

RESEARCH ARTICLE

Visual Conformity with One's Affirmed Gender, or Blending In, and Its Relationship to Psychological Distress among Transgender Adults

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Received: November 21, 2025;

Accepted: February 2, 2026;

Published: February 10, 2026.

Citation: Klein H, Washington TA. Visual Conformity with One's Affirmed Gender, or Blending In, and Its Relationship to Psychological Distress among Transgender Adults. *Adv Health Behav*, 2026, 9(1): 321-333. <https://doi.org/10.25082/AHB.2026.01.001>

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Abstract: Purpose: Very little research has examined the issue of visual conformity with one's affirmed gender (commonly referred to as "passing") among transgender persons. This paper examines this phenomenon and its relationship to psychological distress in a sample of transgender adults. **Methods:** Data from the 2015 U.S. National Transgender Survey were used to examine the relationship between visual conformity with one's gender-of-identity (dichotomous measure) and overall level of psychological distress (scale measure) in a sample of 26,649 transgender Americans aged 18 or older. Multivariate and structural equation analyses were performed to examine the data. **Results:** 55% of the study participants reported attaining visual conformity with their affirmed gender. Visual conformity was related to psychological distress in bivariate analysis, but its effects were rendered statistically nonsignificant in a multivariate analysis. Structural equation analysis showed that visual conformity has a significant, inverse impact upon the number of anti-transgender experiences people incur and those experiences, in turn, are related directly and strongly to psychological distress. **Conclusions:** Visual conformity with one's gender-of-identity is an important consideration when trying to understand the extent to which transgender persons experience psychological distress. Its effects operate indirectly, though, principally through their impact upon the number of anti-transgender acts of discrimination, harassment, and violence that people incurred.

Keywords: visual conformity with affirmed gender, blending, transgender, psychological distress

1 Introduction

The topic of "passing" or "inability to pass" is a controversial one among transgender persons and advocates of transgender equality. The term "passing" refers to the ability of transgender persons to appear to others with whom they interact or come into casual contact as members of the gender with which they identify most closely instead of being perceived by others as members of their gender assigned at birth. A variety of terms have been used to describe the phenomenon of "passing," including "visual conformity with one's affirmed gender," "blending" or "blending in," "masking," or "subverting." Each term has its own unique, implied, nuanced meanings, and both its proponents and detractors.

Visual conformity with one's affirmed gender is usually used interchangeably with the more-pejoratively-construed term *passing*, and typically indicates that the person in question identifies either as a male or as a female (which many transgender people do not, choosing instead to self-identify as nonbinary or as someone who possesses a combination of traditionally/stereotypically male traits along with a number of traditionally/stereotypically female traits), and that he or she has adopted both the outward physical appearance characteristics and the socially-accepted, socially-expected mannerisms that members of society-at-large associate with persons of that gender. *Visual conformity with one's affirmed gender*, therefore, describes transgender persons who have undertaken specific steps to appear to the outside world as members of the gender with which they self-identify most closely. For many transgender persons, *visual conformity with their affirmed gender* is something for which they strive and, once achieved to their satisfaction, becomes a routine part of their daily lives, regardless of the person(s) with whom they interact or the circumstances surrounding those interactions. That is, the visual conformity becomes part-and-parcel of who they are, how they appear, and how they behave in almost all circumstances.

Blending or blending in are very similar to *visual conformity with one's affirmed gender* in that the aim is for transgender individuals to be able to operate in the social world without others necessarily knowing that they are, indeed, transgender or suspecting that they may be transgender. Persons who choose to *blend in* are making a conscious decision to conform with gender-based societal norms of physical appearance, mannerisms, ways of speaking, and so forth, in an effort to be unidentifiable to strangers and casual acquaintances as someone who is transgender. Using the term "passing" instead of "blending," Anderson and colleagues [1] spoke about this very notion when they wrote:

trans people who prioritize passing do so because it affirms their gender identity or because they have fears of discrimination. In order to pass, trans people engage in physical techniques— clothing choices, makeup, hairstyles, etc. or behavioral techniques walking, speaking, and other mannerisms that are associated with cisgender people in our society (p. 56).

Masking is also quite similar in nature, but oftentimes has a circumstantial quality to it. *Masking* entails many of the same "melt into one's surroundings to the greatest extent possible" qualities that *visual conformity with one's affirmed gender* and *blending in* do. With *masking*, however, many transgender people do not incorporate those appearances, mannerisms, and/or behaviors into all aspects of their lives or with all of their friends, family members, and closer associates. Instead, they appear and behave one way when they are in public settings—that is, mask their true identities as transgender persons in those particular settings—and then they appear and behave another way when they are in private settings and/or in perceived safe spaces where they feel freer to be themselves. Marques [2] described *masking* well when she stated:

masking refers to specific "characters" that transgender people "put on for an audience" . . . to hide what they consider to be their "authentic" gender selves, and thus to perform the gender displays of their assigned gender that are acknowledged and sanctioned by others in specific social interactions (p. 214).

Comparing and contrasting *blending in* and *masking*, Marques [2] went on to comment:

Both in the case of blending in and masking, people adhere to normative gender binaries and express themselves as men or women. However, blending involves a congruence between gender subjectivities and gender display, usually associated with feelings of well-being and authenticity; in the case of masking, there is an incongruence between gender subjectivities and gender displays that tends to be associated with a lack of well-being and a sense of falsity (p. 214).

