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# “Becoming Unhinged”

## A Queer Autoethnography in Gender Affirming Voicework

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### Abstract

This queer autoethnography seeks to analyze and understand my experience of participating in a gender affirming voicework (GAV) research group over the course of an academic year as a music therapy student. Through voicework and relationship with group members, I experienced epiphanies regarding gender, allyship, and music therapy practice which transformed my experience from a desire to help a community I perceived myself as separate from to identifying as a member of the community.

**Keywords:** gender affirming voicework; queer music therapy; queer theory; voicework; autoethnography

### Overture

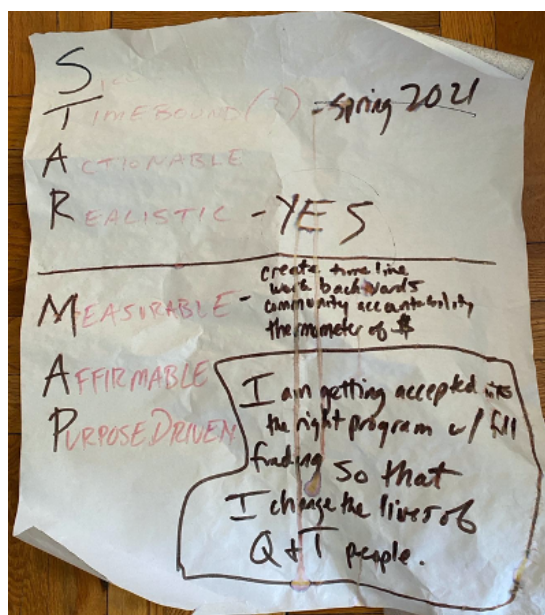
The time: February 2020. The setting: a rehearsal room in the Manhattan studio of my longtime mentor and acting coach, Jen. Often described as a “human stethoscope,” Jen possesses an extraordinary talent for helping others block out external noise and tune into their inner voice. After a decade as a professional actor, grappling with the challenges of constant rejection and financial instability, I came to Jen in search of clarity. I recounted my experiences from 2017 performing in the national tour of *Kinky Boots*, emphasizing the impact of the queer and trans youth I met during post-show talkbacks. Their unapologetic self-expression catalyzed my own coming out process and sparked curiosity about using music for a greater purpose.

Two years later and considering a career shift, I observed music therapists at a prominent New York hospital. Overwhelmed with possibilities, I was led in music-assisted relaxation by one of the therapists to ground my racing thoughts. Soon after, I stumbled upon a copy of *Feminist Perspectives in Music Therapy* (Hadley, 2006) at my local library. I shared with

Jen that my subsequent exploration of music therapy literature revealed a gap in the field regarding work with LGBTQ+ people.<sup>1</sup> As I relayed these findings, I experienced a moment of insight: I wanted to become a music therapist. Jen, usually a champion poker face, wiped glistening tears from her eyes as she watched me connect the dots. Overwhelmed with excitement, I leapt to my feet and dashed around the studio in ecstatic joy à la *Muppets Take Manhattan*. Steering insight into action, Jen pulled out a giant Post-it note and a sharpie, helping me chart a course towards this new goal. After our meeting, I taped the giant Post-it note on my bedroom wall, where it remained through the early days of pandemic lockdown, existential soul-searching, and eventual coursework at Slippery Rock University. This Post-it note, now weathered by time (Figure 1), serves as an early artifact on the journey toward new professional and personal identities, the first of many epiphanies along the way.

Queer autoethnography combines autoethnography, which analyzes epiphanies “that stem from or are made possible by culture or possessing a particular cultural identity” (Ellis, Adams, & Bochner<sup>2</sup>, 2011, n.p.) with queer theory, aiming to destabilize fixed ways of knowing and envision alternative possibilities (Adams & Holman Jones, 2008). In sharing this personal narrative, I seek to honor the courageous young people I met on tour and challenge conventional notions of research as I reflect on my experience of uncovering and embracing new identities while participating in a gender affirming voicework (GAV) group as a practicum placement in my post baccalaureate studies.

**Figure 1.** Post-it Epiphany, February 2020.



I joined the group as a white, cisgender queer woman, secure in my understanding of my own gender and eager to “help” community members I genuinely perceived as underserved by music therapy. My awareness of my privileged identities was rudimentary, and I had not yet considered how these identities would impact the reception of my intentions. Although I did not yet identify as non-binary, I felt a sense of connection as a member of the LGBTQ+ community and desired to pursue this work in solidarity with trans<sup>3</sup> people, unaware of any savior complex this might have projected. Through participation in gender affirming voicework and relationships with group members, I was lovingly encouraged to confront these oversights. Over the next year, I experienced gender epiphanies that transformed my perspective from the desire to “help” a community to recognizing myself as a member of that community.

## Introduction

### *Defining Terms*

I begin by defining two key terms essential to this article while acknowledging the paradox of providing rigid definitions for fluid methods of inquiry. While queer autoethnography resists confinement to a single definition or set of practices (Adams & Holman Jones, 2008), I offer these specific definitions to effectively communicate my experiences to the reader, understanding that these terms may evolve in the future.

### Gender affirming voicework

Gender affirming voicework (GAV) is an emerging method of music therapy that focuses on supporting embodied gender expression at the intersection of the physical and psychological voice. GAV is inspired by queer theory, speech language pathology, and vocal pedagogy, and utilizes music therapy techniques like singing, chanting, toning, movement, and vocal improvisation (Gumble, 2019a, 2019b). These techniques assist participants in accessing an affirming mode of vocal expression. Conceived by nonbinary, queer music therapist Maevon Gumble, and co-developed alongside Braedyn Inmon and Kay Schachner, GAV primarily supports trans, nonbinary, and gender non-conforming clients. However, GAV offers an opportunity for individuals of all gender identities to examine and challenge cis-normative expectations and embody their authentic voice (Gumble, 2019a, 2019b).

