

Experiences of Self-Compassion in Young Adults with Non-Binary Gender Identities

by

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Abstract

Despite accounting for a significant proportion of the transgender population, non-binary individuals are often neglected within research. Studies that do include non-binary participants are often focused on deficit, stigma, and mental health disparities, resulting in a narrow and one-sided understanding of the experiences of non-binary people. Although it is important to be aware of the impacts of societal marginalization, it is crucial that health professionals also understand the strengths and resiliency of this group.

Young adulthood is a particularly important development period for non-binary individuals. A defining feature of this developmental stage is identity instability, often accompanied by a sense of confusion and uncertainty. Considering that many non-binary individuals transition during this time period, an understanding of the strengths and potential coping skills of non-binary young adults is beneficial for all helping professionals.

A potential coping skill for non-binary young adults is self-compassion. Broadly, self-compassion can be conceptualized as the capacity to treat oneself with kindness and understanding. Existing research has found that self-compassion helps to improve mental well-being and life satisfaction, and can also act as a protective force, buffering against the effects of trauma, discrimination, and internalized stigma. Accordingly, self-compassion merits investigation as a source of resiliency for non-binary young adults. However, this area of study currently represents a significant gap within the existing literature.

The purpose of this study was to explore the experiences of self-compassion in non-binary young adults. To this end, I utilized an interpretative phenomenological analysis approach, engaging in in-depth interviews with seven participants. Transcripts for each interview were coded and grouped into higher order themes. After analyzing individual cases, I conducted

a cross-case analysis, from which emerged five super-ordinate themes: (a) intentional self-care; (b) developing a positive sense of self; (c) living with authenticity; (d) improved coping through perspective taking, and (e) self-compassion as an interpersonal process. The findings from this study suggest that self-compassion may be a positive strategy for promoting mental health and well-being in non-binary young adults. Implications for clinical practice are discussed, in addition to limitations and future research directions.

Preface

This thesis is an original work by Brittany Budzan. The research project, of which this thesis is a part, received research ethics approval from the University of Alberta Research Ethics Board, Project Name “Experiences of Self-Compassion in Youth with Non-Binary Gender Identities”, No. Pro00087694, February 19, 2019. No part of this thesis has been previously published.

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Glossary of Terms

The following terms are used throughout my dissertation. Although the definitions I use are based on the most commonly recognized usage of each word (see Arnett, 2015; Egale Canada Human Rights Trust, n.d.; Human Rights Campaign, n.d.; National Center for Transgender Equality, 2016; Stryker, 2017; United Nations, n.d.), it is important to note that language is continuously evolving, and these definitions may not be universally agreed upon.

AFAB: An acronym used to describe individuals assigned female at birth.

AMAB: An acronym used to describe individuals assigned male at birth.

Gender: A socially constructed and often binary classification system of expected roles, attributes and behaviours.

Gender Binary: The belief that male and female are the only legitimate genders. These categories are seen as separate and opposite.

Gender Identity: An individual's internal sense of gender.

Gender Expression: How an individual chooses to externally present their gender, through clothing, hair, mannerisms, etc.

Gender Nonconforming: A broad term used by individuals whose gender expression or identity expands beyond a traditional understanding of gender. Some gender non-conforming individuals may identify as transgender, while others may not.

Gender Transition: The journey towards living in congruence with an individual's gender identity, rather than assigned gender based on SAAB (see below). Transitioning may or may not involve medical interventions or changes to legal documents. Gender expression and pronouns may also change.

Genderqueer: An identity used by individuals who have a more fluid experience of gender identity.

2SLGBTQ+: An acronym for sexual and gender diverse populations. It is often interpreted as Two-Spirit, Lesbian, Gay, Bisexual, Transgender, and Queer/Questioning. Multiple variants of this acronym exist to include other identities and orientations.

Non-Binary: A gender identity that is not strictly male or female. Non-binary gender identities may fall within or outside the gender binary.

SAAB: Acronym for sex assigned at birth (See AFAB and AMAB), based on physical sex characteristics. An individual's assigned sex often leads to assumptions about gender

identity (i.e., it is assumed that those assigned male at birth will identify as a boy/man, and those assigned female at birth will identify as a girl/woman).

Transgender: An umbrella term referring to individuals whose gender identity and/or expression is not fully congruent with their SAAB.

Young Adulthood: The developmental period between adolescence and adulthood, including individuals aged 18 to 25.

Youth: The developmental period between childhood and adulthood, including individuals aged 15 to 24.

Chapter 1: Introduction

In 2014, Laverne Cox, a transgender actor and activist, made history as the first transgender person to be on the cover of *Time Magazine* (Steinmetz, 2014). Caitlyn Jenner has remained a well-known public figure after coming out as transgender in 2015 (Burns, 2021), and in 2020, Elliot Page made headlines around the world after coming out as transgender on his social media (Kirkpatrick, 2020). Although the increased visibility of transgender celebrities in the media is important for inclusion and diversity, many famous transgender individuals have undergone hormone therapy and/or gender-affirming surgeries, which may conflate the terms transgender and transman/transwoman (Nicolazzo, 2016). Transgender is typically used as an umbrella term, referring to individuals whose gender identity and/or expression is not congruent with the gender that they were assigned at birth (American Psychological Association, 2014). One subgroup is transmen and transwomen, who are typically undergoing some form of transition from one gender to another (e.g., male to female) (American Psychological Association, 2014). However, if society understands these terms to be interchangeable, it may inadvertently reinforce a binary understanding of gender, and situate other transgender groups in a marginalized position (Johnson et al., 2020; Nicolazzo, 2016; Vincent & Manzano, 2017).

Gender is a complex and multifaceted construct. It involves one's gender identity (internal experience of belonging to a gender category), gender expression (outward projection of one's identity), gender roles (societal assumptions and expectations associated with one's gender category), and gender attribution (how one's gender is perceived and interpreted by others) (Beemyn & Rankin, 2011; Stryker, 2017). Unlike sex, which is based on biological factors such as anatomy and genetic expression, gender is culturally and socially constructed, influencing how individuals interact and how privilege and power are distributed within society

(Canadian Institutes of Health Research, 2018). Stryker (2017) conceptualizes gender as the “social organization of bodies into different categories of people” (p. 14).

The gender binary refers to the assumption that only two genders exist in society: male and female (National Center for Transgender Equality, 2016). This belief is challenged and rejected by non-binary individuals, whose felt sense of gender may be found somewhere else inside or outside of the gender binary. Their sense of gender may also be fluid rather than stable (Beemyn & Rankin, 2011, Human Rights Campaign, n.d.). Individuals within this diverse population may identify with alternative labels, such as genderqueer, gender-nonconforming, genderfluid, androgynous, or agender (National Center for Transgender Equality, 2016; The Trevor Project, 2021). While the political and cultural nuances and distinctions between these terms are continuously shifting and evolving within this community, researchers tend to use these terms in their descriptive sense as a way of describing people who do not have a binary gender identity. Within recent years, researchers have predominantly used the terms non-binary and genderqueer, often synonymously or occasionally combined (e.g., GQ/NB) (Thorne et al., 2019). For my dissertation, I will use the terms non-binary and genderqueer to describe this population. I will use non-binary as the primary term, given that it is the most frequently used identifier amongst those with non-binary gender identities (Statistics Canada, 2022a; The Trevor Project, 2021)

Non-binary individuals make up a significant portion of the transgender umbrella. Recent census data found that over 40% of transgender Canadians identify as non-binary (Statistics Canada, 2022b). Similarly, 35% of the 2015 U.S. Transgender Survey respondents felt that non-binary/genderqueer was the most accurate representation of their identity (James et al., 2016). Recent American survey data suggests that approximately 1.2 million 2SLGBTQ+ adults

identify as non-binary, and that 5.1% of adults between the ages of 18 and 29 identify as transgender or non-binary (Brown, 2022; Wilson & Meyer, 2021).

Many non-binary individuals begin to recognize that they are different from others by age 12 (Beemyn & Rankin, 2011), with gender exploration continuing across adolescence and into young adulthood (Jessen et al., 2021). James et al. (2016) found that almost one quarter of non-binary participants surveyed transitioned before age 18, with the majority transitioning between ages 18 to 24. This means that most non-binary youth are transitioning during what can already be a stressful developmental period, as they must navigate evolving social relationships, identity development, and complications that may arise from physical maturation (Arnett, 2015; Camirand & Poulin, 2022; Romito et al., 2021). On top of all these changes, non-binary youth must contend with a society filled with systemic barriers and pervasive discrimination towards gender minority individuals (Clark et al., 2018).

The potential challenges faced by this population can be conceptualized by exploring the various systems with which these youth interact. Within the home environment, almost one-third of non-binary individuals have experienced family rejection due to their gender identity (James et al., 2016). At school, many face physical or sexual violence; and harassment is frequently experienced in public, in workplaces, and even in designated “safe spaces” (Dray et al., 2019; Peter et al., 2021; Sansfaçon et al., 2018). Within the medical field, non-binary youth experience more health-care related barriers than binary transgender youth, and must contend with doctors unfamiliar with gender identity issues (Clark et al., 2018).

Public and political discourse regarding the rights of transgender populations also contributes to discrimination against non-binary individuals (Jones, 2018). Discriminatory policies, such as restricted bathroom access, are associated with suicidality in transgender

populations (Seelman, 2016). Furthermore, transgender and non-binary individuals who have multiple minority identities, based on characteristics such as ethnicity, disability, or sexual orientation, face heightened levels of discrimination, harassment, and concern for physical safety (Atteberry-Ash et al., 2020; James et al., 2016; Sansfaçon et al., 2018).

Unsurprisingly, this marginalization can take a serious toll on the mental health of non-binary youth. Rood et al. (2017) found that transgender and gender non-conforming individuals frequently reported psychological distress and shame regarding their gender identity as a result of discriminatory societal messages. Multiple studies have demonstrated that non-binary youth may exhibit low levels of mental health, often reporting depression, anxiety, poor self-esteem, and lower levels of life satisfaction (Clark et al., 2018; Rimes et al., 2019; Thorne et al., 2018). Rates of self-harm and suicidal ideation are especially high within this population (James et al., 2016; Rimes et al., 2019; Veale et al., 2017). As a result, non-binary youth report a high need for mental health services (Warren et al., 2016).

Non-binary young adults may be in a particularly vulnerable position. Young adulthood, also called emerging adulthood, refers to the developmental transition period between adolescence and adulthood, including ages 18 to 25 (Arnett & Mitra, 2020; Walker-Harding et al., 2017). Many non-binary individuals transition during this time (James at 2016), and must simultaneously cope with a marginalized gender identity while navigating a developmental period characterized by change and instability (Arnett, 2015). Given the increased risk for experiencing victimization and psychological distress, it is important that parents, educators, and counsellors provide non-binary young adults with tools and resources during this important developmental period. However, most of the transgender literature focuses on participants with a binary identity (Beemyn & Rankin, 2011), leaving major gaps in knowledge when it comes to

supporting non-binary individuals. Additionally, by focusing on challenges, few studies have explored protective factors and resiliency within non-binary populations (Budge et al., 2013; Grossman et al., 2011). As a result, non-binary young adults may be positioned as passive victims, and portrayed in a way that erases their strengths and agency (Kruse, 2016; Shelton et al., 2018).

The existing research highlights the importance of interpersonal connections. For example, non-binary individuals have identified the benefits of being able to form one's own community, which involves meeting with and receiving support from others with similar experiences (Beemyn & Rankin, 2011; Bilodeau, 2005). Through these groups, youth learn to understand themselves better, advocate for acknowledgement within society, and receive validation for their journey and identity (Bilodeau, 2005; Saltzburg & Davis, 2010). However, external tools and resources may not always be available or safely accessible (Samons, 2009), increasing the importance of intrapersonal capacities and strengths. To this end, self-compassion presents itself as a possible means of simultaneously buffering against the potential psychological impacts of discrimination and increasing one's ability to relate to oneself positively and healthily.

Self-compassion is a way of relating to oneself with warmth, understanding, and acceptance. As conceptualized by Neff (2003a), self-compassion consists of three components: self-kindness, mindfulness, and common humanity. Self-kindness involves speaking to oneself in a calm and caring way rather than being critical. Mindfulness refers to the ability to see one's predicament in a balanced and objective manner, instead of minimizing or exaggerating the situation. Finally, common humanity involves understanding that everyone goes through moments of pain and suffering and that these experiences are not unique to any one individual

(Neff, 2003a). The evolutionary mechanisms of self-compassion have also been theorized. Gilbert (2009a) posited that self-compassion is part of a soothing regulation system that can be used to restore emotional balance when our other regulation systems become overly sensitive or hyperactive. Self-compassion is associated with lower levels of depression, anxiety, stress, perfectionism, self-harm, and rumination, and higher levels of optimism, life satisfaction, and self-efficacy (Chew & Ang, 2021; Fenzel & Richardson, 2022; Ferrari et al., 2019; Kawamoto et al., 2023; Smeets et al., 2014; Xavier et al., 2016).

Importantly, self-compassion has been shown to reduce the impact of shame (Castilho, Carvalho, et al., 2017; Johnson & O'Brien, 2013) and minority stress (Beard et al., 2016; Crews & Crawford, 2015; Jennings & Tan, 2014). Self-compassion may also act as a protective force for those who have suffered from trauma, stigma, or bullying (Beduna & Perrone-McGovern, 2018; Matos et al., 2017; Zeller et al., 2015;). Emerging research suggests that self-compassion may also help to buffer against internalized transphobia (Bluth et al., 2021; Pipkin et al., 2022).

Non-binary individuals are constantly navigating a world that privileges those who live within the gender binary. Based on the current literature documenting the discrimination and the mental health challenges faced by this population, it is imperative that young adults can combat stigma and positively relate to themselves. Unfortunately, large gaps in the field remain, including the absence of a contextualized and nuanced understanding of the internal resources and coping strategies utilized by this group. Although self-compassion may be theoretically beneficial, the meaning and experience of self-compassion from the perspective of this population is unknown. Such information is vital for ensuring that future interventions are responsive to and informed by the needs of non-binary young adults. Additionally, understanding

young adults' perspectives gives space to voices that have traditionally been marginalized and overlooked.

Counselling Psychology and Transgender Issues

The field of counselling psychology has only recently started attending to the various experiences of transgender individuals (Budge et al., 2013). Historically, psychology has not demonstrated understanding or validation to transgender populations. Before the publication of the DSM-5 (American Psychiatric Association, 2013), transmen and transwomen were categorized under the diagnosis of *Gender Identity Disorder* (GID). This was problematic for multiple reasons. Rather than focusing on the distress, this diagnosis implied that the identity itself was pathological (Knudson et al., 2010). The World Professional Association for Transgender Health (WPATH) felt that the existence of GID "may undermine human rights in that it undermines legitimacy of identity" (Knudson et al., 2010, p. 118).

Furthermore, WPATH asserted that the presence of this diagnosis further enhanced stigma against transgender populations. GID was also judged to be an inappropriate diagnosis for children (Knudson et al., 2010). The DSM-5 saw a shift in language, replacing GID with *Gender Dysphoria* (American Psychiatric Association, 2013). Unlike GID, gender dysphoria focuses on the distress experienced by individuals whose gender identity is not congruent with their sex assigned at birth (SAAB). Importantly, the description also acknowledges that the individuals may have non-binary identities.

Although this diagnostic change is an improvement, there are still many aspects of counselling and psychology that are problematic when it comes to properly validating and acknowledging transgender experiences. While the Canadian Psychological Association and American Psychological Association both recognize that some transgender individuals may not

fall into a binary gender category (American Psychological Association, 2015a; Canadian Psychological Association, 2016), the wording used in the diagnostic criteria is primarily based within the gender binary. Additionally, while gender dysphoria is no longer considered a disorder, the presence of this diagnosis still carries a stigma as it implies that this experience is a deviation from the norm rather than an acceptable and healthy variation of gender expression (Drescher, 2014). It has also been suggested that the diagnosis focuses on individuals seeking medical attention, marginalizing those who are not looking to transition using surgery or hormones (Herriot & Callaghan, 2018). However, it has been emphasized that the diagnosis pertains to the distress associated with one's felt gender and SAAB, rather than the existence of gender nonconformity (World Professional Association for Transgender Health, 2011).

In addition to the above-listed concerns regarding diagnoses, clear guidelines and standards of practice for working with non-binary individuals are not always promoted or available for all counsellors. For example, although the Canadian Psychological Association offers a guideline for non-discriminatory practice based on the Canadian Code of Ethics (2017a), there are no specific guidelines for working with gender minority populations. In contrast, the American Psychological Association (2015b) has issued guidelines for clinicians working with transgender clients that includes a description of the gender binary, acknowledgement of the intersection gender may have with other identities, and the difference between gender and sexual orientation. Calls to action are also provided, encouraging psychologists to advocate for transgender populations, both in one's workplace as well as for greater policy change (American Psychological Association, 2015b).

Despite the presence of these guidelines, counsellors may still experience difficulties when working with non-binary young adults. Competency concerns due to lack of training are

cited by many health care professionals working with transgender populations (Canvin et al., 2022). Additionally, clinicians may overestimate their ability to work with non-binary clients in an affirming manner. In a study on transgender-related clinical competence, Whitman and Han (2017) explored clinicians' understanding of terminology, conceptualization and treatment planning. Participants included psychiatrists, psychologists, clinical social workers, and student clinicians. Despite fewer than 6% of respondents reporting any relevant training, almost 80% of participants indicated that they felt competent to assess and treat this population. Predictably, a subset of those who felt confident in their ability to work with transgender individuals also endorsed discriminatory survey items and suggested problematic treatment targets in response to client vignettes.

Through observing a transgender youth discussion group, Saltzburg and Davis (2010) found that many participants reported that counsellors do not understand the complexity of gender. For genderqueer youth, this meant working with counsellors who assumed that the youth were interested in moving from one binary gender identity to another. This inaccurate and simplistic understanding is not only flawed but also forces the non-binary clients into the role of educator, removing the focus of why they came in for counselling (Saltzburg & Davis, 2010). This is consistent with feedback from participants in Mizock and Lundquist's (2016) research exploring the therapeutic experiences of transgender and genderqueer clients. Participants reported that many clinicians were uninformed of gender-related issues, or conceptualized the participants' gender as pathological. Other concerns included minimizing or overemphasizing the role gender played in the presenting concern, and acting as a gatekeeper to receiving further gender-affirming care (Mizock & Lundquist, 2016). Crucially, psychologists who seek additional

training in working with transgender clients report greater confidence in addressing relevant clinical issues and have a better understanding of gender-related vocabulary (Riggs, 2021).

It is also important for counselling to focus on the strengths of transgender populations. Much of the existing literature focuses on the impacts of marginalization, which unfairly and inaccurately limits a comprehensive understanding of these individuals' experiences (Budge et al., 2013). Mental health practitioners need to make up for the historical hurts carried out against this population, both in pathologizing and lacking a balanced and contextualized understanding of their experience. The promotion of social justice is part of our duty as counselling psychologists (Kennedy & Arthur, 2014; Sinacore et al., 2011). Counselling psychology recognizes the harmful impact that social structures and systems may have on mental health (Kennedy & Arthur, 2014). This awareness encourages practitioners and researchers to acknowledge that the source of a client's presenting problem may lie within society (Kennedy & Arthur, 2014). Such knowledge should be used to advocate for clients and marginalized populations (Buki, 2014; Kozan & Blustein, 2018). As counselling psychologists, it is an ethical obligation to participate in social justice initiatives that promote respect and wellness for everyone within society. (Ali & Sichel, 2014; Canadian Psychological Association, 2017a; Vera & Speight, 2003).

Statement of Purpose

The purpose of this interpretative phenomenological analysis (IPA) study was to understand how young adults with a non-binary gender identity feel and think about self-compassion. IPA offers insight into the meaning and feelings attributed to important experiences (Smith, 2004; Smith et al., 2009), which made it an appropriate method for this study. Additionally, this research was informed by a feminist framework. The study emphasized values

and goals within feminist research, including a sensitivity to systems and context (Brisolara & Seigart, 2012), and conceptualizing participants as active creators of knowledge (Hesse-Biber & Piatelli, 2012).

The central research question underlying my research was: *How do non-binary young adults experience self-compassion?* Two categories of sub-questions were used to understand further and conceptualize this experience. The first sub-question addressed what self-compassion meant to the non-binary young adults in this study, and explored the feelings and thoughts attached to a self-compassion practice. The second sub-question explored how non-binary young adults made sense of self-compassion's usefulness, including situations that prompted self-compassion and particular factors that helped or hindered its accessibility.

Given the lack of existing research on self-compassion and non-binary individuals, the aim of this exploratory work was to help address multiple gaps in the literature. This included understanding self-compassion's influence on gender diverse populations and developing a deeper appreciation of the experiences and strengths of non-binary young adults. This adds to an emerging collection of studies highlighting the resilience of transgender populations (e.g., Shelton et al., 2018). An in-depth understanding of how non-binary young adults experience self-compassion also has the potential to inform future interventions, which may be utilized by family, educators, psychologists, and other professionals working with this population.

Overview of Dissertation

The remainder of this dissertation is comprised of four chapters. Chapter two covers the literature relevant to the current study, including self-compassion and non-binary adolescent and young adult development. Ontological and epistemological beliefs underpinning this research are reviewed in the third chapter, along with study procedures, guidelines for the establishment of

quality, and ethical considerations. In the fourth chapter, study findings, I present the themes that arose both within and across participant cases. The final chapter situates the findings within the existing literature, and reviews limitations, recommendations for future research and implications for helping professionals.

Chapter 2: Literature Review

This chapter begins with a brief review of gender and gender identity development, specifically for those with a non-binary gender identity. I then present literature related to the development of adolescents and young adults, emphasizing the environmental factors that may influence non-binary youth. Additionally, I review research concerning minority stress, shame, internalized transphobia, and mental health concerns that this population may face. I present emerging research on the strengths and coping of non-binary young adults, and situate the current study within the limited research on supports and resources. I then introduce self-compassion and review the relevant literature, within the context of how self-compassion might provide a buffer against harassment and marginalization and allow non-binary young adults to relate to themselves positively.

Gender Identity Development

In most Western cultures, the traditional understanding of gender involves a dichotomy; one is either a man or woman. This is known as the gender binary (National Center for Transgender Equality, 2016). Additionally, it is assumed that an individual's internal sense of gender is directly linked to biological sex (Burdge, 2007). That is, someone born with male reproductive organs will identify as a man and someone born with female reproductive organs will identify as a woman. As a result, gender assignment is medicalized and physicalized and reinforces the gender binary (Beemyn & Rankin, 2011). Although this approach may appear objective, the assignment of gender varies across history and culture (Stryker, 2017; Vincent & Manzano, 2017). Examples of alternative forms of gender assignment can be found around the world. In Albania, *sworn virgins* are women who take a vow of celibacy and live life as men, gaining access to greater independence and privileges (Young, 1998). Prior to colonization, the

hijra in India were accepted as a third gender, and respected as spiritual leaders within the community (Tanupriya & Pannikot, 2021). In Indonesia, the Buginese use five gender categories (Graham, 2004).

Gender theorist Judith Butler has written extensively on the complexity of gender. In their seminal work, *Gender Trouble*, Butler (1990) describes gender as a socially performed act. Society has expectations of how individuals should appear and behave based on gender, and punishes those who deviate from the traditional “performance.” This, in turn, perpetuates and solidifies gender norms, as “the various acts of gender create the idea of gender” (1990, p. 121). Accordingly, it is important to not restrict the concept of gender to societally-reinforced definitions, as these simply reflect society’s power to limit gender expression (Butler, 2004). Butler emphasizes the legitimacy of identities outside of the gender binary, explaining that these concepts are not new and have always been a part of our society (2004).

It is now understood that individuals may have gender identities apart from male and female that exist within or outside the gender binary (Burdge, 2007; Stryker, 2017). As stated in the previous chapter, the term *transgender* is used to describe individuals whose gender identity and/or expression is not consistently congruent with their sex assigned at birth (SAAB) (American Psychological Association, 2014). Individuals whose gender is congruent with their SAAB are referred to as *cisgender*. The prefixes *trans* and *cis* refer to being one’s gender being “across” or “on the same side” as the SAAB (Stryker, 2017). It is estimated that 0.5 to 0.6% of the general population within the United States is transgender (Conron et al., 2012; Crissman et al., 2017; Flores et al., 2016), and recent census data found that .33% of Canadians 15 years of age and older identified as transgender (Statistics Canada, 2022a).

While transgender may be used as an identity, it is also an umbrella term that refers to multiple populations (Burdge, 2007). Though not an exhaustive list, these identities may include mixed gender, pangender, agender, gender-neutral, or trigender (Richards et al., 2016). Accordingly, two individuals identifying as transgender could have vastly different journeys and experiences. Some individuals may be transitioning from one distinct gender to another, while others may be transitioning to a non-binary identity; and others still may use this identity as a way of opposing societal restrictions and expectations (Stryker, 2017). Accepted terminology can also shift over time and across generations as labels become accepted, politicized, pathologized, or reclaimed (Beemyn & Rankin, 2011; James et al., 2016; Stryker, 2017). Stryker's (2017) conceptualization of transgender emphasized movement away from an assigned gender rather than focusing on a particular endpoint.

Newer terms are emerging among younger generations that refer to the rejection of the gender binary and its restrictions on how gender can be presented, expressed, and lived (Stryker, 2017). Individuals who do not identify with the gender binary may describe their gender using terms such as *genderqueer* or *non-binary* (National Center for Transgender Equality, 2016). These individuals may identify with multiple points along the gender spectrum or outside of it altogether (Beemyn & Rankin, 2011). It is estimated that 25 to 35% of the transgender population within the United States has a non-binary gender identity (Barr, Budge, & Adelson, 2016; James et al., 2016). Within Canada, non-binary individuals make up 41% of the transgender population (Statistics Canada, 2022b). Some non-binary individuals reject the label transgender, feeling that the term is outdated and focuses on the gender binary (Beemyn & Rankin, 2011; Stryker, 2017). Non-binary individuals may express and present their gender in a variety of ways. This includes choices about whether or not to alter their physical body through

options like surgery, hormones, or binding, as well as decisions regarding pronouns, clothing, hair, and make-up (Beemyn & Rankin, 2011).

The process by which an individual comes to identify as non-binary is an emerging area of study, complicated by the fact that transgender populations are often combined in research. A recent meta-synthesis by Jessen et al. (2021) found that many transgender and non-binary participants described a multi-stage process of gender identity development, conceptualized by the authors as fitting into four sub-themes. The first stage centred around a sense of feeling different from others, which was often reported to have begun in childhood. The second sub-theme described participants' experience of adolescence, which was characterized by a feeling of incongruence between their assigned gender and their bodies. In the third stage, participants engaged in an exploratory period, during which time they actively searched for other gender options and gained exposure to new information. The final sub-theme captured participants' feeling of congruence between their established gender identity and gender expression, often taking place into young adulthood (Jessen et al., 2021). In a recent study, Jackson et al. (2022) interviewed transgender and non-binary young adults between the ages of 18 and 26 about their experiences of categorizing their gender. For some participants, identifying their gender occurred in a moment of clarity, while for others it occurred gradually over an extended period of time. Similar to Jessen's et al.'s findings, many of Jackson et al.'s participants discussed the importance of the exploration phase, explaining that learning more about transgender identities helped them to better make sense of their own experience.

In a large-scale American survey, Beemyn and Rankin (2011) found that most individuals who had transitioned to a gender identity that was not male or female felt that they were different at or before the age of 12, with 97% recognizing that they did not identify with

their assigned gender by the end of adolescence. In another large survey, James et al. (2016) found that among their non-binary participants who transitioned, 80% had done so by age 24 with 24% transitioning under the age of 18. Recent survey has also found that the largest proportion of transgender and non-binary individuals in Canada are between 20 to 24 years of age (Statistics Canada, 2022a). Taken together, these studies suggest that for many non-binary people, adolescence is a time of gender exploration and discovery, while early adulthood is a period of transition and gender identity consolidation. Accordingly, it is important to recognize the while these youth are engaging in identity development, they are simultaneously encountering and navigating multiple developmental milestones.