Subverting represents an entirely different way for transgender individuals to participate and exist in the world around them. It entails the development of one's own set of appearance standards, mannerisms, and behaviors, some of which will conform to societal social norms for how males "should" look/ behave or how females "should" look/ behave and some of which will not. *Subverting* refers to the process by which many transgender persons use their transgenderism as a way of being their true, authentic selves to the greatest extent possible in the greatest variety of personal and social situations possible, without choosing to conform to societal gender norms or to binary gender normative standards. In some situations, *subverting* may entail visual conformity with one's affirmed gender, and in others it may not. In some situations, *subverting* may entail efforts to blend in, and in others it may not. What it does not do, however, is entail any consequential efforts on the part of the individual to mask his/her true self or to mask his/her transgender identity. In many instances, *subverting* entails creating a set of personal norms for appearance, mannerisms, and behavior that supersede those of society-at-large and those of the transgender-community-at-large.

Due to the nuances in terminology and the wide-ranging reactions of different transgender people to the concepts of *passing* versus striving for *visual conformity with their affirmed gender* versus *blending in* versus *masking* versus *subverting*, there is no agreement regarding preferred terminology to refer to the practice of modifying one's appearance, mannerisms, and behaviors in accordance with the process of gender transitioning or overall transgender identity. Each of these terms has been used in at least some published studies on the subject, which is rather remarkable considering that published research on this subject is very limited. In the present study, the present authors have chosen to use a hybridized term/acronym, hereinafter referred to as VCoBI (Visual Conformity or Blending In), to refer to the process more commonly referred to in common parlance and in much of the scientific literature as *passing*.

As just mentioned, to date, little research has been conducted on the subject of VCoBI; but here are key findings from the scholarly literature that been published on this topic: Based on a study of 620 transgender persons living in Georgia or California, To et al. [3] noted that greater VCoBI is associated with more pride in one's gender identity, with reduced depression, and with reduced levels of anxiety. These authors also noted that higher levels of VCoBI were observed among transgender persons who had undergone gender-affirming surgical procedures. Anderson et al. [1] conducted qualitative interviews with 26 transgender persons living in Nebraska. They noted that more than 75% of their study participants said that VCoBI was important to them and that their ability to achieve VCoBI was something about which they frequently thought. Their research revealed that VCoBI is equated with validation as a member of one's gender-of-identity and, for many transgender persons, is a direct affirmation of who they are as people. For their study participants, inability to achieve VCoBI was equated with a fear of physical harm and/or discrimination from others. Similarly, based on their study of 224 transgender adolescents and adults, Parr and Howe [4] reported that a lower degree of VCoBI was associated with a greater frequency of experiencing anti-transgender-related or gender-nonaffirmation microaggressions. Similar findings were obtained by Kattari and Hasche [5] in their study of 5,885 transgender and gender-nonconforming adults. In their research with 30 transgender and nonbinary adults, Rood and colleagues [6] also found that inability to achieve VCoBI was linked with increased concerns for one's personal safety. These authors reported changes over time with VCoBI, noting:

Several participants shared that the importance of passing/blending has shifted over time. For most, it seemed especially important to do, and stressful to manage, in the beginning of one's gender affirmation process. Participants noted that hormones promoted passing/blending, and that greater difficulties and stress manifested premedical transition, because it was more difficult to pass/blend. . . . Over time, however, participants detailed that they became less concerned about the perceptions of others, became more comfortable and confident with who they were as individuals, and felt less fear for their personal safety (p. 711).

Rood and colleagues [6] also reported that the inability to achieve VCoBI was likely to result in greater feelings of sadness and, for some transgender persons, a greater likelihood of suicidal ideation. Inability to achieve VCoBI has also been reported as a risk factor for smoking, vaping, and the use of e-cigarettes [7] as well as substance use in general [8].

The present study represents an effort to expand the scholarly literature pertaining to VCoBI, and advances science/knowledge in this area in a few important ways. First, it focuses specifically on psychological distress and suicidal ideation, both of which have, to date, been studied only scarcely with respect to VCoBI. Second, compared to most (if not all) of the published studies addressing VCoBI, the present research utilizes a more robust statistical and analytical approach to studying the relationship of VCoBI to psychological distress and suicidal ideation. This approach allows a more insightful examination of the interrelationships amongst the key variables in question. Third, unlike almost all of the previous studies examining the impact of greater/lower levels of VCoBI, the present research is based on a very large sample size. Fourth, not only is this research based on a large sample size, but it is also based on one that was collected nationwide, thereby diminishing the potentially-biased nature of the smaller, more-local studies that characterize the other published research in this area of scientific inquiry. Accordingly, in the present study, the authors use data from a large national sample of American transgender adults, specifically examining issues pertaining to the relationship of VCoBI and psychological distress. The main research questions addressed in this study are: 1) How prevalent is VCoBI and what factors are associated with greater/lesser degrees of VCoBI? 2) How does VCoBI relate to transgender persons' overall levels of VCoBI, their levels of serious psychological distress, and their likelihood of contemplating suicide? 3) What is the best way to understand or conceptualize the relationship between VCoBI and psychological distress in this population? Based on the general gist of the findings reported in the scientific literature, two hypotheses are examined in this research. **Hypothesis #1:** Higher levels of VCoBI will be associated with lower levels of psychological distress. **Hypothesis #2:** Higher levels of VCoBI will be associated with lower levels of suicidal ideation.

