss, 1967), Thematic Analysis (TA: Braun & Clarke, 2006) and Interpretative Phenomenological Analysis (IPA; Smith, 1996) in particular. Grounded Theory was not considered appropriate for this research project due to its focus on theory development of an under-researched phenomenon. This was not in line with the research question, with the aim being to explore experiences and views of trans+ people in custody and consider what these mean for them.

Although TA can be used to focus on individual experiences it aims to identify overlaps between these experiences (Braun & Clarke, 2006), potentially losing some of the unique aspects of individual accounts. IPA was therefore identified as the most suitable method allowing for the identification of meaning that experiences and events hold for individual participants (Smith, 1996). This was important due to the suggestion from the systematic review that trans+ people in prison are often treated as a homogenous group. The focus of the current study is to provide a voice to individual trans+ people whilst exploring their unique experiences.

IPA has three primary theoretical underpinnings; i) phenomenology, ii) hermeneutics, and; iii) idiography (Smith & Nizza, 2022).

Phenomenology

Phenomenology describes the study of the human experience, with the aim to accurately understand an experience of a certain phenomenon (Moran, 2000). To achieve this, it is important to strip away factors coming from outside of the person, to focus on their interpretation of the experience (Moran, 2000). One of the first individuals to consider phenomenology was Husserl who posited that it is important to take a step back from the phenomenon, attending to and reflecting upon it (Smith et al., 2022). Through focusing on the individual experience of a phenomenon allows its essential qualities to be identified (Smith & Nizza, 2022). Although the focus is on the meaning an experience of a phenomenon has for someone, if phenomenology is done well this can transcend that person's experience and illuminate shared experiences (Smith et al., 2022).

Part of phenomenology is understanding our position in the world. Merleau-Ponty suggested we understand ourselves as a body within the world, where we are separate from the world around us. Our perception of the world is therefore shaped by

the presence of other things around us, including people engaged in their own projects (Smith et al., 2022). Due to the embeddedness between an individual and their world, accounts of an experience can only reveal an understanding based on the person's current experience and place in the world (Larkin et al, 2006). For example, in relation to the current area of study previous research has considered the lived experiences of trans+ people within custody through interviewing those who have since been released into the community (Brömdal et al., 2022; Clark et al., 2022; Greene, 2023; Mallon & Perez, 2020; Sanders et al., 2022; Smoyer et al., 2020; White Hughto et al., 2018). Within the context of IPA, this could be problematic as their interpretation and understanding of their lived experiences within custody would be influenced by their current position within the community, using hindsight and comparisons to look back on their experiences within custody.

Hermeneutics

A second central tenet of IPA is hermeneutics. Hermeneutics is defined as "a theory of interpretation concerning textual meaning, as in the techniques used in speaking and writing that divulge the intentions and context of the speaker/writer" (Callary et al., 2015, p.63). This considers how we understand experiences and interpret them. To achieve this, it is important to explore beyond the surface of the account, as through close engagement meanings not initially evident become clearer (Smith & Nizza, 2022). Since understanding experiences requires the researcher to interpret the participant's interpretation, several factors can influence and even hinder this process. Interpretations are inevitably influenced by preconceptions, making it essential for researchers to be aware of their own assumptions to minimise their impact. These preconceptions may not be immediately apparent but can emerge during the process of engaging with the text (Smith et al., 2022).

Interpretation is also influenced by moments; the interpretation by the participant will be influenced by both the moment the experience occurred and the moment the experience is told, it will then also be influenced by the moment the interpretations take place. Within the interpretation, past and the present come together to influence the understanding of the experience (Smith et al., 2022).

Hermeneutic cycle

The hermeneutic cycle considers another aspect of the interpretive process which looks at the link between the parts and the whole of an experience. To understand a participant's experience, it is important to consider its individual parts. However, understanding the parts requires an understanding of the whole. For example, when considering interpretation of texts, it is important to consider the meaning of a single word used, but also its meaning within the context of the sentence and then what meaning the sentence has within the context of the complete experience. To expand this further it is considering how the experience expressed within interview makes sense within the context of the research project and within the life of the participant who experienced it (Smith, 2011).

Double hermeneutics further explores interpretations of experiences through considering the link between the researcher and the participant; the researcher is trying to make sense of the participant, who is trying to make sense of their experience. It is suggested the researcher is both similar and different to the participant within this process; similar as a person trying to make sense of the experience, but different as they only have access to the participants version (Smith et al., 2022).

In the current research, I needed to carefully consider my role in the interpretive process and how my preconceptions influenced meaning-making. Interpretation was cyclical, requiring me to shift between focusing on the participant's perspective and critically engaging with their account. During interviews, I prioritised listening to participants while adopting an inquisitive stance, using my knowledge to explore their experiences further. When reviewing transcripts, I aimed to maintain the participant's voice by mentally replaying the interview and asking reflective questions. My notes were shaped by my understanding of the subject but remained closely tied to the participant's words, ensuring a continuous connection (Smith et al., 2022).

Idiography

Idiography is a third key theoretical pillar underpinning of IPA and considers the importance of understanding an experience in detail through a focused interpretation of a single participant at a time (de Visser & Smith, 2006). Focusing on a single account, rather than a group of experiences, allows opportunities for details to be identified that

may be missed within a larger sharing of an experience (Callary, et al., 2015). Multiple cases can then be compared to reveal similarities and differences in interpretations of an experience being explored, however this is done cautiously so as not to lose the connection to individual cases (Smith & Nizza, 2022). Comparing cases is an important aspect to identify patterns of meaning in shared experiences (Smith et al., 2022).

IPA is suitable for the current study where the focus is on the uniqueness of individual experiences of being trans+ within custody. The study uses a homogenous sample, with all participants being trans+ and recruited from the women's prison estate in England and Wales. Participants' different life experiences, their location within different prisons throughout their sentences, and their different gender identities, are examples however of how they will each have a unique custodial experience. This makes it a suitable study for IPA and using the strategies outlined above, will assist in developing a pattern across accounts whilst maintaining idiosyncrasies.

Participants and Recruitment

The Governing Governor (HMPPS) or Director (Sodexo) of all 12 women's prisons in England and Wales were contacted seeking permission to conduct the research (10 HMPPS and 2 Sodexo). Ten of the 12 establishments responded, with eight agreeing to support the study (8 HMPPS and 0 Sodexo).

Purposeful sampling was used to identify trans+ participants. Individuals who had self-identified as trans+ and made themselves known to HMPPS, were approached by their establishment's Equalities and/or Transgender Lead who shared the aims of the study via the Participant Information Sheet (Appendix D). Individuals were offered support in reading this where necessary. Permission was sought from potential participants to provide their information to myself for follow up discussions.

The study was also advertised within each establishment via a Notice to Staff (NTS) and Notice to Prisoners (NTP) (for an example NTS and NTP see Appendix B). Due to anticipated low numbers of trans+ people disclosing their gender identity within custody, sharing the study via a NTP enabled inclusion of individuals who may not be living authentically as trans+, meaning the Equalities/Transgender Lead may not be aware of their gender identity to approach them for the study. The NTS and NTP outlined how expressing an interest in the study would not result in the prison officially being

notified of their gender identity. Contact details of the Equalities and/or Transgender Lead was included on advertising material to provide a point of contact. It was agreed with Equalities/Transgender Leads they would not amend official recordings of someone's gender identity if they demonstrated an interest in the research.

Individuals who were assessed by the Equalities/Transgender Lead as a high risk of suicide and/or self-harm (identified through details obtained via the HMPPS Assessment Care in Custody and Teamwork (ACCT) process which supports people at risk of suicide or self-harm) or those residing in the segregation unit due to being a high risk of violence towards staff, would not be approached. A video link was arranged with two potential participants, upon their request, to meet with me and ask questions about the study. Consent (Appendix E) was obtained from all potential participants to engage in the study and for the Equalities/Transgender Lead to have access to their OASys report (a core risk assessment tool used within HMPPS) for the purpose of completing a Risk of Harm and Mental Capacity Screening Sheet (Appendix C). No participants were excluded due to this screening process.

The study received approval from both the HMPPS National Research Committee (NRC; Appendix I) and the NTU Schools of Business Law and Social Sciences Research Ethics Committee (BLSS REC; Appendix J). A proposed amendment to the recruitment process was submitted to both committees following delays in obtaining the Risk of Harm and Mental Capacity Screening Sheet from some prison establishments. Where such forms were not received prior to interview I requested permission to use my clinical judgement through discussion with potential participants. This amendment was approved.

Potential participants agreed for the Equalities/Transgender Lead to share their details with me. Interviews were arranged with eight trans+ participants. Two participants did not attend the original interviews arranged, both due to communication difficulties at different prisons. The first participant was not aware I had arrived at the establishment and was awaiting entry, a delay which resulted in them no longer wishing to engage on that occasion. The second participant was unaware of when I would be attending and therefore declined to attend the interview on the day planned but stated they would attend were I to rearrange. Upon discussions with the individual establishment's Equalities/Transgender Leads, subsequent interviews were arranged.

The first participant attended the rearranged interview. Regarding the second participant I ensured they were aware of the time and date of the interview, through the email a prisoner service and via the prison Equalities Lead. Despite this increased communication, the participant again declined to attend the interview on the day. No further interviews were arranged for this individual.

Seven participants took part in the study from across four women's prisons in England and Wales. This was in line with recommended sample sizes for doctorial and IPA studies of six to ten participants (Smith et al., 2022). Participants ages ranged from 22 to 57 years, with a mean age of 40 years (*SD* = 10.17). All participants self-identified their ethnicity as white or white ethnic. Table 5.1 details participant information.

Table 5.1

Participant Information[ii]

Participant Pseudonym	Gender Identity
Avery	Female
Robin	Male
Max	Male
Charlie	Trans female
Alex	Trans female
Ash	Trans male
Arbor	Trans male

Materials

All study materials were designed in line with neurodiversity guidance (British Institute of Learning Disabilities, BILD, 2011). Examples include the use of a clear communication style on all documents shared with participants and prison staff. Documents were as concise as possible, with short sentences and information broken down into smaller sections. Sans-serif font was used as the letters are easier to read

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[ii] Demographic information regarding participant's prison location, ethnicity and age were also collected. These have not been reported due to the risk of these being identifiable data based upon the low number of trans+ people within the women's prison estate.

and line spacing was a minimum of 1.5 to assist in breaking up text. Such considerations assist neurodivergent individuals to more easily read and understand information presented to them (BILD, 2011). Readability of materials was identified as being for those age 17 years or older. I also offered to read the participant information sheet, consent form and debrief sheet to all participants. Participants were provided with a participant information sheet and consent form prior to engagement within semi-structured interviews and debrief forms upon completion of an interview (see Appendices D, E and F).

Semi-structured interviews were conducted with all participants. These were designed through engagement with relevant literature, including themes identified through the systematic review of trans+ peoples experiences of custody (Evans et al., 2024; chapter 4). Feedback on the interview schedule was sought from the supervisory team with experience in qualitative research with trans+ individuals. A draft interview schedule was also shared with an expert researcher involved in research within prisons in England and Wales, an individual with lived experience of custody and experience in qualitative research, and a trans male with experience in research. Feedback was incorporated into the final interview schedule. Areas for discussion focused on participants general experiences within custody, awareness of gender identity by participants and the prison, experiences with peers and staff, future plans including preparation for release, and perceptions of what would make experiences within custody more positive for trans+ individuals (see Appendix H for the interview schedule).

Procedure

An in-person semi-structured interview was arranged at each participants' establishment through Legal visits, minimising the risk of peers/staff being aware of the purpose of the visit. Within three prisons this involved a private room with just the participant and myself located. Prison officers were in the vicinity and would regularly walk past. Within one prison a private room was only available for one of the interviews, with further interviews taking place in a communal visits room where peers and staff were located. No concerns were raised by the participants or myself regarding a risk of being overheard.

Participants were provided with a paper copy of the participant information sheet and asked to complete the consent form prior to interviews commencing. These forms included a unique identifier, provided by me, to allow for withdrawal of the participant's data from the study were they to request this. A participant's consent form and interview transcript were given the same unique identifier to allow for matching should the participant wish to withdraw from the study. Participants were given one calendar month from the date of the interview to withdraw their data from the study. Participants were advised to contact me either directly via post or through their Equalities/Transgender Lead, quoting their unique identifier. No requests to withdraw consent were received.

Interviews were audio recorded on an encrypted recording device for the purpose of transcription, with consent from participants. Permission was also sought from each establishment for an encrypted audio recording device to be used. The longest interview lasted 96 minutes and the shortest 56 minutes, with an average of 69 minutes. At the end of each interview participants were debriefed and provided with a debrief form. Due to the potentially sensitive nature of their experiences, participants were made aware of appropriate support services should these be required. This form also contained details of who to contact at NTU were they to have any further questions or concerns, and whom to inform should they wish to withdraw from the study. A postal address and general NTU phone number were included rather than a direct phoneline or email addresses. This was due to security concerns and the appropriateness of sharing personal information with people in prison, due to the risk of misuse.

Data analysis

Digital recordings were transcribed, subsequently checked and anonymised. The data for each participant was fully analysed, each as a single case analysis, allowing in-depth engagement with the transcript. This was achieved through following the key steps for conducting IPA as outlined by Smith et al. (2022) and Smith & Nizza (2022). Step 1 included reading through the transcript whilst listening to the audio recording, encouraging recall of the interview. Initial thoughts were recorded in the left-hand margin of a hard copy of the transcript. The transcript was re-read two/three times whilst making descriptive, linguistic and conceptual notes within the left-hand margin,

using different colours for each group of notes. Descriptive notes included explicit meanings of what the participant said and describing aspects appearing important to them. Linguistic notes commented on the use of language as well as aspects such as hesitations, repetitions and metaphors. Finally conceptual notes included questions arising through reading the transcript and moving away from explicit meanings to an interpretation of what was being said and how it related to the whole transcript.

At the completion of the noting stage, experiential statements were noted within the right-hand margin of the transcript. This involved capturing meanings of the experience in a succinct form. Through this process a clear grounding in the participant's comments was ensured, whilst summarising important interpretations arising from sections of the transcript (Smith et al., 2022; Smith & Nizza, 2022).

Experiential statements were clustered to create Personal Experiential Themes (PETs). The clustering process involved writing out all experiential statements which emerged from the transcript onto individual post-it notes and grouping these to bring together similar or connected statements. Each PET title summarised the connection between the original experiential statements. These were converted into a table identifying the supporting experiential statements and quotes, along with relevant page numbers (Smith et al., 2022; Smith & Nizza, 2022).

The first three transcripts, 001-003, were analysed up to the identification of experiential statements. This allowed for advice and guidance to be sought from the supervisory team regarding the level of analysis and adherence to IPA guidelines. PETs were then generated for each of the three transcripts prior to progressing to transcript 004. Transcripts 004 to 007 were analysed in order from initial coding through to PETs, prior to moving to the next transcript.

Following identification of PETs for each transcript, cross case analysis was completed. Each table of PETs was reviewed for connections, similarities and differences, including reviewing the experiential statements underpinning them. These comparisons resulted in Group Experiential Themes (GETs), demonstrating a high-level connectivity between participants' accounts. A final table of GETs was produced, including key words for each account contributing to the theme, indicating the participant and relevant page number.

Reflexivity

I conducted all Interviews and am an experienced BPS Chartered and HCPC Registered Forensic Psychologist with 20 years' experience working within prisons and undertaking detailed interviews. Although I had not worked with the participants previously, knowledge of my dual role may have impacted on the relationship with participants.

From a participant's perspective they may find it difficult to distinguish between a researcher's dual roles and share traumatic and distressing experiences with the expectation that due to their clinical training they are an 'empathetic expert' (Hay-Smith et al., 2016). This was experienced within interviews I conducted where three participants commenced interviews by sharing traumatic childhood experiences, not directly related to the question posed. I have experience in managing discussions of traumatic experiences and was able to use my clinical skills to explore sensitive topics. My experience also enabled me to monitor individual's wellbeing throughout the interview process; monitoring for signs of emotional distress, providing appropriate empathic support where needed, and directing participants to support services during the debrief. No interviews needed to be paused or stopped due to participant distress. I had to balance my role as a practitioner psychologist, ensuring participants felt reassured and received the necessary treatment and support, while maintaining an objective stance as a researcher studying participants' prison experiences.

A systematic review conducted by Hay-Smith et al. (2016) proposed researchers who have a dual role may question the agenda of participants, feeling the information shared may be with the aim of addressing an unmet need or gaining a second opinion. This was a consideration within the current study; reflecting upon why personal histories were being shared and how any agreement or reassurance may be interpreted and used by the participant. At times, therefore, the focus of the interview was briefly taken away from the schedule. My use of reflective skills, developed as a practitioner psychologist, were used within these circumstances enabling me to consider the best way to proceed. The use of such skills was effective in encouraging further exploration of the views shared and the building of rapport with participants. I was mindful however of whether using skills such as rephrasing and labelling emotions impacted upon participants accounts, taking on board my interpretation and therefore potentially

detracting from the pure account of the participant. The advantage of being a practitioner-researcher and using these skills however enabled participants to talk with freedom and comfort, providing rich, full data.

A further consideration was the position of myself as a white, cisgender female. This was deliberated during preparation and feedback sought on the interview schedule. At times, however, I was conscious of participants providing me with an education around trans+ needs, rather than sharing an account for the purpose of the research. I was also mindful of not identifying as part of a minority group and how small nuances may therefore have been missed through not fully relating to experiences. As a female with experience of working in prisons, I could however relate to experiences of discrimination and prejudice within custody. I was therefore mindful of how this could both assist with analysis but also how it may influence my interpretation of data.

I also had a shared experience with participants in relation to spending time in prisons, through my previous employment. This was advantageous in many respects, particularly in building rapport with participants, as it enabled a shared understanding of prison processes, institutional routines, and the frustrations that can arise within custodial environments. This familiarity helped foster trust and openness during interviews, allowing participants to speak candidly about their experiences, knowing that I had a contextual appreciation of the environment they were describing.

However, this positionality also required careful reflection during the analysis stage. As a former employee of HMPPS, I hold personal views about the effective running of prison establishments and the nature of support provided to those in custody. These views, shaped by professional experiences and institutional culture, may have unconsciously influenced how I interpreted participants' narratives. For example, I was mindful of the possibility that I might be more attuned to identifying negative experiences that aligned with my own perceptions of systemic shortcomings, particularly in relation to the support available to trans+ people in custody. This could have led to an inadvertent emphasis on certain themes or a skewed interpretation of participant accounts that reinforced pre-existing beliefs.

Moreover, the subjectivity inherent in practitioner roles within HMPPS, such as the prioritisation of security, adherence to policy, and exposure to institutional norms, can shape how staff and former staff perceive experiences for people in custody. These

professional biases may persist even after leaving the service, subtly influencing how research is conducted and understood. Lumsden and Winter (2014) argue that researchers must critically reflect on how their own biographies and institutional affiliations affect the creation and interpretation of knowledge, particularly when working with marginalised groups.

I recognised that my previous role may have instilled assumptions about what constitutes 'effective' practice or 'appropriate' behaviour within prison settings, which could conflict with the lived realities of trans+ individuals. Holmes (2020) emphasises that positionality is shaped by ontological and epistemological beliefs, as well as by social, political, and historical contexts, and that researchers must actively interrogate how these beliefs influence their research decisions and interpretations. As such, I engaged in ongoing reflexivity throughout the research process, critically examining how my background might affect data interpretation and striving to ensure that participant voices remained central and unfiltered by institutional lenses.

This reflective process was essential in maintaining the integrity of the research and acknowledging the complex interplay between researcher identity, prior professional experience, and the analysis of sensitive, identity-based narratives. While my background provided valuable insight into the prison context, it also necessitated a conscious effort to bracket assumptions and remain open to perspectives that challenged or complicated my understanding of custodial care and policy implementation.

Ethical Considerations

Some participants were subject to suicide and self-harm support through the ACCT process and relevant documents arrived at Legal Visits with the participant. The ACCT is a case management approach implemented by HMPPS to safeguard those at risk of self-harm or suicide within custody (HMPPS, 2021). An individual being supported through the process would have an ACCT document, which includes a care plan, and required levels of monitoring by staff members to ensure their wellbeing. Participants were eligible to take part in the study if they were being supported through the ACCT process. Only individuals identified as a high risk of suicide or self-harm, for example those requiring constant monitoring, would have been considered unsuitable

to take part. Staff members having contact with someone supported via an ACCT should make comments within the document regarding their interaction and the wellbeing of the individual. As part of the system, a member of operational staff overseeing the visits area would make relevant notes. I was made aware of one participant supported through an ACCT and requested to write an additional comment within the document following completion of the interview as best practice, this was supported by the staff member.

Initial interview recordings were transported from HMPPS establishments to my home address either on the day of the interview or the following day. During transportation the recording device was kept in a locked suitcase. Recordings were saved as MP3 files and encrypted. Transcripts of interviews were stored on a password protected USB device and via NTU DataStore. Hard copies of interview notes, field notes, consent forms and demographic data were stored in a locked cabinet at my home address. I am the only person with access to this cabinet.

Access to the anonymised data was restricted to myself and my supervisory team, Professor Daragh McDermott, Dr Beth Jones and Dr Rosie Kitson-Boyce. The research involved personal, sensitive and confidential data with direct and indirect identifiable information being shared by participants during interviews. This included, but was not limited to, names of current and/or previous prisons they have resided in, geographical areas they have lived in the community or intend to be released to, and previous names they used prior to transitioning. Such information was anonymised/changed for different but appropriate alternatives during transcription.

NTU requires data supporting DPsych research to be kept until the end of the project. This includes interview transcripts (with direct and indirect identifiers removed, and with consent of participants), handwritten interview notes and field notes. This information will be kept for 10 years in case of subsequent journal publications. However, the following data will be destroyed following successful completion of the DPsych: audio recordings of interviews and consent forms, as it is intended for participants' informed consent to state retention of data will only include an anonymised version of the data which does not contain personal identifiers.

5.3 Findings and Discussion

Four Group Experiential Themes (GETs) emerged, a summary of the GETs and sub themes is available in table 5.2.

Table 5.2

Summary of identified themes

Group Experiential Themes	Sub Themes
1. Invisible when identities are misunderstood and voices ignored	a. Unseen until the camera switches on b. Denied understanding: When trans+ people are told to 'get over it'
2. Wellbeing is shaped through affirmation and neglect	a. Denied access, exposed vulnerability: Gender affirmation struggles b. Healing or hurting? The emotional impact of gender affirming healthcare
3. The complexity of connection in diverse peer relationships	a. The power of sharing experiences b. Different yet not different c. Challenges navigating peer relationships
4. The impact of discrimination	a. Transnegativity appears ever present b. A need for self-survival

1. Invisible when identities are misunderstood and voices ignored

The GET highlights how participants felt prison structures inadequately met their needs, with inconsistencies in support, such as the availability and quality of Local Transgender Case Boards. Two sub themes emerged; 'Unseen until the camera switches on' outlines trans+ individuals experiences of often feeling invisible and

misunderstood within prison, with their support and recognition largely dependent on individual staff rather than consistent, systemic structures. The second sub theme, 'Denied understanding: When trans+ people are told to 'get over it'' emphasises the emotional cost of a power imbalance between trans+ people and staff, especially when staff are perceived to lack understanding of individual needs, treating these as surface issues to overcome.

1a. Unseen until the camera switches on

An aspect of support available for trans+ people in prison, as outlined within HMPPS policy, is Local Transgender Case Boards; a person focused multidisciplinary meeting. Throughout interviews it was apparent accessibility of these boards varied between prisons. All participants agreed there were inconsistencies, in occurrence, attendance, or knowledge held by key staff members regarding trans+ issues. Availability of the boards appeared to have decreased over time and participants felt they were not fit for purpose.

> Because I had one before I came here and everything we discussed in that when I come there, it was just so that all the staff around the table could know what was going on. And then it was over in 5 minutes. I says, 'Well hang on a minute you're not gonna ask me my my opinion about this. This is my transgender board not for yous to all nitpick at everything I've already discussed'. I says, he says, 'Is there anything you need?' And I, I'll give the deputy governor here his due, he says Ash do you need anything? And I went, 'Yeah I need binders'. He said, 'Well that will be sorted out within the next couple of days'. Umm. [The] equalities lead and took me into the swap shop that's gonna be for transgenders and got me binders out... (Ash, p.14)

Ash's expectation of their Local Transgender Case Board was to allow them to raise, with a multidisciplinary team, any issues and concerns. He reported the reality was different, feeling it was used as an opportunity for staff to summarise their perceptions of Ash's needs and the support he received. It is evident Ash felt his opinion was not important and that staff did not listen to him, instead pulling apart and questioning what had been reported within previous meetings, as emphasised by his use of the phrase

'nitpick'. Through his comments on the meetings brevity, he implied it was conducted to meet the requirements outlined in policy; he however showed high levels of confidence in challenging senior management on this. Ash's needs were invisible within this meeting until he confidently requested what he needed, only at this time did staff help him acquire a chest binder, when directed by management.

Similarly, Arbor, a 22 year old trans male, perceived Local Transgender Case Boards were to discuss progress with his transgender journey. He implied his initial board did not meet these expectations, or those outlined within HMPPS policy. However, while interviewing participants HMPPS published an updated policy, 'The care and management of individuals who are transgender' (HMPPS, 2024b). This policy outlined the requirement for an initial Local Transgender Case Board within 14 days of a trans+ person either; arriving at custody, transferring to a new prison, or arrival at an Approved Premise, and a Pre-release board prior to release from custody (HMPPS, 2024b). This varied from the 2020 policy which included regular review boards at agreed points during a trans+ individual's sentence. Therefore, those who expected regular review boards, as evident from the accounts of Ash and Arbor, would no longer receive these, and it was apparent this had not been communicated to them. This caused trans+ people in prison to feel they were not receiving the level of support they were entitled to and had been forgotten about, perceiving the needs of others were put before their own.

With the perceived lack of support from Local Transgender Case Boards, there was a reliance on individual staff members being conscientious and working hard to support individual trans+ people's needs.

> Every time, every time I see her [transgender lead], it's very rare you see
> her...'Cause she's so busy doing other things. But when I do see her I do pull her
> up on it [lack of availability and support]. Or you ask an officer and they say, 'Oh
> we'll send [] an email'. But 9 times out of 10 they don't. 'Cause they forget. [...]
> They've probably just got other things on their mind, you know what I mean.
> They're probably doing other things for other prisoners. So I do totally understand
> it. (Charlie, p.37)

Charlie, a 34 year old trans male, spoke highly of the transgender lead within their establishment and frequently provided justifications for the lack of support he received. Charlie presented as protective of the transgender lead, however, would note examples of times he had repeatedly requested a meeting to discuss his trans+ needs. The lack of support was emphasised when he asked me to chase a request he had made with the transgender lead. The perception that staff were preoccupied with supporting others may have led trans+ individuals to feel overlooked, reinforcing a sense that their needs were less of a priority. By expressing understanding of the situation, Charlie might have been shielding himself from these feelings of neglect. However, this also highlights his position within what Gorden et al. (2017) describe as the 'invisible population'.

Such lack of contact with key staff members was a common concern for participants. Arbor recognised individual staff members he could approach for support, specifically identifying his establishment's Governing Governor. However, like Charlie, he acknowledged the support received was impacted by how busy staff were. Arbor expressed how supportive he felt the Governing Governor was, but they struggled to ensure processes were implemented or effective support offered due to managing two prisons. This sentiment was echoed by other participants across two establishments where their Governing Governor's managed multiple sites. These participants spoke highly of Governing Governor's and their intentions to provide support, however recognised the many demands being placed on them.

These factors lead to the belief that some staff expected trans+ individuals to manage difficult situations themselves, not relying on staff support. Whereas participants felt their safety within custody required staff and operational support; "but I think there is only so much that you can protect yourself and I think you know that if you say something's happening I think that ... erm, that they need to try and sort of make sure things are there a lot quicker before anything like that happens" (Alex, p.26). The formalised support systems were felt to not be working effectively with equalities staff lacking knowledge and motivation.

> It's like at [Y] you had in the equality manager and then an equalities lead and that, she was useless. She was useless, when it comes to DIRFs she used to tell you before she switched the body worn camera on, she goes, 'Look, I'm stuck, I

don't know the equality, I'm not trained in it, I don't understand discrimination or anything'. And then when she finds out you're being discriminated against and that she takes no action, she does nothing, you know, she absolutely does nothing, you know. And [a] governor says oh, we can't do nought because it's equalities and equalities are not allowed to be funded in prisons. That's what they say to ya. (Avery, p.49)

Avery's account emphasises the power dynamics between staff and people in prison, with staff being able to choose when they turn on their body worn cameras and their awareness of there being no evidence of discrimination or unprofessionalism when their cameras are off. This staff member took no responsibility for being unaware of the requirements of their role as equalities lead and made the situation about them and their lack of skill rather than focusing on supporting a vulnerable individual. Thus, implying that the issues, concerns or abuse raised and reported by trans+ people are unimportant and reinforcing the perception of them being invisible. This account by Avery, a 39 year old trans female, demonstrated how staff would place blame on managers and the wider system for a lack of training opportunities. Participants felt the lack of staff training and understanding significantly impacted how their needs were treated. Avery was passionate that staff members should be available and was proactive in verbalising when she felt inequalities were not addressed, wanting to ensure support was not just available for them but all trans+ people.