Youth Development

When considering the period from adolescence to early adulthood, the terminology and age ranges used are often overlapping and at times contradictory. The original Canadian Trans Youth Health Survey included those from 14-25, based on the average age that individuals are able to consent to health care decisions and the cut-off age of many Canadian transgender youth services (Clark et al., 2018). The World Health Organization (2014) considers individuals between age 10-19 to be adolescents, and uses the term *young people* to describe those between 10-24. The United Nations (n.d.) uses the term *youth* for those aged 15-24. In a position paper by The Society for Adolescent Health and Medicine, the authors define 18-25 as *young adulthood*, stating that this is a period with specific challenges that must be kept separate from older and younger groups (Walker-Harding et al., 2017). Arnett and colleagues define this same range as *emerging adulthood* (Arnett, 2000; Arnett & Mitra, 2020), though this same term is sometimes expanded to include adults up to age 29 (Arnett, 2016). Within this dissertation I will use the term *youth* or *adolescents* to refer to those between the ages of 14-25 years old, and *young adults*

or *emerging adults* to refer to individuals between the ages of 18-25. Given the frequent age overlap in the literature between late adolescence and young adulthood, research on adolescence will continue to be included as relevant to the current study.

In a seminal work on individual development, Havighurst (1972) described each life stage as requiring specific developmental tasks, which, if completed successfully, set the individual on a trajectory for future happiness and developmental success. Although the long-term predictive ability of these domains has been challenged (Seiffge-Krenke & Gelhaar, 2008), the achievement of these tasks remains important to adolescents and young adults and is correlated with self-esteem and well-being (Di Napoli et al., 2023; Massey et al., 2008; Seiffge-Krenke & Gelhaar, 2008). The developmental tasks for youth relevant to the current research can be grouped into three related themes: (a) physical maturation, (b) social competence, and (c) identity formation.

Physical Maturation

Youth must contend with a rapidly changing body. Adolescent increases in hormones are associated with changes such as growth spurts and the development of secondary sex characteristics (for a review, see Breehl & Caban, 2022; Spear, 2000). Neurodevelopment continues into young adulthood, as structural changes reflect developmental shifts toward future oriented goals and enhanced emotion regulation skills (Pozzi et al., 2021; Tabler-Thomas & Perez-Edgar, 2016).

Experiencing puberty and the associated biological changes means that youth are inherently body-focused in terms of their sex and gender, and also in terms of comparing themselves to peers (Gilmore & Meersand, 2015). Negative body image significantly impacts the self-esteem of both adolescents and young adults (Ali et al., 2022; Murray et al., 2015).

Heightened focus on one's body image also leaves youth susceptible to external comments and influences. Negative body-related comments made by family or peers predicts poor body image in adolescence, which in turn predicts the utilization of unhealthy weight restriction strategies in young adulthood (Gattario et al., 2022; Rodgers et al., 2021). Social media use also encourages body comparisons, and promotes societal beauty standards that negatively impact body image (Klier et al., 2022; Rounsefell et al., 2020).

As physical development during adolescence creates distinctions between bodies, androgynous gender expression may no longer be tolerated (Beemyn & Rankin, 2011). Thus, some individuals may be forced to reconcile the congruency between their gender and their emerging body. Although forming a sense of gender may be a complicated and evolving journey for any adolescent, it becomes more complex when an individual's internal sense of gender is neither male nor female. For example, in a study that included transgender and non-binary assigned female at birth (AFAB) youth, the development of breast tissue in middle and late adolescence was associated with depression and anxiety (Sood et al., 2021). Romito et al. (2021) conducted body image-related interviews with transgender youth, including participants who identified as non-binary, genderqueer, and agender. All participants reported that they were engaging in attempts to alter their appearance. For some, these efforts were tied to their gender identity (e.g., trying to delay the development of breast development) while for others their actions were unrelated to gender, and reflected the expected body-focus during this developmental stage (e.g., trying to achieve a societal beauty ideal). Some non-binary youth pursue medical interventions to address their concerns, which is associated with improved gender congruence and body image (Ascha et al., 2022).

Social Competence

During adolescence, a relational shift occurs wherein friendships become increasingly more important and the importance of parents declines (Allen & Miga, 2010; Skinner & Zimmer-Gembeck, 2016). Adolescents who are liked by their peers and have close friendships are perceived to display fewer psychological and social problems (Waldrip et al., 2008). Being a part of multiple friendship groups can also increase feelings of belonging (Faircloth & Hamm, 2011). Additionally, longitudinal studies suggest that close friendships in adolescence contribute to positive mental health outcomes in young adulthood (Narr et al., 2019).

Unfortunately, given the strong emphasis on peer relationships during this developmental stage, adolescents have strong emotional and physiological reactions to social rejection (Silvers, 2012; Stroud et al., 2009). Gilbert and Irons (2009) suggested that if unsuccessful at connecting with peers, adolescents may engage in negative self-evaluations, leaving this population vulnerable to self-criticism. Furthermore, adolescents who experience peer bullying are at an increased risk for mental health concerns in young adulthood, with negative self-evaluations partially mediating this relationship (Norrington, 2021).

Friends remain prominent support figures in young adulthood, with support networks often expanding during this time before shrinking in middle adulthood (Barry et al., 2016). Being closely connected to friends is correlated with happiness and self-esteem (Camirand & Poulin, 2022; Demir et al., 2018). Friendships also provide support during times of crisis. For example, those with lower quality friendships reported lower levels of wellness during the early stages of the pandemic (Kulcar et al., 2022).

Young adults also benefit from close relationships to parents as they transition into adulthood (Fingerman & Yahirun, 2016). Despite a growing sense of independence, young adults still turn to parents as a primary source of emotional and financial support, and seek

parents' guidance when making decisions (Astle et al., 2022; Prattley et al., 2023). Additionally, parental support is associated with better psychological wellbeing and emotion regulation (Mendoza et al., 2019; Szkody et al., 2020). Unfortunately, as will be discussed in greater depth in a subsequent section, non-binary adolescents and young adults are at an increased risk of experiencing harassment and rejection at the hands of peers and family (Peter et al., 2021; Taylor et al., 2020).

Identity Formation

Adolescence is a time when individuals may begin to explore and consolidate a set of ideas, values, and beliefs (Hatano & Sugimura, 2017). Although teens frequently act differently across contexts (e.g., at home, school, with friends), as adolescents age they can integrate these inconsistencies into a cohesive and complex identity (Albarello et al., 2018). Youth who are able to successfully navigate this task may be better equipped to resist peer pressure, and are less likely to engage in risky decision making and violent behaviours (Dumas et al., 2012; Pierce et al., 2015).

Identity development continues into young adulthood, and is one of the defining developmental tasks of this stage (Arnett, 2015). Accordingly, a greater number of young adults actively work towards establishing their identity, compared to adolescents (Luyckx et al., 2013; Hatano & Sugimura, 2017). Some of the priorities for adults during this time include independence and autonomy, relationships, and decisions related to careers and education (Skhirtladze et al., 2022). Successful navigation of this task is associated with higher levels of self-esteem, compared to those individuals struggling to consolidate their identity (Luyckx et al., 2013). Additionally, those who are exhibiting difficult engaging in identity development report

higher levels of rumination, depression, and greater boredom during their spare time (Hartman & Anderson, 2022; Luyckx et al., 2013).

Identity development in young adulthood is complicated by the sense of being “in-between” adolescence and adulthood (Arnett, 2015). When surveyed, many young adults will state that they do not see themselves as adults, or will feel like adults in some contexts but not others (Arnett & Padilla-Walker, 2015; Nelson & Luster, 2016). As a result of this identity and role confusion, this developmental stage leaves many young adults with a sense of instability (Arnett, 2015). This period of uncertainty becomes even more complex when we recall that this is the predominant transition period for many non-binary individuals (James et al., 2016; Jessen et al., 2021), making it essential that we understand the experiences of non-binary young adults during this time of life.

Non-Binary Youth Development

To develop an in-depth and nuanced understanding of the needs of non-binary young adults, it is important to look beyond the expected challenges of youth and explore other environmental influences that may impact development. From a feminist lens, it is important to consider the various systems and structures that impact an individual’s experience (DeVault & Gross, 2012). Ecological systems theory provides a useful framework for exploring these various settings, and has been used in other research to help situate the experiences of non-binary individuals (e.g., Coyne et al., 2020; Shah et al., 2022). According to ecological systems theory, the environment can be conceptualized as a series “nested structures,” or interacting layers, that extend out from each individual (Bronfenbrenner, 1979, p. 3). Each of these environmental systems can impact the individual directly, or indirectly by influencing the attitudes and

behaviours of those who shape the individual's environment. Additionally, the individual also has the ability to influence their environment.

Microsystem

The first layer is the microsystem, which consists of the people and organizations that interact with the individual directly (Bronfenbrenner, 1979). For non-binary youth, this could mean family, peers, and health services. Unfortunately, non-binary people frequently report negative interactions with these groups. In a large-scale American survey that included multiple transgender populations, James et al. (2016) found that 32% of non-binary respondents experienced family rejection as a result of their gender identity. In the most recent Canadian Trans and Non-binary Youth Health Survey, which surveyed over 1500 individuals ages 14 to 25, 25% of participants reported that they did not always feel safe at home (Taylor et al., 2020). Within their communities, 66% of youth had experienced verbal harassment and over one third had been physically threatened or harmed (Taylor et al., 2020). Non-binary youth also experience high rates of abuse within romantic relationships (Stroem et al., 2021; Taylor et al., 2020).

Peer victimization at school is well documented. While not specific to non-binary youth, a recent Canadian nationwide survey found that 63% of transgender students had experienced verbal harassment, 25% had been sexually harassed, and 16% had been physically assaulted (Peter et al., 2021). Compared to other groups included in the survey (cisgender and sexual minority students) transgender youth had the highest rates of all other measured forms of school victimization. This included being the target of rumours, cyber-bullying, and hateful graffiti, as well as being excluded and having property stolen or damaged (Peter et al., 2021). Worryingly, many of these incidents went unreported, as students lacked faith that staff would intervene or

handle the situation appropriately. These concerns were not unreasonable, given that teachers were sometimes identified as the source of the harassment, especially within Catholic schools (Peter et al., 2021; Taylor & Peter, 2011). Restrooms and changing rooms are spaces that are perceived by transgender students to be particularly unsafe (Taylor et al., 2020)

Similar results have also been reported outside of Canada. In a study of American sexual and gender minority students aged 14-19, Sterzing and colleagues (2019) found that 65% of assigned male at birth (AMAB) genderqueer youth and 55% of AFAB genderqueer people had experienced multiple forms of victimization. James et al. (2016) found that 15% of non-binary students had been physically assaulted in school between kindergarten and grade 12, while 10% were sexually assaulted. This victimization led some youth to drop out of school, a trend which continued in postsecondary education (James et al., 2016). Survey data from over 8000 Swedish adolescences found that, compared to cisgender students, non-binary students reported worse mental health, and were more likely to miss school and have failed a class (Durbeej et al., 2021). Together these findings are concerning, as the heightened rejection sensitivity present during this developmental period (Silvers, 2012; Stroud et al., 2009), may cause non-binary youth to internalize negative self-evaluations (Gilbert & Irons, 2009).

Sadly, verbal and physical harassment extends beyond the school system. Many non-binary individuals report negative experiences in other public spaces, such as using public transit and speaking with law enforcement (James et al., 2016). Non-binary individuals also report workplace discrimination and job loss (Beemyn & Rankin, 2011; James et al., 2016). Beemyn and Rankin (2011) posited that the lack of adherence to binary gender expression “can be more challenging and unsettling to employers and coworkers than individuals who present as strictly male or female” (p. 103). As a result, most non-binary individuals use a variety of strategies to

avoid harassment at work, such as not discussing their gender identity and not correcting improper pronoun use (James et al., 2016). Workplace discrimination was studied by Dray et al., (2019) who had participants rate the employment profile of “Alex,” whose gender was randomized to include cisgender, transgender, and non-binary gender identities. Results indicated prejudice against transgender and non-binary employees, especially non-binary AMAB individuals, who were rated as the least likeable.

Non-binary youth may also face resistance and discrimination within professional settings. For example, within the health care system, many assumptions regarding gender tend to privilege binary identities (Frohard-Dourlet et al., 2017). Kanamori and Cornelius-White (2016) surveyed health professionals and found that while the overall attitude toward transgender people was positive, men tended to report some level of prejudice, and were more likely to endorse a binary view of gender. One Canadian mental health clinic found that among youth age 17-25, transgender and non-binary clients were more likely to be self-referred, whereas cisgender clients were most likely to be referred by their health care providers. The authors suggested that this may reflect a hesitancy among transgender patients to discuss mental health concerns with their doctor (Colvin et al, 2019). Transgender youth often report negative experiences within the health care system, such as deadnaming (use of an unused birth name), misgendering, and working with professionals who are not adequately trained in the provision of gender-affirming care (Carlile, 2020; Clark et al., 2018). Compared to transgender youth with a binary gender identity, non-binary youth experience more barriers to receiving health care, and are less likely to have a family doctor (Clark et al., 2018). This results in difficulties accessing gender-affirming treatments, such as hormone therapy (Clark et al., 2018). These findings are troubling, given that

reduced access to gender affirming medical care is associated with lower levels of self-reported health (Burgwal et al., 2019).

Transgender youth may also encounter barriers when accessing resources and community supports. For instance, Russomanno and Jabson Tree (2020) explored the experiences of transgender and non-binary adults experiencing food insecurity. Many of the participants cited concerns about transphobia from organizations, particularly those with religious affiliations, and a factor that contributed to hesitancy in seeking assistance. Finding community within mainstream 2SLGBTQ+ spaces can also present a challenge (Barsigian et al., 2020). One of the common themes reported by Beemyn and Rankin's (2011) participants was "not fitting in with transgender or LGBT communities" (p. 153). Compared to transgender individuals with a binary identity, non-binary participants were less likely to receive support from transgender individuals or organizations. The authors note that this is not surprising, given that the focus of many of these organizations is to support, assist, and advocate for those who are transitioning within the gender binary.

Exosystem

The exosystem consists of institutions that influence the settings in which an individual exists (Bronfenbrenner, 1979). Any bias within these systems could negatively impact non-binary individuals. An example of this bias includes genderism, which refers to how society gives priority to institutions upholding the gender binary and discriminates against individuals who do not fit within the binary (Beemyn & Rankin, 2011). For non-binary individuals, this could include identifying oneself as 'male' or 'female' on various documents or being faced with gendered bathrooms (Beemyn & Rankin, 2011).

One system with the potential to influence the lives of non-binary individuals is the political system, both at the local and global level. In the United States, President Trump retracted and weakened many of the progressive transgender policy changes introduced by the Obama administration, encouraging a backlash against transgender people both nationally and around the world (Jones, 2018). Many of the Trump administration's policies were later reversed by President Biden (Associated Press, 2021), only for new legislation to be introduced at the state level. For example, transgender residents in Florida can no longer use Medicaid to cover gender-affirming treatment (Alfonseca, 2022), and many health care providers in Texas have been forced to discontinue treatment for transgender teenagers due to fears of legal consequences (Dey, 2022).

Within Canada, Prime Minister Justin Trudeau apologized for the government's role in the marginalization of sexual and gender minority populations (Murray, 2018). However, the political discourse surrounding Bill C-16, which increased protections for transgender Canadians, was dominated by claims that freedom of expression was under attack (Cossman, 2018). Such conflicting messages may leave non-binary youth wondering about their ability to find acceptance and belonging within society. In Alberta, new legislation enacted by the United Conservative Party was met with widespread concern about the potential for schools to delay the formation of gay-straight alliances and "out" GSA members to parents (Bellefontaine, 2019). This is especially alarming given that transgender students in Alberta report the highest rates of verbal harassment in Canada (Peter et al., 2021).

The media also has a role in how transgender populations are perceived. Although representation has increased, conversations centering transgender individuals are still often situated within a binary framework of gender, which may create the impression that all

transgender individuals are moving along the gender binary (Vincent & Manzano, 2017). This removes other transgender populations, including those who identify as non-binary, from broader societal awareness and situates them in a marginalized position (Nicolazzo, 2016). When this language and terminology is not used within broader society, transgender youth feel excluded from important discussions and are left feeling invalidated and isolated (Saltzburg & Davis, 2010).

Macrosystem

The macrosystem refers to a society's values, culture, and belief system (Bronfenbrenner, 1979). Multiple ideologies can contribute to negative feelings toward non-binary individuals. In the United States, Adams et al. (2016) found that transphobia was significantly associated with feelings of uneasiness regarding “gender identity norm violations” (p. 195). The authors found that this discomfort significantly mediated the relationship between right-wing authoritarianism, which represents adherence to authority and rigidity regarding social norms, and transphobia. Religious fundamentalism was also correlated with transphobia.

These beliefs can have serious real-world implications in the lives of non-binary youth. For example, Thomas et al. (2016) found that individuals with higher levels of prejudice against transgender people were more likely to engage in victim blaming after reading about a hypothetical assault. This was especially true when it was implied that the victim was transgender.

Interactions Between Systems

Importantly, Bronfenbrenner's model draws attention not only to influences within each system but how these layers interact to influence the individual. For example, cultural attitudes and ideologies impact policy decisions. Parent and Silva (2018) found that transphobia affected

voting decisions regarding transgender people and bathroom use. Knowledge of these discriminatory beliefs can then impact the individual, as seen by high levels of public washroom avoidance (James et al., 2016; Taylor et al., 2020). Similarly, Gartner and Sterzing (2018) found that sexual and gender minority adolescents who lived in states without governmental protections experienced significantly more microaggressions at home than those that lived in states with extensive anti-discrimination legislation.

Another clear example of interacting systems can be found within the recent COVID-19 pandemic. COVID-19 would be situated within the *chronosystem*, which encompasses significant environmental changes and major historical events (Bronfenbrenner, 1979). This interaction of systems meant that existing inequalities in transgender and nonbinary housing and employment were exacerbated (Kia et al., 2022). Within health care, Felt et al. (2023) found that non-binary individuals were over three times more likely to have experienced health care interruptions due to COVID-19, compared to cisgender patients. Approximately one quarter of respondents in a recent survey of transgender and non-binary Canadians reported that they had avoided accessing health care during the initial stages of the pandemic (Tami et al., 2022). The most frequently cited reason for this avoidance was the belief that their problem was not urgent, a concerning finding given that individuals with worse mental health were the most likely to avoid seeking care (Tami et al., 2022).

Importantly, individuals are also able to impact the various systems with which they interact (Bronfenbrenner, 1979). In a study by Singh (2013) exploring resilience and coping in transgender youth of colour, one participant described encountering transphobia in their campus residence. After their concerns were initially dismissed, the participant was able to advocate for change and speak to university administration about transgender residence issues.

Intersectionality

When exploring how the environment may impact the development of non-binary youth, it is important to keep in mind that some members of this population will have more than one minority identity. The potential for discrimination based on income level, disability, ethnicity, age, sexual orientation, and other identity aspects would also exist and interact in each system impacting the individual. This is evident from multiple studies demonstrating additional barriers and prejudice for transgender individuals with multiple minority identities (e.g., Beemyn & Rankin, 2011; James et al., 2016).

One area where this impact is most noticeable is health care. Seelman et al. (2017) studied the physical health and mental health of transgender individuals, including participants that identified as genderqueer, genderfluid, and agender. Transgender people of colour were more likely to have chronic health concerns, while low income was associated with mental health concerns and poor general physical health. A Canadian study found that non-binary individuals who were assigned male at birth were less likely to have a family physician if they were Indigenous or a person of colour (Scheim et al., 2017).

When looking for supportive 2SLGBTQ+ communities, transgender people of colour may have difficulty finding organizations that validate both gender and ethnicity, and that understand the relationship between the two identities. In Singh's (2013) study of American transgender youth, all 13 participants reported that they wanted to be part of a transgender youth of colour community. However, such organizations were not always available. In a Canadian study, Sansfaçon et al. (2018) found that some youth perceived transgender organizations and resources as primarily accessible to White individuals. Participants felt that these services were not able to meet the needs of ethnically diverse transgender populations.

In their survey, Beemyn and Rankin (2011) found that transgender people of colour reported more harassment, physical violence, and concern for their safety than White individuals (Beemyn & Rankin, 2011). Additionally, those who were also a sexual minority experienced more concern for their physical safety than those who were heterosexual (Beemyn & Rankin, 2011). These minority groups also experience increased levels of workplace discrimination (Beemyn & Rankin, 2011). James et al. (2016) found that people of colour were more likely than White transgender individuals to be forced to leave their home, run away from home, face rejection from their religious community, and have lost a job. Transgender women of colour faced higher rates of homelessness and arrest and were more likely to be verbally and physically attacked by strangers. Compared to people without disabilities, transgender individuals with disabilities reported more negative experiences at school, higher unemployment rates, and were more likely to live in poverty (James et al., 2016). In a study of 14-18 year-old high school students, transgender students who were also a sexual minority had the highest likelihood of experiencing sexual violence (Atteberry-Ash et al., 2020). Intersecting identities may also increase risk of mental health concerns. For instance, Simone et al. (2022) found that non-binary college students with a minority sexual orientation were significantly more likely to have an eating disorder than their heterosexual counterparts.

Throughout adolescence and young adulthood, non-binary individuals may experience or be exposed to prejudice and bias in every environmental system impacting their development. As a result, while non-binary young adults are trying to accomplish developmental tasks such as identity consolidation, they must simultaneously cope with the impacts of past and present discrimination. Unfortunately, given the heightened level of self-focus during this time (Arnett, 2015), non-binary youth may be at a greater risk of internalizing these negative messages.

Minority Stress

Confronting high levels of gender-identity resistance from others can take a severe toll on the mental health of non-binary individuals. Belonging to a stigmatized group increases potential exposure to identity-related stressors, a term known as *minority stress* (Meyer, 2003). While minority stress was originally conceptualized to explore how negative societal attitudes and behaviours impact lesbian, gay, and bisexual individuals, this model has now been applied to transgender populations (e.g., Rood et al., 2017), demonstrating a connection between chronic gender identity stressors and impaired psychological functioning (Hunter et al., 2021; Watson et al., 2019). Minority stress is derived from three primary sources; necessary vigilance, stressful external events, and internalized shame (Meyer, 2003). It has been suggested that for transgender individuals, the internalizing component is perhaps the most salient and impactful (Hendricks & Testa, 2012).

Shame is a powerful, painful, and overwhelming self-conscious emotion that involves feeling fundamentally flawed or unworthy (Tracy & Robins, 2004). This feeling may be triggered when individuals believe they are inadequate or believe that they are deficient in the eyes of others (Gilbert, 2009b). Shame is often experienced as intense negative affect, the desire to disappear, and feeling trapped (Lewis, 2003). Human minds register shame as a threat, activating emotion regulation processes that promote vigilance and hyperarousal, which can make it difficult to self-soothe or achieve emotional balance (Gilbert, 2009b).

Within transgender populations, persistent negative societal messages have the potential to create feelings of shame regarding one's gender identity. Rood et al. (2017) interviewed 30 transgender and gender-nonconforming participants in the United States and asked how they were affected by transphobic societal messages. The participants frequently reported that such

messages caused emotional distress and negative self-evaluation. Some participants made comments about experiencing shame and feeling as though their gender identity was wrong. This feeling, known as internalized transphobia, has been associated with psychological distress (Breslow et al., 2015), low self-worth (Austin & Goodman, 2017) and suicide attempts (Perez-Brumer et al., 2015).

Johnson et al. (2020) explored the minority stress experiences of non-binary youth aged 16 to 20. Participants discussed encountering refusals to use proper pronouns, accusations of attention seeking, and transphobia within 2SLGBTQ+ spaces. This contributed to stress associated when coming out to others, and caused youth to experience confusion and self-doubt about their gender identity. Similarly, Jackman et al. (2018) found that transgender and non-binary participants who experienced identity invalidation were at a greater risk of engaging in self-harm.

Discrimination is likely internalized at a young age, as many genderqueer individuals have a negative emotional reaction when they first comprehend the discrepancy between their felt and assigned gender (Beemyn & Rankin, 2011). Being confronted with prejudice and discrimination may cause this population to feel inadequate and to suffer from persistent shame. This sense of unworthiness may seriously impact the mental health of non-binary youth, especially in light of shame's relationship with depression, anxiety, and self-harm (Callow et al., 2021; Castilho, Pinto-Gouveia, & Duarte, 2017; Gilbert et al., 2010).

Mental Health

Recent studies have begun to explore the mental health of transgender populations with non-binary identities. In one survey of American genderqueer adults, Budge et al. (2014) found that more than half of the participants reported clinical levels of depression, and over one-third

experienced clinical levels of anxiety. This is consistent with mental health concerns noted by Taylor et al. (2020), with 45% of surveyed youth self-reporting their mental health as poor and the majority of respondents disclosing they had at least one mental health condition.

Additionally, 64% of youth had self-harmed within the last year, and 21% had attempted suicide (Taylor et al., 2020). In a nationwide survey of over 100,000 American adolescents age 11-19, over 40% of nonbinary participants reported at least 1 suicide attempt (Toomey et al., 2018). Compared to the general population, non-binary youth report poorer mental health and life satisfaction, and higher levels of suicidal ideation and self-harm (Clark et al., 2018; Ferlatte et al., 2020; Hunter et al., 2021; Newcomb et al., 2020; Rimes et al., 2019; Turner et al., 2022).

This population also reports a higher need for mental health services compared to cisgender sexual minority participants (Warren et al., 2016). Unfortunately, traditional mental health treatments may lack tailored service delivery, inadvertently causing further harm. Hartman-Munick et al. (2021) explored the experiences of transgender and non-binary adults aged 18 to 30 accessing treatment for eating disorders. Many participants stated that they felt as though they were not taken seriously when seeking help or screened properly, as they did not fit the idea of a ‘typical’ eating disorder patient. For clients experiencing gender dysphoria, some treatment goals, such as the promotion of body acceptance, were not congruent with their gender experience. For some participants, their eating disorder was unrelated to gender, while for others the eating disorder served as a means to bring their body in line with their gender or stop menstruation. These varying perpetuating factors underlying the eating disorder were not always addressed in treatment (Harman-Munick et al., 2021).

Studies have also compared the mental health status of non-binary and binary transgender individuals. Though some research has suggested no differences in mental health between these

two populations (e.g., Rimes et al., 2019), other studies have found that non-binary youth reported significantly higher rates of depression, anxiety, substance use and self-harm, lower self-esteem, and were at an increased risk developing an eating disorder (Burgwal et al., 2019; Cheung et al., 2020; James et al., 2016; Simone et al., 2022; Thorne et al., 2018; Veale et al., 2017). Non-binary individuals may also more likely to keep their gender identity completely secret from friends, family, and colleagues (Beemyn & Rankin, 2011). Veale et al. (2017) suggest that the elevated mental health risks reported by non-binary youth may be due to stigma, and reflect a greater understanding and acceptance of transgender youth whose identity aligns with society's conceptualization of gender.

Based on the research summarized in this chapter, non-binary young adults are in clear need of support. During a developmental period focused on identity development and consolidation, this population must contend with the impact of internalized shame and invalidation, and navigate associated mental health concerns. Accordingly, it is imperative that psychologists and all helping professionals have an understanding of the resources and interventions that can be used to support this group.