### Queer/Queering

In writing about gender affirming voicework, it is vital to define “queer,” as this term shapes and informs both research and practice. “Queer” serves as an umbrella term, a specific identity category, and as Adams and Holman Jones (2008, p. 381) describe, a “linguistic home for individuals living outside norms of sex and gender.” Queer is often used to avoid fixed labels like gay or lesbian, highlighting instead the “open mesh of possibilities” when “elements of anyone’s gender or sexuality aren’t made or can’t be made” a monolith (Corey & Nakayama, 1997; Khayatt, 2002; Nakayama & Corey, 2003, as cited in Adams & Holman Jones, 2008, p. 381). In this autoethnography, “queer” is also utilized as a verb. Much like the reclamation of the word “queer” from its alternate use as a slur, “queering” signifies the redeployment and transformation of its prior usage “in the direction of urgent and expanding political purposes” (Kong, Mahoney, & Plummer, 2002, as cited in Adams & Holman-Jones, 2008, p. 383).

## Literature Review

### *Queer Theory/Queer Music Therapy*

Queer theory is widely recognized as a shifting theoretical framework that seeks to destabilize binary and fixed understandings (Adams & Holman Jones, 2008; Gumble, 2019a). Developed primarily from the work of Judith Butler, Teresa de Lauretis, and Eve Kosofsky Sedgwick, queer theory is marked by fluidity and dynamism and includes resisting categorization, challenging ideas of “essential” identities, focusing on context, and examining power dynamics between cultures, categories, and identities (Adams & Holman Jones, 2008; Barker & Scheele, 2016).

Building upon this framework, queer music therapy integrates queer theory and music therapy practice. Though not explicitly named “queer music therapy” by the authors, early

contributions by Lipson (2013) and Whitehead-Pleaux, Donnenwerth, Robinson, Hardy, Oswanski, Forinash, Hearn, Anderson, York, and Tan (Whitehead-Pleaux et al., 2012; Whitehead-Pleaux et al., 2013) laid important groundwork that shaped this evolving theory of practice. Whitehead-Pleaux et al. (2012) emphasized the need for music therapists to resist categorizing LGBTQ+ clients and highlighted the importance of viewing people first as individuals and then as members of a culture, challenging preconceived notions about “essential” identities (Lipson, 2013).

Bain, Grzanka, and Crowe (2016) further expanded upon these concepts, envisioning queer music therapy alongside sexuality studies, LGBT counseling, and psychology of music. They invited therapists into a radically inclusive way of working, challenging fixed categories of gender and sexuality and critiquing structures of hierarchy and oppression. Simply put, queer music therapy is a practice, not a client population.

Queering has also been applied to music therapy pedagogy. Fansler, Reed, Bautista, Arnett, Perkins, and Hadley (2019) envision a “radically queer music therapy pedagogy that deconstructs binary hierarchies...and embraces liminality for a more inclusive and just field” (p. 2). This pedagogy seeks to disrupt the binary “banking” system of education as it relates to the teacher/student and therapist/client dynamic with the teacher/therapist making “deposits” of knowledge into passive student/client receptacles. Instead, this approach embraces relationships in the “borderlands” (Anzaldúa, 2012; Fansler et al., 2019), the liminal spaces outside of binary helper/helped, teacher/student, or therapist/client dynamics. Queering music therapy pedagogy is described as a process of constant becoming, learning/unlearning, and interrogating fixed categories of knowledge (Fansler et al., 2019).

### ***Intertherapy/Analytical Music Therapy***

As GAV is an emergent method, the formal training model is still in development (Gumble, 2024). In earlier stages of GAV, explorations involved a small group where members rotated through different roles each session. At present, the method has matured into a more structured training model, culminating in the practitioners completing their Level 1 and Level 2 trainings in October 2023. Both the initial explorations and the current training model reflect aspects of the intertherapy model of Analytical Music Therapy. This model involves a small group of trainees alternating roles between participant, therapist, and observer, enabling therapists to collaborate with each other before working with clients.

Mary Priestley, along with colleagues Peter Wright and Marjorie Wardle devised the intertherapy model while undergoing her own personal analysis and working at a large psychiatric hospital. Priestley asserted, “we felt that it was not fair to subject our patients to experimental techniques that we had not experienced for ourselves” (Priestley, 2011, p. 3). The GAV training model mirrors aspects of intertherapy, with participants engaging in experiential exercises, alternating between roles of therapist/patient/observer, keeping detailed notes, and sharing feedback between rotations. Priestley describes the original arrangement as a “learning and research enterprise rolled into one” (Priestley, 2011, p.3).

### ***Internal Family Systems***

Internal Family Systems (IFS) emerged as a complementary framework during my time in the gender affirming voicework group. Although it is not an inherent component of GAV and may not suit every practitioner or client, IFS can be a helpful tool in facilitating emotional processing. Developed by psychotherapist Richard C. Schwartz, IFS conceives of a person as a system of various “parts,” a collection of inner personas (Schwartz & Sweezy, 2020). While each person’s family of inner parts is unique, these parts fall into

three categories: Managers, Exiles, and Firefighters. Manager parts focus on protecting the system and maintaining safety. Exile parts represent the most sensitive and vulnerable members of the family system. Often deemed weak or defective to the Manager parts, the Exiles have often faced abandonment, exploitation, or rejection. Firefighter parts on the other hand, try to distract, numb, or stifle the Exiles' feelings through protective actions and behaviors, which may include but are not limited to, numbing or dissociative behaviors like substance use, disordered eating or risky sexual activities.