Avery was also very passionate about the influence government bodies had on trans+ people in prison. She felt prison policy changes stopped them accessing work in the community via Release on Temporary Licence (ROTL), and the Women's Directorate, in particular, should provide more support for trans+ people within women's prisons.

I do feel that the Ministry of Justice and like the government, like when all this was cancelled and that, the ROTLs, there should be some sort of financial compensation there. You know, because it was unlawful interfering with the progression. And then like, there should be some compensation for like loss of earnings for like for like the paid work you was meant to start if that policy wasn't cancelled, you know what I mean. So there should be some compensation there

from the Ministry of Justice and the government you know what I mean, because
it's just wrong how they've gone about everything. (Avery, p.31)

Avery demonstrated an in-depth understanding of prison policies and wanted to hold those in government to account. They emphasised the impact on future prospects for trans+ people, such as limiting their ability to gain work experience. As identified within previous literature trans+ people experience increased levels of discrimination in relation to obtaining and maintaining employment (Velez, 2023). Therefore, further limiting factors, such as those raised by Avery, compound these difficulties.

These views and level of policy understanding were not expressed by other participants. Some individuals were unaware of the specific policies outlining the support they were entitled to, while those who were aware seemed to lack a clear understanding of their contents. Avery suggested policies needed to be rewritten, in consultation with multidisciplinary teams and trans+ people in prison, and implied she had been approached by prison governors for advice on implementing policies. Avery appeared to place much hope on amended policies positively impacting the support offered to trans+ people in custody despite her previous account of an individual staff member not abiding by guidance outlined within policy, when turning off her body worn camera.

It desperately needs a policy doing, for like staff and prisoners who come under that umbrella. You know what I mean. That means it'll give the staff, the managers and everything like instructions on what to do. You know what I mean. You know, then it will be more diverse prison if they had, if they had a policy for that, you know, this is what you'll cater for, that's what will be done. Your mandatory actions you know. That will go a long way in the prison service as a whole...If they had the policy around that like with psychologists, mental health, people in head office, the women's team and the equality's, the lead and everything, that would improve the prison system as a whole for the better. (Avery, p.47)

Avery was clearly unaware of an impending policy change. The updated HMPPS policy (HMPPS, 2024b) included a decrease in the number of Local Transgender Case Boards,

reducing the formalised support offered to trans+ people. Avery's suggestion that policies should offer clear guidance for managers and staff on providing appropriate support highlights the potential risks of reducing formalised support structures. Such a reduction could diminish the level of support trans+ individuals receive. Participants' calls for increased support stand in contrast to the message conveyed by the new HMPPS policy, suggesting a disconnect between policy direction and lived experience.

Due to variation in structural support, some participants became reliant on individual staff members, only feeling safe when the staff member was working, feeling anxious when unable to see them, and seeking reassurance. Arbor spoke about their over reliance on one member of staff and described how he became annoyed when other staff reported it as an obsessed. Feeling this staff member defended him when he experienced discrimination resulted in feeling anxious when unaware of the staff member's location. Therefore, when the staff member moved location, his anxiety increased and caused Arbor to feel he had no support and would struggle to cope on his own. Arbor expressed how it took him time to feel comfortable on his residential unit without this member of staff present, however he also reported still seeking out this individual when his levels of anxiety increased.

Being over-reliant on individual staff members, however, brought its own frustrations, as with Arbor who stated they had received negative reports from staff outlining their perceived obsession. Furthermore, where prisons encouraged a Single Point of Contact (SPoC) for trans+ people, participants reported how problems emerged when the SPoC was unavailable. It is proposed that staff may have referred to the SPoC to either minimise the risk of providing inaccurate advice or due to being unsure where to direct trans+ people for appropriate support and resources.

Overall, there was a general feeling of frustration and anger at the systems in place and how problems within these impacted upon wellbeing in custody and progression. Insight into the reasons for some of this inconsistency was evident when HMPPS released an updated policy. The lack of communication regarding policy changes led to confusion among participants, who believed they were not receiving the support they were entitled to, unaware that their entitlements had been altered.

It is evident there is an increase in support available for trans+ people in custody compared to when Gordon et al. reported on provisions in 2017. However, it is proposed

the perception of low numbers of trans+ people within custody, less than 1%, continues to impact on whether individualised approaches are reinforced, as previously suggested by Gordon et al. With high numbers of people in custody causing a risk of overcrowding, many requirements to meet individualised needs, services and support may be focused elsewhere. Staff members demonstrated increased adherence to institutional policies and a heightened responsiveness to the needs of trans+ individuals when they were subject to observation, such as during transgender board meetings or through the use of body-worn cameras. In contrast, in the absence of such oversight, trans+ individuals in custodial settings often became an invisible population, with their specific needs and rights frequently overlooked or deprioritised.

Trans+ people are therefore required to continue to navigate the heteronormative prison system with limited support. This is supportive of the findings by McDermott et al. (2018) who identified similar struggles within the healthcare system. Healthcare system provisions for trans+ people are reported to be available, as identified through policies, but do not adequately meet their needs (Harrison et al., 2020). This supports a suggestion by Kanamori and Cornelius-White (2016) that when systems hinder support provision, support is found through individual staff members.

1b. Denied understanding: When trans+ people are told to 'get over it'

The majority of participants reported disclosing their gender identity in custody only after identifying individual staff members they could trust. They all reported receiving a positive response, although some felt that following the initial support offered interest in their needs decreased, as Ash explains below:

> I finally broke down, and said I can't live a lie anymore and they says just tell us what's wrong. I says, 'I I wanna be a man'. She went, they went fine, 'We'll set the ball rolling'. But the way you get treated in prison about being trans, it's not right. And they don't do anything. (Ash, p.7)

Ash's concealment of his gender identity negatively impacted his mental health and following a breakdown he felt he needed to share his gender identity, suggesting support was not available to him prior to being at breaking point. Initially, he found the staff member supportive and respectful of his disclosure and was optimistic about the

support he would receive in custody having felt heard. However, over time, this support dwindled, focusing more on practical elements "we'll set the ball rolling" and staff seemed reluctant to provide the guidance he needed during his transition. This quote emphasises the contrast between support offered and that which trans+ people receive. Presenting the support as tokenistic, with staff seen to be supportive but unable to action their intentions in a way that is meaningful to individuals.

There are connections to the previous sub theme, where staff, believing appropriate systems were in place for Ash as per policy, may have shifted their focus to the needs of his peers. Overall, Ash felt trans+ people were not treated respectfully in custody and did not receive adequate support. The following extract illustrates Ash's perception of staff's misunderstanding of trans+ individuals and their transition journey. Ash felt a strong sense of injustice, believing staff did not listen or try to understand their unique experiences, instead being viewed by their sex as assigned at birth.

> If they start listening to us, me me and the other trans a bit more. And they don't. We're just pushed to the side. They expect us to er, the the other trans person here to go and move big industrial washing machines. What because she used to be a man? She's gonna have muscle? No, she's been on hormones for years. There's just, we just get crapped on basically. And it's just not fair. (Ash, p.34)

Ash describes the stereotypes imposed on trans+ individuals in custody, where they are often assigned gendered roles and expectations based on their sex assigned at birth. Such stereotypes contribute to discriminatory experiences, as illustrated when his friend was expected to perform tasks not required of their cisgender peers. His expression of feeling "crapped on" underscores a deep sense of injustice and mistreatment, particularly by those in positions of authority. He further emphasises the inequity of the situation, noting that trans+ individuals are not only rendered invisible, as discussed in subtheme 1a, but are also actively subjected to discrimination.

A general lack of awareness and understanding of trans+ people's needs came through, with all participants identifying this caused difficulties with staff. Lack of awareness included regular misgendering, lack of understanding the importance of gender-affirming items such as chest binders and clothing, and a belief trans+ people were 'choosing' to change their gender.

And I think the biggest issue is staff don't think being trans can affect me. They think that it's not a problem, but in a sense they don't think that, like when I've sat there and I said like, I'm really struggling like with myself like looking in the mirror "Ohh get over it". That's what you get here, "Oh, get over it". Oh, what do you mean, like it's it's a life changing thing. It's not something that just it's not like coming out as gay and people go over after a bit. It's like you're changing everything about you that you've been born with, you're changing that and they don't see that. They don't see it as a problem. (Arbor, p.4)

Arbor's experience was staff lacked an understanding of trans+ people, and the impact gender dysphoria and transnegativity had on them. He perceived staff felt difficulties trans+ people experienced regarding their gender presentation was a surface issue that could be easily overcome, perceiving a change in gender presentation was little more than amending pronouns. This lack of understanding regarding transitioning pathways and the experiences of trans+ people can increase feelings of gender incongruence, negatively impacting mental health (Brown, 2010). Arbor expressed how changing gender presentation is a change of the whole person, of who they were and who they will be in the future, he felt staff lacked understanding of the magnitude of this. This can lead to minimisation of the need for support and/or healthcare provisions, potentially influencing whether trans+ people in custody were able to access provisions entitled to. Robin's experiences further supported a lack of understanding by staff, with staff expressing their views on gender identity being a choice.

"Why do you want to change" and stuff like that. I've got one officer coming to be "Why do you want to change? Are you getting everything changed or what you call it, or are you just getting you're your body changed" and stuff like that. And asking questions. But that was a positive thing because she was asking questions about it. But some of the other officers are a lot like that. (Robin, p.13)

Robin outlined negative experiences of staff questioning his gender identity and asking personal questions regarding gender reassignment. He was however of two minds regarding whether these questions were too personal and intrusive, whilst also welcoming the opportunity to educate staff regarding the transitioning experiences of

trans+ people. As demonstrated by Robin, participants appreciated staff who listened and tried to understand. This had a positive impact on their wellbeing. Max, a 57 year old male, felt staff's understanding came from their conversations with him, taking it upon himself to educate them. Max recognised however his experience was unique, and therefore, staff needed a broader understanding. Trans+ people are diverse, with varying experiences of gender dysphoria, transitioning, and treatment within the community and custody. Although Max felt staff listened to him and empathised with his difficulties in custody, their lack of understanding and limited operational support, restricted the help on offer. Participants appreciated staff asking questions and listening, but emphasised this was only beneficial if staff were motivated to learn and develop their awareness of trans+ issues.

> I was speaking to a staff member the other day, after I had a a rep meeting with the under 25's, and she said "Well, even if there was information about trans people or non binary, I wouldn't read it unless I had to" and I was like, OK, fair enough (…) "But I've got a good rapport with you and we get on really well, so you wouldn't read it?" and she was like "No, not unless I had too". "Fair enough, but you're going to have no understanding". (Arbor, p.3)

This extract outlines the amazement Arbor experienced when staff demonstrated their lack of interest and motivation to understand the needs of trans+ people. He felt he had a good rapport with staff and had been talking to one staff member about his experiences. From this he decided to share more information but was met with resistance. Arbor suggested staff lacked an internal motivation to develop their own understanding and would only do so if required to as part of their job role, or through a management direction. Arbor's emotional response to being dismissed by someone he perceived as an ally underscores the emotional cost of power imbalances. When staff fail to act in affirming ways, it can feel like a betrayal, deepening feelings of isolation and reinforcing the lack of agency experienced by trans+ people in prison.

Previous research discusses staff transnegativity and the impact of this on understanding trans+ individual's transitioning journeys or experiences (e.g. Maycock, 2020; White Hughto et al., 2018). The variations in attitudes by staff towards trans+ people was also reported by Daken et al. (2023). Through a scoping review they

highlighted how staff attitudes ranged from enthusiastic to disrespectful, something also identified within the current study. Such variations impact on who trans+ people feel they can approach for support, or how safe they feel within prison. Daken et al. suggested the notable level of disrespect from some staff members could be interpreted as another act of violence towards trans+ people.

The need for general staff awareness of trans+ people's needs and experiences was a common theme, with participants feeling a lack of understanding impacted upon how staff interacted with them. Participants felt a need to take on awareness development themselves, sharing information with staff and peers, researching charities which may be able to visit the prison, and seeking books on trans+ issues and experiences for the prison library.

2. Wellbeing is shaped through affirmation and neglect

Gender affirmation included, but was not limited to, access to gender-affirming items such as chest binders, gender-affirming clothing, make up, hormones, and single showers. This GET included two sub themes; 'Denied access, exposed vulnerability' explored how many participants struggled to obtain appropriate items due to logistical and bureaucratic barriers, affecting their mental and emotional well-being. The second GET, 'Gender affirmation struggles and Healing or hurting? The emotional impact of gender affirming healthcare' focuses specially on the impact of a disparity in access to healthcare provisions across prisons.

2a. Denied access, exposed vulnerability: Gender affirmation struggles

For trans male participants, not having access to gender-affirming items, such as chest binders, caused them to feel conscious about their bodies, affecting how they presented themselves outside of their rooms and even whether they felt comfortable leaving their rooms. Charlie struggled to view himself without a chest binder, avoiding mirrors and being conscious to not look at his body, whilst Max used a sports bra as a substitute for a chest binder to assist in his appearance. However, this also had a negative impact due to the language, identifying how wearing a 'bra' was triggering for him due to its layered meanings tied to femininity and identity.

Those with a chest binder in custody only had one in possession, so when this was washed they could not access an alternative.

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I have one that I that I was that was donated to the prison by an officer and I got that one, brand new and that one's good, it's like a £60 binder. That's a good one. But I've only got one. We get one wash per week and I'm can't walk around the prison when I go off the wing without it. Yeah, OK, I don't look like I've got on but to me I have, I know I have an and it looks different when I just have a sports bra on, do you know what I mean. So I can't get it washed because then I'll, our wash day's today and on a Thursday I'm off the wing all day, so I don't wanna walk around the prison in sports bra because I'm uncomfortable. So then I have to wait, like till a Sunday for it to get washed. That's if the laundry worker can wash it. (Arbor, p.12)

Through their account Arbor expressed not only hygiene concerns with being able to wash his chest binder once a week, but also the negative impact on his mental health. He was conscious that although other people may not identify the difference between him wearing a chest binder and a sports bra, he was aware of how his body shape changed, causing him to feel subconscious when coming out of his room and associating with others. Arbor's narrative also highlighted a reliance on others, for example a laundry worker being available to wash clothes, which underscored the numerous barriers to accessing gender-affirming items. This reliance further illustrated how participants' autonomy was often compromised.

Having concerns regarding associating with others, due to the perception of their physical appearance, negatively affected mental wellbeing and caused trans+ people to feel isolated. This was echoed by Charlie, who's chest binder was stolen from his room. He therefore wore baggy clothes instead of his preferred fitted clothing. He also crossed his arms over his chest when interacting with others.

Access to male clothing within the women's prison estate was also problematic, with participants reporting governors were required to contact local male prisons to request spare items. When trans male participants were able to access male clothing, such as t-shirts, these were highly sought after by cis female peers.

Erm, then ... then then they got me like trying to get the boys stuff. But this time I've got mostly flipping girl's stuff rather than boy's stuff cause the said they haven't got enough of boys stuff in the. In the women's prison, it's a lot harder for

people, it's like, want to be you know a male cause all the male clothes always go to the male jail. […] And we get all the woman clothes. So what the half of it is, you've gotta ask the governor to phone a male prison, to try and get some male clothes when it's one who want to be male. And it's a lot harder to try to get clothes, like box, you know, like boxers and boxer shorts, like male tracksuits, males, you know, like like T-shirts and everything. You can't get them in here. It's all like lacy and, you know, I'm like, I'm not wearing out. So half the time I'm just flippin sending stuff back to try and get plain just t-shirts. (Robin, p.6)

The clothing available was discussed as being very gender binary, with "lacey knickers" for women, and only accessing boxers and t-shirts from male prison establishments. Robin was notably assertive in expressing his refusal to wear female clothing and underwear. However, he subsequently encountered significant delays and challenges in obtaining more masculine clothing. His account conveyed a tone of anger and frustration, reflecting the emotional toll of having limited choices and the negative impact on his mental health. The process required him to seek assistance from a prison governor, a step perceived as unnecessary and burdensome. For trans+ individuals, having to make such requests may also evoke feelings of embarrassment and highlight the inequities they face compared to their cisgender peers. These experiences represent additional emotional labour and systemic barriers, further undermining their autonomy and wellbeing.

To enable greater access to gender-affirming items, there was a general census participants would be willing to pay for items of clothing and/or chest binders. This was promised by some prisons, with Ash reporting his establishment offered to pay for the first chest binder with individuals paying for subsequent ones. However, such promises did not appear to be delivered on, leaving them frustrated and without access to important items.

I've asked them to get more male clothes in the charity shop, 'Oh no, it's for females'. I said, 'Well get one for men'. 'Oh we're planning to'. Nothing comes of it. This they make a lot of promises and then they just go back on them. (Ash, p.33)

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This lack of provision contributed to feelings of being undervalued and a separate system reinforces a sense of difference and exclusion. This separation not only created practical barriers but also symbolised a lack of recognition and equality, further impacting participants' sense of identity and wellbeing.

The perception that staff made empty promises was evident from three participants. Initially participants would feel motivated by the support outlined by staff, but then realised this frequently went unfulfilled. Some participants became accepting of the situation, demonstrating a sense of apathy, not placing demands on staff time, and wanting to wait until they were in the community to seek further support regarding their transition. Other participants would continue to be assertive to acquire what they felt entitled to, with the understanding that although this may not be made available it was important to continue to be a visible presence, fighting for the rights of trans+ people in custody.

Being able to shower separately from others was an important provision for trans+ people in increasing their safety. Within custody in England and Wales trans+ people are entitled to shower separately (HMPPS, 2024b). Most participants were able to access single shower times, however this could take time to process and whilst waiting for a formalised agreement, they reported feeling vulnerable showering with cisgender peers. For some trans women their vulnerability continued even after they were able to access single showers, due to their location and the behaviour of others.

> I I don't really like having showering with everybody else. I try and get in when they're not, when it's finished for most the lasses. But yesterday I had to get in the shower with two other lasses and I don't like so, I'll just try to put the towel over in the erm thing to try and get dressed, that's not, it's really, really hard for people like that. (Robin, p.8)

Robin was having difficulties in accessing single showers and being undressed in a communal area increased his vulnerability. He had previously had access to single showers, however since being released and then recalled back into custody the request process restarted. Whilst waiting for confirmation of this provision, he had to identify a plan to protect himself, for example predicting when others would not be in the

communal showers to allow himself privacy. However, this was not always possible, as outlined in the quote above.

Alex had access to a private shower which was located within a disabled toilet area, however identified the difficulties she continued to experience due to the shower being linked to the communal living area.

> Like the communal area. It's like people go past, you know when I go in the shower, in the disabled toilet 'cause there's a corridor and people go past and go out the doors and stuff like that. And … but I'm always, I always listening always hearing what's going on near the doors and stuff like that. But I was in the toilet one day (….) I shouted, 'I'm on the toilet' and then and someone just goes you know bang bang bang on the door, and the door was, and using the handle. And the handle was rattling, the handle like that. I was like what the fucking hell are they doing I told them I'm in here and then they tried to use the key and I was like woah. I was getting a bit anxious, I was like hope they don't try and get themselves in and do whatever it is you know. Erm and then it stopped after that. But I said I disagreed that they done that because you know (…) they shouldn't be doing things like that. Erm you know and erm and er and they asked if I was alright and I said yeah I'm fine I'll just let it out because the door was locked anyway you know, stuff like that, but people have got a habit of smashing doors, you know and something else. As they can be quite aggressive and stuff like that, you know. (Alex, p.18)

Although Alex could access a single shower, and she knew there was a lock on the door, the proximity to the communal area and previous discrimination caused hypervigilance. Any noise was perceived as the potential for someone to purposefully try and access the shower area, causing high levels of anxiety and fear for her safety. Alex's account highlights the constant challenge of finding safe spaces, feeling perpetually at risk of victimisation. As outlined by Cooper et al. (2020) such hypervigilance is likely to have occurred due to past experiences of discrimination.

Alex's account also highlighted the lack of respect from peers regarding her access to a single shower and she continued to feel vulnerable when showering. Arbor was an exception to this, outlining how he had always accessed single showers which

he used daily with no concerns. This again outlines the differing experiences for trans+ people depending upon the establishment they reside in.

> But in the sense of me, a shower alone, I always showered alone since I've been here, I asked to and I get that I shower every morning no matter what's going on or, I always get a shower. (Arbor, p.20)

Arbor strongly emphasised his needs as a priority, accessing a shower "no matter what's going on". This assertion stands in contrast to a previous subtheme, where trans+ individuals in custody were described as an invisible population whose needs were routinely overlooked.

It felt like a battle between trans+ people and staff/the system to access what they felt entitled to, with processes getting in the way. There was a sense of frustration that things were promised but not delivered on, or processes increased the time it took to receive gender-affirming items and/or entitlements. This sub theme provided support for the pains of imprisonment as outlined by Maycock (2020), for example outlining feelings of being in the wrong clothes. Maycock identified how staff culture influenced access to gender appropriate items, with inconsistencies in what people could access and at times being denied items they were entitled to. Maycock also noted the difficulties trans men within the women's prison estate encountered when trying to access gender-affirming items, compared to those living within an estate aligned with their gender identity. This was reflected within the current study, where the impact of staff on trans+ people accessing gender-affirming items or resources was particularly prevalent.

2b. Healing or hurting? The emotional impact of gender affirming healthcare

This sub theme highlighted whether participants felt they received sufficient support from healthcare services. This was in relation to general healthcare provisions, such as being able to access appointments or medication, and also trans+ specific needs. Overall, it was felt getting an appointment to see healthcare took a long time, with the need to submit an application and then await an appointment. When submitting applications, on which they were required to outline the need for the appointment, some participants would wait until a trusted member of staff was present

on their residential unit. They felt other staff would ask private questions or discuss their health issues in front of others.

Alex outlined how she felt supported in receiving efficient treatment when needed, including accessing hormone treatment, something other participants reported being unable to access.

> The staff have been supportive to me … Erm and you know and you know I can get sort of like erm (….) things, you know, they're like a happy to help with you know like infections erm and everything else like that so I do get like a lot of support and then gives us my medication that I need. Erm and you know and erm that's all I ask for because obviously I get my hormone treatment here and you know if I need them I get my anti depressants. (Alex, p.11)

Alex expressed a positivity about the support she received from healthcare, an experience which varied from other participants. However, having access to anti depressants if required, outlines how their experience within custody has a negative impact on their mental health, with them previously requiring access to medication to manage this. There is also the suggestion that this may be required again in the future.

Robin outlined how he was due to receive gender-affirming healthcare but was informed this was not available at his establishment, suggesting a disparity in provision compared to other prisons.

> And I was suppose to be starting […] like steroids things but they won't do them in here, half the time they don't do them in here, so… you should have access but they don't let you, don't have access access to them most of the time. Because you know the inject, the injection, the hormone things or the injections for the hormones or anything or the hormone tablets or anything like that, you hardly get them in here, 'cause they're like "Oh you can't have them in here". Do you know you can't have any of your, if your starting to go through the change and get the medication from the out, they're like "Oh you can't have that medication in here". So you end up not getting the medication. (Robin, p.21)

Through his account Robin identified how he knew trans+ peers who had received hormone treatment in the community but were unable to within prison. He was angry about this, expressing feelings of injustice. Arbor outlined similar negative experiences, sharing their distress at having an intimate examination where they felt no privacy or support was offered.

> Why are you putting a camera up my front end here? With, where we don't have curtains on the window even though no one can see in that window, that doesn't matter … so I said to them like "Look (…) I'm on an ACCT for another reason so I'm a bit uncomfortable as it is", do you know what I mean. And they said to me, "Alright…So I said can I go to hospital to have it done. So an officer, my key worker who I've known for ages, she came to hospital as my member of staff but they couldn't do (…) because I'd come on and I didn't have enough (…) but I couldn't, so I came back and the doctor said to me (…) book the hospital because I know you don't want to sit in here with and have that done here and I was like, "Yeah, because I'm not comfortable doing that". At least at hospital I got a member of staff that I know that can stay with me and won't let anything happened to me. Oh, yeah, three times they came to me with different appointments here, to have it done here. And I went I'm not doing it here. I went "I'm not comfortable doing it". So then one day they put on my thing 'medical other' and I thought, oh, it's probably affecting my meds (…) and they basically went and got the officer, my old key worker that I got one with, to drag me to healthcare and she stood at the door and went you gotta have it done. I went "OK, yeah". They knew, they knew I wouldn't say no, but at the same time, they shouldn't force me in that predicament to have that done here. A camera up there with two people I've never met, without a curtain on the door.... (Arbor, p.40)

Arbor felt strongly he had been manipulated into the examination as staff knew he would agree if requested by his key worker. His account outlined how he received conflicting information, being informed a hospital appointment would be booked due to his anxiety around examinations but then being forced to have the examination within custody. It was evident through his account he found the encounter traumatising for

both having an intimate examination in a space which was not private and where he felt exposed, with staff they did not know, as well as due to their gender identity. Arbor felt he had no choice as they "drag[ed] me to healthcare and she stood at the door" meaning he was unable to leave. He received an intimate examination relating to a medical intervention for the sex he was assigned at birth, highlighting within his account that he had "come on", meaning he had started menstruating. Throughout this experience Arbor was not listened to or respected and there was no duty of care to protect him or meet his needs as a trans+ person.

From all participants, strong feelings were expressed around healthcare, with either it not being good enough, or staff being amazing. These views varied between prisons, but with participants from the same prison reporting similar experiences. There were also comparisons to experiences with healthcare at previous prisons.

> Mental health? Erm I'm supposed to see psychiatrist every six months. Had an appointment and then they rang up to say he hadn't turned up. He's only in here twice a week. I do have a mental health worker, I see her now and again. Maybe once every 4 to 6 week I think. So, if you're in crisis and psychiatrist in't in, your buggered, your know, you gotta wait. The mental health in here is shocking. Whereas in [R], the mental health team was absolutely fantastic. So there is a switch there. (Max, p.19)

For Max, their experience highlighted previous concerns regarding having SPoCs for trans+ needs, as outlined in the theme 'Unseen until the camera switches on'. This was exacerbated due to only having appointments with their psychiatrist six monthly, therefore cancelled appointment resulted in going onto the waiting list, and had a significant impact on being able to receive any direct mental health support required. It is understood this caused anxiety for trans+ people, increasing their feelings of vulnerability due to not receiving mental health support in a timely manner if in crisis. Although this did not appear to be a problem only encountered by trans+ individuals, with all psychiatrist appointments at risk of being cancelled, the problem was more complex for trans+ patients who required to wait for a specific psychiatrist trained in working with their needs.

The general mental health support provision provided by the establishment meant Max was able to receive some support, and he spoke positively of this. He felt his general mental health difficulties were supported through mental health staff working at the establishment. There was however a negative impact on his emotional wellbeing regarding the delay in accessing trans+ specific mental health care, such as reviewing access to hormones or referrals to gender clinics. Again, emphasising how individual staff members pick up where there may be issues regarding more formalised support.

Avery spoke similarly of individual healthcare staff members going above and beyond in providing support, identifying how they would travel to pharmacies to collect medication to ensure it was received on time.

> The staff actually go out and get it for you. Say like, if they're supplier has trouble getting their 'ormone treatment, like your patches or whatever, then the nurses will go and get GP prescription and they will drive to Boots, anywhere where there's a pharmacy, and they will bring 'em to you. You know. In other prisons you will not get that. You know what I mean. This is this is our healthcare. The best, you know. I cannot fault, I love the healthcare here, you know, and I I I'm protective of them as well when other prisoners abuse 'em, I'm straight on it. You know what I mean. I raise it on like the Council meeting, where the governors and the senior management team go. I raise it like there's no tomorrow, you know, just so it's all raised, so gets nipped in the bud. You know what I mean. 'Cause they're not there to be abused. You know. And honestly they are one of the best healthcares I've ever seen. (Avery, p.36)

Her account implied others within the establishment would be more negative about the provision, and Avery felt it was important to be a spokesperson and ensure healthcare received the credit she felt they deserved. This was potentially due to her experience of healthcare having a positive impact on her transitioning journey. Throughout her interview she raised concerns regarding the behaviour and understanding of other staff groups, emphasising how she was particularly positive regarding the support from healthcare. Avery demonstrated a confidence to share positive praise with senior managers, potentially wanting to protect the staff which she felt were protective towards her.

From the accounts provided, it was clear formal policies and department structures did not necessarily guide the support available from a top-down perspective. Support was instead provided through a bottom-up system, where individual healthcare staff went above and beyond to understand their clients and consider how they could offer relevant support, within the confines of policies.

For those stating they experienced poor access to healthcare services, there was a negative impact on their mental health. Furthermore, their experiences of accessing healthcare within custody impacted decisions regarding their transitioning journey.

> I did try working with mental health at [Y] and I got told that I had to stop self harming before they would work with me, so stop I stopped self harming then they told me they wouldn't work with me because I wasn't self harming.... So I said I don't wanna work with you full stop.... And I didn't work with mental health in [X]. (Ash, p.31)

Ash's previous experience with custodial mental health provisions caused him to refuse to work with them in the future, even at different establishments. Ash's account suggests that he felt rejected by mental health services in the past and that he was not worthy of receiving their support and interventions. He felt so traumatised by his experience he was not willing to trust mental health services again. Such long lasting effects of interactions with staff and/or services are detrimental, creating barriers to potentially receiving the treatment and care required in the future.