Strengths and Coping

Although there is a growing understanding of the challenges facing non-binary young adults, information about the resources and strengths utilized by this population is limited. Transgender research has traditionally focused on individuals who identify as boys/men or girls/women, excluding transgender groups with non-binary identities (Beemyn & Rankin, 2011). When these populations are considered, they are frequently combined with other transgender participants (Warren et al., 2016). Some studies exploring potential interventions or resiliency may exclude transgender individuals with a non-binary identity altogether (e.g.,

Grossman et al., 2011). As a result, although it is evident that transgender individuals with a non-binary identity face unique challenges, information about how to best support them is lacking.

Some studies have looked more broadly at the factors contributing to wellness in transgender individuals. Mountz et al. (2018) interviewed American binary and non-binary transgender youth who had experienced the foster care system. Participants spoke about gaining emotional support from spirituality and religion, intersectional transgender organizations, and pride related to transgender and ethnic identities. Singh et al. (2014) spoke to 19 American transgender youth about their experiences of resilience. Participants reported that it was important to discover themselves, both through individual reflection and social interactions. Participants also advocated for their own needs, and received support from family and friends (Singh et al., 2014).

The existing research on supports for transgender youth has focused predominantly on the importance of social support. Family support, for instance, is associated with greater likelihood of being able to express one's gender (Weinhardt et al., 2019). Youth with supportive families are also more likely to report higher levels of psychological functioning and are less likely to experience suicidal ideation (Budge et al., 2014; Taylor et al., 2020). In an online survey of binary and non-binary transgender youth aged 14 to 18, just under 70% of respondents stated that friends were a major source of support. Partners and immediate family were also each identified by over 20% of participants (Shah et al., 2022). The importance of support from friends, family, and the transgender community was also expressed by Mullen and Moane's (2013) participants, which included one person who defined as non-binary.

Although some non-binary young adults may struggle to find communities that support diverse transgender populations (Sansfaçon et al., 2018), those who do are likely to benefit from

this connection. In a study by Barr et al. (2016), 571 participants (including binary and non-binary transgender adults) completed a series of surveys measuring community belonging, the strength of one's transgender identity, and indicators of well-being. Those who felt a stronger connection to the importance of a transgender identity were more likely to have higher levels of well-being. This relationship was mediated by a sense of community belonging (Barr et al., 2016). Similar results have also been obtained by Austin and Goodman (2017), who found that community connection was associated with an increased sense of self-worth in binary and non-binary transgender participants. In Beemyn and Rankin's (2011) interviews with genderqueer participants, the concept of forming one's own community was an important theme that emerged from the data.

Thanks to advances in technology, non-binary young adults can create spaces of belonging both in person and online. Just as the internet can help youth formulate their identity (Borca et al., 2015; McLean & Breen, 2016), greater visibility and access to online resources have made it easier for younger generations to learn about and meet people like themselves (Beemyn & Rankin, 2011). This opportunity for connection is important, as meeting with others allows transgender youth to better understand their experiences and co-construct their identity through social discourse (Bilodeau, 2005; Saltzburg & Davis, 2010). Through communicating with others, non-binary young adults can conceptualize their experiences in a way that honours their journey and self-growth.

Some young adults may form connections through activism work, acting as agents for change within society. Beemyn and Rankin (2011) found that genderqueer AFAB participants, the majority of whom were aged 19 to 22, were especially likely to socialize with other transgender individuals within political activism settings. Social engagement is also a way for

binary and non-binary transgender youth to cope with prejudice and stigma (Durbeej et al., 2021; Saltzburg & Davis, 2010). Activism is associated with increased well-being in gender minority youth, suggesting that social engagement can act as a buffer against minority stress (Frost et al., 2019). Youth can connect with others like them, making them feel more validated and confident, and increasing resiliency against discrimination and oppression (Saltzburg & Davis, 2010).

Interpersonal support allows non-binary young adults the chance to achieve developmental tasks associated with identity formation and forming deep connections with peers. However, many gaps and limitations related to supporting this population remain. Firstly, youth may not have safe and secure access to in-person or online resources (Samons, 2009; Singh, 2013). Secondly, the formation of social connections does not explicitly target shame and internalized transphobia. Results from recent studies have confirmed that social support and community connection does not appear to buffer against depression brought on by discrimination (Trujillo et al., 2017) or internalized transphobia (Austin & Goodman, 2017; Breslow et al., 2015). Non-binary youth also recognize that external support can fluctuate, and it is important to have the capacity to support oneself (Weinhardt et al., 2019). Therefore, exploring potential intrapersonal resources over and above external support is crucial for addressing the elevated mental health concerns reported by this population. To this end, the current study explored self-compassion as a possible resource for non-binary young adults.

Self-Compassion

Compassion can be conceptualized as noticing and feeling moved by the suffering of another and feeling motivated to care for that person and alleviate their distress (Neff et al., 2005). Self-compassion, by extension, involves turning this quality inwards (Neff & McGehee, 2010). According to Neff (2003a), there are three components to self-compassion: (a) self-

kindness, (b) mindfulness, and (c) common humanity. Self-kindness involves relating to oneself with understanding rather than with shame, criticism, or judgement. Instead of blaming oneself for one's perceived flaws and shortcomings, self-kindness involves accepting oneself as an imperfect human being (Neff, 2011a). Mindfulness refers to the ability to accept and be aware of one's feelings, without minimizing or greatly exaggerating one's experience. Common humanity is the understanding that all humans have faults and experience setbacks and failures. This allows individuals to feel less alone and isolated when coping with flaws or mistakes (Neff, 2003a). While these three components are distinct, they interact with and enhance each other. For instance, acknowledging that everyone makes mistakes will reduce self-condemnation, making it easier to show oneself kindness (Neff, 2003a).

In contrast to Neff's (2003a) conceptualization, Gilbert (2009b) described self-compassion using an evolutionary approach. Gilbert's framework involves three integral emotion regulation systems that have been used for centuries to aid in survival and longevity. The first is the threat-protection system. Responsible for "fight or flight" reactions, this system is designed to be easily activated, as a heightened sense of threat detection increases the chance of survival. However, this can lead to overstimulation, given that there is an evolutionary benefit to operating on a "better safe than sorry" principle (Gilbert, 2009b, p. 132). Negative self-evaluations are also perceived as threats, leading to an over-active threat response in people who are highly self-critical.

The second system, which Gilbert (2009b) labelled the drive or resource-seeking system, provides the rush of excitement that is felt after achieving a goal. Previously, this system aided in survival by keeping our ancestors continuously motivated to seek out food and resources. Although resources are no longer scarce, this system keeps people seeking out their next "high"

by collecting possessions, promotions, and accomplishments. As a result, it can be difficult to feel content in the present.

Lastly, the contentment system is posited to provide feelings of warmth, safeness, and well-being that extend beyond the simple absence of threat (Gilbert, 2009b). When experiencing a moment of distress or suffering, this system can be activated through the care and support offered by others. The contentment system allows humans to seek out and receive comfort, ensuring that vital needs are met. From an evolutionary standpoint, the ability to seek comfort increases the chances of survival of both oneself and one's kinship group. This regulation system can also be self-activated, providing oneself with self-compassion and deactivating overstimulated threat-protection and drive systems (Gilbert, 2009b).

Before continuing, it is important to distinguish self-compassion from other constructs and to address common misunderstandings. Although self-compassion and self-esteem are both associated with self-worth, the former involves a positive and healthy way of relating to oneself while the latter often focuses on social comparisons (Neff, 2003a). Self-compassion is also more strongly tied to stable feelings of self-worth (Neff & Vonk, 2009). Conversely, self-esteem is correlated with feelings of self-worth that are contingent on factors such as social approval or academic performance (Neff & Vonk, 2009), making the ability to feel good about oneself often dependent on being "better" than others. As a result, when raising self-esteem is the goal, people may become invested in inflating their own importance and abilities while diminishing the achievements of others (Neff, 2011b). Indeed, although the two constructs are moderately correlated, self-compassion, unlike self-esteem, is not associated with narcissism (Neff, 2003b).

In a series of studies, Leary et al. (2007) had participants reflect on negative life events, hypothetical scenarios, and negative interpersonal feedback. Self-compassion was associated

with higher levels of self-kindness and less distress after making a mistake; greater objectivity in judging one's behaviours; and showing more acceptance in the face of negative feedback.

Conversely, self-esteem was associated with higher levels of distress and defensiveness in the face of negative feedback, and lower levels of accountability for negative events.

The belief that self-compassion may lead to decreased motivation and increased carelessness are commonly cited fears of self-compassion (e.g.: Geller et al., 2022; Jeziorek et al., 2022; Simpson et al., 2022). In a study exploring barriers to self-compassion, Robinson et al. (2016) asked participants to rate how they would feel about themselves after responding to a failure in a compassionate or critical way. Although all participants reported that a self-compassionate response would elicit more relaxation, happiness, and confidence, participants with low levels of self-compassion also saw themselves as less ambitious and responsible.

Contrary to the belief that self-criticism is a required component of ambition, Kotera et al. (2021) found that among social work students, intrinsic motivation was a significant predictor of self-compassion. In another study, Kotera et al. (2023) found that self-compassion was a significant moderating variable in the shift from extrinsic to intrinsic motivation, while self-criticism negatively moderated this same relationship.

Neff (2003b) posited that self-compassion allows for the acknowledgment and recognition of flaws without judgement, increasing the likelihood that shortcomings will be addressed. This includes modifying unhelpful or unhealthy patterns and behaviours (Neff, 2003b). Conversely, a lack of self-compassion may be more likely to lead to passivity, as the desire to avoid negative self-evaluation results in flaws being ignored or overlooked (Neff, 2003a). In line with this hypothesis, Breines and Chen (2012) found that when undergraduate students reflected compassionately on a perceived failure, they were more likely to believe they

could improve and take specific steps to address the problem. This sense of agency was reflected in Manavipour and Saeedian's (2016) study, which found that self-compassion was correlated with self-efficacy in university students. This belief in oneself corresponds to positive action, as high levels of self-compassion are associated with greater performance after experiencing failure, compared to those with low levels of self-compassion (Shimizu et al., 2016).

Neff (2003a) also distinguished between self-compassion and self-pity. While the former allows a person to view a painful situation mindfully and accurately and to understand that suffering is an experience common to all humans, the latter over-exaggerates the pain and conceptualizes it as a unique experience. Pity can also involve attributing blame to the sufferer for contributing to their own distress, an element not found within self-compassion (Brill & Nahmani, 2017).

Self-Compassion and Young Adults

The existing research on self-compassion in young adults highlights the importance of this capacity in the promotion of psychological well-being. Across a series of studies, self-compassion has been negatively correlated with depression, anxiety, stress, perfectionism, self-harm, and suicidal ideation, and is positively correlated with increased social connection, life satisfaction, and distress tolerance (Fenzel & Richardson, 2022; Kawamoto et al., 2023; Neff & McGehee, 2010; Per et al., 2022). Self-compassion is effective in the treatment of many clinical concerns, including stress, depression, anxiety and eating disorders (Ferrari et al., 2019; Zessin et al., 2015).

It has been suggested that self-compassion may act as a protective factor for young adults. Long and Neff (2018) found that self-compassion helped to promote adaptive communication behaviours in university classes by buffering participants' concerns about how

they were perceived by others. In a recent study with Australian post-secondary students, Callow et al. (2021) explored how self-compassion influenced external shame, which was conceptualized as negative perceived evaluations from others. Self-compassion moderated the relationship between external shame and depression as well as external shame and anxiety. Seekis et al. (2022) explored the experience of self-compassion on body image. Participants with a positive body image stated that self-compassion helped to buffer against the impact of negative body feedback or appraisals. Other studies have also demonstrated the protective force of self-compassion, such as weakening the relationship between perfectionism and depression (Ferrari et al., 2018).

Self-compassion may also help young adults who have experienced trauma or significant adverse experiences. Hou et al. (2021) found that among college students who had experienced childhood abuse or neglect, higher levels of self-compassion reduced negative cognitions. Munroe et al. (2022) recruited 111 adults aged 18 to 29 who had experienced a traumatic event in adolescence or adulthood. Self-compassion was associated with multiple positive coping strategies, contributing to post-traumatic growth. Dunkley-Smith et al. (2021) explored the experience of Australian young adults with a parent with a significant mental illness. Participants stated that self-compassion helped them to understand themselves better, honour their feelings, and set boundaries.

In addition to correlational studies, interventions designed to increase self-compassion have shown promising results. Hasselberg and Rönnlund (2020) found that young adults who completed a brief online self-compassion training program reported significantly increased self-compassion and emotion regulation, as well as reduced stress. Toole and Craighead (2016) explored the impact of self-compassion training on body image in young adult women. After

completing a series of initial measures, participants in the intervention group were sent a daily email containing a link for a guided self-compassion meditation. After one week, participants in the intervention group reported a greater improvement in body appreciation and appearance-related self-worth. Andersson et al. (2021) had university students complete a mobile compassion training program over the course of 6 weeks. Participants completed six modules, and were instructed to spend 10 to 15 minutes per day on the application. Compared to the control group, participants reported improved emotional awareness and decreased levels of stress.

Self-Compassion and Shame

As previously stated, shame, self-criticism, and other forms of self-attacking are registered by the brain as a threat (Gilbert, 2009a). When confronted by a chronic stressor, such as minority stress, the threat-protection system may become overstimulated (Gilbert, 2009b). As a result, it can be difficult to access feelings of calmness and safety (Gilbert, 2009b).

Accordingly, studies have found that individuals with high levels of shame tend to have lower levels of self-compassion and are therefore likely to have difficulty self-soothing (e.g., Castilho, Carvalho, et al., 2017). Enhancing self-compassion allows individuals to deactivate their overactive threat system and relate to themselves with understanding and kindness (Gilbert, 2009a).

Multiple studies have demonstrated that self-compassion is effective at targeting and reducing the effects of shame. Johnson and O'Brien (2013) asked participants with high levels of shame to write about a shameful memory three times over the course of a week. Those who were instructed to respond to these memories in a kind and compassionate manner reported lower levels of shame and negative affect, compared to participants who were told to write about

emotions associated with the memory. These findings were maintained at a 2-week follow-up. Self-compassion is also a significant mediating factor between shame and depressive symptoms (Castilho, Carvalho, et al., 2017).

Importantly, self-compassion also appears to lessen the effects of shame related to victimization and oppression. For example, self-compassion helps to mediate shame in adults who were bullied as children (Beduna & Perrone-McGovern, 2018). Self-compassion has also been explored within sexual minority populations, who may also face systemic barriers and internalized stigma. Matos et al. (2017) found that self-compassion acted as a protective factor for gay men, significantly mediating the relationship between early shame memories and current shame and depression. Crews and Crawford (2015) suggested that self-compassion can be developed with sexual minority individuals who are not public about their sexual orientation due to feelings of shame and internalized homophobia.

Self-Compassion and Transgender Populations

Based on self-compassion's effectiveness in addressing concerns related to internalized stigma, minority stress, and mental health concerns, several studies have begun to explore the influence of self-compassion on transgender populations. Vigna et al. (2018) found that, compared to their heterosexual and cisgender peers, sexual and gender minority high school students had lower levels of self-compassion. Self-compassion was also found to be a better predictor of mental health than experiences of victimization. Unfortunately, the data on transgender adolescents was not analyzed separately; the number of non-binary participants was not reported; and students who did not indicate their SAAB were removed from the analysis. In a study of transgender and non-binary adults, Samrock et al. (2021) found that self-compassion was negatively correlated with depression. A significant interaction revealed that the highest

rates of depression were reported by young adults with low levels of social support and self-compassion.

Bluth et al. (2021) recruited American and Canadian transgender and non-binary adolescents between the ages of 13 and 17 to take part in an online version of *Mindful Self-Compassion for Teens* (Bluth et al., 2016). This program is an adaptation for adolescents based on Neff and Germer's (2013) original *Mindful Self-Compassion* (MSC) training program for adults. Participants met for eight 90-minute sessions, and completed three rounds of survey measures. Researchers also collected qualitative data exploring participants' experience of the program. Analyses found a significant increase in self-compassion and mindfulness, and a decrease in depression and cognitions associated with suicidal ideation. Participants further reported that learning about self-compassion improved their acceptance of emotions, feelings of self-worth, connection to their bodies, and ability to cope with difficult situations. However, participants also reported feeling as though the information was not tailored to transgender issues, and that some of the exercises exacerbated gender-related distress (Bluth et al., 2021).

In a recent pilot study, Pipkin et al. (2022) evaluated the impact of an 8-week online compassion-focused therapy group specifically designed to discuss transgender issues. Participants ranged from 30 to 54 years old, and included one non-binary person. Adaptations to the training program incorporated discussions around topics such as discriminatory social messages, coming out stories, and other experiences of the participants. Participants stated that self-compassion was helpful in combatting self-criticism and internalized transphobia, and provided an accessible framework for understanding the impact of minority stress (Pipkin et al., 2022).

Although the above studies offer encouraging results, the participation of non-binary participants remains minimal, and their data remains combined with other transgender participants. Existing interventions for people who identify as non-binary have also not included young adults. Additionally, though the inclusion of qualitative data provides some initial understanding of how transgender individuals experience self-compassion, both Bluth et al (2021) and Pipkin et al. (2022) were piloting new training programs. As a result, many of their interview questions pertained to the feasibility and experience of being in the groups themselves, rather than the experiences of self-compassion.

Summary

Societal resistance to non-binary gender identities can make adolescence and young adulthood a difficult period for this population. Developmental tasks, such as forging connections with peers and consolidating an identity, become more challenging as youth may contend with rejection and victimization, as well as systemic discrimination. This leaves non-binary young adults in a particularly vulnerable position, as they must simultaneously navigate the precarious transition to adulthood while transitioning to a stigmatized gender identity.

Non-binary young adults are likely to suffer from minority stress, with shame and internalized transphobia resulting in elevated levels of mental health concerns. Accordingly, it is imperative that these individuals are provided with the resources and tools necessary to buffer against both internal and environmental prejudice. However, most of the current literature is not specific to non-binary transgender populations, and has primarily focused on external supports.

Based on previous research, self-compassion may be an effective capacity to increase within this population. The research summarized above suggests that self-compassion may help non-binary young adults feel less alone in their experience (Pipkin et al., 2022) and to relate

positively to themselves in the face of rejection and prejudice (Bluth et al., 2021). Self-compassion may also offer protection when faced with challenges associated with victimization (Beduna & Perrone-McGovern, 2018), traumas (Munroe et al., 2022), and internalized transphobia (Pipkin et al., 2022), thus helping non-binary young adults cope with harassment or discrimination. However, the way that non-binary young adults feel about, think about, and conceptualize self-compassion is currently unknown.

It is important that mental health researchers and practitioners gain a detailed understanding of non-binary young adult's experiences to assist them in their therapeutic work with this population. Additionally, it is also critical that these individuals are able to speak for themselves and that their perspectives are represented in research. Therefore, the purpose of this study was to gain an in-depth and nuanced understanding of how non-binary young adults experience self-compassion.

Chapter 3: Method

The goal of this chapter is to outline my philosophical approach to research and the corresponding theoretical approach that was applied in this study. I will describe interpretive phenomenological analysis, as well as the data collection and analysis procedures utilized. Additionally, I will review ethical considerations for working with non-binary participants and background information regarding my position as the researcher. Each of these sections will be informed by a feminist research lens, which provides a framework through which to explore issues connected to concepts such as power and oppression.

Feminist Research

Feminist research recognizes that due to the influence of long-standing oppressive societal structures, marginalized voices have been historically undervalued, suppressed, and erased within academic literature (Brisolara, 2014; Cohen et al., 2022; Gannon & Davies, 2012). Accordingly, one of the primary goals of feminist research is to provide space for these stories and experiences to be explored. Through a broadened understanding of people's experiences, sources of inequality and oppression can be identified, thereby leading to social action and change (Hesse-Biber, 2012; Hesse-Biber & Piatelli, 2012).

Although there are multiple feminist research orientations, there are certain values that exist across theories (Gannon & Davies, 2012; Hesse-Biber, 2012; Stanley & Wise, 1990). For example, understanding the relationship between the researcher and participants is very important (Mathison, 2014; Stanley & Wise, 1990). Specifically, it is vital that the researcher is aware of how factors such as power and authority impact the research relationship (Hesse-Biber, 2012). In feminist research, participants are viewed as active agents who can create and generate knowledge as opposed to being treated as subjects in an experiment (Hesse-Biber & Piatelli,

2012). Using a feminist-informed approach has been recommended as a helpful framework when working with transgender and non-binary youth, as it is attentive to power differences within the research process (Reed, 2022).

Feminist research also acknowledges the importance of broadening one's scope beyond the individual, and exploring structural and systemic sources of oppression (DeVault & Gross, 2012). This is critical for understanding the complexity of both challenges and strengths within a population. Furthermore, exploring these experiences within marginalized communities, such as non-binary youth, can help to elevate feminism's understanding of social forces and inequalities (DeVault & Gross, 2012).

Another main component of feminist research is reflexivity, which involves looking inward and exploring how one's social standing and context influences one's relationship with participants as well as the topic of study (Brisolara, 2014). Reflexivity "combines an invitation to become aware of one's perspective and potential blind sides, as well as to thoughtfully document one's developing perspective" (Brisolara, 2014, p.34). Reflexivity is crucial across all stages of the research project, from being aware of one's interest and assumptions regarding the topic of study to understanding the context and meaning of the language used when writing findings (Gannon & Davies, 2012; Mathison, 2014; Stanley & Wise, 1990).

Feminist theories can be used as a framework and set of guiding principles when conducting research (Brisolara, 2014). This approach was suitable for this study, based on the importance of giving voice to marginalized populations (DeVault & Gross, 2012), the focus on gender (Mathison, 2014), and an understanding of the limits of binaries (Gannon & Davies, 2012). Additionally, this approach was congruent with my identification as a feminist and feminist therapist.

Ontology

Ontology refers to beliefs about reality. There is a spectrum of ontological beliefs. On one end of the continuum is *realism*, which posits that there is a knowable “truth” or “reality” in the world that exists independent of human perceptions (Braun & Clarke, 2013). On the other end of the spectrum sit *relativists*, who believe that humans shape and construct reality based on their own beliefs, experiences, and perspectives. According to this position, knowledge is situated and contextualized, which inherently influences how truth and reality are perceived (Braun & Clarke, 2013).

I consider myself a constructivist. Considered a relativist ontological position, constructivism emphasizes the importance of interpretation (Lincoln et al., 2018). According to constructivism, reality is socially constructed, and informed by an individual’s intrapersonal and interpersonal experiences (Lincoln et al., 2018). Accordingly, multiple realities exist (Merriam & Tisdell, 2015). This position is in line with feminist ontological beliefs, which, while varied, agree that it is not possible to comprehend a universal truth or reality (Brisolara, 2014).

Epistemology

Epistemology is the nature of knowledge. It determines the criteria for whether information can be considered valid knowledge (Braun & Clark, 2013). Similar to ontology, these positions range across a spectrum and correspond to ontological beliefs. Positivists and post-positivists believe in an objective reality, and empirical methods are utilized to form a knowledge base about this “truth.” Conversely, constructionists do not believe in an objective reality for social phenomenon, and accordingly, view obtained knowledge as contextualized and nuanced by society, and open to change over time (Braun & Clarke, 2013). As Braun and Clarke

(2013) stated, the difference in positions comes down to believing that knowledge is objective and discovered, or contextual and created.

As constructivists posit that reality is subjective and contextual, knowledge represents an interpretation of a complex event or phenomenon, rather than an objective "truth" (Maxwell, 2013). Given that each individual is influenced by their own experiences and perceptions, knowledge is generated through a co-construction between researchers and participants (Merriam & Tisdell, 2015; Lincoln et al., 2018). This is consistent with feminist epistemologies, which also believe that knowledge is contextual and cannot be separated from the position in which it is embedded (Brisolara, 2014; Cohen et al., 2022).

Methodology

A major difference between quantitative and qualitative research can be explained by examining how each approach seeks to understand and describe the world. Quantitative methods focus on specific measurements and metrics whereas qualitative research focuses on perspectives and experiences (Eisner, 2003). Eisner (2003) described this difference with a simple example. Quantitative research is similar to temperature, which uses a specific degree to describe our current reaction to the weather or climate. Qualitative research is similar to heat, which reflects how a person would experience the climate (Eisner, 2003).

Qualitative research has been heralded as holding “the promise of discovery, of generating new insights into old problems and producing nuanced accounts that do justice to the experience of all those participating in the research” (McLeod, 2001, p.1). A key assumption underlying most qualitative research is that human reality is constructed (McLeod, 2001). Each individual’s experience is unique and nuanced, shaping their perspective and way of being and

interacting with the world. Additionally, the construction of reality is not a passive activity; rather, each individual works to actively shape their environment (McLeod, 2001).

The selection a qualitative research design for the current study is consistent with my ontological and epistemological stance. Qualitative research also recognizes the subjective influence of researchers (Braun & Clarke, 2013), encouraging reflexivity consistent with feminist principles. Feminist researchers also frequently make use of qualitative methodology as a way of highlighting marginalized experiences and voices (Brisolara, 2014).

Interpretative Phenomenological Analysis

Interpretative phenomenological analysis (IPA) is a qualitative method frequently used within the field of counselling psychology (Smith, 2004). IPA explores the thoughts, feelings, and meaning that participants attribute to their experiences (Smith, 2004). The experience in question is one that is of particular significance in an individual's life (Smith et al., 2009). Smith and colleagues (2009) explained that while people are generally engaged in life, there are occasionally experiences that cause individuals to "wake up" and bring their focus to the present moment. IPA research is interested in these moments when individuals pause to reflect on significant events (Smith et al., 2009). Specifically, IPA is interested in how people wrestle with, make sense of, and think about these experiences.

IPA draws attention to the importance of congruence between a study's research question and the assumptions underlying IPA data. Smith et al. (2009) explains that data represents "something about people's involvement in and orientation towards the world, and/or about how they make sense of this." (p. 46). In this way, data does not purport to reveal an objective account of reality, but represents how an individual experiences and interacts with their environment.

Additionally, Smith (2004) drew attention to the inductive and interrogative aspects of IPA. IPA, much like most qualitative approaches, is inductive in that the goal is not to prove or disprove specific research hypothesis (Smith, 2004). Instead, questions should be broad, allowing participants to generate multiple avenues of relevant data. The interrogative nature of IPA refers to the importance of contributing to the field of psychology (Smith, 2004). This is done by discussing findings within the context of existing literature. IPA is underpinned by three theoretical approaches: phenomenology, hermeneutics and idiography (Smith et al., 2009).

Phenomenology

Phenomenology is the study of humans' lived experiences in the world (Smith et al., 2009). IPA draws on the work of several influential phenomenological philosophers. Husserl (1913/2017), an early philosopher in the area of phenomenology, stated that "natural knowledge begins with experience" (p. 51). According to Husserl, at the root of any lived experience is an *essence* that represents the fundamental features of that phenomenon. Given that these core components would be present across all experiences of a specific phenomenon, Husserl posited that knowledge about essence could be gleaned through studying the experiences of others (1913/2017). It was also important to Husserl that phenomenological researchers be "self-suspending" (p. 189) in order to prevent existing assumptions from influencing observations of an experience. Thus, uncovering the essence of an experience involves setting aside these biases, a process known as "bracketing" or "epoche" (Moustakas, 1994). As each assumption is acknowledged and peeled back, the essential features of an experience can be reflected on with greater intention (Husserl, 1913/2017).

Heidegger (1927/2010), a student of Husserl, expanded on his mentor's conceptualization of phenomenology, moving toward a more situated understanding of knowledge. As a "being-

in-the-world,” (p. 53) Heidegger posited that there is inherently a temporal quality to our existence. Accordingly, it becomes impossible to objectively reflect on our experiences, for in acknowledging that we are “grounded in temporality, we must say then that the world is ‘subjective.’” (1972/2010, p. 349). As a result, separation from the world and an ability to completely bracket assumptions are not attainable. Consequently, interpretation becomes an important focal point within phenomenology as researchers explore how an individual’s situatedness influences their ability to make sense and meaning from an experience (Smith et al., 2009).

