

**REIMAGINING CONSTRUCTIONS OF GENDER DYSPHORIA:
A DUAL SYSTEMATIC REVIEW USING ANALYTICAL
PSYCHOLOGY'S CONCEPT OF INDIVIDUATION**

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ABSTRACT

The process of conceptualization has long served to capture and represent our perceptions of the social world. Conceptual categories help to make sense of subjective experiences, and through discursive practices may come to construct conventional frameworks of knowledge. Consequently, frameworks operating as natural and immutable run the risk of ignoring the dynamic and diverse experiences of many individuals. Today, conceptual frameworks for gender identity are found as inadequately representing progressive social views on the existence of gender identities manifesting outside of the prevailing male-female binary.

Within this space of conceptual contention, the diagnostic category of gender dysphoria has received considerable inspection and critique. In particular, it has been criticised as fundamentally controversial by classifying issues of identity within a clinical framework and, consequently, as contributing to the pathologization of all gender diverse individuals. Thus, efforts to reconceptualise and reimagine gender dysphoria may be found. In this research the concept of individuation, as understood within a framework of analytical psychology, is discussed as a potential consideration in reimagining the concept of gender dysphoria.

An overarching framework of social constructionism was adopted within this research in examining how constructions of conventional knowledge come about through regulatory discursive and performative practices. The theoretical orientation of analytical psychology was used to frame the concept of individuation and its application to gender dysphoria. This perspective consulted queer theory as a further critical orientation toward the construction of gender identity. The chosen methodology took form as a dual systematic review using critical interpretive synthesis (CIS) to construct representative frameworks. Psychological literature on gender dysphoria (review 1) and individuation (review 2) was reviewed and synthesised. Review 1 identified conceptual inferences within the literature and assessed their role toward problematic gender discourse, while review 2 served as a contributory tool to critically assess whether the conceptual space was accommodating of the concept of individuation.

Findings in review 1 identified contemporary gender dysphoria literature as reinforcing of problematic gender discourse. The prevailing clinical framework on gender dysphoria and gender nonconformity was iterated through conceptual constructs emphasising an experience of pathological distress or life dissatisfaction. As such, a cyclical pathologization of gender diversity is reconstructed through current representations within the literature. However, it was deduced that there are signs of resistance in the literature to the clinical model which challenge and counter the impact of problematic gender discourse.

In review 2, individuation was framed by the literature as an intrapsychic facilitator supporting the integration of all aspects particular to the individual personality so that conscious identity becomes congruent with internal nature. Resultantly, one may experience psychosocial maturation and contribute to collective societal progression. For some, individuation prompts a differentiation from collective expectations in integrating one's inherent nature into expressed identity. Thus, gender nonconformity may be viewed as an expression of this differentiation when individuation drives the realization of this feature to be intrinsic and natural for the individual. Individuation was determined as incompatible with the category of gender dysphoria, but of value within the conceptual space where efforts to reimagine gender dysphoria are in place.

Keywords: gender dysphoria; individuation; gender nonconformity; conceptualizations; analytical psychology; Jungian; systematic review; critical interpretive synthesis; social constructionism.

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NOTES ON TERMS AND DEFINITIONS USED

The archetypes: Collective psychic patterns built up from generations of lived experience that act as guides for human experience (Beridha, 2016). “The archetypes make up the *collective unconscious* and act to channel our perceptions and thought processes in ways similar to those of our ancestors” (Rybak, Russell-Chapin, & Moser, 2000, p. 154).

Brahman: The life force encompassing all forms of existence as the universal soul – may be interpreted as similar to the concept of the collective unconscious. The process of *individuation* fosters connections with Brahman by prompting a reorganisation of ego consciousness (Chakkarath, 2011).

Cisgender: An identity indicating that one’s internally experienced gender identity is congruent with their assigned *sex* (physical) features (Leibowitz & de Vries, 2016). It is the corresponding opposite of transgender. The term is becoming increasingly popular to raise awareness of the substantial prevalence of identities which do not share in this congruence.

The collective unconscious: The psychic counterpart of collective human inheritance comprising the collective experiences and knowledge humanity imparted to all. Just as the body has an anatomical prehistory of millions of years, so does the psychic system (Jung, 1961/1963, p. 348).

Ego: The representative of conscious, subjective awareness. Simply put, the ego is the view which one has about themselves and the associated feelings, both conscious and unconscious, towards this standpoint (Hopcke, 1999).

Gender identity: For the purposes of this thesis, gender refers to one’s subjective sense of being man, woman, both, neither or other (Boland, 2017). This identity is realized through an intrapsychic awareness which may be independent from physical anatomy or sexual characteristics. As such, this *gender experience* may not necessarily conform to prevailing expectations of gender development.

Gender binary: The gender binary is the hegemonic framework of gender development representing exclusive categories of male-female. The binary is directly related to physical anatomy in determining the norms and expectations for gender identity and expression. It has been determined that the gender binary is unhelpful in accounting for gender diversity (Gregor, Davidson, & Hingley-Jones, 2016).

Gender diversity/gender nonconformity: For the purposes of this thesis, individuals conceptualized as gender diverse or gender nonconforming express identities which are not defined by any particular set of predetermined gendered features. Thus, they may present with an identity which is fluid and nonspecific.

Gender dysphoria: A diagnostic label given to those individuals determined to be experiencing significant distress or dysfunction due to their internally experienced gender identity being inconsistent with their assigned gender at birth. The gender dysphoria conceptualization is considered contentious as it presupposes internal distress from an incongruent gender identity as informed by the “cisgender assumption that normal people remain in the natal sex (cis) and that disordered people change (trans)” (Lev, 2013, p. 289).

Gender experience: A subjective self-awareness of one’s association, or lack thereof, with available gender categories that is personal and distinctive for the individual.

Gender identity disorder/transsexualism: Precursor diagnoses found within previous editions of the DSM ultimately reconstructed towards the current concept of *gender dysphoria* in the DSM-5.

Gender incongruence: A term used to describe a *gender nonconforming* individual who experiences a marked disparity between their experienced or expressed gender with the gender, and its associated societal expectations, which they were assigned at birth (Beek, Cohen-Kettenis, & Kreukels, 2016). Gender incongruence is a principle notion informing the diagnosis of *gender dysphoria*.

Individuation: The process of developing the psychological individual. It is the process facilitating our realization of who we are meant to be by distinguishing the individual’s nature from a prior state of undifferentiated *ego* consciousness. Individuation is driven by the *psyche* to integrate the disparate aspects of personality residing in the unconscious into a well-functioning, harmonious and cohesive whole (Ciúin, 2016). Through individuation, the individual is found to be positioned in significant and meaningful ways to collective society and experiences considerable psychosocial growth (Beridha, 2016).

Intersex: A term used to describe those born with ambiguous *sex* features which confound the expectations of gender identity perpetuated by the *gender binary* model. Thus, bodily presentation may manifest potentially with both female and male characteristics (Marinucci, 2010).

Performativity: Repeated acts of behaviour within a highly rigid regulatory frame which become static over time and, consequently, come to constitute conventional constructions of social reality (Phoenix, 2017). As such, gendered behaviour is performed accordingly through the coercion of social expectations rooted in restrictive frameworks; this serves to regulate these social norms as natural and conventional.

The persona: “Dissonance between objective and subjective identity may give rise to feelings of inauthenticity and it reveals what Jung calls the Persona or external social role a person is identified by and perhaps identifies with. Because the superficial Persona hides an individual’s complex internal identity, it can be thought of as a mask” (Beridha, 2016, p. 18).

The personal unconscious: The personal unconscious refers to the experiences and knowledge perceived by the particular individual, but not accepted or in alignment with their conscious thought (Rybak et al., 2000). These experiences may reside in unconsciousness due to the perception that they are unimportant or shameful.

Psyche: The psyche constitutes the entirety of nonphysical life, “both rational and irrational, both personal and collective, both conscious and unconscious” (Hopcke, 1999, p. 37). The psyche consists of three core constituents: consciousness, *the personal unconscious* and *the collective unconscious*. For its telos, the psyche drives the individual towards archetypal patterns which constitute an a priori blueprint of integrated wholeness and harmony (Young, 2018).

The Self: The Self is the sum totality of the psyche. It is a term that describes all aspects of the person, conscious as well as unconscious, and differs from the *ego*, which is limited to only conscious information (Rybak et al., 2000). The Self may be viewed as the objective witness of the individual’s overall identity – preceding ego consciousness and encompassing the entirety of the psychic individual (Edinger, 1992).

Sex: For the purposes of this thesis, sex refers to the physical features with which one is born. These sexual features are distinguishable from *gender identity* which itself is not necessarily associated with physical anatomy.

Shadow content: Personal and collective aspects of *the unconscious* which have been repressed within as intolerable, opposing or overwhelming to our *ego* consciousness (Young, 2018).

Transgender: An umbrella term representing various identities in which internally experienced gender identity is specifically different from the assigned sex (physical) at birth. This often manifests as identification with the opposite binary category but may also refer to an identity which is nonspecific – as with those identities distinguished as *gender nonconforming* or *gender diverse* (Levy & Lo, 2013).

Transvestic fetishism: A diagnosable paraphilia in which the individual is distressed by the experience of cross-dressing as a form of sexual interest and arousal. This is distinguishable from attempts to match internally experienced gender identity or the act of cross-dressing for entertainment purposes (Berlin, 2016). The association of transvestic fetishism with gender nonconformity has been identified as problematic (Defeo, 2015).

Ubuntu: “A Zulu term for a sensibility common to sub-Saharan Africa...It is a person’s sense of community, of responsibility toward others, both living and dead, and toward the wider world at large. Ubuntu is a term that defines what it is to be a person, where being a person is both a given and a task of self-realization” (Brooke, 2008, p. 49).

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Chapter 1: An Introductory Background

Introduction

The conceptual space of *gender identity* is subject to much contention and debate within the contemporary social world. In particular, many have come to criticise the relevance and limitations of prevailing gender conceptualizations as no longer representing progressively expanding social views of gender as a non-deterministic aspect in identity (Moral, 2016; Phoenix, 2017; Richards et al., 2016). As such, constructions of gender identity may be found as increasingly unrelated to aspects previously considered as conventional indicators of gender identity such as one's sexual (physical) anatomy. However, gender identities deviating from enduring social expectations of 'normative' gender expression are still classified within clinical systems where *gender nonconformity* is treated as a psychological or physical misalignment from typical male-female models of identity (Lev, 2013). This may be seen in the diagnostic category of *gender dysphoria* – a clinical term describing a state of internal distress rooted in the experience of a nonconforming gender identity. This approach to gender identity has been contested as problematic by its stigmatizing effect on those identities outside of orthodox gender categories (Gregor, Davidson, & Hingley-jones, 2016; Moleiro & Pinto, 2015; Steensma, Wensing-Kruger, & Klink, 2017). Consequently, this has led to continued polarisation within the conceptual space of gender identity where individuals are found to challenge hegemonic frameworks regulating current notions of 'normality' in gender.

Given the difficulties faced in the conceptual space, frameworks and knowledge on gender identity appear to be in a state of urgency for reconceptualization. Indeed, popular gender conceptualizations have been under critical inspection and debate in attempts to flesh out their inconsistencies with expanding social views on gender identity, and as a means of challenging the problematic notions implicated in current understandings (Moleiro & Pinto, 2015; Muehlenhard & Peterson, 2011). Within this conceptual space, the efforts of practical and theoretical initiatives may prove helpful in constructing emergent knowledge which reflects the progressively expanding social views of gender identity. One such theoretical contribution may be found within a contemporary analytical psychology perspective towards gender identity. Specifically, the concept of *individuation*, a term describing an intrapsychic process of developing the psychological individual, may be helpful in this conceptual space. This concept will be discussed in detail as a primary feature of this thesis.

Subsequent discussion will explore the nature of conceptualization and the processes typically involved for reconceptualization to occur. A look into gender as a conceptual social construct will then be discussed and followed by a perspective on gender as being pathologized through particular

socio-cultural practices. The introduction will then continue by discussing the rationale for the current research and its paradigmatic underpinning. Lastly, an overall outline for the structure and development of the thesis will be given.

On the Nature of Conceptualization

Human history is filled with countless examples where conceptualization has attempted to represent social reality through the use of linguistic signification. Arguably, these conceptualizations have formed with the principle desire to portray objective truths within the world as accurately as possible. Yet, the aspiration to conceptualize phenomena objectively cannot negate the inherently biased nature characterising this process (Lawson, 2016). Indeed, the framing of social reality is always predisposed to the conceptualizer's specific purpose for desiring conceptualization – informed by their epistemological orientation and by conventionally accepted forms of knowledge. However, McCray (2006) asserts that while this bias is intrinsic in the construction of conceptual knowledge it does not immediately diminish a conceptualization's validity or usefulness. Rather, an acknowledgement of this bias and addressing the associated implications should continuously appraise the construction process. Moreover, Epstein (2016) argues that during the process of conceptualizing the social world it remains fundamental to avoid causal frameworks which are clearly distinguishable from those describing the nature of being. Thus, in the conceptualization of social phenomena these remain pivotal guiding principles to uphold.

The act of conceptualization is an instinctual process which occurs when one is attempting to make sense of surrounding social phenomena. Conceiving of the world through conceptual and categorical signifiers gives a tangible means of interpreting and internalising our experiences; allowing conventional understandings and meanings to be established and relied upon (Goldstein, 2015). As such, inferences may be drawn from these conceptual categories with relatively little conscious thought, and this automatic cognition may reinforce fixed perceptions of social reality. Consequently, the retrieval of information about these categories is largely unquestioned, and becomes reliant primarily on availability rather than critical appraisal. The social consequences of this mental representation bias and heuristic approach to retrieving information may be particularly harmful in perpetuating social divides (Wyer, 2008). Furthermore, conceptual fixation may become absolute and run the risk of essentialism. Kiguwa (2004) argues that such essential conceptualizations may serve to construct or reinforce oppressive social systems as being natural aspects of reality and, as such, become immune to scrutiny. It is prudent then that our intuitive conceptual processes are examined and open to criticism regarding their effects for individuals in the social world.

The motion to reconceptualise fundamental understandings of human existence involves significant individual and collective processes often in the face of great resistance. Investigating the conditions for conceptual change lead Lee, Chai, Tsai, and Hong (2016) to conclude that epistemic interrogation and expansion are prerequisites for reconceptualising conventional ways of knowing. As such, they propose that a knowledge building approach, in which active collaborative knowledge generation precedes passive learning, is useful in prompting such epistemic reorganisation in individuals and, ultimately, fostering the conditions for conceptual change. However, in their study of emergent knowledge, Heyd-Metzuyanim and Schwarz (2017) established that for individuals to acquire such conceptual agency they must have access to contrary modes of discourse, and a perceived positioning of personal ability within discursive practices. Moreover, they discuss that major cognitive shifts in conceptual stance, and the resulting acceptance of new discourse, most often require an additional factor involving a conflict between thinker and the world. Indeed, Lorenz (2008) contends that conceptual change within the majority mindset typically occurs only in the aftermath of great social conflict arising from the use of conceptual identifiers to substantiate oppressive action. Within this psychosocial space it becomes more plausible that cognitive shifts and conceptual reorganisation may occur; both through the efforts of the marginalized to negate previous identity-based discrimination effects and through the culpability of the majority to make amends. Yet, since conceptual categories are interwoven within various intersecting socio-political structures they may become mired in serving the regulation of particular social systems (Lorenz, 2008; Moral, 2016). As such, reconceptualised knowledge and discourse may still be subject to great resistance from the majority when conventional ways of knowing are challenged. This remains a difficult task when addressing problematic conceptualizations that are accepted as infallible knowledge of the social world.

Locating the concept of Gender

In contemporary society there is an increasing prevalence of individuals utilising gender conceptualizations as a significant means of self-identification. Gender expression has become more prominent and ubiquitous, and defines a major aspect of the current era as recent research suggests (Boland, 2017; Beridha, 2016; Jones, Mendenhall, & Myers, 2016; Levy & Lo, 2013; Neale, Robbie, & Martin, 2016). The use of 'gender' as a term has become particularly prevalent in recent times. In their review of academic conceptualizations discerning the usage of the terms *sex* and *gender*, Muehlenhard and Peterson (2011) found the former to have decreased since 1960 despite having a usage history which was found prior to be 200 times more popular than the latter. Yet, while gender became more popular a term by the turn of the millennium it did not necessarily indicate a semantic replacement; the terms may have been used interchangeably depending on authors' perspectives. However, Lorenz (2008) argues that gender has taken on a more specific and widespread meaning since 1955 when psychologist John Money conceived of the term in a manner still adopted

predominantly today. This conceptualization expanded on gender as having a psychological component now defined additionally by the roles which individuals occupy in society, and came to be distinguished from, although still directly associated to, the use of sex in popular discourse. Consequently, sex appears to have become a term used formally to describe physical anatomy in isolation. Irrespective of any conceptual nuances, the rise in usage of gender may still be considered as reflecting a continuously increasing social awareness of gender identity as a prominent aspect of disclosing identity within the modern era.

The continuous rise in gender over the last few decades as a social concept has resulted in gender identity taking on a more comprehensive and dynamic character for many individuals today (Neale, Robbie, & Martin, 2016). Indeed, gender identity appears to be expanding beyond a traditional male-female binary with an increasing prevalence of individuals identifying themselves within the categories of “genderqueer” and “non-binary” (Richards et al., 2016, p. 96). Gender identities within these broad categories challenge a fixed *gender binary* system in which exclusive categories of male and female may be considered to ignore a wider spectrum of *gender experience*. These conceptual categories reflect the complex, rich development of gender within contemporary times as both a socially construed identity and as an important feature of self-expression.

The concept of gender categories existing outside the binary is not a unique feature of the modern era. Gender has been conceived of in various conceptual ways related to the defining characteristics pertaining to a given era. However, Western gender categories have been perpetuated typically as intrinsically deterministic in relation to one’s anatomical and chromosomal features (Levy & Lo, 2013). Yet, many examples of *gender diverse* identities are evident across historical records within African and Eastern cultural backdrops. Evidence of *transgender* interest and identities date as far back as 200 BCE, and may still be found today in many cultures which transcend the Western ascription of a male-female gender binary (Berlin, 2016). Furthermore, the gender binary, informed by biological determinism, falls short in explaining gender identity in instances where an infant is born with ambiguous or mixed genitalia. These individuals are categorised as *intersex* and have anatomical physicalities which confound gender definitions found within the binary. Yet, despite centuries of nonconforming gender presentation, various Western cultures have largely rejected ‘other’ categories of gender, while numerous indigenous societies have long expanded on the binary and oftentimes considered those with atypical presentation as having significant roles within society (Marinucci, 2010; McKenzie, 2010; Moral, 2016). These wider spectrum frameworks transcend the static presentations of gender identity prevailing in Western cultures by assimilating the ‘other’ as an accepted viability.

In locating a society's conceptual orientation to gender as a construct, it is fitting to expand on the influence of social and cultural backdrops. Moral (2016) asserts that the continued presence of differing gender frameworks and their relation to sexual anatomy across various cultures demonstrates that this aspect of identity is non-deterministic, and is a socially navigated and constructed concept:

“the organs and anatomical features in which each society invests sexual distinction, as well as the cultural meanings given to those organs and features, vary culturally and historically and may be categorized in a number of different ways, confirming that ‘biological sex’ is a discursive regulatory practice” (p. 797).

Thus, the existence of prevalent gender conceptualizations may be postulated as social constructions which have manifested in accordance with the dominant gender discourse in a given culture by making use of the associated linguistic signifiers constituting that very discourse. While this does not dismiss any role which biological features may have, it points rather to the knowledge constructed around the distinction given to these anatomical features within distinct socio-cultural backdrops. Extending this social constructionist perspective, Butler (2004) argues that through the coercion of dominant societal expectations, we perform our gender with according behaviours; thereby reconstructing the prevailing categories perpetuated by popular discourse. As such, the gender construct is perpetuated through reinforcing acts of *performativity* which conform to expected social behaviours indicated by the dominant discourse in a given society. Thus, it is significant to consider that gender conceptualizations may also be subjected to a process of social (de)construction as cultures and societies expand their discourse through adaptive linguistic progression.