Access to healthcare professionals, appropriate examinations, and treatment was very important to participants. There was a clear impact on their mental wellbeing based on the care they received and whether they felt listened to and respected. Previous research around access to healthcare for trans+ people has focused on the community and tended to include trans+ people as a small percentage within a larger sample of LGBTQ+ participants (McDermott et al., 2021; Pattinson et al., 2021). The current study has gained an understanding of trans+ people's experiences of accessing relevant healthcare within custody and supported findings within academic research that generally healthcare providers lack an awareness around trans+ people's medical needs.

3. The complexity of connection in diverse peer relationships

Interpersonal interactions came through strongly, considering relationships with staff and peers, both cis and trans+. The complexity of these connections were evident across the three sub-themes. 'The power of sharing experiences' explored how support groups, where available, helped to develop self expression and identity, whilst also supporting others. 'Different yet not different' emphasised the importance of recognising diversity whilst advocating for equality and the third GET 'Challenges navigating peer relationships' explored participants sense of wanting companionship but having to navigate discrimination from others, a hypersensitivity to discrimination and rejection, and availability of peer support networks within custody.

3a. The power of sharing experiences

Being able to share with others going through similar experiences caused feelings of comfort and increased participants' ability to be open about, and content with, their gender identity. Sharing experiences was important to participants.

> Well since I've been in this jail, I feel like I'm more open. Like out there I was open but not as open as I have been in here. Like I just can't wait to like, obviously I've expressed myself now to everybody and I'm happy with who I am. [...] it's given me a boot up my arse to be honest with you. (Charlie, p.60)

Through sharing experiences within custody Charlie felt able to develop their self-expression and identity. While they were open about their identity before prison, the environment facilitated a more profound sense of self-expression. Their description of custody being "a boot up the arse" is a powerful metaphor conveying a sense of motivation or push toward self-acceptance. This suggests while the experience of incarceration was not ideal, it nevertheless acted as a defining moment in their journey toward self-realisation. This perspective reflected a resilience-based narrative, where adversity led to personal growth.

For Max, sharing their experiences was also important as it encouraged others to do so.

> Something positive, that I've been able to sit in a in an equality meeting and share my journey with other people. And and by doing that then the other trans

have started speaking about their journey. So for me that's a big thing, you know, you always need one person to to start and I'm OK with that. (Max, p.36)

One of the most important aspects of Max's journey within custody was supporting others. He felt strongly about being a spokesperson for trans+ people, speaking out when individuals were discriminated or abused, and acted as a positive role model. Max focused more on how prison impacted other trans+ people, caring more about them receiving appropriate support than himself. He offered limited reflections regarding his own lived experiences, appearing accepting of the situation and the level of support he himself received. Max appeared to gain a sense of purpose through helping and supporting others. Max found it fulfilling and enjoyable to draw on his own experiences to encourage others to express themselves and gain a deeper understanding of their personal journeys.

Participants shared experiences to educate others within custody of trans+ people's needs. It also served a separate function of reducing being gossiped about, through openly sharing their identity and encouraging others to ask questions. Charlie expressed how he would "rather someone come and ask me than someone go and say to another prisoner is that a man? Do you know what I mean? And then I'll come, I'll explain to 'em" (p.14). Although it was not clear how much he experienced this, it was evident it occurred. Charlie clearly felt people would talk about him, asking others questions about his gender identity, meaning their understanding came from other people's interpretations. Fostering an open relationship with others where they could speak to him was therefore important for Charlie and there was a sense he could take back some control regarding how he was spoken about.

Participants did not always feel their need to share experiences was met within custody, for example through not residing with other trans+ people or through limited access to relevant support groups. Feeling part of a community and being able to share experiences was so important to Ash they sought companionships elsewhere and created a sense of community for themselves.

Erm, there's a company come in and have a lot of women, erm, oh what are they called? LGBT something [Northern England]. And they erm, help with erm support and advice around transgenders and you know, LGBT community, so I'm

just waiting for this some a reply from them. And I write to erm Bent Bars? ...So I'm normally sending a poems to them and then they send me the newsletter that has it contained... A sense of pride...Because other people are reading your stuff that understand what you're going through...Yeah, 'cause I read what other people have put. (Ash, p.42)

Ash's account demonstrated how important sharing his experiences was to him, and how he would achieve this through creative writing and reading publications. He developed a sense of community with individuals he had communicated with via the Bent Bars publication. This demonstrated the importance of being part of a community on Ash's sense of wellbeing and how it assisted him to develop/maintain a positive self-image. Having to reach out to communities outside of custody emphasises the lack of support available within prison. The type of support available also has limitations with Ash not receiving direct feedback from his contributions or with him being able to share with others the impact their publications may have had on him.

Rosenberg and Oswin (2015) suggested a proximity to happiness emerges through fostering relationships with other trans+ people in custody and building a community, providing support for the importance placed on building communities identified within the current study. It has also previously been reported that connecting with other trans+ people can validate and normalise experiences (Pflum et al., 2015) as well as expand individuals' understanding of what being trans+ is and what options are available, for example regarding social or medical transitioning (Vincent, 2020). Such views were however not specifically based on the experiences of trans+ people within custody.

Sexton and Jenness's (2016) study involved trans+ people within prisons in California and instead identified being part of a large group of trans+ people within custody had no significant effect on an individual's sense of community. Participants within their study reflected upon a desire to want to be close to other trans+ people, however also recognising this could cause difficulties, which were identified by participants as 'dramas'. This may suggest it is important for trans+ people in prison to seek a sense of community where they can share with others, reinforcing and validating their own experiences. However, such communities may be most effective if made up of

small numbers of people residing together or accessing larger groups where it is easy to retreat from when needed.

3b. Different yet not different

There was recognition by participants of the heterogeneity of trans+ people in women's prisons.

> A lot of stuff doesn't happen with around with a lot of the gender part and different people because because we've got that many different, you know erm LBG people in here. So a lot of different ones in here because it's like the male, want to be males, but then they've got the other ones, it's like, non binary and you've got the other ones it's you know different, different all the different ones we've got, there's a lot of different lasses like non binary, lesbian, different one lasses that's in here. (Robin, p.9)

Throughout Robin's interview he emphasised the importance of recognising the diversity within custody, especially within the women's prison estate. It was clear recognising people's individual differences and positive attributes was important to Robin, whilst he also advocated for everyone to be treated equally, stating no one within the women's prison were any different from each other. This created a level of internal conflict, recognising differences yet desiring everyone be treated the same, and Robin struggled to verbalise how a balance between these could be created.

Max and Arbor were deeply committed to advocating for equality for trans+ individuals in prison, holding the belief that they were no different from others and should not be treated as such.

> I don't feel like I should sit and tell a prisoner. Why should I? ... Why should I have to live on a wing and tell everybody, just so you know I'm trans. 'Cause I don't speak to half of them so it's not like half of them refer to me as she 'cause I don't talk to half of them, do you know what I mean ... I don't need to be a walking flag and say, this is what I am. (Arbor, p.8)

Arbor in particular felt there was an expectation he should announce his gender identity but argued against this, as it is not expected of cis people. He expressed how he should

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be accepted as himself rather than his label, as through his use of the phrase "a walking flag" he felt he constantly needed to share his gender identity for the benefit of others.

Within all participant interviews there was a strong consensus trans+ people in prison should be treated equally to their peers, and a frustration that this was not applied. Comparisons were made to how ethnic minority or disabled people in prison were supported. Participants felt the same level of support and equal treatment should be offered to trans+ people, whereas they felt staff and cis peers avoided associating with them.

> We're not, we're not weird, we're not scum, we're not this or that. We are, we are human beings. We've got the same feelings, the same thoughts, you know. We're just the same as everybody else and we should be treated the same. (Max, p.26)

Max's account emphasised how he felt trans+ people in prison were regularly discriminated and abused. He perceived there was a lack of respect, and this came through in his strong presentation of feeling they were viewed as 'scum' and 'weird'. Their individual differences were perceived as a negative attribute, whereas individuals from other minority groups were offered more support. Among the participant sample, one individual identified as belonging to an ethnic minority. It is suggested they may not have shared Max's view, as they described concealing their ethnic identity in custody due to fear of abuse. Max, on the other hand, presented his perspective on the treatment of people in prison from other minority groups from an outsider standpoint, not explicitly identifying with additional minority groups.

Participants expressed a conflict between believing they should be treated equally to others and access individualised care without acquiring a label, yet a recognition they could only access services through disclosing their gender identity. Trans+ people in prison may conceal their gender identity due to proximal factors, such as expectations of rejections and a hypervigilance to discrimination and violence. As outlined within the Gender Minority Stress Model (GMSM) by Hendricks and Testa (2012), this may be to limit experiences of discrimination and therefore chronic stressors. However, aside from one participant who concealed their ethnic identity, participants were not expressing a desire to hide their gender identity, as suggested by

Hendricks and Testa, but to not have this considered as a defining aspect of their identity. It appeared participants wanted people in prison to receive individualised care, based on their unique needs, without defining labels. It is acknowledged however that this view was shared between participants willing to engage in the research, whereas other trans+ people in custody who have not disclosed their gender identity may hold differing views.

3c. Challenges navigating peer relationships

This subtheme outlined the contradictions experienced in whether participants felt accepted by others in custody; including trans+ peers, the LGBTQ+ community and cis peers. There was a general feeling of being accepted by those they knew well but would tend to avoid others. And although those they were close too generally accepted them for who they were, some participants reported close peers questioning decisions regarding their trans journey.

> Oh I'm I am wary of a lot of the prisoners here 'cause I don't know 'em. And, but the people that I do know they're actually brilliant with me. They're brilliant with me and they're brilliant with the other one. There's a lot of respect between the residents than there is with some of the staff.' (Ash, p.35)

Ash's account demonstrated a contradiction between feeling comfortable with individuals they knew well and a hypervigilance around others due to concerns of discrimination and abuse. This caused Ash to have a small support group, as a means of protecting themselves. Despite being wary around most peers, he felt there was a higher level of respect from them compared to that received from staff. This links to the GET 'The impact of discrimination', where participants identified experiencing discrimination from staff, including purposeful misgendering. Their emphasis on the presence of respect among residents reflects a sense of inclusion, where interactions were grounded in mutual respect and equality.

> Yeah they support me, they says it's how you feel. Like if you don't feel comfortable in who you are, and then as long as I'm happy. Obviously some of them says to me, you sure you want to be a man, like are you making the right choice 'cause once you've had surgery that's it. And I said yeah 'if I don't feel

comfortable in who I am now and then that's the best thing for me.' But they're like what about the long run, do you not want kids. I don't want kids. (Charlie, p.45)

Charlie felt the support he received included people asking important questions regarding his decisions, not feeling these were too personal or inappropriate. He expressed how questions posed by those he knew well were meaningful and they had his best interests in mind. He was happy to express reasoning for his decisions, although within the interview presented some annoyance when people questioned his life choices, such as having children. While he generally felt his peers respected and validated his feelings, certain aspects of his experience were undermined by comments suggesting he had not fully considered the long-term implications. This again demonstrated a conflict within himself regarding outwardly presenting having a supportive network, whilst also feeling a need to justify his decisions, which could impact on how comfortable he felt being able to present as his true self.

Alex in particular appeared to find it difficult to navigate her peer relationships:

I do hang around with some women I do get on with but some that are nasty women not very nice people I just don't bother hanging around. Erm and you know they sort of like, you can't it's (…) the thing is I can't say what I like, so if I say something about somebody, it's like "You can't say that", "Why can't I say that? You know, figure of free speech and whatever, I can say what I like, do what I like", "You're not allowed to do that. (Alex, p.9)

She reported getting on well with cis peers, but also providing examples of being ostracised. She did not appear fully aware of these contradictions, talking positively of her relationships when discussing these directly. Later in the interview however she shared how she felt there was nowhere she fit in and how it could be difficult at times to know who her friends were. Alex also shared she had been falsely accused by other trans+ individuals in custody, which intensified her feelings of being ostracised by those she had expected to be more accepting.

So I felt completely isolated from the trans community as well. And so I'm like … right I don't fit in the cis you know gender and then (…) in the trans community.

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> So I was like, where do I go? 'Cause I don't, 'cause I am trans. And I don't get accepted no matter what gender it is that I go to. And it does, it does feel like that sometimes. (Alex, p.37)

Alex's account reveals the complexities trans+ individuals face when navigating relationships in prison. This included being cautious about who they associated with and carefully monitoring their language to avoid offending others. Such experiences created a sense of being 'imprisoned within a prison', where control extended beyond institutional rules to social dynamics enforced by staff and peers. With limited autonomy, even in choosing who to interact with, Alex described a profound loss of freedom and self-determination.

The majority of participants felt they needed to navigate peer relationships on their own, including managing when they perceived there may be altera motives; "some people are like, not just trying to befriend you, and try to get stuff out off you" (Robin, p.24). The lack of formal support groups available emphasised a need to navigate their own informal support.

Arbor shared a different experience, highlighting how he felt a range of support groups were available within his establishment, including for trans+ people.

> They have transgender er, a positive association. They have, they have at least two forums every week for different people, it's the only prison I've been to where there's a Traveller group, there's Pagan, there's every religion you can get. They've got under 25's, care leavers no matter what it is, they've got a group for it, so that's when I thought OK, that you get taken more seriously here. (Arbor, p.11)

He felt able to receive support for many aspects of his identity, causing him to feel listened to and that he received more support in his current establishment than he had experienced elsewhere. This account suggests that support goes beyond simply having a forum to attend, it reflects a recognition of diverse individual needs. It fosters a sense of being genuinely supported, not only through peer interactions but also through institutional responsiveness, where requests and needs are taken seriously.

Navigating peer relationships was an individual journey for each participant, depending upon their past experiences, sense of being accepted and part of a community within their establishment, and what formalised support was available to them. These findings provide support for the Rejection Sensitivity Model (RSM; Downey & Feldman, 1996) with participants feeling rejected from their peers, both from trans+ and cis communities within custody. Some participants outlined adapting their behaviour to avoid upsetting others, potentially due to being hypervigilant to situations which may lead to rejection (Feinstein, 2020). Having a low sense of connection towards others could cause trans+ people in custody to socially withdraw (Wells et al., 2020), spending more time on their own rather than in the communal areas.

4. The impact of discrimination

As emphasised in the sub themes 'different yet not different' and 'challenges navigating peer relationships', discrimination appeared ever present through participants accounts, with evidence of physical, sexual and emotional abuse, and experiences of rejection. Two sub themes were identified; 'Transnegativity appears ever present' explored how, overall, participants felt vulnerable, particularly in communal areas, where they were hypervigilant about potential harassment or violence from others. The second sub theme 'A need for self-survival' addressed how trans+ people managed the discrimination they experienced in prison.

4a. Transnegativity appears ever present

The majority of participants shared experiences of discrimination within custody, which included reports of verbal, physical and sexual abuse. Avery also reported direct denial of healthcare treatment by staff.

> So they're like deliberately cancelling hospital appointments. And even then, I was going out every month for like electrolysis and they cancelled that one. You know what I mean. So like causing you main degraded treatment at [Y], you know what I mean. They're just, they're just completely severe discrimination. You know what I mean. There was like a hatred in there, you know what I mean, you know. And there was no duty of care there or whatsoever, you know, it was just mad. (Avery, p.21)

Avery expressed strong feelings of staff holding transnegative views at a previous establishment and being denied treatment. The repeated cancellations contributed to Avery's sense of being degraded and had a negative emotional and psychological impact on her. Such experiences would have exacerbated her sense of marginalisation within custody, reinforcing the systemic discrimination she faced and further limiting her access to fair and dignified treatment. She described the treatment as "just mad" suggesting there was no justification, explanation or communication.

Ash's account powerfully illustrates this pattern of mistreatment, as she revealed being raped within custody.

> I was raped when I was at [Y], by erm a lass that I was with. Because she said it was absolutely disgusting that I was trans and then she shoved a broken knife in my backside. (Ash, p.38)

Ash was the victim of rape within the women's prison estate and he reported the perpetrator received no repercussions. He described a horrific violent attack, with use of a weapon within a prison setting, somewhere he should have been protected and supported. This traumatic event for Ash continued to affect his mental health and would have impacted upon how he viewed himself as a trans+ individual. Experiencing physical or sexual assault in prison leaves individuals with limited means to protect themselves. They are required to follow daily routines and reside in close proximity to potential perpetrators, with little opportunity to escape or seek safety.

The account shared by Ash was not something shared by other participants, with the majority of transnegativity reported relating to verbal abuse, including the use of derogatory comments and regularly being misgendered.

> Some people take the piss don't they, they go oh tranny you know what I mean … But you're gonna get that wherever you go…Yeah of course I've heard it but not directed to me no. I've heard it to other people and I just ignore it. And, you know, just don't get involved in it. So if someone's got something to say they're gonna say it regardless and it is just small minded people. That's all it is. (Charlie, p.59)

Charlie's account highlighted how he did not feel he had experienced direct discrimination due to his gender identity but was aware of it occurring within custody.

However, when providing examples of his experiences, Charlie's accounts could be interpreted by others as examples of transnegativity, in particular verbal abuse. This may be due to a de-sensitisation towards such experiences and interpreting them as not as severe as previous abuse they may have encountered in the community. Alternatively, downplaying these incidents could serve as a coping mechanism, allowing individuals to emotionally distance themselves and depersonalise the trauma. However, the presence of transnegativity within establishments caused participants to feel vulnerable, even those who did not report direct discrimination, affecting where they wanted to reside and how they interacted with staff and peers. Charlie's account conveyed a belief that such behaviour is inevitable and simply part of life. He expressed a view that people's thoughts and words cannot be changed, reflecting a level of passive acceptance.

When considering discrimination experienced from staff, participants were confident to identify when staff purposefully misgendered or made genuine mistakes. All participants appeared able to challenge staff, Ash however was the most vocal regarding their experiences of staff discrimination; 'I says, 'You've known me as a he, that's all you know me by. But you still slip up with me, and it's not the first time, it's happened a lot'. And I'll give them a give her the officer her due, calling me a he now' (Ash, p.10). There was also however a sense staff would purposefully antagonise trans+ people to get a reaction; 'Erm like kicking buckets while you you're working. Erm, I've had an officer try and trip me up' (Ash, p.32). Such discrimination was perceived to be more common by male and older staff members.

> So like I said the female staff bang on, they're straight on it, if you're if you're male, you'll be treated like a male. If you're female you'll be treated like a female. Male staff, certain male staff, think it's absolutely disgusting that you want to change your gender. They think you should stay in the gender that you was assigned at birth. I says, 'Yeah but you don't understand what that person is actually going through'. Says, 'I don't care. It's absolutely disgusting', I've been told by a male officer. (Ash, p.31)

Ash's account highlighted how they constantly needed to negotiate with staff in their daily life, and the transnegativity Ash experienced influenced how safe they felt within

custody. Staff openly expressed strong emotions, which participants were expected to hear and absorb, often without staff recognising the inappropriateness of such directness. These expressions of transnegativity were not subtle; participants were aware they were living and working alongside individuals who held deeply negative views about them. This created a hostile environment where trans+ individuals had to navigate daily interactions with people whose prejudice was both visible and unchallenged.

Ash's perception that discrimination was more common from male staff was in line with research by Harrison et al. (2020) who identified that, within a sample of healthcare providers, male staff were more likely to be fixed in their view of gender. Such rigid views could lead to difficulties in accepting gender diversity and cause discrimination towards trans+ people. Furthermore, the experiences of discrimination outlined throughout the study, were similar to those reported by Maycock (2020). Within the current study discrimination was frequently present, as were threats of violence and evidence of use of physical and sexual violence occurring within both the male prison estate for trans women participants, and within the women's prison estate for all participants. Within Maycock's study there appeared to be no accounts of physical or sexual violence occurring.

In consideration of the research by Brömdal et al. (2019) they found trans+ people placed in facilities misaligned with their gender identity faced increased risks of physical and sexual assault. However, this pattern was not clearly evident in the current study. While some participants experienced physical violence, trans men in the women's estate did not appear at higher risk. Regarding sexual violence, trans men reported victimisation in the women's estate, whereas trans women did not. However, trans women did report sexual abuse in the male estate, aligning with Brömdal et al.'s findings. Both trans men and trans women experienced sexualised comments in the women's estate.

4b. A need for self-survival

Due to the constant presence of discrimination directed at trans+ people, participants described the formal routes of reporting discrimination and/or abuse within custody. However, they all felt these were not effective, partly due to problems at

individual staffing levels. It was perceived staff would either actively avoid addressing complaints or were unsure how to proceed and therefore delay addressing issues raised. For Max there was a reluctance to report discrimination due to a notion of "them and us".

> It's awful. Erm to experience something like that in prison is awful because you can't get away from it. You just cannot get away from it. And I've gone back and reported it...And noughts been done. Noughts been done. You know, you know nothing's gonna get done because they all stick together, don't they? As we put it, they all piss in the same pan. (laughs). (Max, p.30)

Max's experiences of reporting discrimination and feeling complaints were not taken seriously, caused them to hold a belief nothing would be done in the future. Although Max implied he did not feel this would change he continued to report discrimination, emphasising the importance of it being recorded and not wanting to give up on trying to achieve change. With a reluctance to report discrimination and a belief complaints would not be effectively addressed, Max, alongside other participants, were left feeling frustrated and had a sense things would never change. Rather than the complaints systems being used effectively to support those victimised, trans+ individuals felt the staff's management of complaints increased their sense of vulnerability. Instead of protecting a vulnerable population, staff were perceived as prioritising loyalty to one another, with Max highlighting a strong sense of camaraderie among staff, described metaphorically as "pissing in the same pan." This dynamic left participants feeling vulnerable, needing to protect themselves in an environment where options were severely limited. Being in custody meant they could not remove themselves from risk, further compounding their sense of exposure and lack of safety.

Participants therefore reported a need to survive on a daily basis. There were contrasting means of achieving this across those interviewed, including utilising solicitors and use of mindfulness activities, as well as more maladaptive means such as self-harm, isolation or threats. Threats disclosed were not explicit, but appeared more of an exasperation at the situation, such as when Ash reported discrimination from a peer to a staff member and stated "Yeah, you either deal with her or I will deal with her now this time" (p.11). No participants disclosed currently using self-harm as a

coping strategy, instead discussing this as past behaviour. Two participants focused on using mindfulness activities as a means of distraction from self-harm.

> Well I do usually, I do like arts and crafts and stuff behind me door and watch the TV or listen to music. Because if I didn't... erm 'cause I find it really hard sometimes 'cause I've got mental health issues as well and when people get to me it sticks in me head half the time and then I get really upset and cry or I get where I just want to hurt myself. But then I stop myself from hurt myself because I know that it's not worth it at the end of the day, it's just someone's opinion. (Robin, p.14)

This account from Robin highlighted how he considered the discrimination he experienced was verbal and he therefore should not allow it to affect him, however it was difficult to minimise the impact on his mental wellbeing. Experiencing regular discrimination made it more difficult for Robin to avoid comments or manage his emotions in relation to discrimination experienced. He had previously used self-harm to manage such situations and considered using this again each time he was discriminated, however did not want to cause himself physical pain and injury. He therefore attempted to utilise other means of managing his emotions, including spending time on his own engaging in craft activities to occupy his mind. Robin's account outlined how at times this was not always effective, and it was difficult for him to forget comments people made. In addition to managing these emotional challenges, he also had to cope with thoughts of self-harm, highlighting the depth of distress caused by his environment and its impact on his mental wellbeing.

From Robin's account it did not appear he used the prison complaint system, instead relying on his own management strategies. Some participants did continue to use the complaints system to report discrimination however, doing so either due to a belief trusted individual staff members would do something with the information, or because they wanted a formal record of the discrimination. Avery expressed a lack of faith in the system and therefore also reported everything to her legal team.

> I do feel safe here and that. I do feel save here and that, you know what I mean, you know, because I'll report it all day long. Because when I report it here, I also

report it to my solicitor. So there's like, so it's logged twice, you know what I mean. (Avery, p.25)

Avery was highly supportive of individuals reporting experiences of discrimination and actively encouraged them to do so. Like Max, she believed that reporting such incidents would not necessarily lead to meaningful action, yet this did not deter her. She also chose to report issues to her legal team to ensure there was documented evidence of her experiences, stemming from a lack of trust in the prison service's ability to accurately record and respond to complaints. Avery reported feeling safe; however, this sense of safety appeared to stem primarily from the knowledge that her solicitors possessed supporting evidence, rather than from the custodial environment itself. This suggests that her reported safety may not reflect a genuine sense of security, but rather a conditional reassurance based on external legal support.

All participants expressed a dissatisfaction at how complaints were dealt with by HMPPS in general, feeling the system only worked when key staff were involved. Again, highlighting how staff were responsible for addressing gaps in the structural support offered by prisons, as well as how trans+ people felt they needed to adopt their own means of addressing or surviving the constant discrimination they were exposed to. Previous research supports trans+ people in prison adopting strategies for survival, as discussed within chapter 4. Brömdal et al. (2022) identified how they would use threats of violence, and violence, as a form of protection with participants reporting if they showed willingness to use violence others would know they could stand up for themselves. With the aim being to decrease their own victimisation. A further study by Halliwell et al. (2022) explored the experiences of one trans + individual in custody in Australia who trained themselves to understand the law so they could fight for the rights and fair treatment of trans+ peers. There is however limited research into coping strategies employed by trans+ individuals within custody.

5.4 Further Discussion

In adopting a phenomenological approach this study set out to develop a rich understanding of the lived experience of trans+ people within the women's prison estate in England and Wales. This study found trans+ participants felt there was a lack of structural support to effectively meet their needs, including access to transgender

review boards and the availability of support groups. The positive experiences noted by participants were overall connected to their interactions with individual staff members, and trans+ participants valued when they felt listened to and respected.

Overall, however, participants highlighted how most staff lacked an understanding of trans+ people's needs and required further training. This supported previous research by McDermott et al. (2021) who identified healthcare providers were not well trained to work with LGBTQ+ patients, and often misunderstood their needs, especially the needs of trans+ patients. The current study provided a more focused lens on how such findings can apply to trans+ people specifically, identifying their unique needs outside of the LGBTQ+ umbrella. It also expands the findings from healthcare providers to the wider staff group working with trans+ people in prison daily.

Staff understanding and attitudes was identified as impacting on how trans+ people were able to gain access to gender-affirming items and entitlements, such as clothing, chest binders, and transgender review boards. This provided support for the findings reported by Maycock (2020) who also identified how staff impacted on whether trans+ people in prison were treated fairly or with respect. Although within the current study there were some reports of being treated fairly by staff, there were also accounts of discrimination, as well as staff not effectively addressing discrimination and abuse from peers.

Regarding discrimination through a reported lack of access to healthcare, HMPPS policy states people in custody are entitled to the same level of healthcare available to them within the community (HMPPS, 2023). Not only could a lack of access to hormone affirming treatment, as outlined by participants, impact on mental wellbeing through delays in starting physical transitioning, stopping hormone affirming treatment which has already commenced could have a significant negative impact on mental health, as well as the physical effects of ceasing hormone treatment (Coleman et al., 2022). Difficulties accessing hormone affirming treatment is documented within previous studies, including by White Hughto et al. (2018), who identified trans+ people in custody experienced delays in accessing hormone affirming treatment or received incorrect dosages. They interpreted that hormone affirming treatment was therefore not valued by those running prisons. White Hughto et al.'s 2018 study was conducted in

prisons within the USA, however similar findings were reported by Maycock (2020) within Scottish prisons.

A lack of access to healthcare services is an example of policies not being fit for purpose, especially with regards to not being adhered to, a view echoed within previous research. Wilson et al.'s (2017) study with trans+ people in prison in Australia identified policies to support trans+ people were not followed, and decisions were made at an individual level by staff with limited relevant knowledge. Participants did not rely on policies for protection against discrimination and abuse, taking responsibility for these important aspects of their prison experience themselves.

Previous experiences of discrimination and harassment will have led trans+ individuals to become hypervigilant, especially within shared spaces, and even more so in spaces where they are particularly vulnerable such as the shower. Hypervigilance will have developed from a young age (Bashford et al., 2017) and previous research identified how the fear of discrimination and abuse would cause individuals to avoid shared spaces where possible (e.g. Fish, 2012; Whittle et al., 2007). This would not always be viable within custody, as avoiding the shared space of the shower for example would mean putting their own health at risk through poor hygiene. It is a difficult position to choose between using a shared space where they feel vulnerable and having the fear of being victimised, or not having basic hygiene needs met.

Such experiences of harassment, discrimination and abuse are examples of the minority stress trans+ people continue to experience within custody. In line with the MST these continued experiences reinforced trans+ peoples' expectations they will experience discrimination and/or transnegativity in the future. Internalising these experiences and expectations is likely to reinforce the need to be hypervigilant in interactions with others, both within custody and following release into the community, negatively impacting upon mental health (Hendricks & Testa, 2012).

Limitations

Key limitations relating to the methodology of this study are identified. Despite aiming to recruit gender diverse participants including non-binary and gender fluid, only transgender individuals were put forward by equalities departments as interested in taking part in the research. Therefore, an aim of the study to address the gap in research

into experiences of gender diverse people in custody was not met. One reason trans+ people may have been reluctant to engage could be related to the limited confidence in staff's understanding of their specific needs. Although staff were explicitly informed expressing an interest in the study should not result in changes to an individual's recorded gender identity within official HMPPS documentation or systems, potential participants may have remained sceptical of staff's comprehension and adherence to this assurance. Furthermore, they may have lacked trust in staff's ability to maintain the confidentiality of both their gender identity and their decision to participate in the study.