IFS posits that at the core of every person is the Self that embodies inherent qualities of innate compassion, curiosity, perspective, and acceptance. The Self is seen as a strong inner leader, capable of bringing balance and harmony to the system when allowed to lead. When applying IFS clinically, the primary goals include: "liberating parts from extreme roles so they can move on to preferred, valuable roles, restoring the trust of parts in the leadership of the Self, and re-harmonizing the system of parts such that they get to know each other and form productive collaborations" (Schwartz & Sweezy, 2020, pp. 106–107).

### ***Therapist Identity Development***

Michael Rønnestad and Thomas Skovholt dedicated 25 years to researching their five-phase model of therapist identity development. This research included interviews with practitioners across their professional lifespan and the synthesis of previously published models of career development, therapist development, learning, and decision-making. Rønnestad and Skovholt's model delineates therapist development into five distinct phases:

- Novice Student Phase, encompassing the initial 1-2 years of a training program;
- Advanced Student Phase, characterized by the final part of training and engagement in practicum or internship settings under supervision;
- Novice Professional Phase, covering the first five years post-graduation, a crucial period for early career development;
- Experienced Professional Phase, signifying several years of practice in diverse work settings or roles, contributing to a deepening of professional expertise; and
- The Senior Professional Phase, for therapists with at least 25 years of experience, including some who continue practice after retirement.

This autoethnography focuses on the novice student phase. Developmental tasks during this stage include making preliminary sense of new information, demonstrating sufficient competence, and managing intense emotional reactions when seeing their first clients in a practicum setting. Therapists in this stage also place high value on opinions of peers, with central questions being "How do you see me?" and "Do I have the personality for this?" (Rønnestad & Skovholt, 2013, p. 61). Although this model is a useful framework for understanding my experiences, I challenge the idea of competence this model presents. Drawing from queer theory and queer music therapy pedagogy, I want to destabilize the idea of competence as a fixed goal or a series of tasks to be mastered. Instead, I invite a fluid, continually unfolding practice of reflexivity, which was explored and modeled throughout my time in the GAV group.

### ***Gender Affirming Voicework***

GAV is a highly individualized approach combining vocal function, identity work, and emotional processing. GAV integrates and redeploys concepts from speech language pathology, vocal pedagogy, music therapy, and queer theory. GAV challenges transmedicalism and binaries present in existing literature, especially in the realm of speech therapy. Rather than insisting on a single mode of expression or focusing on binary trans people (as is prevalent in speech therapy literature), GAV embraces liminality,

lingers in the spaces between speech and singing (Gumble, 2019a), and invites multiple modes of vocal expression (Davies, Papp & Antoni, 2015; Kirkpatrick, 2009, Nix, 2004, Sundberg, 2006, as cited in Gumble, 2019a).

From music therapy, GAV incorporates elements of Sanne Storm's CoreTone exercise to guide clients in discovering their musical "home base" while emphasizing self-knowledge, presence, and authenticity (Gumble, 2019a; Storm, 2013). Contributions from Rolvsjord and Halstead (2013), Lipson (2013), Loewy (2004), Austin (2008), and Sokolov (2019) further GAV's emotional and holistic perspectives. These articles explore and disrupt the relationship between voice and gender as well as the strong reactions and associations that can arise during voicework. Through conversation with Lipson (2013), Gumble suggests that music therapists are uniquely situated to support emotional voicing experiences, as our scope of practice can bridge the gap between physical and psychological voice.

In practice, GAV is individualized to the goals of the client. Sessions begin with a verbal check-in and grounding experience that connects mind, body, and voice through various methods, including physical warmups, breathing exercises, toning, or gentle movement and vocalization. Sessions then move into one or two central interventions which might focus on vocal function, emotion/identity, or their integration, and consist of CoreTone techniques, guided imagery, vocal technique, chanting, toning or conversation practice which embraces the overlap of singing and speech (Gumble, 2019a, 2019b, 2020).

While drawing from music therapy, speech language pathology, vocal pedagogy, and vocal function, GAV also boldly critiques existing fixed and binary understandings of voice, sound, and gender (Gumble, 2019a, 2019b, 2020). Although initial research exists, including Gumble's autoethnographic work, there is a need for broader research in other contexts. This includes exploring training students and therapists in GAV as well as conducting clinical work with individuals and groups.

## Methodology

### *Locating Self and Queer Autoethnography*

As an emerging clinician conscious of my privileged and marginalized identities, I want to begin by locating myself as a participant, observer, and student. Gumble (2019a) defines the Self with a capital S as "a person's most whole understanding of themselves" and is in a "constant state of becoming something else" (p. 9). With this in mind, I am locating my present Self, holding the queer knowledge that my present Self is open to future transformation.

I am a thirty-five-year-old neurodivergent, queer lesbian from a middle-class background residing in occupied Lenape and Canarsie land, also known as Queens, New York. I move through the world in a white, small-fat, physically enabled body. I was assigned female at birth, and many who do not know me assume I am a cisgender woman. My present Self describes my gender as *nonbinary femme*<sup>4</sup>. My lived experience includes major depressive disorder, ADHD (combined type), and generalized anxiety disorder. While these diagnoses are categorized as disabilities in the literature, I have only recently begun to understand them as such due to the impacts of societal and internalized ableism. Professionally, I have a background as an actor, singer-songwriter, and teaching artist with a Bachelor of Music in Musical Theatre. In 2023, I completed a bachelor's equivalency program and became a board-certified music therapist.

This article combines autoethnography, reflexive ethnography, and queer autoethnography. It analyzes past personal experiences and larger cultural narratives while also reflecting how the researcher is changed by the research, which became apparent as I revisited my records. These observed changes, this uniqueness of this

practicum placement, and the need for more GAV literature combined motivated my engagement in autoethnography as a research process. This autoethnography is queer, not only because of the author or group member identities, but in the way the article is constructed. Queer autoethnography embodies a process of “becoming undone,” as proposed by Adam and Holman Jones (2008). GAV invited me to undo previously held assumptions about music therapy and what “counts” as research, prompting self-critical questioning: Does my lived experience before becoming a music therapist “count”? Is my research valid? Are my observations “good enough” for academic and professional scrutiny? Am I queer or trans, gender non-conforming or nonbinary “enough”? Queer autoethnography makes space for these questions to breathe.