The importance of interpretation is echoed by French philosopher Merleau-Ponty (1945/2002), who conceptualized humans as situated beings, interacting with the world as an “other.” Each body provides a lens through which phenomena are experienced. Accordingly, we are not able to access a universal objective truth, as our experiences are individually contextualized. Stated differently, it is not possible to fully share another’s experience, as each body’s particular context will result in a subjective experience that cannot be directly replicated by another, only observed (Merleau-Ponty, 1945/2002).

Sartre (1946/2007), a French philosopher known for his impact on existentialism, expanded on previous conceptualizations of the self by asserting that growth and becoming oneself is a constant process, as “man is constantly in the making” (p.52). Sartre also drew attention to the role that interpersonal relationships play in human lived experiences, with interpersonal relationships being an important contextual piece when interpreting experiences of a given phenomenon.

In considering the contributions of these philosophers, Smith and colleagues (2009) stated that Husserl’s focus on perception and the essence of an experience sets the foundation for

IPA. Heidegger, Merleau-Ponty, and Sartre emphasized the role of interpretation in making sense of the world, and the importance of considering contextual factors such as culture and relationships (Smith et al., 2009). Given that each person's experience is unique and cannot be fully known by another, researchers are also required to engage in interpretation in an attempt to understand our participants' lived experiences.

Hermeneutics

Hermeneutics refers to the study of text interpretation (Smith et al., 2009). Hermeneutic theorists have debated topics such as the influence of a subject's positionality on interpretation, and whether or not it is possible to truly comprehend an author's meaning (Smith et al., 2009). IPA owes its hermeneutic theoretical orientation to key philosophers.

Schleiermacher, a German philosopher from the mid-18th to early 19th century, took an expansive approach to the interpretation of texts (1998). In addition to studying an author's use of language, Schleiermacher felt that it was important to understand any given work within the context of the author's history, personality, and intentions (1998). Schleiermacher believed that through a careful and detailed analysis of text, it was possible for the reader to come to a better understanding of the author's intention and meaning than the author themselves (1998).

Smith and colleagues (2009), however, posit that IPA cannot offer an improved or more accurate interpretation of an experience compared to participants. Rather, through pre-existing knowledge and familiarity with the data, researchers have access to new understandings and insights, which, together with participants' interpretations, help to advance our understanding of a phenomenon (Smith et al., 2009).

IPA also draws its hermeneutic influence from Heidegger. Heidegger noted that preconceived understandings of a subject will inevitably influence interpretations, as it is not

possible to completely bracket our existing knowledge. However, by interpreting a text, researchers may also become aware of which biases and assumptions are most salient (Smith et al., 2009). In this way, bracketing becomes less of a linear process and more cyclical, as researchers can repeatedly become aware of and bracket pre-existing assumptions (Smith et al., 2009).

Gadamer, a 20th century hermeneutics philosopher, built on Heidegger's work by elaborating on the interactive process of interpretation. According to Gadamer, meaning is best communicated through spoken dialogue, as those engaged in the conversation are able to pose questions and understand alternative perspectives (1960/2013). When analyzing data, the focus alternates between knowledge emanating from the text and our own preconceptions (Gadamer, 1960/2013). The process by which interpretation shifts back and forth between a specific word or meaning and its larger context is known as the *hermeneutic circle* (Smith et al., 2009). This involves exploring each piece of analysis as a subsection of the whole and exploring the whole as a collection of parts (Smith et al., 2009). Smith and colleagues note that this iterative process is found throughout IPA's methodological approach.

IPA is also said to involve a *double hermeneutic*, in that the participants make sense of their own experiences, which in turn are then made sense of by the researcher (Smith, 2004; Smith et al., 2009). Thus, the goal of IPA is to navigate this paradox, exploring the phenomenon from the perspective of participants, while acknowledging that the researcher is inherently part of the meaning-making process (Smith, 1996).

Idiography

Unlike other methodologies that may seek to generalize findings to broader portions of the population, IPA is rooted in idiography (Smith et al., 2009). IPA incorporates idiography in

two ways. Firstly, the level of analysis is rich and deep, allowing for a nuanced and thorough understanding of the phenomenon (Smith et al., 2009). Secondly, participants are purposively selected, as the goal is to understand the experience of a person or persons within a specific context (Smith et al., 2009). In IPA, the focus remains on a single case until the essence of the case is understood. Other cases are treated in this manner as well with a cross-case analysis occurring only after each individual has been fully studied (Smith, 2004). The goal for researchers is to enable readers to learn both each participant, as well as shared experiences regarding the phenomenon being studied (Smith, 2004).

Position and Background of the Researcher

I consider being a feminist one of the core components of my identity. This informs my research, as my priorities include providing my participants with a voice, engaging in the co-creation of knowledge, and working to create social change. I believe that it is important for those who have historically been excluded from research and broader societal discourse to have a space to share their experiences. Additionally, I believe that concerns that are more prevalent within marginalized communities, such as homelessness, joblessness, addiction, etcetera, are a by-product of oppression rather than the result of inherent traits or a lack of motivation.

This passion for fighting against gender-based inequality led me to my interest in the experiences of gender minority youth. Having volunteered as a counsellor with Camp fYrefly, a leadership camp for sexual and gender minority youth, I was saddened by the numerous stories I heard about bullying, rejection, and prejudice. However, I was equally moved by seeing how the youth could thrive in an accepting and caring space. I believe that self-compassion may help non-binary youth to cultivate a warm and loving relationship with themselves. From this space of

self-acceptance, youth will be able to stand strong in the face of discrimination and work towards achieving their full potential.

I was first introduced to the concept of self-compassion through a positive psychology course I completed during my undergraduate degree. For one assignment, students were required to practice the various topics discussed in class and record their reflections in a personal journal. Self-compassion stood out to me as a particularly powerful capacity. When I began my graduate studies, it became the focal point of both my therapeutic work with clients and my research. I have come to see self-compassion as an immensely powerful vehicle for self-transformation, allowing an individual to navigate the world with a self-sustaining love and appreciation for oneself. While I believe that this practice can be beneficial for anyone, I feel that the greatest potential lies in building this capacity within marginalized and disenfranchised populations.

It is important to acknowledge that adopting a feminist lens does not offer immunity from recreating problematic power dynamics with one's participants (DeVault & Gross, 2012). As previously stated, reflexivity and the ability to reflect on one's status and standing in the world is important (Brisolara, 2014). This consideration allows researchers to explore how their societal context influences their perception of the participants and the research topic (Brisolara, 2014). Accordingly, it is important to acknowledge not only my privilege as the researcher but my numerous social privileges. For example, I am cisgender, meaning I feel congruence between my sense of gender and my body. The result is that I do not face barriers, harassment, or systemic discrimination because of my gender identity. I also benefit from multiple forms of privilege as a White, middle class person without a disability in a heterosexual-presenting relationship. Throughout the research process, I continuously engaged in reflective journaling to explore how these privileges might have influenced my relationship with participants, data collection, and

data analysis. Salient reflections from this process are included in the discussion section of this document.

Participants

Given that the focus of IPA is to study individual cases in detail before looking for patterns across cases, small sample sizes are typically used (Smith et al., 2009). Seven participants were recruited for this study, using purposeful sampling to ensure that participants could provide their perspective of the phenomenon (Smith et al., 2009). The criteria for inclusion were: (a) age of 18 to 25; (b) a non-binary gender identity; (c) the ability to understand and communicate in English; and (d) a willingness to discuss experiences of self-compassion.

Participants were recruited through online advertising (Appendix A) within Alberta and the University of Alberta. Additional online advertising was done through the social media accounts of several 2SLGBTQ+ community organizations in Alberta. Flyers were also posted in 2SLGBTQ+ service spaces within the University of Alberta.

Data Collection

Given the importance within IPA of gathering rich and in-depth information, semi-structured interviews are typically used to collect data (Langdrige, 2007; Smith et al., 2009). This approach allows participants to provide detailed descriptions of their experiences, which can be fully explored through additional questions by the researcher. The flexible nature of semi-structured interviews also enables the researcher to follow up on other points of interest that arise during the discussion (Smith et al., 2009).

Conducting interviews from a feminist lens involves additional considerations. First, it is important to respect the participants for taking the time in sharing their thoughts and experiences, especially as it may include discussing painful memories (DeVault & Gross, 2012). Therefore, it

is important to adequately prepare for discussions with participants, and not use the interviews as a way of collecting information available elsewhere (DeVault & Gross, 2012). The interviews are also an opportunity to practice reflexivity and remain aware of the contextual factors related to power and identity. DeVault and Gross (2012) noted that meetings with participants are “never simple encounters, innocent of identities and lines of power. Rather, they are always embedded in and shaped by cultural constructions of similarity, difference, and significance.” (p. 215).

Procedure

I emailed all prospective participants an information letter (Appendix B) outlining the details of the study. During the initial interview, I reviewed the purpose and nature of the study, and participants completed the consent form (Appendix C) and demographics form (Appendix D). I also provided participants with a list of low and no-cost counselling referrals (Appendix E), in the event that the discussion contributed to increased distress, or a desire to explore the themes further within a counselling setting.

Each of the interviews in this study were semi-structured. The purpose of the first interview was to explore participants’ experiences of self-compassion. The average duration of the interviews was 70 minutes. I audio-recorded and transcribed the interviews verbatim. Within approximately four weeks I provided participants with a copy of their transcript to review, and invited them to a second interview. During this second meeting, participants were given the opportunity to make clarifications and corrections to their transcript. Five of the seven participants opted to take part in the second interview, which averaged 14 minutes. Of the remaining two participants, one participant did not respond to follow up emails, and the other was unable to find time in their schedule to meet. Neither indicated that there were any

inaccuracies in the transcripts. As per the consent provided by participants, data from their interviews were retained. As the analysis process neared completion, I sent participants copies of the findings, and invited them to take part in a third interview to share their feedback on the emerging themes. Four participants took part in the final part of the study, with interviews running an average of 21 minutes.

I provided interview protocols (Appendix F) to the participants ahead of time (Smith et al., 2009). This allowed participants to consider their answers in advance and reduced the risk that important points would be missed. Additionally, early access to the interview protocol served to alert participants to any questions that may have been distressing. This would have allowed the questions to be modified as necessary or addressed in a supportive manner.

COVID-19

Prior to the COVID-19 pandemic, participants met the researcher in-person for the first interview, and had the option of meeting in-person or over the phone for subsequent interviews. Each of the first four participants had their initial interview at the University of Alberta. Three of these participants took part in the second interviews, all of which took place in the same location.

At the onset of the pandemic, all interviews became remote, taking place either through secure video software or over the phone. Two of the existing participants, who opted to take part in the third interview, were given an addendum to the consent form (Appendix G). This addendum reflected changes to the interview modality, material storage, and form of compensation. The remaining three participants, who joined the study during the pandemic, received an updated version of the information letter (Appendix H) and consent form (Appendix I).

Data Analysis

Given that the goal in IPA is to develop an in-depth understanding of participants' experiences, the primary focus of the analysis are the transcripts (Langdrige, 2007). For data analysis, I referenced the procedures detailed by Smith et al. (2009). The first step involved familiarizing myself with the data by reading each transcript multiple times. During my final read-through I also simultaneously listened to the audio-recording of the interview. I felt that this helped me better connect with the data, as I was able to ground my attention not only in what was said, but how it was expressed. Initial reflections and impressions were electronically documented to temporarily bracket these assumptions, allowing my focus to remain on the transcripts.

Next, I coded phenomenological elements of the participant's experience, paying particular attention to descriptions of their experience and the context in which these experiences have taken place (Smith et al., 2009). These codes remained grounded in the data, with a low level of abstraction. I used ATLAS.ti Mac (Version 22.0.2.) to assist in the organize of codes. Once coding was complete, I began engaging in interpretation, incorporating my initial notes and allowing my voice to play a larger role in the analysis (Smith et al., 2009). Reoccurring and related codes were turned into themes as the level of abstraction increased. The next step involved searching for connections amongst themes. This stage also focused on the scope of the research, and themes not related to the research questions were discarded (Smith et al., 2009). Themes and super-ordinate themes were grouped in a way that accurately and meaningfully made sense of the participant's experiences. To make sure that interpretation had not drifted too far from the original data, I compared theme names and descriptions to my initial codes and the interviews, as recommended by Landridge (2007). This process ensured that the original meaning and essence described by participants was not lost as the level of abstraction increased.

Codes and themes were peer reviewed with my research supervisor throughout the analysis process. This allowed my interpretations to become fine-tuned, as I explained my thought processes and decision making aloud. Peer review also ensured that my interpretations had not overshadowed the participant's voice and that themes had a connection to the original transcript.

The findings were then presented to participants who chose to take part in the third interview. Participants had an opportunity to elaborate on or challenge themes and share related experiences. As member-checking is not a requirement of IPA research, this process was included to maintain a feminist-informed approach to my study. Soliciting participant feedback has been carried out by other researchers (e.g., Singh, 2013) and is congruent with the values of feminist research. The goal is to go beyond simple member checks, which increase trustworthiness by having participants confirm the accuracy of the findings, and ensure that the participants' voices are represented in formulation of the findings (DeVault & Gross, 2012). Participants in this study reported that the themes captured their experiences, and participant feedback and elaboration did not shift conceptualizations of any themes. Accordingly, none of the themes were revised.

The subsequent stage of analysis involved repeating the same steps with subsequent participants (Smith et al., 2009). In keeping with IPA's idiographic commitment, it was important that I bracketed the insights that had emerged from previous participants. Smith et al. (2009) acknowledged that it is not be possible to ignore these new findings entirely, but to put these thoughts to the side as much as possible. This allowed the focus to remain on the new participant, and let their own unique perspectives and experiences emerge.

The final step involved searching across cases for patterns and similarities. Given that each case had unique themes, I looked for higher-order connections, as suggested by Smith et al. (2009). Using the themes from each case as a starting point, I looked for commonalities between the most salient aspects of each participant's self-compassion experiences. Super-ordinate themes began to take shape, with each nested individual theme representing a different facet or expression of the higher-level concept (Smith et al., 2009). Although this stage of the analysis leaned more heavily on my interpretations, I continued to engage in an iterative process with the original codes. This process ensured that the cross-case themes were congruent with the original data. Each of the finalized super-ordinate themes contained themes from the majority of the participants, and featured representative codes to demonstrate each theme's connection to the higher-level concept. The findings from the cross-case analysis were then peer reviewed with my research supervisor.

Methodological Integrity

Unlike quantitative research, quality cannot be established through criteria such as reliability. The nature of qualitative research means that the findings could change depending on the researcher or type of method used (McLeod, 2001). A similar dilemma exists for validity, which in quantitative research describes how accurately the results describe "reality." However, a core assumption underlying IPA and most other qualitative research methodologies is that there is no fixed reality. Accordingly, a different set of criteria are necessary for qualitative research to evaluate a study's quality. Smith and colleagues (2009) suggested that IPA can meet the four criteria established by Yardley (2008): (a) sensitivity to context, (b) commitment and rigour, (c) transparency and coherence, and (d) impact and importance.

Sensitivity to Context

Yardley (2008) posited that one of the primary benefits of qualitative research is the potential for new and unforeseen findings to emerge from the data. These findings are typically very contextualized and nuanced. Therefore, to be considered quality research, a study must demonstrate the ability to be sensitive to such subtleties. Additionally, the study must be conducted in a manner that allows these subtleties to become apparent (Yardley, 2008).

In this IPA study, I demonstrated sensitivity to context in multiple ways across the research process. Firstly, in choosing IPA as my methodology I am acknowledging the importance of attending to nuanced and idiographic accounts of a specific phenomenon (Smith et al., 2009). As noted by Smith et al., (2009) gathering rich and detailed information from participants requires skill and attentiveness during the interview process. I engaged in multiple interactional processes such as developing rapport, making the participant feel comfortable, and navigating the power difference between myself and participants (Smith et al., 2009).

This criterion was also demonstrated during analysis, as I approached each account in great detail to understand the context and nuance of participants' experiences (Smith et al., 2009). Additionally, I demonstrated sensitivity to context by including participant quotes to reinforce findings and provide thick, rich descriptions of participants' experiences. The inclusion of quotations also allows the reader to compare their interpretation with my own (Smith et al., 2009). Lastly, I situated the findings within a specific context in the discussion section by developing an in-depth understanding of the literature.

Commitment and Rigour

According to Yardley (2008), quality research cannot be carried out half-heartedly. It is crucial that a researcher strives to fulfill the purpose of their study, to the best of their abilities. This involves a conscientious effort and display of commitment across the span of the research.

This rigour was demonstrated from the onset of this project, as I worked to bracket my preconceived notions and beliefs about the research topic (Smith et al., 2009). Regarding my assumptions, I was aware of a positive bias regarding self-compassion whereby I believed it facilitates a positive intrapersonal relationship and buffers against negative external influences. This perception of self-compassion was derived from extensive clinical work and the results of my master's thesis. As a result, I believed it likely that non-binary individuals would conceptualize self-compassion as a useful and beneficial practice.

I employed several strategies to address this bias. First, the rationale for this study was firmly situated within the existing research. Additionally, I engaged in reflective journaling throughout the research process to bracket my assumptions. Following the example of other studies (e.g., Singh, 2013), I included questions that ran counter to assumptions and biases in the interview protocol. For example, participants were asked if there were instances when self-compassion was not helpful, or negatively impacted their relationship with themselves or others.

Smith et al. (2009) noted that during data collection, the commitment and rigour criterion is similar to sensitivity to context; the researcher must demonstrate a large amount of commitment, attending to both the feelings of the participant and details and nuances within their accounts. During interviews I remained focused on the participants, often checking in to let them know our progress in the protocol, seeing how they were feeling and asking if they needed a break. Attention to detail was displayed throughout the analysis. As each theme developed, I engaged in an iterative process, regularly revisiting the interviews to ensure that my findings reflected the essence of the original data. Additionally, the peer review process allowed me to refine and clarify each component of the analysis. Member checking in the form of transcript reviews took place during the second interview. Participants used the opportunity to elaborate on

their comments, and make small corrections to their transcripts. Feedback was also sought on the themes. Participants who took part in the third interview all confirmed that the themes reflected the experiences they had conveyed. In my presentation of the findings, I demonstrated rigour by producing data that was well interpreted and gave the research meaning, rather than a shallow reiteration of what was stated by the participants (Smith et al., 2009).

Transparency and Coherence

Coherence refers to the extent to which a study's components are compatible (Yardley, 2008). For example, researchers conducting a quality study will be able to demonstrate an understanding of how a particular research question corresponds to the selected methodological approach. Transparency is demonstrated by the detail, clarity, and thoughtfulness with which the researcher's process is communicated to the reader (Yardley, 2008).

One way in which I have met this criterion in the current study is by clearly describing each of the research steps, including the procedures used in data collection, data analysis, and participant selection (Smith et al., 2009). The research itself and research questions underpinning the study also align with IPA principles, as opposed to more closely resembling other qualitative methodologies, such as grounded theory or ethnography (Smith et al., 2009). Smith and colleagues (2009) state that readers should see a focus both on the essence of an experience, as well as interpretation. Accordingly, key theoretical foundations of phenomenology and hermeneutics are apparent in the analysis of this study.

Methodological and reflective researcher notes known as memos (Tesch, 1988) and audit trails can also be kept as a way of demonstrating transparency (Yardley, 2008). During this study, I kept detailed electronic notes documenting the research process. Researcher notes were used to record important insights, assumptions, and questions that arose during data analysis.

Conducting this thoughtful documentation helped to ensure that the study was carried out methodically and professionally (Yardley, 2008).

Impact and Importance

Yardley (2008) stated that to be considered worthwhile, research must have the potential to make a practical or theoretical contribution to society. If the sensitivity to context criteria has been appropriately addressed, a study should be well positioned to address current limitations in the literature and present new and influential knowledge (Yardley, 2008). Smith et al. (2009) agreed that this is a highly significant criterion when establishing quality. This criterion is also consistent with a feminist approach to research. According to this framework, one of the primary goals of research is to promote social change (DeVault & Gross, 2012). Specifically, feminist research aims to explore “unexamined perspectives, complex dynamics, and silenced voices” (Brisolara, 2014, p. 19).

This research study meets this criterion by focusing on the experiences of a historically marginalized population. My study also helps to address a significant gap in the literature, as research on transgender populations predominantly focuses on challenges and deficits. By drawing awareness to the strengths and adaptive coping skills of non-binary youth, researchers’ understanding of this group becomes more nuanced and multidimensional. Additionally, knowledge mobilization of this study’s findings will have the potential to impact clinical work, future research, and help to further social change.

Ethical Considerations

Ethical considerations are a vital component of any research project and are a priority when conducting feminist research. Specifically, using a feminist lens encourages researchers to consider how relationships and systems involving power may impact participants at every phase

in the study (DeVault & Gross, 2012). Given that gender diverse populations are a marginalized group within society, they may be at a heightened risk of harm when participating in research, thus requiring special considerations (Vincent, 2018). Indeed, the *Canadian Code of Ethics for Psychologists* (Canadian Psychological Association, 2017b) states that as the vulnerability of a particular group increases, so should the number of protections put into place. This vulnerability must be considered to meet research's mandate to treat everyone in a fair and equitable way (Canadian Institutes of Health Research et al., 2022). Accordingly, as each ethical concern is addressed, it is important to take into consideration the unique needs of non-binary individuals.

Magolda and Weems (2002) outlined several considerations to be aware of when conducting qualitative research. First, the individual may not fully comprehend the potential for participation-related harms, including judgement and identification, both from within and outside of the community. It is more likely that the researcher will have a better understanding of both the study in general and the potential areas of harm (Canadian Institutes of Health Research et al., 2022). For this reason, it was important to have an in-depth conversation with participants about the possible benefits and harms that may occur because of taking part in this study. Facilitating these detailed discussions also ensured that I was acting in accordance with the Informed Consent standards in Principle I of the *Canadian Code of Ethics for Psychologists* (Canadian Psychological Association, 2017b).

The topic of harm itself must also be considered, as well as who has the power to define harm. Most frequently, researchers are responsible for determining what may be harmful to participants (Magolda & Weems, 2002). However, there may be situations where attempting to mitigate risk creates greater harm to participants. Accordingly, the Tri-Council (Canadian Institutes of Health Research et al., 2022) recommended that researchers attempt to

conceptualize harm while considering the values and perspectives of the group involved in the research. However, caution must be taken to avoid a paternalistic relationship, where it is assumed that the participants cannot understand the concept of harm themselves. As stated within the Principle of Responsible Caring (Canadian Psychological Association, 2017b), psychologists should not undermine an individual's ability to make decisions regarding their own well-being.

It is also important to keep in mind that protections designed to mitigate these risks may be unwanted or do more harm than good (DeVault & Gross, 2012). One such consideration for the present study involved the use of pseudonyms. Feminist researchers such as Lahman et al. (2015) point out that mandatory pseudonym use “risks paternalizing participants and taking away their autonomy” (p. 446). Pseudonyms may also remove important aspects of a participant's identity (Lahman et al., 2015; Shelton & Brooks, 2021). With non-binary participants, providing pseudonyms to hide one's identity may mirror the erasure and invalidation experienced within society (DeVault & Gross, 2012; Vincent, 2018). Consequently, participants were given the option to use orthonyms (i.e., real names) or pseudonyms, with potential harms associated with anonymity and identification discussed with each participant. Lahman et al. (2015) recommend an ongoing iterative consent process when using orthonyms, allowing for multiple discussions about whether or not participants want to use their real names. Shelton and Brooks (2021), also emphasized the importance of participants being able to engage in member checking when orthonyms are used. In accordance with these recommendations, pseudonyms were used for any participant who only took part in the first interview.

Another potential area for harm identified by Magolda and Weems (2002) is harm to the community. While feminist research is meant to further the understanding and well-being of

marginalized populations (DeVault & Gross, 2012), there is always a risk that findings may be misused (Martin & Meezan, 2003), or result in increased stigmatization and prejudice (Canadian Institutes of Health Research et al., 2022). As per the Risk/Benefit Analysis and General Caring standards of the Principle of Responsible Caring (Canadian Psychological Association, 2017b), psychologists must have an understanding of how their work may impact communities, and strive to avoid the misinterpretation of results. Given that self-compassion is likely to be utilized as a response to external and internalized negative messages, there is a risk that this study may reinforce a perception of non-binary individuals as victims. Such a narrative ignores the agency and strength of this population and goes against the values of feminist research (DeVault & Gross, 2012). To address this concern, I acknowledged the scope and parameters of the findings in the discussion section, thereby reducing the likelihood of the results being misinterpreted (Martin & Meezan, 2003). Additionally, the focus of the study has remained on how self-compassion is experienced, as opposed to highlighting stories of victimization.

A related consideration is that the topic of the research itself may be harmful to participants (Smith et al., 2009). This is an ongoing area of concern with transgender research populations, with some participants reporting feelings of discomfort or distress while engaging in research (Staples et al., 2018). Self-compassion may be associated with painful memories, making it difficult to process or explore these experiences. Accordingly, during interviews I checked in with participants, monitored their emotions, offered breaks as necessary, and provided counselling resources.

There are also ethical considerations to be made concerning the ownership and usage of the data. Given the importance of quotes within IPA, it is especially important to discuss how the statements and the rest of the findings will be used (Smith et al., 2009). Power dynamics have a

large role when it comes to the ownership and dissemination of findings as it is the researcher who decides how an experience is interpreted. It is vital that “appropriation” is avoided, whereby the experiences shared by participants are taken and used merely as a means to achieving a goal related to the researcher (DeVault & Gross, 2012). Such a step would constitute a misuse of power, which feminist research explicitly looks to avoid. Instead, it is important when conducting feminist research that the results are useful for promoting change and wellbeing for participants and their community (DeVault & Gross, 2012). Within the current study, an understanding how non-binary youth experience self-compassion will help to provide a foundation for educators, parents, psychologists, and other professionals looking to support this population.

Gender equality is an essential component of social justice, which is a motivating factor for feminist researchers and psychologists alike (Canadian Psychological Association, 2017b; Galiè, 2014; Kennedy & Arthur, 2014; Sinacore et al., 2011). One way of achieving this goal is to empower participants with the ability to make a change in their own lives (Lykes & Hershberg, 2012). Once participants become aware of their strength and agency, they can engage with their environment in a new way (Galiè, 2014). Moreover, enhancing an individual’s understanding and knowledge is in line with the Maximize Benefit Standard of the Principle of Responsible Caring (Canadian Psychological Association, 2017b). Within this study, by describing their experiences of self-compassion, individuals were provided with a space to reflect on their agency and ability to facilitate a positive relationship with themselves.

Chapter 4: Findings

This chapter presents the findings from the current study. The first section contains vignettes that provide an interpretation of the idiographic and contextualized phenomenological elements of each participant's experience. This is followed by a cross-case analysis of frequently occurring themes. I have chosen to write these narratives in the past tense, as each vignette represents a contained moment in time.

Participant Vignettes

Gul

Gul (she/they) was a 25 year-old post-secondary student, who identified as Canadian and South Asian. Gul first began using self-compassion when they started university. Prior to this time, Gul struggled with feelings of unworthiness, which they attributed to their intersecting minority statuses, which "I guess subconsciously almost make me feel like I'm a minority in every way so I don't deserve anything." Gul referred to this sense of shame and undeservedness as "guilt," and explained that it often prevented them from reaching out and ensuring their needs were met. However, being in a university environment helped to provide Gul with a more self-compassionate perspective. While discussing the influence of a particular instructor, Gul noted:

What she taught me in her course and what she taught me through her personal experiences in a way also helped me realize that I am worthy, and it's not a bad thing to ask for help and that everyone needs help once in a while.