The study also lacked diversity in terms of both age and ethnicity. All participants identified as White, including White Ethnic. According to official statistics (HMPPS, 2024a) 89% of trans+ people in custody in England and Wales are White (including White Ethnic), while 11% belong to Ethnic Minority groups (excluding White Ethnic). As a result, the current study does not fully represent the trans+ population within women's prisons in England and Wales, particularly missing the perspectives of ethnic minorities. Intersectionality, as discussed in chapter 2, is critical in understanding the compounded experiences of marginalisation faced by individuals who identify as both trans+ and from an ethnic minority background (Al-Faham et al., 2019). The absence of ethnic minority voices in this study limits the ability to explore how incarceration further shapes these intersecting identities. Without this insight, the study cannot fully account for the unique challenges that may arise from the convergence of racial and gender-based discrimination within the prison system.

Similarly, the study's age representation was limited. Official statistics (HMPPS, 2024a) indicate 1% of trans+ people in prison are aged 18–19, 74% are aged 20-49, and 9% are over 60. While 85% of participants in this study fell within the 20–49 age range, there were no participants from the youngest (18–19) or oldest (60+) age groups. This lack of representation means the study does not capture the experiences of the youngest trans+ people in prison, who may face distinct vulnerabilities, or those over 60, who may have unique healthcare and wellbeing concerns. Furthermore, it is important to note these official statistics aggregate data from both male and female prison estates, as age and ethnicity statistics specific to the trans+ population within the female prison estate are not available. This limitation means while the study lacks

representation from certain age and ethnic groups, the extent of this underrepresentation within the female prison estate remains unclear

Within England and Wales there are currently eight women's prisons managed by HMPPS and two under private management. Both private prisons declined to support recruitment of participants at this time and therefore, the focus of the study was on experiences within prisons managed by HMPPS only. Due to potential variations in policies between private prisons and HMPPS it may be difficult to generalise the experiences explored within the current study to those of trans+ people within private women's prisons. However as across the themes was a strong view individual staff members attitudes and behaviours impacted on trans+ individuals lived experiences, it is proposed a similar impact by staff may be present across the whole women's prison estate, including those within the private sector.

5.5 Conclusion

The current chapter outlined an empirical study exploring the lived experiences of trans+ people within the women's prison estate in England and Wales. Through this study a rich understanding of their lived experiences is gained and suggestions put forward for amendments within the prison estate to allow for increased support and safety for trans+ people. The findings underscore the complexities of navigating a gendered prison system for individuals who do not conform to binary gender norms, calling for systemic changes to address these challenges.

The findings of this study and the systematic review outlined in chapter 4 are brought together in the following chapter. Chapter 6 discusses findings against the aims of the thesis and emphasises the urgent need for reforms to better support trans+ individuals both within and outside of custodial settings. Advocating for inclusive policies and interventions that respect their rights and dignity. Suggestions for future research will also be introduced and discussed in chapter 6.

Chapter 6: General Discussion

6.1 Introduction

This programme of work set out to address the research gap regarding trans+ peoples experiences of prison custody, with a particular focus on the Criminal Justice System (CJS) of England and Wales. Official statistics (HMPPS, 2024a) report in March 2024 there were 295 trans+ people within custody in England and Wales yet there has only been one empirical study (Nulty et al., 2019) exploring their experiences. Previous research, mostly within the USA, has highlighted the complex relationship between trans+ individuals and the CJS, noting how experiences of discrimination, social exclusion, and institutional biases can impact their interactions with legal systems. For example, interactions with the police as victims of hate crime (Brooks, 2024b; Walters et al., 2020) which for some individuals can influence their pathway into offending. Further discrimination is then experienced within custody (Gorden et al., 2017) along with institutional biases, based on a binary prison system. Insights into trans+ individuals' experiences within prison settings suggest that the rigidity of binary, gendered structures create unique hardships. For example, Maycock (2020) highlighted difficulties relating to feelings of being in the wrong clothes, with staff culture influencing trans+ individuals' access to gender appropriate items. Furthermore, this thesis found prison policies and practices are often designed around cisnormative assumptions and therefore fail to accommodate trans+ individual's needs.

Previous research identified how support for trans+ people in prison was not always available (Nulty et al., 2019) and living spaces was a contentious issue not only discussed and considered by those with lived experience but also within political contexts. However, it was considered the variation in policies across countries, as well as within countries, potentially impacted upon the ability to compare lived experiences of trans+ people in custody. Such research has focused on the experiences of trans women residing in the male prison estate, and mostly within US prisons. Moreover, research which has been completed often frames trans+ individuals as a homogenous group, applying a transnormative narrative to understand their experiences, thereby assuming all trans+ people would have the same experiences regardless of their gender identity (Tatum et al., 2020). With this narrow focus, it cannot automatically be

assumed findings from previous research would relate to all trans+ people and to those residing within women's prisons.

This thesis sought to address these research gaps. Including attempting to identify research which focused on the broader experiences of trans+ people within custody to consider how these contributed to the literature base and provide guidance for those who have a responsibility for supporting and managing trans+ individuals in custody. Furthermore, the empirical study (Study 2) focused on the experiences of trans+ individuals within the women's prison estate in England and Wales and included trans men and trans women within the study. Understanding how a minority group within custody interprets services delivered and their views on improvements assisted in evaluating how effectively gender diversity policies are implemented. Through this thesis a rich understanding of the lived experience of trans+ people within the women's prison estate in England and Wales is gained and suggestions put forward for amendments to allow for increased support and safety for trans+ people in custody.

This chapter discusses the thesis findings in relation to the aims as described in chapter 1, which were:

1. To explore the experiences of trans+ individuals in custody
2. To explore the impact of transgender policies on trans+ individuals' experiences in custody
3. To make recommendations for prison staff around effectively supporting and managing trans+ individuals

When discussing the findings from the studies covered in this thesis, links will be made to the existing literature in the field, identifying how the current research adds to this literature base, and provide a critical appraisal of both previous and contemporary studies. Furthermore, the implications of this thesis for policy, practice, and future research will be explored in-depth. This discussion is crucial, as it ensures the research findings are not only contextualised within the broader academic landscape but also translated into meaningful applications. By highlighting how these insights can inform policy decisions, improve professional practices, and shape the direction of future studies, this thesis aims to bridge the gap between research and real-world impact,

ultimately contributing to the advancement of knowledge and evidence-based decision making in the field.

6.2 Aim 1: To explore the experiences of trans+ individuals in custody

Research conducted into the experiences of trans+ people in custody has predominantly focused upon trans women residing in male prisons (e.g. Brömdal et al., 2022; Clark et al., 2022; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Jenness et al., 2019; McCauley et al.; 2018; Nulty et al., 2019; White Hughto et al., 2018). However, this cannot be assumed to represent all trans+ individuals in prison, especially those in women's prisons where it is more likely trans men would live, due to the requirement to reside in an establishment based on their sex as assigned at birth. As has been reported within research into experiences at school and within the workplace, the experiences of trans men and trans women differ (Whittle et al., 2007). Whittle et al. concluded young people at school identifying as trans male received increased levels of bullying and harassment compared to those identifying as trans female. Whereas trans men may face less workplace discrimination compared to trans women. Whittle et al. (2007) argue this disparity is partly due to the societal preference for masculinity and the relative ease with which trans men can be perceived as male when able to present in gender-affirming clothing. Trans women however often face greater scrutiny due to challenges associated with "passing" as feminine. Therefore, it can be suggested experiences within custody would be impacted upon by how easily trans+ individuals are able to present as their affirmed gender.

Both Study 1 (systematic review) and Study 2 (focusing on trans+ individuals within the women's prison estate) found prisons often do not meet trans+ individuals' needs. For example, they often felt unsupported, with their needs inadequately addressed and staff's lack of understanding of these needs was considered to impact access to gender-affirming items and the handling of discrimination and abuse. Support varied and often depended on good relationships with individual staff members rather than systemic support. Findings from both Study 1 and Study 2 highlighted failings in the implementation of policies to support and manage trans+ people in custody, with staff discretion being the main factor determining the level of support they received. Concerns were also raised about access to gender-affirming items such as wigs, chest

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binders, clothing, make up, single showers, and hormones. Such access is important and has significant impacts on trans+ individuals mental and emotional well-being (Collazo et al., 2013; Jenness & Gerlinger, 2020). In consideration of the importance of accessing support and treatment through healthcare, such as hormones, previous research has focused on trans+ individual's experiences within the community and included a small sample of trans+ people amongst wider LGBTQ+ samples (McDermott et al., 2021; Pattinson et al., 2021). This study is unique in its focus on accessing healthcare for trans+ people in custody, highlighting how challenges faced in the broader community are also present within the prison system.

The lack of institutional support and access to essential items not only impacted well-being but also contributed to broader experiences of discrimination and vulnerability reported by trans+ participants. The intersecting factors of being trans+ and in prison creates unique and compounding challenges, both within custody and upon release such as with finding employment (Fish, 2012; Jeanes & Jones, 2021; Turner et al., 2009; Whittle et al., 2007). It is important the uniqueness of intersectionality of gender identity and having a criminal record, alongside other minority identities an individual may hold, is understood by those working with them. Support can involve identifying and addressing discrimination faced due to these minority identities, as well as helping individuals develop resettlement plans that consider the challenges they may encounter throughout their sentence and upon re-entry into the community.

Published work reviewed as part of Study 1 (e.g. Brömdal et al., 2022; Clark et al., 2022; Greene, 2023; Smoyer et al., 2020) and all participants within Study 2 reported experiencing discrimination and/or victimisation within prison which related to their trans+ identity. There was evidence of physical, sexual and emotional abuse, and experiences of rejection. Examples were also shared of how trans+ people in prison managed discrimination, for example through using the prison complaints system, reporting to legal teams, mindfulness activities or using self-harm to cope with difficult emotions. Due to the lack of systematic support trans+ people in custody relied on their own survival strategies, both protective and maladaptive. This supports the Theory of Decompensation (Riggs & Treharne, 2017) which suggests when individuals from minority groups are no longer able to compensate for repeated marginalisation, there is

an increase in experiences of psychological distress, such as stress, anxiety, depression and suicide risk (Peel et al., 2022). To manage these experiences, they are utilising coping strategies, such as those outlined above, as well as substance misuse (Grant et al., 2011) potentially as a means of self-managing discrimination and the resulting mental health difficulties.

Despite being discriminated by others, there was an importance placed on interpersonal interactions focusing on relationships with staff and peers, both cisgender and trans+. Friendships were sought, but difficulties were reported in coping with the discrimination experienced. Feelings of rejection from peers and staff were common, and there were limited opportunities for peer support groups. Discrimination and victimisation caused feelings of loneliness and isolation, compounded by the lack of support available. These feelings have been identified to contribute to depression and anxiety (Bouman et al., 2017a) and increased risk of suicide (Marshall et al., 2016). These difficulties support the Gender Minority Stress Model (GMSM) which suggests negative experiences relating to gender identity cause individuals to distance themselves from society, leading to isolation, a decreased sense of belonging (Hendricks & Testa, 2012) and withdrawing from social support networks (Bouman et al., 2017a).

Despite desiring connection, trans+ individuals hypervigilance in protecting themselves from future discrimination and abuse aligns with the Rejection Sensitivity Model (RSM; Feinstein, 2020), which suggests individuals who have experienced repeated rejection or marginalisation develop an increased sensitivity to potential exclusion. This heightened vigilance may lead them to anticipate negative social interactions, even in neutral or supportive environments, reinforcing a self-protective withdrawal from others. A low sense of connection towards others appeared to further exacerbate this withdrawal in Study 2 (Wells et al., 2020). One possible explanation is that past experiences of discrimination, violence, or exclusion shape a deep-seated mistrust of social relationships. This mistrust can lead to avoidant coping strategies, where trans+ people in prison perceive isolation as a safer alternative to potential harm. This creates a self-fulfilling prophecy whereby they desire a connection with others but feel a diminished sense of such connection due to distancing themselves for protection.

Some positive experiences were reported within both Study 1 (Sumner & Sexton, 2016) and Study 2. These would be connected to key staff members and within Study 2 trans+ participants spoke favourably of staff whom they felt listened to them and showed respect. Although limited, the positive experiences reported within Study 2 demonstrated genuine positive interactions between trans+ individuals and key staff members who wanted to support and understand their needs. This contrasts with the positive account noted by Sumner & Sexton (2016) which appeared to be motivated by a desire to avoid trans+ individuals submitting grievances against staff. Overall, however, it was highlighted most staff lacked an understanding of trans+ peoples' needs, with evidence of a limited motivation address this. Findings from both Study 1 (Mallon & Perez, 2020) and Study 2 suggest staff attitudes and transnegativity may influence behaviours towards trans+ people, with a perception that staff did not protect trans+ individuals from abuse by ignoring complaints or concerns for safety, and only accommodating individual needs when legally required.

A key difference in findings from Study 1 and Study 2 was engaging in intimate relationships. Previous studies found trans women in male prisons often adopted roles they believed heterosexual cisgender men expected from women, sometimes feeling pressured to engage in sexual acts they did not want to do (Jenness et al., 2019). It was also reported some participants engaged in sexual acts for the promise of protection from verbal, physical and sexual abuse by other males in prison (Jenness et al., 2019; Jenness & Gerlinger, 2020). Such engagement in intimate relationships was not evident within Study 2, supporting the suggestion by Jenness and Gerlinger (2020) that trans women within the male prison estate found themselves presenting as hyperfeminine within a hypermasculine environment. It is therefore suggested protection from male peers or a need to navigate the hypermasculine environment of male prisons is not required within the women's prison estate.

In conclusion, the findings from both Study 1 and Study 2 highlight the significant challenges faced by trans+ people in prison. While some positive experiences were noted, largely dependent on supportive staff members, overall there was suggested to be a lack of systemic support and experiences of transnegativity, leading to feelings of vulnerability, isolation, and psychological distress. The difficulties in accessing gender-affirming items, experiences of discrimination, and the absence of adequate peer

support contribute to a heightened sense of rejection and hypervigilance, reinforcing theories such as the GMSM and RSM. These findings emphasise the urgent need for institutional reforms to better support trans+ people in prison, ensuring their rights, dignity, and mental wellbeing are safeguarded within the prison system. Such reforms should also take into account any policy changes that may arise following the 2025 Supreme Court ruling.

6.3   Aim 2: To explore the impact of transgender policies on trans+ individuals' experiences in custody

As identified within the results of Study 1 the variation in policies across countries, as well as within countries, potentially impacted upon the ability to compare trans+ peoples lived experiences. The effective implementation of policies was called into question through the analysis, with trans+ people in custody implementing negative survival strategies, such as self-harm, isolation or threats, due to a lack of support and resources focusing on their needs. Findings from both Study 1 (Sanders et al., 2022) and Study 2 highlighted how some trans+ people in prison would develop a detailed knowledge of policies within their establishments to be able to advocate for their own rights, rather than policies providing adequate care and management.

When considering policy implementation within England and Wales, as considered within Study 2, it was found amendments had been made to the HMPPS policy. These policy amendments did not appear to have been communicated to trans+ participants at the time of their interviews. As a result, those in custody remained unaware of the changes, which directly impacted their expectations regarding access to local transgender case review boards and gender-affirming items. Without knowledge of the updated policies, they were uncertain whether their needs and requests, such as participation in review boards or access to gender-affirming resources, could now be met under the revised framework. This lack of communication may have led to confusion, frustration, or continued feelings of exclusion, as they were unable to advocate for their rights or access available support effectively.

Furthermore, participants reported being aware of systems in place to allow access to support and gender-affirming items, but barriers hindering this such as things being promised but not delivered on, or processes increasing the time it took to receive

gender-affirming items and/or entitlements. This was also apparent across similar studies, as summarised within Study 1, where it was reported staff exerted discretion which trans+ participants felt resulted in limited access to their entitlements (Sumner & Sexton, 2016).

This thesis has identified that systems and policies relating to trans+ people in prison are not fit for purpose, with trans+ people seeking out individualised support (Kanamori & Cornelius-White, 2016). Consideration of how to ensure more streamlined access to gender-affirming items is important, for example having access to second hand shops with gender appropriate clothing and options to buy their own chest binders. As well as consideration of how policies can ensure limited ambiguity or options for staff discretion. Such considerations would work towards creating gender inclusive environments and aim to remove some of the pains of imprisonment identified by Maycock (2020) such as the pains of being in the wrong hall and in the wrong clothes.

It remained unclear in both Study 1 and Study 2 whether policies addressing the care and management of trans+ people in prison are consistently grounded in psychological theories or supported by current research. For example, amendments to the HMPPS policy outline that transgender woman with a history of sexual or violent offences, or who have not had genital surgery, are generally housed according to their birth sex if they lack a GRC, or in separate units within the women's estate if they have a GRC (HMPPS, 2024b). However, research identifies trans+ individuals residing in prisons which do not align with their gender identity are at an increased risk of verbal, physical and sexual abuse (Brömdal et al., 2019; Gorden et al., 2017; Jenness & Gerlinger, 2020; Jenness et al., 2019). This thesis therefore calls for more transparency around what information underpins prison policies within England and Wales. It is therefore recommended current policies regarding the care and management of trans+ people are reviewed. Psychological services should be involved in this review, to consider their psychological content, including reference to relevant theories and research. This would assist in better understanding the factors which guide decisions on the care and management of trans+ people in prison. The recent Supreme Court ruling has created a need for an updated code of conduct for prison services (O'Hare & Geddes, 2025), presenting a timely opportunity to undertake a comprehensive review of relevant policies.

6.3   Aim 3: To make recommendations for prison staff around effectively supporting and managing trans+ individuals

The following recommendations call for systemic change across policy, training, healthcare access, and interpersonal support. They advocate for a person-centred, inclusive approach that recognises the dignity and rights of trans+ people in prison, ensuring they are not only safe but also supported in their journey through custody and beyond.

Recommendation 1: Enhance staff understanding and training

A key recommendation arising from both Study 1 and Study 2 is the urgent need to develop staff understanding of the needs and experiences of trans+ people in prison. Increasing staff capacity to provide effective custodial supervision and care requires a foundational shift in knowledge, attitudes, and practice. This includes recognising the importance of access to security-approved gender-affirming items and reducing staff discretion in granting such access. To support this, it is recommended that current staff training programmes be reviewed to ensure they are fit for purpose and actively challenge prejudices, stereotypes, and negative attitudes. Enhanced awareness training should reinforce the shared responsibility of all staff in the care and management of trans+ people in prison, rather than relying solely on Single Point of Contact (SPoC) roles. This would help ensure that trans+ people feel supported and have someone to approach even when the designated SPoC is unavailable. Involving trans+ people in the design and delivery of training, and seeking input from external agencies with expertise in working with this minority group, would be invaluable in creating meaningful and effective learning experiences.

Recommendation 2: Strengthen and enforce inclusive policy frameworks

Policy frameworks may need to be revised to align with the forthcoming EHRC Code of Practice, which reflects the UK Supreme Court's ruling that the term 'sex' in the Equality Act refers exclusively to biological sex. This interpretation has significant implications for single-sex spaces, including prisons, and may influence how trans+ individuals are accommodated. It is important to recognise that the EHRC code of practice may not be fully trans-affirmative and therefore, any prison policy amendments must go beyond compliance to actively embed inclusive and equitable practices. Staff

should receive clear training on these policies and be held accountable for adherence. There must also be an explicit organisational commitment to challenging discrimination, prejudice, and transnegativity, ensuring that unacceptable and abusive behaviours are addressed. Crucially, trans+ people in prison must not be rendered invisible; their presence and needs should be acknowledged, respected, and integrated into operational policy and practice.

Recommendation 3: Improve access to gender-affirming items and healthcare

Bureaucratic barriers that hinder access to gender-affirming items and healthcare should be removed, and disparities in healthcare provision across prison establishments must be addressed. These disparities are often reported to be inconsistent with standards of care available in the community, which undermines the wellbeing of trans+ individuals in custody. Limited access to gender-affirming items such as wigs, chest binders, clothing, make up, single showers, and hormones has significant impacts on trans+ individuals mental and emotional well-being (Collazo et al., 2013; Jenness & Gerlinger, 2020). Participants in Study 2 highlighted practical solutions, including allowing trans+ individuals to purchase their own items (e.g., chest binders, clothing) and providing access to second-hand resources. Prisons should work with trans+ individuals to consider suitable means of accessing gender-affirming items within custody.

Prisons are also encouraged to work closely with the NHS to ensure continuity and equity of care for trans+ individuals. This collaboration should include streamlined referral pathways for gender-affirming treatments, timely access to hormone therapy, and alignment with NHS and WPATH standards of care. Joint working can also facilitate staff training, shared clinical expertise, and regular monitoring of compliance to address disparities across establishments.

Recommendation 4: Promote person-centred support for trans+ people

It is important to consider the ways in which trans+ people are required to acquire labels or overtly perform their identity in order to access services and provisions. This expectation places an undue burden on individuals to be a 'walking flag' and can lead to further marginalisation. Instead, they should receive person-centred support that recognises individualised needs. This approach involves developing care

plans that reflect each person's self-identified needs, preferences, and safety considerations, while removing unnecessary gatekeeping practices that demand disclosure or performance of identity for access to healthcare, clothing, or other provisions. It also requires embedding trauma-informed practice to acknowledge the heightened vulnerability of trans+ individuals to discrimination and harm, ensuring that support is delivered in a way that promotes dignity and minimises risk.

Furthermore, ensuring continuity of care as individuals prepare for release, including periods spent in the community on temporary licence, is essential. This requires early and coordinated planning with healthcare providers and community organisations, alongside consent-based sharing of care plans and prescriptions to prevent gaps in treatment. Establishing strong linkages with LGBTQ+ services is critical to guarantee access to affirming healthcare and support post-release. Given the significant challenges trans+ individuals often face in the community, such as barriers to housing and employment, housing and safety considerations must be prioritised to reduce the risk of homelessness or unsafe placements. In addition, temporary release protocols should safeguard access to essential provisions and uphold respect for identity in all external settings, ensuring that dignity and wellbeing are maintained throughout the transition process.

By embedding these principles, prisons can create an environment where trans+ individuals are treated as whole persons rather than being reduced to their gender identity, while safeguarding their wellbeing during critical transition periods.

Recommendation 5: Foster interpersonal connection and peer support

Findings from both studies highlight the importance of interpersonal interactions for trans+ people in prison. Despite seeking connection, many struggle to build or maintain social relationships due to victimisation and discrimination. As Wells et al. (2020) note, a low sense of connection can lead to social withdrawal, and Study 2 found that trans+ people often spent more time alone rather than in communal areas. To address this, prisons should consider how peer support groups can be facilitated within custody. Creating forums or spaces for trans+ people to interact with one another would help foster interpersonal relationships, validate shared experiences, and improve mental health and wellbeing. Rosenberg and Oswin (2015) emphasise the importance

of community-building, suggesting that proximity to others can foster happiness and resilience.

Recommendation 6: Reduce victimisation

Finally, discrimination and transnegativity must be addressed due to their significant negative impact on both the physical and psychological wellbeing of trans+ people. Raising awareness of the types of discrimination trans+ people face and equipping staff with the tools to address these issues effectively is imperative. Previous research supports this approach, suggesting that reducing victimisation can enhance an individual's confidence in reintegration and contribute to a reduction in reoffending (Cid et al., 2021). Many trans+ people do not feel safe in prison, and this lack of safety is compounded by a complaints system that is often ineffective. The system must be reformed to ensure it works efficiently and protects vulnerable individuals who cannot easily remove themselves from risky or dangerous situations.

6.5 Strengths and Limitations

This thesis has responded to each of the aims effectively and provided valuable theoretical and practical insights. In addition, this programme of research has key methodological strengths that should be noted.

The study included qualitative methodology which provided an additional platform for trans+ peoples voices to be heard and allowed for the collation of a rich dataset. This is important because it allowed for an in-depth exploration of participants' perspectives and experiences (Brooks et al., 2018). These interviews were recorded on an encrypted device allowing for accurate transcripts to be produced for analysis. This addresses the limitation of studies by Jenness and Fenstermaker (2014), Jenness and Gerlinger (2020), and Jenness et al. (2019) which relied on hand notes being taken at the time of interview, meaning information and nuances may have been missed or not recorded verbatim. Study 2 was unique in focusing a lens on trans+ experiences within healthcare in custody and not just as part of a wider LGBTQ+ group (McDermott et al., 2021; Pattinson et al., 2021). This ensured that how the specific needs of trans+ people were understood and addressed by healthcare was considered, allowing for recommendations to be made.

Secondly, participants included trans males and trans females, expanding upon previous research which mostly focused on the experiences of trans females, and participants were from across four different establishments. These factors allowed for consideration of the impact of prison establishments and policies on a more heteronormative group, whereas previous research has tended to treat trans+ people in prison as a homogenous group (Tatum et al., 2020). This is important because it highlights the diversity of experiences within the trans+ population and ensures that the needs of less researched groups, such as trans men, are not overlooked in policy and practice.

The one previous published study undertaken in England and Wales (Nulty et al., 2019) used a small sample from one male prison. Study 2 therefore addresses a range of limitations including; limited research considering experiences of trans+ people in prison within England and Wales; focus placed on the male prison estate; only one prison included; and a small sample size. Study 2 focusing on the women's estate and using participants from a range of prisons allowed for further consideration of the different experiences trans+ people in prison may encounter.

An additional strength was gaining feedback and advice from those with lived experience during the design of the interview schedule. This provided insight into how questions may be received by participants and encouraged reflection on how to build rapport in the initial introductions. Expanding on this, a further strength was my experience in working with and interviewing people in prison, understanding the custodial environment and using psychological skills to effectively engage with participants. Through these skills this thesis focused on understanding the effects and impact that experiences, both negative and positive, had for trans+ participants. This addressed the limitation of Suhomlinova et al.'s (2023) work where it is considered that limited focus was placed on the effect a lack of access to gender-affirming items had on individuals.

6.6 Limitations

Despite the contributions of this thesis to the understanding of trans+ individuals' experiences within custodial settings, several limitations must be acknowledged. These limitations primarily stem from methodological constraints, gaps

in data collection, and the scope of the research, all of which influence the generalisability and applicability of the findings.

A key limitation of this thesis are the ethical and practical constraints associated with researching incarcerated populations. Access to participants was subject to institutional approval, restricting the ability to engage with a broader or more representative sample. Additionally, participants may have experienced concerns about confidentiality or fear of retaliation, which could have influenced their willingness to disclose sensitive information. Although steps were taken to ensure ethical research practices, such as anonymising responses and reassuring someone's gender identity would not be officially recorded by the prison, these constraints inevitably shape the depth and breadth of data collected.

A further limitation of this research is the lack of direct engagement with prison staff who work with trans+ people. While the thesis discusses staff attitudes toward trans+ individuals within custodial settings, this discussion is primarily informed by secondary data rather than direct empirical research with staff. Including staff perspectives in a separate, dedicated study would provide valuable insight into the institutional and structural factors that shape the experiences of trans+ people in prison. Such perspectives are important for understanding the operational challenges and constraints that may affect the implementation of policies intended to support trans+ individuals, including resource limitations, gaps in training, competing security priorities, and the presence of negative attitudes. The absence of this dimension limits the ability of the thesis to fully explore how policy and practice interact within custodial environments and how these interactions may influence the lived experiences of trans+ individuals in custody.

Acknowledging these limitations is crucial in contextualising the findings of this thesis and identifying areas for future research.

6.7 Future Research

A future programme of research is recommended to build on findings of Study 1 and Study 2, and to address limitations documented throughout this thesis. The recommended programme of research would include the following.

The current HMPPS policy outlines that transgender women with a history of sexual or violent offences or male genitalia are typically placed in male prisons, unless they have a GRC, in which case they may be housed separately in women's facilities (HMPPS, 2024b). Previous research by Gorden at al. (2017) explored the placement of trans+ people in custody, considering placement issues such as safety concerns and increased vulnerability. Further research (McCauley et al., 2018; Wilson et al., 2017) presented views from trans+ people in prison who considered residing together in separate spaces would be positive, perceiving they would live together harmoniously. Some participants within Study 2 also commented on placement within such specialised trans+ units. There were mixed views however regarding support of such allocation; some participants welcomed the company of trans+ peers to share experiences, whilst others raised concerns it may encourage negative stereotypes by others. As this is a change in policy, and in consideration of the April 2025 ruling by the Supreme Court around definitions of sex, man and woman, exploring in more detail the views of trans+ people in prison regarding such a provision would help to understand its potential benefits and address difficulties which may arise. Working towards preventing negative stereotypes of those who reside there becoming common place.

As identified across several themes and supported by previous research (Hebert, 2020; McCauley et al., 2018; Wilson et al., 2017), staff attitudes and behaviour impacted upon trans+ peoples experiences and wellbeing. To fully understanding the experiences of trans+ people in prison it is important to understand the environment in which they reside, which includes the beliefs and attitudes of those working with them. There has been little research in this area, resulting in a limited understanding of what influences staff's attitudes, lack of understanding and lack of motivation. As suggested by Daken et al (2023), and supported within Study 2, staff attitudes vary between enthusiastic to disrespectful, emphasising the importance of exploring factors which influence these attitudes in more detail. Furthermore, rigid views of gender could cause discrimination and be a result of transprejudice or a lack of understanding. Not only does this have an impact in working with trans+ people directly but it has also been argued within this thesis that policies are influenced by broader societal shifts towards transnegativity, and this therefore manifests itself in institutional practice. Exploring beliefs and attitudes held by prison staff which may predict views towards trans+

people in their care would therefore help identify what impact this may have on experiences within custody.