Pathologising Gender

In the current era gender identity and its expression have become significant experiences for many individuals who are engaging in developmental processes of self-discovery and adaption. Gender identity may be considered as a central feature forming one's distinctive self-concept in the world today. Mishra, Punetha, and Dwivedi (2017, p. 1036) have defined the self-concept as “an organization (structure) of various identities and attributes, and their evaluations, developed out of the individual's reflexive, social and symbolic activities”. Gender takes form as one of these pivotal identities; manifesting within the relational world and contributes to beliefs about who we are and who we are meant to be. Likewise, Butler (2004, p. 100) emphasises “how essential becoming a gender is to one's very sense of personhood, one's sense of well-being, one's possibility to flourish as a bodily being”. She contends that it is crucial to recognise gender as a significant feature of our self-concept in promoting the development of personal agency within the social world. Moreover, she cautions that individuals subdued by exclusive societal parameters on gender expression may be barred from actively engaging with a gender identity authentic to them, and that this has problematic

ramifications. Indeed, research conducted by Hajloo and Moghaddasi (2016) demonstrates that inhibited gender expression is predictive of high correlates of impaired mental health, interpersonal problems, and a trend towards maladaptive behaviour. Moreover, Jones, et al. (2016) found research participants who embraced dynamic, flexible gender identities and attributes to have developed more situationally appropriate coping strategies for stress. Clearly, gender identity is a significant feature of the self-concept that is intrinsically linked to one's overall well-being.

Despite the considerable impact of gender identity on the welfare of individuals and the recent expansion of gender categories in various social spheres, there appears to be little room for gender diversity in current Western models of gender identity. Specifically, “psychological discourses explaining gender identity issues sit squarely within a Western Eurocentric paradigm that sees gender as a binary concept” (Gregor et al., 2016, p. 342). As a consequence, gender identities outside of the binary may be viewed as experiencing developmentally awry conditions under the scrutiny of these narrowly constructed social categories (Muehlenhard & Peterson, 2011). Indeed, a gender model operating on a binary constructs exclusive categories of normality which discounts identities that do not fit inside this mould. As such, an ‘other’ gender identity may be seen as a deviance from these norms and may be pathologized as abnormal or disordered in the face of immutable gender categorization (Daley & Mulé, 2014). Lev (2013) challenges the concept of a disordered gender experience and contests that non-binary gender identities are perfectly ordered albeit in unconventional ways. However, she acknowledges that shifts in gender nomenclature are helping to acknowledge that, as both a biological fact and as a social construct, gender is dynamic and should not be conceived of under the lens of normality and pathology. Indeed, Phoenix (2017) argues that our linguistic and conceptual resources have certainly expanded in recent times and, as such, this may allow us to conceive of gender identity in ways which foster a more supportive environment for authentic self-discovery and expression.

Rationale for the Research

The motivation for this thesis derives from concern regarding the potential role of psychological literature within the conceptual space of gender identity. The impact of conceptual knowledge plays no small part in the construction, reinforcement or resistance of popular discourse and its emergent narratives. Subsequent chapters will explore these roles and establish the problematic implications of current gender identity frameworks for gender diverse individuals. To that end, this research endeavour hopes to contribute to a body of knowledge which seeks to reimagine gender dysphoria by transcending notions of normality or pathology within popular gender discourse. Specifically, this contribution will be informed by contemporary analytical psychology (Jungian) and its concept of individuation. Ultimately, this thesis aims to promote the rights of gender diverse identities whose

existence in the current social climate continues to be dehumanised by stigmatization and discrimination. Through critical theoretical works, such as this thesis, alongside collaborative empirical studies with gender diverse individuals and equal rights advocates the pervasion of pathology may be removed from the lives of *gender nonconforming* individuals.

The theory of analytical psychology was chosen specifically for this thesis for its ability to reimagine gender dysphoria, and to challenge discourse which otherwise imply abnormality or pathology in gender nonconformity. Principally, analytical psychology may be used to develop conceptual knowledge which focuses on the individual integrating all aspects of their unique personality into their expressed identity. This may include aspects of the personality formerly rejected or repressed due to societal and, consequently, personally internalized intolerance (Rybak et al., 2000). Fraser (2009) advocates for a contemporary Jungian perspective when working with nonconforming gender identities arguing that this perspective is far less concerned with pathology; instead it aims to assist the individual in accepting and integrating all aspects of their internal nature. As such, from a contemporary perspective, analytical psychology may account for the experience of gender nonconformity as a natural expression of this integration process should this feature be an intrinsic aspect of the particular individual's internal nature. Writing from an analytical psychology standpoint, Boland (2017) describes the experience of gender identity as intrapsychic and personal to the particular individual, and that this experience is separate from sexual (physical) assignment. Such an understanding detaches the notion of what might comprise normative gendered expression in the knowledge that there is no definitive norm to which comparison might be made. Thus, pathological gendered expression, a notion insinuated by diagnostic categories such as gender dysphoria, is not supported by this contemporary analytical psychology perspective and, as such, was appropriate for the purposes of this thesis.

A Paradigmatic Underpinning

The current thesis adopts an overarching framework of social constructionism located within hermeneutic constructivism. This perspective understands conventionally accepted knowledge to be impossibly infallible due to the biased and interpretive nature of perceiving reality through abstract conceptualization and representation (Burr, 2015). As such, conceptualizations of human experience, such as gender identity, are acknowledged to be the result of linguistically negotiated constructs limited to the enduring modes of discourse predominate within a specific social context (Raskin, 2002). These constructs constitute dominant epistemic frameworks which individuals may utilise in plotting their subjective experiences of social reality. However, when these frameworks become inconsistent with the subjective experiences and expanding knowledge of a substantial grouping of individuals, there is pressure for conceptual renegotiation to expand conventionally accepted 'reality'

(Moral, 2016). Consequently, these representative frameworks of social reality are challenged to be reconstructed so that they might accommodate the complexity and variety of human experience. This may involve a back and forth process of conceptual navigation to establish a comprehensive framework which captures progressing subjective insights of social reality. The construction of this conceptual knowledge may be directly reliant on frameworks of knowledge which remain fundamentally adaptive, flexible, and dynamic.

The theoretical orientation underlying the current research is found within a lens of contemporary analytical psychology. According to Brooke (2008), Jungian psychology, far more than other psychoanalytic perspectives, is rooted in principles which acknowledge our shared human experience while still being open to endless social and cultural diversity. As such, this perspective adopts an inclusive and dynamic approach to conceptualizing social phenomena by acknowledging the importance of the unique individual and the relevance of their personally subjective experiences within collective humanity. Agreeably, Fraser (2009) asserts that an analytical psychological perspective may be particularly helpful in constructing knowledge that supports the subjective experiences of diverse individuals. A key assumption within this perspective, and as postulated by the current thesis, involves the notion that the process of individuation plays a facilitating role in the conscious realization of one's internal nature, such as one's internal gender experience. This awareness of one's gender identity is fostered by individuation through which one integrates internal experiences into conscious identity expression. This point of theoretical departure informed the development of the current research, and will be discussed in detail in subsequent chapters.

Finally, this thesis borrows from queer theory in its critical orientation toward gender identity conceptualizations. McKenzie (2006, p. 403) discusses how queer theory may "be used in a dynamic way to describe identity under construction, in the act of becoming. In this sense queer is not an identity but is, instead, a critique of fixed identities". Importantly, queer theory is fundamentally against the legislation and regulation of identity (Butler, 2004). As such, a queer theory approach was consulted in examining how identity frameworks may be reconstructed in light of the adverse conditions brought on by legislative and clinical approaches to gender identity.

While the aforementioned paradigmatic orientations may appear as epistemologically incompatible, Willig (2013) contests that human experience is most often complex, multi-layered and multi-faceted; requiring a pluralistic approach in discussing the nature of these experiences. Thus, an integration of these various perspectives proved instead to be complementary within the complex realm of reimagining gender dysphoria.

Thesis Outline

This thesis will continue by exploring the literature on gender dysphoria and, by extension, the larger gender diverse community. Specifically, psychological literature will be used to establish a context underpinning the contemporary conflict faced by gender nonconforming individuals, health professionals and the conceptual space of gender dysphoria. A critical discussion of the history of clinical gender categorisation, issues faced by health professionals and the diagnostic process, and a breakdown in classification will follow.

Subsequent discussion will cover a conceptual backdrop of key constructs within analytical psychology and their association with individuation. Following this, individuation will be explored conceptually as a process within various contextual backdrops. This will provide a fundamental context for the application of the concept of individuation through this thesis. Thereafter, individuation will be discussed with reference to this process within gender identity, and the implications which individuation has for the concept of gender dysphoria. Discussion will then centre on the use of individuation in addressing the concept of gender dysphoria within the modern context.

Following these establishing chapters, the methodological procedures will be described and given motivation for their use. The methodological approach and aims, procedural outlines and the steps taken towards the findings will be discussed. This will assist in making the research findings and conclusions transparent. The research results will then be presented over two corresponding chapters with the provision of detailed answers to the research questions. This presentation will include the construction of a representative framework on both gender dysphoria and individuation as comparative foundations used for drawing conclusions.

Finally, a conclusion chapter will summarise the research process and review the research findings. Following this, limitations and strengths of the research will be discussed within the scope of the thesis. Future research and considerations will be then be suggested as possible endeavours to pursue. A concluding thought will bring the thesis to its end as the researcher reflects on the insights gained from engaging in the research process.

Chapter 2: Gender Dysphoria Contextualised

The previous chapter introduced a conceptual backdrop characterising the nature of conceptualization and the circumstances through which reconceptualization typically occurs. It was established that, as a socially constructed concept, *gender identity* has become increasingly prominent in contributing to one's self-concept, and that it plays an important role towards overall well-being. Within this rising social relevance, gender identity has become more dynamic and at odds with the static nature of prevailing gender categories. Moreover, this has led to a conflict where current gender frameworks are inconsistent with the subjective experiences of a *gender diverse* community, and that these frameworks may even come to pathologize nonconforming gender identities.

The following chapter will discuss a history of clinical conceptualization for *gender dysphoria* and the impact of diagnostic processes for these individuals. The role of health professionals will be given specific consideration within this conceptual space and the difficulties which they face. Lastly, signs of a breakdown in classification will be discussed as reflecting the current efforts towards a reconceptualization of gender dysphoria and gender frameworks.

A History of Clinical Classification

Since its inception the efforts of health professionals in conceptualizing *gender nonconformity* have been met with critical contention. Gender nonconformity refers to the experience of a gender identity that is not consistent with the expectations attributed within the *gender binary* categories of male-female. The experience of a nonconforming gender identity may be described as *gender incongruence* when there is a marked disparity between an individual's experienced or expressed gender with the gender, and its associated societal expectations, which they were assigned at birth (Beek, Cohen-Kettenis, & Kreukels, 2016). Gender dysphoria is the diagnostic term currently used to describe such individuals who are determined, using established diagnostic criteria, to be experiencing 'clinical distress' from their gender incongruence (American Psychiatric Association, 2013). Gregor et al. (2016) contest that the very idea of one's *gender experience* being diagnosable as a mental disorder is highly controversial. Indeed, the inclusion of gender nonconformity as having a disordered counterpart within the International Classification of Diseases Manual (ICD-10), and the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) has spurred significant contention. Lev (2013) summarises this discontent explaining that "De-centering the *cisgender* assumption that normal people remain in the natal sex (cis) and that disordered people change (trans) is at the root of debate regarding gender diagnoses in the DSM and the battle for their reform" (p. 289). The culmination of the contention surrounding gender dysphoria may be considered, considerably, as an unforeseen consequence of the attempts by health professionals to conceptualize gender dysphoria, and to provide

legitimation and access to further health care (Costa & Colizzi, 2016). Indeed, as will be discussed subsequently, a history of clinical categorization has had an adverse effect through legislative and regulatory practices permeating the experiences of gender diverse individuals.

It should be noted that two major diagnostic manuals for classification, as mentioned above, are recognised by mental health professionals at large within Western clinical practice: the DSM and the ICD. While the DSM is not the only popular diagnostic and statistical manual for classification, it has a significantly pervasive influence entrenched within medical, pharmaceutical, psychological, academic and other related fields. Indeed, Daley and Mulé (2014) describe it as a “powerful psychiatric tool” demonstrating the “depth and breadth of its impact” through its entrenchment across and within numerous spheres (p. 1290). As such, they consider it to be favoured by a considerably large body of physicians and mental health professionals in general. Consequently, it will be the primary focus of critique within this thesis.

The DSM-III was the first edition to use the notion of gender incongruence as a means to describe a psychological disorder within gender nonconformity. This was conceptualized through the diagnostic categories of *Transsexualism* and *Gender Identity Disorder of childhood (GIDC)* during this publication (American Psychiatric Association, 1980). Although this initial framework brought light to the prevalence of those individuals who were in a state of distress related to their nonconforming gender identities, it proved to be problematic. The established criteria were based solely on the decisions of those considered field experts and did not resolve to consult extensive literature or contested opinions (Beek et al., 2016). Furthermore, these conditions were classified under ‘psychosexual disorders’ – a prevailing, yet controversial, statement reflective of an era in which gender nonconformity was implied as being synonymous with sexual dysfunction and fetishism (Defeo, 2015). According to Winters (2012), this categorical grouping has led to lasting negative outcomes for the gender diverse community, and has served to legitimise prejudice and discrimination against them through the orchestration of political and religious extremist organisations. This initial conceptual classification may be considered as the inception of the struggles faced by gender diverse individuals in the subsequent years to come.

With considerable revision and the publication of the DSM-IV, *Transsexualism* and *GIDC* were conflated into a single diagnosis of *Gender Identity Disorder (GID)* under the category of “Sexual and Gender Identity Disorders” (APA, 1994, p. 493). This was a return to a framework insisting on gender being congruent with prescribed norms of sexuality, and diversity as being associated with sexual dysfunction despite the revised DSM III-R moving diagnoses into “disorders usually first evident in infancy, childhood or adolescence” (Daley & Mulé, 2014, p.1290). However, both conceptual categories were considered contentious and in need of reconceptualization. Beek et al. (2016) argue that clinicians found the former, as seen in the DSM III-R, to be inappropriate as many adults did not

present with the precursors necessary for a transsexualism diagnosis. Furthermore, Defeo (2015) cautions that the association of gender identity issues with *transvestic fetishism* implicated dangerous ramifications for nonconforming gender identities. Likewise, Lev (2005) contends that the latter conceptualization, as seen in the DSM-IV, was just as problematic since it conveyed the idea that a non-disordered manner of gender expression exists “and that all other gender expressions can be compared to that, and found not only deficient, but diagnosably mentally ill” (p. 47). The final publication prior to the current DSM-5 and its gender dysphoria conceptualization was a revised DSM-IV edition which received no changes in the GID classification model. As such, much time was devoted to “literature reviews, secondary analyses, research reports, draft versions published on DSM-5’s website for review and field trials” before the current conceptualization of gender dysphoria was established (Beek et al., 2016, p. 9).

Despite the consideration put into this gender dysphoria conceptualization, it may still be viewed as controversial as it continues to regulate and legislate the experiences of gender diverse individuals. Subsequent discussion will explore the problems associated with this conceptualization as it manifests within the diagnostic process.

Dichotomy in Diagnosis

The use of diagnoses in health care practices have long served to guide intervention approaches for psychological disorders and conditions in aims of providing appropriate care towards their management or resolution. Craddock and Mynors-Wallis (2014) recognise that a diagnosis may carry potentially dangerous implications in categorising individuals, yet argue that the use of diagnoses in mental health practices is becoming increasingly important and desirable for clients. They discuss the benefits of a diagnosis to include: clarity and reassurance about a condition, resolving feelings of isolation, a reduction in feelings of inappropriate guilt or cause, a reduction in feelings of stigmatization; and a legitimisation of one’s experience as being real and manageable. Furthermore, diagnostic classification may be considered to be a highly informative system necessary to promote intervention, treatment methods and, ultimately, the prevention of psychological conditions (Sadock, Sadock, & Ruiz, 2015). Gregor, et al. (2016) have explored the emotional experiences of parents with children receiving a gender dysphoria diagnosis, and discuss the impact a diagnosis may have in assisting those in a grieving period. They contend that a diagnosis may prove beneficial in promoting acceptance of the child’s gender identity and dealing with the loss of prior personification. This is made possible as a diagnosis assists in a stage approach which proposes “an ‘end goal’ or desirable, and indeed achievable, outcome” (p.343). There is some value, as suggested above, to be found in the use of diagnoses, as they may play a role in providing a framework through which *gender nonconforming* individuals may plot their experiences. However, these frameworks may only be

considered as helpful when they are constructed collaboratively with the subjective experiences of the collective gender diverse community.

Despite arguments for the relevance of diagnoses in clinical settings, there is considerable debate and resistance towards its potential utility in assisting issues related to one's unique identity. According to Hook (2004), the very way in which we come to accept and experience the world is a direct consequence of the conceptualizations purported by dominant discursive practices. It stands to reason that diagnostic conceptualizations prevailing in clinical discourse may also be accepted as 'natural' constructions of reality. Indeed, Lev (2013) asserts that "it is undeniable that diagnostic categories impact the social opinions of people with little knowledge or investment of the inner workings of psychological institutions that determine and define pathologies" (p. 292). As such, diagnostic categories may be perceived as unhelpful for gender nonconforming individuals when they are poorly representative of a larger community. Indeed, the gender dysphoria diagnosis relies on static gender binary notions which provide little room for diversity; presupposing that an incongruence with its exclusive categories is an indication of life dissatisfaction. Consequently, the diagnosis of gender dysphoria reinforces binary notions of deviance, and this may be cause for stigmatization from others. Indeed, Butler (2004) concurs that gender diagnoses may operate as tools by some to pathologize or marginalise individuals since these reinforce the notion that 'normative' gender identity is naturally exclusive. Agreeably, Gregor et al. (2016) state that in its current form, a gender dysphoria diagnosis implicitly reinforces static gender discourses and, consequently, solidify hegemonic ideals of gender role conformity and stereotypes that allow further room for stigmatization. As such, there is considerable argument questioning the role which clinical diagnoses may have for gender related issues.

The Conceptual Conundrum

Given the problematic history of clinical conceptualization, the conceptual space is found to be faced with a conceptual conundrum concerning the rights of gender diverse individuals. Costa and Colizzi (2016) assert that the continued efforts of organisations, such as the American Psychiatric Association, to classify 'gender dysphoria' are faced with balancing "competing issues of depathologizing nonconforming gender identity vs access to care" (p. 1953-1954). However, the historical impact of these gender dysphoria conceptualizations and the insistence of a diagnostic and clinical approach have resulted in unprecedented consequences for those desiring access to gender transition and reassignment healthcare. Such access is gained only once the concerned gatekeepers have been bypassed and a diagnosis of gender dysphoria has been acquired. Indeed, Lev (2013) acknowledges that there is significant pressure for conceptual validation through gender diagnoses before medical insurances and other gatekeepers are willing to permit such access. Butler (2004)

describes this conditional process as being highly problematic; contending that a diagnosis, as informed by current conceptualizations, may create conflict for such individuals seeking psychosocial, medical or political relief, as they must submit to prescribed criteria of pathological distress which may not necessarily represent their own experiences. Schulz (2018) asserts that this is still a central feature of the lived experiences of gender diverse individuals today who feel obliged to “perpetuate a personal narrative rooted in distress and body dysphoria, particularly in therapeutic settings [when] they are attempting to gain access to services” (p. 79). As such, a diagnosis currently implicates a pathological, stigmatized identity for individuals who are seeking access to further health care options, and invalidates subjective experiences which may differ from the constructed clinical criteria. Moreover, this discrimination may be widespread towards all individuals with nonconforming gender identities who may not benefit from this framework as they plot their subjective experiences. Indeed, these individuals may not experience distress in their nonconforming identity or desire further health care options to transition into cisgender identities.

Despite the requirement of the clinical gatekeeping process for access to gender transition and reassignment services, there is increasing pressure against the continued presence of the diagnostic process. Riley (2017) questions the very inception of gender identity diagnoses remarking that little scientific support was provided for original categories; placing subsequent nomenclature in somewhat similar contention. Agreeably, Winters (2012) also criticises the current paradigm of diagnostic categorisation commenting that “this punitive and scientifically capricious category maligns many gender variant people, including transsexual women and men, as mentally ill and sexually deviant, purely on the basis of nonconforming gender expression” (para. 4). In his commentary on the state of gender dysphoria concessions, Moser (2017) maintains that many individuals experiencing distress from a nonconforming gender identity find ways to manage their dysphoria without desiring a diagnosis, and criticises the DSM-5 for lacking discussion on those who encounter spontaneous remission or those who might lose a diagnosis through intervention methods. Furthermore, according to Schulz (2018), the DSM-5’s inclusion of a post-transition specifier insinuates the notion that those desiring and successfully undergoing gender transition procedures are still in a state of pathological dysphoria even in the face of satisfaction with their transition. These criticisms contextualise the significant conundrum which is encountered today within the conceptual space regarding the impact of gender diagnoses and the prevailing conceptualizations on gender dysphoria.