After a self-compassionate experience in which Gul talked to their instructors about requiring extensions on course assignments, Gul realized that being able to reach out for support was something they deserved. Gul stated that being able to seek assistance without feeling undeserving was a "big moment" for them, as they recognized that they were just as worthy of

receiving help as others: “I am the same as other people, there’s nothing wrong with me that makes me less or more.”

Reaching out for help was one way in which Gul was now able to meet their self-care needs. Gul explained that they had always been aware of what they needed, but felt as though they did not have permission to act on this knowledge. Self-compassion allowed Gul to honour their needs, an experience they described as “liberating.” Gul explained that they developed habits such as taking time to care for themselves and recharging when feeling drained. This was particularly important within Gul’s friendships, and helped to facilitate healthy interpersonal boundaries:

Sometimes just asking to take a step back or even voice that, “I do care about you and I do love you but I also need to take some steps back because I do take this very hard,”...most of my friends have been very understanding about that, and they do realize that sometimes you do kind of need to step back. So now if they feel like they need to tell me something they will ask me before they just go full on ranting. And I try to do the same as well, and that’s kind of a really big thing, just kind of realizing boundaries.

Gul described the meaning of self-compassion as “understanding who you are to the core of yourself.” This meant that, in addition to understanding their needs, Gul reflected on who they were as a person, what they valued, and how they wanted to express themselves.

Gul stated that each of their experiences with self-compassion was a way to “strengthen my identity,” adding that it was about “going back to the internal self and just kind of being more clear about what it is.” They explained that by focusing on living in congruence with their values, self-compassion starts “from the inside and then it goes outward.”

If I want to be able to show that to other people, like that I am a helpful person, I have to help myself first. So kind of, starting with myself first and then moving outward, rather than what I've been doing most of my life is starting outwards, helping other people and then working to help myself.

Gul also emphasized the importance of prioritizing their core self when making decisions, rather than worrying about how others might react. One area in which they discussed this point was in regards to gender expression:

Again, just go back to how you feel, do you like what your body looks like? Are you comfortable with that? Are you not comfortable with that? Make those decisions based on how you're feeling, and who you truly feel like you are inside, rather than, like, someone who's saying, "non-binary people have to look like this." I guess society's telling you non-binary people don't exist, they're fake, whatever, just ignore all of that outside noise and focus on yourself first.

Gul explained that by acting in line with their core self, they were better able to cope with the responses of others, and that it allowed them to "not influence how I see myself as much."

Another theme that appeared throughout the interview was the concept of being able to choose reflectivity over reactivity. Gul described themselves as an impulsive person, and stated that self-compassion had helped them to get out of their "instant gratification mindset." This allowed Gul to have more patience when working towards goals by "focusing on the process." Self-compassion also encouraged Gul to slow down before taking action, allowing them to "look at the whole picture," rather than getting caught up in their emotions.

Pausing to reflect was also beneficial in difficult situations, as it helped Gul to recognize that their feelings and experiences are temporary:

If I feel guilty right away I feel like I'm going to feel guilty forever, and it was a big moment for me to realize that feelings do pass, that I don't need to, kind of stay in this one state forever, that I will get out of it. And, it was kind of a reminder that what moment I'm experiencing right now is not going to last forever, whether it's good or bad.

This recognition of impermanence was very important for Gul, and it helped them to create distance between their identity and their experiences:

I would always just look back and I would tell people, and like myself too, like I can't remember a day I lived where I didn't have depression or anxiety. That's who I am. That's who I was. And then, where I am now, I'm like, "That's not me, that's just something that's happening to me, it's not who I am though. Those aren't words that define who I am, it's just something happening to me."

Gul explained that self-compassion also increased their ability to address challenges. Rather than viewing their problems as external to them, Gul considered their own role within the situation and explored alternative explanations. Further, Gul discussed the importance of orienting themselves towards solutions, and finding solutions within past experiences:

Just looking back, seeing that I can get out of it, and it's just about, how I look at it and reflecting on how I, how did I get out of it that time? Maybe there's something useful that I can take and use that now, maybe there's something from another time that I can use and just kind of building and scaffolding and all of that. Rather than focusing on the negative aspect of it, rather than focusing on the bad emotions, focusing on how I got out of those emotions.

Kam

Kam (they/them) was a Caucasian 21 year-old post-secondary student who identified as non-binary and agender. Kam had struggled with a history of abuse and maltreatment, resulting in difficulty setting boundaries and in self-critical beliefs and distorted ideas of how they deserved to be treated. Kam explained that after being self-critical for many years, they recognized that this approach was not working for them, and that being unkind made it more difficult to address failures and setbacks.

The concept of unlearning self-critical inner dialogue was a prominent theme throughout the interview, with Kam conceptualizing self-compassion as “learning to interact with yourself.” Kam stated that this process was “obviously not as easy as just changing your thoughts and being like, ‘I’m going to love myself today,’” as it required intentional reflection to correct this internal dialogue:

It’s the same thing like when you’re approaching anything where you’ve got these preconceived biases and you have to unlearn it, but in this case it’s unlearning being mean to yourself. And it takes a lot of effort and I would say actual, like, directed work, like you have to actually consciously think, “Okay well, why am I feeling this way? Why am I thinking this way?”

Kam stated that interacting with oneself in a compassionate way also applied to interpersonal contexts. It was important to not put themselves down in front of others, explaining that even if the comments were made as a joke, it would still “feed those little gremlins in your brain.”

Kam described compassion as part of a mutual influence process. Kam attributed the development of their self-compassion largely to the influence of others, such as friends, therapists, and the broader 2SLGBTQ+ community. This support then provided the framework for Kam to learn to treat themselves with compassion. Additionally, Kam recognized that if they

were able to treat friends with kindness and understanding, they could direct this compassion inwards as well:

Sometimes my friends do the same things where it's like, "Okay, like so I have to cancel plans because I am not in the headspace to go out." And I'm like, "Okay, yeah of course," like I would never fault someone for that. So just being able to actually have that experience practicing it towards others you're able to look at yourself from the outside, not necessarily just get caught up in all the bad stuff that's floating around in your head.

Through showing themselves compassion, Kam noticed that the quality of their relationships also improved. They felt more love and appreciation towards others, and looked to their friends as a source of inspiration, rather than engaging in comparisons.

Self-compassion helped Kam to accept and acknowledge who they were as a complex and nuanced person. This meant that they were able to recognize each part of themselves, rather than turning away from perceived flaws or failures. Kam realized they could also value non-physical qualities, noting that this was a "big shift" for them, and important for those who struggle with body dysphoria. By acknowledging all aspects of themselves, Kam felt as though their sense of self expanded:

I know that saying, "Okay my identity got bigger," is such a vague way to put it, but it's more of like, learning all these contours of yourself and this fuller sense of self and then being able to accept all of it. That's compassion, right? That's love.

Kam's sense of self also became more positive, allowing them to feel proud of who they were.

Prioritizing self-care was another theme that emerged from the interview. Caring for themselves, even in small ways, helped Kam to get through difficult situations. Recognizing the importance of self-care also felt liberating, as it gave Kam permission to care for their needs:

There's something also very, I think, freeing about acknowledging "Okay, you need self-care." Like, that's fine, you actually do have to take care of yourself, you have to take care of your body, your health.

In addition, self-compassion increased Kam's sense of autonomy and agency. By giving weight to their feelings, beliefs and values, Kam recognized that they were able to make their own choices, rather than deferring to others:

It's a sense of agency, right? If I'm putting value on my own words and my own thoughts then all of a sudden I'm able to give how I'm feeling weight. And that is something that allowed me to be like, "Okay, what do you actually want to do with your life?" Instead of being like, "Okay, what does mom and dad want me to do, or what do my teachers think I should do?",... you're allowed to set your own values.

Kam felt capable of making their own decisions, recognizing that they were the ones most equipped to make these choices:

You are in the best position to be able to reflect and see what's going on inside of your head. And, yeah, like my friends are influencing me and all these support networks and stuff, but when it comes down to it, it's like, I'm the only person in here, right?

Making their own choices also meant that Kam was able to reject externally imposed definitions of success, and set themselves "gentler standards." Kam explained that self-compassion meant knowing themselves and their limits, allowing for the development of realistic, achievable goals that could take into account their mental and physical health: "Success doesn't have to be that universal concept, right? And it's going to mean something different for me depending on what day it is, depending on where I am."

Another recurring theme involved the “emotional foundation” provided by self-compassion when coping with difficult situations. Rather than catastrophizing and becoming overwhelmed by negative emotions, Kam was able to take a step back and see their problems with perspective:

If I feel like I’m letting other people down it’s like, “Oh my God,” but when you take a step back and you look at it, it’s like, “Okay each person around you has a billion people in their life that they’ve got going on there, you’re one person.” And yeah, there’s situations where you really need to show up and like, make sure you’re doing what you gotta do, but at the end of the day, society’s not going to crumble because you missed your bus.

This helped Kam to feel more resilient in the face of stressors, as they recognized “you can survive these things.”

Kam stated that self-compassion also allowed them to “better approach problems in the future,” as it normalized failure as a universal human experience. Rather than blaming or shaming themselves for making a mistake, self-compassion helped to “turn what used to be very self-critical, cruel lines of thought into this productive useful thing,” because they were now able to reflect and learn from their experience.

Although Kam spoke at length about the benefits of self-compassion, they still encountered barriers that hindered its accessibility and development, such as the presence of mental health concerns. The long-term effects of maltreatment presented an additional obstacle, as Kam occasionally felt themselves react to situations in a way that reflected the impact of a past relationship, rather than Kam’s current values. This was a source of great frustration, and influenced Kam’s sense of agency:

It feels like you're letting them still affect you, even though they don't have anything to do with your life, they're still able to have power over you. So I think that the biggest obstacle I face right now is being able to see when I'm not being self-compassionate and how my brain's still like, learning to do that.

Rune

Rune (she/they) was a Caucasian 24 year-old post-secondary student. They had historically struggled with generating self-compassion, as they experienced a high level of self-directed anger. Rune was intersex, and from a young age they had been subjected to non-consensual medical interventions. This had a large impact on their sense of self-worth, and left them hating their body and feeling as though they needed to be "fixed."

Self-compassion helped Rune to recognize that their self-hatred was the result of externally imposed belief systems. Over time they became able to accept themselves and their identity. At the time of our interview, they felt that they were "okay to exist the way I am," and that they did not have to "perform a certain idea" of their sex or gender. They let go of the anger they had towards themselves, recognizing they should not blame themselves for actions perpetrated by others:

So it was a lot of like, just being angry because a lot of it was out of my control, and then it was like, yeah, self-acceptance and realizing that these things are not my fault and realizing that--yeah, that was a super clear-cut example just being like, "Oh, it's not my fault." You know? "It's not bad to be not a clear-cut, like, male or female."

Rune also showed themselves compassion by avoiding environments that reinforced stigmatizing messages, and finding safe spaces in which their identity was accepted and respected.

One theme that appeared repeatedly throughout the interviews was Rune's ability to find ways of expressing self-compassion despite limitations. Although Rune was able to tell themselves that there was nothing wrong with who they were, they nevertheless struggled to see themselves as unconditionally worthy of self-compassion. As a result, when they were feeling angry or frustrated with themselves, Rune found being explicitly kind to themselves "uncomfortable," stating, "I shouldn't get to do things that are good."

Due to this feeling of unworthiness, Rune explained that they often resorted to "tricking" themselves into acting in self-compassionate ways; "Secretly, I'm actually doing things that will set me up for success." By engaging in more covert acts of self-compassion, Rune was able to use "mind tricks," disguising the purpose of the act from themselves, "Yeah, so it's kind of like I just want to, like, very surreptitiously care. And brush it off, like 'Oh, I'm not doing this to make myself better or anything like that.'"

The primary way in which Rune engaged in these mind tricks was to allow themselves to give expression to their inner critic. Rune recognized that it was difficult for them to cope when they were feeling self-critical, as the idea of engaging in adaptive actions was incongruent with their current sense of self. Rune explained, "I can't go from, 'Oh I'm trash,' to, 'I'm on top of my game, killing it.'" By offering expression to their sense of self-loathing, Rune's sense of self felt more congruent, and they were able to move on:

I'm just like, "Yeah, I'm going to do self-destructive things, I'm not going to take care of myself, but in cool way," which is like, stupid, but since it agrees with my idea of self-loathing self then I can do it. And I do for a bit and I'm like, "Yeah, this feels good," and then I feel good about doing things that are congruent with my sense of self, then I feel good and then I can deal with whatever made me upset in the first place.

Rune explained that this self-compassionate action made them feel better, and more “capable” of dealing with their current stressors. Although this approach meant that there were some negative side effects for Rune’s health, they demonstrated acceptance of their coping abilities, stating, “Sometimes my choice of coping mechanism isn’t, you know, glowing. It’s not perfect, so again there are negative consequences sometimes, but I generally think that it’s like, usually net positive.” Rune explained that they were not upset with themselves for how they had handled difficult situations, even if it was not the most “effective way.” Instead, Rune emphasized that they did, in fact, persevere through these challenging times:

I look back and I’m not particularly upset at myself or anything because I’m like, I’m very impressed at how not dead I am as a result of that. I got through it, and I didn’t think that I could. And so I’m not upset about how I dealt with it.

Several times throughout the interview, Rune expressed doubt that their atypical expression of self-compassion could actually be considered as such. However, Rune contrasted their current level of self-compassion with their past experience, explaining that they had spent half of their life unaware that it was possible to intentionally behave in ways to improve coping. Rune determined that these behaviours helped them to get through difficult moments, and being able to show themselves compassion in this form was quite impactful; “The fact that I am able to, like, most of the time take steps to change that and then do things that I enjoy, it’s like, I can actually do things I enjoy now.”

The majority of Rune’s self-compassionate behaviours were focused on creating a sense of congruence between their actions and sense of self. However, in one of Rune’s recent experiences, they were unable to do this due to time constraints, and they “made a conscious choice” to focus on the problem, rather than “wallowing” in their emotions. During this instance,

Rune spoke to themselves from the perspective of a “cool older brother” type of figure. This dialogue was characterized by the mentor figure speaking to Rune in a direct and honest way: “It was like as if I’m like the cool older brother to myself and being like, ‘Yo, I’m going to level with you, I’m going to tell you straight,’ to myself.” The inner mentor figure encouraged Rune to be self-compassionate, pointing out that it would be more productive to address the situation directly, rather than getting caught up in shame and blaming themselves. Rune stated that this strategy, despite feeling “uncomfortable,” yielded better results than their more typical approach, “Right now I’m doing better than I would have and also got more work done and feel better overall.” They were pleased that the “new, improved version” of themselves was able to choose this alternative coping strategy, and conceptualized it as an act of self-compassion:

This was one of the first times I’ve ever kind of gone with that route. But I feel like it was the most appropriate in that situation. And taking it even [a] further step back, choosing the most appropriate thing even though it didn’t feel comfortable at the time is like, an instance of self-compassion.

Gwyn

Gwyn (she/they) was a Metis 21 year-old post-secondary student who identified as non-binary and Two-Spirit. For Gwyn, perfectionism had historically presented a barrier to self-compassion, as they had always held themselves to a very high standard. During the interview Gwyn explained that they struggled with productivity-related guilt, and stated that they were frequently very hard on themselves.

Self-compassion encouraged Gwyn to reflect on the tone and content of their internal dialogue, and consider if it was too critical. Gwyn found it helpful to question if they would speak to loved ones in the same way, or hold them to similar standards:

And to be very, like, self-reflective and to think like, “Am I being too hard on myself?” if I’m always guilty for taking breaks but realistically I know I should be. I guess it goes to that idea of how would you be kind, treating a friend?

This self-reflection allowed Gwyn to offer themselves gentleness when struggling with self-criticism, telling themselves “Don’t be so hard on yourself, be kind to yourself.”

Perfectionism had also prevented Gwyn from recognizing their accomplishments, keeping them trapped in a mindset that minimized their achievements. Self-compassion helped Gwyn to have more perspective, allowing them to recognize all of their hard work: “I just get, like, stuck in my head a lot and think I have to be perfect, and I then look at myself and I’m like, ‘Holey I’ve done so much, that’s very impressive!’” Gwyn commented that it may never come naturally to view themselves from a more objective perspective, but noted, “that’s fine, because I think I have very good external support.”

The external facilitation of self-compassion was a reoccurring theme throughout the interview, as Gwyn frequently spoke about the compassionate reminders they received from their family, partner, and roommates. Gwyn stated that receiving this support from others helped them to realize “the value of how good it is to talk with other people.” When Gwyn felt stressed or overwhelmed they reached out to others, “because talking things out with someone really helps you realize things that you don’t realize when you’re stuck in your own head.” Gwyn discussed one example in which speaking to their partner helped them to get through a particularly tough time:

I was texting him a lot and calling him and he was very supportive and very much like, reminding me to be self-compassionate I guess. And to not be too hard on myself and

telling me like, “I know you can do it.” So that, that really helped, that would have been really difficult without that, without those reminders.

Another theme that emerged from the interview related to Gwyn’s feelings about their body. Gwyn stated that when they were growing up, they were very unhappy and felt as though they did not want to be in a “female body.” They felt as though “there was like a pulling two different ways, like there was kind of two different parts of me.” Gwyn eventually decided they didn’t want to continue thinking about their body, and accepted it as “fine enough.” They explained that the practice of self-compassion has been very important, as it has helped them to “learn to actually love myself.” Gwyn stated that they connected with the idea of being Two-Spirit, and “just kind of realized that for me I really appreciate the body that I’m in now.”

One of the primary ways that Gwyn expressed self-compassion was through the activities they participated in. Specifically, it was important to Gwyn that they acted in a way that was in service of themselves, a theme that occurred frequently throughout the interview. This meant that, in contrast to other daily activities, self-compassionate behaviours helped Gwyn in some form. This included taking care of their living space, engaging in self-care activities such as exercising and reading, and taking breaks when needed to prevent burnout. Some self-compassion actions also reflected Gwyn’s values and culture: “So I did this six-week Metis jigging class that was going on for free, and teaching myself how to bead, I guess that’s also been a good self-compassion thing.”

It was important to Gwyn to be intentional about their activity selection. As a result, they spent time reflecting on the factors that determined if an action could be deemed self-compassionate. At times, Gwyn found it difficult to differentiate self-compassion and procrastination, due to their lingering perfectionism. Rather than rely solely on the purpose of the

activity, Gwyn gained clarity through checking in with their internal response to the behaviour; “I think the easiest way to figure out what self-compassion is, is just like, how do you feel when you are doing it?” By considering their inner experience of an activity, they were able to further reflect on how they could increase the frequency of these self-compassionate behaviours.

One internal indicator for Gwyn was the absence of guilt. Gwyn explained that if they were procrastinating or trying to distract themselves, the behaviour felt less purposeful, and was more likely to elicit negative feelings; “There are definitely things with that where I feel more guilty, and I don’t really think of that as, like, self-compassion so much.” Conversely, self-compassion activities did not elicit this same feeling: “I actually don’t have any, like, guilty feelings about that, or worries about not currently doing work, and that’s how I’ll feel sometimes if I’m, like, watching YouTube videos or something as a break.” To Gwyn, self-compassion involved “treating” themselves, “because I enjoy doing it and it gives me these long term benefits.”

Skye

Skye (he/him) was a 24 year-old person of Indigenous and European descent, who identified as non-binary, androgynous and male. He explained that he had a history of mental health concerns, including trauma and suicidal ideation, and had struggled with depression since childhood. Skye cited these concerns as his primary motivation for beginning to practice self-compassion:

That’s kind of why I decided to do this, for my own sake, for my own life, everyone else around me, and mostly for the people around me. To make them feel better, noticing that I was feeling better with myself.

Since practicing self-compassion, Skye had experienced improvements in his mental health and well-being. He noted that “self-compassion was vital towards being able to progress from certain traumatic events in my past,” and felt that “self-compassion is key towards mental health.” Additionally, Skye noticed that his overall quality of life had improved. He realized that he had become happier, and that his mindset was more positive.

Skye found that as a result of regularly practicing self-compassion, he felt better about who he was as a person: “I feel I’ve just progressed to the point where I was feeling better about my life, myself, how I felt about myself, everything in those regards.” Skye commented on this shift in his self-concept, saying, “I like who I am now, actually,” and adding that those around him had also had a positive response to the changes Skye had undergone.

During the interview, Skye discussed the influence of other people within his life, noting that relationships with others could both facilitate and hinder the development of self-compassion. For example, he stated that speaking to a therapist was beneficial, as it helped him to gradually get to a place where he was able to generate self-compassion for himself. Conversely, Skye found that when he spent time with “negative people” or those who were struggling, he was strongly impacted by their suffering and his inability to provide help. As a result, it became more difficult to address his own needs.

To Skye, self-compassion meant being able to act in a caring way towards himself, a theme that appeared throughout the interview. Accordingly, Skye made sure to engage in pleasurable self-care activities, such as reading and playing video games. Taking care of himself was incorporated into Skye’s daily self-compassion practice, which also included taking care of others: “Every day I try to do something to make myself happy, take care of myself and do something for another.” Taking care of himself also meant knowing “what you need to be able to

get yourself back up on your feet” following a setback. When going through a rough time, Skye was able to provide himself with the understanding and gentleness he needed.

Skye stated that part of caring for himself meant understanding when external barriers limited his expression of self-compassion. In these instances, Skye made choices about which needs to prioritize. This theme emerged when Skye discussed an instance of prioritizing safety over gender expression. Skye explained that they used to secretly put on make-up at home: “It helped at one point, helped me feel better and how I showed self-compassion for myself for a bit. But [I] didn’t go out in public like that, I just tried it myself.” After being caught by his mother, who “wasn’t too impressed,” Skye decided to relinquish make-up as a form of self-compassion. Skye conceptualized this decision as an act of self-compassion, and explained that it was important to accept that it was sometimes necessary to “move on from certain things,” and find new ways to meet his needs.

Sean

Sean (they/them) was a 23 year-old non-binary person from multiple ethnic backgrounds. Sean held the practice of self-compassion in high regard, and found it particularly useful when facing difficult life circumstances. In these instances, Sean found that self-compassion helped orient them towards the positive in their life, preventing them from becoming overwhelmed. This was not done with the goal of dismissing or making light of Sean’s suffering; rather, it offered them perspective, reminding them of all they had to be grateful for, even during tough times. Sean explained how this mentality had been helpful during the COVID-19 pandemic:

When it really started to kick off and all the masks mandates and the stay at home orders and all that stuff happened, I said to myself, “Well, this sucks.” And I started dwelling on it, like a lot of other people I started doing pretty crummy and wanted to go out and do

stuff but you couldn't because of the pandemic. And then eventually I started thinking, "Hey, you know, you still have the house, you still have the food in the fridge, you can still talk to people on the phone, so it's not all bad."

Sean explained that having perspective not only helped them to feel "happier" and "more content," but they also felt more capable of coping with difficult situations: "It just lets me know I can do something, I do things without having to worry too much and that I'm not inept, I'm not stupid."

Sean used this same form of perspective taking when thinking about external support regarding their gender identity. They explained that before coming out to their family, fears about potential negative reactions was a major barrier to acting in a self-compassionate way. Sean reported concerns about the possibility of being kicked out of their family home; "If I say this to them, will I end up another statistic? Will I end up being the next person out there?" After Sean's family voiced their support, Sean was able to focus on this acceptance, giving them perspective when faced with rejection from others:

I'm not trying to say that my experiences have been perfect, I mean I've had issues, sure. But my point was that if you focus on the positives, if you say, "Okay, this person or those people, they don't want to, for whatever reason, they don't want to understand or they're hostile for whatever reason, but you shouldn't lose heart because you have these other people, this other person who's willing to take you in, willing to accept you as a friend, a buddy, whatever. And you know, be proud of that, be happy that you have people." It's all a matter of gratefulness and, like I said earlier, perspective. Just always remember *those* people might not like you, but *these* people do.

Remembering that they “will always have people who really matter” was one way that Sean showed themselves self-compassion. This also helped Sean feel more hopeful about encounters with new people, and gave Sean more confidence about disclosing their gender to others.

To Sean, self-compassion is “all about you, it’s all about how you feel.” They used self-compassion to focus on living a life that felt true and meaningful to them. Consequently, Sean explained that one of the barriers to self-compassion they experienced was becoming too attached to external expectations and standards:

That’s what I would say made it harder at times, just that feeling of, “Oh, you have to be like this, you have to do this, you have to do that, you have to be at this point by this time of your life or you’re nobody.”

Sean stated that these standards were particularly difficult to deal with during their teenage years. Over time, Sean learned that they could let go of these societal and media-based expectations and forge their own path, recognizing that they didn’t have to “follow the script.” Sean pointed out that there is “no one keeping track” of how they live their life:

Over time you realize that, you know, you don’t have to be in that race. Life’s not a race. It’s meant to be lived on your own terms. *You* decide what to do. You don’t have to worry about what so-and-so says.

Sean stated that the best aspect of self-compassion “is that it helps you be more compassionate towards others.” Self-compassion reminded Sean that everyone goes through difficult moments and makes mistakes, which encouraged Sean to keep relationships intact after ruptures:

There were people in the past I never got along with, not because I was non-binary, just because for whatever other reason, like we might have said something or did something in school that neither of us are proud of. But over time you reflect on that and you tell yourself, “You know, overall you had pretty pleasant experiences with that person,” so why still hold a grudge? Why think about, “Yeah, but this,” just take the good,” right? There’s more good than bad.

Sean hoped that by treating others with compassion, it would help them to be more kind to themselves, creating a wave of self-compassion:

I just try to cheer them up, and tell them, “Hey, you might not have this, but you have that going for you.” It helps them be more self-compassionate, and then maybe they’ll pay it forward, right? A chain of compassion.

Additionally, self-compassion reminded Sean that everyone is continuously growing and acquiring new knowledge. This helped Sean view others as capable of change, a belief which assisted Sean in navigating interactions with individuals who did not understand non-binary gender identities. In these instances, self-compassion encouraged Sean to conceptualize the other person’s confusion as a potential learning experience. Sean was able to assess if the person they were speaking to was hostile, or if they simply had a gap in their knowledge:

I don’t mind if people initially say he/him, I don’t mind that. Like I said, it’s all a learning experience. If I tell someone I’m non-binary, they might not know what that means, they might have a misconception of it. You’re not always going to meet some hostile, cruel and difficult person, right? We’re all learning new things every day, and this is one of them, you know?

By framing the situation in this way, Sean was able to able to engage in educational dialogues, rather than feel hurt or rejected.

Self-compassion helped Sean to see themselves as an individual, rather than representing all non-binary people. This attitude allowed Sean to think of themselves as an agent of change, and hoped that when people accepted Sean, they would reflect and adjust their previously held beliefs:

People say, “Well, ‘X’ group people are known to do ‘Y’ things,” but one thing about self-compassion, is I tell myself, “I’m not ‘Y’ people, I’m just me.” And if I’m just me towards these people that have these views about non-binaries or, another group I might be a part of, I can set an example and say, “Look, if Sean is non-binary but they don’t endorse the same things that we’re talking about, we’re complaining about, then maybe we can change our ways, maybe we can re-evaluate our position.”

Ren

Ren (they/he) was a 20 year-old Caucasian individual who identified as non-binary and trans-masculine. Ren explained that their self-compassion journey started at a young age through reading, as they were able to find safe spaces to be alone and find “refuge in a fictional world.” As an adult, Ren’s self-compassion took a different form, as it helped them to claim space to exist within the world. Speaking of the evolution of their self-compassion over time, Ren noted, “It’s shifted, I guess, from a running away internal form, to a more external standing your ground,” and that it allowed them to be “louder about finding and making that space for myself.”