It is recommended future research projects involve engagement with women's prison within England and Wales who are managed by private companies to discuss a joint research project. Discussions regarding what these establishments may be interested in exploring regarding the experiences of their trans+ population would assist in encouraging engagement. Through this a clearer understanding can emerge of whether experiences within women's prisons in England and Wales is universal across all estates, or whether there are different experiences for trans+ people residing in the private sector and HMPPS.

A final recommendation for future research emerges from participants sharing, within interview, experiences of trauma prior to custody which related to their gender identity. Research has been conducted by Rogers and Rogers (2020) which looked at the pathway to offending for trans men however this was conducted in the USA. Further research exploring the pathways into offending for trans+ people and identifying potential links with gender identity is therefore recommended. This would help to develop an understanding of trans+ people's lived experiences in custody, potential risk factors and needs. Such information would be important in working towards reducing offending and reoffending and ensuring their needs are met, risk factors addressed and assist in rehabilitation.

When planning future research, consideration is needed into factors which would help studies to succeed. For example, reflection on how to advertise to gender diverse people to encourage participation, and consideration of any potential barriers to their participation. This is important to ensure an understanding of the potential impact of gendered establishments on those who identify outside of the binary. Furthermore, encouraging a more ethnically diverse participant sample would assist in understanding intersectionality between ethnicity and gender identity for trans+ people in prison. As identified within previous research (Hennekam & Dumazert, 2023) trans communities may not be open to individuals from ethnic minority backgrounds and this therefore could increase feelings of social isolation, for example. Snowball sampling could assist in addressing both factors, asking participants for suggestions of peers who may be approached regarding the study. This is because participants are more likely to be

aware of trans+ peers who have not shared their gender identity with prison staff. In consideration of a reliance on prison staff to identify and approach potential participants, psychologists working within prisons are encouraged to conduct research in this area. Being employed by the prison service reduces barriers to accessing information and being able to approach potential participants, which researchers outside experience. A personal approach of being able to talk to potential participants to discuss proposed studies, aims and participation involved may increase engagement from gender diverse and ethnic minority individuals.

6.8 Conclusion

This thesis has contributed to the exploration of experiences of trans+ people in custody. Study 1 revealed a significant gap in research regarding the experiences of trans+ people, especially in countries with CJS's similar to England and Wales. Existing studies predominantly focus on trans women in male prisons, with limited evidence suggesting these can be generalised to all trans+ individuals, particularly those in women's prisons. This gap informed the focus of Study 2.

Through the use of IPA, Study 2 found trans+ participants often felt unsupported, with their needs inadequately addressed. The positive experiences reported were connected to key staff members, where trans+ individuals felt listened to and respected. However, participants felt most staff lacked understanding of trans+ needs, impacting access to gender-affirming items and the handling of discrimination and abuse. Consequently, the study suggests the necessity of comprehensive staff training.

Policy influence was a recurring theme throughout the thesis. Study 1 indicated that policies significantly affect trans+ peoples experiences in custody, varying not only between countries but also across different states or jurisdictions. Study 2 further found that individuals lack of awareness of relevant policies and amendments hindered their ability to have their expectations met.

These findings have influenced recommendations made which, alongside the outcomes from Study 2, are being shared with participants, staff and management teams within the women's prison estate. An aim of this thesis was to provide recommendations for prison staff around effectively supporting and managing trans+ people in prison. Sharing these findings with senior management teams within the

women's prison estate and with relevant stakeholders within HMPPS who have influence over policy creation, is important for implementation of these recommendations.

Chapter 7: Individual Learning Plan Summary

7.1 Introduction

During this thesis I kept an account of reflections on my development as a doctoral researcher within an individual learning plan (ILP) document. This chapter summarises these reflections, mapped against the four domains of the Vitae Researcher Development Framework (RDF; Vitae, 2011).

7.2 Domain A: Knowledge and Intellectual Abilities

Domain A focuses on a researcher's ability to develop a deep understanding of their field of study, including critical thinking, problem-solving, and applying relevant theories and methodologies. Researchers are expected to generate original insights, demonstrate intellectual independence, and contribute to advancing knowledge. Mastery of specific techniques and the ability to engage with complex ideas are key aspects (Vitae, 2011).

During this doctoral journey, three key areas of development have emerged: expanding my understanding of the trans+ community, enhancing my critical thinking abilities, and advancing my application of qualitative methodology. Upon commencing this doctorate, I recognised my limited knowledge of trans+ experiences and dedicated my first year to broadening this understanding. Initial readings prompted me to reflect on my assumptions on the experiences of trans+ individuals and consider my own privilege in never having to question the alignment between my body and identity. I further explored how language constructs a binary understanding of gender, which can marginalise trans+ individuals, and I deepened my engagement with relevant theories, thereby sharpening my critical analysis skills.

I was fortunate to access a writing development session through a local university, providing valuable guidance on enhancing my academic writing. A key takeaway from this was the benefit of journaling on paper rather than online. I found that using paper forced me to paraphrase, deepening my comprehension. Additionally, I developed a system for evaluating papers, noting strengths, limitations, and connections to other works. This process proved invaluable for my thesis, particularly in synthesising key studies and understanding their relevance to specific themes, such as trans men's experiences.

In conducting my systematic review, I demonstrated an ability to integrate and expand my knowledge while employing critical cognitive skills to analyse literature. The structured process of identifying relevant studies was particularly satisfying, allowing me to make steady progress. Although I occasionally overlooked search terms, needing to start again, I used these moments as learning opportunities to refine my approach for future reviews. The analysis of papers was especially rewarding, requiring synthesising themes across studies which often led to new insights. This process also facilitated my ability to construct coherent arguments, with occasional inspiration coming when I reflected on the material outside of study hours, recording thoughts on my phone when on the school run, for example.

Within my empirical study, I further developed my understanding and application of qualitative methodology, particularly in relation to sampling and data analysis. Revisiting the concept of homogenous samples later in my work proved particularly enlightening, as I recognised the significance of ensuring my sample met the necessary inclusion criteria. For example, initially I had focused on the non-homogeneity of my sample but upon reflection I realised participants shared important commonalities - being from the same women's estate and identifying as trans+ individuals. This homogeneity justified my decision to retain the broader sample, as narrowing it further would have reduced the sample size. This nuanced understanding of sampling, alongside my evolving application of Interpretative Phenomenological Analysis (IPA), contributed significantly to my development as a researcher.

In summary, this doctoral journey has fostered significant growth in my knowledge base, cognitive abilities, and creativity. I have successfully linked my research to real-world issues and situated it within an international context, further contributing to the field. My creativity is evident in the formulation of well-supported arguments in my thesis, which incorporate intellectual insights. Furthermore, as a lecturer and programme director for an MSc in Forensic Psychology and Mental Health, I educate and guide others in their understanding of trans+ people in prison and research methods, which has further refined my skills in critical thinking and evaluation.

7.3 Domain B: Personal Effectiveness

Personal effectiveness emphasises the development of skills and behaviours that help a researcher manage their professional growth. This includes setting and achieving goals, demonstrating resilience and adaptability, managing time and resources efficiently, and maintaining a strong work ethic. Researchers should be able to work independently and collaboratively, while reflecting on and learning from their experiences to improve performance (Vitae, 2011).

Balancing work and life commitments has been particularly challenging during this doctorial journey. My doctorate commenced in 2021, amid the Covid-19 pandemic where restrictions required my children to homeschool unexpectedly. This added stress in managing both my doctorate, paid work and family responsibilities. I have developed strategies to manage my time more effectively, including creating clear work schedules, coordinating childcare with my husband, and setting realistic daily research goals. I learned to focus on the most critical tasks, reducing the temptation to overextend myself. In year 2, I also increased my focus on research by stepping back from other commitments that did not align with my long-term goals, resulting in a more balanced and fulfilling schedule.

A key shift in my mindset has been a focus on the learning journey rather than solely on outcomes. This realisation emerged from reflecting on a personal experience, participating in a Junior Park Run with my children. In the past, I was driven by the goal of completing tasks, i.e., getting to the end of the run, but I now find enjoyment in the process (or taking part in the run), setting smaller goals and savouring the experience. This shift has impacted my approach to research, where I no longer feel frustrated by delays or amendments. Instead, I embrace these as opportunities to learn and refine my skills. Feedback, particularly from my supervisory team, has become a valuable tool for growth.

My confidence in applying the knowledge gained from the DPsych has significantly improved my role as a practitioner psychologist. Initially, I doubted my ability to engage in research or contribute to professional development in this area. However, I have since developed and delivered an event for forensic psychologists, probation staff and social care workers, focusing on the experiences of trans+ individuals in custody. I also receive requests to assist with psychological reports for

trans+ clients. These experiences have bolstered my confidence in offering valuable insights on the intersection of trans+ identity and offending behaviour, allowing me to share my expertise and assist others in understanding this population. Despite occasional feelings of imposter syndrome, I recognise my growing competence and am motivated to continue expanding my professional profile in this area.

7.4 Domain C: Research Governance and Organisation

Domain C highlights the importance of conducting research responsibly and ethically. Researchers are expected to demonstrate a strong understanding of the legal, ethical, and regulatory frameworks that govern their work, including research integrity, data management, and compliance with institutional guidelines. They should manage research projects effectively, ensuring good governance, clear communication, and transparent processes (Vitae, 2011).

When reflecting on my development in relation to this domain during year 1, I recognised how my understanding of data management and ethical considerations evolved. Initially, I underestimated the complexity of the Data Management Plan (DMP), however through relevant training I approached the DMP and ethical approval as integral components of my research that helped me think critically and holistically about my project, rather than as separate administrative tasks. In addition to my own research, I began supervising MSc students' dissertations. This experience was beneficial in applying the skills I developed, being able to provide guidance on ethical applications and research planning.

One of the more challenging aspects of planning my own research project was addressing data archiving and sharing. While open data sharing is encouraged, I initially felt uncomfortable making transcripts freely available as they could be misused or taken out of context. I felt this concern was particularly pertinent when working with the trans+ community who may be hesitant to engage in research due to fears of misrepresentation. However, after attending training I developed a greater understanding the need for and importance of open access research. Through careful consideration of how to anonymise transcripts and ensuring participants are aware of how their transcripts may be used, it is possible to manage data access effectively.

In preparing my research and designing my interview schedule, I reviewed previous literature and critical evaluation forms to identify useful questions. Re-reading journals with a deeper understanding of the topic was beneficial, allowing me to identify key papers and refine my focus. Having created a draft interview schedule however I found it difficult to determine whether my questions were appropriately open or neutral, as some inadvertently assumed negative experiences. Feedback from colleagues with lived experience, including those from the trans+ community, was invaluable in revising the interview schedule to ensure the questions were respectful and non-leading.

A main setback for my research was receiving feedback from the National Research Committee (NRC) rejecting a quantitative component of the empirical study. They cited concerns regarding benefits to the Ministry of Justice (MOJ) and the sensitive nature of the research. This feedback was disappointing, particularly as I had received support from prison governors who recognised the importance of understanding staff attitudes and its impact on the care and management of trans+ people in prison. I considered alternative methods to gather such data without relying on prison staff, such as using publicly available questionnaires. While this approach may yield useful insights, it lacks direct access to HMPPS staff. This is something that I would like to explore further as my career in research develops.

A further set back came when an ethical application amendment was denied. Throughout my data collection I encountered several logistical challenges. Although initial interviews proceeded smoothly, boosting my confidence, subsequent visits faced difficulties with participant availability and communication. The geographic spread of women's prisons exacerbated these challenges and I sought an amendment to conduct interviews via videolink, which was denied. This decision was frustrating, given videolink is commonly used for legal interviews and psychological assessments. I abided by this feedback and continued with in-person interviews, adhering to ethical guidelines. I implemented additional measures, such as confirming interview details in advance, however experienced further cancellations. To support me financially with the additional travel, I applied for university support and explored additional funding opportunities, however these were limited. This experience highlighted the importance of considering financial implications of research, particularly when travel and

accommodation are necessary. Going forward, I will plan more carefully for research costs and explore grant opportunities earlier in the research journey.

In conclusion, these experiences shaped my understanding of the complexities involved in conducting research and helped me develop key skills in data management, ethics, and participant engagement. I am now better equipped to manage the challenges that arise during the research process and can approach future studies with a more comprehensive and reflective mindset.

7.5 Domain D: Engagement, Influence, and Impact

Engagement, influence, and impact focus on how researchers communicate and collaborate with others, both within and outside the academic community. Researchers are expected to disseminate their findings effectively to a range of audiences, influence their field, and contribute to broader societal discussions. This domain also includes developing networks, engaging with stakeholders, and considering the wider implications of research in terms of public understanding and societal benefit (Vitae, 2011).

I actively sought opportunities to disseminate my research and engage with the academic community. Early on, I presented my research proposal at the Outside/rs conference, a forum for LGBTQ+ research. While I felt confident in the preparation and delivery of my presentation, I struggled with concerns about answering questions, particularly regarding the broader theoretical implications of my work. The questions raised, such as those related to the abolition of the prison system and the concept of queering spaces, challenged me especially given my personal stance on the role of prisons based on my professional experience within them. This experience, though uncomfortable, prompted significant reflection on my position within the research community and the broader academic discourse on LGBTQ+ issues. While I initially felt like an imposter, these reflections underscored the importance of engaging with challenging questions to further refine my academic identity and stance.

Following the conference, I was invited to collaborate with another student on a journal article. This collaboration, an 'essay in conversation,' focused on our respective research areas; theirs being the abolition of prisons. Working with a colleague who held a more radical perspective encouraged me to reflect more critically on my own views. I

balanced this with my practitioner experience, which shaped my more pragmatic approach to the future of prisons. Writing this article broadened my perspective, revealing the deeper social issues underlying my research and highlighting the need for larger societal changes. This experience was an important step in my development, reinforcing the significance of aligning personal experience with academic inquiry and the need to engage with complex societal issues.

To further disseminate my research to academics, I created a poster presentation for the University of Suffolk. As this was my first poster presentation, I sought guidance from my supervisors and used my previous conference presentation as a foundation. The process of condensing my research into a visually accessible format helped clarify the focus of my work and provided an opportunity to reflect on the supporting literature. Presenting the poster reinforced my ability to communicate complex ideas concisely and effectively, which ultimately contributed to the development of my final research proposal.

It has also been important to disseminate my findings to practitioner psychologists, who work with this client group, and I therefore presented my findings at the British Psychological Society (BPS) Division of Forensic Psychology Annual Conference 2024. Where I have previously felt like an imposter, I realised through this presentation the skills I have developed throughout my doctoral journey. Not just in relation to my understanding of research and of the subject area, but also personal development. Prior to the presentation I held a narrative that I was nervous and lacking confidence. Through delivering the presentation, answering questions and reflecting upon this afterwards I realised I need to change my narrative. My new narrative is that I do belong in these situations, I am a highly qualified and experienced psychologist, I have developed key skills in research and am confident to share my findings and recommendations with stakeholders and decision makers.

In conclusion, by actively participating in academic conferences, collaborating on journal articles, seeking feedback from diverse sources, and contributing to policy discussions, I have not only disseminated my research but also enhanced my academic development. As I continue to develop, I recognise the importance of further expanding my knowledge, particularly in quantitative methods, to enhance my overall competency in research and teaching.

7.6 Final Reflections

Throughout my doctoral studies, I have greatly valued maintaining a reflective document which served as a vital tool for personal and professional growth. The structure provided by the RDF guided my reflections and prompted me to critically consider the diverse range of skills and competencies required for effective research. Looking back at my progress it is satisfying to recognise the significant strides I have taken across the various stages of my research. From developing a robust research design and refining my data collection methods to disseminating my findings and engaging with the academic community, I have built a comprehensive skill set that I am confident will continue to serve me well in future research endeavours. The process of working through the RDF has allowed me to identify not only my accomplishments but also the challenges I have encountered, each of which has contributed to my growth as a researcher.

I now view the completion of this reflective process as the beginning of a longer trajectory of continuous professional development. While I am proud of the progress I have made thus far, I recognise the skills and competencies I have developed are dynamic and will evolve throughout my career. I see the work I have done to date as a foundation upon which I can continue to build and am committed to engaging in ongoing reflection and development to ensure I remain at the forefront of research practice. As I move forward, I am excited to further refine my skills, expand my knowledge, and contribute to the academic community in a meaningful way.

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Appendix A: Protocol for Systematic Review

Team Information

Project Lead	Sally Evans
Supervisory Team	Prof Daragh McDermott
	Dr Beth Jones
	Sally Lopresti
Date	26/10/2022

Background

Throughout this proposal a number of key terms will be used; Transgender refers to someone who does not conform to society's view of being male or female; a trans woman is a person who was assigned male at birth but identifies as female and a trans man is a person who was assigned female at birth but has a male gender identity. 'Trans' is an umbrella term that includes transgender women, transgender men and non-binary individuals; non-binary meaning that the individual does not identify as part of the man/women gender binary model. A cisgender individual is someone who's gender identity aligns with the sex they were assigned at birth.

The percentage of the population within the UK who identify as trans is unknown, with suggestions that robust data on the trans population does not exist (Government Equalities Office, 2018). Stonewall, a LGBTQ+ rights charity, reported in 2018 that 67% of trans people responding to a study stated they had avoided being open about their gender identity, fearing a negative reaction from others (Government Equalities Office, 2018). With no definitive data, estimates suggest there are between 200,000 and 500,000 people within the UK who identify as trans (Government Equalities Office, 2018).

The true number of trans people residing within prisons in England and Wales is also unknown, potentially due to the reluctance of trans prisoners to identify themselves as trans within prison for fear of experiencing transphobia (discrimination, harassment and/or abuse due to someone's gender identity and/or expression). Existing research indicates that trans people in prisons are significantly more likely to

experience problems compared to cisgender prisoners (Gorden et al., 2017). The types of unique challenges they may experience include breaches of rules due to wearing gender appropriate clothing and/or makeup, a risk of sexual, physical and emotional victimization, and issues with access to healthcare. Evidence for these challenges is documented by Brömdal et al. (2019) who identified that prisoners who were not residing in a prison which aligned with their gender identity were at a greater risk of being victim to verbal, physical and/or sexual abuse. It is proposed that trans women residing in prisons for males are particularly vulnerable; with their trans identity increasing their risk of being raped, coerced into sexual activity, being ridiculed, misgendered (being referred to by their gender assigned at birth) and having restricted access to gender appropriate clothing and/or hormone treatment. Issues with access to appropriate healthcare was suggested to be due to healthcare providers within prison having a lack of knowledge of the needs of trans people (Brömdal et al., 2019).

The increased risks of victimisation, suggest that trans prisoner's experiences of custody are likely to be different to those of cisgender prisoners. These differences would be further compounded as a result of the tendency, specifically within the USA, for trans prisoners to be protected from victimisation by segregation (Gorden et al., 2017). Trans prisoners being placed in segregation for extended periods of time is documented as having damaging psychological health consequences. Research by Brömdal et al. (2019) suggests that trans people who are incarcerated have increased levels of depression, anxiety, other mental health concerns, self-harming behaviours, attempted suicide and surgical self-treatment, whereby they attempt to remove without medical assistance external sexual organs which they associate with their gender assigned at birth.

Considering our understanding of the victimisation trans prisoners experience within custody, there is actually a paucity of research into the lived experiences of trans prisoners. The majority of research has been conducted within the USA (e.g., Dolovich, 2011; Jenness & Gerlinger, 2020; Osborne & Lawrence, 2016; Routh et al., 2017) and one such study focused upon the impact of gendered prisons on trans women being able to live authentically (Jenness & Fenstermaker, 2014). They identified that trans women located within male prisons cannot live authentically because due to their location other prisoners and prison staff will be aware of their sex as assigned at birth

and therefore will be perceived as trans and not as female. Due to this, they are motivated to seek recognition from other prisoners and staff of their feminine characteristics, hoping that they will be perceived as adhering to gendered social norms (Jenness & Fenstermaker, 2014). Research by Okamura (2011) also concluded that trans women residing in male prisons in California, USA, were victims of sexual abuse.

Research has also been conducted within the UK, although the body of research is not as broad as that from the USA. One study based within the Scottish Prison Service (Maycock, 2020) investigated the degree to which prison shapes trans women's perceptions of themselves as gendered people living within prisons for men. They built upon work by Sykes (1958) who identified 5 deprivations which they entitled the 'pains of imprisonment' (loss of liberty, desirable goods and services, heterosexual relationships, autonomy, and security), using these to summarise the painful implications being imprisoned has on individuals. Maycock considered which 'pains of imprisonment' were relevant to trans prisoners and identified issues such as the pains of being in the wrong establishment and in the wrong clothes, experiences of stigma, discrimination and exclusion including the threat of violence, isolation and the pains of transitioning within custody. Although threats of violence were reported as part of the 'pains of imprisonment' there were no accounts within their sample of actual physical or sexual violence occurring. This is in contrast to conclusions from research conducted in the USA (e.g. Okamura, 2011) or reported from the UK by Brömdal et al. (2019).

Aims of the Evaluation

To identify previous research conducted which explores the experiences of detained trans, non-binary and gender fluid offenders in countries with a comparable Criminal Justice System to England and Wales.

Review Question

What are gender diverse offenders' experiences of being detained in countries with a comparable Criminal Justice System to England and Wales?

Objective

As identified the literature into trans prisoners' experiences of prison custody within England and Wales is limited and there are potential differences identified within those experiences documented. It is therefore proposed that reviewing literature from trans prisoners' experiences within justice systems that are similar to HMPPS may enable us to learn more about their experiences.

To the authors knowledge, one similar systematic review has been published (Brooke et al., 2022). The focus of this systematic review was on prisoners who identified as trans women over the age of 18 and were serving a sentence in a male prison. The focus was also on published papers. The findings from a meta-synthesis were used to make recommendations of how the current gender binary environment of prisons within the UK could be addressed. Recommendations focused on processes and policies in place within HM Prison and Probation Service (HMPPS), with limited recognition that this is applicable only to England and Wales. There was limited acknowledgment of the how findings, which for the majority of articles came from outside of the UK, could be applied to the different Prison Services in the UK, including HMPPS, Scottish Prison Service (SPS) and Northern Ireland Prison Service (NIPS). Furthermore, how findings from studies within male prisons could be applied to the wider custodial environment. For example, prisons are established upon the notion of sexual differences which informs how punishment and rehabilitation are applied, with male and female prison establishments incorporating variations in rehabilitation, employment and education opportunities, and interventions (Jenness & Gerlinger, 2020).

The current systematic review takes a broader perspective, with the inclusion of trans and gender diverse prisoners of any age, from more diverse custodial settings; including male and female prisons, young offender institutes, police custody, mental health hospitals and Military Corrective Training Centres. Furthermore, the inclusion of grey literature reduces publication bias. A scoping search identified an additional 11 potential articles, following application of inclusion and exclusion criteria, which were not considered within the paper by Brooke et al. (2022). These papers included participants from youth custody, trans men, the women's prison estate and from grey literature (i.e., dissertations). It is therefore proposed that the current systematic review

protocol allows for inclusion of a broader range of articles which would advance the understanding of the experiences of trans and gender diverse prisoners.

Method
Table A.1
Systematic review eligibility criteria

PIC	Inclusion Criteria	Exclusion Criteria
Population	Trans, gender fluid and non-binary perpetrators Any nationality, ethnicity and level of cognitive-functioning Any age	Studies do not include trans, gender fluid or non-binary perpetrators Where all participants were intersex
Interest	Studies in countries identified as comparator territories with England & Wales* Regarding experiences of being detained	Studies from countries not identified as comparator territories with England and Wales Regarding experiences of being a victim only
Context	Prison/YOI Police custody Mental health hospital Military Corrective Training Centre	Outpatient and Community settings Border Forces
Study Design	Qualitative studies Mixed methods which include qualitative elements Case studies	Policy documents Editorials Literature Reviews Opinion papers Quantitative only methods

Additional Criteria	Written in English language	Written in another language
	Date of publication between (2004-2022)**	Book chapters
	Search terms in title & abstract only	
	Published and unpublished studies	
	Grey literature	

*Such as Northern Ireland, Scotland, Australia, Canada, New Zealand, the Republic of Ireland, the United States, Finland, France and the Netherlands. These are identified by the National Audit Office as advanced democratic nations that were used for a comparison briefing paper on International CJS's (Ministry of Justice, 2012).

**dates were chosen based on implementation of legislation relevant to the comparator countries, including consideration of the Gender Recognition Act (UK; 2004), Yogyakarta Principles (EU; 2007), UN Committee on Economic, Social and Cultural Rights, General Comment No 20 on Non-Discrimination (EU; 2009), Equal Opportunity Employment Commission (USA; 2009) and European Parliament Resolution on the EU Roadmap against homophobia and discrimination on grounds of sexual orientation and gender identity (EU; 2014). As 2004 was the earliest date of implementation of relevant legislation identified this was chosen for the start date of searches.

Search Strategy

To complete the current systematic review the following electronic databases will be searched: PsychInfo, Web of Science, Studies on Women and Gender Abstracts, Scopus and PsycArticles. Following this, reference sections of relevant papers will also be searched. Key academic researchers in the field, identified through this search, will be contacted to enquire about unpublished papers.

Relevant grey literature including Conference Proceedings, Reports and Theses will be included and searched through: ETHos, ProQuest Dissertations and Thesis

Global, OpenGrey and Trade Magazine. The systematic review will be registered on Prospero prior to commencing the literature search.

Table A.2
Systematic review search strategy concepts

Concept 1 (OR)	Concept 2 (OR)
"gender diverse"	prison*
gender-divers*	custod*
gender*divers*	incarcerat*
"non binary"	jail
non-binary	gaol
Nonbinary	perpetrat*
"gender queer"	hospital
gender-queer	offend*
Genderqueer	detain*
"gender fluid"	inmate
gender-fluid	imprisonment
Genderfluid	correctional Facilities
"trans m*n"	
trans-m*n	
transm*n	
"trans wom*n"	
trans-wom*n	
transwom*n	
"trans gender"	
trans-gender	
Transgender	
"trans people*"	
trans-people*	
transpeople*	

"trans individual*"

trans-individual*

transindividual*

"gender nonconform*"

gender-nonconform*

"gender non-conform*"

"trans masculine"

trans-masculine

Transmasculine

"trans-feminine"

trans-feminine

Transfeminine

transex*

transsex*

gender incongruence

gender minority

gender dysphoria

gender variant

Note: The above search terms will be used: Searches will be made for concept 1 AND concept 2

A scoping search conducted within PsychInfo on 22/02/2022 using 27 of the above 'concept 1' search terms alongside 3 of the 'concept 2' search terms, produced 229 individual findings (prior to application of inclusion and exclusion criteria).

The reviewer will be modifying and adapting these search terms based upon the functionality of the databases that will be searched. Some databases require the specificity of the information documented whilst others do not.

Potential articles will initially be selected by reviewing the title and abstract, for evidence of inclusion and exclusion criteria, prior to accessing full papers. A database

will be maintained documenting the number of articles identified through the initial search and then at each stage of the systematic review.

Data Extraction

The following information will be extracted from relevant papers selected:

- Title, authors and date
- Whether peer reviewed
- Full text only
- Geographical location
- Setting
- Aims and objectives of the study
- Methods
- Participants
- Data analysis
- Findings
- Conclusions
- Limitations and Strengths

Study Quality Assessment

Throughout the systematic review I will be following the PRISMA guidelines to ensure transparency (Page et al., 2021). Regarding quality assessment of included studies, were all studies using only qualitative methods I will apply the Critical Appraisal Skills Programme (CASP; 2018) Qualitative Studies Checklist. If included studies incorporated mixed methods, I will instead use the Mixed Methods Appraisal Tool (MMAT; Hong et al., 2018).

Data Synthesis

The data synthesis method planned for this systematic review is meta-ethnography. Using this interpretative methodology would allow for systematically comparing the primary qualitative studies to identify overarching themes (France et al., 2019). I will follow the seven stages of meta-ethnography to synthesise the qualitative data.

Although a meta-ethnography synthesis is planned, this method may be reviewed dependent on the primary research made available from the systematic review.

Appendix B: Example Notices Providing Participant Information for the Study

Notice to Staff

Issue No: XX

Subject: **Project to explore the lived experiences of trans and gender diverse prisoners residing in women's prisons.**

Issue Date: XX/XX/XX

I am a Registered Forensic Psychologist and Chartered Psychologist in private practice, completing a Doctorate in Forensic Psychology (DPsych) at Nottingham Trent University (NTU). I am exploring the lived experiences of trans and gender diverse prisoners residing in women's prisons in England and Wales.

I am inviting trans, gender diverse, non-binary and gender fluid prisoners to take part in this project. Participation will involve an interview with me, at the establishment, where they will be asked a series of questions around their experiences of being in custody and whether they feel these are influenced by their gender identity.

The outcome of this project will be reported within a thesis for the DPsych and within a journal paper/papers submitted for publication. The findings of this project will also be shared with Governing Governors of participating establishments, the HMPPS National Research Board and the HMPPS Transgender Advisory Board. Through this, discussions will be held regarding how the findings can be used by HMPPS to assist policy development. With the ultimate aims being to reduce reoffending, protect the public, provide decent and safe prisons, and deliver high-quality sentence management. Any outcomes from the project will not identify individual people who took part; their identity would be protected.

This project is being supervised by Professor Daragh McDermott and Dr Beth Jones from the School of Social Sciences, Nottingham Trent University.