The Role of Health Professionals

The use of conceptual categories and diagnoses in representing the experience of dysphoria rooted in gender incongruence may be considered as problematic in the current conceptual space. However, the task still remains in constructing knowledge which provides a useful framework for individuals to plot

their experiences of gender nonconformity especially when there is distress involved. Yet, such knowledge should collaborate with gender diverse individuals in removing the stigmatization and pathologization currently implicated by conceptualizations grounded in the gender binary. Certainly, health professionals inevitably have a crucial role to play when individuals seek help in navigating their gender experience (Berlin, 2016). However, in their review on gender dysphoria, Gregor et al. (2016) argue that individuals experiencing gender dysphoria and their families typically find health professionals to be poorly informed on the matter entirely. They contend that the parents of children labelled with gender dysphoria are, conversely, the primary educators of their own clinicians. As such, the contribution which health professionals offer in conceptualizing and assisting in the experiential navigation of gender nonconforming individuals appears questionable (Dhejne, Van Vlerken, Heylens, & Arcelus, 2016). Yet, the responsibility of clarifying conceptual understandings and providing a diagnosis before further access to healthcare may be obtained is still placed on the shoulders of health professionals in the current climate (Costa & Colizzi, 2016). Consequently, health professionals are responsible in the co-construction of conceptual knowledge accepted within popular gender discourse. Thus, it remains essential that these conceptualizations become more inclusive of and informed by the expertise and needs of nonconforming individuals themselves as well as their family members.

Since the contemporary conflict of gender reconceptualization still ties health professionals to its course they may still be considered as partly accountable for assisting individuals in navigating their gender experience and managing any potential difficulties they may be experiencing. Steensma, Wensing-Kruger, and Klink, (2017) suggest that a benefit-harm analysis should be taken in a joint collaboration of clinician and client (including any relevant family members) before the avenue of a diagnosis is considered. They caution that a diagnosis made without sufficient insight into the uniqueness of the individual's case may cause many negative outcomes to be overlooked especially for those seeking reassignment procedures. As such, health professionals have a responsibility to generate dependable knowledge collaboratively with clients. This should speak to the nature of their experiences, and outline the potential risks that may associate any given benefit in diagnosis. Within this clinician-client relationship Berlin (2016) asserts that "respecting the legitimacy of feelings of gender dysphoria and the dignity of the patient should be mandatory for all physicians" since "many persons with gender dysphoria have been subjected to prejudice and abuse" (p. 247). Moleiro and Pinto (2015) attest to the widespread impact of this persecution stating that individuals with gender dysphoria must often navigate through abusive social, political and economic systems, and may even experience this within meaningful interpersonal relationships. Thus, the responsibility of the health professional may be considered as co-facilitating changes towards more empowering conceptualizations through collaborative knowledge construction so as to change problematic gender discourse. Specifically, health professionals may be considered important catalysts for challenging the

gender binary whose existence may be considered itself as a cause for intolerance towards gender nonconformity, and as a significant source of distress.

A notable risk in the responsibilities of health professionals within the conceptual space may be seen in the personal belief systems and assumptions of the clinician towards gender nonconformity. In collaborating with gender diverse individuals, it is essential for clinicians to remain mindful and informed on matters relating to gender nonconformity and gender dysphoria. Boland (2017) advocates for a therapy process that prioritises a reflexive and mindful approach with gender diverse individuals; confessing to the ease at which personal views and beliefs may influence the therapy session. She cautions that this act of personal projection leads to analytical carelessness, and may isolate clients by reinforcing categorical “pockets of ‘us vs them’” (p. 694). Thus, it remains crucial that health professionals be mindful of the limitations and dangers of personal attributions in influencing the therapeutic space. In remaining unaware of personal subjectivities or misconceptions, the clinician may inadvertently influence the interaction with gender diverse individuals in ways which hinder the validation of their subjective experiences and, ultimately, construct boundaries to accessing health care (Berlin, 2016; Shulz, 2018) On the contrary, Gregor, et al. (2016) argue that a health professional who is reflective of preconceptions and who strives to remain ‘neutral’ in gender identity interventions is invaluable for families and individuals struggling with their identity. This demonstrates the importance of reflexivity in clinical practice and, more importantly, the requirement of personal mindfulness in monitoring moments of conceptual bias.

A Breakdown in Classification

Currently, within the latest edition of the DSM-5, gender dysphoria may be found as the prevailing conceptualization of the former *GID*. It has moved away from its predecessor’s category of sexual dysfunction and paraphilia into its own independent section – with a direct focus change from identity conflict towards consequent dysphoria (American Psychiatric Association, 2013). These changes were made through substantial review and data collection and in light of great social and political pressures; consequently they have been perceived as significantly less stigmatising than previous conceptual framings (Beek et al, 2016). Defeo (2015) asserts that the language used in the current edition of the DSM in constructing conceptualizations is also far more inclusive and representative of a broader gender identity spectrum. Indeed, such changes would seem to be instilling a change in social attitude towards gender diverse identities especially in younger populations (Fraser, 2009). However, Lev (2013) asserts that, despite these conceptual changes now placing less emphasis on a disordered experience (a problematic feature of its classification history), this is merely an incremental step forward in depathologizing those with nonconforming gender identities – mirroring previous incidences of overdue declassification for other marginalised identities. In their review of

classification systems Moleiro and Pinto (2015) found that while these changes have been welcomed, they are only accepted as a preliminary step towards the desire for complete depathologization. Indeed, it would appear that a deconstruction process has begun within the conceptual space towards the construction of frameworks which more accurately represent the subjective experiences of gender diverse individuals.

Progressive movements and efforts aimed at guiding future conceptualizations and knowledge construction on gender nonconformity have not been met without critical opposition. McHugh (2015) describes the emergence of gender dysphoria as a “pathogenic meme” (para. 1), and in his conceptualization makes comparisons with the diagnostic categories of anorexia nervosa and body dysmorphic disorder. He argues that focus should be removed from the affective experiences of individuals with gender dysphoria as the presenting problem is principally cognitive – engaging in maladaptive, false beliefs about one’s body. Cretella (2016), an advocate for the American College of Paediatricians, argues that gender dysphoria has little scientific support, and that it is “a sign of confused thinking; at worst, it is a delusion” (p. 51). Lawrence (2014) also questions the scientific validity of contemporary notions of gender dysphoria – remarking that the current paradigm “privileges socially constructed gender over the unfashionable essentialism of biological sex” (p. 1264). Yet, while it remains a developing field, neuro-biological research on gender dysphoria has become increasingly prominent in confirming the existence of nonconforming gender identities. Contemporary studies have revealed intrinsic correlates within the brains of individuals with gender incongruence which may suggest a scientific validation and legitimisation of gender diversity (Costa & Colizzi, 2016; Feusner et al., 2016; Zubiaurre-Elorza et al., 2012). Nevertheless, Craddock and Mynors-Wallis (2014) explain that reductionist approaches, as demonstrated by those conceptualizations opposing the presence of gender nonconformity, ignore the rich complexities of the brain, and fall short in explaining the intricacies involved in gender identity behaviour.

While these opposing conceptualizations may be argued, to some extent, as deconstructing prevailing conceptualizations for gender dysphoria, they may be considered as inherently problematic since they deny validation and legitimacy in their resoluteness of the subjective realities which those with gender dysphoria may be facing altogether. Indeed, Hook (2004) cautions against the use of immutable conceptualizations in constructing discourse as “there is no possibility of agency outside of discursive practices” (p. 207). As such, they may be considered to add to the pathologizing and marginalising of all individuals outside of the gender binary by devaluing their subjective experiences as inarguably pathological and delusional. Consequently, the conceptual frameworks emerging from these opposing conceptualizations may be viewed as unhelpful for gender diverse individuals to utilise in plotting their subjective experiences in the social world, and may be considered as obstructive to progressive efforts aiming to construct empowering discourse which accounts for the dynamic experiences of gender diverse individuals.

According to Beek et al. (2016), invested parties have proved to be effective in accelerating the removal of gender dysphoria as a disorder in the construction of the ICD-11, and that this incident is likely to influence future editions of the DSM in the same manner. These social pressures are pushing for changes in the conceptual space so that stigma-free discourse may instead emerge; united by the desire to remove any perpetuations of gender nonconformity as being synonymous with a disordered experience. A movement away from clinical diagnostic models and narratives of distress, and a celebration of gender diversity may instead be perceived as helpful. In breaking down the current state of classification, Shulz (2018, p. 77) posits that “the diagnostic model undervalues the possibility that those who experience distress in important areas of functioning may do so not because of an underlying psychological impairment, but due to society’s response to non-normative gender presentation”. Likewise, Butler (2004) maintains that a lack of social support, over conflicting internal desires, is a primary source of the experienced distress for those with non-binary gender identities. Moreover, Riley (2017) argues that gender diverse children “thrive when they are supported in their strengths, skills, and creativity and that distress can be greatly alleviated by acceptance and support to express and be acknowledged as their identified gender” (p. 2518). These arguments reflect a breakdown in dominant classification, and contextualize the conceptual space where popular gender frameworks require a process of reconstruction.

Reconstruction in the Conceptual Space

In constructing future conceptualizations of gender nonconformity and gender dysphoria it appears vital to collaborate with the gender diverse community so that discourse might offer representative frameworks for navigating a gendered experience outside the binary. Moser (2017) states that gender dysphoria, should it not be entirely removed from the ICD-11, is being considered to fall into a category of “conditions related to sexual health” and be changed to “gender incongruence” (p.2516). However, classification in this diagnostic manual still situates gender nonconformity within a clinical discourse on health, and still perpetuates the problematic association of gender as necessarily linked with sexuality. Indeed, without the entire removal from diagnostic categories gender diverse individuals may continue to be marginalised through inaccurate conceptualization. Lev (2013) argues that this continued clinical lens bars this community from exercising their civil right to actualize their instinctual gender identity. Agreeably, Schulz (2018) insists that clinical conceptualizations enforcing the gatekeeping framework are dismissive of the subjective experiences of nonconforming individuals. She contends that conceptual focus should shift in constructing frameworks on identity expression and acquiring informed consent in pursuing gender transition or reassignment health care. However, the construction of new conceptual knowledge should work collaboratively with gender nonconforming individuals whose subjective experiences may offer a more comprehensive framework that may celebrate all manifestations of gender identity and remove stigmatisation.

Consequently, nonconforming individuals may not feel pressured to assimilate into cisgender identities, while those desiring this blending into the binary may not be expected to attain clinical permission via the gender dysphoria diagnosis. In this reconstruction process the conceptual space might make amends to a history of marginalisation through clinical categorization, which has permeated the lived experiences of gender diverse individuals.

Chapter 3: A consideration - Individuation

The previous chapter contextualized gender dysphoria through its history of contested classification and situated its position within the contemporary climate. It was established that current discourse on gender dysphoria is subject to much contention, and that there is need for reconceptualising gender identity frameworks. Indeed, the predominant orientation towards nonconforming gender identities sits squarely within understandings offered in clinical discourse, and may be considered as inadequately representing a wider gender spectrum beyond the binary. Consequently, efforts in reconceptualization require an inclusive approach which situates non-binary gender presentation as a valid manifestation of one's internally experienced identity. Moreover, these conceptualizations should dismantle the notion that an experience of incongruence with the binary necessarily implicates clinical distress as with the *gender dysphoria* diagnosis. As the source of distress may be rooted in social intolerance and an unaccommodating gender framework, the reconceptualization process should aim to address hegemonic notions of gender 'normality' currently present in gender discourse. Furthermore, the conceptualization process should not entirely dismiss the notion of 'distress' since it may be argued as a necessary step for some towards their ultimate psychosocial growth. However, the potential for experiencing distress should not be framed as clinically pathological, but rather as a potential experience which some may encounter in navigating their *gender experience*. In addressing these points, future conceptualizations may challenge the enduring prejudice and stigmatization that is consequent of the binary's alienation effect of those with nonconforming gender identities.

With these conjectures in mind, the current thesis draws attention to the concept of *individuation*, as understood within analytical psychology, as a potential consideration in the understanding of *gender nonconformity* and in efforts to reimagine gender dysphoria. As mentioned in the introduction chapter, analytical psychology may be used as a distinct approach in conceptualizing gender nonconformity without emphasizing pathology – a consequent attribution to the gender dysphoria category. Instead, it may suggest the possibility of gender expression inconsistent with the binary as a natural experience resulting from an internal integration process in which this feature may be realized as inherent to one's true nature. The concept of individuation represents such processes of integration, and may be considered as a facilitator in realizing one's personal gender identity which may or may not conform to societal expectations. Consequently, the concept of individuation may account for the experiences which some individuals may encounter when expressing significant features constituting their true nature within their relational world.

Subsequent discussion will discuss key analytical psychology concepts integral to a Jungian understanding of individuation. This will provide a framework of constructs used throughout this research to discuss the concept of individuation. Following this, individuation will then be discussed with respect to its role within the *psyche*. The context of individuation within psychosocial functioning will then be discussed, followed by a consideration of the potential challenges to be encountered during this process. As a last point of contextual foundation, individuation will then be discussed with interpretation of its parallels within various cultural contexts.

It should be noted that each of these contextual sections play a crucial role within this thesis. They establish a necessary conceptual foundation for the discussion of individuation as a theoretical concept for consideration in reimagining gender dysphoria. As such, this chapter will continue with a detailed analysis of individuation within the experience of gender identity, and the associated implications which this might have for the concept of gender dysphoria. This will include an exploration of the available literature on this particular topic, and how this thesis aims to contribute to the conceptual ideas of individuation within gender nonconformity. In conclusion, the chapter will discuss the role of individuation in addressing the contentious concept of gender dysphoria.

Key Conceptual Constructs underpinning Individuation

To understand the role of individuation within an analytical psychology framework, key constructs associated with this theoretical concept will be discussed. These constructs will provide a conceptual framing for subsequent discussion on individuation and its application within this thesis.

In analytical psychology, the *psyche* is distinguished as comprising all aspects of psychic life operating within the individual. The psyche encompasses “the totality of nonphysical life, both rational and irrational, both personal and collective, both conscious and unconscious” (Hopcke, 1999, p. 37). Thus, it is differentiated from the concept of the ‘mind’ which itself may be considered as referring simply to intrapsychic structures and their activity. Importantly, the psyche consists of three core constituents: consciousness, *the personal unconscious* and *the collective unconscious*. The personal unconscious refers to the experiences and knowledge perceived by the particular individual, but not accepted or in alignment with conscious thought (Rybak et al., 2000). The collective unconscious may be understood as our shared psychic inheritance gained from the experiences of collective humanity, and may act indirectly through symbolic imagery to guide and direct our behaviours towards more adaptive patterns (Hopcke, 1999). These inherited patterns of human experience are known as *the archetypes*. Cumulatively, the archetypes may be considered as implying “an a priori pattern of wholeness” residing in the collective unconscious (Young, 2018, p. 94). For its telos, the psyche itself may then be considered to anticipate this experience of wholeness, and to engage in self-regulative processes by guiding the individual towards these adaptive patterns.

Integral to the psyche is the construct of the *ego* which may be viewed as the representative of subjective consciousness. The ego corresponds with one's conscious awareness of themselves and their perception of their identity (Beridha, 2016). As such, the ego's appraisal of identity may not account for or integrate all aspects of the personality which may be located within the unconscious. Consequently, the ego may manifest in the relational world through its construction of *the persona* – an identity adopted in social contexts which, while conforming comfortably to societal expectations and norms, relegates aspects of the personal and collective unconscious as inappropriate or unimportant. Yet, in time the ego must take on an iterative role of engaging with and integrating these unconscious aspects as important features of the individual's identity (Rybak et al., 2000). However, this engagement may lead to insights about one's identity within the world which may be experienced by the ego as invasive, conflicting or opposing. In particular, *the shadow* represents contents emerging from the unconscious about personal and collectively shared traits deemed intolerable or shameful by the conscious ego and, consequently, may be repressed back into the unconscious and projected upon the world while they remain overwhelming (Robertson, 2017). As such, the persona may prevail while the conscious ego remains inflexible to knowledge emerging from the unconscious. Over the lifespan, these contents may continue to pressure the ego to acknowledge and accept them, ultimately, as inherent aspects to the personality.

The archetype of *the Self* is discussed within analytical psychology in contrast with the ego. The Self represents the sum totality of the psyche, and acts to organize and integrate all aspects particular to the individual's true nature into a well-functioning, harmonious, and cohesive whole (Ciúin, 2016). As such, the Self implies a complete alignment of consciousness with the unconscious whereby the psyche reaches its telos for wholeness. Thus, this integration implicates a complete surrender of the ego's subjective sense of being the centre of the psyche to the Self (Tricarico, 2016). Indeed, the ego may be viewed as subordinate to the Self since it is limited to conscious awareness and, as such, represents an incomplete or subjective perception of one's identity. In contrast, the Self may be viewed as the objective witness of the individual's overall identity – preceding ego consciousness and encompassing the entirety of the psychic individual (Edinger, 1992). Consequently, connecting to the Self may require the specific challenge of dismantling the persona and acknowledging all shameful shadow elements as real aspects constituting the individual's overall disposition (Young, 2018). Realistically, complete submission of the ego may appear unattainable or take a lifetime to accomplish. However, this may be considered as an ongoing and non-linear life experience as the psyche drives the individual to connect with knowledge contained in the archetypal Self.

Individuation & its Role within the Psyche

Carl Jung first proposed the concept of individuation as the intrinsic process of becoming who we are meant to be, and considered it as an important task for individuals and, ultimately, for humanity itself (Beridha, 2016). It was conceptualized later as “the process of forming and specializing the individual nature; in particular, it is the development of the psychological individual as a differentiated being from the general, collective psychology” (Jung, 1923/1959, p. 561). Thus, individuation may be considered as the underlying process supporting the individual’s efforts to become more conscious of the totality of their internal nature in relation to collective society. This process naturally distinguishes the individual’s relation to the collective identity by challenging the undifferentiated ego to engage actively with contents in the unconscious (Cavalli, 2017). As such, the individual may be driven by the psyche to become differentiated from expectations in collective society when this is an inherent aspect of their internal nature. Likewise, individuation may facilitate further identification with the collective identity and norms when individuals connect with insights about the Self. Thus, individuation can be said to be an organizing process of the psyche to realize the Self, and ultimately distinguishing the individual standpoint in relation to the collective society. Ultimately, this increases consciousness about oneself and the surrounding world.

According to Tricarico (2016), the individuation process begins with a questioning of the norms and values implicated by collective society. This questioning may be spurred by acknowledging shadow aspects within the collective unconscious about humanity that are deemed as shameful. Similarly, shadow aspects in the personal unconscious may also be contemplated, and a consequent dismantling of the persona may follow as the individual comes to integrate these insights from the Self into their consciousness. This knowledge may lead one to become more or less collective in their identity based on their inherent nature and its position against particular societal backdrops (Stein, 2017). Initially, the (re)discovery of these unconscious contents may appear to be in opposition to our ego consciousness and might require a unification through individuation. This process may be assisted by the psyche’s self-regulating drives for balance where archetypal imagery enters into ego consciousness by indirect means such as dreams or art (Young, 2018b). Indeed, interpretive engagement with these symbolic archetypal resources may assist in gaining new insights about oneself and the world and, consequently, help to unify seemingly opposing traits within the psyche (Pasquarelli & Ripamonti, 2016). Ultimately, individuation may lead one to view previously repressed contents now as acceptable features constituting their internal nature; leading to an integrated and more balanced personality in line with the psyche.

Within the psyche, individuation may be found as a necessary moderator of prolonged ego consciousness. However, individuation requires that sufficient ego development be present in the individual; its acquisition made possible through identification with group identities (Stein, 2017).

Indeed, a robust ego may be required to engage with and integrate overwhelming insights about the collective and personal identity (Robertson, 2017). These may otherwise prove too conflicting or be in extreme opposition to an insufficiently developed ego. Consequently, there may be a continued reliance on collective identification as a means of adapting to social norms and expectations. This adaptive process of identification offers a safe orientation to the world in which one comfortably adopts a persona identity with an associated set of social and cultural resources, but is ultimately in opposition to the Self and one's true nature. Jung (1923/1959) proposes that identification, once serving as an adaptive feature, proves to be a paradoxical conundrum: "whenever a better individual possibility presents itself, identification manifests its pathological character... for now it has a dissociating influence, dividing the subject into two mutually estranged personalities" (p. 551). Such fusion and enmeshment with the collective identity may prove disadvantageous as one becomes alienated from their own individual nature (Cavalli, 2017). Thus, while individuation requires sufficient ego development, it is also the process driven by the psyche to challenge an inflation of ego consciousness in maintaining balance with the Self.

Successfully managing the drives from the psyche to individuate situates the individual with an increased awareness of who they truly are. An acceptance of previously intolerable contents, both personal and collective, may prove a difficult process, but successfully integrating these features into conscious identity may contribute to the experience of greater meaning in one's life and an overall sense of wholeness (Rybak et al., 2000). Indeed, feelings of dissonance induced by incongruence between the persona and internal nature may be reduced and provide a sense of psychic growth (Beridha, 2016). This process of individuation may reproduce itself sporadically and interchangeably throughout the lifespan as personal and collective knowledge continue to evolve and the individual's psyche continues to strive for personal balance (Myers, 2013; Pasquarelli & Ripamonti, 2016). Thus, as a process, individuation operates as an intrinsic regulating mechanism driven by the psyche to integrate the disparate aspects of the particular individual's personality so that they might become who they are meant to be.