One recent example of Ren claiming space for themselves involved coming out as non-binary at work, an act that they conceptualized as an “act of self-compassion.” Ren explained

that they had to be brave and push themselves to take this risk, and felt proud of being able to do this for themselves:

It also just felt really rewarding just on a personal level because I actually, like, did it. I came out, I did the hard thing. And I, like, committed myself to growth even though it was a hard and uncomfortable thing to do.

Being able to create these safe spaces had multiple benefits for Ren. After coming out at work, Ren stated that the experience “taught me that I don’t need to be as scared about telling people.” It also impacted how felt in their body; “In the end of it I guess I just felt more at home in my body, in the sense that like, there was less compartmentalization that had to take place.” Additionally, Ren felt as though they were now able to experience comfort and safety within these spaces without hiding any part of who they were:

Just sort of, like, create a space in the world where I feel comfortable and that I don’t have to hide parts of myself to feel that comfort. Yeah, the acceptance is not conditional on my adhering to cisgender ideals or whatever, it’s just dependant on me being there and being myself.

Another theme that emerged from the interview was the concept of transitioning as an act of self-compassion. Ren explained that prior to their transition, they found it difficult to treat themselves with self-compassion, as they felt as though their body did not deserve it: “Once I started going through puberty I just hated everything about my body and I didn’t believe that my body deserved compassion. And so it’s very hard to practice compassion on something that you don’t believe deserves it.” Ren explained that the desire to act in a self-compassionate way was present, but access to it was blocked by the body dysphoria: “And it’s not that like, I didn’t want to be self-compassionate to myself; it was that I physically was unable to be because I just

wasn't deserving of it, but I wanted to be." Despite this challenge, Ren was able to initiate the transition based on hope for their future self; "I felt that maybe I in the present tense wasn't deserving of it, but me in the future might be deserving of it, and so there was a little bit of hope there, I guess."

As a result of their transition, Ren felt more "at home" in their body. Transitioning "unlocked" the pathway for further exploration of their gender identity, and Ren was able to act in a way that felt congruent with who they were inside. Transitioning also helped to facilitate further self-compassion; "I feel a lot more in-line with my sense of self and able to practice compassion."

Ren explained that in the past, they had at times felt as though self-compassion would "hold me back in some way," a belief that they attributed to "a combination of perfectionism and undiagnosed mental illness." By working through their body dysphoria, Ren no longer had "an internalized belief that I don't deserve anything in life." However, Ren explained that their current obstacles to self-compassion took the form of barriers related to mental health:

I guess, a lot of it now, it's moved away from aspects of myself that I can't change, that I wasn't in control over. And now, barriers to self-compassion are, like, my own actions where I'll be displeased with something that I've done and then believe that I don't deserve self-compassion or whatever.

Ren stated that their ongoing struggle with perfectionism was a common cause of self-criticism:

"I'm very hard on myself for not performing at the extremely high level I think I should be."

Ren stated that one of their self-compassion activities was to engage in introspection. Specifically, they offered compassion to the past version of themselves, allowing them to engage in healing through this reflection; "I look back on my past self that was unable to be kind to

anyone and I can look back on my past self with compassion and I can sort of, like, retroactively give them what they needed there.” By meeting their past needs in this way, Ren was able to release strong emotions, and improve their functioning in the present; “I can release some of the, like, anger and guilt and pent up stuff left over which again helps with more, I guess, just general healthy behaviours.”

Ren stated that self-compassion meant considering all aspects of their well-being when taking care of themselves.

I sort of was thinking about what the definition of self-compassion looks like for me, and I thought that it really looks like re-evaluating what care looks like. Because we’re told what care looks like for people, we’re told that, doing exercise and pushing yourself to your limits is like, going to bring you to that wonderful potential of physical prowess that you could get to. But are you actually treating your body kindly? Are you listening to your body and what it needs?

Rather than consider any particular self-care activity as inherently good or bad, they acknowledged that there were context and nuance to self-care, which included prioritizing different needs at different times:

My self-compassion and self-care strategies have also gotten more complicated and nuanced. And it’s a lot less, “This is a good action, this is a bad action,” it’s, “This is a helpful action, it may not be helpful in the long term but it’s helpful for right now,” or, “This one we may not be feeling like it’s a helpful action right now but it will be in the long term.”

This meant that sometimes self-compassionate actions may not be considered helpful in one sense, while successfully meeting another need at the same time. To Ren, it was important to acknowledge the ambiguous nature of self-care, “just sort of embracing that uncertainty.”

Cross-case Analysis

In the following section, I describe five main themes that appeared across participant cases. Table 1 illustrates the participant data that contributed to each cross-case theme.

Table 1

Participants Included in Cross-Case Themes

Themes	Participants						
	Gul	Kam	Rune	Gwyn	Skye	Sean	Ren
<i>Intentional Self-Care</i>	x	x	x	x	x		x
<i>Developing a Positive Sense of Self</i>	x	x	x	x	x		
<i>Living with Authenticity</i>	x	x				x	x
<i>Improved Coping Through Perspective Taking</i>	x	x	x			x	
<i>Self-Compassion as an Interpersonal Process</i>		x		x	x	x	

Intentional Self-Care

For all but one participant, self-compassion involved participants taking deliberate steps to care for and prioritize their own needs. Self-care took various forms across participants as they tended to their “physical, emotional, and spiritual well-being.” Intentionality was an essential component of this theme, given the highly individual nature of self-care. Accordingly,

participants purposefully reflected on how they could best meet their own needs, a point that Ren spoke about while discussing their self-care activities:

Another example [for other people] could be like, doing a face mask and having a bath to relax after a hard day. But for me, having a bath would not be a pleasant experience, it wouldn't do it for me. So is it actually a self-compassionate act? Is it a self-care act? For someone it could be but for me it's not.

Participants also recognized that it was their own responsibility to ensure their needs were met.

Kam stated:

Realizing that, "Okay, other people aren't necessarily going to care for you," was a huge thing because it was freeing in a way. You'd think that it would be concerning or upsetting but it wasn't. It was more like, I consider myself a very reliable person, so, "Okay, you have someone to depend upon now," right?

Participants were actively engaged in planning self-care activities, and ensuring that they could incorporate ongoing self-care into their lives. For Skye, doing something to make himself happy was a part of his daily three-part self-compassion practice. Accordingly, he engaged in pleasurable activities such as reading and playing video games. Similarly, Gwyn made time for their hobbies, interests, and favourite television shows. Gwyn also prioritized her physical health and regarded it as a self-compassionate act "to take care of myself in a healthy way."

Additionally, Gwyn took time to reflect on the impact of their self-care, and explore opportunities to increase the frequency of these activities:

Yeah, I guess just like, really thinking about what do I actually like to do? And what do I actually feel good about doing? Not just in the moment, but like, in the long term. And

why don't I do that more? Like, what's preventing me from that? And there are barriers but like, can I figure out a way around them?

Several participants discussed the importance of prioritizing self-care when coping with difficult situations. Although not usually seen as the solution to the problem itself, self-care, as part of the experience of self-compassion, provided participants with what they needed to address the issue at hand. For instance, Skye explained that self-compassion allowed him to reflect on his experience during times of strife. He was then able to understand what was needed to recover, and “kind of help [himself] back up.” Kam, who had a physical health condition, also spoke about the importance of prioritizing self-care when going through difficult times. Although the self-care itself did not change the presence of the condition, it ensured that Kam was still able to meet their needs:

Even when it's something very little, like “Okay, I'm going to go shower, I'm going to go take care of my body even though it's fighting against me, because I deserve it,” I think that that's compassion, like a small way but a very powerful way.

Intentional self-care also assisted Gul during difficult moments, as it provided a means by which they were able to express their needs; “So [self-compassion] just kind of gave me that little boost to be able to speak up for what I want, rather than just kind of staying silent and holding everything in.” This allowed Gul to act in ways that addressed stressors and mental health concerns, as they felt more comfortable asking for help, setting boundaries, and explaining the necessity of their actions to loved ones. For example, Gul was able to express the importance of transferring to a new university:

I was almost at a point of giving up and just staying at [university], but I somehow realized that this is something that I need. I need to get out of that environment to almost

get like a fresh start. And when I communicated that to them, they were very understanding and way more supportive once I told them how I was actually feeling.

Through multiple participant's accounts, it became evident that engaging in self-care was not simply a matter of ensuring that all of one's needs were attended to. Rather, there were times in which participants were required to intentionally weigh and prioritize conflicting needs. In these instances, participants had to accept that this conflict meant some needs would not be met, and that harm may even arise from their decision. This aspect of the theme was evident during the interview with Skye, as he talked about choosing the acceptance of loved ones over engaging in self-expression through the use of make-up. Ren spoke about this concept extensively, explaining that self-care could not be categorized in a binary system of "good" or "bad," but fluctuated based on what need was being given priority at any given time. Ren provided an example involving binding, a technique used by some AFAB individuals to compress and conceal the appearance of breasts:

You could end up binding for way longer than you should so that you can actually, like, talk to people in conversation comfortably and not be slouched over the entire time. And so there's these sort of contradictions of care that come up I guess, where you're caring for one aspect of yourself and neglecting another.

Developing a Positive Sense of Self

For five of the participants, self-compassion helped to facilitate a more positive sense of self. Participants developed a newfound feeling of fondness towards themselves, their bodies, and their lives. The importance of this theme can be seen in the case of Cam, who stated:

There's huge issues with how society kind of erases people with mental illness or disabilities or even, like, LGBT people. Like, there's so many aspects where they [other

people] are not going to help you out, so being able to still find happiness and things within, that is extremely powerful, I guess. And that's like simple acts, but they're under very difficult circumstances. So being able to do those things, it's a huge act of love, right?

Participants described multiple examples of how self-compassion helped to improve their self-concept. Levi, for instance, stated that he came to like who he was, and Gwyn discussed being able to find love for their body. Gul found that they now enjoyed spending time with themselves: "I don't always have to rely on other people to enjoy things, which is a big thing, that it's okay to be alone sometimes, and I do like being alone sometimes, and that's totally fine." Kam discussed the change in their self-concept, stating "I've had this huge shift into like, just feeling very comfortable and almost euphoric about my sense of self." Kam added that they were now feeling excited to celebrate themselves; "I'm like, 'Oh, I'm cool as hell!'"

In addition to the broader positive sense of self that self-compassion helped to promote, more specific variations of this theme were also present. One such variation involved a rejection of harmful gender-related external messages, facilitating a shift towards a sense of worthiness. Rune, for instance, explained that their past feeling of self-hatred stemmed from medical and societal belief systems that conceptualize intersex individuals as "wrong." Similarly, Gul had internalized negative messages related to their multiple minority statuses, "being non-binary, being bisexual, not being White, and having mental illness." As a result of their intersecting identities, Gul had historically felt as though they were inferior to others.

Self-compassion helped participants to recognize that negative societal messages were rooted in prejudice and stigma, and, contrary to what the participants had been led to believe, they were inherently worthy. Self-compassion helped Rune accept themselves and recognize

“I’m okay to exist like this.” Additionally, Rune acknowledged that they were not to blame for the negative feelings that had been internalized:

I was going to say something stupid like, “I had [positive self-regard] in me all along,” but it wasn’t something that I struggled with because of like, my own self. It was a lot of externally imposed effects that were saying that I was wrong or bad, “You need to be fixed,” kind of thing. And so, being outside of that is like, “Oh yeah, you’re fine.”

Given how the internalization of harmful messages had served as a barrier to developing a positive sense of self-worth, it was important for participants to avoid environments in which negative messages were reinforced. As Rune stated:

A lot of the feelings that I had of self-hatred, as far as coming to terms with my body or gender identity, was very much externally imposed. So no longer seeing a doctor who took it upon himself to modify how I looked in accordance with some preconceived notion of what I should look like, that was super helpful. Not having this thing reinforcing that, “You’re wrong. You need to be fixed.” Even just not living at home anymore is good.

Concurrently, it was important for participants to have spaces that reinforced their sense of worthiness. Gul explained that being in a post-secondary environment helped them to feel like “I’m not less than anyone else,” as they realized “That if all these people can have all these different experiences, then my experience was valid as well, and I should be able to express that.” Rune also found it beneficial to be in an academic setting, noting that it was a space “where various gender identities are respected.”

Another expression of this theme involved recognizing one’s positive qualities. Prior to developing self-compassion, participants’ ability to identify strengths was limited and

overshadowed by attention to deficits and flaws. Self-compassion encouraged a more holistic and nuanced perspective of one's traits, which allowed Kam to consider themselves a "fully-fledged human being" who was able to acknowledge both strengths and weaknesses. Given that positive qualities were no longer minimized or offset by flaws, participants were able to begin accepting and acknowledging their strengths. As Kam stated, "There are these qualities that I really, really admire about myself and love about myself." Similarly, Gul was able to begin recognizing their value. For them, this was especially apparent within interpersonal relationships: "So realizing that I am valuable and I am offering something in a friendship." Kam also recognized that they had many more strengths than originally thought, and that some of their weaknesses could be reframed in a positive light:

I can recognize flaws in myself, but I can also recognize all of these strengths, like ten for every one bad thing I can find. And what happens is that when you look at yourself in this whole holistic context, these flaws don't feel like flaws necessarily, especially because in certain areas they're strengths. So something that might not serve me well in one situation, it aids me hugely in another, right?

Importantly, Kam recognized that their positive qualities were consistently present, and did not disappear after a failure:

Like, I bomb a midterm or something like that. Things like that happen, and it's like, that doesn't negate all these qualities that I have: I'm a people person, I care immensely about my family, I'm someone who can comfort my friends.

Living with Authenticity

Four of the participants reported that self-compassion helped them to carve out a life that reflected their values and beliefs, and where they felt free to be themselves. In one expression of

this theme, participants reflected on society's prescribed aspirational life trajectory. According to this script, all humans should strive for accomplishments such as scholastic success, marriage, home ownership and career advancement. Participants recognized that this narrative created unnecessary pressure, and resulted in distress if their own experiences deviated from what was expected. Reflecting on high school pressure, Sean stated:

You're expecting you'll have the boyfriend or girlfriend, you expect to have the grades or the status in school and all the stuff, but you know, lacking those components you think to yourself, "Oh you're a failure. There must be something wrong with you because you don't have all the stuff," right?

Kam expressed similar feelings, stating:

We have this idea that to be an adult, to be capable, to be independent and worthwhile you have to be "X" thing, right? Like, there's so many things: you're going to go to school, you're going to go to university, you're going to get a high paying job, get married, have two kids, nice house, retire. And just realizing that, "Okay, well why is that the norm?" Right? And to be frank, it's not. Like, we act like it is, but realistically there's not a standard human.

Rather than follow this societal standard of what a "normal" life looked like, self-compassion helped participants follow a path that felt right for themselves. Self-compassion offered permission to set a life trajectory based on participants' own standards, values, and goals. As Kam stated: "My human's a little bit different than another person and neither of those are more valid." Reflecting on the advice they would offer to others, Sean commented:

Don't think that there's a specific standard, right? What's good for you is good for you, what's good for other people might not be good for you, but you know, just go at your

own pace. It's not a race, it's not, you know, win a pot of gold at the end of the rainbow kind of thing.

Another variation of this theme involved reflecting inwards and focusing on oneself when making decisions. This allowed participants to act in congruence with their authentic selves, rather than be swayed by external voices. Kam discussed the importance of giving their feelings and values weight, and trusting that they were the most qualified to make decisions about their life:

Giving yourself weight, being an actor in your own life, having agency... I think self-compassion is being confident that you know yourself more than other people know you. It blows my mind that I didn't use to think that way, right? 'Cause it's like, why would someone who's not in my brain know me better? So being able to look at it and be like, "Okay, I myself know myself." And being like, "Okay, well act on that."

Kam explained that when they were able to make a decision after reflecting on what felt right for them, they felt content about the outcome, even if the choice resulted in negative consequences. Conversely, it felt more difficult to accept outcomes when they were not the one making the decision. Comparing this idea to school grades, Kam stated:

I'm capable in that I am able to make decisions on my own. So even if that's like, okay, you decided to skip class for a dumb reason and you don't do well on a project, you earn that mark. That's fine, I'm happy with that, right? Whereas if I was in a group project, someone else bombs it and I have to take theirs, that's the worst feeling in the world, right?

Similarly, focusing on themselves provided Gul with a protective buffer when faced with external judgement. Gul explained that there are many people, both within and outside the non-

binary community, who believe that non-binary individuals should present their gender in a certain way. Self-compassion helped Gul to turn inwards, and focus on living authentically and in congruence with their core sense of self:

There's a lot of weird expectations again from other people. So if you're non-binary, you have to look androgynous all the time, or if you were born female you have to dress masculine all the time, and if you do fluctuate between like the extremes of masculinity and femininity you're not non-binary enough. And, it's a weird place where you're getting policed by the non-binary community, and you're getting policed by society as a whole, and, I guess again going back to the who are you in your core, right? Outside of like, being non-binary, who are you in your core? How do you want to express that?

Gul stated that by being self-compassionate, "I was allowing myself to express myself how I wanted to rather than fearing judgement from other people."

Another expression of this theme involved creating and carving out safe spaces in which participants felt free to be their authentic selves. This theme component was discussed at length by Ren, who felt that these spaces allowed them to live a life that was congruent with who they were as a person. Ren explained that the process of moving out of their parents' home and creating a safe space with their partner allowed Ren to engage in further exploration of their gender expression: "Creating that space for myself where I can sort of experiment a bit, mess around with clothes and make-up and hair and stuff and not be as concerned as I was in previous environments."

Claiming space to live authentically also involved taking risks, as coming out or expressing one's gender was not guaranteed to be met with acceptance. Ren commented on the difficulty of this form of self-compassion, explaining the amount of effort and courage required

when maintaining the boundaries of their safe spaces: “I feel like a lot of self-compassion work that I do doesn’t feel smooth. It feels sort of like it’s a bit of a fight to achieve it.” Ren reflected on the courage required for them to come out at work:

I suppose in relation to my gender identity, that would be the process of coming out as an act of self-compassion, specifically in my work place. All of my coworkers are cis men and I was a little, like, unsure about how it would go. But I knew that I had to do that, otherwise I wasn’t going to be able to continue working there. So I did it and it paid off. So, I don’t know, I guess, taking risks as a form of self-compassion is something that’s sort of in line with my experiences.

Improved Coping Through Perspective Taking

Four participants spoke at length about how self-compassion helped them to approach difficult situations with more perspective. In one expression of this theme, self-compassion encouraged participants to take a step back from the situation, rather than over-identifying with strong emotions. Participants were still able to validate their emotional experience, but at the same time they recognized that emotions represented a temporary experience and were not a reflection of participants’ identity. As Kam explained, “It’s not about, ‘Oh, don’t have that feeling,’ it’s about, ‘Don’t let that feeling define or control you.’” Gul expressed a similar thought, stating that self-compassion helped when it came to “not taking those extremes as something that are going to be permanent and define who I am.” Rather than “staying in my feelings and focusing a lot on that,” Gul emphasized the importance of taking time to reflect on strong emotions:

So one thing that I do now is I write out how I’m feeling, and then I’ll leave it alone. I’ll maybe go back a few hours later, or maybe a day later, read it over, and I might edit some

things just to like, clarify for myself and then leave it again. Then I'll come back to it in, maybe like a few more days later and read it and then I think back, "Huh, am I still feeling this way? Is this rational? Does this make sense?" And usually I will get an urge to edit it again and like, say "No, this isn't how I'm feeling anymore."

Being able to prevent oneself from over-identifying with emotions was especially important in preventing negative self-appraisals. Kam explained that considering a more objective perspective helped them to reduce feelings of shame:

I think it's so easy to get caught up in the negative and then just be like, "I did one bad thing and now every part of me is rotten." And it's like, anyone looking at you from the outside is going to be like, "That's not true!" Right?

As participants were able to gain some distance from strong emotions, rumination and catastrophizing were also reduced. As a result, participants had greater capacity to choose how they wanted to respond to a given situation, rather than react in a way that reflected their distressed state. For instance, Gul described themselves as an impulsive person, and explained that by slowing down and creating space from their experiences, they were able to successfully avoid catastrophizing and taking actions they may have later regretted. During their interview, Gul discussed a past experience where they were struggling with intense feelings. Believing that time alone might improve their mental health, Gul decided to temporarily cut themselves off from their family. Reflecting on their experience, Gul recognized that by keeping a more objective perspective, they could then cope with difficult situations in a way that did not compromise their values:

Sometimes I might think I'm helping myself, but I have to look at the bigger picture and realize there's other people in my life that can be affected by my actions. So as much as I

like to say that I'm compassionate and I care about other people, I can't let my impulsivity take that over. So I have to kind of be more rational in certain situations and look at the whole picture rather than, I guess, staying in my feelings and focusing a lot on that.

Perspective taking also helped participants to take tangible steps when it came to solving problems. Rather than over-identifying with their emotions, resulting in feeling overwhelmed and helpless, participants were able to identify what needed to be done, allowing them to assume a sense of agency in the situation. For Gul, this meant reflecting on problem-solving strategies that had proven effective in the past, and using them to inform current approaches for coping. Gul also asked themselves "What can I do to fix the situation, rather than making it really external?" Discussing an example involving their friends, Gul stated:

Instead of letting those thoughts spiral and saying "They hate me," "They don't love me," I go back and realize, "Wait, did I voice that to them? Did I tell them that I'm not feeling the best right now? That I might need help as well? Oh no I didn't, so maybe I should voice that to them before expecting them to help me back."

Rune also experienced improved coping when they were able to take a step back from their emotional reaction to a situation, and focus on the problem itself:

It was like, "Really take stock of this. Is it helping your situations to be miserable? No, it's making you a lot less productive... You should probably stop being so hard on yourself if only for the reason that it's just holding you back, because it's not helping, it's not making you more productive."

By focusing on coping with the difficult situation, Rune found that their emotional state still benefitted: "So now it's kind of just like, 'I'm going to put my feelings over there, and just try

and deal with the problem. And then later I bet I'm going to feel less miserable because I dealt with this problem.”

Another aspect of this theme involved remaining open to new growth and insights in the midst of challenge and failure. Self-compassion facilitated this openness by normalizing mistakes. As a result, failures and challenges became less distressing and shame-inducing, allowing the hardship to be viewed as an opportunity for growth and learning. Kam illustrated this point by explaining that when they experienced less shame, they were able to lean into the idea of “falling forward,” and learn from their failures:

It enables you to better approach problems in the future because all that self-hate kind of stuff, it just distracts you, right? Like, it kind of covers up anything that you could take away from it. Because your fear is, “I never want to do that again, I never want to do that again...Let's just like push it away, lets avoid it.” Instead of being like, “Okay, what did I do, where did I mess up, how can I improve?”

In this way, Kam considered themselves in a constant state of self-growth:

It's being able to say I am the best version of myself at any given moment. So tomorrow I will be better than I am today. But right now, this is me, and I'm the best and I can just keep working, right?

In addition to identifying growth opportunities, participants also remained open to positive aspects of difficult situations. This facilitated an orientation towards gratitude, allowing participants to maintain perspective during challenging times. Early on during COVID-19, Sean was able to focus on the positives of the situation, and spend time engaging in pleasurable activities:

It helped me to do a lot more hobbies and stuff, especially, you know, when you don't know how work is going to go and you have free time because of that. You have more time to do stuff like writing and reading and gaming and all this other stuff. So I thought, "Hey, might as well enjoy the time while you can, right?" So that's what I did.

This form of perspective taking also helped Sean navigate rejection related to their gender identity, as they were able to focus on relationships that were supportive and accepting:

When I first started coming out, you know, with my identity and wanting to affirm it, there were people who, like I said, for whatever reason weren't taking too kind to it. But then I remember my parents and my siblings and extended family for the most part, they all accepted it, they were all happy, happy to know that I was doing good. And you know what? That's what I remembered. I remembered that, I will always have these people, so I shouldn't feel too bad about losing those people. Because I will always have people who really matter.

Self-Compassion as an Interpersonal Process

Four of the participants drew attention to the relationship between self-compassion and interpersonal dynamics. Rather than framing the development and influence of self-compassion as purely intrapersonal, participants acknowledged that interpersonal elements were woven into their self-compassion experience. One expression of this theme related to the external facilitation of self-compassion. Multiple participants spoke about the key role played by others in building their capacity for self-compassion. There were multiple sources of support mentioned, such as romantic partners, friends, family members, and therapists. Over time, participants were able to use the examples they had experienced to provide themselves with compassion. Kam spoke to

this point, explaining that “having those people to support you and to pick you up and be kind to you when you need” allowed them to “learn to do it yourself.” Kam added:

I do think that if you are practicing self-compassion, you’re teaching that to every person around you, right? And that you lead by example. And so I know that I learned how to love myself based on other people around me looking at themselves.

This modelling of self-compassion was not limited to individual supports, as communities could also serve as a source of inspiration. Specifically, the resiliency demonstrated by the 2SLGBTQ+ community provided motivation for individual resiliency in the form of self-compassion. As Kam stated:

I’ve made a lot of queer friends, like a lot. And, like, that’s such a community that’s built on resiliency. It’s built around strength and making it through it and I know that there’s that whole narrative that really focuses on challenges, but those challenges are what kind of has built this sense of like, “Okay you’re in it, like let’s do it.”

In another expression of this theme, participants developed self-compassion by using the support from others as a form of scaffolding. External supports provided understanding, encouragement, and reminders to be gentle. These messages acted as direct and indirect reminders for participants to practice self-compassion. For instance, Skye used the support of a therapist to provide the scaffolding for his own self-compassion: “Talking to a counsellor helps too; slowly you can get yourself, you know, so you’re self-compassionate.” Similarly, Gwyn explained that the reminders to be self-compassionate that they received from loved ones reminded Gwyn to be less self-critical and look at situations more objectively: “As a perfectionist-type person, my head will say one thing but when I actually talk to people I realize that’s not the case and that I shouldn’t be too hard on myself.” Gwyn explained that the

compassionate messages from loved ones encouraged them to consider all that they had accomplished, helping Gwyn to feel less “alone” and surer of themselves: “I have a lot less self-doubt about myself and a lot more confidence in myself, and I guess like, being recognized for something by somebody else makes a lot easier for me to recognize that within myself.”

In a specific variation of this scaffolding process, identification with the 2SLGBTQ+ community provided Kam with a framework for how they should treat themselves. Kam recognized the amount of compassion and love they had for their gender- and sexually-diverse friends and community, and realized that as a member of this group the affection they felt could be reflected inwards. Kam explained: “Having all these people who share these same experiences and *you love them so much* and when you see yourself reflected back it’s like, ‘Oh, why wouldn’t I love myself too if I love you so goddamn much,’ right?”

For both Kam and Sean, self-compassion as an interpersonal process also involved increased compassion towards others. Through the experience of self-compassion, participants felt better about themselves and less judgemental of their flaws and mistakes. As a result, they had a greater capacity to extend this kindness and understanding towards others. As Kam stated, “The way I treat myself, I’ve started treating other people that way.” Self-compassion encouraged Sean to consider that all humans make mistakes and are constantly learning and growing. This allowed Sean to remain open to those who did not understand Sean’s non-binary gender identity:

I started coming out to extended relatives. Like I mentioned earlier, some were not hostile, but they kind of were, “Meh.” They would say, “Okay, you’re this,” but they would use the wrong pronouns and stuff like that. And I mentioned before that I see the difference between hostile, like, “Oh, you’re he, you’re she, you’re this, that, the other”

and then people, who, like my relatives who are like, you know, they didn't know better, you know? It's new, you're like, 60, 70 years old, they didn't grow up with this kind of stuff and it's a learning experience for them as it is for you.