### **Participants**

The group of co-developers consisted of Maevon Gumble, Braedyn Inmon, and Kay Schachner, all board-certified music therapists. Each member of the founding triad is white, transgender, and non-binary. I was involved as a practicum student as a learner-participant in the process who contributed to the continuing development of GAV while in the group.

### **Data Generation and Collection**

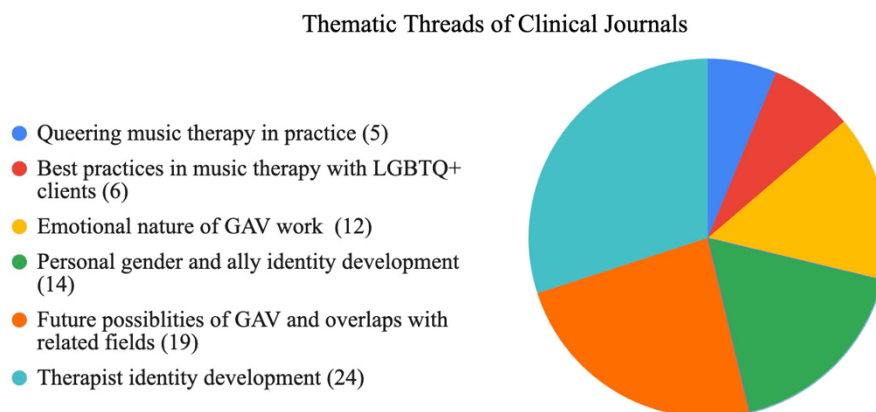
Sessions were conducted weekly, each lasting approximately two hours, divided into two 45-minute segments, and we met over the period of an academic year. Due to the COVID-19 pandemic and location of participants, sessions were held virtually over Zoom. The format and musical experiences of sessions varied, with participants rotating through the roles of client, therapist, and observer, a process documented in a shared spreadsheet. Data collection encompassed personal weekly session notes and journals. Session notes were to remain objective, journals were intended to process personal reflections about clinical placement.

My analysis primarily drew upon the rich, detailed accounts in journal entries, supplemented by session notes and personal conversations with fellow group members. While sessions were recorded for archival purposes, these recordings were not subjected to analysis in this autoethnographic study. After reading and re-reading journal entries to saturation, evocative quotes were identified and grouped into thematic threads as themes emerged. In preparation for publication, I obtained university Institutional Review Board (IRB) approval and consent of the other members of the GAV group, who reviewed drafts and offered feedback throughout the writing process.

### **Findings**

Figure 2 below details the findings of the thematic analysis.

**Figure 2.** Findings of Thematic Analysis of Reflective Journals.



The predominant theme of my reflective journal entries was therapist identity development (24 instances). This included documenting the emotional experiences of participating in and leading my first sessions as well as integration of knowledge from classwork and life experience. Following closely behind were themes regarding the future of GAV and overlaps with related fields (19 instances). The exploratory aim and collaborative structure of the group prompted much contemplation about the potential trajectories of this new method.

Other significant themes included personal reflections on gender and allyship development (14 instances), as well as the emotional nature of GAV work (12 instances). My unexpectedly intense feelings aligned with existing literature on the emotional aspects of GAV, voice, and gender, as well as therapist identity development. My journal entries quickly became a space to process these emotions (Rønnestad & Skovholt, 2013). The recurring theme of ally identity development may have also been influenced by a concurrent academic course covering social justice issues in music therapy. Zooming out, additional threads highlighted issues in the field of music therapy related to best practices when working with LGBTQ+ clients (6 instances) and observations on queering music therapy in practice (5 instances). A notable event in the GAV group involved an invitation to contribute to a publication on queer and trans music therapy, sparking discussions that altered my perspectives on cultural humility and queering in practice.

### ***“Fumbling Around in a Dark Room”: Reflections on Therapist Identity Development***

Reading through my journal entries, I see a clear trajectory from overwhelmed first semester student seeking validation to a budding student clinician building trust in my musical skills and clinical intuition. This aligns especially with the novice phase of counselor identity development, with many entries reflecting the intense emotional reactions and other developmental tasks of this stage. I found myself anxious to begin, with images and phrases like “fumbling around in a dark room” and “fake it ’til you make it” figuring prominently, while highly valuing the opinions of my peers (“DID I DO IT RIGHT!?”).

“I am also eventually going to assume the role of therapist which at this point has me excited and scared. I feel a bit like I am stumbling around in a dark room...” (September 25, 2020)

“I wasn’t entirely sure what I was doing but I made it a fake it ’til you make it kind of situation....” (October 11, 2020)

“...I felt the urge to consult D who was acting as observer and ask like “DID I DO IT RIGHT!?”...” (March 21, 2021)

“... I feel like I’ve really begun to trust my intuition more than ever” (February 11, 2021)

### ***Constant Becoming: Future GAV Possibilities and Overlaps with Related Fields***

#### **Vocal pedagogy**

Overlaps and future possibilities for GAV were frequently discussed, likely stemming from the interdisciplinary nature of the initial research along with the collaborative ethos of the group. Much interest in related fields revolved around vocal function work, particularly vocal pedagogy for non-cis voices. A particularly rewarding session (April 17, 2021) stood



out, where I integrated past experience as a voice teacher with a therapeutic presence. Rather than default to a hierarchical approach rooted in the banking systems mentality of “I know/you don’t,” I took a collaborative stance and worked alongside the participant.