Individuation within Psychosocial Functioning

Through individuation there is potential for psychosocial growth and the experience of meaningful connection with the world and others. Fundamentally, individuation drives ego consciousness to differentiate from the collective identity in accordance with the Self. This may involve a process of separation from societal expectations when aspects of one's true nature come into conflict with these established norms. However, it is worth noting that a distinguishing feature of individuation is not to isolate the individual from the collective; contrarily it aims to connect the individual in significant ways to their surrounding world (Tricarico, 2016). Indeed, as individuation facilitates the acquisition

of personal and collective insights we are placed in greater awareness of who we are in the relational world. This has considerable implications for the individual who may experience “a bounty of energy, the gratification of being at one with oneself, and a sense of connectedness with the world” (Young, 2018, p. 99). These ideas resonate with Jung (1923/1959) who describes the process of individuation as naturally leading to a greater appreciation of humanity as we discover that our individual standpoint is distinguished from, yet not antagonistic, towards the collective identity and norms. Thus, the meaning and purpose which this may bring emphasises the psychosocial advantages to be encountered by the person engaged in individuation.

Individuation may be considered to foster a relationship of reciprocity between the individual and their given society. While the process of individuation is concerned principally with individual development, it does, nonetheless, rely on collective society to orientate the individual within the social world. Therefore, denouncing all affiliation to the collective norm is incongruent with individuation; this act may be seen as a manifestation of extreme individualism and a sign of egoistic conflict (Jung, 1923/1959; Lee, 2017). Thus, individuation relies on positioning within the collective standpoint, whereby the individual gains agency within the social space, to flourish as uniquely differentiated from original ego consciousness. In turn, society may be found to share in this relationship of reliance. According to Rybak et al. (2000), individuation is a vital process for expanding collective resources through the contributions of novel archetypal viabilities offered by individuals whose individuation facilitates experiences contrary to the norm. Indeed, this is a necessary process to challenge pervasive, rigid archetypal knowledge to become more expansive and eclectic (Fraser, 2009). It may, therefore, be argued that individuation counters the stagnation of the collective unconscious and promotes its progression in accordance with the dynamic world (Boland, 2017). Agreeably, Robertson (2017, p. 254) suggests that individuation “must be a journey taken by all (or at least a critical minority on the planet) if we are to reach some new level of human consciousness”. In this manner, individuation functions within the psychosocial space in establishing a reciprocal relationship benefitting both the individual and their society.

Challenges encountered in Individuation

While individuation, from an analytical psychology standpoint, is certainly a crucial process in the pursuit of psychosocial growth, it may be limited by the psychological readiness of the individual in question. Jung (1917/1953) asserts that engaging with individuation is no easy feat; emphasising its pursuit only should it serve “the very fate for which they [are] suited” (para. 236). Moreover, Tricarico (2016) reasons that the psychological needs of some individuals may instead require assimilation with the collective norm as an adaptive process of ego development. In such cases the need to access collective resources in combating unpredictable life circumstances may predominate

over psychic drives for wholeness emanating from the psyche. Ciúin (2016) points specifically to the example of trauma as necessitating this need for collective fusion as the capacity for unconscious examination is severely limited when trauma induces states of conscious hyperarousal in response to a perceived threat. Indeed, Lee (2017) posits that the capacity for engaging in individuation is directly limited by the strength of one's ego development. As such, overwhelming life circumstances may induce the need for continuous nurturing of the ego whereby the development of the individual nature is put aside provisionally. Yet, individuation is a lifelong process occurring intermittently, and is never expected to be engaged with ceaselessly, nor even necessarily toward some perceived end goal (Zemmelman, 2017). Certainly, one's readiness for psychosocial growth and connection to the Self is likely to fluctuate continuously over the lifespan. Therefore, individuation, while not a linear process in the development of the individual nature, may be directly limited by the psychological readiness of the particular individual.

Various psychic challenges may be found to hinder individuation. Confrontation with the unconscious is not necessarily straightforward and inescapably becomes an emotionally involved experience. Specifically, Robertson (2017) argues that contents emerging from the shadow may overwhelm the individual and induce affective disturbances while, conversely, new-found insights may instill a gross sense of ego grandiosity – both of which may be considered hindrances to individuation. Consequently, these experiences may be considered to result in egoistic conflict – a notable challenge to overcome where the Self must regain its influence over the ego as the unifying centre of the psyche (Endinger, 1992). A notable psychic difficulty to overcome in individuation involves the temptation to engage in an illusory imitation of the process. Jung (1916/1920) cautions that attempts to become uniquely differentiated may be compromised by an enmeshed identification with the collective where there is an assimilation of collective features inconsistent with one's true nature:

“As a rule this delusive attempt to attain individual differentiation by means of imitation comes to a standstill as mere affectation, the individual remaining on the same plane as before, only a few degrees more sterile than formerly, and under an unconscious compulsory bondage to his environment” (p. 456).

Indeed, Tricarico (2017) cautions against the magnification of aspects incongruent with one's internal nature as this may solidify the ego identity under the guise of individuation. Thus, one may bolster an identity steeped in the collective ideal under the illusion that this is an expression of their true nature. Doing so implicates an illusory engagement with individuation as one has not truly confronted the unconscious or sufficiently questioned the collective to realize how they are uniquely differentiated. As such, one may experience an inflation of ego at having successfully engaged in individuation which, contrarily, acts against the nature of the process which seeks rather to challenge egoistic states

of consciousness (Robertson, 2017). These remain particularly challenging obstacles to overcome when engaging in individuation.

Research by Kins, Beyers, and Soenens (2012) reveals that individuation may be compromised by two specific psychosocial obstacles, and that these may induce maladaptive outcomes. In particular, they contend that dysfunctional dependence (unhealthy preoccupation with interpersonal relatedness) and dysfunctional independence (unhealthy preoccupation with self-definition) may act as barriers to individuation, and that these relational patterns share high associations with problematic psychosocial behaviour. Agreeably, Lee (2017) asserts that while excessive group identification may lead to ego inflation, a lack of any collective identity may likewise result in an egoistic personality. Both states may be considered as specific hindrances to the drives from the psyche for individuation. However, Myers (2013) contends that these psychosocial challenges may be overcome by careful examination by the individual to ascertain their particular needs between individualism and collectivity; encouraging individuation with respect to these priorities. Thus, various challenges may be encountered when engaging in individuation.

Individuation & Culture: an interpreted Global Experience

The concept of individuation, as understood within analytical psychology, may be interpreted as functioning in diverse cultural backdrops. More specifically, various cultural tenets may be interpreted as having parallels with individuation; suggesting the possibility of a global experience of individuation defined in culturally specific ways. Outside of the Western matrix, Lee (2017) discusses a prime doctrine of Buddhist culture to involve the reorganisation of consciousness towards an ‘enlightened personality’. A central tenet in Hindu culture, likewise, describes the need to increase consciousness through active intrapsychic work in deconstructing egoistic states, and connecting meaningfully to *Brahman* – the universal soul embodying all aspects of existence (Chakkarath, 2011). Individuation, as described within analytical psychology, may be interpreted as sharing parallels with this attainment of psychosocial growth and deepened connection to the world and others. Similarly, Brooke (2008) draws attention to the experience of ‘individuation’ in sub-Saharan African culture by discussing its functioning within *Ubuntu* philosophy. He explains that African humanism, as evoked by Ubuntu culture, “would imagine individuation as a process of personal growth and transformation within that network of relationships that make such transformation possible and to which the person remains, therefore, ethically indebted.” (p. 45). This resonates with the concept of individuation, as described within this thesis, wherein the individual and society are bound reciprocally to great advantage, through this process. Such examples point to the potential similarities which may be drawn between analytical psychology’s understanding of individuation and culturally specific tenets or ways of collective psychosocial living.

The concept individuation as a global experience may be argued further as representing a universally shared culture across nations. For Myers (2013), individuation holds the potential to foster such a global culture so long as it “values all parts of the collectivity-individuation spectrum, encourages individuals to find their natural place on it, and enables an ongoing progression” (p.657). Agreeably, Stein (2017) contends that the drive towards psychic wholeness is shared across all cultures ranging from East to West. He posits further that the experience of individuation is itself archetypal – an experience within the collective unconscious guiding all individuals to become who they were meant to be. It is here that the perceived magnitude of worldly divides may become smaller as we converge under an interpreted global culture of individuation.

Individuation as a process in Gender Identity

As a process, individuation has been identified as a key facilitator in becoming who one truly is in relation to collective society. Through individuation one may become uniquely differentiated from an original state of ego consciousness and experience “an enriching of the conscious psychological life” (Jung, 1923/1959, p. 563). Within an analytical psychology orientation, two authors have made specific links to individuation within the experience of gender identity. These ideas discuss the experience of individuation in confronting knowledge emerging from the unconscious about one’s inherent gender identity. Through the use of their research, this thesis will expand on these ideas of individuation as a pivotal experience for individuals navigating their internal world.

In his critical research on the construction of an “authentic” gender identity, Stevens (2009) explores the process of deriving that identity which the individual feels most comfortable in expressing while evoking the highest potential for psychological functioning for that individual. In this discussion, he examines the questioning of one’s social gender role as a precursor to integrating their innate, subjective *gender experience* – noting that this might involve a separation from socially prescribed norms. Thus, this process of individuation may serve to support the experience of a nonconforming gender identity for some as an inherent, “authentic”, constituent of their psyche, which itself seeks optimal psychological functioning. Indeed, Stevens (2009) reported that participants adhering to internal prompts, or unconscious aspects of the Self, over socially prescribed gender expressions were significantly less at risk for maladjustment by engaging in this experience of individuation. Consequently, these individuals may be driven to separate from an ego identity, or persona, which fits into conventional gender categories. While these fixed categories may reflect the internal nature of many people, they do not necessarily account for all personal experiences of gender identity.

In similar work with *gender diverse* individuals, Beridha (2016) discusses that participants “reported being able to discover some sort of unique inner compass” which guided them persistently in differentiating from the general collective identity through individuation (p. 28-29). Ultimately,

giving precedence to this internal process proved transformative for increased psychological functioning. These research efforts demonstrate individuation as a facilitator in the navigation of one's gender identity – whether the expression of this internal integration leads them comfortably into societal expectations of gender identity or into a nonconforming presentation.

A critical Inspection of Gender Dysphoria using Individuation

The concept of individuation as applied to gender dysphoria will now be discussed. Available contemporary Jungian research framing gender nonconformity will be introduced with elaboration on how the current thesis contributes to these research ideas. This will be followed by a discussion covering the use of individuation in addressing the contentious categorical conceptualization of gender dysphoria in the modern context.

As outlined earlier (in chapters 1 and 2), current clinical frameworks on gender dysphoria fixate largely on the negative outcomes expected to accompany an incongruent gender identity. The clinical focus has shifted away from addressing identity issues towards the consequent dysphoria rooted in the experience of a non-binary gender identity (American Psychiatric Association, 2013). Likewise, opposing conceptualizations were identified as adopting a negative perspective by implying gender diversity to be a pathological experience or to be a consequence of misaligned psychological development. In contrast, the concept of individuation may be considered to contribute towards the reimagining of gender dysphoria in ways which deconstruct these clinical and stigmatizing constructions of life dissatisfaction or pathology. Indeed, the concept of individuation might shift the focus towards a more positive understanding where those with nonconforming gender identities are viewed to be engaging in the transformative process of becoming who they are meant to be.

The use of individuation in conceiving of gender identity has been touched on briefly in contemporary Jungian work. While this remains a relatively small area of research, this thesis aims to contribute to these efforts by extending this theoretical knowledge to the realm of gender dysphoria. In drawing on the experiences of gender diverse individuals, Boland (2017) posits that gender identity is internal and intrapsychic, and through individuation one might come to realize that their gender expression is masked by a persona identity constructed to fit neatly within gender binary expectations associated with their sexual (physical) assignment at birth. Similarly, McKenzie (2006, 2010) argues that the experience of gender identity is “a fluid and emergent mind-body awareness; the process that Jung called individuation” (2010, p. 106). Gender identity is inferred through a dialogue between the conscious ego and these emerging mind-body contents entering awareness from the unconscious. She expands this line of argument by postulating that those with non-binary identification are situated with considerable potential for psychosocial growth, as individuation prompts particularly extensive efforts with the unconscious and to find their unique place in relation to the collective identity (McKenzie,

2010). Through this particular experience of individuation, whereby integration of one's true gender identity occurs despite significant collective dismissal, the individual may be situated with psychosocial maturation and a sense of harmonious connection to the world. Beridha (2016) encapsulates this significant experience of developing the psychological individual through his contemporary definition of individuation:

“Individuation means the lifelong process of aligning conscious aspects of self with a sense of wholeness and authentic self-expression in ways that may challenge collective expectations and may be personally disturbing when they disrupt personal schema about the world and self or conversely, may provide meaning and sense of greater purpose” (p. 1).

Thus, the concept of individuation might be used to frame the experience of expressing a gender diverse identity as a response to innate drives emanating from the psyche to integrate these features into their conscious identity. Psychological disturbances experienced in gender dysphoria may stem from the initial disruption to ego consciousness, where the persona must be inspected and dismantled with respect to the insights gained about one's personal gender identity as incompatible with prevailing gender norms. As discussed previously, such dysphoric disturbances may also be attributed to the ego's disproportionate magnification of insights gained from the unconscious. Ultimately, this inflation in ego consciousness must be balanced by withdrawing its perceived control of the psyche to the Self – an experience which might induce affective disturbances (Robertson, 2017). Additionally, the source of dysphoria or distress in gender incongruence has been questioned in previous discussion (see chapter 2) and argued to result from social stigmatization and discrimination (Schulz, 2018). An experience of ego conflict would certainly be exacerbated, if not induced, by this hostile social perspective towards gender nonconformity. Jung (1961/1963) explores such issues of perspective where problems originating in the collective are oftentimes internalized erroneously by the individual:

“Such disturbances need not be primary; they may well be secondary, the consequence of an insupportable change in the social atmosphere. The cause of disturbance is, therefore, not to be sought in the personal surroundings, but rather in the collective situation” (p. 234)

Consequently, a change in the collective perspective, which sees gender nonconformity as a natural expression of individuation for some individuals, may be crucial in deconstructing environments which might cause the ego to develop particular strategies to avoid victimisation. As such, a persona conforming to static gender expectations or a defensive ego magnification of one's gender identity as the centre of one's psyche may be less likely to occur. Moreover, individuation speaks to the significant psychosocial growth which may be experienced despite potential encounters with these challenges (Boland, 2017). In agreement, Beridha (2016) affirms that gender diverse participants, engaged in individuation, were found to express narratives that were inclusive of a sense of wholeness and greater well-being despite challenges encountered in the process. Jung (1923/1959) sees such

disruptions as natural necessities required for the development of the individual nature to differentiate from an undistinguished ego consciousness, and to experience psychological growth. Thus, a disruption to ego consciousness may very well induce an experience of dysphoria, but this is understood here as a necessary step towards psychosocial growth. Ultimately, this is likely to be a fleeting phase in navigating and integrating aspects of one's internal nature into conscious identity.

Through these theoretical discussions of individuation, the concept of 'dysphoria' emanating directly from one's particular gender experience has no place, since no normative trajectory may be implied from which deviances could be interpreted as abnormal or misaligned (as with the gender binary model). As such, the gender dysphoria category may be considered superfluous by its implicit association of distress or life dissatisfaction when gender identity itself may be viewed to be particular for each individual. As it stands, the gender dysphoria category may be considered as poorly representing those who may instead experience distress principally from the psychic conflict induced by an insupportable social atmosphere and unaccommodating gender frameworks. Instead, deviations from common experiences of gender identity may be interpreted as creative manifestations of the individuation process, of Self-embodiment, rather than signifying dysphoria; which itself exists in definition only as a consequence of the stigmatization implicated by binary exclusivity. Consequently, a potential desire for external gender presentation to align with internal insights gained from individuation is not born out of a dysphoria at this incongruence, but rather to integrate and complement this aspect of the psyche into conscious identity.

Thus, the relevance of clinical 'dysphoria' in issues of gender identity is put into question when using the concept of individuation, as understood within analytical psychology, to conceptualize gender nonconformity. In this manner, the concept of individuation may contribute to the construction of discourse which frames gender identity as dynamic and seeks to provide legitimacy to all forms of gender expression. Overall, the concept of individuation may facilitate a change in social and clinical perspective on the relevance of gender dysphoria as a category. According to Stein (2017), the impact of individuation, which Jung came to discover, is worthy to contemplate in reassessing our clinical orientation and outlook towards much of humanity:

“This so-called ‘problem’, a stone that the builders rejected as pathology, became the cornerstone of a building, a ‘Hall of Individuation’, that would house potentially all people from every human culture who are engaged in serious efforts to become more conscious through an encounter with unconscious contents and processes” (p. 84).

Addressing Gender Dysphoria through Individuation

The continued contentious response to the category of gender dysphoria may be argued as a reaction to a modern era which has become increasingly unconscious. Robertson (2017) describes humanity's unprecedented expansion in recent years to have subjected itself to a disenchanting loneliness where we are "cut off from our instinctual roots" (p. 247). Agreeably, Beridha (2016) describes a disconnect within the modern context to have reduced our intrapsychic engagement and, consequently, our engagement with individuation. Consequently, in a relationally fragmented and disconnected modern era, individuals may become fixated with ego consciousness and remain unaware of the dynamic world progressing around and within them. Thus, gender diversity may be argued as subjected to the lens of pathology due to a modern world which is disconnected from the dynamic, personal experiences of others. In his contemplation of individuation in the modern context, Zimmelman (2017) argues that humanity has never been so imperilled by a paradoxical state of disconnection from the world in the face of disturbingly turbulent times; emphasising the relevance of individuation in becoming more conscious of ourselves and those around us. Individuation, therefore, may be considered as a vital process in addressing the contentious concept of gender dysphoria by increasing awareness of the plight and experiences of gender nonconforming individuals in the relational world.

The role of individuation as a facilitator of societal progression, with particular reference to the concept in gender nonconformity, is discussed by McKenzie (2010) and Boland (2017). According to McKenzie (2010), gender diverse individuals play a major role in prompting the progression of our collective consciousness as their individuation increases societal awareness of the extent of human experiences within identity. As such, the individual who has integrated a nonconforming gender identity through individuation may offer archetypal contributions that may act as representative frameworks for plotting this experience. In attesting to the transformative role of individuation in promoting a progressive collective consciousness, Boland (2017) makes reference to the expansion of the previous LGBT (Lesbian, Gay, Bisexual, Transgender) acronym to a more inclusive LGBTQIA (now includes queer, *intersex* & asexual). The very expansion of this acronym, she contends, is a representation of progression in societal consciousness due to the individuation of nonconforming gender identities.

Boland (2017) expands on the impact of individuation for collective society through her analytic assessment of gender diverse identities. In working with these individuals, she makes reference to the archetype of the 'trickster' as representing their significant impact on society through individuation: "the Trickster shows us the degree to which things in the world can be seen differently. His presence promotes psychic rearrangement...he revitalizes the world by disturbing boundaries" (pp. 688-689). Thus, individuation in gender diverse individuals may play a crucial role in addressing

unconsciousness within the modern era and, consequently, contribute towards the reimagining of gender identity and the concept of gender dysphoria.

Within this chapter, individuation was introduced within a contextual framework as understood by an analytical psychology orientation. Further contextual discussion was provided in order to situate the application of the concept of individuation within the realm of gender identity and gender dysphoria. In critically assessing the concept of gender dysphoria and the impact of individuation, this thesis aims to suggest a reimagining of gender dysphoria. Accordingly, individuation is put forward as a valuable contribution to consider in the efforts to reframe and reconstruct the concept of gender dysphoria.

Chapter 4: Methodology

The previous establishing chapters contextualized the current conceptual space of *gender dysphoria* frameworks and the need for addressing the inconsistencies implicated in popular gender frameworks which are not representing progressive social views comprehensively. As a consideration, the analytical psychology concept of *individuation* was discussed in its potential for contributing to a reimagining of gender dysphoria, and in aiding the construction of emergent knowledge on *gender identity* that takes into account the subjective experiences of all individuals.

The thesis will now proceed with a methodology chapter in which the research aims and questions will be established. Subsequent discussion will describe the procedural steps taken in the research process in procuring answers to these aims and questions. This will involve a detailed look into the specific chosen method and critical orientation adopted in the overall research process.