Reminding themselves that everyone goes through learning experiences allowed Sean to respond to others with understanding, rather than anger:

And I tell myself that, I tell them that, I say, "Hey, no hard feelings, I'm not going to hate you because you used the wrong pronouns," right? If it comes from a position of not knowing, sincerely, then yeah, I'm not going to hate you for that, I'm just going to say, "Well, I'll give you resources so you can learn about it." And then they come back to me and they say, "Thank you for the resources, and I know now how to talk to you, how to word it."

Participants perceived increased compassion toward others to be related to an overall improvement in mood. Kam explained that by feeling better about themselves, they were better able to attend and attune to others:

I genuinely do think that being able to be like, "Okay I love myself," I started loving other people more. And I don't know how to like, explain that one necessarily... I guess when you're happy with yourself it just makes just makes your baseline mood better and so when you approach someone else and you're already a happier person it's like, "Okay now I have the energy and the focus and the time to actually appreciate you," and then it just lifts.

Chapter 5: Discussion

The purpose of the current study was to explore the experiences of self-compassion in non-binary young adults. As this population faces a distinct set of challenges, this line of inquiry is particularly important given self-compassion's connection to overall well-being (Bluth et al., 2017; Ferrari et al., 2017; Zessin et al., 2015), and the potential for this capacity to act as a protective buffer against discrimination and internalized transphobia (Pipkin et al., 2022; Vigna et al., 2018). Additionally, there is a lack of research focusing exclusively on the experiences of non-binary individuals, as they are often grouped together with other transgender populations (Matsuno & Budge, 2017). As the majority of transgender research to date has centered on hardship and challenges, there is also a call for studies that bring awareness to the resiliency and positive experiences of transgender individuals (e.g., Dixon et al., 2022).

This chapter begins with a discussion of each of the main cross-case themes: (a) intentional self-care; (b) developing a positive sense of self; (c) living with authenticity; (d) improved coping through perspective taking, and (e) self-compassion as an interpersonal process. In the remaining sections I discuss my reflections, clinical recommendations, limitations and future directions.

Intentional Self-Care

For the majority of the participants, a salient expression of self-compassion was engaging in intentional self-care behaviours. Examples included participating in hobbies, passions, and other enjoyable activities, as well as caring for oneself during difficult times. This is consistent with a growing body of research demonstrating that self-compassion helps to facilitate healthy behaviours. Across a variety of community and clinical settings, self-compassion is associated with health-promoting behaviours such as exercising, relaxing, and getting enough sleep, as well

as increased medical adherence and health management (Dunne et al., 2018; Ferrari et al., 2017; Gedik, 2019; Holden et al., 2021; Sirois & Hirsch, 2019). Sirois and Hirsch (2019) found that the positive relationship between self-compassion and health management is in part due to a reduction of stress levels. This is theoretically congruent with Gilbert's (2009a) conceptualization, as self-compassion is hypothesized to reduce activation of the fight or flight response. Once individuals are feeling calm, they are better positioned to act in a caring way towards themselves and ensure their needs are met (Gilbert, 2009b). This theory could help explain the emergence of self-care as a theme in the current data.

Participants noted that engaging in self-care is a personal endeavor, as each person must assess for themselves whether an action is or is not considered to be restorative and beneficial. Thus, intentionality is required to carefully consider how to meet one's needs. This aspect of the current theme was unexpected, and runs counter to the general societal narrative that tends to characterize self-care behaviours as universal. However, this study is congruent with recent findings by Dunkley-Smith et al. (2021), who explored self-compassion experiences of young adults with a mentally unwell parent. Dunkley-Smith et al.'s participants reported that self-compassion is an individual process, and requires experimentation to determine what feels soothing for each person (2021).

Multiple participants drew attention to the fact that at times, their needs were in conflict with each other. As a result, it was necessary to weight and prioritize which needs to meet and which to sacrifice. This meant that self-care behaviours were not only personal, but were also situated within a particular context. To my knowledge, the intentional prioritization of self-care has not been explored within the existing self-compassion literature. However, a similar phenomenon has been documented within the field of health care, as patients with multiple

chronic illnesses may at times be faced with conflicting self-management requirements (Bratzke et al., 2015). Patients must assess resources and barriers to self-management, and engage in an internal decision-making process that considers factors such as values and the psychological impact of treatment (Bratzke et al., 2015). The idea that self-compassion may help to play a role in the decision-making process when prioritizing conflicting needs is an important finding and expands on the existing literature in this area. For non-binary young adults, self-compassion may help to increase a sense of agency, as individuals are able to make decisions about how to best meet their own needs.

Developing a Positive Sense of Self

Participants in the current study reported that self-compassion helped to facilitate a more positive sense of self. As a result, participants felt as though they had a new appreciation for themselves, their bodies, and their lives. The present findings are consistent with the existing self-compassion literature. Interventions designed to increase self-compassion have been shown to improve happiness (Shapira & Mongrain, 2010), body appreciation (Albertson et al., 2015) and life satisfaction (Neff & Germer, 2013). By focusing on young adults, the current study also expands on results obtained in Bluth et al.'s (2022) self-compassion training with transgender adolescents, where participants commented on their improved self-worth and connection to their bodies.

As a result of their evolving sense of self, participants were able to reject negative internalized messages associated with transphobia and minority stress. Participants were able to see themselves as inherently worthy, and not in need of being “fixed.” Similar findings have also been reported by Pipkin et al.'s (2022) transgender and non-binary participants, who stated that self-compassion helped to protect them from internalized transphobia. The current study extends

the existing literature, as non-binary participants were not combined with other transgender groups. Given the various systems in which non-binary young adults may encounter discrimination, it is promising that self-compassion may help to provide some level of protection from mental health outcomes associated with minority stress (Hunter et al., 2021; Watson et al., 2019).

The existing literature also supports the hypothesis that self-compassion can help protect marginalized populations from the impact of discrimination and stigma. Schick et al. (2021) explored the influence of self-compassion on alcohol use among First Nation adolescents in Eastern Canada. For individuals low in self-compassion, higher levels of experienced discrimination were associated with higher levels of problematic alcohol use. Participants with high levels of self-compassion exhibited the same level of alcohol use regardless of discrimination exposure, suggesting a protective effect (Schick et al., 2021). The authors hypothesized that self-compassion may have helped these adolescents to develop adaptive emotion regulation and coping skills to manage the effects of discrimination. Wong et al. (2019) suggests that self-compassion helps individuals with stigmatized identities by promoting help seeking, facilitating emotional acceptance and processing, and reducing rumination of stigma-related cognitions. These findings from the current and past studies are congruent with Neff's (2003a) conceptualization of self-compassion. Rather than seeing oneself as flawed or damaged, self-compassion encourages individuals to see themselves as situated within their personal historical context (Neff & Germer, 2017). More specifically, self-compassionate individuals are able to recognize how their insecurities and shortcomings may be influenced by past experiences and external social and cultural forces. This helps individuals to externalize and reject self-critical narratives (Neff & Germer, 2017).

Participants within the current study also reported that self-compassion helped them to recognize their strengths. Rather than positive qualities being dismissed or overshadowed by the presence of perceived flaws, participants recognized that as a well-rounded person, they possessed both strengths and weaknesses. This fits with research by Leary et al. (2007), in which university students were videotaped performing an awkward task. Each video was rated by the participant themselves as well as two other participants; one with high levels of self-compassion and one whose self-compassion was low. Despite the uncomfortable nature of the task, participants with high levels of self-compassion used more positive adjectives in rating their own performance. Importantly, their rating was consistent with how others perceived their work, demonstrating that self-compassion was not simply causing participants to ignore flaws and overestimate their abilities. Rather, these participants were able to see themselves in an accurate and balanced manner (Leary, 2007). The current study suggests that self-compassion may help non-binary young adults recognize their positive qualities, rather than ruminating on perceived weaknesses. This is an important finding, given that minority stress often keeps individuals focused on negative internalized beliefs (Meyer, 2003).

Living with Authenticity

Living with authenticity was a theme that was present in the interviews of four participants. Across a variety of scenarios, participants described a rejection of societal expectations and pressures. Self-compassion acted as a buffer from these external forces, and gave participants permission to act in accordance with their own values, beliefs, and sense of who they were as people.

Some participants discussed letting go of society's vision of a successful life, which follows prescribed milestones such as finding a job, buying a home, and starting a family.

Participants stated that failing to live up to the expectations of this cultural script leads to negative self-evaluations. This aligns with findings from Dunkley-Smith et al.'s (2021) research, in which several participants reported that they felt pressure to live a life that was not congruent with what they wanted. Participants believed that this societal rigidity presented a barrier to accessing self-compassion. Importantly, the findings from the current study build on the existing research by suggesting that when self-compassion is embraced, it provides individuals with the permission to forge their own life path.

For most participants, a salient aspect of self-compassion was the permission they felt to act in congruence with their innermost values and needs when making decisions. Rather than deferring to external figures or pressures, participants were able to display personal autonomy, basing their choices on what felt true and authentic to them. This finding is similar to Cosgrove's (2021) photovoice study, in which non-binary young adults discussed the importance of being able to focus on how they felt when deciding how to express their gender. Furthermore, the present findings are consistent with emerging research exploring the association between self-compassion and self-determination (Gonzalez-Mendez & Dias, 2021; Guertin et al., 2020). It has been hypothesized that self-compassion may help to ensure one's needs are met, resulting in greater motivation to pursue intrinsic goals (Guertin et al., 2020). Results from the current study suggest that self-compassion may help to facilitate this process, providing a buffer from external pressures and allowing non-binary young adults to focus on being their authentic selves. This was an unexpected but significant finding, particularly in light of the invalidation and erasure often experienced by non-binary young adults (Cosgrove, 2021; Johnson et al., 2020).

By promoting decision-making based on one's needs and values, self-compassion also connects individuals to their innermost selves (Guertin et al., 2020). This was observed by

Dunkley-Smith et al., (2021) who found that self-compassion helped participants listen to and honour their needs, and that doing so helped them to feel more connected with who they were as people. Within the current study, Gul explained that by being able to act in an authentic way, they were able to reaffirm their core self. Though only discussed in depth by one participant, this ability for self-connection to help promote inner attunement is significant and has important implications for work with non-binary young adults, particularly in light of the gender-related self-doubt they may experience (Johnson et al., 2020).

Lastly, several participants drew attention to the importance of creating safe spaces in which they were able to live authentically. This involved actions such as moving out, no longer seeing harmful health care practitioners, and coming out at work. These findings are similar to Vijlbrief et al.'s (2020) research exploring the experiences of non-binary young adults aged 20-30, where participants described the importance of safe spaces that allowed them to feel comfortable being themselves. The importance of affirming environments was also highlighted by Doyle et al., (2021) who found that greater well-being in transgender and non-binary participants was associated with higher levels of external gender identity affirmation. Examples of this affirmation included validation of one's gender identity and correct pronoun use. Follow-up analysis revealed that this relationship was mediated by identity clarity. This suggests that receiving external validation helps individuals to feel more certain about their gender identity, resulting in greater well-being (Doyle et al., 2021).

Improved Coping Through Perspective Taking

Participants reported that self-compassion allowed them to create distance from distressing feelings, which helped to increase perspective when faced with difficult situations. Rather than becoming overwhelmed or over-identifying with strong emotions, participants were

able to acknowledge and accept their feelings. As a result, participants found that they experienced less rumination, catastrophizing, and shame. These findings align with the existing self-compassion literature, which has identified multiple pathways that enable self-compassion to promote emotion regulation. For instance, Diedrich et al. (2017) found that self-compassion reduced depressive symptoms by improving distress tolerance. Self-compassion has also been found to reduce rumination, contributing to lower levels of social anxiety and depression (Bakker et al., 2019; Blackie & Kocovski, 2019). Given that self-compassion helps to regulate activation of the body's fight or flight response (Gilbert 2009a), it is understandable that participants perceived difficult emotions to be more manageable. As many non-binary young adults may experience self-criticism and internalized transphobia, the capacity to create space from feelings such as shame is likely to be of great benefit. The current study provides an important expansion of the existing literature by focusing on this understudied population.

Participants reported that by seeing a difficult situation with greater perspective, they were also better equipped to engage in problem solving. Participants noted that in the past, they would engage in negative self-appraisals, blaming and shaming themselves for making mistakes. Self-compassion allowed them to focus on addressing challenges and learning from failures. This is congruent with previous research demonstrating that self-compassion is associated with improvement motivation. Breines and Chan (2012) found that when university students were asked to reflect on a personal weakness from a self-compassionate perspective, participants were more likely to believe this flaw was changeable. In a second study, the researchers administered a difficult task to participants, who were given time to study before attempting the task again. Participants who were given a compassionate prompt, which normalized struggling with the test, studied for a longer period of time before making their second attempt. This also led to better

performance outcomes (Breines & Chan, 2012). Given that non-binary young adults may be prone to self-criticism and negative self-attributions, it may be helpful for them to engage in perspective taking when faced with challenges. Thus, self-compassion could help this population to develop a stronger sense of agency and self-efficacy in the face of difficult situations.

Additionally, perspective taking facilitated an orientation towards gratitude during moments of struggle. One participant discussed this experience at length, explaining that they practiced gratitude when experiencing challenges or interpersonal rejection. In this context, gratitude was not meant to minimize the participant's struggle, but to maintain a balanced perspective when reflecting on their current experience. Rather than ruminate on the hardship, the participant reminded themselves of all they had to be grateful for, such as their home, food, and a caring support network. This finding is in line with existing self-compassion research demonstrating that self-compassion helps to facilitate cognitive reappraisals, allowing individuals to reconceptualize how they view difficult situations (Bates et al., 2021; Hasselberg & Rönnlund, 2020). Previous research has also found that self-compassion is positively correlated with gratitude (Breen et al., 2010; Lurdes & Latipun, 2019). In a study of psychological wellness during the pandemic, Nguyen and Le (2021) found that gratitude partially mediated the relationship between self-compassion and well-being. Additionally, practicing gratitude was one of the strategies adopted by Hawkey et al.'s (2021) participants in a study exploring healing from sexual violence among BIPOC transgender women. The present findings expand the existing literature on gratitude and transgender populations, and suggest that self-compassion may be an effective pathway for facilitating feelings of gratitude. As non-binary young adults may experience elevated levels of hardship, the capacity to recognize positive aspects of one's life may be a beneficial coping strategy.

Self-compassion as an Interpersonal Process

Despite being an intrapersonal capacity, when speaking about self-compassion multiple participants described interpersonal elements of their experience. Some support figures modelled their own self-compassionate behaviours, providing participants with a framework of what self-compassion could look like. Others reminded and encouraged participants to be kind and understanding towards themselves, helping to reinforce self-compassion until participants were able to initiate it themselves. These findings are consistent with the existing literature on the interpersonal facilitation of self-compassion. For instance, in Dunkley-Smith et al.'s (2021) study, participants reported that they felt as though they received permission from helping professionals and loved ones to engage in self-compassion. Similarly, Seekis et al.'s (2022) participants discussed the importance of surrounding themselves with self-compassionate friends, as it allowed them to show themselves kindness regarding body image. Though previous research has highlighted the importance of supportive figures for transgender individuals (Shah et al., 2022; Weinhardt et al., 2019), the current study expands the literature to the context of non-binary young adults.

Another facet of the interpersonal process theme related to the influence of the broader 2SLGBTQ+ community. One participant in particular expressed feeling connected to the resiliency displayed by this community. Seeing themselves as part of this group helped the participant to internalize this sense of strength, granting them greater access to self-compassion. This finding aligns with other research that emphasizes the importance of community belonging for well-being in transgender populations. For example, in their Transgender Resilience Intervention Model, Matsuno and Israel (2018) conceptualized connection to community as an important interpersonal resiliency factor. Similarly, Doyle et al. (2021) found that having a

positive transgender identity, which included a sense of solidarity with the transgender community, buffered the impact of discrimination on well-being in transgender adults. Given that community belonging was only mentioned by one participant in the current study, it is difficult to draw any definitive conclusions regarding how the current finding contributes to the existing literature. However, it is possible that the potential benefits of group connection are mediated in part by an increase in self-compassion, presenting an important avenue for future study.

Lastly, participants found that through their own improved self-compassion abilities, they were able to offer greater compassion to others. This fits with results from self-compassion interventions, which have been shown to increase feelings of other-focused compassion (e.g., Neff & Germer, 2013). This finding is also congruent with Gilbert's conceptualization of self-compassion (2009b). Gilbert explains that compassion flows in multiple directions: compassion can be received from or directed towards others, in addition to be directed towards oneself. Within the current study, one result of this heightened sense of compassion for others was the ability to show understanding when confronted with gender-related micro-aggressions. One participant in particular talked about recognizing that others may still be in the process of learning what being non-binary means, preventing the participant from assuming negative intent. This is congruent with existing research demonstrating that self-compassion is associated with greater forgiveness and reduced rumination after an interpersonal transgression (Allen et al., 2015; Miyagawa & Taniguchi, 2022). Similarly, Saeeda et al. (2022) found that the relationship between self-compassion and compassion towards others was mediated by adaptive emotion regulation strategies, such as positive reframing. The current study's findings may have important implications for the relationships of non-binary individuals. As hypervigilance is likely

to be displayed by non-binary young adults due to minority stress (Meyer, 2003), utilizing self-compassionate emotion regulation strategies may help this population better navigate difficult conversations.

Researcher Reflections

In order to grow as a feminist clinician and researcher, it was important to me that I took time at end of my project to reflect on its strengths, new learnings that emerged during the research process, and growth opportunities. After reviewing the memos and researcher notes I wrote during the course of this project, the following reflections stand out as particularly meaningful.

Firstly, I believe that one particular strength of this study was that participants had multiple avenues through which they could authentically express their voice. As recommended by Matsuno and Budge (2017), the gender section on the demographics form was open-ended and provided space for alternative and secondary gender identities, rather than having their gender identity reduced to a single label. This was an option that multiple participants utilized, including secondary gender identities such as androgynous, agender and Two-Spirit. The option to use orthonyms, in accordance with the procedures suggested by Lahman et al. (2015) and Shelton and Brooks (2021), was also preferred by several participants. Furthermore, multiple rounds of member checking and soliciting feedback meant that participants were able to play an active role in the analysis process (DeVault & Gross, 2012). During our third interview, Ren stated that they appreciated the opportunity to have multiple interviews, as it allowed them to make sure that the analysis was consistent with their experience.

This research project was my first experience of interacting with community stakeholders in my capacity as a researcher. Naively, this was not something that I had originally foreseen, as

I conceptualized stakeholder involvement as a process that only occurred in community-based and participatory action research designs. However, as I approached organizations about posting my study information on their website or social media accounts, I was routinely asked to first provide additional information, meet with someone from the leadership team, or, in one case, attend a board meeting.

Despite my awareness that the fields of psychology and counselling have contributed to harm against transgender and non-binary populations, I carried a privileged assumption that *my* research would not be considered a potential threat. Despite knowing that transgender participants are often treated as data mines, I expected that *my* positive intentions would be taken at face value. I appreciate the dedication and vigilance that these organizations showed. These interactions helped me to reflect on my motivation for conducting this work, and subsequently convey this intention to my participants.

Lastly, during this study I was also able to address and correct a racial microaggression, and reflect on the ways that White, Eurocentric practices continue to influence research. As I was examining literature related to orthonym use, I read Lahman et al.'s (2015) article in which they argue that important pieces of a participant's identity are lost when the researcher selects a pseudonym without consultation. Often, pseudonyms are "White" names, contributing to the cultural erasure of participants within the research process (Lahman et al., 2015). I realized that I was guilty of this same act. I had assigned Gul a traditionally White name, despite them speaking extensively of their multiple minority statuses and how this was related to their self-compassion practice. Gul was aware of their original pseudonym and had not expressed any concerns, but I recognized that bringing this to my attention may not have felt like an option, especially given the inherent power difference that exists between researchers and participants (DeVault & Gross,

2012). I reached out to Gul, acknowledging the error and offering them an opportunity to select a new pseudonym. The participant appreciated the gesture, and selected their current pseudonym. This served as a reminder that as researchers we need to deconstruct and examine many practices that are taken for granted, as they can often reflect a bias of Whiteness as the default state (Taylor, 2020).

Clinical Recommendations

Based on the findings discussed in this chapter, the following recommendations are offered to helping professionals working with non-binary young adults.

Participants in the current study discussed engaging in self-compassion through intentionally attending to well-being. Accordingly, clinicians may find it beneficial to incorporate therapeutic modalities that encourage clients to be attentive to their self-care, such as compassion-focused therapy (CFT). An integral component of CFT is compassionate mind training, which helps individuals to develop a compassionate mindset towards themselves and others through psychoeducation and practical exercises (Irons & Heriot-Maitland, 2021). For example, clinicians can help clients to design self-care behavioural experiments (Kolts et al., 2018), testing what it feels like to increase exercise, regulate sleep, or drink more water. Based on the findings of this study, clinicians would also benefit from validating the individual nature of self-care activities, and encouraging flexibility in self-care strategies.

Being able to reject societal scripts and live authentically was an expression of self-compassion emphasized by multiple participants. Given that non-binary young adults are simultaneously engaging in identity development (Arnett, 2015) while experiencing pervasive societal discrimination (Jones, 2018), work related to values and belief systems may be beneficial. Accordingly, an approach such as Acceptance and Commitment Therapy (ACT) may

help to supplement and enhance a client's self-compassion development. One of the core pillars of ACT involves an identification of values (Hayes, 2005). Clinicians may wish to review life domains, such as career, personal growth and family, and provide clients with an opportunity to discuss and decide what is most important to them (Hayes, 2005). Such an exercise may be meaningful to non-binary young adults, as it offers permission to identify values that may or may not coincide with external societal norms. Moreover, another tenant of ACT is committed action, which explores how clients can live in accordance with their personal set of values (Hayes, 2005). To this end, clinicians can help clients to set value-congruent goals and troubleshoot potential barriers (Hayes, 2005), with the goal of leading a life that feels personally rewarding and affirming.

Participants in the current study found that coping improved by observing emotional experiences, rather than identifying with them. Given this finding, clinicians may find it beneficial to explore the influence of mindfulness in their work with non-binary young adults. Within Neff's (2003a) conceptualization of self-compassion, mindfulness refers to an accurate identification of one's suffering, without exaggerating or minimizing the experience. More broadly, mindfulness refers to a non-judgemental awareness one one's present moment experience (Kabat-Zinn, 2013). Importantly, built into mindfulness approaches, such as Mindfulness-Based Stress Reduction (Kabat-Zinn, 2013), is the recognition that pain may be chronic, mirroring the ongoing marginalization faced by non-binary individuals. Neff and Germer's (2013) MSC training program includes exercises for developing mindfulness. Borrowing from this approach, clinicians may want to explore mindful breathing exercises that emphasize a warm and compassionate attitude (Germer & Neff, 2019). For example, the "soften-soothe-allow" exercise helps clients to first mindfully engage with a distressing sensation or

feeling, then gently reduce resistance toward the feeling through self-compassion (Germer & Neff, 2019, p. 292). It is important to remember that not all non-binary clients may be comfortable with body-focused work (Bluth et al., 2021). Accordingly, Germer and Neff (2019) suggest that individuals who struggle with body-based mindfulness exercises may prefer to repeat phrases. Clinicians could help clients identify words or statements that invoke a feeling of presence and grounding, such as “I am here.”

Multiple participants discussed the importance of external self-compassion reminders and modelling. This has several implications for clinical work. Clinicians can help to promote self-compassionate behaviours, feelings, and cognitions, and model the same behaviours themselves in session. It may also be beneficial to discuss the self-compassionate strengths of friends, family members and loved ones, as there may be a support figure that can be used as a self-compassion guide or role model. Though not mentioned by any of the participants in the current study, Miller and Kelly’s research (2020) suggests that exposure to self-compassion can be “contagious,” encouraging others to act similarly. Thus, in the absence of compassionate support figures, it may be helpful to explore other self-compassionate individuals that non-binary young adults can emulate. One participant in the current study spoke about being inspired to act in a self-compassionate manner by the strength of the broader 2SLGBTQ+ community. Similarly, there may be community or pop culture figures that clients can use as self-compassion role models. Regardless of who is chosen as a compassionate support figure, clinicians can encourage clients to imagine how their guide would respond to a particular stressor, and the manner of support they would offer to the client.

Gratitude was identified in the current study as an expression of self-compassion that improved coping. Based on these findings, clinicians may want to help orient their clients toward

positive aspects of their lives, such as important relationships, family or faith. Interventions could include gratitude journaling or writing a letter of appreciation to a loved one (Lyubomirsky, 2008). However, although perspective taking was reported in the current study to be beneficial for providing space from distressing emotions, caution must be used when facilitating an orientation toward gratitude. Feeling anger, frustration, and pain is an understandable and reasonable response to encountering multiple levels of systemic discrimination and prejudice. Accordingly, though it is important to prevent unhealthy rumination and distress, clinicians must also honour natural responses to social injustice, and not rush to attempt to provide relief through gratitude.

Non-binary young adults will also carry a number of different cultural and social identities, which may or may not be marginalized. Within this study, participants commented on additional facets of their identity, including ethnicity, disability, sexual orientation, and socioeconomic status. As clinicians, we must be attentive to how these multiple identities may intersect (Kassan & Sinacore, 2016). Rather than focusing solely on gender, helping professionals should explore and discuss other salient identities that may be important to their non-binary young adult clients.

Lastly, it is crucial to remember that no population is a monolith. Accordingly, interventions must be tailored individually to meet the needs of each client. As participants reported, non-binary young adults are engaged in an intentional navigation of competing and conflicting needs. Therefore, it is important to avoid prescriptive self-compassion suggestions. Instead, non-binary individuals should be part of the dialogue, as they will be in the best position to identify and potential costs or drawbacks to the self-compassion behaviours. For example, as reported by some of Bluth et al.'s (2021) participants, engaging in body-focused work without

consultation increased feelings of gender dysphoria. As clinicians, we must position non-binary young adults as the experts of their experience, and allow them to choose their path to self-compassion.

Limitations and Implications for Future Research

There are several limitations to consider when interpreting the findings of this research. This study utilized purposeful sampling, as it was necessary to recruit individuals who had experienced self-compassion. Although interview questions were included to capture any potential negative experiences of self-compassion, it is possible that those who did not find self-compassion to be beneficial did not express interest in the study.

Additionally, the nature of IPA research is such that while it elucidates rich and deep understanding of a phenomenon, the knowledge is situated within a particular context (Smith et al., 2009). Similarly, in keeping with ecological systems theory, it is important to remember that each individual is nested within their own set of interacting developmental layers (Bronfenbrenner, 1979). Accordingly, the findings of this study are not meant to be generalized. However, attending to subtleties, engaging in rich descriptions, and providing detailed analysis aids in transferability, as readers determine the extent to which the findings apply to their own context (Smith et al., 2009).

Given the small sample sizes used within IPA research, it is not possible to explore the experiences of individuals across all intersecting identities. Within the current study, for example, there was only limited discussion around experiences related to race, sexual orientation and mental health. Some identities, such as religion, class and immigration status, were not disclosed or discussed. The focus during interviews also largely remained on gender identity, rather than the unique ways in which other identity components intersected with gender.

Conversely, although the focus of the current research centred around the experiences of non-binary individuals, the findings are likely informed by other facets of the participants' identities. Given the complex and nuanced ways in which identities tie together to inform experiences, it is not possible to isolate experiences solely related to gender identity. However, future research can help to reveal nuances of self-compassion experiences among non-binary individuals who may have multiple marginalized identities. Accordingly, future research should intentionally solicit the participation of diverse individuals, to better understand how gender intersects with race, religion, class, etc.

Within IPA research, homogeneity amongst participants is desired (Smith et al., 2009). As a result, in the current study all participants lived in an urban setting in Alberta. This is a significant factor given that transgender youth in Alberta reportedly experience the highest levels of verbal harassment in Canada (Peter et al., 2021). Further studies can expand this research to other geographical locations and rural settings. It is possible that non-binary young adults in other environments, faced with differing levels of societal or political support, may have other facets to their self-compassion experience.