Several strategies facilitated this approach. First, I employed frequent pauses, providing ample space for the participant to reflect either externally to me or internally to themselves between vocal exercises (“How was that?” “Where did you feel that in your body?” “Does that feel sustainable?”), encouraging them to arrive at their own embodied experience of their desired sound rather than prescribing an ideal sound for them. Additionally, I promoted self-awareness by inviting the participant to take a mental snapshot of the physical sensations occurring when making their desired sound, reinforcing the participant as an expert on their own experience.

“Realizing there’s also a lot I don’t know about the voice from a pedagogy standpoint... we talked as a group about how most vocal ped is fixed on the gender binary and I have a lot of curiosity about what trainings and more current readings I could take on to better work with ...non-cis voices.” (March 21, 2021)

“It was reflected that this felt like a good direction to explore: re: gav and vocal function work. Also the idea of deconstructing the idea of the hierarchies of the traditional voice lesson and rethinking it as a collaborative play relationship...this really felt good.” (April 17, 2021)

### Music therapy and psychotherapy frameworks

As I consulted literature cited in previous GAV articles, I found potential overlaps extending to other music therapy and psychotherapy frameworks, notably Austin’s vocal psychotherapy technique of vocal holding. Other group members were exploring Internal Family Systems literature and introduced “parts” work into our sessions. These explorations involved experimenting with the notion of giving voice to different “parts” through music to facilitate emotional processing. This processing included considerations of the gender associated with each part, embracing the possibility that a person’s internal family could encompass parts with varying genders or no gender at all.

“I asked the group how they handle improvisation, and the technique of vocal holding was mentioned – the vocal psychotherapy tool of going between two chords, as a starting point. This feels like a more approachable way to gain more improv skills.” (January 22, 2021)

“We discussed possible connections between this work and internal family systems therapy.... Based on our discussion it seems like there could be potential for using voice work to help assign expressions and interplay between the different ‘internal’ roles in all of us.” (January 22, 2021)

### Accessibility and embodiment

Accessibility and embodiment were also named as areas for future exploration throughout my time in the group. Our group was unique, as participants were highly trained musicians with deep personal relationships to music, flowing seamlessly between speech and song. Our group was also extremely verbal, engaging in rich discussion about theoretical concepts with ease. We acknowledged future clients may not feel the same ease and it will be important for practitioners to adapt accordingly.

I personally desired to further investigate embodiment, as I noticed the group tended to favor verbal processing. While this was sometimes necessary as we worked to clarify concepts, I had the sense we were avoiding something by remaining in the intellectual. When assuming the role of therapist, I noticed increased vocal freedom and emotional

release each time I encouraged participants to engage physically. As a participant, I found the experience of release came more readily when I allowed myself to go into music versus remaining in verbal processing.

“I keep thinking about ways to make the language and terminology and methods accessible to people who may not have a musical background or as thorough a self-awareness...” (October 11, 2020)

“Something I’m becoming increasingly cognizant of in the group is the amount of time we spend processing and intellectualizing....I think there is a level of knowing in the body that could be integral to this work, although I understand why the temptation to live in the head is there—bodies can be traumatic....there is a level of knowing and access and resourcing there that I think we can tap into more through music.” (April 1, 2021)

### ***Cracking the Egg: Personal Gender Identity and Ally Development***

Reviewing my year of journal entries, I noticed a thorough interrogation of my gender and ally identities begin to unfold. Initially, as I still believed I was cisgender, I entered the group grateful to be included and wanting to “help.” Because I had not yet articulated my authentic gender or expressed any embodied elements of social transition, I had not fully considered the potential for harm in the dynamic of this desire to “help” coupled with my embodied experience of assumed cis-ness. Reflecting on this potential harm now, I acknowledge my embodiment and assumed cis-ness may have impacted feelings of safety among group members, though to my knowledge, this wasn’t the case at the time.

I recognize this valid point regarding safety (which was pointed out during the review process for this article), but I challenge the cissexism inherent in assuming my gender. This defaults to an assumption of inherent cis-ness (“cis until proven otherwise”), versus the idea that my gender was not fully known to me at the time, like the image of a veiled mirror or an explorer at the edge of a vast network of caves (Gumble, personal communication, November 13, 2023). While my presumed cis-ness wasn’t a major obstacle in the group, during my first GAV meeting a group member graciously pointed out my well-intentioned desire to “help” is not only othering, but prevents me from recognizing the influence of cissexism on my own experience. (September 25, 2020).

Concurrently, I was in a course covering social justice issues in music therapy, including the process of ally identity formation. Reflecting on an Edwards (2006) article covered in the class, early entries echo an “aspiring ally for altruism,” the second of three stages in ally identity development. Strong emotional responses emerged as I recognized systemic oppression, which generated feelings of guilt and a desire to “help” in a paternalistic approach, aiming to empower the oppressed group rather than supporting them to empower themselves (Edwards, 2006, p. 50). Confronting these views, I began to “trouble the concept of helping” (Fansler et al., 2019, p. 13), experiencing another epiphany. My eagerness to help created a mental gap between myself and the trans “population,” hindering my presence to participants’ needs and my own gender wonderings. As a result, to mitigate potential harm, I continued self-education on trans and gender expansive culture, practiced awareness of the space I occupied in the group (de-centering of self, practicing “make space, take space”), and processed challenging personal feelings in personal therapy and supervision.

As suggested by group members, I also spent time in self-reflection on my own gender identity. I noticed tension in how I embodied gender across diverse contexts, including work, social, and clinical settings. Notably, in my conservative workplace, I found myself feeling safest adopting a receptive, accommodating role. However, this came at the cost of internal discomfort, described as “femme-ing it up” at work, speaking at a higher pitch

with head dominant resonance. This inclination towards accommodation also manifested in early musical improvisations within clinical work, where I played mediator, filling in perceived “missing” harmonies or swapping voice parts to navigate the group dynamic. In contrast, within social settings, especially queer-dominated spaces, my femininity felt more authentically embodied, reflected in a spectrum of free-flowing speaking pitches resonating throughout head and chest.