Approach and Aims

The methodology chosen for this thesis was an adapted systematic review using critical interpretive synthesis (CIS) procedures. Dixon-Woods, Cavers and Agarwal et al. (2006) have demonstrated the effectiveness of adopting a CIS method to systematic reviews when handling a complex body of literature. Specifically, CIS aims to critically assess bodies of literature in contributing to existing conceptual knowledge and in answering specific theoretical questions (Wakefield et al., 2018). This differs from traditional systematic review methodology which typically aggregates evidence within a body of literature to provide conclusive claims of effectiveness. The CIS process is explicitly critical and reflexive towards the underlying structures of influence impacting the construction of knowledge – both within the inspected research papers for review and in the researcher’s own attempts to provide conceptual contributions (McFerran, Hense, Medcalf, Murphy, & Fairchild, 2017). As such, this methodological approach was crucial in providing conceptual knowledge and conclusions that were grounded by strong explanatory power.

In consideration of the establishing literature chapters and the research approach, the initial research objective was subjected to a critical reflexive process. As such, the established research questions were adapted accordingly as critical insights were gained through engagement with the literature and in examining the impact of researcher bias. The following final research questions were derived in light of the overall research objective to reimagine the categorical conceptualization of gender dysphoria:

- (1) What conceptual inferences might be drawn from systematically reviewing contemporary psychological literature on gender dysphoria?
 - a). How might these conceptualizations be interpreted in facilitating the construction, reinforcement or the resistance towards problematic discourse on gender dysphoria and nonconforming gender identities?
- (2) Can the conceptual space in the above literature be considered as accommodating of gender dysphoria conceptualizations which draw on the analytical psychology concept of individuation as understood by a systematic review of contemporary individuation literature?

As the research questions were spread over two areas of interest it was determined that two separate reviews be made. Accordingly, one review centred on conceptual descriptions of gender dysphoria found within recent psychological literature, while the second review's focus concerned conceptual descriptions on individuation within recent psychological literature. The first review served to provide answers for the first research question and its sub-question while the second review assisted in providing answers for the second research question.

The subsequent section will discuss an outline for both the methodological practice of systematically reviewing literature and the use of critical interpretive synthesis (CIS). Following this, detailed description of the steps involved in a systematic review, as informed by Bambra (2011) and Petticrew and Roberts (2006), will be discussed. Finally, a detailed description of a CIS orientation and its particular procedures will follow.

An Outline for Systematically Reviewing Literature

The implementation of systematic review is a crucial process in the pursuit of research endeavours seeking to provide evidence-based conclusions or proposals. The systematic review process may be generally understood to follow a specific procedural sequence: (1) formulating concise research questions; (2) developing a strict research protocol for data selection; (3) conducting a literature search; (4) quality appraisal of the included research papers; and (5) explicit methods to synthesise the content of the included papers (Dixon-Woods, Bonas & Booth et al., 2006). The use of this method involves a structured and formal approach to the selection, quality appraisal and analysis of research papers. As such, if implemented rigorously this design may increase the transparency of the research process, and may counter directional influences emanating from researcher and within the research papers that might otherwise shape the course of the review process (Popay et al., 2006).

The decision to use a systematic review in the current research was twofold. Informed by a social constructionist approach, it was determined that the research questions were best answered by a process of formal organisation and synthesis of recent psychological literature in order to establish explanatory knowledge rooted in the conceptual inferences encountered within research papers. Secondly, systematic review has become increasingly established and popular as a robust methodological approach within various public health and social science spheres (Bambra, 2011; Petticrew & Roberts, 2006; Dixon-Woods, Bonas & Booth et al., 2006). As such, this methodology was suited to the aims of the current research; specifically in the organisation of conceptual content into emergent categories and synthesized frameworks as a foundation for assessing the conceptual space of gender dysphoria.

An Outline for applying Critical Interpretative Synthesis

The application of a critical interpretive synthesis within systematic reviews is useful when reviewing a complex body of literature. This methodological approach is an adaption of meta-ethnography and makes use of grounded-theory practices (Barnett-Page & Thomas, 2009). Dixon-Woods, Cavers and Agarwal et al. (2006) have demonstrated its relevance when systematic reviews seek interpretive over aggregative synthesis methods. A distinguishing feature of CIS is its critique of conceptual knowledge constructed within research papers, and the use of this analysis to suggest contributory conceptual knowledge in furthering the understanding of a given phenomenon (Mothupi, Knight, & Tabana, 2018). Consequently, literature is approached by critically examining how conceptual knowledge is constructed by inspecting the manner in which authors have conducted their research. This critical lens allows for the emergence of conceptual theory that attests to a strong explanatory power through its grounding in evidence (Dixon-Woods, Bonas & Booth et al., 2006). Importantly, the CIS process is used both as an analysis method and as a general orientation to the overall research process; whereby its critical lens naturally instils a dualistic reflexivity within the researcher (McFerran et al., 2017). As such, research content and researcher alike are carefully examined throughout the research process using an iterative process in countering directional forces influencing the construction of knowledge.

In the current thesis there was a need for two separate reviews; each having distinct topics which initially may be considered unrelated. However, in using CIS the researcher aimed to demonstrate the value of conceptual theory emerging from review 2 (individuation in identity) for the conceptualizations identified in review 1 (currently representing gender dysphoria). This method proved a practical means for procuring conceptual knowledge that might contribute to the reframing of *gender incongruence*, and its diagnostic counterpart gender dysphoria.

The Systematic Review Phases

The phases of a systematic review allow for the identification, screening, capturing and organising of a data set. The rigorous nature of this review process aims to produce qualitative research that is contributory to pre-existing or new fields, is defensible in its design, is found to be rigorous in conduct, and is credible in its claim (Snilstveit, Oliver, & Vojtkova, 2012).

Phase 1: Formulating Concise Research Questions

Formulation of the research question should be succinct and transparent as it dictates the course of the review and the protocols used to determine the data set. As such, Petticrew and Roberts (2006) argue that clearly defined research questions are an essential task in reducing the risk of reviews that are unmanageably large and non-systematic. Traditionally, systematic reviews aim to determine the effectiveness of particular interventions by aggregating evidence across studies to answer very determinate research questions. However, the CIS approach allows for systematic reviews that propose a wider range of theoretical questions in pursuit of contributing to conceptual knowledge (Barnett-Page & Thomas, 2009). Such questions are not specifically focussed on claims of effectiveness, and may undergo an iterative process to best represent the research aims established through reflexive practices.

In the current research it was deemed necessary to establish multiple research questions in order to answer the overall research objective of reimagining gender dysphoria. These research questions maintained an explicit focus stipulating the precise population of interest, the associated phenomenon, areas of concern and the utilised methodological approach. Bambra (2011) states that research questions which are too broad in scope may become disadvantageous as they increase the breadth and size of a review and, consequently, run the risk of causing difficulties in its completion. As such, since the scope of the current research was broad, the overarching research objective was broken down into smaller parts so that comprehensive answers could be provided. However, while the research questions set the boundaries for the investigated phenomena they remained flexible in each phase of the research process in line with a critical interpretive analysis.

Phase 2: Developing a strict Research Protocol for Data Selection

A key element of a traditional systematic review is the development of a strict research protocol to determine the preliminary and final data set. The research protocol involves a set of inclusion and exclusion criteria informed by the research question and objectives, the search strategy, and the sources to be consulted. However, as with the research questions, the research protocol should remain flexible in a review using a CIS approach. The significance of this protocol is its role in managing the

entire review process by providing clear parameters, and in its ability to act as an on-going source of reference (Bambra, 2011). Thus, careful construction of this research tool is paramount in maintaining the rigour and transparency of the systematic review process.

The current research made use of a research protocol (see table 1, p. 39) to determine which articles were to be selected in pursuit of answering the research questions. The criteria for inclusion and exclusion focussed largely on procuring articles of contemporary significance and monitoring the relevance of their content. As such, only articles published since 2014 to the present day (search ending in March 2018) were considered to maintain a contemporary focus. The search strategy covered a single area of accessibility – an academic journal database whose access is available to those with institutional affiliation. This scope was determined to be sufficient for the purpose of this master’s thesis. However, additional secondary searches were conducted to supplement this search strategy by thoroughly screening the references found within the preliminary research articles.

Phase 3: Conducting a Literature Search

Locating relevant literature is a fundamental task in systematic reviews and, as Petticrew and Roberts (2006) maintain, may be the most challenging aspect for the researcher. A literature search runs the risk of overwhelming the researcher by decisions related to scope and selection bias. Bambra (2011) argues that the systematic review process should aim to assess the best available evidence rather than an entire expanse of evidence. Consequently, this phase relies greatly on the search strategy developed in the research protocol to determine the parameters required for the best available evidence. As such, the literature search should remain within the focus of the research objectives; avoiding extreme specificity or excessive sensitivity that would otherwise compromise the inclusivity or relevance.

Within the current research it was determined that searches be conducted within psychological databases in which a vast host of academically verified knowledge may be accessed. Hook (2004) contends that, even on this conceptual level, theoretical frameworks may construct knowledge that favours inflexible world views which may then collude with other structures of power in marginalizing particular groups. As such, due to the nature of their accessibility and, consequently, potential for influencing popular discourse and conventional knowledge these databases were of immediate concern.

Table 1: Finalised Research Protocol

1). Research reference	
<i>Title of the research</i>	Reimagining constructions of Gender Dysphoria: a dual Systematic Review using Analytical Psychology’s concept of Individuation
<i>Principle researcher</i>	Mr Matthew Couch
<i>Supervisor</i>	Mr Alan Fourie
2). Sources	
<i>Review 1</i>	Secondary sources containing conceptual discussion on gender dysphoria and/or gender incongruence, empirical research on these topics, or critical and theoretical discussion of these topics.
<i>Review 2</i>	Secondary sources containing conceptual discussion of individuation and/or the individuation process, empirical research on these topics, or critical and theoretical discussion of these topics.
3). Search Strategy	
<i>Primary database searches</i>	Specialist databases will be searched for an initial data set. Search terms include: “gender dysphoria” & “gender incongruence” (review 1); “individuation” & “individuation process” (review 2).
<i>Secondary reference screening</i>	Secondary searches will be made through careful screening of references found in initial articles.
4). Inclusion Criteria	
<i>Period of publication</i>	Articles within a five year bracket (2014-2018) of publication.
<i>Relevant search terms in titles</i>	Articles which directly include the search terms within their titles. This process is assisted using the <i>relevance</i> filter available with the discovery tool EBSCOhost.
<i>Required content</i>	Articles with empirical research on the given topics, and/or of critical theoretical discussion on the given topics, and/or those critically reviewing theoretical issues directly related to the given topics.
<i>Peer review</i>	Articles which have undergone a process of scholarly peer review.
<i>Language</i>	Articles available in the English language.
5). Exclusion Criteria	
<i>Availability</i>	Articles which are unavailable in full text.
<i>Journal specificity</i>	Articles published outside of psychological journals.
<i>Inadequate content</i>	Articles unclear in their conceptual framing and understandings of the concerned research topics.
<i>Applicability of discussion</i>	Articles whose discussions are not directly engaging with the reserach topics.
6). Quality Assessment	
<i>Article assessment</i>	An adaption of the Joanna Briggs Institute quality appraisal checklist (Lockwood, Munn, & Porritt, 2015) will be used for inferring article quality. Relevance in content will be assessed as a primary determinant of overall ‘quality’.

The databases explored included: psychINFO and psychARTICLES. A preliminary search was conducted to determine the most relevant search terms that would be used with respect to the scope of this thesis. Additionally, the search strategy included a point of cessation where articles no longer contained the search terms within their titles. This process was assisted by making use of the ‘relevance’ filter available with the discovery tool EBSCOhost. Search terms included: “gender dysphoria” and “gender incongruence” (review 1); “individuation” and “individuation process” (review 2). Additional articles were procured by screening the references of the initial data set as a secondary search strategy. Thus, a final selection of data was determined for quality appraisal.

Phase 4: Quality Appraisal of Included Research Papers

Data selection should be followed by a process of formal critical appraisal of the resultant articles to ascertain their validity for systematic review. The importance of quality appraisal is emphasized by Popay et al. (2006) who discuss the potential for poor quality papers to skew the results derived from stronger research papers. Consequently, the overall synthesis of evidence may be devalued and become subject to bias. Therefore, the results of a systematic review lacking critical study appraisal become questionable as to their accuracy in answering the research question. As such, maintaining a formal quality assessment process ensures that the systematic review remains transparent and valid (Petticrew & Roberts, 2006).

According to Dixon-Woods et al. (2006 p. 35), “the diversity of qualitative study designs and approaches makes it impossible to specify universally agreed a priori defects”. For this reason it was deemed appropriate that a structured quality appraisal tool be adapted for the specific aims of the current research. Thus, an adaption of the quality appraisal checklist for qualitative research, provided the Joanna Briggs Institute (Lockwood, Munn, & Porritt, 2015), was developed for the current research. Three core regions of significance were established accordingly and used to appraise the relevance of the selected articles namely: content bias, methodological bias and reflexivity (see table 2, p. 41). Specifically, the quality appraisal process assessed whether the studies contained strong internal validity, and whether they were appropriate in their content for the purposes of CIS. Consequently, quality criteria may be grounded primarily by the likelihood of theoretical or conceptual contribution before the consideration of methodological rigour (Barnett-Page & Thomas, 2009). Thus, this orientation to quality appraisal was evaluated as appropriate for the specific research objective and aims in the current thesis and guided the adaption of the quality checklist.

Papers for final selection were required to meet a threshold of quality appraisal and were graded accordingly using a key (see tables 3, 4a & 4b, pp. 41-42). Overall, those that were excluded displayed two or more regions of concern or two or more incidences where the assessment criteria were not applicable (N/A). Additionally, those which displayed one region of concern with a criterion

that was not applicable were also excluded. Articles which were excluded based on these criteria were reflexively appraised for redeeming features of quality, or relevance, which might otherwise be considered useful in answering the research objective. Occurrences of N/A were typically found in articles solely focussed on a theoretical discussion and reflection where methodological consideration became redundant. Before final selection, the researcher adopted an iterative process of quality appraisal by reflecting on the selection criteria and theoretical orientation as potentially influencing this process. Ultimately, the quality appraisal process concluded the systematic selection of final papers for review and CIS analysis (see figures 1a & 1b, p. 43). For a summary of the specific papers of inclusion in each review see appendix 1 and 2 accordingly.

Table 2: Regions of Significance for Quality Appraisal

Content bias	Occurs when the content of the research is inaccurately or poorly represented in the results or if the content is insufficiently discussed. This includes adhering to ethical standards of representing the target population and their voices, and presenting conclusions which are in line with the utilised data.
Methodological bias	Occurs when there is a lack of congruence between the stated methods, and/or objectives, and/or conceptualizations, and/or theoretical underpinnings with the actual methodological procedures utilised.
Reflexivity	Refers to the researcher's acknowledgement of and/or attempts to reduce the potential effects their cultural, theoretical, and personal positioning might have on the course of the research – this includes reflection on the effects of engaging with the research and the study's own limitations.

Table 3: Quality Appraisal Key indicating thresholds for Inclusion and Exclusion

Regions of significance	Grade	Decision
<i>No areas of concern or N/A</i>	Good	Include
<i>One area of concern</i>	Adequate	Include
<i>One area of N/A</i>	Adequate	Include
<i>Two or more areas of concern</i>	Poor	Exclude
<i>Two or more areas of N/A</i>	Poor	Exclude
<i>Combined area of concern with area of N/A (with no redeeming relevance features)</i>	Poor	Exclude

Table 4a: Quality Appraisal results for Review 1

Area of concern	Number (%) of 49 <i>gender dysphoria</i> articles	Number (%) of the 5 <i>gender incongruence</i> articles
<i>Considerable methodological bias present</i>	3 (6%)	None (0%)
<i>Poor/absent reflexivity</i>	17 (35%)	2 (40%)
<i>Considerable content bias present</i>	None (0%)	None (0%)
<i>N/A occurrence</i>	5 (10%)	1 (20%)
<i>Total quality grade (good; adequate; poor)</i>	25 (51% good); 20 (41% adequate); 4 (8% poor)	3 (60% good); 1 (20% adequate); 1 (20% poor)
<i>Final included articles</i>	<u>45 (92%)</u>	<u>4 (80%)</u>

Table 4b: Quality Appraisal results for Review 2

Area of concern	Number (%) of the 25 <i>individuation</i> articles	Number (%) of the 4 <i>individuation process</i> articles
<i>Considerable methodological bias present</i>	1 (4%)	1 (25%)
<i>Poor/absent reflexivity</i>	9 (36%)	2 (50%)
<i>Considerable content bias present</i>	1 (4%)	None (0%)
<i>N/A occurrence</i>	3 (12%)	3 (75%)
<i>Total quality grade (good; adequate; poor)</i>	12 (48% good); 12 (48% adequate); 1 (4% poor)	1 (25% good); 0 (0% adequate); 3 (75% poor)
<i>Final included articles</i>	<u>23 (92%)</u>	<u>1 (25%)</u>

Figure 1a: Eligibility Chart displaying significant Steps towards Final Paper Selection (review 1)

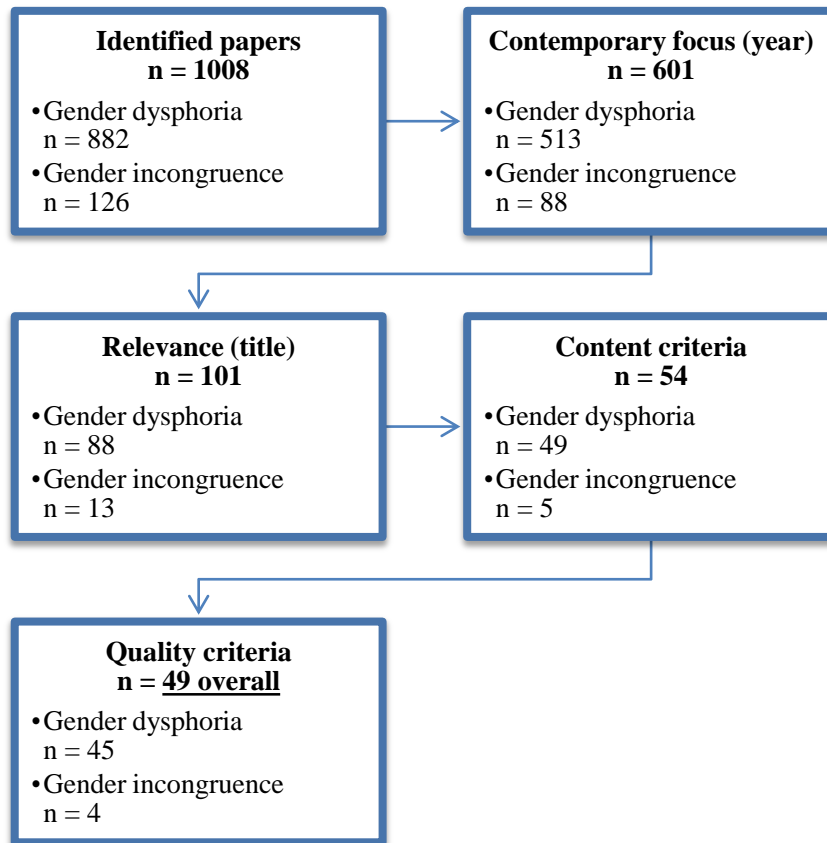
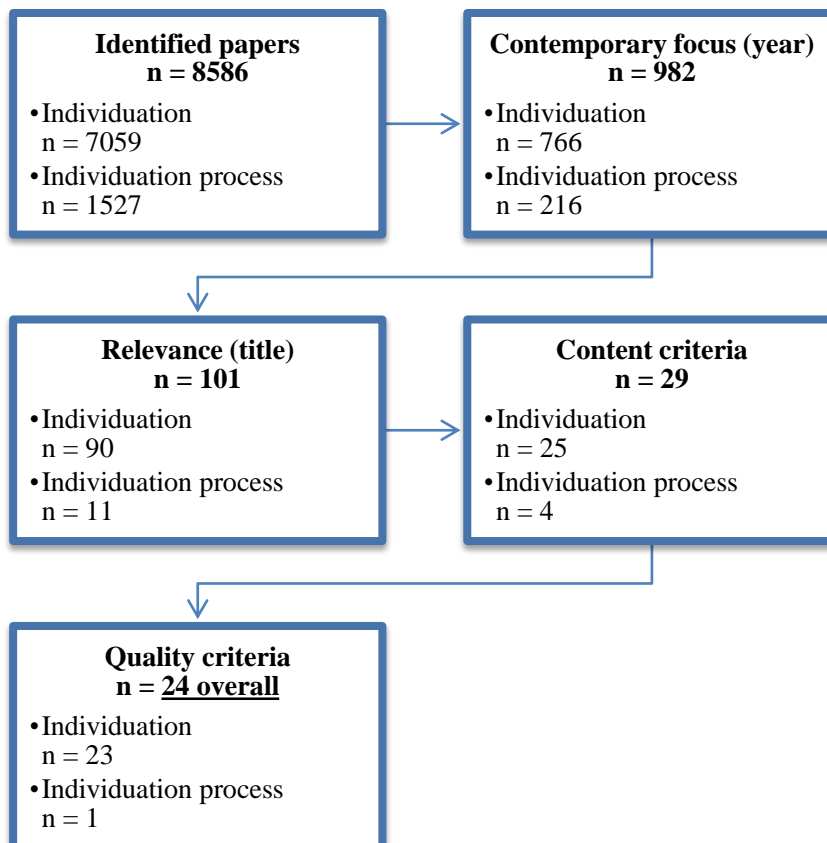


Figure 2b: Eligibility Chart displaying significant Steps towards Final Paper Selection (review 2)



The Critical Interpretive Synthesis Process

Following quality appraisal a final data set was established to undergo review and CIS analysis. As previously discussed, the final phase of systematic review requires that explicit methods be used to synthesise the content of the included papers (phase 5). CIS was conducted specifically due to its ability to satisfy a comprehensive range of literature typically out of scope for traditional systematic synthesis methods, and for its ability to go beyond aggregative summaries of thematic content (Barnett-Page & Thomas, 2009). As such, synthesis involved a dynamic process informed by a set of recursive, flexible and interchangeable steps informed by Dixon-Woods, Cavers and Agarwal et al. (2006): (1) detailed inspection and critical screening of the literature; (2) generating thematic categories and exploring relationships; (3) interpreting the analysis into a final synthesized form.