Any prisoners who identify as trans, gender diverse, non-binary or gender fluid who would like to take part or would like to know more about this project before deciding whether to participate, are invited to get in touch with the Equalities Officer, (insert name), who will pass details onto me. I will then contact interested prisoners to discuss the study in more detail. Informing the Equalities Officer of their interest in participating in this project will not result in the prison being notified of the prisoner's gender identity, if they are not already aware.

If you are asked questions about this study, please direct the individual to the Equalities Officer, XXXX. Please use discretion as some prisoners may not openly share their gender identity and it is important that their discretion and safety is protected.

Thank you

Sally Evans

Forensic Psychologist

DPsych Student at Nottingham Trent University

Notice to Prisoners

I am a Registered Forensic Psychologist and Chartered Psychologist in private practice, completing a Doctorate in Forensic Psychology (DPsych) at Nottingham Trent University (NTU). I am exploring the lived experiences of trans and gender diverse prisoners residing in women's prisons in England and Wales.

If you identify as trans, gender diverse, non-binary or gender fluid I would like to invite you to take part in this project.

Your participation in the study will involve taking part in an interview with me, at your establishment, where you will be asked a series of questions around your experiences of being in custody and whether you feel these are influenced by your gender identity. You can refuse to answer any individual questions. The interview would take around 60 to 90 minutes to complete and would be audio recorded.

Following the interview, during transcription (writing up of the interview) you would be allocated a gender-neutral pseudonym, i.e., a different name, in order to protect your identity. Any information you disclosed which could identify you would be removed or appropriately amended. All audio recordings, interview transcripts and consent forms would be stored electronically and password protected. They would be stored in accordance with General Data Protection Regulations (2018). Following successful completion of the DPsych, audio recordings and consent forms would be deleted.

If you decided to take part and then change your mind, that is fine. You have the right to withdraw your data after the interview and any decision to do so will have no negative consequences for you.

The outcome of this project will be reported within a thesis for the DPsych and within a journal paper/papers submitted for publication. The findings of this project will also be shared with Governing Governors of participating establishments, the HMPPS National Research Board and the HMPPS Transgender Advisory Board. Through this, discussions will be held regarding how the findings can be used by HMPPS to assist policy development. With the ultimate aims being to reduce reoffending, protect the public, provide decent and safe prisons, and deliver high-quality sentence management. Any outcomes from the project will not identify individual people who took part; your identity would be protected.

This project is being supervised by Professor Daragh McDermott and Dr Beth Jones from the School of Social Sciences, Nottingham Trent University.

If you identify as trans, gender diverse, non-binary or gender fluid and would like to take part or if you would like to know more about this project before deciding whether to participate, please get in touch with your Equalities Officer, (insert name), and they will pass your details onto me. I will then contact you to discuss the study in more detail. The Equalities Officer is aware of this project and will use discretion when sharing information with me. Informing the Equalities Officer of your interest in participating in this project will not result in the prison being notified of your gender identity, if they are not already aware.

Thank you

Sally Evans

Forensic Psychologist

DPsych Student at Nottingham Trent University

Appendix C: Risk of Harm and Mental Capacity Screening Sheet

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Dear ...,

.... has volunteered to participate in my research project to explore the lived experiences of trans and gender diverse prisoners residing in women's prisons.

I would be grateful if you could provide some information below, in order that I can ensure that I am making ethical, safe and informed decisions regarding this individual's suitability to participate.

Capacity

	YES	NO
Are there any indications that this individual has a history of severe mental health problems, such that their ability to provide informed consent to participate might be impeded?		
Has the individual been on an ACCT form in the last six months?		
Has the individual been on a Constant Watch due to risk of suicide or self harm in the last 6 months?		

Security

	YES	NO
In relation to this individual, are their specific concerns regarding hostage taking?		
Are there specific concerns regarding females being alone with this individual?		

I am not aware at this stage whether .... is living openly as a transgender/gender diverse individual and so I would appreciate it if you could treat their interest in this project with discretion and sensitivity.

Thank you very much for your assistance in this matter. Please return the form to my secure email address: sally.evans@connectps.cjsm.net.

Many thanks,

Sally Evans, MSc, C.Psychol

DPsych Student – Nottingham Trent University

Nottingham Trent University
Psychology

Participant information

Project to explore the lived experiences of trans and gender diverse prisoners residing in women's prisons.

I would like to invite you to take part in a research project. Before you decide, you need to understand why the research is being done and what it will involve for you. Please take the time to read the following information carefully.

What is the purpose of the study?

The aim of this study is to explore your experiences of being trans or gender diverse within the women's prison estate. This would include exploring what care and wellbeing support is provided to you.

Who is conducting the research?

Sally Evans is a Registered Forensic Psychologist and Chartered Psychologist in private practice, undertaking a Doctorate in Forensic Psychology (DPsych) at Nottingham Trent University (NTU). This research is being supervised by Professor Daragh McDermott and Dr Beth Jones from the School of Social Sciences, Nottingham Trent University.

Who is invited to take part?

Adults (aged 18 years or older) residing in the women's prison estate in England and Wales who identify as trans, gender diverse, non-binary or gender fluid.

Who shouldn't take part?

If you consistently identify with the gender assigned to you at birth please do not take part. Also, if you suffer from a mental illness, learning difficulty or any emotional/psychological difficulties which you feel might be exacerbated by answering questions about your experiences within custody please do not take part.

What does participation involve?

You will first be asked to provide verbal consent to discuss the study in more detail with Sally Evans and a video-link appointment/phone conversation will be arranged for you both to meet. Following this discussion, should you agree to take part in an interview, Sally Evans will arrange to meet with you in person at your establishment where written consent will be obtained. You will be asked a series of questions around your experiences of being in custody and whether you feel these are influenced by your gender identity. You can refuse to answer any individual questions. The interview will take around 60 to 90 minutes to complete and will be audio recorded.

Sally Evans will request the Equalities Officer at your establishment provide information from your OASys which specifically relates to your capacity to consent to take part in the research and any potential risks you may pose to yourself or the researcher. This would allow the research to make an ethical, safe and informed decision regarding your suitability to participate.

Do I have to take part?

No, your participation is voluntary, and you do not have to participate. There will be no adverse consequences in terms of your legal rights and your care/treatment, if you decide not to participate. There will be neither advantages nor disadvantages as a result of your decision to either participate or not participate in the research.

Can I change my mind?

You have the right to withdraw your data after the interview and any decision to do so will have no negative consequences for you. To withdraw, please ask your prison establishment to contact Sally Evans **within one calendar month** of the date of your interview, quoting your unique identifier (available on your consent form). At this point, any information held will be securely deleted. It will not be possible to remove your data after this time.

Will my identity be protected if I take part?

Following the interview, during transcription (writing up of the interview) you will be allocated a gender-neutral pseudonym, i.e., a different name, in order to protect your identity. Any information you disclose which could identify you will be removed or appropriately amended.

There are **exceptions** to the protection of your identity and that is if the researcher perceives you are at risk or are a risk to others. This specifically includes behaviour that is against prison rules and can be adjudicated against, illegal acts, and behaviour that is potentially harmful to yourself (e.g., intention to self-harm or complete suicide) or others. This information will need to be passed onto the relevant authorities. All audio recordings, interview transcripts and consent forms will be stored electronically and password protected. They will be stored in accordance with General Data Protection Regulations (2018). Following successful completion of the DPsych, audio recordings and consent forms will be deleted.

What will happen to the things I say in the interview?

The outcome of this study will be reported within a thesis for the DPsych and within a journal paper/papers submitted for publication. The study might also be referred to in other publications, such as a book or professional magazine. It is possible that as part of the publication process reviewers/scholars might request access to the transcripts. Other researchers/scholars may also request access for completion of additional research. In these instances, full access will be granted as the transcripts will not contain personal, identifiable information. Anonymised transcripts will be securely archived on the NTU Data Archive. After a period of 10 years these will be deleted and no longer available for future research.

The study might also be referred to in other publications, such as a book or professional magazine. Details might also be included in teaching or training sessions. Identifiable information will not be used.

The findings of this study will also be shared with Governing Governors of participating establishments, the HMPPS National Research Board and the HMPPS Transgender

Advisory Board. Through this, discussions will be held regarding how the findings can be used by HMPPS to assist policy development. With the ultimate aims being to reduce reoffending, protect the public, provide decent and safe prisons, and deliver high-quality sentence management.

You will be asked at the end of the interview if you would like to be updated on the findings of the study.

What are the possible disadvantages and risks of taking part?

Necessary steps will be taken to minimise the chances of you being seen with the interviewer by other prisoners or staff members who may be aware of the purpose of the study. However there is a small risk of you being connected with the study and your gender identity being made known.

Within interviews you may be asked questions which you find upsetting or difficult to explore. You may choose to not answer questions and the interviewer will be sensitive to how you are experiencing the interview. Were you to feel negatively affected please speak to Sally Evans during the interview in the first instance. Following the interview you could speak to the Listener Service available at your establishment, The Samaritans on 08457 90 90 90, or contact the Mindline Trans+ Support Line on 0300 330 5468 (currently available on Friday 8pm to 11pm) however you can also receive emotional support from Mindline 24/7 on 0800 138 1692.

What are the possible benefits of taking part?

Your involvement within this study would add to the understanding within academia of the experiences of trans and gender diverse prisoners. Developing this understanding will assist in informing HMPPS policies and practices.

What if there is a problem?

Any complaint or concern about any aspect of the way you have been dealt with during the study will be addressed. Please discuss these with Sally Evans during the interview in the first instance. If you want to speak with someone who is not directly involved in this research, or if you have questions about your rights as a research subject, please direct your request for information or any complaints/queries through your prison

establishment who will contact the DPsych Course Leader at Nottingham Trent University.

Please ask your prison establishment to contact the Data Protection Officer at DPO@ntu.ac.uk if:

- You have a query about how your data is used by the University

- You would like to report a data security breach (e.g., if you think your personal data has been lost or disclosed inappropriately)

- You would like to complain about how the university has used your personal data.

Who has reviewed the project?

This study has been reviewed by and received a favourable opinion from two independent bodies: the HMPPS National Research Committee and the Nottingham Trent University's Schools of Business, Law and Social Sciences Research Ethics Committee. This allows me to undertake this research with people in prison who are happy to agree to be interviewed about their lived experiences of being trans or gender diverse in women's prisons.

Thank you for taking the time to read this participant information sheet.

Sally Evans

School of Social Sciences

Nottingham Trent University

Nottingham Trent University
Psychology

Participant Identifier:

Project to explore the lived experiences, and perceptions of, trans and gender diverse prisoners residing in the women's prison estate.

Please read and confirm your consent to being interviewed for this project by initialling the appropriate box(es) and signing and dating this form

1.	I confirm that I am 18 years of age or older	
2.	I confirm that the purpose of the project has been explained to me, that I have been given information about it in writing, and that I have had the opportunity to ask questions about the research.	
3.	I understand that my participation is voluntary, I can refuse to answer any individual questions and that I am free to withdraw up to one calendar month following my interview, without giving any reason and without any implications for my legal rights.	
4.	I understand that there will be neither advantage nor disadvantage as a result of my decision to participate or not participate in the research.	
5.	I understand there are exceptions to the protection of my identity and that is if the researcher perceives I am at risk or are a risk to others. This specifically includes behaviour that is against prison rules and can be adjudicated against, illegal acts, and behaviour that is potentially harmful to me (e.g., intention to self-harm or complete suicide) or others. I understand this information will need to be passed onto the relevant authorities.	

6.	I give permission for the interview to be audio-recorded by research staff, on the understanding that the recording will be destroyed at the end of the project.	
7.	I understand an anonymised transcript of my interview and consent form will be password protected and stored onto NTU DataStore and also on a password protected USB storage device.	
8.	I understand that anonymised transcripts of my interviews will be retained for 10 years following completion of the project on The NTU Data Archive. Following this retention period all transcripts will be destroyed.	
9.	I give permission for the Equalities Officer at my establishment to provide information from my OASys relating to my capacity to consent to take part in the research and any potential risks I may pose to myself or the researcher.	
10.	I agree to take part in this project.	

_____   _____   _____

Name of respondent   **Date**   **Signature**

_____   _____   _____

Name of researcher taking consent   **Date**   **Signature**

 PROJECT TEAM

Sally Evans, Prof Daragh McDermott and Dr Beth Jones

PROJECT ADDRESS:

School of Social Sciences, Nottingham Trent University

If you want to speak with someone who is not directly involved in this research, or if you have questions about your rights as a research subject, please direct your request for information through your prison establishment who will contact the DPsych Course Leader at Nottingham Trent University.

Please ask your prison establishment to contact the Data Protection Officer at DPO@ntu.ac.uk if:

- You have a query about how your data is used by the University

- You would like to report a data security breach (e.g., if you think your personal data has been lost or disclosed inappropriately)

- You would like to complain about how the university has used your personal data.

Appendix F: Participant Debrief Form

Please retain this information for your records

Participant Identifier:

Project to explore the lived experiences of trans and gender diverse prisoners residing in women's prisons.

Thank you for your participation in this research study. The aim of this study is to explore your experiences of being trans or gender diverse within the women's prison estate. This would include exploring what care and wellbeing support is provided to you.

The findings of this study will be shared with Governing Governors of participating establishments, the HMPPS National Research Board and the HMPPS Transgender Advisory Board. Through this, discussions will be held regarding how the findings can be used by HMPPS to assist policy development. With the ultimate aims being to reduce reoffending, protect the public, provide decent and safe prisons, and deliver high-quality sentence management.

The outcome of this study will be reported within a thesis for the DPsych and within a journal paper/papers submitted for publication. The study might also be referred to in other publications, such as a book or professional magazine. Please let the researcher know if you would like to be updated on the findings of the study.

Right to withdraw data

You have the right to withdraw your data and any decision to do so will have no negative consequences for you. To withdraw, please ask your prison establishment to contact Sally Evans **within one calendar month** of this interview, quoting your unique identifier (available on your consent form). At this point, any information held will be securely deleted. It will not be possible to remove your data after this time.

If you have questions

If you have questions the main researcher conducting this study is Sally Evans. She is a Registered Forensic Psychologist and Chartered Psychologist in private practice,

undertaking a Doctorate in Forensic Psychology (DPsych) at Nottingham Trent University (NTU). This research is being supervised by Professor Daragh McDermott and Dr Beth Jones. Please ask any questions you have now. If you have questions later, please direct your request for information or any complaints/queries through your prison establishment who will contact the DPsych Course Leader at Nottingham Trent University.

Support

If you feel upset after having completed the study or find that some questions or aspects of the study were distressing, please seek support. You could speak to the **Listener Service** available at your establishment, **The Samaritans** on 08457 90 90 90, or contact the **Mindline Trans+ Support Line** on 0300 330 5468 (currently available on Friday 8pm to 11pm) however you can also receive emotional support from **Mindline** 24/7 on 0800 138 1692.

What if there is a problem?

If you want to speak with someone who is not directly involved in this research, or if you have questions about your rights as a research subject, please direct your request for information or any complaints/queries through your prison establishment who will contact the DPsych Course Leader at Nottingham Trent University.

Please ask your prison establishment to contact the Data Protection Officer at DPO@ntu.ac.uk if:

- You have a query about how your data is used by the University
- You would like to report a data security breach (e.g., if you think your personal data has been lost or disclosed inappropriately)
- You would like to complain about how the university has used your personal data.

Appendix G : Demographic Information Sheet

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Participant identifier:

Gender Identity:

- How do you identify in relation to your gender?

	Please tick
Male	
Female	
Trans male	
Trans female	
Non-binary	
Gender diverse	
Genderqueer	
Transmasculine	
Transfeminine	
Agenda	
Bigender	
Multigender	
Gender fluid	
Other (please specify)	
Prefer not to say	

Age:

- How old are you? ....

Ethnicity:

The following is taken from the 2021 Census (Census 2021 paper questionnaires - Office for National Statistics (ons.gov.uk)

- What is your ethnic group?

A. White	Please tick
English, Welsh, Scottish, Northern Irish or British	
Irish	
Gypsy or Irish Traveller	
Roma	
Any other White Background (Specify)	

B. Mixed or Multiple Ethnic Groups	Please tick
White and Black Caribbean	
White and Black African	
White and Asian	
Any other mixed or multiple background (specify)	

C. *Asian or Asian British*	Please tick
Indian	
Pakistani	
Bangladeshi	
Chinese	
Any other Asian Background (Specify)	

D. *Black, Black British, Caribbean or African*	Please tick
Caribbean	
African background (specify)	
Any other Black, Black British or Caribbean background (specify)	

E. Other ethnic group	Please tick
Arab	
Any other ethnic group (specify)	

Appendix H: Semi-structured Interview Schedule

Thank them for taking time to speak to me.

Check whether they have the participant information form, would they like a new one?

Go through consent forms again and remind of confidentiality.

Ask if they have any questions before we start.

1. Is there anything you are missing by taking part?

   Yes: 'I really appreciate that'. Potentially ask more about what they do there

   No: What would you normally be doing now?

2. Is there someone you can talk to after this about anything that may come up?

   Direct them to information in the participant information sheet for support services.

Own awareness of gender identity

3. So to start can you please share with me how you describe your gender identity?

4. When were you first aware of your gender identity?

   Prompt*: Can you tell me a bit about that?*

   How did you begin to express/experience your gender identity?

   Are there any things you did to make you feel more comfortable in your gender identity, i.e., different forms of outward expression.

5. Have you shared your gender identity with others?

   Yes: *When did you share this? Pre prison/within prison?*

   Did you express areas of your gender identity before telling other people about it?

   Have you officially told the prison and/or probation of your gender identity? How was this?

   Have you had a transgender review board since arriving here? How was that?

   Do other prisoners know? Do staff know? How did they find out? How was that? How did it make you feel?

   No: *Have you felt able to express aspects of your gender identity to others?*

Prompt: Is the way you express your gender identity different inside prison compared to in the community? Can you tell me why that is?

Thank you for sharing that with me.

6. What external support networks do you have?

    Prompt: family, friends, specialist trans support groups

    If none: *Who do you feel able to speak to here? i.e staff, peers*

    General experiences within custody

7. How many different prisons have you been in?

    If more than current prison: Which prison estates have you been housed in? i.e., male/female/young offenders/secure training centres

    If in the male estate: What conditions have you been held in? i.e., Were you on normal location or located on a vulnerable unit?

    If on a vulnerable unit: What was the reason for residing on a vulnerable unit? i.e., gender identity/conviction

8. Has your gender identity impacted you being able to access services/support in custody? In what way?

    Prompt: eg. Treatment,

    Healthcare (trans specific and primary care),

    Visits (refer to answer to previous question),

    Work placements/education,

    your release plans, sentence plan, progression

9. Are there areas in the prison where you feel unsafe as a trans/gender diverse person?

    Prompt: Areas of prison to prompt if required: Meal times, Receptions, Searches, Segregation, Residential unit, Association, Visits, Adjudications, Phonecalls, Movement, cell sharing

    Thank you. We are now going to move into talking more about how aware you think the prison is of gender identity.

Prison awareness of gender identity

10. Do you think people running this prison are comfortable with/meet the needs of people with different gender identities?

    Prompt: Are there rules that you know about? How closely are they followed? How do they affect you?

11. Have you experienced any support from people in the prison, or someone you think has gone 'above and beyond'?

    Prompt: What role does this person have in the prison? What did they do to support you? How did it make you feel?

12. If you could have a magic wand, what kind of system and help might be in place for you here?

    Prompt: How would that have helped?

    Prompt: What wouldn't you like to see changed? Why?

13. How easy is it to go to healthcare?

    Prompt: What are the staff like? What is the attitude of wing officers like if you ask to go to healthcare? How are you treated for run of the mill things?

    What does it feel like to ask for things more personal/sensitive? i.e., did people laugh at you? Were you fobbed off? Were staff sympathetic? Did it make a difference who saw you?

    - Primary healthcare (particularly exploring the way in which gender-specific issues are dealt with; e.g. cervical and breast screening, prostate checks, contraception, menopause)

    - Secondary healthcare (e.g. mental health)

    - Specialist gender services

    Prompt : If required, has the prison arranged for external support, either from local or national charities or support groups?

    Thank you for sharing that with me.

    Experiences with staff

14. How do you feel staff in the prison react to trans and gender diverse people in your establishment?

    Prompt: Can you give me some examples?

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Do you have access to gender affirming items?

Is there consistency in how trans and gender diverse people are treated?

What would improve your experience?

Can you give a positive example of a staff interaction/ support?

Experiences with peers

15. How does your gender identity affect how you interact with other prisoners?

    Prompt: *friends/acquaintances/formal peer networks (listeners/insiders etc).*

16. How safe have you felt in custody?

    Prompt: *briefly explore types of abuse Physical/psychological/sexual*

    By whom: trans/gender diverse prisoners, cisgender prisoners?

    Do you feel this is linked to your gender identity?

    Do you feel at a greater risk of victimisation because of your gender identity? Do you feel vulnerable

    What do you do to cope with these situations?

    What/who supports you?

17. What sense of community is there amongst LGBTQ+ people in custody?

    Prompt: *Is there friction/competition?*

    How supported do you feel? - By other trans and gender diverse/cisgender prisoners

    How accepted do you feel? - By other trans and gender diverse/cisgender prisoners

18. Can you please tell me about any peer led support networks you have engaged with in custody?

    Future

19. Have preparations been made for release?

    If yes: *How well do you think your release plans/licence conditions take into account your gender identity?*

    Prompt: *What potential challenges do you feel you may have upon release? Does your release plan/risk management plan address these?*

20. In your view, what might the benefits be/be good about of trans/gender diverse prisoners being living together in just a couple of prisons? What would be the downsides/negatives?

21. How do you think external support networks could help with a more positive experience for trans and gender diverse people in custody?

Closing

22. Can you please tell me something positive about your experience of being a trans person in custody?

Thank you so much for taking part in this interview. I appreciate your time and for sharing your experiences with me so openly.

23. Would you like to be updated on the findings of the study?
24. Would you like me to share with your POM any of the concerns/areas of improvement you have raised today which they may be able to action?

Share debrief form with participant and talk through.

Appendix I: Approval from the HMPPS National Research Committee (NRC)

<u>**APPROVED SUBJECT TO MODIFICATIONS**</u>

Ref: 2022-352

Title: To explore the lived experiences trans and gender diverse prisoners residing in the women's prison estate

Dear Sally,

Further to your application to undertake research across HMPPS, the National Research Committee (NRC) is pleased to grant approval in principle for your research. The Committee has requested the following modifications:

- Please ensure you liaise with establishments to ensure use of OASys data for the project is a feasible approach to take, bearing in mind that local data owners will need to be kept informed and their approval sought for the use of this data.
- Further to the above, the Committee has been advised that staff within the Psychology Service in prisons are not able to help with completing screening to help with the recruitment of participants for this research.
- Please ensure full and careful consideration is given to the potential risk of disclosing details on a prisoner's transgender status with wider prison staff.
- Please email the HMPPS transgender team at hmppstransgender@justice.gov.uk to keep them posted on the project and to agree the preferred way of keeping the team informed about the work, including being sighted on final research outputs prior to publication.
- The following should be included in all participation information sheets/consent forms:
  - Participants should be informed that there will be neither advantage nor disadvantage as a result of their decision to participate or not participate in the research.
  - It must be made clear to research participants that they can refuse to answer individual questions or withdraw from the research until a designated point, and that this will not compromise them in any way.
  - Participants should be informed how their data will be used and for how long it will be held.
- The following should also be included in the participation information sheets/consent forms for offenders:
  - Access to any HMPPS records for the participants should be explicitly covered.
  - It needs to be clear that the following information has to be disclosed: behaviour that is against prison rules and can be adjudicated against, illegal acts, and behaviour that is potentially harmful to the research participant (e.g., intention to self-harm or complete suicide) or others.
  - The respondent should be asked to direct any requests for information, complaints and queries through their prison establishment/community provider. Direct contact details should not be provided.

- The interview schedules should be tested/piloted in the first instance to check ease of use, coverage of key issues and overall length (monitoring any respondent fatigue).
- Under the Prison Act (as amended by the Offender Management Act 2007), mobile phones, cameras and sound recording devices are classified as list B items, requiring authorisation from Governing Governors / Directors of Contracted Prisons (or nominated persons) to take them into and use them in prison.
- When using recording devices, the recordings should be treated as potentially disclosive and it is recommended that devices with encryption technology are used. Recordings should be wiped once they have been transcribed and anonymised unless there are clear grounds for keeping them any longer.
- The availability and appropriateness of key training remains at the discretion of individual establishments.
- Research data should be kept no longer than necessary, e.g., when the research is to be published and the scientific journal requires the original data to be kept for a specified period.
- In the final research reports, the limitations should be clearly set out (e.g., the small sample sizes).

Before the research can commence you must agree formally by email to the NRC (National.Research@Justice.gov.uk), confirming that you accept the modifications set out above and will comply with the terms and conditions outlined below.

Following NRC approval, the decision to grant access to prison establishments or Probation Service regions (and the offenders and practitioners within these establishments/regions) ultimately lies with the Governing Governor/Director of the establishment or the Probation Service Regional Probation Director of the region concerned.

NRC approval covers the following prisons / probation regions:

HMP Askham Grange
HMP Downview
HMP Drakehall
HMP East Sutton Park
HMP Eastwood Park
HMP Foston Hall
HMP Low Newton
HMP New Hall
HMP Send
HMP Styal

If establishments/regions are to be approached as part of the research, a copy of this letter must be attached to the request to prove that the NRC has approved the study in principle. The decision to grant access to existing data lies with the Information Asset Owners (IAOs) for each data source and the researchers should abide by the data sharing conditions stipulated by each IAO.

Please note that a MoJ/HMPPS policy lead may wish to contact you to discuss the findings of your research. If requested, your contact details will be passed on and the policy lead will contact you directly.

Please quote your NRC reference number in all future correspondence.

Yours sincerely,

National Research Committee

National Research Committee - Terms and Conditions

All research

- **COVID-19: local infection control measures -** Researchers hold responsibility to follow local infection control procedures in place at the research site and respond appropriately to any local COVID-19 outbreaks.
- **Amendments to study –** Researchers must inform the NRC promptly of any changes made to the approved methodology[iii]. ***This includes changes to the start and end date of the research***. These amendments should be submitted on the NRC risk assessment form.
- **Research summaries -** The researcher will receive a research summary template attached to the research approval email from the National Research Committee. This is for completion once the research project has ended (ideally within one month of the end date) and must be sent prior to any output or papers being released or submitted for publication. The researcher should complete the research summary document (approximately three pages; maximum of five pages) which (i) summaries the research aims and approach, (ii) highlights the key findings, and (iii) sets out the implications for MoJ/HMPPS decision-makers. The research summary should use language that an educated, but not research-trained person, would understand. It should be concise, well organised and self-contained. The conclusions should be impartial and adequately supported by the research findings. It should be submitted to the NRC. Provision of the research summary is essential if the research is to be of real use to MoJ and HMPPS. Summaries and/or lead researcher's contact details may be shared with others working on similar projects for networking and research or policy development purposes.
- **Publications -** The NRC should receive an electronic copy of any output or papers submitted for release or publication based on this research at the time of submission and at least one month in advance of the publication. The date (when known) and location of publication should be clearly outlined.
- **Data protection** - Researchers must comply with the requirements of the Data Protection Act 2018, the General Data Protection Regulation (GDPR) and any other applicable legislation. Data protection guidance can be found on the Information Commissioner's Office website: http://ico.org.uk

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[iii] This includes changes to research questions, recruitment/selection, data collection methods, analysis, timescales, risks and/or other relevant information as applicable.

Researchers must store all data securely and ensure that information is coded in a way that maintains the confidentiality and anonymity of research participants. The researchers must abide by any data sharing conditions stipulated by the relevant data controllers.

- **Research participants -** Consent must be given freely. It must be made clear to participants verbally and in writing that they may withdraw from the research at any point and that this will not have an adverse impact on them. If research is undertaken with vulnerable people – such as young offenders, offenders with learning difficulties or those who are vulnerable due to psychological, mental disorder or medical circumstances - then researchers should put special precautions in place to ensure that the participants understand the scope of their research and the role that they are being asked to undertake. Consent will usually be required from a parent or other responsible adult for children to take part in the research.
- **Termination** – MoJ/HMPPS reserves the right to halt research at any time. It will not always be possible to provide an explanation, but we will undertake where possible to provide the research institution/sponsor with a covering statement to clarify that the decision to stop the research does not reflect on their capability or behaviour.

Research requiring access to prison establishments and/or Probation Service regions

- **Access –** Approval from the Governing Governor/Director of the establishment or the Regional Probation Director of the region you wish to research in. (Please note that NRC approval does not guarantee access to establishments or Probation Service regions; access is at the discretion of the Governing Governor/Director or Probation Service Regional Probation Director and subject to local operational factors and pressures). This is subject to clearance of vetting procedures for each establishment/Probation Service region.
- **Security** – Compliance with all security requirements. This includes ensuring appropriate security clearance for researchers is in place prior to commencement of data collection.
- **Disclosure –** Researchers are under a duty to disclose certain information to prison establishments/probation regions. This includes behaviour that is against prison rules and can be adjudicated against, undisclosed illegal acts, and behaviour that is potentially harmful to the research participant (e.g. intention to self-harm or complete suicide) or others. Researchers should make research participants aware of this requirement.