By the end of my time in the GAV group, a significant shift occurred in my relationship with gender. My “egg,” a metaphor commonly used in trans culture to describe individuals in the early stages of their gender journey, had begun to crack (Griffin, personal communication, March 10, 2022). While the concept relies on assumed cisnormativity, it has also proved helpful in better understanding my experience. The delicate “shell” of repressed gender feelings gave way as I scrutinized my gendering of sound, presentation, and language, along with my self-perception of what was “male” and “female.” This prompted reassessment of my gender expression, guided by the pursuit of what felt most physically and socially authentic. Embracing body hair, experimenting with chest binding, adopting more masculine or androgynous clothing, and embracing she/they pronouns became integral to this process. While still connected to aspects of femme identity, I distanced myself from binary terms like “woman” and “ladies.” These successive gender revelations, or cracks in the egg, emerged from my immersion in the GAV group. As I began to synthesize these ideas, I recognized my initial desire to “help my trans siblings” was actually a misplaced need to nurture the “trans-ness” and “nonbinary-ness” within myself. To my surprise, I emerged from this experience a researcher fundamentally changed by the process of research.

“The thought then struck me: am I unintentionally othering those I am seeking to serve by wanting to ‘help’ them or single them out?” (September 25, 2020)

“I felt the urge to “perform” and accommodate and take up less space, as C asked me what accompaniment I would prefer. I discussed in the processing after session how I think this manifests in my voice. I find myself *femme-ing* it up at work, speaking higher pitched and with less breath and resonance to appear as accommodating and non-threatening as possible in a work environment where I don’t feel entirely comfortable. However, when flirting or interacting with friends in a space I feel safe, that higher pitched *femme-ness* feels more embodied and resonant...” (November 1, 2020)

“I find when we improvise, I become almost this petulant child - there is like this strong impulse that cries out and needs to be expressed and loved and I am always fighting that impulse because I’m afraid I’m too much ...I even noticed myself almost taking on role of mediator between the person improvising in a high space and the other person in a lower pitched chest space. I often found myself harmonizing in the middle, or singing with one person briefly and then going back and forth.” (January 30, 2021)

### **“When Will I Find Home in My Body?": The Emotional Nature of GAV**

GAV sessions often unfolded as emotionally charged experiences, regardless of role. As a participant, I navigated the roller-coaster of my personal gender awakening amid challenging internal dynamics. I felt excitement at engaging in meaningful and novel music therapy work coupled with uncertainty about the implications of my newfound identity, shame regarding perceived “late-blooming,” questions of “trans enough-ness,” and frustration at being unable to share these discoveries with transphobic family members. As a therapist and observer, the convergence of highly musical backgrounds, small group size, and a focus on profound questions of gender and identity facilitated heightened moments of vulnerability. This mutual sharing and bearing witness fostered a

strong bond among group members, enabling us to delve deeper into improvisation and be more emotionally present with each other.

Many journal entries vividly captured the charged nature of initial experiences as both a recipient and practitioner of music therapy. Participating in GAV interventions, particularly toning and vocal improvisation, appeared to hold and amplify emotions in a way that verbal processing could not. Assuming the role of a student therapist, I grappled with the anxiety and exhilaration of translating classwork and research into practice, often experiencing deep emotion and empathy in response to other participants.

Reflecting on the seemingly inherent emotional intensity of GAV, I contemplated the sustainability of this practice. I wondered what GAV could look like with clients at varying depths of practice, either because the client is not ready for deep emotional work or emotional processing exceeds the practitioner's scope. I recalled Gumble's early explorations of liminal space between song/speech and physical/psychological as they engaged with speech-language pathology and vocal function work. I pondered how elements from these disciplines such as conversation training or reciting poetry could be utilized instead to support client goals while honoring client and practitioner boundaries.

"[It was] very emotional to observe the repeated phrase 'When will I find home in my body?...' We got into a deep discussion after as we were all pretty affected by this session. P also reflected the irony that 'feeling grounded in their body right now feels worse than disassociating...'" (October 11, 2020)

"This was an emotional session to observe. I am realizing that this work is very vulnerable and emotional and requires a trusting relationship between therapist and client. Obviously this experience is different in our research group as we rotate roles of therapist/client, but I am already thinking about ways we can make this a more sustainable practice." (January 22, 2021)

"I am wondering about when sometimes clients are too tender or too raw or too overwhelmed to work on the deep emotional stuff, if it is possible for us to develop interventions and exercises that require less emotional buy-in but can still help clients access affirming vocal expression? I am thinking about...drills that could be practiced or worked on with clients that don't have as much emotional attachment – i.e. reciting a coffee order, common phrases a person might use on the phone in work or personal life. I am wondering if those could be drilled and practiced and then slowly interwoven with emotional states, even as a role-playing or as-if exercise." (January 22, 2021)

### ***"More Than a Handbook": Best Practices in Music Therapy With LGBTQ+ Clients***

In alignment with earlier themes of allyship and gender, my thinking around music therapy with LGBTQ+ clients was also radically reconfigured by my time in the GAV group. While immersed in the practicum, the group was invited to contribute to an upcoming handbook on queer and trans music therapy, but after thoughtful deliberation declined to participate. The subsequent reflection offered pivotal insights, reshaping my understanding of cultural humility and best practices with LGBTQ+ clients.

In our 2020 discussion, the group grappled with concerns about the handbook concept. First, was the distinction between queer music therapy as a theoretical practice and a population-focused approach. In the opinion of our group, the fact that one identifies as queer or works with queer-identified clients does not inherently translate to the practice of queer music therapy. Further, we discussed that a population-focused approach might oversimplify a rich queer theoretical orientation to the query, "How can I treat the LGBTQ+ part of you?" (Inmon, personal communication, September 27, 2020). The

second concern voiced in the group was the handbook's potential to dilute diverse queer and trans experiences into a monolith of protocol and pathology. Lastly, there was a concern that an excessive focus on queer and trans trauma diverts focus from the broader systems (cis-tems) of bioessentialism and cisnormativity which harm everyone (Inmon, personal communication, May 1, 2022).