2 Methods

2.1 Data and Procedures

The data for the present research came from the 2015 U.S. Transgender Survey (USTS2015) [9]. Data were collected during the summer of 2015, from a total sample of 27,715 transgender persons

residing anywhere in the United States or one of its territories, or who were living overseas while serving actively in the U.S. military. At the time it was undertaken, it was the largest study of its kind ever having been undertaken to understand transgender persons' lives. Sixty-six persons did not provide responses to the main item of interest on the questionnaire (pertaining to VCoBI), leaving a sample size of 26,649 for the present analyses. Access to the survey was centralized via a single online portal/website, and all persons completed the survey online. It could be completed via any type of web-enabled device (e.g., computer, tablet, smart phone, etc.) and was available both in English and Spanish language versions. All of the data were based on self-reports, and no efforts were made to corroborate this information. Although relying upon self-reported information is always a potential concern in social science research (see Garcia & Gustavson [10] for a thoughtful discussion on these issues), numerous authors have reported favorably on the overall reliability of such information, particularly when it comes to studies capturing data on topics such as those used in the present research [11, 12].

The questionnaire collected information pertaining to a wide variety of types of harassment, discrimination, and violence that transgender persons may have experienced in a wide variety of settings, such as work, school, public restrooms, public places, governmental offices, while serving in the military, among others. The USTS2015 questionnaire contained some information pertaining to substance use and mental health functioning. It also captured information about various aspects of the transitioning process, including social aspects of transitioning (e.g. divulging information about one's transgender identity to partners, friends, family members, coworkers, etc.), taking hormone treatments, and various surgical procedures that might be undergone to facilitate gender identity integration. Detailed demographic-type data about each respondent were also collected.

Participants were offered the opportunity to win either a \$500 participation grand prize ($n = 1$) or a \$250 participation prize ($n = 2$), chosen by random at the end of the data collection period. More than one-third (35.2%) of the eligible persons opted not to enter in the prize drawing. If they did not enter the raffle or were not one of the three prize winners chosen at random, then participation entailed receiving no other rewards/incentives/remunerations.

Extremely detailed information about the study, its content, its initial development, and its implementation may be found in James et al. [9]. The original USTS2015 study received institutional review board approval from the University of California–Los Angeles prior to implementation. The present research for the secondary analysis of the USTS2015 data received institutional review board approval from California State University–Long Beach.

2.2 Measures Used

For the present paper, the principal variable of interest pertained to respondents' perception of their ability to achieve visual conformity with their affirmed gender or to blend in. This information was taken from one question asking people to respond to the statement "People can tell I am trans even if I don't tell them" with their five response options being "always," "most of the time," "sometimes," "rarely," and "never." For the present research, these responses were recoded to create a dichotomous VCoBI measure comparing persons who perceived that they have achieved VCoBI (combining "rarely" and "never" responses) and persons who have not achieved VCoBI (combining "always," "most of the time," and "sometimes" responses).

The primary dependent variable in these analyses was overall level of psychological distress experienced during the previous 30 days. This was assessed using the Kessler-6 Scale [13]. It consists of six items, summed for the purpose of creating the overall level of psychological distress scale, with ordinal responses including "never" (scored 0), "a little of the time" (scored 1), "some of the time" (scored 2), "most of the time" (scored 3), and "all of the time" (scored 4). Each item inquired how frequently, during the previous 30 days, people felt 1) so sad that nothing could cheer them up, 2) nervous, 3) restless or fidgety, 4) hopeless, 5) that everything was an effort, and 6) worthless. The scale is reliable, with a Cronbach's alpha of 0.91. Two other measures were used as dependent variables for a portion of these analyses. One assessed the presence of serious psychological distress instead of overall level of psychological distress. Scores on the Kessler-6 scale were converted to a dichotomous measure indicating "serious psychological distress" or "no serious psychological distress," based on whether or not the scale score was 13 or greater [14]. The other dependent variable was suicidal ideation. It was assessed via a dichotomous measure indicating if the person had or had not thought about ending his/her life during the previous year.

Covariates in the multivariate analysis included age (continuous), gender identity (dichotomous, male versus female), binary versus nonbinary identity (dichotomous), educational attainment (dichotomous, high school education or less versus more education), race (dichotomous, Caucasians

versus persons of color), relationship status (dichotomous, married or “involved” with someone versus not married/“involved”), overall health (self-assessed, ordinal), lives near or below the poverty line (dichotomous, yes/no), employment status (dichotomous, unemployed versus not unemployed), and number of different types of anti-transgender discrimination, harassment, and violence the person experienced (continuous).