<div align="center">**APPROVED SUBJECT TO MODIFICATIONS**</div>

Ref: 2022-352

Title: To explore the lived experiences trans and gender diverse prisoners residing in the women's prison estate

Dear Sally Evans,

Further to your application to undertake research across HMPPS, the National Research Committee (NRC) is pleased to grant approval in principle for your research. The Committee has requested the following modifications:

- The decision about capacity to consent to take part in the research must in all cases sit with the researcher and not be delegated to these staff who are unlikely to have been trained to make such decisions and will not be accountable to a professional body.
- Videolink must not be used for interviews in the Women's Estate.

Before the research can commence you must agree formally by email to the NRC (National.Research@Justice.gov.uk), confirming that you accept the modifications set out above and will comply with the terms and conditions outlined below.

Following NRC approval, the decision to grant access to prison establishments or Probation Service regions (and the offenders and practitioners within these establishments/regions) ultimately lies with the Governing Governor/Director of the establishment or the Probation Service Regional Probation Director of the region concerned.

NRC approval covers the following prisons / probation regions:
- HMP Askham Grange
- HMP Downview
- HMP Drakehall
- HMP East Sutton Park
- HMP Eastwood Park
- HMP Foston Hall
- HMP Low Newton
- HMP New Hall
- HMP Send
- HMP Styal

If establishments/regions are to be approached as part of the research, a copy of this letter must be attached to the request to prove that the NRC has approved the study in principle. The decision to

grant access to existing data lies with the Information Asset Owners (IAOs) for each data source and the researchers should abide by the data sharing conditions stipulated by each IAO.

Please note that a MoJ/HMPPS policy lead may wish to contact you to discuss the findings of your research. If requested, your contact details will be passed on and the policy lead will contact you directly.

Please quote your NRC reference number in all future correspondence.

National Research Committee - Terms and Conditions

All research

- **COVID-19: local infection control measures -** Researchers hold responsibility to follow local infection control procedures in place at the research site and respond appropriately to any local COVID-19 outbreaks.
- **Amendments to study –** Researchers must inform the NRC promptly of any changes made to the approved methodology[iv]. ***This includes changes to the start and end date of the research***. These amendments should be submitted on the NRC risk assessment form.
- **Research summaries -** The researcher will receive a research summary template attached to the research approval email from the National Research Committee. This is for completion once the research project has ended (ideally within one month of the end date) and must be sent prior to any output or papers being released or submitted for publication. The researcher should complete the research summary document (approximately three pages; maximum of five pages) which (i) summaries the research aims and approach, (ii) highlights the key findings, and (iii) sets out the implications for MoJ/HMPPS decision-makers. The research summary should use language that an educated, but not research-trained person, would understand. It should be concise, well organised and self-contained. The conclusions should be impartial and adequately supported by the research findings. It should be submitted to the NRC. Provision of the research summary is essential if the research is to be of real use to MoJ and HMPPS. Summaries and/or lead researcher's contact details may be shared with others working on similar projects for networking and research or policy development purposes.
- **Publications -** The NRC should receive an electronic copy of any output or papers submitted for release or publication based on this research at the time of submission and at least one month in advance of the publication. The date (when known) and location of publication should be clearly outlined.
- **Data protection** - Researchers must comply with the requirements of the Data Protection Act 2018, the General Data Protection Regulation (GDPR) and any other applicable legislation. Data protection guidance can be found on the Information Commissioner's Office website: http://ico.org.uk

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[iv] This includes changes to research questions, recruitment/selection, data collection methods, analysis, timescales, risks and/or other relevant information as applicable.

Researchers must store all data securely and ensure that information is coded in a way that maintains the confidentiality and anonymity of research participants. The researchers must abide by any data sharing conditions stipulated by the relevant data controllers.

- **Research participants -** Consent must be given freely. It must be made clear to participants verbally and in writing that they may withdraw from the research at any point and that this will not have an adverse impact on them. If research is undertaken with vulnerable people – such as young offenders, offenders with learning difficulties or those who are vulnerable due to psychological, mental disorder or medical circumstances - then researchers should put special precautions in place to ensure that the participants understand the scope of their research and the role that they are being asked to undertake. Consent will usually be required from a parent or other responsible adult for children to take part in the research.
- **Termination** – MoJ/HMPPS reserves the right to halt research at any time. It will not always be possible to provide an explanation, but we will undertake where possible to provide the research institution/sponsor with a covering statement to clarify that the decision to stop the research does not reflect on their capability or behaviour.

Research requiring access to prison establishments and/or Probation Service regions

- **Access –** Approval from the Governing Governor/Director of the establishment or the Regional Probation Director of the region you wish to research in. (Please note that NRC approval does not guarantee access to establishments or Probation Service regions; access is at the discretion of the Governing Governor/Director or Probation Service Regional Probation Director and subject to local operational factors and pressures). This is subject to clearance of vetting procedures for each establishment/Probation Service region.
- **Security** – Compliance with all security requirements. This includes ensuring appropriate security clearance for researchers is in place prior to commencement of data collection.
- **Disclosure –** Researchers are under a duty to disclose certain information to prison establishments/probation regions. This includes behaviour that is against prison rules and can be adjudicated against, undisclosed illegal acts, and behaviour that is potentially harmful to the research participant (e.g. intention to self-harm or complete suicide) or others. Researchers should make research participants aware of this requirement.

Appendix J: Approval from the NTU Schools of Business Law and Social Sciences Research Ethics Committee (BLSS REC)

Worktribe.   Search   Sally Evans ▾

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Ethics Application: To Explore The Lived Experiences Of Trans And Gender Diverse Prisoners Residing In The Women's Prison Estate.

☐ Favourable Opinion

[Amend] [Extend] [Mark Project Complete] [≡ ▾]

Summary | Details | Scope | Methodology | Human Participants | Security | Data Management | Documents | **Response** | Progress Reports | Versions | Comments

Response

Chair's Action?	Yes	💬
Approval End Date	30 Apr 2028	💬
Response	Thank you for the revised submission of your ethical application to the Schools of Business, Law and Social Sciences Research Ethics Committee (BLSS REC).	💬

Following resubmission, we are pleased to inform you that the BLSS REC Chair was happy to verify that in their judgement, there were no outstanding ethical concerns and as a result, your revised application has meet with a favourable ethics opinion through Chair's Action.

The favourable ethics opinion of your application is valid until *30 April 2028*. Should your project extend beyond this time then an application for an extension would need to be submitted to the BLSS REC.

Please note: your project has been granted a favourable ethics opinion based on the information provided in your application. However, should any of the information change at any point during your study or should you wish to engage participants to undertake further research, then you are required to resubmit your application to the BLSS REC through the Worktribe Ethics Module for further consideration.

If you do resubmit your application and if you wish to make changes to your existing document(s), please use track changes so we can identify where the changes have been made. To make amendments you will need to delete the old document and replace with a new one. Please put AMENDED and the DATE in the saved document title. Please *DO NOT* replace the existing document(s) with a *clean* copy, as we will not be able to identify where the changes have been made.

Receipt of a favourable ethics opinion does not constitute permission to proceed with the research. A 'breach of integrity' would technically occur if the researcher goes ahead with the project without the correct governance approvals being in place first, which could be considered to be Research Misconduct.

REC documentation should require an explicit commitment from research teams to consider the possible impact that any changes to their research project, but in particular changes to research design and methods of data collection, have on research ethics; and, therefore, whether a follow-up ethics review of a substantial amendment is required. If researchers are unsure, they should discuss the matter with their REC Chair in the first instance.

Examples of substantial changes that would require a research ethics application for review of a substantial amendment include:
(i) the safety or physical or mental integrity of the research participants (normally requiring amendments to information sheets, consent forms and other participant facing documents);
(ii) the scientific value of the study (normally requiring changes to the study methods);
(iii) the conduct or management of the study, (this might include changes in recruitment strategies, data management, or changes that might affect risk assessment);
(iv) the quality or safety of any equipment used in the study.

On behalf of the Committee, we would like to wish you success with the completion of your project.

Annabel Cali
BLSS Ethics Officer
Research Governance and Policy

Appendix K: Published Systematic Review

Trans and gender diverse offenders' experiences of custody: A systematic review of empirical evidence

Sally M. Evans1 🄳 | Bethany A. Jones2 | Daragh T. McDermott3

Abstract

Literature regarding trans and gender diverse (TGD) prisoners' experiences of prison custody is limited. Reviewing international literature enables a better understanding of these experiences and how effectively TGD policies are implemented. This systematic review employed PRISMA and ENTREQ guidelines to enhance transparency in reporting the synthesis of qualitative and mixed-methods research. Seventeen papers were included and through meta-ethnographic synthesis three overarching themes emerged: structural, interpersonal and intrapersonal. Recommendations include reducing reliance on survival strategies by TGD prisoners through implementation of policies which meet TGD prisoners' needs and to enabling better informed decision making regarding housing. Further research into lived experiences would allow for a better understanding of what currently works, how services could be improved, and identify potential training needs.

KEYWORDS

custody, gender diverse, lived experience, systematic review, transgender

1 | INTRODUCTION

According to the 2021 census, in March 2021 there were 262,000 people living in England and Wales who identified with a gender different from their sex registered at birth (Office for National Statistics, 2023). A trans woman is a person who was assigned male at birth but identifies as female and a trans man is a person assigned female at birth but identifies as male. Gender diverse is a term used to describe people who identify outside the binary regardless of the gender they were assigned at birth. Trans and gender diverse (TGD) are umbrella terminology used to describe people who experience incongruence between their sex assigned at birth and gender identity. The true percentage of the population within the UK who identify as TGD is unknown, due to the lack of robust prevalence data. For example, the UK wide LGBT survey in 2018 identified that 67% of TGD people responding stated they avoided being open about their gender identity, fearing a negative reaction from others (Government Equalities Office, 2018).

Of the 78,058 people incarcerated in prisons in England and Wales in March 2021, 197 identified as TGD (HM Prison and Probation Service, 2021), although this statistic is also likely to be an underestimation given that many people will chose to conceal their affirmed gender identity. Concealment occurs due to fears of experiencing transnegativity (i.e., discrimination, harassment and/or abuse due to someone's gender identity and/or expression) (Hebert, 2020; White Hughto et al., 2018). As prisons are gendered establishments, which assume there are only two genders, prisoners generally reside in an establishment based upon their legal gender (Newburn, 2017). Most TGD prisoners reside within an establishment which does not align with their gender identity.

Existing research indicates that TGD people in prisons are significantly more likely to experience challenges during their internment compared with cisgender (i.e., someone whose gender identity aligns with the sex they were assigned at birth) prisoners (Gorden et al., 2017; Sevelius & Jenness, 2017; Simopoulos & Khin Khin, 2014). The unique challenges they may experience include breaches of rules by wearing gender appropriate clothing and/or make-up, a risk of sexual, physical and emotional victimisation, and issues with access to health care. Evidence for these challenges is documented by Brömdal et al. (2019) who identified that prisoners residing in a prison which did not align with their gender identity were at a greater risk of verbal, physical and/or sexual abuse. Trans women residing in prisons for males are particularly vulnerable with their TGD identity increasing the risk of being raped,

coerced into sexual activity, ridiculed, misgendered (i.e., being referred to by their gender assigned at birth) and receiving restricted access to gender appropriate clothing as well as gender confirmatory medical care (Drakeford, 2018; Francisco, 2021; Jaffer et al., 2016).

The difference in these unique challenges experienced may, in part, be related to the content of policies in place, hitherto the care and management of TGD prisoners within different countries and contexts. Furthermore, within some countries policies varied by state/jurisdiction, such as within Australia, Canada and the USA. At the time of writing, current policies across all Australian jurisdictions agreed that TGD prisoners should be able to state their preference for the gender of staff conducting body searches and that affirmed names and pronouns should be used. However, policies from two Australian jurisdictions set out that the correct use of names and pronouns can be ignored if there is a lawful reason to do so. Further variations between policies across Australian jurisdictions include whether TGD prisoners should have access to private showers and toilets, how segregation should be used as a form of protection, and whether personal items (e.g., cosmetics) that affirm someone's gender identity are allowed (Winter, 2023). In the USA, TGD prisoners are typically allocated to prisons based on their sex as assigned at birth, with very few examples of TGD people being housed in establishments which align with their gender identity (MacDonald et al., 2022). However, within California, the Transgender Respect, Agency, and Dignity Act passed in 2021 states that TGD prisoners should reside in their preferred establishment, unless security concerns prevent this. 'The care and management of individuals who are transgender' policy within England and Wales states that allocation of establishments is made based upon an individual's legal gender, although TGD prisoners without a Gender Recognition Certificate (GRC) can request to reside in an establishment which aligns with their gender identity. Consideration is then given to the risk of harm to both the TGD prisoner and other prisoners within the requested establishment. A reform to the policy in 2022 outlined that trans women with male genitalia or who are convicted of a sexual offence should not reside in the female prison estate, with TGD prisoners who cannot reside safely in either the male or female estates being held on specialist units (HM Prison and Probation Service, 2023). As can be seen there is a variation in policies both between, and even within, countries which may impact upon TGD prisoners' experiences of custody.

Despite the variations in policies and known victimisation of TGD prisoners, there is a paucity of research into the actual lived experiences of gender minorities living under supervision. Additionally, most research has been conducted with trans women residing within male prisons and within the USA, whose prison system and policies vary by state. Both of these factors limit the applicability of the findings. To the

authors' knowledge, only two systematic reviews exploring TGD prisoners in custody have previously been published (Brooke et al., 2022; Gorden et al., 2017). Gorden et al. included HM Prison Inspectorate and Ministry of Justice reports from the UK, not focusing on the lived experiences of TGD prisoners but including views of staff regarding management and support. They concluded that a lack of support available for TGD prisoners was evident, appearing to be justified by the perception that low numbers within custody did not warrant individualised approaches.

The systematic review by Brooke et al. (2022) focused on trans women prisoners over the age of 18 years living in male prisons. Five themes were identified: femininity in male prison, friendships and relationships, harassment, sexual abuse and physical violence, solitary confinement and housing, and limited to no access to transgender health care. These findings led Brooke et al. to make recommendations as to how the current gender binary environment of prisons within a UK context could be addressed. However, there was limited acknowledgment of how findings, most of which came from outside the UK, could be applied to the different prison services in the UK (including HM Prison and Probation Service (HMPPS), Scottish Prison Service (SPS) and Northern Ireland Prison Service (NIPS)) and therefore whether the recommendations made could truly be applied across the UK. Furthermore, how findings from studies within adult male prisons could be applied to the wider custodial environment, including female prisons and young offender institutions, and the impact differing policies may have on these experiences was not considered, again potentially limiting how effectively their recommendations could be applied. This reinforces how TGD people are often framed as a homogenous group, applying a *transnormative* narrative (i.e., assumptions that TGD people follow the same linear path in transitioning from one binary gender to another) to understand their experiences (Tatum et al., 2020).

Given the limitations of previous systematic reviews, the current systematic review takes a broader approach, with the inclusion of views from TGD prisoners of any age, from more diverse custodial settings. This allows for inclusion of a broader range of articles to advance understanding of the experiences of TGD prisoners. It also takes into consideration context (such as the type of custodial setting and geographical location), relevant policies, and how these factors may impact upon TGD prisoners' experiences within custody.

The current review aims to:

1. Identify previous research conducted which explores the experiences of detained TGD offenders in countries with a comparable criminal justice system (CJS) to that in England and Wales.

2. Identify how TGD prisoners interpret services delivered and how effectively gender diversity policies are implemented.

3. Develop an understanding of experiences of TGD prisoners in countries with a comparable CJS to that in England and Wales.

Specifically, we intend to answer the following research question: What are TGD offenders' experiences of being detained in countries with a comparable CJS to that in England and Wales?

2 | METHODS

2.1 Protocol registration

The review protocol was registered with the PROSPERO International Prospective Register of Systematic Reviews on 8 November 2022 (registration number: CRD42022370415).

2.2 | Review method design

A systematic review process was employed, following PRISMA (Page et al., 2021) and ENTREQ (Enhancing transparency in reporting the synthesis of qualitative research: Tong et al. (2012)) guidelines. Meta-ethnographic synthesis was applied allowing for a systematic comparison of qualitative studies enabling identification of overarching themes (France et al., 2019). The Noblit and Hare (1988) stages of meta-ethnography were followed, ensuring interpretations were explicit and transparent.

2.3 | Search strategy

A comprehensive search strategy was employed, using different terms to capture research associated with 'gender diversity' and 'incarceration' (see Table 1). Boolean 'AND' and 'OR' operators were used for all search terms.

A structured review protocol was designed with the inclusion/exclusion criteria created in line with a modified PICo tool (Joanna Briggs Institute, 2014): **P**opulation, **I**nterest, **Co**ntext and incorporating **S**tudy design (PICS) to capture qualitative and mixed methodologies. Seven electronic databases were searched between 15 and 25 November 2022, and again on 5 January 2024 including a review of grey literature. To widen the search and limit potential publication bias, hand-searching of reference lists, correspondence with experts and search of the gov.uk website were conducted.

Five government reports were found under the topic of 'crime, justice and law' and the subtopic 'prisons and probation'.

TABLE 1 Systematic review search strategy concepts.

Concept 1 (OR)	Concept 2 (OR)
"gender diverse"	prison*
gender-divers*	custod*
gender*divers*	incarcerat*
"non binary"	Jail
non-binary	Gaol
Nonbinary	perpetrat*
"gender queer"	Hospital
gender-queer	offend*
Genderqueer	detain*
"gender fluid"	Inmate
gender-fluid	Imprisonment
Genderfluid	"correctional facilities"
"trans m*n"	
trans-m*n	
transm*n	
"trans wom*n"	
trans-wom*n	
transwom*n	
"trans gender"	
trans-gender	
Transgender	
"trans people*"	
trans-people*	
transpeople*	
"trans individual*"	
trans-individual*	
transindividual*	
"gender nonconform*"	
gender-nonconform*	
"gender non-conform*"	
"trans masculine"	
trans-masculine	
Transmasculine	
"trans-feminine"	
trans-feminine	
Transfeminine	
transex*	

transsex*
"gender incongruence"
"gender minority"
"gender dysphoria"
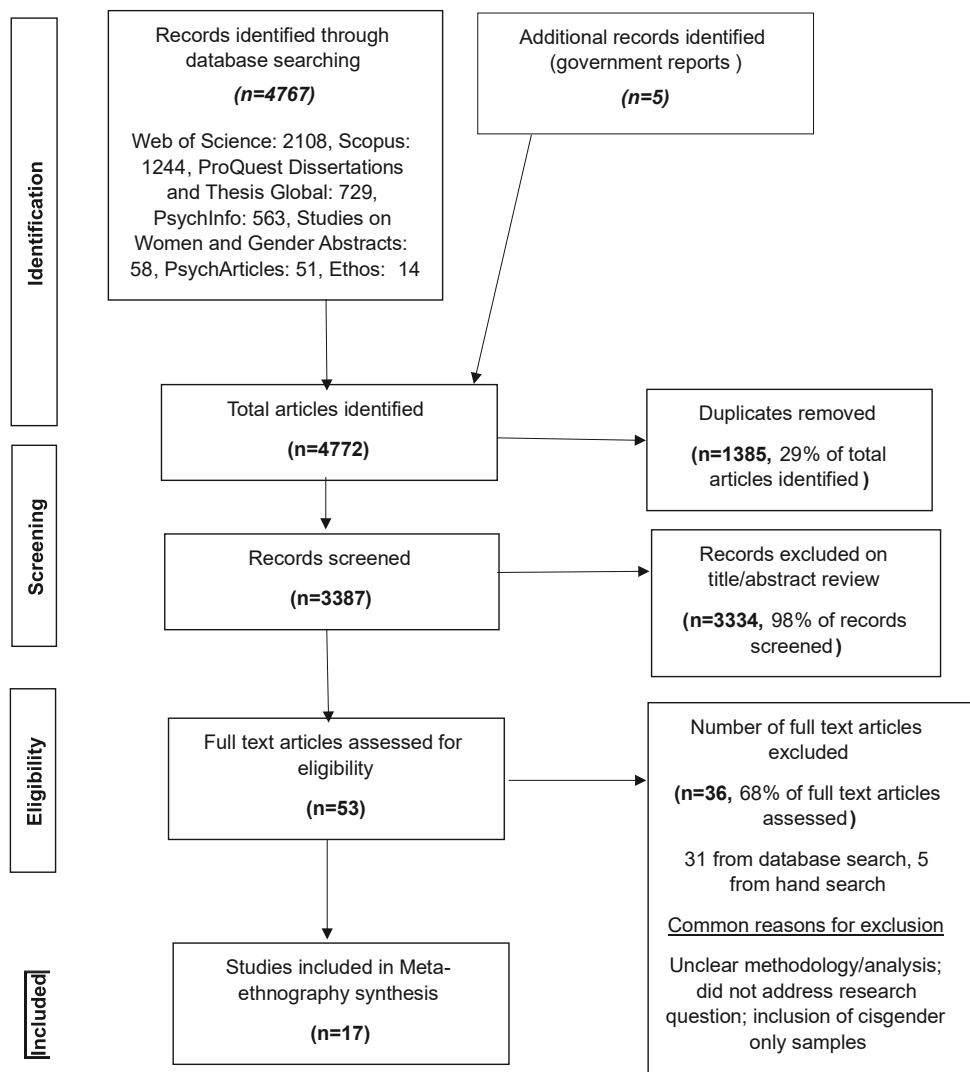"gender variant*"

FIGURE 1   PRISMA 2009 flow diagram.

2.4 | Article selection

Figure 1 outlines the article selection process, including the number of records initially identified, those excluded, and the number included in the final analysis.

Full text articles were accessed and assessed for eligibility against the inclusion/exclusion criteria. Inclusion criteria outlined samples of TGD perpetrators of any age, nationality and ethnicity; settings of prison, young offender institutions, police custody, mental health hospitals and military training centres; within countries identified as comparator territories with England and Wales. These included Northern Ireland, Scotland, Australia, Canada, New Zealand, the Republic of Ireland, the United States, Finland, France and the Netherlands. Comparator countries were identified by the National Audit Office as advanced democratic nations used for a comparison briefing paper on International CJSs. These countries were identified through analysis of published data regarding offences brought to justice, sentencing, prisons, reoffending, legal aid and CJS costs (National Audit Office, 2012).

Included studies were published between 2004 and 2023. These search dates were chosen based on implementation of legislation relevant to comparator countries, for example, Gender Recognition Act 2004 (UK), Yogyakarta Principles 2007 (EU) and Equal Opportunity Employment Commission (USA; 2009).

Fifteen studies using qualitative analysis and two mixed-methods studies were included in the meta-ethnographic synthesis. Inclusion of the two mixed-methods studies followed consideration of the emphasis on qualitative analysis within their methodologies. Both studies included interviews with 315 transgender women incarcerated in California, USA, totalling approximately 300 hours of interview data. It was considered that this provided rich information regarding their experiences of being incarcerated.

2.5 | Quality assessment

A quality assessment was carried out on studies included. The Critical Appraisal Checklist (CASP: Critical Appraisal Skills Programme, 2018) was used to assess all qualitative aspects. For studies using a mixed-methods design the Mixed-Methods Appraisal Tool (MMAT: Hong et al., 2018) was also utilised. Each study was categorised as high, moderate, or low quality (see Table 2). One study was rated as high quality, and three studies were rated as moderate/high quality. Eight studies were of moderate quality, four studies rated as low/moderate quality and one as low quality.

Through completion of the CASP key strengths identified related to the data analysis within studies being sufficiently rigorous (n = 8, 53%) and taking ethical issues into consideration (n = 7, 47%). Weaknesses related to the relationship between the researcher and participants not being adequately considered (n = 11, 73%).

Two studies were also reviewed using the MMAT. Strengths included an adequate rationale for a mixed-methods approach (n = 2, 100%) and components of the study were effectively integrated (n = 2, 100%). The main weakness related to difficulties identifying whether divergences and inadequacies between quantitative and qualitative elements were adequately addressed (n = 2, 100%).

TABLE 2 Quality assessment

Authors	Overall quality assessment	Strengths and weaknesses
Brömdal et al. (2022)	Moderate-High	<u>Strengths</u> Participant eligibility criteria outlined. Justification for use of Thematic Analysis. Inclusion of appropriate quotes to support themes. Clear statement of findings presented. <u>Weaknesses</u> No justification provided for comparison between USA and Australia. Relationship between the researcher and participants not adequately considered.
Clark et al. (2022)	Moderate	<u>Strengths</u> Clear statement of research aims. Justification for use of Thematic Analysis. Relationship between researcher and participants not adequately considered. Ethical issues considered. <u>Weaknesses</u> No justification provided for comparison between USA and Australia. Very broad themes generated.
Greene (2023)	Low	<u>Strengths</u> Appropriate recruitment strategy. Strong links to previous research Relationship between researcher and participants not adequately considered. <u>Weaknesses</u> Ethical issues not considered.

		Unclear how themes generated Unclear why Grounded Theory was applied to address research goal. Details regarding data collection not included.
Hebert (2020)	Low-Moderate	<u>Strengths</u> Research design appropriate to address the aims of the research. <u>Weaknesses</u> Data analysis not specified. Ethical issues not considered. Relationship between researcher and participants not adequately considered.
Jenness & Fenstermaker (2014)	Moderate	<u>Strengths</u> Appropriate recruitment strategy to address the aims of the study. Strong links to previous research. <u>Weaknesses</u> Data analysis not specified. Details of the study were not included, e.g. methodology and data collection.
Jenness & Gerlinger (2020)	Moderate	<u>Strengths</u> Adequate rationale for mixed methods approach. Qualitative and quantitative components effectively integrated. Clear summary of findings linking to previous research. <u>Weaknesses</u> Unclear how themes generated.
Jenness et al. (2019)	Moderate	<u>Strengths</u> Adequate rationale for mixed methods approach. Qualitative and quantitative components effectively integrated. Strong links between literature review and discussion. <u>Weaknesses</u> Interviews not audio recorded.
Lea et al. (2017)	Low-Moderate	<u>Strengths</u> Data analysis sufficiently rigorous. <u>Weaknesses</u> Relationship between researcher and participants not adequately considered. Findings not clearly discussed in relation to original questions.
Mallon & Perez (2020)	Low-Moderate	<u>Strengths</u> Ethical issues considered. Appropriate data collection. <u>Weaknesses</u>

		Unclear how themes generated.
Maycock (2020)	High	**Strengths** Appropriate recruitment strategy. Ethical issues considered. All identified TGD prisoners in Scotland approached. **Weaknesses** Relationship between researcher and participants not adequately considered.
McCauley et al. (2018)	High-Moderate	**Strengths** Ethical issues considered. Data analysis sufficiently rigorous. Appropriate data collection. **Weaknesses** Relationship between researcher and participants not adequately considered.
Nulty et al. (2019)	Moderate	**Strengths** All identified trans women in the prison were approached. Appropriate data collection. **Weaknesses** Unclear who completed data analysis. Relationship between researcher and participants not considered.
Sanders et al. (2022)	Moderate	**Strengths** Relationship between researcher and participants considered. **Weaknesses** Unclear why data was collected within USA and Australia and combined into one data set.
Smoyer et al. (2020)	Moderate	**Strengths** Appropriate data collection. Ethical issues considered. Data analysis significantly rigorous. **Weaknesses** Data collected from small urban area. Participants eligible if incarcerated in last 5 years, rationality not explained.
Sumner & Sexton (2016)	Moderate	**Strengths** Appropriate research design to address identified aims. Appropriate data collection. **Weaknesses** Relationship between researcher and participants not adequately considered.
White Hughto et al. (2018)	Moderate-High	**Strengths** Ethical issues considered.

		Theoretical basis for data analysis outlined and process recorded in detail.
		Weaknesses
		Participants eligible if incarcerated in last 5 years, rationality not explained.
		Relationship between researcher and participants not adequately considered.
Wilson et al. (2017)	Low-Moderate	Strengths
		Interview guide included.
		Discussion of modification to investigate themes raised by participants.
		Weaknesses
		Details of study not included, e.g. methodology and data collection.
		Relationship between researcher and participants not adequately considered.
		Limited consideration of ethical issues.

3 | RESULTS

3.1 Study characteristics

The oldest paper was published in 2014 (Jenness & Fenstermaker, 2014) and the most recent in 2023 (Greene, 2023). Of the 17 papers which met the criteria for inclusion in this systematic review, ten were conducted within prisons (Hebert, 2020; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Jenness, Sexton & Sumner, 2019; Lea, Gideonse & Haraw, 2017; Maycock, 2020; McCauley et al., 2018; Nulty, Winder & Lopresti, 2019; Sumner & Sexton, 2016; Wilson et al., 2017) and seven within the community (Brömdal et al., 2022; Clark et al., 2023; Greene, 2023, Mallon & Perez, 2020; Sanders et al., 2022; Smoyer, Divita & Perrault, 2020; White Hughto et al., 2018). With respect to the locations where these studies were conducted, 13 used US samples (Brömdal et al., 2022; Greene, 2023; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Jenness, Sexton & Sumner, 2019; Lea, Gideonse & Haraw, 2017; Mallon & Perex, 2020; McCauley et al., 2018; Sanders et al., 2022; Smoyer, Divita & Perrault, 2020; Sumner & Sexton, 2016; White Hughto et al., 2018). Four used samples from Australia (Brömdal et al., 2022; Clark et al., 2023; Sanders et al., 2022; Wilson et al., 2017), two from the UK (Maycock, 2020; Nulty, Winder & Lopresti, 2019) and one from Canada (Hebert, 2020). Three papers used the same data set (Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Jenness, Sexton & Sumner, 2019) and one paper (Clark et al., 2023) utilised datasets from two other papers (Brömdal et al., 2022 and White Hughto et al., 2018).