I present these critiques to honor our process at the time while acknowledging that our stance inadvertently contradicted the theoretical foundations on which GAV was built. In conversation with Gumble, they noted their perspective has since evolved, expressing discomfort with our binary decision-making—the stark yes/no, right/wrong—contrary to “the very thing[s] that queer theory aims to reject, unsettle, and complicate.” By refraining from participation, we missed an opportunity to apply queer theory through dialogue with mostly queer and trans colleagues (Gumble, personal communication, December 29, 2023).

“Several issues were raised that were interesting to me, firstly the idea that Queer Music Therapy (theoretical orientation) and music therapy with LGBTQIA+ folks or practiced by an LGBTQIA+ therapist are not the same. Secondly, the idea that the well-intended idea to develop a handbook is reducing queer and trans folks to pathology and criteria when there are a MULTITUDE of queer and trans experiences that are individualized and unique.” (September 27, 2020)

“...Queer and Trans people are more than a set of rules and protocol, and the scientific basis of our field contributes to pathologizing anything outside of the white cisnet norm.” (October 27, 2020)

“We talked a bit about the implications of the book, if our inclusion in the book would mean our more radical ideas of queering would get watered down into something we didn't feel great about, or if by including some version of our work in the ... book would contribute to representation.... a student might pick it up, see our chapter and say “THAT'S ME”—much like my experience of ...finding a book of like-minded therapists when I picked up Sue Hadley's *Feminist Music Therapy* book.” (October 27, 2020)

### **Queering Music Therapy in Practice**

Befitting queer theory, this theme overlaps with those previously presented yet contains distinctive nuances warranting separate consideration. Elements of the GAV group experience served as a tangible manifestation of what queer music therapy practice could be. Operating within a nonhierarchical model, the group comprised a dynamic mix of post-baccalaureate, graduate students, and alumni alternating between the roles of participant, therapist, and observer. This queering of traditional roles aimed to minimize distinctions and maximize flexibility. Even with the inclusion of the creator of GAV, who could have been considered expert due to their knowledge and experience, every group member was equally valued, and their contributions were embraced throughout the process.

While efforts were made to minimize differences in terms of hierarchy, differences were celebrated concerning gender and sexuality. Although we experienced varying material conditions due to differing embodiments of gender and sexuality, our practice was united by a shared goal. A poignant memory is my final session in the group (April 21, 2021) when I assumed the role of therapist, guiding D as they navigated vocal function work in their journey of adapting to testosterone. Despite my experience as a voice teacher, this marked my first encounter with a singer undergoing a testosterone-dominant “second puberty.” Rejecting hierarchical dynamics, I aimed to lead the session while centering D as the expert on their unique experience. The result was a beautifully queered fusion of guidance and collaboration, where I drew upon my repertoire of technique exercises and incorporated D's feedback to craft a collaborative, liminal space for exploration.

“However, this was a good reminder that every trans person’s experience is unique and I will need to continue to remind myself that I want to work alongside my trans siblings, rather than above or below them...” (September 25, 2020)

“Several issues were raised that were interesting to me, firstly the idea that Queer Music Therapy (theoretical orientation) and music therapy with LGBTQIA+ folks or practiced by an LGBTQIA+ therapist are not the same.” (September 27, 2020)

“We are taking a more fluid approach to who leads and who observes, etc. this semester.” (January 23, 2021)

“...the idea of deconstructing the idea of the hierarchies of the traditional voice lesson and rethinking it as a collaborative play relationship... (April 21, 2021)

## Discussion

In addition to the themes presented, this article offers potential avenues for expanding music therapy pedagogy and student practicums. The role-shifting model allowed me the uncommon opportunity to experience music therapy as an undergraduate, something that is not always available to students due to financial, geographical or schedule limitations. The mixed-level group also enriched my learning experience with diverse perspectives, prompting reflections on the potential impact of such practicums on undergraduate music therapy education. What kind of epiphanies would emerge if students had access to this type of practicum earlier in their education?

While this role-shifting model may raise ethical concerns related to dual relationships, I found this to be reflective of the many dual relationships already present in our field. Learning in this liminal space helped me to embrace complexity and disrupt fixed ways of thinking about professional relationships in music therapy. Seeking insights on this topic, I referred to Mary Priestley’s work on Analytic Music Therapy training, which is closest to the current GAV model. Priestley writes of the “discomforts and inconveniences” of intertherapy (Priestley, 2011, p. 371) and how the process invites therapists to empathize with their clients, but does not address potential ethical challenges. Further research on ethical dilemmas is needed.

This research is limited in several ways. First, the bias of the researcher is inevitable in an autoethnographic account. I have done my best to provide thick and transparent descriptions of my sociocultural location as well as my experiences in sessions to be as evocative as possible. Additionally, while members of the group identified along the spectrum of gender and sexuality, all members were all of endosex experience (meaning they are not intersex) therefore we were unable to directly consider intersex embodiments and their relationship to gender (Inmon, personal communication, May 1, 2022). Finally, although participants held various intersecting marginalized identities as they relate to gender and sexuality, all participants in this group identified as white and descendants of primarily white, European settlers of Turtle Island (also known today as North America). As GAV develops, research involving clients and therapists of the Global Majority<sup>5</sup> is of critical importance. The next limitation involves time and timing. As GAV is an emerging method in continual development with a fluid theoretical orientation, it is possible the method will have shifted after this fixed text is complete, or even before. My time in the group was also limited to an academic year, which limits the depth of my experience and understanding. The final limitation is the method of delivery. While telehealth has many conveniences (geography, pandemic concerns, and ability to voice in a client’s preferred environment), virtual therapy can limit music-making and relational possibilities.