Step 1: Detailed Inspection & Critical Screening of the literature

Initial inspection of the selected papers marks the start of the synthesis process. This involves the identification of recurring conceptual themes while remaining critical of both the knowledge informing and the knowledge constructed by these given themes. The aim of this process is to uncover the conceptualizations defining the given phenomenon and to establish an understanding of the driving forces influencing their construction (Wakefield et al., 2018). As such, conceptual themes are interpreted under critical inspection and not immediately accepted at face value. Hence, the screening process involves creative interpretation through explicit questioning of conceptualizations as representing infallible, conventional knowledge (Dixon-Woods, Cavers & Agarwal et al., 2006).

The current thesis made use of a wide literature search to become acquainted with the major theoretical perspectives on the topics at hand (gender dysphoria and individuation). This informed the researcher to maintain a contemporary critical orientation to the screening and inspection of the chosen papers for review. In the first review, themes on gender dysphoria were analysed by their general approach to conceptualizing gender incongruence and gender nonconformity through either social or medical discourse. Specifically, the screening process sought to determine the authors' stances on *gender diversity* and how this impacted their constructions of gender dysphoria and gender identities. Likewise, the second review critically analysed authors' epistemic orientation as an influence in the generation of knowledge on individuation in identity. The screening process remained particularly critical of individuation constructions which might be construed as lacking contemporary consultation or relevance.

Step 2: Generating Thematic Categories & exploring Relationships

The construction of thematic categories is significant in providing detailed description of the phenomenon encompassed by the literature. Mothupi et al. (2018) discuss this process as necessitating an additional generation of higher-order constructs which more adequately represent the contextual complexity to the themes not otherwise revealed by the evidence. These ‘synthetic constructs’, as postulated by Dixon-Woods, Cavers and Agarwal et al. (2006), are grounded in the evidence but involve an interpretative process; providing greater clarity and insight into the nature of the phenomenon by the unification of its disparate elements into more meaningful units. However, it remains essential that continuous comparison is made with original constructs found within the source material to maintain reflexive rigour (Wakefield et al., 2018). Once conceptual saturation is achieved both original and synthetic constructs are arranged into higher-order categories based on their relational connections in preparation for final analysis and synthesis.

The current thesis made use of a qualitative data analysis programme, Nvivo 11 software, to aid in the capturing and organisation of recurring patterns, themes and categories across the data set. As such, thematic content was manually coded by critical identification and generation of constructs and involved a frequency count. It is noteworthy to mention that, as with most qualitative analysis, a process of creative interpretation typically ensues and, consequently, complete transparency is not possible (Dixon-Woods et al., 2006). However, the critical orientation of critical interpretive analysis addresses the threat of narrow or one-sided construct generation. Additionally, themes were coded repeatedly, with reflexive amendments to categories, until complete saturation was completed. Ultimately, relational concepts were merged into higher-order categories in both reviews as conceptual foundations for the construction of conceptual frameworks on gender dysphoria and individuation respectively.

Step 3: Interpreting the Analysis into a finalised Synthesis Form

A finalised synthesis process is conducted after thematic categorisation and organisation in pursuit of producing contributory conceptual knowledge that is grounded by the conceptual evidence found within the review. This procedure allows for a finalised synthesis to take place and inform the critical discussion of current conceptual knowledge and the consequent suggestion or contribution towards future theoretical frameworks (Barnett-Page & Thomas, 2009; Mothupi et al., 2018). Importantly, the finalised synthesis form is subjected to an iterative process so that the research questions might be addressed as directly as possible.

McFerran et al. (2017) have established the effectiveness of transforming data into synthesised frameworks grounded in the theoretical constructs emerging from thematic analysis. As such, the current thesis utilised this synthesis procedure to establish a representative conceptual framework on

gender dysphoria with specific reference to literature consulted in the previous establishing chapters (chapters 1-3). Likewise, a critical synthesis process led to the construction of a conceptual framework on individuation representing the conceptualizations found within the literature. Through reflexive practice, the final syntheses were modified to best represent the conceptual inferences drawn from the research papers in each individual review. Consequently, these formed as substantial foundations to inspect the conceptual space of gender dysphoria and to base critique of current conceptualizations. Finally, these were also comparatively analysed in addressing the available room for gender dysphoria conceptualizations which might consider the concept of individuation.

This final step in the CIS process brings the methodology chapter to its end. The research aims and objectives were discussed in light of the contextual literature consulted in earlier chapters. This informed the chosen methodology of systematic review for both gender dysphoria and individuation, and the decision to diverge from typical aggregative syntheses by adopting CIS procedures. As such, an initial outline was given to describe systematic review and CIS processes with an in-depth expansion of these methods in subsequent discussion. Specific reference was made to each phase of the research process as it manifested within the current research. The following two chapters will explore the results procured by the researcher.

Chapter 5: A Representative Framework for Gender Dysphoria

The methodology chapter highlighted the need for a dual systematic review process in addressing the overall research aims and objective. Consequently, contemporary psychological literature on both *gender dysphoria* and *individuation* was inspected for their conceptual content. The current chapter will present the results obtained in the first review on gender dysphoria.

Through an iterative process of theme generation an initial list of recurrent themes was established with an inclusion of a frequency count. This process was administered reflexively until saturation was achieved. Categories were altered accordingly as further thematic knowledge emerged in order to most accurately represent the conceptual content. As such, this led to the generation of primary constructs and, ultimately, influenced the generation of higher-order synthetic constructs. Together, these conceptual themes were arranged into significant categories of meaning. These provided the foundation for the construction of a framework representing the conceptualizations within the literature on gender dysphoria and nonconforming gender identities. Ultimately, the initial research question and its sub-question were answered through the use of this emergent conceptual framework.

Primary Constructs identified in Thematic Generation

The final primary constructs were established through critical inspection of each research paper for conceptual framings concerning gender dysphoria and, by extension, gender nonconformity. This process was administered repeatedly until thematic saturation and comprehensive conceptual representation were achieved. The resultant primary constructs were identified with specific consideration of the potential for establishing themes with high sensitivity or, contrarily, specificity. As such, the identified constructs remained fairly broad by avoiding thematic ideas which were largely isolated, while balancing this process with checks to ensure appropriate inclusivity.

A list of the final primary constructs was established by arranging them from most to least prevalent within the included research papers while noting each construct's occurring frequency overall within the review (see table 5, p. 48). These constructs will be discussed in detail below with reference to this table. This will provide a grounding of conceptual inferences, drawn from the review process, to be used in further analysis and discussion.

Table 5: Finalised list of Primary Constructs identified in Review 1		
Conceptual Construct	Number (%) of the 49 papers involving the construct	Occurrence of the construct within the entire review
Co-morbidity & psychosocial difficulties	46 (94)	229
Referencing the DSM clinical criteria	46 (94)	86
Stigma, discrimination & abuse	37 (76)	122
Neuro-biological determinants & correlates	22 (45)	56
Transitional interventions effective	19 (39)	58
Body dissatisfaction	18 (37)	44
Poor or uncertain intervention prognosis	16 (33)	29
Socio-cultural attributions	14 (29)	25
Collaboration needed	12 (24)	27
Growing social acceptance & understanding	12 (24)	15
Psychologically attributable	11 (22)	24
Addressing known misconceptions	11 (22)	20
Adolescent onset persists	6 (12)	6
Psychoeducation is helpful	5 (10)	6
Transition procedures require capacity for informed consent	4 (8)	11
Association with sexual dysfunction & fetishism	3 (6)	6
Healthcare feedback is important	2 (4)	3

Co-morbidity & psychosocial difficulties

Across the literature gender dysphoria was situated as having strong associations with various co-morbid experiences and psychosocial difficulties. Almost every paper (46/49) discussing gender dysphoria or *gender incongruence* made reference to this thematic construct. Additionally, it was the most frequently occurring primary construct across the review occurring 229 times. Notable co-morbid experiences included traits of autism spectrum disorder (ASD), eating pathology, body dysmorphia, affective disturbances, suicidal ideation and suicide attempts, self-harm, social ostracism, childhood trauma and neglect, and familial and relational difficulties. Associations of ASD, eating pathology and body dysmorphia were most prevalent in co-occurring conceptualizations of gender dysphoria.

Most significantly, the presence of ASD symptomology was associated with gender dysphoria. The symptomology found in each clinical category were frequently found to be interwoven; demonstrating an overrepresentation wherein there is cause to suspect more than mere coincidental co-occurrence (Heylens et al., 2018; Leibowitz & de Vries, 2016; Ristori & Steensma, 2016; Skagerberg, Di Ceglie, & Carmichael, 2015; Strang et al., 2018; van der Miesen, de Vries, Steensma, & Hartman, 2017).

Consequently, gender dysphoria was largely conceptualized as having ASD precursors and vice versa. Notably, the presence of gender dysphoria was hypothesised as potentially reflecting ASD traits of intense obsessional interest with an ‘other’ gender (Van Der Miesen, Hurley, & de Vries, 2016; VanderLaan et al., 2015). Nevertheless, gender dysphoria was found to be framed as having a robust connection with ASD symptomology regardless of the nature of the clinical presentation.

The experience of gender dysphoria was discussed frequently as being mired within symptomology found in body dysmorphia and in eating pathology. Specifically, discontent with physical features was emphasised as an aetiological contributor in the development of both eating disorders and gender dysphoria (Couturier, Pindiprolu, Findlay, & Johnson, 2015; Holt, Skagerberg, & Dunsford, 2016; Peterson, Matthews, Copps-Smith, & Conard, 2017; Turan et al., 2018). This association was made in relation to the desire for bodily change by concealing or altering undesirable physical features through pathological eating habits (Olson, Schragar, Belzer, Simons, & Clark, 2015; Schneider et al., 2017). As such, *gender identity*, particularly in individuals experiencing gender dysphoria, is considered as a potential risk factor for eating disturbances (Strandjord, Ng & Rome, 2015; Turan, Poyraz, & Duran, 2015). Thus, gender dysphoria was found to be conceptualized as having a significant association with eating disturbances and body dysmorphia.

Referencing the Diagnostic and Statistical Manual of Mental Disorders (DSM) clinical Criteria

A theme also present in nearly every paper (46/49), albeit with a far lower overall frequency of 86, was the referencing of clinical criteria, associated features and definitions provided by the DSM for gender dysphoria. In assessing the presence of gender dysphoria or in critical theoretical discussion of individuals with *gender incongruence*, almost every paper drew on various editions of the DSM to contextualise their research. Most commonly, referencing this diagnostic and statistical manual reiterated its clinical definition for gender dysphoria:

“Gender dysphoria (GD) is a recognized condition in which there is marked incongruence between an individual's expressed/experienced gender and their biological sex assigned at birth. It is manifested in a variety of ways, including a strong desire to be accepted as the other gender, to be rid of one's sex characteristics, or a strong conviction that one has feelings and reactions typical of the other gender” (Turan, Poyraz, Öcek Baş, Kani, & Duran, 2015, p. 61).

The use of such definitions were found across the review; decisively replicating those found in the DSM in order to have a point of reference for claims or reflections made in later discussion (Bailey, 2014; Cousino, Davis, Ng, & Stancin, 2014; Firth, 2015; Lawrence, 2014; Marshall, Cooper, & Rudnick, 2015; Nota et al., 2017; Ristori & Steensma, 2016; Schwarz et al., 2016; Staphorsius et al.,

2015; van de Grift et al., 2016; VanderLaan et al., 2015; Vrouenraets, Fredriks, Hannema, Cohen-Kettenis, & De Vries, 2015). Thus, the DSM criteria served as an orientation for many papers to relate or reiterate their arguments and, as such, reinforced this clinical conceptualization.

Stigma, discrimination & abuse

The review identified a significantly present theme (37/49 papers) of experienced stigma by those with gender dysphoria and those with non-binary gender identities. Additionally, these individuals were discussed as experiencing a great deal of abuse and discrimination often rooted in the stigma associated with individuals who have nonconforming gender presentation. Indeed, a considerable association was made with individuals with gender dysphoria as being victimised on the basis of gender identification at odds with binary gender expectations (Berlin, 2016; Erasmus, Bagga, & Harte, 2015; Hilário, 2017; Jokić-Begić et al., 2017; Marshall et al., 2015; Peterson et al., 2017; Strang et al., 2018; Telles Silveira, Knoblock, Silva Janovsky, & Kater, 2016). Both the social and medical stigma faced by non-binary identities has been found to greatly increase their risk of negative health outcomes and social ostracism (Cousino et al., 2014; Couturier et al., 2015; de Vries, Steensma, Cohen-Kettenis, VanderLaan, & Zucker, 2016; Firth, 2014; Olson et al., 2015; Turan et al., 2015). This theme is considered by some as a significant source of distress for nonconforming identities; conceptualizing gender dysphoria as a state of distress not necessarily implicated by incongruence with the binary (de Vries et al., 2016; Holt et al., 2016; Turan et al., 2018). Ultimately, gender dysphoria was found to be conceptualized as an experience of distress through its considerable exposure to stigma, discrimination and abuse.

Neuro-biological determinants & correlates

The review identified a growing conceptual framing of gender dysphoria through biological correlates and neural connectivity found in those with non-binary identification. This construct was present within 22/49 research papers and was found to frame gender dysphoria by the intrinsic neuro-biological mechanisms emerging in contemporary studies. According to Nota et al. (2017, p. 188) “the most common hypothesis is that people with GD have experienced a sex-atypical differentiation of the brain during fetal development”. This association was found across this conceptual theme and depicted gender dysphoria as having some neuro-biological development specific to an atypical *gender experience* (Berlin, 2016; Burke et al., 2016; Feusner et al., 2016; Firth, 2015; Leibowitz & de Vries, 2016; Staphorsius et al., 2015; Yildirim, Fis, Akgul, & Ayaz, 2017). Thus, the suggestion that gender dysphoria may have an underlying pattern of inherent neuroconnectivity or biological features was found in some conceptualizations in this review. However, not all neuro-biological evidence was in accordance on this matter; suggesting conversely that no identifiable correlates or aetiological underpinnings can yet be confirmed for gender dysphoria. It should be noted that despite inconclusive

evidence, there are increasing conceptualizations framing gender dysphoria through this neuro-biological lens (Junger et al., 2014).

Prognosis & effectiveness of intervention procedures

Research papers within the review were found to discuss the impact of transitional interventions and procedures regarding gender reassignment. These included: puberty suppressors, cross-sex hormones, gender reassignment surgery, psychoeducation and familial support structures, and youth programmes and summer camps for *gender diverse* children. More papers opined that intervention procedures were effective in addressing or managing the needs of those seeking further health resources (19/49 papers), with slightly fewer discussing such interventions to have a poor or uncertain prognosis (16/49 papers). However, it should be noted that the frequency of transition procedures having a positive effect was approximately twofold comparatively (a frequency ratio of 58:29). Yet, discussions indicating intervention and transition effectiveness were often considerate of both sides to this debate.

Notably, arguments against the use of intervention procedures cited statistics describing significant symptomology still present within these individuals post-intervention, with especially high suicide ideation and mortality rates (Berlin, 2016; Defreyne et al., 2018; Lawrence, 2014; Osborne & Lawrence, 2016). Conversely, those advocating these interventions described the considerable improvement found in the cognitive, affective, social and occupational functioning of the concerned individuals (Costa & Colizzi, 2016; Olson et al., 2015; Strandjord et al., 2015; Strang et al., 2018; Turan et al., 2015, 2018). As such, proponents were found to conceptualize gender dysphoria as benefiting in various areas of overall life satisfaction while those against interventions retained a conceptual focus on a lack of improved clinical functioning.

Body Dissatisfaction

The association of body dissatisfaction in those with gender dysphoria was found to be moderately prevalent (18/49 papers) within this review. This theme conceived of gender dysphoria as an experience rooted in a fundamental dissatisfaction with one's body which is found to be incongruent with an internally experienced gender identity. Thus, a primary source of distress in gender dysphoria was suggested to be consequent of concerns with and negative evaluations of the body (Turan et al., 2018). Various papers deduced a strong correlate of body dissatisfaction within individuals experiencing gender dysphoria (Cousino et al., 2014; van der Grift et al., 2016; Turan et al., 2015; Peterson et al., 2017). As such, these contributed to their presentation of gender dysphoria in the execution and discussion of their research.

Socio-cultural attributions

Gender dysphoria has been conceived of by some papers (14/49) as having socio-cultural factors moderating its existence and prevalence. Cultural parameters may shift throughout time and alter the level of accepted gender variation within societies (Lehmann & Leavey, 2017). Indeed, the presence of gender dysphoria may represent contemporary belief systems about one's capacity for existing within the wrong body and having atypical gender presentation (Berlin, 2016). Based on their research on gender dysphoria prevalence rates, Kuyper and Wijzen (2014) found a significant socio-cultural correlate in gender nonconformity. They reported that non-Western populations displayed a double prevalence rate of gender incongruent identities due to minimal assimilation of the binary model of gender which is dominant within many Western cultures. This difference may also account for variation in psychological functioning for individuals with gender dysphoria located in differing socio-cultural environments (Ristori & Steensma, 2016). As such, the review found gender dysphoria to be conceptualized as having social and cultural dimensions; permitting its degree of social 'existence' and the course which it may take.

Additionally, the review found some papers (2/49) to use a historical perspective to demonstrate the socio-cultural nature of gender dysphoria. Historical examples of gender variation across different cultures were considered in conceptualizing gender incongruence and nonconformity within the modern context (Winograd, 2014). Indeed, in the current era some gender dysphoria conceptualizations may be seen to disregard historical and cultural examples of societies that are inclusive of diverse gender presentations (Berlin, 2016).

Collaboration needed

Regarding the increased prevalence of gender dysphoria a fair amount of research papers (12/49) indicated the need for multidisciplinary collaboration in addressing many of the conceptual and practical issues currently faced by health professionals. This collaboration was discussed to consist of: gender diverse individuals themselves, community activists, clinicians and trainees, researchers and academics, sociologists, lawyers, and social workers (Holt et al., 2016; Winter, De Cuypere, Green, Kane, & Knudson, 2016). Such collaboration is needed to address the barriers to health care, which have been established in the socio-political space of conceptual contention, and the diagnostic difficulties faced by health professionals (Leibowitz & de Vries, 2016; Schwarz et al., 2016). Thus, gender dysphoria and gender nonconformity were framed as needing collaborative action regarding the progression of discourse and the rights of the gender diverse community.

Growing social acceptance & understanding

Approximately one fourth of the research papers (12/49) made reference to the conceptual theme of growing social acceptance of gender diverse identities in various social spheres. Arguably, as knowledge and awareness in these matters increases so might social tolerance of individuals varying from the *gender binary*. These papers acknowledged a socio-political progression making ground in matters of gender dysphoria and the greater nonconforming community (Cousino et al., 2014; Hilário, 2017; Peterson et al., 2017; Winograd, 2014). Such observation is made in light of the reconceptualization efforts which can be seen in recent years, and in the attempts to establish more appropriately sensitive definitions of gender inclusivity (Firth, 2015).