With respect to the methodologies applied, 15 papers used qualitative analysis (Brömdal et al., 2022; Clark et al., 2023; Greene, 2023; Hebert, 2020; Jenness &

Fenstermaker, 2014; Lea, Gideonse & Haraw, 2017; Mallon & Perez, 2020; Maycock, 2020; McCauley et al., 2018; Nulty, Winder & Lopresti, 2019; Sanders et al., 2022; Smoyer, Divita & Perrault, 2020; Sumner & Sexton, 2016; White Hughto et al., 2018; Wilson et al., 2017) and two adopted a mixed-methods approach (Jenness & Gerlinger, 2020; Jenness, Sexton & Sumner, 2019). Three studies had samples of five or fewer (Nulty, Winder & Lopresti, 2019; Smoyer, Divita & Perrault, 2020; Wilson et al., 2017), with optimal sample sizes for IPA and thematic analysis (the analysis tools used) suggested to be between four and ten (Smith, Flowers & Larkin, 2022) and six and ten respectively (Fugard&Potts,2014). Table 3 outlines the key findings extracted from the data.

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TABLE 2 Data extraction

Authors, date, country	Sample and setting	Data collection	Analysis	Findings
Brömdal et al. (2022) Australia & USA	4 trans women (Australia) 20 trans women (USA). Community	Semi-structured interviews	Thematic Analysis	Trans institutionalism (self and the total institution), trans intimacy (self and relations with others) and trans bodily sovereignty (expressing femininity) were identified as factors which defined the relationships incarcerated trans women navigated when enacting their intimate citizenship. Narratives illustrated self-sufficiency, and innovative and proactive ways to subvert institutional policies and practices by exerting influence over spatial assignment, embodying, expressing and enacting femininity, and engaging in socio-emotional, strategic, romantic and friendly relationships.
Clark et al. (2022) Australia & USA	9 trans women (USA) 3 trans women (Australia) Community	Semi-structured interviews	Thematic Analysis	The oppression-to-incarceration cycle developed through interviews with Black American and First Nations Australian trans women documents how trans health inequities are produced, maintained, and exacerbated by the carceral system and presents an application of the Research for Transgender Health Justice framework. This conceptual model seeks to name intersecting power relations, disrupt the status quo and centre embodied knowledge in the lived realities of formerly incarcerated Black American and First Nations Australian trans women.
Greene (2023) USA	32 trans people or within the spectrum of trans femme Community	Semi-structured interviews	Grounded Theory	This article contributes methodologically to the conversation in transgender studies—work generally in the realm of theory and in textual and visual analyses—by offering interviews that shine attention on the experiences and subjective meanings of incarcerated trans women. Examining incarcerated women's insurgent agency through their engagement in everyday life clarifies the multiple structures of domination institutionalized by the prison. It is not patriarchy

				alone but intersections of race, gender, and class oppression that prisons consolidate and that incarcerated trans women navigate in the course of making lives behind bars
Hebert (2020)

Canada | 13 TGD prisoners

Prison | Anthropological fieldwork | *Does not specify* | Participants were invested in a process of balancing the possible benefits of new rights-based accommodations against their possible consequences.

Gender self-determination is one among many aspects of life in prison that TGD people have to contend with to survive.

Participants were engaged in balancing acts involving mitigating immediate threats to their safety and staff's "arbitrary exercises of power" and managing the emotional and interpersonal dimensions of prison life. |
| Jenness & Fenstermaker (2014)

USA | 315 trans women

Prison | Semi Structured Interviews | *Does not specify* | The prison environment sets the stage for embodiment to be understood as unforgiving ("Everyone knows") and eminently deniable ("Who cares?"). Through the pursuit of the real deal gender expectations remain and demand that the TGD prisoner's behaviour reflects an inherent femininity. |
| Jenness & Gerlinger (2020)

USA | 315 trans women

Prison | Semi Structured Interviews | Mixed-methods analytic strategy | Participants revealed a commitment to an authentic self that is as essential as it is undeniable. They revealed considerable attentiveness to expressions of femininity as an expression of identity.

Transgender women in prison perceived themselves to be more feminine while incarcerated than prior to incarceration. Feminine behaviour and their presentation of self was identified as a method whereby respect could be accrued in prison. |
| Jenness et al. (2019)

USA | 315 trans women

Prison | Semi Structured Interviews | Mixed-methods analytic strategy | Incident reports of transgender women being groped and fondled in ways that are unwanted and against their will were frequently narrated by participants as part and parcel of being TGD in prison.

Sexual victimization began as a consensual relationship and evolved over time or in an instant to become recognizable as sexual assault. Transgender women orient to their experiences with sexual victimization in complicated ways precisely because they so often occur in a context in which the pursuit of male |

				companionship looms large and the incidents often involve the men with whom they desire to have consensual intimate, romantic, and monogamous relationships.
Lea et al. (2017) USA	17 cis men or trans women Prison	Secondary analysis of semi-structured interviews.	Grounded theory	Findings illuminate participants' experiences concerning how the correctional facility shaped their sexual choices and behaviours, and the HIV-risk reduction strategies they employed.
Mallon & Perez (2020) USA	15 young people Community	Semi-structured interviews/focus groups.	Grounded theory	TGD youth expressed frustration about the ignorance of the juvenile justice professionals they encountered. Preventing TGD youth from expressing their gender identity or punishing them for doing so increases the distress they experience; undermines their emotional stability; and interferes with their care, treatment and rehabilitation.
Maycock (2020) Scotland	13 TGD people (11 trans women and 2 trans men) Prison	Semi Structured Interviews.	Inductive Thematic Analysis.	The study looked at the 'pains of imprisonment' specifically for TGD prisoners. It identified the pains of being in the wrong hall and in the wrong clothes, the pains of transitioning in custody, the pains of isolation and the pains of transphobia. The influence of prison staff culture on TGD prisoners having negative experiences was highlighted throughout.
McCauley et al. (2018) USA	10 trans women Prison	Semi Structured Interviews	General inductive approach.	Respondents reported issues with special housing assignments and the use of segregation or solitary confinement. Participants reported struggling with mental health issues, experiencing a lack of access to adequate mental healthcare, and an increase in mental health symptoms during imprisonment.
Nulty et al. (2019) England & Wales	3 TGD prisoners Prison	Semi Structured Interviews	Interpretative Phenomenological Analysis (IPA)	Three subordinate themes were identified linking to accounts of struggling against victimisation, fighting for their rights and their struggle to comprehend the practicalities involved in transitioning. The ways in which TGD prisoners express their own identity, and how others view them, was an important theme within the analysis.
Sanders et al. (2022) Australia & USA	4 trans women (Australia) 20 trans women (USA).	Semi-structured interviews	Thematic Analysis	The paper identified that while the function of the prison cell enabled by the single occupancy policy seeks to protect the TGD person from harm, the determination towards and reliance upon

	Community			uncovering the TGD person's gender origin actually puts TGD persons further in harm's way. The curiosity of the Other denotes a marked departure from a space where TGD are at risk and use their body as a commodity with other incarcerated persons or prison officers to survive their prison sentence, to gain protection, to be free from various forms of punishment and victimization, for food, canteen and other commissary items.
Smoyer et al. (2020) USA	5 (3 cisgender women and 2 trans men) community	Semi-structured interviews	Thematic Analysis	Narratives were shared about the challenges of living in a masculine body under the belligerent and incessant gaze of the Custodial Officers. A defining characteristic of the carceral experience for the transgender men was the overwhelming attention that they received from incarcerated women.
Sumner & Sexton (2016) USA	10 TGD prisoners Cisgender prisoners/staff. Prison	Semi-structured interviews/focus groups	Inductive Analysis	While respondents' descriptions of TGD prisoners implicitly addressed how this group is situated within the larger inmate culture, these descriptions were often followed by more explicit discussions about the position that TGD prisoners occupy relative to others. The strong stated and desired commitment to equity through equal application of the same policies and rules expressed by both staff and prisoners alike stands in stark contrast to the reality that transgender women are uniquely situated in men's prisons.
White Hughto et al. (2018) USA	20 trans women Community	Semi-structured interviews	Iterative and inductive approach	The study highlighted an institutional culture in which transgender women are regularly ridiculed for having a feminine gender expression. Participants' prior and anticipated experiences of mistreatment in correctional settings, including with healthcare providers, shaped their behaviour while incarcerated. For some participants, the fear of being treated poorly by providers, custody staff, and other inmates led them to conform to male gender norms and reinforced the gender binary, while others

				actively resisted the gender binary by maintaining and/or amplifying their feminine gender expression.
Wilson et al. (2017) Australia	5 TGD prisoners Prison	Semi-structured interviews	*Does not specify*	Findings focused on experiences of sexual violence including links with violent assault, everyday harassment and coercion, diversity and ambiguities for sex, personal/individual strategies for keeping safe and upholding dignity, placement in women's prison as policy strategy for keeping safe.

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Three superordinate themes were apparent relating to the structural, interpersonal and intrapersonal influences of TGD prisoners' lived experiences. The structural level refers to the influence of factors such as legislation and policies on aspects such as where TGD prisoners reside while in custody. The interpersonal level explores the relationships between TGD prisoners and others within custody, including other TGD prisoners, cisgender prisoners and staff. The third level, intrapersonal, focuses on the personal characteristics of participants and how these influence, or are influenced by, their experiences. A summary of the superordinate and subordinate themes is available in Table 4.

3.2 | Structural level

The first superordinate theme identified regarded how structural and systematic factors, including legislation, policies, and decisions made by prison management in relation to the care of TGD prisoners, influenced lived experiences.

3.2.1 | Knowledge and implementation of gender diversity policies

TGD prisoners expressed scepticism of policy implementation, suggesting that some staff exerted discretion which TGD prisoners felt resulted in limited access to their entitlements (Sumner & Sexton, 2016). For trans women, examples included access to make-up and prosthetics, which TGD participants felt were not authorised due to a lack of motivation to complete necessary administrative processes (Maycock, 2020). When attempting to meet their own needs they felt challenged by staff for policy violation, for example, wearing make-up (Clark et al., 2023; White Hughto et al., 2018). Some TGD prisoners also developed a detailed understanding of current policies to ensure an understanding of their rights and enable them to make informed decisions. For example, Brömdal et al. (2022) reported that some TGD prisoners were aware of having a choice to reside within the general population or protective custody, despite feeling that staff tended to actively encourage the latter. TGD prisoners perceived that 'policies of segregation seeking to contain trans persons in physical enclosures such as sole occupancy cells and isolation attempt to keep the whole cisnormative institution safe from being marred or blurred by trans- ness' (Sanders et al., 2022, p.12). It was clear that they felt a need to have a detailed knowledge of the policies within their establishments to be able to advocate for their own rights, rather than policies working effectively to provide adequate care and management.

TABLE 4 Summary of identified themes.

Superordinate Themes	Subordinate Themes
Structural level	Knowledge and implementation of gender diversity policies
	Living spaces
Interpersonal level	Victimisation
	Companionship
	Interactions with professionals

| Intrapersonal level | Transitioning when detained within a gendered establishment |
| | Strategies for survival |

The majority of studies which identified difficulties relating to policy implementation were conducted in Australia and/or the USA (Brömdal et al., 2022; Sanders et al., 2022; Sumner & Sexton, 2016; White Hughto et al., 2018), where polices varied by state/jurisdiction. As noted above, some TGD prisoners developed a detailed understanding of polices to assist them in making informed decisions, therefore prisoners that may have resided in a number of prisons across states/jurisdictions may find it difficult to develop such a detailed understanding due to the variation in policy content. For example, in both Australia and the USA guidance varied across states/jurisdictions on the use of segregation, access to personal items (e.g., cosmetics) that facilitate gender affirmation, and accommodations being made for gender identity or expression (MacDonald et al., 2022; Winter, 2023).Therefore TGD prisoners may have rights within a state/jurisdiction where they were previously located which are not relevant to their current location.

When implementing policies which meet the needs of TGD prisoners, it was unclear whether staff discretion was, overall, perceived as positive or negative. TGD participants considered all decisions were subject to staff discretion (Wilson et al., 2017) and although they expressed concerns regarding policy implementation, it may be inferred they would prefer staff to exert discretion to meet individual needs and avoid being treated as a homogenous group.

3.2.2 | Living spaces

Published work reviewed included views on the most appropriate living spaces for TGD prisoners. TGD prisoners within three studies perceived being placed in a male facility as positive. One reason presented by trans women included enjoying being in the company of males, which was felt to be associated with their sexual attraction towards men (Mallon & Perez, 2020). The risks of sexual and physical abuse to which trans women residing in a male estate may be vulnerable was acknowledged in one study (Wilson et al., 2017) and for such reasons TGD prisoners in male estates were offered protective custody. This did not only refer to isolation but to shared spaces with vulnerable prisoners, including sexual offenders. TGD prisoners reported that sharing living spaces with other vulnerable prisoners placed them at risk of sexual abuse (McCauley et al., 2018) and in response some refused to do so (Brömdal et al., 2022). Through refusing protective custody they were likely to be housed in the general prison population, where they are perceived to be at greater risk, or alternatively in isolation.

Despite these concerns, some TGD participants would choose to remain in a male establishment, perceiving women's prisons as more aggressive environments. They reported the women's estate to be 'rougher' and considered they would be at greater risk of harm from other prisoners (Jenness & Fenstermaker, 2014). Concerns were also expressed by trans women regarding sharing spaces with many women due to the non-empirically supported theory that the cisgender women there would be experiencing hormonal changes at the same time because of syncing menstrual cycles. They perceived that this would cause cisgender women to behave more viciously.
Transwomenweretornregardingtheirpreferredlocation,wantingtospendtimewithwomenbut being

unsure how well they would get along, potentially due to a lack of experience of socialising in a female space while in a female gender role. They were also concerned with women's prisons being an unknown environment compared with male prisons, with which they were more familiar with both the daily regime and interactions with male prisoners (Jenness & Fenstermaker, 2014; Wilson et al., 2017). Such discussions were however hypothetical, as participants who identified these concerns resided in countries where there were limited options for them to choose to reside in an establishment which aligned with their gender identity. This was due to the countries where these findings originated (Australia and USA) having policies which outlined allocation of TGD prisoners to be based on their sex as assigned at birth (MacDonald et al., 2022; Winter, 2023).

An alternative perspective regarding living spaces was presented by two participants within separate studies suggesting that all TGD prisoners should be housed together. The rationale was that this would create a harmonious environment through eliminating real and perceived gender identity based risks from other prisoners, through removing those considered to be 'at risk' (McCauley et al., 2018; Wilson et al., 2017). The views expressed suggested that TGD prisoners were a homogenous group who would 'harmoniously' live together. Such a simplistic view that removing TGD prisoners from the main prison population would reduce risks posed to them, and others, does not however address the underlying transprejudice experienced by TGD prisoners from staff and other prisoners.

With respect to the trans men included within reviewed studies, Hebert (2020) reported a risk of sexual assault if placed in a male prison, suggesting that a female establishment would be more appropriate. Concerns were also expressed regarding a risk of pregnancy and the lack of provisions to care for pregnant prisoners within the male estate. Concerns regarding pregnancy were also expressed for the women's estate, despite available provisions. Such views are reflected within the reformed HMPPS 'care and management of individuals who are transgender' policy, which outlines that trans women with male genitalia should not reside within the women's prison estate (HM Prison and Probation Service, 2023). It is assumed that such concerns relate to trans women who have not physically transitioned based on a supposition that they could impregnant cis women. The focus appeared to relate to the biological function of prisoners' anatomy, with limited consideration of potential desires to transition, sexual orientation and/or feelings towards their anatomy.

3.3 | Interpersonal level

Interpersonal relationships between TGD prisoners and others (cisgender prisoners, TGD prisoners and staff) within prison were identified through all studies analysed, including how these impacted upon their experiences of custody.

3.3.1 | Victimisation

TGD participants across all studies reported victimisation based on their gender identity, by both staff and by other prisoners.

Victimisation by staff
Prisoners felt targeted by staff because of their TGD status, experiencing transphobia and misgendering. Sexual behaviour and assaults by staff were reported within four studies (Brömdal et al., 2022; Clark et al., 2023; Greene, 2023; Smoyer, Divita & Perrault, 2020). As well

as direct sexual abuse,itwasperceivedthatstaffdidnotprotectTGDprisonersfromabusebynotlisteningtocomplaints or concerns for safety, and only accommodating individual needs when legally required (Mallon & Perez, 2020).

Only one account within Sumner and Sexton (2016) identified how staff positively assisted TGD prisoners, such as using discretion and being respectful; '"Courtesy" of letting "girls with very large breasts ... wear a t-shirt in the shower" or taking extra care to be professional in searches in order to pre-empt the potential filing of a "grievance"' (Sumner & Sexton, 2016, p.635). Although, the motivation appeared to be the avoidance of negative repercussions for staff rather than out of a desire to respect prisoners' trans identities.

Victimisation by other prisoners

Trans women reported experiencing violence (physical and sexual) and threats to kill both within and outside of intimate relationships within custody (Jenness, Sexton & Sumner, 2019; Sumner & Sexton, 2016). Even when isolated, a TGD prisoner reported that they were not protected as others would make unsolicited and unwanted comments and bang on their door (Sanders et al., 2022). When comparing their lived experience within custody to within the community, there were mixed reports of where individuals felt safer. For some custody was a safer environment to transition,experiencinglesshatecrimethanwithinthecommunity(Sumner&Sexton,2016).Others experienced higher levels of transphobia within custody, making transitioning more difficult (Maycock, 2020). These experiences focused within male prisons, and although some participants felt safer within custody, this did not mean they felt safe.

A focus within the studies by Wilson et al. (2017) and Hebert (2020) of experiences within women'sprisonsidentifiedthatTGDprisonersdidnotfeelscared;'sexualviolenceinthewomen's centres is non-existent really' (Wilson et al., 2017, p.393). However, this contrasts with other accounts within Hebert (2020) which reported denigrating comments and harassment from both staff and prisoners. In general, higher levels of victimisation were reported within the male prison estate, with more varied reports from the women's estate.

3.3.2 | Companionship

From the studies reviewed it would appear that for some TGD prisoners, particularly those who expressed their gender identity for the first time in custody, seeking companionship with other prisoners may be a means of exploring their sexual orientation. As there is a lack of relationship between sexual orientation and gender identity, TGD prisoners may need to explore this within their expressed gender identity, as sexual orientation may change for some TGD people upon expressing their gender identity.

Some TGD prisoners sought companionship through relationships representative of a traditional husband/wife and although participants felt supported by their partners these were not necessarily described as loving, potentially being more practical in nature to affirm their gender identity (Brömdal et al., 2022; Jenness & Fenstermaker, 2014). Some TGD participants did, however, report experiencing loving relationships (Wilson et al., 2017). They also experienced companionship through sexual relationships, although this was not sought by everyone, with some participants wanting to avoid sexually transmitted infections while others 'set particular "standards" and did not want to "bend over" for anyone as it would be "denouncing"' (Brömdal et al., 2022, p.17).

Despite some TGD prisoners wanting sexual and romantic relationships there were reports of abuse, including threats, violence and jealousy. One survival strategy was the use of sex to appease male partners, such as performing oral sex as a means of calming partners or reassuring them (Jenness et al., 2019).

3.3.3 | Interactions with professionals

Most studies provided details regarding TGD prisoners' interactions with professionals while in custody. This focused mostly on negative interactions, including poor communication, transphobia and a lack of understanding of TGD individual's needs. When interacting with health-care staff in particular, TGD prisoners reported a lack of respect for feminine gender identity, use of male pronouns and being denied hormone treatment (Clark et al., 2023; Greene, 2023; McCauley et al., 2018; White Hughto et al., 2018). When discussing interactions with custodial officers, views of mistreatment were commonplace. TGD prisoners reported avoiding contact, where possible, with officers who negatively targeted them because of their gender identity (Mallon & Perez, 2020; Smoyer, Divita & Perrault, 2020). It was also perceived that staff misinterpreted the behaviour of some trans women who felt they needed to present as hyper-feminine to be accepted by others (Hebert, 2020), as attention seeking, being flamboyant and promiscuous (Mallon & Perez, 2020; Sumner & Sexton, 2016).

TGD prisoners interpreted their interactions with staff to be influenced by transprejudice and a lack of understanding. One respondent felt 'they have no, no special insight whatsoever into transgenders'[1] (Wilson et al., 2017, p.393). Some participants expressed their gratitude for staff who took time to know them and work with them effectively (Nulty, Winder & Lopresti, 2019; White Hughto et al., 2018). In response to negative interactions with staff, protocols are in place for prisoners to submit complaints. Five papers included comments by TGD prisoners on staff responses to complaints, with prisoners feeling that their complaints were either ignored or that staff did not address them due to policy restrictions. It was also considered that there would be negative consequences for TGD prisoners raising concerns, such as being made to move establishments, being placed in protective custody or staff making life difficult, such as finding reasons to suggest a failure to comply with prison policies (Brömdal et al., 2022; Maycock, 2020). These examples support concerns raised by TGD prisoners that policies either were not adhered to or could not be relied on for support and protection.

3.4 | Intrapersonal level

Experiences at an intrapersonal level were reported, with the analysis considering how these would be influenced by others.

3.4.1 | Transitioning when detained within a gendered establishment

Participants explored their understanding of their gender identity and experiences of transitioning within custody. It was evident that there was a contrast in what participants understood by the term 'transitioning', whether this referred to social transitioning, for example, a change in identity presentation, or medical transitioning, for example, changes endorsed by hormones or undergoing surgery.

For one trans woman understanding their gender identity included feelings of having 'tendencies as a girl' (Jenness & Fenstermaker, 2014, p.15), and recognising themselves as different from cis women due to their internal anatomy. One participant described themselves

as an illusion due to presenting as female but having male anatomy (Jenness & Fenstermaker, 2014). To express femininity, prisoners identified creative means such as using everyday items to make jewellery and drawing on feminine eyebrows with pen (Brömdal et al., 2022; Clark et al., 2023; White Hughto et al., 2018). Participants in the study by Nulty, Winder & Lopresti (2019) identified that after hiding their gender identity they experienced feelings of joy and liberation when able to authentically express themselves in custody. In contrast, other studies generally reported negative experiences of transitioning in prison, including a lack of access to hormones (Maycock, 2020; McCauley et al., 2018; White Hughto et al., 2018) and feeling the only difference was a name change (Maycock, 2020).

3.4.2 | Strategies for survival

Across most studies was evidence of TGD prisoners adopting strategies to survive discrimination and abuse experienced within custody. Many would be considered maladaptive coping strategies, such as avoiding others, concealing their femininity, suicidal ideation and use of violence. Strategies for survival also included refusing to share living spaces or trans women not taking prescribed hormones to 'butch up' and remain within the general prison population. TGD prisoners perceived that if they showed they were willing to use violence, others would understand they were willing to stand up for themselves (Brömdal et al., 2022). Despite the expressed importance of femininity, trans women identified embracing their masculinity when beneficial 'when I'm mad, the dude part would always come out' (Smoyer, Divita & Perrault, 2020, p.180), taken to mean using aggressive behaviour. Trans women reported not wanting to fight as this went against their idea of femininity, however if physically assaulted or disrespected would be unapologetic about responding with violence to defend themselves (Brömdal et al., 2022; Greene, 2023; Jenness & Fenstermaker, 2014; Wilson et al., 2017). TGD prisoners also aimed to defend what they felt they were entitled to within custody, either challenging the system themselves or involving lawyers (Nulty, Winder & Lopresti, 2019; White Hughto et al., 2018).

To survive, TGD prisoners identified a need to remain psychologically strong through refusing to comply with inappropriate requests for sexual acts from staff and prisoners (Mallon & Perez, 2020; Nulty, Winder & Lopresti, 2019) or using the fact that 'everyone's vying for your attention … you're literally a star' to their advantage (Sanders et al., 2022, p.17). Some prisoners became involved in relationships for protection, identifying cis males who wanted to take care of them (Greene, 2023; Jenness & Fenstermaker, 2014; Jenness & Gerlinger, 2020; Wilson et al., 2017). Although as discussed within section 3.3.2 above, some such relationships included sexual abuse, threats, violence and jealousy.

From the literature it suggests that TGD prisoners were required to rely on their own strategies for survival. These did, however, appear to serve as short-term solutions, with more negative consequences likely to emerge for TGD prisoners in the long term.

4 | DISCUSSION

The aim of this article was to critically and systematically review the available international literature examining experiences of detained TGD offenders in countries with a comparable CJS to that in England and Wales. Overall, this review found that TGD prisoners generally reported negative experiences of custody at a structural, interpersonal and intrapersonal level.

The majority of studies included in the meta-ethnographic synthesis explored experiences of trans women residing in male prison establishments. Therefore the focus was on femininity with less exploration of the experiences of other gender diverse prisoners. Also as most of the research came from prisons in the USA, specifically California, there are cultural differences to consider in prison management between the USA and the UK. Prisons in the USA tend to be run through more coercive means, including allowing prison staff to carry firearms (Jamesetal.,1997). Gorden at al. (2017) also suggest that much of the research on TGD prisoners conducted within the USA is within state prisons, described as being overcrowded with minimal purposeful activities. It is therefore anticipated that experiences reported within these studies would be more negative compared with those within the UK as, for example, the HMPPS policy for England and Wales, at the time of the study by Nulty, Winder & Lopresti (2019), in principle supported TGD prisoners residing within appropriate establishments and allowed for their gender expression. However, through review of the study it was considered that such support may not always be available. It is important to consider that Nulty, Winder & Lopresti (2019) had a small sample size from one male establishment, making it difficult to develop a clear understanding of how effectively the policy is implemented across HMPPS. Furthermore, as considered within the results, since 2022 this policy has been reformed, making it more difficult for trans women to request to reside in the women's prison estate.

As identified within the results, the variation in policies across countries, as well as within countries, potentially impacted upon the ability to compare lived experiences of TGD prisoners. However, regardless of the geographical location of the prisons included within studies, the effective implementation of policies was called into question through this analysis. For example, the use of negative survival strategies was reported throughout studies due to ineffective implementation of policies to support the needs of TGD prisoners. Developing polices which meet the needs of TGD prisoners would work towards reducing the need for survival strategies. Developing positive means of coping, such as support groups and developing positive relationships with others, including professionals, would minimise the need for TGD prisoners to put themselves at risk within abusive relationships or through protective custody.

Within the UK, TGD prisoners' living spaces is a contentious issue, not only discussed and considered by those with lived experiences but also within political contexts and evidenced through the 2022 policy reform. Decisions made are dependent upon perceptions of risk to others, with TGD participants expressing that a risk to them is managed through isolation. From the findings discussed it would appear that there is a lack of knowledge around housing policies and what factors should be considered when making decisions about the housing of TGD prisoners. Further research exploring TGD prisoners in custody in England and Wales, including their experiences, needs and risks (to themselves and others), would assist in developing such understanding. It is important that such research is used to inform policies which affect TGD in custody and training programmes for staff.

5 | CONCLUSION

As identified through this systematic review there is a paucity of research regarding TGD prisoners' experiences of prison custody, especially within England and Wales. The aim of this review was to compare experiences of TGD prisoners within CJSs comparable to that in England and Wales, to assist in developing some understanding of their experiences within these

countries. As identified, there are difficulties in undertaking such a comparison due to cultural differences and variations in policies, for example.

Empirical contributions can be made however through using the findings to develop policies which more effectively support and manage TGD prisoners in countries with a comparable CJS to that in England and Wales. For example, developing staff understanding around TGD prisoners' needs and experiences would make life better for those in prison, with suggestions that reducing victimisation can increase an individual's confidence in successful reintegration into society (Cid et al., 2021). It is proposed that reviewing staff training would help ensure that it is fit for purpose and does not risk either not fully addressing/challenging prejudices and negative attitudes or is perceived as a token offering. The systematic review further highlights the importance of TGD prisoners' individual needs being met, such as having access to gender affirming items and consistent use of correct pronouns. It is therefore proposed that policies should ensure limited ambiguity or options for staff discretion, which could have negative impacts on TGD individuals. Such considerations would work towards creating gender inclusive environments.

Through review of the current international literature, whether there are consistent psychological theories underpinning policies addressing the care and management of TGD prisoners is unclear. To inform a gender inclusive environment and effectively implement policies, reviewing the psychological theories which influence the content of policies would be beneficial in understanding what informs decision making. Consideration of how theories which influence behaviour change and help-seeking behaviour, for example, could assist in developing policies, would also be beneficial.

Alongside this, further research into the lived experiences of gender diverse prisoners in England and Wales would improve understanding of what works and how the service could be improved. Existing research often frames TGD individuals as a homogenous group, applying a transnormative narrative to understand their experiences (Tatum et al., 2020). Research conducted into the experiences of gender diverse prisoners has mostly focused upon trans women residing in male prisons; however we cannot automatically assume that this would relate to all gender diverse prisoners and to those residing within women's prisons. Therefore further research should explore this under-represented group. Understanding how a minority group within custody interprets services delivered and their views on improvements would assist in evaluating how effectively gender diversity policies are implemented, suggest further recommendations for amendments to relevant policies and identify potential training needs.

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ENDNOTE

[1]Participants' own words and not terminology endorsed by the researchers.

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