In addition, in other published works [15, 16], the present authors determined that various transition milestones are related to overall level of psychological distress, serious psychological distress, and suicidal ideation among transgender people. Transition milestones refer to specific events or occurrences in transgender persons’ transitioning experiences that demarcate their lives in a “before X happened” versus “after X happened” kind of way. These transition milestones represent different stages of progress in transgender persons’ journey toward fully accepting their gender identity and incorporating that identity more fully into their everyday lives. Each milestone, once reached or achieved, is one additional step toward living authentically and completely as a member of the gender with which the person identifies most closely. In the present study, three such measures—all scored dichotomously as “milestone reached” or “milestone not reached”—were included as covariates in the multivariate analysis. These were: changed name and/or gender on legal documents, began taking gender-affirming hormones, and had gender-conforming surgical procedures.

2.3 Statistical Analysis

Due to the large sample size used in this study, throughout this paper, results are reported as being statistically significant whenever $p < 0.01$ instead of the more-commonly-used $p < 0.05$. Although raising the threshold for designating intergroup differences as being statically significant ordinarily brings with it concerns about statistical power, because the present research is based on such a large sample size, even with this modification, there is more than enough statistical power to examine all of the relationships under study. This includes the ability to detect small (Cohen’s d values in the 0.1 to 0.3 range), medium (Cohen’s d values in the 0.4 to 0.7 range), and large (Cohen’s d values greater than 0.8) effects sizes alike with statistical power of at least 0.8 (in almost all instances, with a statistical power of 0.9 or greater), even with the implementation of the $p < 0.01$ level of statistical rigor chosen for this particular study [17, 18].

For the first part of the analysis, examining what factors are associated with VCoBI, logistic regression was used whenever the independent variable was continuous (e.g., age). Whenever the independent variable was dichotomous (e.g., race, relationship status), odds ratios (OR) were computed with 95% confidence intervals (CI_{95}) being reported. As a statistical tool, odds ratios provide a comparison between two groups’ likelihood (relative to one another) of demonstrating a particular outcome. What this statistical method cannot demonstrate, however, is whether or not these relative likelihoods are robust enough to be sustained when the impact of other potentially-relevant variables are taken into account. Multivariate analyses (also conducted in the present study) are beneficial in that respect, because they can help to illuminate the findings suggested by odds ratio analyses [19].

In the second part of the analysis, odds ratios (OR) were computed and 95% confidence intervals (CI_{95}) are reported for the examination of the relationship between VCoBI and serious psychological distress and suicidal ideation. The association between VCoBI and overall level of psychological distress entailed the use of a Student’s t test.

For both of the multivariate analyses (reported in Tables 1 and 2), multiple regression was used as the analytical strategy. The authors would like to point out that the use of multiple regression implies a causal relationship between the independent and dependent variables. Although a valid argument can be made as to the likely temporal ordering of these relationships, this study is based on cross-sectional data and, thus, direct causality can only be inferred, not proven. Standardized coefficients (i.e., β values) for each covariate in the model are presented in Table 1 so that effects sizes may be compared from item to item. The left-hand portion of the table shows the results when all of the covariates examined are entered alongside one another; the right-hand portion shows the results when only the statistically-significant contributors are retained.

Finally, the results obtained in the multivariate analysis indicated that a structural equation analysis was warranted. Accordingly, the data from Tables 1 and 2 were mapped to create the visual depiction of the structural equation to be tested (presented in Figure 2). As was the case with the adoption of the multiple regression analyses described above, the creation of structural equation models inherently relies upon assumptions of which variables are, temporally speaking, likely to have an impact upon which other variables. These relationships could be tested with greater confidence in a prospective or longitudinal study design than they can be assessed with

the present research's cross-sectional study design. Nevertheless, the present authors believe that the temporal ordering of the variables and the specific relationships examined and tested in this study are both valid and scientifically defensible.

In accordance with accepted procedures to assess the overall fitness of the model, the present authors examined the overall goodness-of-fit index for the model, along with the Bentler-Bonett normed fit index, the root mean squared error approximation (RMSEA), and the level of statistical significance for the model's overall chi-square test. A structural equation model is said to be a good representation of the data when the goodness-of-fit index coefficient is 0.90 or greater, when the Bentler-Bonett normed fit index coefficient is 0.90 or greater, when the RMSEA is 0.05 or lower, and when the chi-square test is statistically *nonsignificant*.

3 Results

3.1 Visual Conformity or Blending In

Slightly more than one-half of the study participants said that they are able to conform visually as a member of their gender-of-identity (55.5%). Transgender women were much less confident in their VCoBI than transgender men were ($OR = 0.64$, $CI_{95} = 0.61-0.68$, $p < 0.0001$). The older people became, the less confident they were in their VCoBI ($OR = 0.991$, $CI_{95} = 0.989-0.993$, $p < 0.0001$). Caucasians were less likely than persons of color to believe in their ability to conform visually as a member of their gender-of-identity ($OR = 0.85$, $CI_{95} = 0.80-0.91$, $p < 0.0001$) and, conversely, African Americans were more likely than members of all other racial groups to say that they had achieved VCoBI ($OR = 1.42$, $CI_{95} = 1.23-1.65$, $p < 0.0001$). Socioeconomic factors are relevant to some transgender persons' VCoBI too: The perception of being unable to conform visually as a member of one's gender-of-identity was greater among people who were living near or below the poverty line ($OR = 1.14$, $CI_{95} = 1.08-1.20$, $p < 0.0001$) and those who were unemployed ($OR = 1.13$, $CI_{95} = 1.06-1.19$, $p < 0.0001$). Individuals who self-identified as nonbinary were more likely than people who did not identify themselves as nonbinary to say that they had achieved VCoBI ($OR = 1.17$, $CI_{95} = 1.11-1.23$, $p < 0.0001$). Persons who had begun taking gender-conforming hormones were less likely than those who had not undertaken this process to believe that they conformed visually as a member of their gender-of-identity ($OR = 0.74$, $CI_{95} = 0.71-0.78$, $p < 0.0001$). People who had completed all available gender-affirming surgical procedures were significantly more likely than those who had had no such surgeries or only some of the gender-affirming surgical procedures available to persons of their gender to believe that they had achieved VCoBI ($OR = 2.40$, $CI_{95} = 1.58-3.63$, $p < 0.0001$).