Similarly, all participants in the current study were between the ages of 18 to 25. Focusing on one developmental period means that generational differences in self-compassion were not captured. Future research can focus on self-compassion experiences in other developmental stages, such as early to mid-adolescence, and middle and late adulthood. For example, given that the largest proportion of transgender and non-binary individuals in Canada are young adults (Statistics Canada, 2022a), experiences of self-compassion may be different amongst older adults, who grew up in a time with less mainstream awareness of gender diversity.

Future studies could also more intentionally explore potential connections between self-compassion and the developmental tasks of young adulthood, such as identity development. It would also be worthwhile to explore the impact of self-compassion on non-binary individuals through intervention or case studies. Building off of the work by Pipkin et al., (2022) self-compassion groups for non-binary young adults could also be evaluated.

Based on the findings of the current study, future research can also focus more deliberately on the association between self-compassion and self-care, and explore whether stress reduction may act as a mediator in this relationship, as hypothesized by Sirois and Hirsch (2019). It would also be beneficial to develop a more in-depth understanding of the decision-making process that occurs when prioritizing conflicting self-care needs. Future studies can also explore how self-compassion influences non-binary adults' sense of community connection. Given the emphasis by participants on authentic living, it would also be helpful to better understand how self-compassion facilitates a connection to one's core self, and if this process occurs through a fulfilment of basic needs (Guertin et al., 2020).

Additionally, it is important that researchers continue to explore the strengths, resiliency, and positive experiences of non-binary individuals (Dixon et al., 2022). Attending to these capacities rather than focusing solely on struggle will also help to better represent transgender and non-binary experiences. As Ren stated:

I've participated in a couple other studies before and a lot of them are very much deficit based, whereas yours focused more on aspects of trans-joy and the way that that manifests as self-compassion. So much of being trans is medicalized and made into a, "fix something that is wrong with you," mentality, whereas it's not an A to B process: there's a lot of bumps along the way, and you're going to have to make your own path

every single time. It's just really nice to be able to explore that in a way that's not just focusing on the bumps in the road, it's focusing on how you get through those.

Conclusion

Emerging adulthood is a particularly vulnerable time for non-binary individuals. Many non-binary young people transition during this time and must grapple with development tasks such as identity consolidation while simultaneously coping with gender-related stigma (Arnett, 2015; James et al., 2016; Jessen et al., 2021). Given the elevated risk for this group to suffer from minority stress, it is crucial that coping strategies assist non-binary individuals in promoting emotion regulation and acceptance, addressing internalized stigma, supporting relationship-building, facilitating effective communication, and recognizing areas of strength (Coyne et al., 2021). Although utilizing self-compassion may be an effective way of addressing these criteria, the influence of self-compassion on non-binary young adults had not been previously explored. The participants in this IPA study reported that self-compassion facilitated intentional self-care, authentic living, and aided in the development of a positive sense of self. Participants also stated that they experienced improved coping through perspective taking, and described self-compassion as an interpersonal process. Based on these findings, self-compassion holds promise in addressing many of the concerns facing non-binary young adults, and positions itself as a potentially transformative capacity for the well-being of this population.

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Appendix A: Advertisement

Non-binary research participants needed! Self-compassion is a way of treating oneself with kindness and warmth. It is often used to cope with painful or difficult situations. But what is self-compassion like for youth with a non-binary gender identity? Research participants are needed to reflect on their experiences of self-compassion. Participants will take part in three interviews during this 3 month study. To take part you must be 18-25 years old and have experienced self-compassion. Email Brittany Budzan (budzan@ualberta.ca) for more details.



Non-Binary Research Participants Needed!

Self-compassion is a way of treating oneself with kindness and warmth. It is often used to cope with painful or difficult situations. But what is self-compassion like for youth with a non-binary gender identity? Research participants are needed to reflect on their experiences of self-compassion.



Participants will take part in three interviews during this 3 month study. To take part you must be 18-25 years old and have experienced self-compassion. Email Brittany Budzan (budzan@ualberta.ca) for more details.

This research has been approved by the University of Alberta Research Ethics Board

Self-compassion Study
budzan@ualberta.ca

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budzan@ualberta.ca

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Self-compassion Study
budzan@ualberta.ca

Appendix B: Information Letter

University of Alberta
Faculty of Graduate Studies and Research
Department of Educational Psychology

Information Letter

Study Title: Experiences of self-compassion in youth with non-binary gender identities

Research Investigator

Brittany Budzan
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2R3
budzan@ualberta.ca

Supervisor

Dr. K. Jessica Van Vliet
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2R3
jvanvliet@ualberta.ca

Thank you for your interest in participating in this study. This study is for completion of the principal researcher's Doctoral program in Counselling Psychology. Here is information that you need to know before you agree to participate.

What is the purpose of this study?

The purpose of this study is to understand how youth show kindness and compassion to themselves. In particular, this study will explore how youth with a non-binary gender identity think and feel about self-compassion. Most of the current research with non-binary people focuses on hardships and challenges, rather than strengths and coping abilities. This study aims to help fill that gap by hearing from youth who use self-compassion. It is hoped that this research may contribute to a more well-rounded understanding of non-binary youths' experiences, as well as inform interventions and clinical work.

Am I eligible?

You can participate if the following are true about you:

- You are between 18 and 25 years of age.
- You have a non-binary gender identity.
- You speak and understand English.
- You have experienced self-compassion.

What will the study involve?

- The researcher will tell you about the study.
- There will be three interviews. The first will be approximately 60-75 minutes in length, and the second and third will be between 20-30 minutes. The interviews will take place at Clinical Services at the University of Alberta, or in a location that is convenient for you. The second and third interviews can also take place over the phone.

- During the first interview you will be asked about your experiences of self-compassion.
- The interview will be recorded and typed out by the researcher.
- Within approximately 4 weeks you will be emailed a copy of your interview transcript.
- During the second interview, you will be asked to provide comments about the transcript. This includes making corrections and clarifications.
- Within approximately 6 weeks you will be emailed a copy of the preliminary results from the data.
- During the third interview, you will be asked to provide feedback on the findings. This includes feedback about what feels accurate, as well as findings that do not quite fit.
- Your overall involvement in this study will last approximately 3 months.

What are the potential benefits?

- You will be helping to provide new information to this field of research.
- Transportation costs for the interviews and initial meeting will be covered up to \$15 per visit. Proof of payment must be provided on the same day.
- For your participation you will be given a \$25 Cineplex gift card.

What are the potential risks?

- Discussing the situations in which self-compassion was used may bring up negative or upsetting feelings. If you become upset while talking about your experiences of self-compassion, you will be provided with a list of low or no-cost counselling options.

How will my privacy be protected?

- You have the option of using a fake name for this research. Any identifying information collected during the interviews will be removed or changed. If you choose to use your actual name, there is a risk of being identified.
- The principal researcher and her supervisor are the only two people who will have contact with your data.
- The transcript and findings from the first interview will be sent to you in a password protected document.
- Documents will be kept in a locked lab at the University of Alberta. Audio files will be encrypted and kept on a USB drive in a locked filing cabinet. Typed copies of interviews and online responses will be stored on a computer in a locked lab. Anonymized versions of the transcript may be stored on the principal researcher's personal computer. Both computers will be encrypted and password protected. Identifying information will be destroyed at the end of the study. Audio files will be destroyed after 5 years. All other information will be stored securely for a minimum of 10 years before being destroyed.

Voluntary Participation

- You are under no obligation to participate in this study.

- When completing the interviews, you do not have to answer questions if you do not want to.
- If you wish to withdraw your data from this study, you must notify the researcher within 4 weeks of receiving the interview transcript. After this time your data cannot be removed because it may have become part of the analysis.
- You can choose to end your participation in this study at any time without penalty. If you withdraw you can have your data removed, as long as it has not been more than 4 weeks since receiving the interview transcript.
- You can request a copy of the summary of the report once the study is done.

Uses of Data

- The findings will be used in a Doctoral dissertation.
- The information you provide will only be used within research and educational contexts. This includes conference presentations and academic publications.
- The data you provide may be used in future research. However, this will be done only with approval from the University of Alberta Research Ethics Board.

If you have any further questions regarding this study, please contact Brittany Budzan at budzan@ualberta.ca. You may also contact my supervisor, Dr. Jessica Van Vliet, at jvanvliet@ualberta.ca if you have any concerns about this project. The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-0459 or reoffice@ualberta.ca. This office has no direct involvement with this project.

Thank you for your interest in this study.

Sincerely,

Brittany Budzan, M.Ed.
Doctoral candidate
University of Alberta
Department of Educational Psychology

Appendix C: Consent Form

University of Alberta
Faculty of Graduate Studies and Research
Department of Educational Psychology

Consent Form

Study Title: Experiences of self-compassion in youth with non-binary gender identities

Research Investigator

Brittany Budzan
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2R3
budzan@ualberta.ca

Supervisor

Dr. K. Jessica Van Vliet
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2R3
jvanvliet@ualberta.ca

Thank you for your interest in participating in this study. This study is for completion of the principal researcher's Doctoral program in Counselling Psychology.

Please read the information below and ask any questions you may have before deciding if you want to participate.

Purpose

The purpose of this study is to understand how youth show kindness and compassion to themselves. In particular, this study will explore how youth with a non-binary gender identity think and feel about self-compassion. Most of the current research with non-binary people focuses on hardships and challenges, rather than strengths and coping abilities. This study aims to help fill that gap by hearing from youth who use self-compassion. It is hoped that this research may contribute to a more well-rounded understanding of non-binary youths' experiences, as well as inform interventions and clinical work.

Eligibility

To participate, I agree that the following statements are true about me:

- I am between the ages of 18 and 25.
- I have a non-binary gender identity.
- I speak and understand English.
- I have experienced self-compassion.

Study Procedures

- The researcher will tell me about the study.
- There will be three interviews. The first will be approximately 60-75 minutes in length, and the second and third will be between 20-30 minutes. The interviews will take place at

Clinical Services at the University of Alberta, or in a location that is convenient for me. The second and third interviews can also take place over the phone.

- During the first interview I will be asked about my experiences of self-compassion.
- The interview will be recorded and typed out by the researcher.
- Within approximately 4 weeks I will be emailed a copy of my interview transcript.
- During the second interview, I will be asked to provide comments about the transcript. This includes making corrections and clarifications.
- Within approximately 6 weeks I will be emailed a copy of the preliminary results from the data.
- During the third interview, I will be asked to provide feedback on the findings. This includes feedback about what feels accurate, as well as findings that do not quite fit.
- My overall involvement in this study will last approximately 3 months.

Benefits

- I will be helping to provide new information to this field of research.
- Transportation costs for the interviews and initial meeting will be covered up to \$15 per visit. Proof of payment must be provided on the same day.
- For my participation I will be given a \$25 Cineplex gift card.

Risks

- Discussing the situations in which self-compassion was used may bring up negative or upsetting feelings. If I become upset while talking about my experiences of self-compassion, I will be provided with a list of low or no-cost counselling options.

Confidentiality

- I have the option of using a fake name for this research. Any identifying information collected during the interviews will be removed or changed. If I choose to use my actual name, there is a chance of being identified.
- The principal researcher and her supervisor are the only two people who will have contact with my data.
- The transcript and preliminary findings will be sent to me in a password protected document.
- Documents will be kept in a locked lab at the University of Alberta. Audio files will be encrypted and kept on a USB drive in a locked filing cabinet. Typed copies of interviews and online responses will be stored on a computer in a locked lab. Anonymized versions of the transcript may be stored on the principal researcher's personal computer. Both computers will be encrypted and password protected.
- Identifying information will be destroyed at the end of the study. Audio files will be destroyed after 5 years. All other information will be stored securely for a minimum of 10 years before being destroyed.

Voluntary Participation

- I understand that I am under no obligation to participate in this study.
- When completing the interviews, I do not have to answer questions if I do not want to.
- I am aware that I can withdraw my data from this study. To do so I must notify the researcher within 4 weeks of receiving the interview transcript. After this time my data cannot be removed because it may have become part of the analysis.
- I can choose to end my participation in this study at any time without penalty. If I withdraw I can have my data removed, as long as it has not been more than 4 weeks since receiving the interview transcript.
- I can request a copy of the summary of the report once the study is done.

Uses of Data

- I am aware that the findings will be used in a Doctoral dissertation.
- The information I provide will only be used within research and educational contexts. This includes conference presentations and academic publications.
- The data I provide may be used in future research. However, this will be done only with approval from the University of Alberta Research Ethics Board.

If you have any further questions regarding this study, please contact Brittany Budzan at budzan@ualberta.ca. You may also contact my supervisor, Dr. Jessica Van Vliet, at jvanvliet@ualberta.ca if you have any concerns about this project. The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-0459 or reoffice@ualberta.ca. This office has no direct involvement with this project.

Having read and understood all of the above, I _____ agree to participate freely and voluntarily in this study.

Signature of Participant

Date

Signature of Researcher as Witness

Date

Thank you for your participation in this study.

Appendix D: Demographics FormDemographics Form

Please provide the following demographic information. You may skip any questions you do not feel comfortable answering.

Pseudonym: _____ **Pronouns:** _____ **Age:** _____

Primary gender identity: _____

Additional gender identities: _____

Ethnicity/Cultural identity: _____

Highest level of education (please circle one):

- | | | |
|---------------------------------|--------------------------------------|------------------------------------|
| a. 8 years of schooling or less | d. High school diploma/GED | g. College/university degree |
| b. Junior high school graduate | e. Certificate in a trade/technology | h. Graduate/professional education |
| c. Partial high school training | f. Partial college/university | |

Employment status (please circle all that apply):

- | | | |
|--------------|-----------------|-----------------|
| a. Full-time | c. Not employed | e. Other: _____ |
| b. Part-time | d. Student | |

Appendix E: Counselling Referrals

Counselling Referrals

The Family Centre

Goal-oriented counselling & free single-session drop-in counselling

#20, 9912-106 Street

780-900-6423

www.the-family-centre.com

Pride Centre of Edmonton

Free counselling, LGBTQ library, resources, outreach programs

10618 105 Ave

780-488-3234

www.pridecentreofedmonton.ca

University of Alberta Clinical Services

Individual counselling offered by student trainees, sliding scale available.

1-135 Education North Building

87th Avenue, between 112 St. and 114 St.

780-492-3746

www.ualberta.ca/educational-psychology/centres-and-institutes/clinical-services

Insight Psychological

Multiple locations, in-person and online counselling available. Sliding scale available.

www.insightpsychological.ca

Momentum Walk-In Counselling

Individual counselling and LGBTQ education & support drop-in group. Sliding scale available.

Suite 706 5241 Calgary Trail NW (Centre 104)

780-757-0900

www.momentumcounselling.org/contact/

If you are in need of immediate assistance, please call the 24 hour distress line at 780-482-HELP (4357). In case of emergency, call 911

Appendix F: Interview Protocols

Interview 1

Date:

Interviewee name/pseudonym:

Start time of interview:

End time of interview:

Pre-interview checklist

- Go through information letter and consent form
- Answer questions
- Explain interview process
- Ensure cell phone has been turned off
- Attend to participant's comfort

Introduction:

Today we're going to talk about self-compassion. Some people think of self-compassion as being kind and understanding towards yourself. Others may think about it as treating yourself like you would a close friend. I'm interested in your experiences of self-compassion. If there is any question you do not wish to answer, just say "pass." Do you have any questions before we begin?

Interview questions

1. **Can you tell me about a time in your recent past where you were compassionate or kind towards yourself? Please describe this event in as much detail as you can.**
 - How did it feel to show yourself this kindness?
 - What did it mean for you, at the time?
2. **When do you first remember using self-compassion?**
 - Can you describe this in as much detail as possible?
3. **Looking back from your teenage years to the present moment, were there situations in which self-compassion wasn't useful? Please elaborate**
4. **What, if anything, helped you to be self-compassionate?**
5. **What, if anything, made it harder to be self-compassionate?**
 - Some people find that this changes over time. Was that your experience? Please elaborate.

- 6. Thinking back on these experiences, in what ways did it influence you at the time?**
 - In what ways, if any, did it influence you and your life? The influence might be positive or negative. I'm interested in whatever was true for you.
- 7. From your standpoint, what is the meaning of self-compassion?**
 - Has this changed for you over time, and if so, how?
- 8. Is there anything else you would like to say about self-compassion or what self-compassion means?**
- 9. Is there anything else you want to add that I haven't asked you?**

Post-interview checklist

- Confirm participant's email address
- Review timeline for next interview
- Thank participant

Interview 2

Date:

Interviewee name/pseudonym:

Start time of interview:

End time of interview:

Pre-interview checklist

- Explain interview process
- Ensure cell phone has been turned off
- Attend to participant's comfort

Interview questions

- 1. Was there anything in the transcript you wanted to add or clarify?**
- 2. Was there anything in the transcript you wanted to correct?**

Post-interview checklist

- Review timeline for withdrawing data from study
- Thank participant

Interview 3

Date:

Interviewee name/pseudonym:

Start time of interview:

End time of interview:

Pre-interview checklist

- Explain interview process
- Ensure cell phone has been turned off
- Attend to participant's comfort

Interview questions

- 1. From your reading of the themes, was there anything that felt like it really fit?**
- 2. From your reading of the themes, was there anything that didn't seem quite right?**
- 3. While reading the themes, was there anything that seemed like it was missing?**

Post-interview checklist

- Thank participant and provide gift card

Appendix G: Addendum**ADDENDUM TO PARTICIPANT INFORMATION & CONSENT**

Study Title: Experiences of self-compassion in youth with non-binary gender identities

Research Investigator

Brittany Budzan
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2G5
budzan@ualberta.ca

Supervisor

Dr. K. Jessica Van Vliet
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2G5
jvanvliet@ualberta.ca
780-492-5894

Before beginning this research study, you signed a consent form describing the study and your rights as a study participant. As a result of the COVID-19 pandemic, some of this study's procedures have changed. These changes are described below, which will also be explained to you by the researcher. After discussing the new information with the researcher, if you would like to continue in the study sign this Consent Form Addendum. Other information from the original consent that you signed at the beginning of the study still applies.

NEW INFORMATION

- Interviews will no longer take place in person. Interviews will be over the phone or on a secure video service. Complete confidentiality cannot be fully guaranteed when using electronic communication. However, platforms used in this study will have recommended privacy setting and security measures, including encryption.
- Previously, study materials were stored in a locked office at the University of Alberta. Study materials will now be stored in the home office of the principal researcher, in a locked filing drawer.
- Given that compensation can no longer be provided in person, participants will receive a \$10 Amazon electric gift card after each interview.

ADDENDUM TO PARTICIPANT INFORMATION & CONSENT

Study Title: Experiences of self-compassion in youth with non-binary gender identities

Research Investigator

Brittany Budzan
 Department of Educational Psychology
 University of Alberta
 Edmonton, AB, T6G 2G5
 budzan@ualberta.ca

Supervisor

Dr. K. Jessica Van Vliet
 Department of Educational Psychology
 University of Alberta
 Edmonton, AB, T6G 2G5
 jvanvliet@ualberta.ca
 780-492-5894

I have read all of the new information in this addendum concerning the study I am currently participating in.

I have been given the opportunity to discuss the information contained in this addendum. All of my questions have been answered to my satisfaction.

This signature on this Information & Consent Form Addendum means that I agree to continue to take part in this study. I understand that I remain free to withdraw at any time.

Signature of Participant	Name (Printed)	Date
--------------------------	----------------	------

Signature of Researcher as Witness	Name (Printed)	Date
------------------------------------	----------------	------

A SIGNED COPY OF THIS ADDENDUM MUST BE GIVEN TO THE RESEARCH PARTICIPANT

Appendix H: Information Letter (COVID)

Study Information Letter

Study Title: Experiences of self-compassion in youth with non-binary gender identities

Research Investigator

Brittany Budzan
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2G5
budzan@ualberta.ca

Supervisor

Dr. K. Jessica Van Vliet
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2G5
jvanvliet@ualberta.ca
780-492-5894

Thank you for your interest in this study. This study is part of Brittany Budzan's Doctoral program in Counselling Psychology at the University of Alberta. Here is information that you need to know before you agree to participate.

What is the purpose of this study?

The purpose of this study is to understand how youth show kindness and compassion to themselves. In particular, this study will explore how youth with a non-binary gender identity think and feel about self-compassion. This information is important, as the strengths and coping skills of non-binary people are not well understood. It is hoped that this research may add to a more well-rounded understanding of non-binary youths' experiences. This research may also inform future interventions and clinical work.

Am I eligible?

You can participate if the following are true about you:

- You are between 18 and 25 years old.
- Your primary gender identity is non-binary.
- You speak and understand English.
- You have experienced self-compassion.

What will the study involve?

- There will be three interviews. The first will be 60-75 minutes in length. The second and third will be between 20-30 minutes. The interviews will take place over the phone or on a secure video service platform.
- During the first interview you will be asked about your experiences of self-compassion.
- The interview will be recorded and typed out by the researcher. You will receive a copy of the transcript within about 4 weeks.
- During the second interview, you will be asked to provide comments about the transcript. This includes making corrections and explaining statements that are not clear.
- Within about 2 to 3 months you will be emailed a copy of the initial results.

- During the third interview, you will be asked to provide feedback on the results. This includes feedback about what feels accurate, as well as findings that do not quite fit.
- Your overall involvement in this study will be about 3 to 4 hours.

What are the potential benefits?

- There are no direct benefits to taking part in this study. However, you will be helping to provide new information to this field of research.
- You will be given a \$10 Amazon electronic gift card after each interview.

What are the potential risks?

- Talking about self-compassion may bring up sad or painful feelings. If you become upset while talking about your experiences, you will be given a list of low and no-cost counselling options.

How will my privacy be protected?

- You have the option of using a fake name for this research. Any identifying information collected during the interviews will be removed or changed. If you choose to use your actual first name, there is a chance of being identified.
- Complete confidentiality cannot be fully guaranteed when using electronic communication. However, all platforms used in this study will have recommended privacy settings and security measures, including encryption.
- The principal researcher and her supervisor are the only two people who will have contact with your data.
- The transcript and findings from the first interview will be sent to you in a password protected document.
- Documents will be kept in a locked drawer in the principal researcher's home office. Audio files will be encrypted and kept on a USB drive in a locked drawer in the principal researcher's home office. Typed copies of interviews and anonymized versions of the transcript will be stored on the principal researcher's personal computer, which will be password protected.
- Identifying information will be destroyed at the end of the study. Audio files will be destroyed after 5 years. All other data will be stored securely for at least 5 years before being destroyed.

Voluntary Participation

- You have no obligation to take part in this study.
- You do not have to answer interview questions if you do not want to.
- You can choose to end your participation in this study at any time without penalty. If you wish to withdraw your data from the study, you must notify the researcher within 4 weeks of receiving the interview transcript. After this time your data cannot be removed as it may have become part of the analysis.

- You can request a copy of the summary of the results once the study is done.

Uses of Data

- The information you provide will only be used within research and educational contexts. This includes the doctoral dissertation, conference presentations and academic publications.
- The data you provide may be used in future research. However, this will be done only with approval from the University of Alberta Research Ethics Board.

If you have any questions or concerns about this study, please contact Brittany Budzan at budzan@ualberta.ca. You may also contact my supervisor, Dr. Jessica Van Vliet, at jvanvliet@ualberta.ca, 780-492-5894. The plan for this study has been reviewed by a Research Ethics Board at the University of Alberta. If you have questions about your rights or how research should be conducted, you can call (780) 492-2615. This office is independent of the researchers.

Thank you for your interest in this study.

Appendix I: Consent Form (COVID)

Consent Form

Study Title: Experiences of self-compassion in youth with non-binary gender identities

Research Investigator

Brittany Budzan
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2G5
budzan@ualberta.ca

Supervisor

Dr. K. Jessica Van Vliet
Department of Educational Psychology
University of Alberta
Edmonton, AB, T6G 2G5
jvanvliet@ualberta.ca
780-492-5894

Thank you for your interest in this study. This study is for completion of the Brittany Budzan's Doctoral program in Counselling Psychology at the University of Alberta.

Please read the information below. Ask any questions you may have before deciding if you want to take part in this study.

Purpose

The purpose of this study is to understand how youth show kindness and compassion to themselves. In particular, this study will explore how youth with a non-binary gender identity think and feel about self-compassion. This information is important, as the strengths and coping skills of non-binary people are not well understood. It is hoped that this research may add to a more well-rounded understanding of non-binary youths' experiences. This research may also inform future interventions and clinical work.

Eligibility

To participate, I agree that the following statements are true:

- I am between 18 and 25 years old.
- My primary gender identity is non-binary.
- I speak and understand English.
- I have experienced self-compassion.

Study Procedures

- There will be three interviews. The first will be 60-75 minutes in length. The second and third interviews will be 20-30 minutes. The interviews will take place over the phone or on a secure video service platform.
- During the first interview I will be asked about my experiences of self-compassion.
- The interview will be recorded and typed out by the researcher. I will receive a copy of the transcript within about 4 weeks.

- During the second interview, I will be asked to provide comments about the transcript. This includes making corrections and explaining statements that are not clear.
- Within about 2 to 3 months I will be emailed a copy of the initial results.
- During the third interview, I will be asked to provide feedback on the results. This includes feedback about what feels accurate, as well as findings that do not quite fit.
- My overall involvement in this study will be about 3 to 4 hours.

Benefits

- There are no direct benefits to taking part in this study. However, I will be helping to provide new information to this field of research.
- I will be given a \$10 Amazon electronic gift card after each interview.

Risks

- Talking about self-compassion may bring up sad or painful feelings. If I become upset while talking about my experiences, I will be given a list of low and no-cost counselling options.

Confidentiality

- I have the option of using a fake name for this research. Any identifying information collected during the interviews will be removed or changed. If I choose to use my actual first name, there is a chance of being identified.
- Complete confidentiality cannot be fully guaranteed when using electronic communication. However, all platforms used in this study will have recommended privacy settings and security measures, including encryption.
- The principal researcher and her supervisor are the only two people who will have contact with my data.
- The transcript and preliminary findings will be sent to me in a password protected document.
- Documents will be kept in a locked drawer in the principal researcher's home office. Audio files will be encrypted and kept on a USB drive in a locked drawer in the principal researcher's home office. Typed copies of interviews and anonymized versions of the transcript will be stored on the principal researcher's personal computer, which will be password protected.
- Identifying information will be destroyed at the end of the study. Audio files will be destroyed after 5 years. All other data will be stored securely for at least 5 years before being destroyed.

Voluntary Participation

- I understand that I am under no obligation to take part in this study.
- I do not have to answer interview questions if I do not want to.

- I can choose to end my participation at any time without penalty. If I choose to withdraw my data from this study, I must notify the researcher within 4 weeks of receiving the interview transcript. After this time my data cannot be removed as it may have become part of the analysis.
- I can request a copy of the summary of the results once the study is done.

Uses of Data

- The data I provide will only be used within research and educational contexts. This includes the doctoral dissertation, conference presentations and academic publications.
- The data I provide may be used in future research. However, this will be done only with approval from the University of Alberta Research Ethics Board.

If you have any questions or concerns about this study, please contact Brittany Budzan at budzan@ualberta.ca. You can also contact my supervisor, Dr. Jessica Van Vliet at jvanvliet@ualberta.ca, 780-492-5894. The plan for this study has been reviewed by a Research Ethics Board at the University of Alberta. If you have questions about your rights or how research should be conducted, you can call (780) 492-2615. This office is independent of the researchers.

I have read this form and the study has been explained to me. I have been given the opportunity to ask questions. If I have additional questions, I have been told whom to contact. I, _____ agree to participate in this study and will receive a copy of this consent form.

Signature of Participant

Date

Signature of Researcher as Witness

Date

Thank you for taking part in this study.