Psychologically attributable

Some papers (11/49) made an association of gender dysphoria as having a psychological aspect accounting for its development. Typically, these theories have focused on the impact of identity formation, attachment difficulties and parental influence in the development of gender incongruent presentation, albeit with decreasing frequency over time (Gregor et al., 2016). This construct was found to have a relatively small presence in this review. However, it is significant to consider as the review was contextualised within psychological literature. These conceptualizations suggested the possibility of gender dysphoria resulting from atypical or divergent psychological development. Consequently, gender dysphoria may become viewed as necessitating psychotherapy to align the psychological mind to fit within binary expectations of gender development (Winograd, 2014).

Addressing known misconceptions

With consideration that gender dysphoria matters are contested and in a state of conceptual reorganisation, some research papers (11/49) made attempts to address common misconceptions. These misconceptions still exist despite a significant body of literature confirming otherwise. Notable misconceptions addressed: discerning the difference between gender dysphoria as a medically diagnosed condition in contrast with *gender nonconforming* identification (Moser, 2017), the use of cross dressing in gender dysphoria as conforming to internally experienced gender in contrast with cross dressing used for sexual arousal outside of gender dysphoria (Berlin, 2016), the assertion of gender identity having a deterministic effect on sexual orientation (Firth, 2015), the misconception of sexual characteristics assigned at birth necessarily having deterministic effects on the internal experience of gender (Kuyper & Wijzen, 2014; Leibowitz & de Vries, 2016). However, while it remains a noteworthy theme in reconceptualization, this subject was not discursively distinctive overall within this review.

Adolescent onset typically persists

In discussing the course of gender dysphoria, some research papers (6/49) framed an adolescent onset as a fairly certain indicator for the lifespan into adulthood. These conceptualizations of gender dysphoria viewed the impact of pubescent developments as pivotal in its development into adulthood (Vrouenraets et al., 2015; Leibowitz & de Vries, 2016; Pasterski, Gilligan, & Curtis, 2014). Interestingly, Gregor et al. (2016) contend contrarily that retrospective studies in gender dysphoria are increasingly reporting on adults who recognised their incongruent gender identities before the onset of adolescence. This is in contrast to conceptual frameworks emphasising the presence of gender dysphoria in children as likely to dissipate within their developmental course (Vrouenraets et al., 2015).

Psychoeducation is helpful

Although not particularly prevalent, the conceptual theme of psychoeducation used to assist those diagnosed with gender dysphoria and their families was identified in the review (5/49 research papers). Psychoeducation involves collaborative knowledge generation between clinician and the individual experiencing an incongruent gender identity so that clinical prejudice and discrimination may be reduced (Jokić-Begić et al., 2017). The individual and their families may benefit from an educational outline of options for moving forward (including risk-benefit analyses), counselling sessions to aid in the adjustment period, and insight into the available resources for those dealing with this experience (Berlin, 2016; Cousino et al., 2014; Ristori & Steensma, 2016). Conversely, psychoeducation about gender fluidity and nonconforming gender presentation may be helpful for individuals with minor gender identity confusion to ascertain where they might fit within a gender diverse framework (Strang et al., 2018). Thus, gender dysphoria is framed as an experience benefitting from collaborative psychoeducation.

Transition procedures require capacity for informed consent

A small thematic construct found in the review (4/49 research papers) discussed the necessity of informed consent preceding the decision to undergo hormonal intervention and gender reassignment surgery. Proponents of transition procedures viewed children and adolescents as capable of participating in the consent process while those against it questioned the capacity of these individuals to participate fully in this process (Vrouenraets et al., 2015). Specifically, papers discussed the importance of psychoeducation regarding the risks (both reversible and irreversible) in contrast with the benefits of gender reassignment options prior to making the decision for transition (Leibowitz & de Vries, 2016; Osborne & Lawrence, 2016; Strang et al., 2018).

Association with sexual dysfunction & fetishism

An infrequent theme identified in the review (3/49 research papers) was the association of sexual dysfunction and fetishism with individuals experiencing gender dysphoria. It is important to note this theme due to its considerable impact on conceiving of gender nonconformity in gender dysphoria as pathological. While authors did not make this association themselves they acknowledged the problematic presence of this theme still rife in specific discourse on gender identity (Defeo, 2015; Winograd, 2014). However, Lawrence (2014) was found to make repeated reference to disorders of sexual dysfunction in gender incongruence – reflecting the presence of this association, perhaps, as still present within discourse related to gender diverse identification.

Healthcare feedback is important

The smallest theme uncovered in the review (2/49 research papers) was the importance of healthcare feedback. In particular, satisfaction with healthcare, as encouraged by health professionals when dealing with clients with gender dysphoria, was considered directly related to increased physical and emotional well-being (Erasmus et al., 2015; Telles Silveira et al., 2016). As such, conceptualizations of gender dysphoria were considered as benefiting from the input of individuals receiving healthcare.

Synthetic Constructs derived through Thematic Generation

In supplementing the identified primary constructs, and as a strategy to capture a more realized representation of gender dysphoria conceptualizations in the literature, a process of deriving synthetic constructs took place. These proved vital in providing greater clarity and insight into the manner in which gender dysphoria was conceptualized. While these synthetic constructs required an intrinsic process of interpretation they were, nonetheless, grounded in the conceptual evidence contained in the primary constructs. A finalised list of the synthetic constructs was arranged into descending prevalence with an inclusion of overall occurring frequency within the review (see table 6 below).

Table 6: Finalised list of Synthetic Constructs derived in Review 1

Conceptual Construct	Number (%) of the 49 papers involving the construct	Occurrence of the construct within the entire review
Medicalization	49 (100)	253
A conceptually complex task	44 (90)	187
Insufficient knowledge	38 (76)	82
Critical reflection on contentious issues	36 (73)	96
Challenging a disordered experience	27 (55)	52
Growing need for healthcare	23 (47)	54
Alternative conceptualization	13 (27)	30
Expressed sympathy	12 (24)	21

Medicalization

The largest thematic construct encountered overall in this review was the medicalization of those with incongruent gender presentation or with nonconforming gender identities. The review uncovered medicalization within every research paper (49/49) and it was found to have an especially high frequency count occurring 253 times. The medicalization of gender dysphoria was determined as a recurring construct when authors conceived of it, or made reference to it, as a clinically diagnosable experience with associated symptomology and an ascribed set of treatment options. By extension, the medical and diagnostic features attached to gender dysphoria were linked additionally to a broader community of gender diverse individuals who may or may not be distressed by their experience. This extension was not necessarily deliberate, but often an implicit attribution.

In constructing gender dysphoria as a clinically diagnosable condition some researchers referred to identification procedures established for assessing its presence – which rely on predetermined clinical criteria or assessment batteries (Couturier et al., 2015; Moser, 2017; Olson et al., 2015; van de Grift et al., 2016; VanderLaan et al., 2015). These identifiers define the thresholds for diagnostic labels to be attached to atypical gender presentation when it is assessed as being distressing for the individual. Broadly speaking, gender dysphoria was conceived as being treatable via two main routes: through the use of psychotherapy to try to alter the individual's state of mind to become more comfortable within the given body, or medical intervention may be pursued in efforts to align the body to the internally experienced gender identity (Berlin, 2016; Osborne & Lawrence, 2016; Ristori & Steensma, 2016; Strandjord et al., 2015; Strang et al., 2018; Winograd, 2014). Thus, both approaches are found to conceptualize gender dysphoria as requiring some resolution, whether psychologically or physically, wherein individuals become assimilated into the gender binary.

The medicalization of those with incongruent gender identities is located centrally within the conflict of pathologization and access to care. Clinical classification of gender dysphoria is acknowledged currently as important in facilitating further access to health professionals and medical resources, enabling reimbursement, providing a protected status against discrimination, and generating support forums for individuals and their families (Cousino et al., 2014; Jokić-Begić et al., 2017; Leibowitz & de Vries, 2016; Winter et al., 2016). Moreover, Hilário (2017) highlighted the detrimental effect which complete demedicalization might have on the transition process by limiting the extent of support currently available from medical professionals. Nevertheless, proponents of demedicalization cited the medicalization of nonconforming or incongruent gender identities as unhelpful as it pathologizes those with gender dysphoria or non-binary gender presentation through its stigmatizing effects (Bailey, 2014; Gregor et al., 2016; Moser, 2016).

Thus, this theme was found to conceive of gender dysphoria as a medically diagnosable condition with treatment and management protocols. Ultimately, gender dysphoria was conceived as resolving through assimilation either into the natal gender (assigned at birth) or into the desired gender (as internally experienced). However, gender dysphoria was conceptualized with acknowledgment of the pathologization associated with the medicalisation of those with nonconforming gender presentation who desire gender transition.

Insufficient Knowledge & a Conceptually Complex task

The review uncovered the theme of conceptual complexities and difficulties in matters related to gender dysphoria. As a consequence of insufficient dependable knowledge and literature on gender dysphoria, a construct found within 38/49 research papers, matters of gender conceptualization are considered complex and ethically challenging. This was encountered in almost every research paper (44/49) which discussed conceptually complex tasks related to gender nonconformity conceptualization. This thematic construct occurred as the third most frequent theme overall in this review with a count of 187 times. The most prominent conceptual difficulties are discussed below.

The review identified considerable discussion of the ethical difficulties implicated in treating children and adolescents with gender dysphoria with medical interventions. Authors suggested conflicting knowledge on risks and benefits of medical procedures, capacity to consent, and the expected prognosis for gender transitioning individuals as specific challenges for health professionals (Leibowitz & de Vries, 2016; Moser, 2017; Ristori & Steensma, 2016; Staphorsius et al., 2015; Strang et al., 2018). Specifically, the use of puberty suppressors has been subject to much controversy due to differing conceptualizations of gender dysphoria and, consequently, what is considered symptomatic and in need of intervention or not. Paradoxically, “proponents and opponents of puberty suppression use the same ethical principles (autonomy, beneficence, nonmaleficence) but interpret them in totally different ways” (Vrouenraets et al., 2015, p. 368). This complex conceptual difficulty frames gender dysphoria as being subjected to great debate in its nature and associated treatment.

Another noteworthy difficulty encountered was the need for creating a diagnostic category which simultaneously satisfies medical formalities tied to treatment while avoiding the stigmatization which is given to labels found in diagnostic classification manuals (Bailey, 2014; Jokić-Begić et al., 2017; Kuyper & Wijzen, 2014; Moser, 2017). Research findings by Winter et al. (2016) describe a shift towards such conceptualization wherein gender incongruence may become increasingly viewed as a factor influencing health status instead of a mental condition; as led by categorical and semantic changes in diagnostic manuals. Yet, gender incongruence may still be considered at risk for stigmatization by its association with a classification system inclusive of disease and disorder. Such ambivalence may be considered a challenge to overcome in reconceptualization efforts.

Another conceptual difficulty derived from this review was the lack of consensus among health professionals on guidelines for managing clients presenting with gender dysphoria. As much knowledge and literature on gender dysphoria remain contested there are no universally agreed upon strategies for making clinical decisions. Difficulties affecting the establishment of dependable guidelines for clinical management included: complex co-morbid presentation with various psychopathologies, differing needs for distinct age groups, critique on the use of dominant *cisgender* and neurotypical approaches, biased presentation by individuals and families in efforts to bypass gatekeeping, and the transient nature of gender dysphoria in some individuals (Cousino et al., 2014; Gregor et al., 2016; Lehmann & Leavey, 2017; Strang et al., 2018; Van Der Miesen et al., 2017). Overall, gender dysphoria was conceived as a conceptually confounding experience especially with regard to ethical issues.

Critical reflection on contentious issues

A significantly present conceptual theme (found in 36/49 research papers) with a substantial frequency count of 96 was critical reflection on contentious issues faced in the conceptualization of gender dysphoria and nonconforming gender identities. These reflections were particularly varied and, as such, only the more prevalent discussions are presented below.

The state of current conceptualization was a source of reflection within some discussions critiquing its categorical approach to gender framing. Consequently, the need for more precise conceptualizations that take into mind the intersectionality of identities in a more dimensional way were discussed as necessary in moving forward (Defeo, 2015; Heylens et al., 2018; Olson et al., 2015; Strang et al., 2018; van de Grift et al., 2016; Winter et al., 2016). However, there was some recognition by others that the gender binary is in the process of dismantling albeit incrementally (Firth, 2014; Hilário, 2017; Holt et al., 2016; Junger et al., 2014; Lehmann & Leavey, 2017; Winograd, 2014). Thus, these reflections acknowledged that reconceptualization is progressing to become more inclusive of gender diversity.

Notably, critical reflection was made on the nature of gender identity as a complex and dynamic feature to conceptualize; questioning the relevance of singular and reductionist approaches in understanding the aetiology and development of gender identity. As such, a pluralistic approach may better account for gender development rather. Indeed, it was postulated that neither a psychological nor biological model alone can account for gender development and so predominate in directing its management; attending to individual's specific needs was perceived as more helpful instead (Gregor et al., 2016; Strang et al., 2018; Van Der Miesen et al., 2017; Yildirim et al., 2017). In this manner, gender dysphoria was conceptualized as needing a pluralistic, collaborative approach while remaining sensitive to the individual's specific needs.

Others reflected critically on the effect of stigmatization and pathologization as a result of the medicalization of gender dysphoria and nonconforming gender identities. In the current social climate, medicalization was conceived as a necessary feature if access to care is to be ensured and, consequently, efforts should be centred on collectively finding ways to remove stigmatization and pathologization rather than complete removal of diagnoses (Bailey, 2014; Jokić-Begić et al., 2017). Indeed, the need for social tolerance and understanding of gender diversity was identified as a prime task in the current conceptual space (de Vries et al., 2016; Leibowitz & de Vries, 2016; Moser, 2017; Ristori & Steensma, 2016). Thus, gender dysphoria was framed as requiring critical reflection on the contention surrounding its conceptualization.

Challenging a disordered experience

A fair amount of research papers (27/49) were found to challenge the notion that gender dysphoria, and by extension gender nonconformity, indicate a disordered experience. The frequency of this theme was moderately present occurring 52 times.

According to Berlin (2016), being different from expected societal norms on gender is not synonymous with being disordered. Indeed, Moser (2017) contested that conflicts between individuals and societies based on socially deviant behaviour are insubstantial foundations upon which to base pathological labels of disordered behaviour. Many other papers involved such conceptualizations in which an atypical experience of gender from others was considered as examples of diversity or variation, and that those distressed do not necessarily reflect the larger community (Firth, 2015; Hilário, 2017; Jokić-Begić et al., 2017; Kuyper & Wijzen, 2014; Leibowitz & de Vries, 2016; Olson et al., 2015; Vrouenraets et al., 2015) . Indeed, nonconforming identities were discussed as valid options alongside those offered in the binary as part of a larger gender spectrum (Lehmann & Leavey, 2017; Winograd, 2014).

Other papers discussed evidence for the lack of co-morbidity or pathological behavioural indicators in contrast to other literature, as well as evidence confirming nonconforming individuals' inner experienced gender identities (Feusner et al., 2016; Firth, 2014; Turan et al., 2018, 2015; Van Der Miesen et al., 2017; VanderLaan et al., 2015). Consequently, gender dysphoria was found to be conceptualized in ways which dismantled notions of a disordered experience for those exhibiting gender nonconformity.

Growing need for healthcare

In response to the increasing prevalence of gender dysphoria, the needs of individuals seeking health care for gender identity issues, and the lack of proper guidelines, the review identified the thematic construct of a growing need for informed and sufficient healthcare. Approximately half of the

research papers (23/49) were found to contain this theme and its frequency was moderately present occurring 54 times. Authors indicated that increasing social awareness of the gender identity spectrum has led greater numbers of individuals to seek health professionals (Cousino et al., 2014; Leibowitz & de Vries, 2016; Moser, 2017; Olson et al., 2015; Strandjord et al., 2015). As such, it was considered pertinent that health professionals take active efforts to become increasingly more informed, and to engage with gender diversity by adopting approaches tailored to the specific needs of these individuals (Costa & Colizzi, 2016; Hilário, 2017; Jokić-Begić et al., 2017; Telles Silveira et al., 2016; Yildirim et al., 2017).

Alternative conceptualization

Some research papers (13/49) conceptualized gender dysphoria in ways that differed from the hegemonic definitions offered by enduring classification systems such as the DSM. These ideas framed gender dysphoria in somewhat unconventional ways while remaining informed by current knowledge on the topic.

Critical of the DSM-5's narrow focus on treatment services, Firth (2015) discusses how gender dysphoria may simply be a mind-body discrepancy outside the spectre of pathology; as merely “a matter of human variation better understood (or at least approached) by other scientific and/or moral discourses” (p. 99). Similarly, Olson et al. (2015) describe gender categories in which those with gender dysphoria may simply be considered as displaying non-pathological self-identification which happens to transcend established gender norms. The concept of gender ‘incongruence’ replacing gender ‘dysphoria’ in the ICD-11 was also proposed by some as representing a feature that affects the individual's health in various ways (Jokić-Begić et al., 2017; Leibowitz & de Vries, 2016; Winter et al., 2016). As such, these conceptualizations framed gender dysphoria in ways which remain focussed on the diversity experienced in gender identity rather than a portrayal of awry development. Indeed, Gregor et al. (2016) were found to explore the idea that gender identity outside the binary may instead be considered as a creative manifestation emanating from one's self-concept.

Other discussions centred on the fluidity of gender identity across the lifespan in contrast to categorical conceptualizations of illness as informed by the binary expectations of ‘normality’. Terms such as *gender nonconformity*, bigender or *transgender* embody those identities which exist comfortably in contradiction to the binary; identities which often may present as an amalgamation of different genders to a greater or lesser extent (Lehmann & Leavey, 2017; Osborne & Lawrence, 2016; Strang et al., 2018; Winograd, 2014).

Interestingly, a pathophysiological conceptualization was discussed in a paper by Schwarz et al. (2016) in which comparison is made to apotemnophilia (a neurological disorder characterised by intense and consistent desire to amputate a specific limb) and somatoparaphrenia (the presence of a

singular delusion involving the denial of one's limb belonging to the body). However, such a conceptualization attempts to explain the symptomology found in gender dysphoria with no consideration of psychosocial factors, and lacks overall support from other conceptualizations in this review.

Overall, alternative conceptualizations were found to be unorthodox in relation to dominant frameworks for gender development and, as such, conceived of gender dysphoria as variation to typical human experience.

Expressed sympathy

Some research papers (12/49) were found to express sympathy for the struggles faced by those with gender dysphoria. A few authors discussed their concern for alleviating distress and stigmatization effects despite a lack of formal guidance and knowledge on the management of gender dysphoria (Vrouenraets et al., 2015; Marshall et al., 2015; Telles Silveira et al., 2016). Some made the point of expressing concern for the high risk for negative health and social experiences in those diagnosed with gender dysphoria (Junger et al., 2014; Osborne & Lawrence, 2016; Peterson et al., 2017; Winograd, 2014). Notably, Berlin (2016) expressed sympathy at the prospect of possessing physical features which are fundamentally alien to one's inner experience of gender identity. In similar sympathy, Lehmann and Leavey (2017) displayed concern for the difficult process of having to disclose an incongruent gender identity especially in the face of other co-morbid symptomology and psychosocial difficulties. Thus, gender dysphoria was found to be conceptualized with expressed sympathy. This sympathy was rooted in conceptualizing gender dysphoria by its experiences of distress – whether they are considered of internal cause from discrepancies with the binary or through social intolerance and stigmatization effects.

Arranging higher-order Categories

The established primary and synthetic constructs were subsequently arranged into higher-order categories of meaning. Accordingly, the finalised thematic constructs were arranged into three succinct conceptual groups in order to provide conceptual inferences in answering the initial research question. These higher-order categories included: (i) conceptualizations related to distress or of clinical significance, (ii) conceptualizations resisting notions of distress or clinical significance, and (iii) matters related to gender dysphoria reconceptualization (see tables 7a, 7b and 7c, on p. 62, for higher-order categories and their finalised constructs). Ultimately, these higher-order categories provided the explanatory foundation for the construction of a representative framework on gender dysphoria to be interpreted. As such, the sub-question to the first research question was answered using this interpreted framework.