3.2 Bivariate Analysis

Consistent with the main hypotheses stated earlier for the present study, a lack of VCoBI was related to a higher overall level of psychological distress ($t = 5.80$, $p < 0.0001$), a significantly elevated risk of experiencing serious psychological distress ($OR = 1.09$, $CI_{95} = 1.04-1.15$, $p = 0.0005$), and a significantly increased risk of contemplating suicide ($OR = 1.20$, $CI_{95} = 1.15-1.26$, $p < 0.0001$). It was also related directly to the number of anti-transgender experiences/confrontations people recently experienced ($t = 42.72$, $p < 0.0001$), with those who believed that they visually conformed as a member of their gender-of-identity reporting 45% fewer experiences/confrontations on average compared to their peers who believed that they had not attained VCoBI. Examined somewhat differently (see [Figure 1](#)), among people who said that they had experienced none of the types of anti-transgender discrimination, harassment, or violence included in this research, 75.9% said that they had achieved VCoBI. Among people who reported experiencing 1 or 2 of these anti-transgender problems/encounters, 68.8% said that they conformed visually as a member of their gender-of-identity. That figure dropped to 57.6% for people experiencing 3 or 4 of the problems/encounters, to 48.6% for those experiencing 5 or 6 of the problems/encounters, to 42.6% of those experiencing 7 or 8 of the problems/encounters, and to 35.3% of those who experienced 9 or more of the anti-transgender problems/encounters studied.

3.3 Multivariate Analysis

[Table 1](#) presents the results of the multivariate analysis for overall level of psychological distress. Data presented in the columns labeled "Saturated Model," in which all covariates were included, show that the VCoBI measure was only of marginal statistical significance. Data presented in the columns labeled "Reduced Model," in which only covariates that contributed significantly are retained, show that the VCoBI measure was not retained in the best-fitting equation. Ultimately, greater psychological distress was found among persons who: identified as

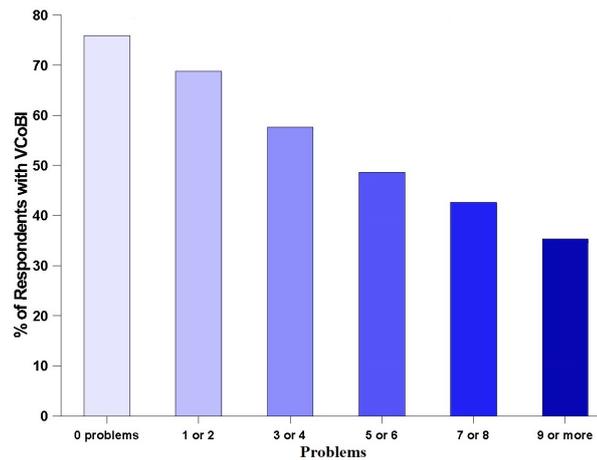


Figure 1 Visual Conformity/Blending in, by Number of Types of Anti-Transgender Problems/Encounters Experienced

female ($p < 0.0001$), were younger in age ($p < 0.0001$), had no more than a high school education ($p < 0.0001$), considered themselves to be in poorer health ($p < 0.0001$), lived near or below the poverty line ($p < .0001$), were unemployed ($p < 0.0001$), had not changed their name and/or gender on any of their legal documents ($p < 0.0001$), had not begun taking gender-affirming hormones ($p < 0.0001$), had not had any gender-conforming surgical procedures ($p < 0.0001$), and those who experienced a greater number of different types of anti-transgender experiences or confrontations ($p < 0.0001$). Together, these items explained 37.3% of the total variance in level of psychological distress.