Gender affirming voicework contains many areas for future research, which is essential

as GAV continues to develop in theory, techniques, and training. Future exploration is needed regarding the assessment process and understanding client experiences within this innovative method. Additionally, GAV remains unexplored in various sociocultural contexts, such as cis women navigating vocal changes during menopause or individuals seeking voicework after experiencing vocal trauma or significant life transitions. The potential for interdisciplinary research, such as integration of GAV with speech therapy, vocal pedagogy, and other creative arts therapies, adds exciting potential avenues for future application of this innovative practice.

Adams and Holman Jones (2008) write that autoethnography “hinges on the push and pull between and among analysis and evocation, personal experience, and larger social, cultural and political concerns” (p. 374). In exploring my journal entries, I observed this intricate interplay as I navigated introspective inquiries about identity as well as broader ideas involving understanding and enhancing music therapy practice. Participating in GAV work led me to delve “deeper inside [myself] and ultimately out again” (Adams & Holman Jones, 2008, p. 375), fostering the nurturing of my own “nonbinary-ness” and the formulation of an early philosophy of practice.

Simultaneously, I find myself undergoing a transformative “unhinging” as I question what “counts” as a researcher, student therapist, and an individual exploring their gender (Butler, 2004). This process of becoming unhinged expands as I confront ideas of “helping,” my personal understanding of gender, and rigid ways of thinking. The reflexive unhinging I experienced was facilitated by the openness of the GAV group and their commitment to “constantly become” together.

While this article is constrained to a fixed medium, I want to acknowledge the fluidity of my journey. My performer part desires a linear coming out story, neatly transitioning from cis to trans in a well-constructed narrative. However, the reality is far more complex and dwells in the spaces between. At this moment, identifying as “nonbinary femme” feels apt, yet I hold space that this may change, as might the language we use to describe gender in the future. I offer this fixed text as a contribution to the ongoing process of uncovering and reshaping that marks the pursuit of queer knowledge.

In the spirit of Gumble’s research (2019a, 2019b, 2020), I invite the reader into dialogue with a series of reflective questions. As we envision the future of gender affirming voicework, I wonder:

- What else needs to become unhinged? What fixed ideas must be dismantled as students, scholars, and therapists to fully embrace the complexity of our practice and the individuals we support?
- How do cissexism and bioessentialism impact music therapy culture? How can we address these oppressive systems in our research, teaching, and practice?
- How can music therapists broaden their practice in ways that embrace queering?
- What does it look like to *constantly become* alongside those we support?
- What can all music therapists, regardless of gender identity, learn by examining their gender and embodiment and how might that self-reflection transform their work?

In this space of wondering, much like my teacher and I in a rehearsal room or the GAV group in a Zoom meeting, I leave the reader with these words from the prophetic Black queer author Octavia Butler:

“All that you touch  
You Change.

All that you Change  
Changes you.

The only lasting truth  
is Change

God is Change.” (Butler, 2016, p. 1)

## About the Author

**Madge Dietrich** (they/she) is a New York City-based artist and board-certified music therapist, dedicated to fostering connection and encouraging authenticity. They hold degrees in Music Therapy from Slippery Rock University and Musical Theatre from Oklahoma City University, with additional training in Levels 1 and 2 of Gender Affirming Voicework. As a Circlesong facilitator and community musician, Madge promotes inclusion in spiritual and community spaces. Their original music, including the latest release *WILD HEART*, is available on all streaming platforms. Learn more at [www.madgedietrich.com](http://www.madgedietrich.com) or follow @madge\_music on Instagram.

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<sup>1</sup> LGBT/LGBTQ+/LGBTQIA are various forms of a generally understood acronym for Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex and Asexual identities. The abbreviation 2S is sometimes added in recognition of two-spirit identities from Indigenous cultures. The plus sign (+) is also often added in recognition of all non-heterosexual, non-cisgender identities not otherwise named. (GLAAD 2022, UCSF, n.d.).

While the AMTA Standards of Clinical Practice includes guidelines for culturally competent assessment practices and non-discrimination against protected minorities (including gender identity and sexual orientation), my lived experience continues to reveal to me a lack of consistent understanding of this terminology in our field, most notably conflation of sexual orientation and gender identity.

<sup>2</sup> While APA style dictates that when there are three or more authors that they should be cited as Author et al., in the queer spirit of non-hierarchy and radical inclusion, I name all contributors the initial time I reference them.

<sup>3</sup> Transgender or trans (abbreviated) is an adjective used to describe people whose gender identity or expression differs from the cis-normative expectation of their sex assigned at birth, have a gender outside of the male/female binary, or have multiple or no genders (GLAAD, 2022, UCSF, n.d.; Inmon, personal communication, 5/1/22). Transgender is used as both an umbrella term and a specific identity label. This umbrella can include gender non-conforming, genderfluid, genderqueer, two-spirit, nonbinary, and other culturally specific terms for these identities. Trans people may also use additional identity labels to more specifically articulate their gender (GLAAD, 2022).

<sup>4</sup> Femme is a queer identity for a person of any or no gender that has an intentional relationship to femininity. It is unique to each person and not synonymous with “female.” Like many of the terms presented in this case study, this is not a monolithic definition (Shewan, 2019).

<sup>5</sup> Global Majority is a term from decolonial scholarship that includes “people who identify as Black, African, Asian, Brown, Arab and mixed heritage, are indigenous to the global south and/or have been racialized as ‘ethnic minorities’” and was coined to “reject the debilitating implications of being racialized as minorities” and serve as a more accurate descriptor of those once labeled ‘ethnic minorities’ (Campbell-Stephens, 2021, p. 4).