Table 1 Multivariate Results for Overall Level of Psychological Distress

Independent Variable	Saturated Model			Reduced Model		
	b	β	p-value	b	β	p-value
gender identity = female	0.73	0.06	0.0001	0.71	0.06	0.0001
age	-0.13	0.29	0.0001	-0.13	0.29	0.0001
educational attainment: high school graduate or less	1.00	0.06	0.0001	0.98	0.06	0.0001
race = Caucasian	0.22	0.01	0.0064	-	-	-
relationship status: married or “involved”	-0.09	0.01	0.2704	-	-	-
overall health	-1.70	0.29	0.0001	-1.71	0.29	0.0001
identifies as nonbinary	0.18	0.01	0.0127	-	-	-
lives near or below poverty line	0.45	0.03	0.0001	0.46	0.04	0.0001
unemployed	1.51	0.11	0.0001	1.51	0.11	0.0001
transition milestone: changed name and/or gender on legal documents	-0.98	0.08	0.0001	-0.98	0.08	0.0001
transition milestone: gender-affirming hormone treatments	-0.99	0.08	0.0001	-1.03	0.09	0.0001
transition milestone: gender-conforming surgical procedures	-0.53	0.04	0.0001	-0.52	0.04	0.0001
number of types of anti-transgender experiences/confrontations	0.32	0.19	0.0001	0.32	0.18	0.0001
visual conformity with one’s affirmed gender / blending in	0.11	0.01	0.0911	-	-	-

Table 2 presents the results of the multivariate analysis for the number of different types of anti-transgender experiences or confrontations that people reported experiencing during the past year. A greater number of such experiences/confrontations were reported by people who: identified as male ($p < 0.0001$), were younger in age ($p < 0.0001$), had no more than a high school education ($p < 0.0001$), were a member of a racial minority group ($p < 0.0001$), considered themselves to be in poorer health ($p < 0.0001$), identified themselves as being nonbinary ($p < 0.0001$), lived near or below the poverty line ($p < 0.0001$), had changed their name and/or gender on at least some of their legal documents ($p < 0.0001$), had begun taking gender-affirming hormones ($p < 0.0001$), had had at least one gender-conforming surgical procedure ($p < 0.0001$), and those who felt that they had not attained VCoBI ($p < 0.0001$). Together, these items explained 20.3% of the total variance in the number of types of anti-transgender experiences or confrontations that people reported.

3.4 Structural Equation Analysis

The findings obtained in the multivariate analyses suggested that a structural equation analysis might be an effective and appropriate way of understanding and construing the relationships

Table 2 Multivariate Results for Number of Different Types of Anti-Transgender Experiences/Confrontations

Independent Variable	Saturated Model			Reduced Model		
	b	β	p-value	b	β	p-value
gender identity = female	-0.29	0.04	0.0001	-0.28	0.04	0.0001
age	-0.04	0.16	0.0001	-0.04	0.17	0.0001
educational attainment: high school graduate or less	-0.47	0.05	0.0001	-0.44	0.04	0.0001
race = Caucasian	-0.33	0.04	0.0001	-0.34	0.04	0.0001
relationship status: married or “involved”	-0.19	0.02	0.0007	–	–	–
overall health	-0.49	0.15	0.0001	-0.50	0.15	0.0001
identifies as nonbinary	0.25	0.03	0.0001	0.26	0.04	0.0001
lives near or below poverty line	0.45	0.06	0.0001	0.50	0.07	0.0001
unemployed	0.19	0.02	0.0001	–	–	–
transition milestone: changed name and/or gender on legal documents	0.80	0.11	0.0001	0.79	0.11	0.0001
transition milestone: gender-affirming hormone treatments	1.88	0.27	0.0001	1.89	0.27	0.0001
transition milestone: gender-conforming surgical procedures	0.26	0.04	0.0001	0.25	0.03	0.0001
visual conformity with one’s affirmed gender / blending in	-1.69	0.24	0.0001	-1.70	0.24	0.0001

among the variables examined in this study, particularly in light of the strong association between the number of different types of anti-transgender experiences/confrontations and overall level of psychological distress. That structural equation is shown in Figure 2. All coefficients on the paths are standardized coefficients so that effects sizes may be compared. Regardless of their relative magnitude to one another, all relationships shown are statistically significant at the $p < 0.0001$ level. The data revealed that VCoBI is an important variable in the model, influencing overall level of psychological distress indirectly, through its direct effect on the number of types of anti-transgender experiences/confrontations that people had.

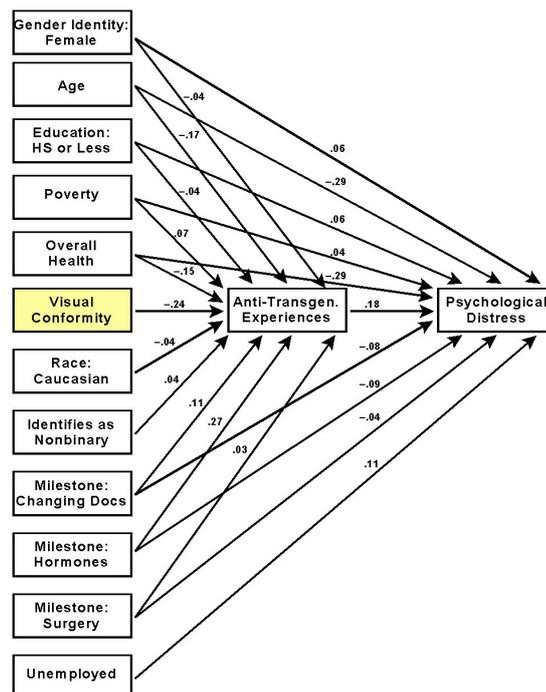


Figure 2 Structural Equation Model for VCoBI, Anti-Transgender Experiences and Psychological Distress

The model has a goodness-of-fit index of 0.999. The Bentler-Bonett normed fit index value is 0.999. The model’s comparative fit index is 0.999. The root mean squared error approximation value is 0.017. The chi-squared test for the equation shown in Figure 2 was found to be statistically significant ($\chi^2_{4df} = 31.34, p < 0.0001$).

4 Discussion

Ordinarily, when evaluating the suitability of a structural equation model such as that presented in Figure 2, four criteria should be met. First, the goodness-of-fit index must be greater than 0.9, ideally being as close to 1.0 as possible. In the present study, this value was 0.999. Second,

the Bentler-Bonett normed fit index value must be greater than 0.9, ideally being as close to 1.0 as possible. In the present study, this value was 0.999. Third, the root mean squared error approximation should be 0.05 or lower, with values closest to 0.0 being construed as indicative of the best fit. In the present study, this value was 0.017. Fourth, the overall chi-squared test for the equation should be statistically *nonsignificant*. In this study, the chi-squared test was statistically significant at the $p < 0.0001$ level.

A detailed reading through the scientific and statistical literature reveals that this statistically-significant chi-squared test statistic is not automatically problematic for the structural equation analysis used in present research because it is common for this statistic to be statistically significant whenever large sample sizes are used (as was the case in the present study) [20,21]. When this occurs, statisticians specializing in structural equation modeling have recommended examining additional criteria to assess model suitability. The comparative fit index and the root mean square residual value are two of the more-widely-accepted and more-widely-recommended supplemental measures. Similar to the goodness-of-fit and normed fit indices, the comparative fit index must be greater than 0.9 (preferably greater than 0.95) and as close to 1.0 as possible for the model to be considered acceptable [22,23]. In the present study, this value was 0.999. Regarding the root mean square residual coefficient, researchers have indicated that a value less than 0.08 is acceptable and, with large sample sizes, a better target is 0.057 or below [22,24]. In the present study, this value was 0.008. Given the very strong suitability of the goodness-of-fit index, normed fit index, comparative fit index, root mean squared error approximation, and root mean square residual coefficients obtained in the present study, evidence strongly suggests that the findings presented in Figure 2 may be construed as a valid way of interpreting the data.

Thus, the present study has demonstrated that VCoBI is an important consideration in understanding transgender people's level of psychological distress. It is necessary to bear in mind, however, that the effects of this measure do not operate directly, but rather indirectly, principally through their impact on the number of problems/experiences people have with anti-transgender discrimination, harassment, and/or violence. That is, inability to blend in and/or achieve visual conformity as a member of one's gender-of-identity is associated with experiencing more problems with anti-transgender discrimination, harassment, and/or violence, and those problems, in turn, dramatically worsen transgender persons' levels of psychological distress.

The primary importance of the VCoBI measure, therefore, appears to lie in its ability to help transgender people to get by in the world by enabling them to experience fewer hassles from others who are not accepting of transgender people. A deeper analysis of the data available in the present study suggests that the VCoBI variable operates particularly strongly in conjunction with either or both of two other measures. Those are (1) the transition milestone in which people have begun taking gender-affirming hormones and (2) the transition milestone indicating that people have undergone all gender-conforming surgical procedures available to persons of their gender. Regarding the former (herein reporting data not presented earlier in this paper), respondents who had not begun taking gender-affirming hormones and who said that they had not attained VCoBI were more than twice as likely to experience serious psychological distress ($OR = 2.79$, $CI_{95} = 2.59-3.02$, $p < 0.0001$) and they were nearly twice as likely to have considered ending their lives at least once during the past year ($OR = 1.92$, $CI_{95} = 1.79-2.07$, $p < 0.0001$) compared to persons who said that they have taken gender-affirming hormones and who said that have attained VCoBI. Regarding the latter, people who said that they had not attained VCoBI and who have not had all of the gender-affirming surgical procedures available to someone of their gender were far more likely to report serious psychological distress ($OR = 3.27$, $CI_{95} = 1.87-5.70$, $p < .0001$) and to have considered ending their lives at least once in the past year ($OR = 3.62$, $CI_{95} = 2.20-5.97$, $p < 0.0001$) when compared to people who said that they had attained VCoBI and who have had all available gender-affirming surgical procedures.

These findings speak to the importance and to the benefits to be gained by availing oneself of the medical aspects of gender transitioning, at least for those transgender persons who wish to have greater visual conformity with their gender identity. This finding is consistent with previous research findings that have shown benefits resulting from gender-affirming hormone treatment and gender-conforming surgical procedures for transgender adults. For its part, gender-affirming hormone treatment has been shown to be associated with reduced social distress [25], reduced anxiety [25,26], lower levels of depression [25-27], higher scores on overall quality-of-life measures [27], and higher self-esteem [28], among other benefits. Similarly, undergoing the surgical procedures associated with gender identity affirmation has been shown to result in a variety of life improvements [29-31]. Specific examples include reduced levels of depression [32], diminished feelings of suicidality [33], reduced levels of anxiety [32], higher self-esteem [33], greater satisfaction with one's social and sex lives [33], improved satisfaction with one's body

[34–36], and reduced gender dysmorphia [36]. The present study contributes to this body of literature by demonstrating that blending in or being visually conforming with one's affirmed gender is also beneficial to many transgender persons' mental health, principally because it helps them to avoid detection as transgender people by others around them who are not accepting of transgender persons and those who are overtly hostile, aggressive, and/or violent toward transgender individuals.

One of the main implications of this constellation of findings is that there is a need to make gender-affirming hormone treatments more affordable and more widely-accessible to transgender persons who want to achieve greater levels of visual conformity with their gender identity. Additionally, helping transgender people learn strategies that can help them to achieve VCoBI more easily when interacting with others in public is likely to be beneficial, too. Some work (not enough, but some) is already being done in this regard. For example, The Transgender Institute (TTI) offers various workshops specifically designed to help transgender persons who are actively transitioning to learn specific things that they can do to facilitate visual conformity with their affirmed gender. For example, TTI offers a course entitled *Feminine Immersion Program* specifically targeting transgender women. The course addresses issues such as voice feminization techniques, body language and movement, hair styling, makeup application, laser hair removal and electrolysis consultations, among other services [37]. TTI also offers a parallel program for transgender men, entitled *Men's Program*, providing services such as "exclusive men's salons for haircuts, shaves, facial hair shaping, fashion styling and tailoring to fit the man's shape and to enhance his bodily strengths and minimize those things about his body that he dislikes, and which often cause him dysphoria" [38]. Similar types of services are offered by Duke Health as part of the North Carolina-based Duke University Hospital [39], the nonprofit group Trans Lifeline through its online blog [40], Oregon Health and Science University through its series of YouTube videos and "grand rounds" sessions focusing on a wide array of social and medical issues relevant to actively-transitioning transgender persons [41], to name a few. Services such as these can be invaluable to transgender people who are concerned about their ability to blend in or achieve visual conformity with their affirmed gender in public settings and public situations in which their identity as transgender persons, if known or suspected by others present, might subject them to harassment, discrimination, and/or violence.

It is also worth pointing out that the present research demonstrated that not all "types" of transgender persons were equally confident in their VCoBI. This study discovered, for example, that women and Caucasians were much less likely than their male and nonwhite counterparts to believe that they had attained VCoBI. The conjoint effects of gender identity and race were even greater here, leading to a 53% increase in the odds of considering oneself unable to be visually conforming or to "blend in." This means that programmatic efforts trying to help transgender persons to develop strategies to achieve VCoBI more effectively need to pay greater attention to and provide more outreach services specifically designed for these specific subpopulations of transgender people. The same is true for those of lower socioeconomic status, whose higher rates of unemployment and living in poverty are likely to have additional, negative ramifications for their ability to consider receiving gender-affirming hormone treatments or surgical procedures that could enhance their VCoBI. Other researchers have also commented upon the socioeconomic-related challenges faced by many transgender persons [42–44]. The present study's findings pertaining to unemployment, poverty, and VCoBI are consistent with those studies and contribute further evidence to the scientific literature about the role that socioeconomic factors play in transgender persons' lives.

Before concluding, the present authors consider it important to point out that by no means do all transgender persons want to "blend in" with others or "to pass" as members of one gender or the other. Many, particularly those who self-identify as nonbinary, do not consider VCoBI to be a goal for themselves. Indeed, many transgender people actually consider the pursuit of visual conformity with their gender identity to be *undesirable* and something that ought to be avoided to the greatest extent possible. A thoughtful discourse on this subject has been proffered by Kilikita [45]. She speaks about the pressure to achieve VCoBI as something that causes many transgender persons to feel unhappy with their appearance (thereby leading to body/appearance dysphoria issues) or to compare their appearance to that of other transgender persons who may, by the judgment of some people, look better or look more natural as they go through their transitioning. There is, for many transgender persons, an objection to being expected to make themselves look like members of one gender or the other based on societal dicta regarding gender and physical appearance norms. For these people, VCoBI represents a type of forced conformity with social norms, imposed upon them because, as transgender persons, their physical appearance does not conform with what society-at-large deems appropriate or desirable [46].

Another common objection raised is the mere use of the oft-used term “passing,” which many transgender people construe as indicating a type of deception perpetrated against the people with whom they come into contact [47]. Instead of “passing,” they tend to prefer to think in terms of “blending” because it implies a more-seamless melding into one’s surroundings and living authentically as a person who happens to be transgender rather than trying to hide something from those who are opposed/hostile to transgender people.

In light of these types of concerns, it is important to couch the importance and implications of the present study’s findings in a slightly different manner. Although it is tempting to make a broad-based recommendation of developing programs that can help transgender people to develop the skills to attain VCoBI because of the mental health benefits and concomitant reductions in discrimination, harassment, and violence that they would be likely to derive from “blending in” or visually conforming more easily, this is an appropriate recommendation only for those transgender persons who want to achieve VCoBI. Those who do take that approach are likely to find that they are subjected less frequently to anti-transgender discrimination, harassment, and violence and, subsequently, to experience improved mental health functioning. The present research findings strongly support that conclusion. For those transgender individuals who do not wish to go out of their way to conform to societal expectations regarding gender-based appearance, however, it is important that their preference is respected, too, so that they can live their lives free of transgender-related animosity and violence. To achieve that goal, there will need to be considerably more public education about transgender persons and what it means to live as a transgender person, and profound changes to the way that American society treats transgender persons.

Conflicts of Interest

The authors declare that they have no conflict of interest.

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