Table 7a: Conceptualizations related to distress or of clinical significance

Conceptualization	Number (%) of the 49 papers involving conceptualization	Occurrence of the conceptualization within the entire review
Medicalization	49 (100)	253
Co-morbidity & psychosocial difficulties	46 (94)	229
Referencing DSM clinical criteria	46 (94)	86
Stigma, discrimination & abuse	37 (76)	122
Growing need for health care	23 (47)	54
Body dissatisfaction	18 (37)	44
Poor or uncertain transitional prognosis	16 (33)	29
Expressed sympathy	12 (24)	21
Psychologically attributable	11 (22)	24
Transition procedures require capacity for informed consent	4 (8)	11
Association with sexual dysfunction & fetishism	3 (6)	6

Table 7b: Conceptualizations resisting notions of distress or clinical significance

Conceptualization	Number (%) of the 49 papers involving conceptualization	Occurrence of the conceptualization within the entire review
Challenging a disordered experience	27 (55)	52
Neuro-biological determinants & correlates	22 (45)	56
Transitional interventions effective	19 (39)	58
Socio-cultural attribution	16 (33)	29
Growing social acceptance & understanding	12 (24)	15

Table 7c: Matters related to gender dysphoria reconceptualization

Conceptual focus	Number (%) of the 49 papers involving conceptual focus	Occurrence of the conceptual focus within the entire review
Conceptually complex task	44 (90)	187
Insufficient conceptual knowledge & literature	38 (76)	82
Critical reflection on contentious issues	36(73)	96
Alternative conceptualization	13 (27)	30
Addressing known misconceptions	11 (22)	20
Multidisciplinary collaboration required	12 (24)	27
Adolescent onset typically persists	6 (12)	6
Psychoeducation is helpful	5 (10)	6
Healthcare feedback is important	2 (4)	3

An interpreted Conceptual Framework

A representative framework was established through an iterative synthesis process which utilised the inferences established in the higher-order categories. Conceptualizations related to distress or of clinical significance (table 7a) were determined as contributing to problematic discourse and narratives on gender dysphoria, while conceptualizations resisting notions of distress or clinical significance (table 7b) were considered as contrary to this. Matters related to gender dysphoria reconceptualization (table 7c) were interpreted as playing either a contributory or resistant role towards problematic gender dysphoria discourse. The framework was grounded both by the constructs derived through systematic and critical processes, and by the consultation of the literature within the establishing literature (chapters 1-3). Subsequent discussion will present the representative framework interpreted from the higher-order categories with reference to the literature in the establishing chapters.

A distressed population

Gender dysphoria was found to be conceptualized as a clinically significant condition subject to pervasive experiences of distress for those with incongruent gender identities. Principally, this was constructed through the medicalization of those seeking gender reassignment or other interventions, as well as through the prevalent association made with other co-morbid psychopathology. This narrative of distress was reinforced by the widespread reference to the DSM criteria which itself has been identified, as demonstrated in the contextual literature, as contributing to the pathologization of those with nonconforming gender identities (Butler, 2004; Schulz, 2018). Indeed, the review uncovered the reliance of clinical criteria as fundamental informants for assessment measures which rely on these pre-determined symptoms and associations. This reliance on a medical lens, which understands gender nonconformity as indicative of distress and as likely to include other co-morbid suffering, reproduces gender discourse wherein the binary dictates static categories of ‘normative’ development. Consequently, gender nonconformity within gender dysphoria is not considered as a viable option of identity; its deviance from the ‘norm’ is considered in need of resolution through assimilation into binary categories. As highlighted in the contextual literature, such discourse denies agency for all gender diverse individuals whose identities are not necessarily in line with binary expectations (Daley & Mulé, 2014; Hook, 2004; Lev, 2013).

Consistent with the contextual literature, the review identified medicalization to be caught up in a conflict between access to care and the pathologization of gender dysphoria, and gender diverse individuals by extension (Costa & Colizzi, 2016; Lev, 2013). The requirement of a gender dysphoria diagnosis insinuates that the wish to live a gender nonconforming life is pathological, and that treatment serves to address this misalignment rather than to complement it. Indeed, the continued

conceptualization of gender dysphoria necessitating a medicalized gatekeeping process reinforces discourse that gender diverse individuals are not simply different but disordered. It has certainly been identified in the contextual literature that individuals are found to stigmatize, discriminate and abuse individuals labelled by such discourse (Gregor, et al., 2016; Schulz, 2018; Winters, 2012). Furthermore, the source of distress perpetuated by these conceptualizations, as rooted in being incongruent with the binary, is questionable. As discussed in the contextual chapters, the source of distress may derive predominantly from social intolerance or discrimination and an unaccommodating gender binary (Butler, 2004; Riley, 2017). Yet, individuals seeking resources are compelled to reiterate the distress narrative as their own; an insistence that distress is inherent to any experience of gender identity incongruent with the binary, and that it is of internal cause (Moleiro & Pinto, 2015).

Other conceptualizations contributing to the concept of distress were identified as those emphasising extreme body dissatisfaction (often discussed in light of co-morbid eating disturbances and body dysmorphia), and those implicating psychological causation. In the context of the binary, gender dysphoria is framed as a pathological experience of body-mind misalignment since incongruence or nonconformity is understood to be an indication of dissatisfaction or dysmorphia. The establishing literature chapters highlighted the problematic and unhelpful nature of these reductionist notions where gender dysphoria is considered to be a mere state of dissatisfaction, delusion or intrapsychic dissonance (Craddock & Mynors-Wallis, 2014; Defeo, 2015; Lev, 2005). Such ideas reinforce a gender discourse that perpetuates a normative-pathological dualism and ignores the rich intricacies behind dynamic human experiences. Similarly, conceptualizations citing psychological aetiology were also considered to be reductionist and, as such, contributing to the pathologizing notion that gender nonconformity indicates abnormal or misaligned psychological development.

Conceptualizations indicating transitional interventions to have poor or uncertain prognoses were also identified as coinciding with the narrative of distress and pathology. These conceptualizations serve to reinforce notions that interventions supporting the experience of gender nonconformity are in vain since clinical functioning is poor post-intervention. This notion is discussed as problematic in the establishing literature by Schulz (2018) who criticises the DSM's inclusion of a post-transition specifier as an indicator of distress despite gender transition. Poor or uncertain prognoses for post-intervention may be argued as rooted in fundamentally problematic ideology which expects post-transition happiness to be found through reassigning the body to replicate cisgender presentation (Lev, 2013). This was also suggested in the review by Winograd (2014). As such, intervention procedures may end unfavourably when failing to address and complement the individual's true experience of gender since it may not necessarily manifest wholly as the binary would implicate. Consequently, the idea of poor intervention prognosis contributes to the discourse of a distressed and pathological group of people while its measure relies solely on assimilation into static categories and ignores the complexities of gender presentation outside the binary.

The finding of expressed sympathy was interpreted as reinforcing the notion of a distressed population. A somewhat contentious interpretation, perhaps, as these conceptualizations acknowledge the difficulties for nonconforming individuals. Yet, in recognition of their psychosocial difficulties these conceptualizations reiterate notions of a distressed population – an experience which is not necessarily reflective of a gender diverse population at large. Indeed, the distress narrative has been criticised in becoming a representation of an entire gender diverse population in the contextual literature (Lev, 2013; Levy & Lo, 2013; Moleiro & Pinto, 2015; Schulz, 2018). Furthermore, the expressed sympathy was identified as revolving around the negative health outcomes associated with gender dysphoria with little sympathy expressed for the impact of unaccommodating gender frameworks or social intolerance. While expressed sympathy is important in understanding the plight of a marginalised community, it was considered in this review to reinforce problematic gender discourse by its predominant focus on internally derived distress and suffering within gender nonconformity over the impact of social ostracization.

Countering forces

While the framework for gender dysphoria places individuals with atypical gender presentation in a state of distress, there are noteworthy exceptions which were found to resist this. A considerable body of conceptualizations directly challenged the notion of a disordered experience rooted in distress. Signs of these conceptualizations were encountered in the establishing literature chapters in discussing recent linguistic expansion in gender discourse (Defeo, 2015; Lev, 2013; Phoenix, 2017; Schulz, 2018). Gender dysphoria was conceptualized as a consequent labelling device established due to an unaccommodating framework for a larger gender spectrum; rooted in intolerant social attitudes for gender diversity. Moreover, gender dysphoria was conceived as incorrectly representing an entire community of gender diversity with some conceptualizations pointing to the lack of co-morbid suffering or pathologies. Similarly, alternative conceptualizations resisted the notion of distress and simply pointed to the viability of ‘other’ gender identification. Such ideas were postulated in the contextual literature chapters (Berlin, 2016; McKenzie, 2010). These alternative conceptualizations challenged the medicalization of gender diversity and the insistence of distress and gatekeeping models to care. Thus, some resistance was encountered towards problematic discourse involving the distress narrative, and this resistance was considered to reduce the impact of reinforcing conceptualizations.

Conceptualizations addressing known misconceptions on gender dysphoria were also interpreted as resisting the notion of a distressed experience. These misconceptions, historically spearheaded by diagnostic manuals such as the DSM, have been identified as pathologising in the establishing literature chapters discussing the legacy of problematic conceptualization (Beek et al., 2016; Defeo, 2015; Lev, 2005; Winters, 2012). Notably, challenging assumptions that internally experienced

gender is necessarily deterministic from sexual anatomy was in alignment with the establishing contextual literature (Berlin, 2016; Levy & Lo, 2013; McKenzie, 2010). Nevertheless, prevailing misconceptions continue to permeate gender discourse despite changes in classification. In challenging these misguided concepts it was deduced that the reinforcing effects of conceptualizations supporting problematic discourse might be resisted and reduced.

The use of neuro-biological correlates and psychosocial conjectures in conceptualizing gender dysphoria were considered to resist notions of clinical distress. As highlighted in the establishing contextual literature (Costa & Colizzi, 2016; Feusner et al., 2016; Zubiaurre-Elorza et al., 2012), studies investigating the possibility of sex atypical brain differentiation during fetal development are increasingly found to confirm an intrinsic network of functioning particular to those with gender dysphoria; suggesting considerable validation for their internally experienced gender identity. Thus, non-binary presentations of gender were conceptualized as having central neuro-biological features which may account for a diverging from expected gender development. These conceptualizations remove the notion of awry psychological development and describe a state of being that is differentiated yet not necessarily distressed or clinically significant. Gregor et al. (2016) discussed the helpfulness of such conceptualizations in the establishing contextual literature so long as they are not utilised to substantiate diagnostic classification. Similarly, socio-cultural accounts of gender diversity throughout history, and the visible presence of gender nonconformity postulated as reflecting levels of social tolerance and attitudes served to resist notions of a clinical population in distress. Indeed, cultural norms and expectations were conceived as impacting conventional knowledge of gender categories and, consequently, moderating perceptions of 'normality' for gender expression. This resonates with the contextual literature discussing a cultural history of 'other' genders and of the social construction of performing gender (Berlin, 2016; Butler, 2004; McKenzie, 2010; Moral, 2016). As such, problematic discourse is challenged by neuro-biological and psychosocial conceptualizations by accounting for the presence of 'other' or nonconforming gender categories; whose prevalence is moderated by the standard values within the given social and cultural backdrop.

The view that intervention procedures are effective for those with gender dysphoria was interpreted to counter conceptualizations reinforcing the notion of distress. Significantly, intervention effectiveness was not measured principally by a reduction of distress, but rather in light of overall life satisfaction and improved functioning in various social and occupational environments. Thus, gender dysphoria was conceived as an experience which may benefit from intervention procedures when they are tailored to increasing the overall quality of life based on the specific needs of the individual. This may not necessarily indicate gender transition into static cisgender categories. Indeed, it was identified in the establishing chapters that intervention approaches promoting the diversity and needs of individuals, particularly in children and adolescents, prove most helpful both in assisting their navigation of gender nonconformity and in dismantling problematic gender discourse (Moleiro &

Pinto, 2015; Riley, 2017). These approaches de-emphasize a clinical discourse of distress while still ensuring that healthcare remains dedicated to providing psychoeducation and prioritising informed consent regarding more irreversible procedures.

Moving forward

The establishing contextual literature described the problematic history of conceptualization regarding gender classification (Beek et al., 2016; Daley & Mulé, 2014; Defeo, 2015; Gregor et al., 2016). Certainly, the review identified gender dysphoria to be stuck within a conflict of pathologisation in contrast with facilitating access to care. Indeed, through medicalization individuals seeking further health care options are permitted access, but at the cost of experiencing stigmatization and discrimination based on mandatory clinical labelling. Yet, gender dysphoria and its related topics were conceptualized as informed by limited literature and insufficient dependable knowledge. Thus, conceptual complexities and difficulties were discussed as requiring increasing collaboration to generate inclusive and sensitive conceptual knowledge towards representative frameworks. Doing so may deconstruct problematic discourse for the gender diverse community at large. This resonates with the contextual literature situating the need for less stigmatizing frameworks which are not insistent on classifying gender nonconformity through clinical and medical discourse (Moser, 2017; Riley, 2017; Winters, 2012).

Importantly, the constructed gender dysphoria framework included critical reflection on the state of current conceptualization. Gender dysphoria was conceptualized as an inadequate category in light of progressive social pressures currently challenging the prevailing static frameworks no longer reflecting changing social views on gender categories. Indeed, it was postulated that a collaborative orientation to reframing gender frameworks and gender nonconformity should replace the current clinical lens; with particular effort to remove the stigmatization and pathologisation towards the gender diverse community. This progress was encountered in the establishing contextual literature which discussed the significance of promoting the welfare of gender diverse individuals through equal rights movements (Beek et al., 2016; Lev, 2013; Schulz, 2018). Such progression was considered vital in reducing the support or reconstruction of problematic gender discourse.

Gender nonconformity in gender dysphoria was also found to be conceptualized as an increasingly accepted variation of human experience within socio-cultural spheres. Despite the lack of established societal norms for a spectrum of gender presentation, there are active signs that gender dysphoria may be conceived of as a non-stigmatized variation to gender development as evidenced by efforts for conceptual change within various social spheres. As acknowledged in the establishing chapters, expansion on conceptual discourse typically occurs in light of great social conflict wherein individuals are oppressed through categorization, and individuals engage in a complex process of epistemic reorganization (Heyd-Metzuyanim & Schwarz, 2017; Lee et al., 2016; Lorenz, 2008). These

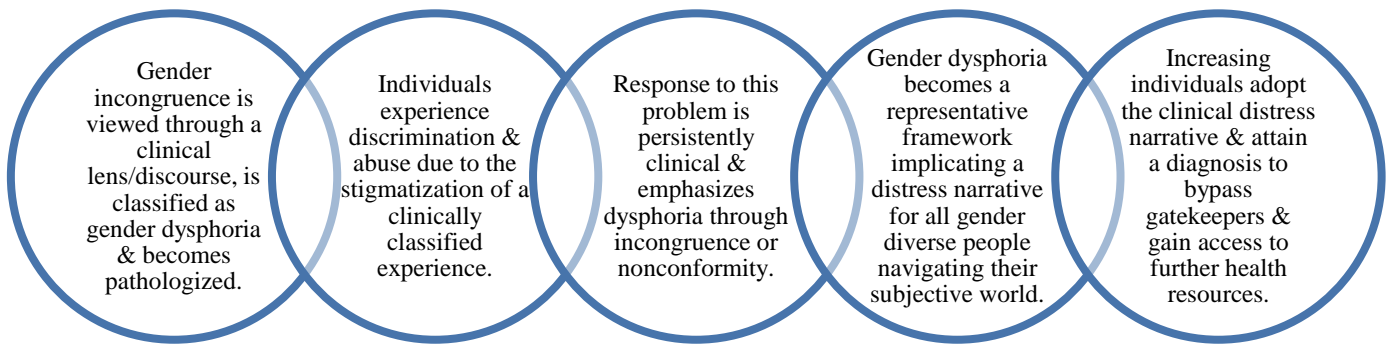
circumstances are, arguably, in place for a reconstruction of gender dysphoria. Indeed, the review identified efforts to reconceptualise hegemonic frameworks to constitute more sensitive and inclusive conceptualizations which are not found within the gender binary.

Determining the Overall Impact of the Representative Framework

The constructed framework representing the conceptual constructs on gender dysphoria was interpreted overall as playing a strong reinforcing role of problematic discourse on gender dysphoria. Through the iteration of a distressed population at the mercy of stigmatization, abuse and comorbidity and the insistence of a clinical gatekeeping framework these individuals remain locked in a medical discourse of pathology. Thus, an entire gender diverse population is pathologized while conventional views and access to further health resources remain bound to medical protocols. Consequently, a reinforcing cyclical relationship (see figure 2, p. 69), where gender dysphoria and gender diverse individuals are pathologized, is implicated currently by dominant gender discourse as discussed within the representative framework.

However, the framework established notable efforts in place to counter the negative effects of conceptualizations which reinforce problematic gender discourse. These positive signs are found to reduce the strength of conceptualizations constructing or supporting the narrative of distress and pathology in gender nonconformity present within discourse. As such, the representative gender dysphoria framework may be seen as fairly resistant to problematic gender discourse which serves in regulating particular power structures bound within the binary. It should be noted that these resistant factors, while important signs of conceptual progression, were far smaller across the review and were often in direct conflict with the more dominant factors reinforcing problematic discourse. Indeed tables 7a and 7b demonstrate the difference between problematic and resistant constructs both in how many were identified in each higher-order category, and in the notable difference of magnitude in their occurring frequencies. As such, in its current state the representative gender dysphoria framework continues to reinforce problematic and controversial gender discourse albeit in a reduced manner, and may be argued to be in a trajectory of continued resistance and deconstruction.

Figure 2: Pathologising Cyclical Relationship currently implicated by Dominant Gender Discourse



Chapter 6: A Representative Framework for Individuation

The constructed framework representing the literature on *gender dysphoria* was determined overall to play a reinforcing role of problematic gender discourse albeit with increasing signs of resistance. The use of a second review was conducive to constructing a representative framework for *individuation* as informed by conceptualizations found within contemporary psychological literature.

As with the first review, a process of thematic generation led to the establishment of primary and synthetic constructs which were subsequently grouped together into high-order categories of significant meaning. These categories functioned as the foundation for the construction of an interpreted framework for individuation. Ultimately, the second research question was answered by assessing the conceptual space as determined from the results of this chapter with those in the former. As such, it was determined whether the conceptual space, as defined by contemporary conceptualizations of gender dysphoria, could be considered as accommodating of the concept of individuation as expressed in the representative framework.

Primary Constructs identified in Thematic Generation

The identification of final primary constructs was achieved through iteratively examining each research paper critically. As with the constructs identified in chapter 5, the primary constructs for individuation were represented as accurately and comprehensively as possible so as to establish strong explanatory power for the conceptual framework. Finalised primary constructs were arranged into a list of descending prevalence within the research papers (see table 8, p. 71). This included a frequency count of how often they were encountered overall within the review. Subsequent discussion will explore these primary constructs in detail with reference to this table.

Healthy separation through differentiation

In this review the theme of healthy separation through differentiation was identified in almost every research paper (22/24) with a noticeably higher frequency than other themes (count of 152 times). Individuation was framed as facilitating a process of healthy separation from others in these conceptualizations.

Individuation was portrayed as facilitating a process of conscious awareness about one's identity which may cause them to differentiate from identification within collective groups. Stey, Hill, and Lapsley (2014) maintain that "the individuated self successfully manages the tension between separation and connectedness while avoiding the undesirable outcome of fusion and enmeshment, on the one hand, and complete detachment and isolation, on the other" (p. 452). As such, the individual

Table 8: Finalised list of Primary Constructs identified in Review 2

Conceptual Construct	Number (%) of the 24 papers involving the construct	Occurrence of the construct within the entire review
Healthy separation through differentiation	22 (92)	152
Collective identification	21 (88)	106
Facilitation of deeper connections with the Self, others & world	20 (83)	106
Psychosocial barriers	19 (79)	116
Development of the individual nature	17 (71)	64
Engagement with the unconscious mind	16 (67)	88
Further research required	12 (50)	22
A process of growth & finding meaning	11 (46)	56
Archetypes guide the individuation process	8 (33)	29
Unification of seemingly opposing features	7 (29)	37
Collective expansion & cultural advancement	6 (25)	18
Illusory individuation	6 (25)	12
The ego plays an integral role in individuation	4 (17)	6
Requiring sufficient ego development	2 (8)	3

may engage in a process of healthy separation from the collective identity through individuation when becoming more aware and in touch with their particular character traits (Bonovitz, 2016; Cavalli, 2017; Choi & Kim, 2016; Eller-Boyko & Grace, 2017; Kotzé, 2014). Thus, individuation was defined here as a process that facilitates an awareness of oneself which may differentiate them from collective or group identification.

Considerable discussion centred on the individuation as experienced by adolescents and emerging adults, where the need for separation and becoming autonomous predominate as particular psychological needs. This individuation experience involves a process of “disengagement from internalized images of parents as omnipotent authorities, self–other differentiation, and dialogical interaction” (Komidar, Zupančič, Sočan, & Puklek Levpušček, 2014, p. 503). Indeed, individuation was found to be conceptualized here as constituting a crucial phase of separation for establishing self-reliance and agency within the relational world while still maintaining connectedness to social structures (Doctors, 2017; Jiang, Yang, & Wang, 2017; Komidar et al., 2016; Lindsey, 2014; Puklek Levpušček, Rauch, & Komidar, 2018).

Collective identification

While only approximately twice as frequent (occurring 106 times) as the previous theme, the review identified the thematic construct of collective identification to appear in almost every research paper (21/24). As a natural prerequisite to this process and as a potential outcome, individuation was framed here by collective identification. Authors framed this collective identification by the advantages and the resources it provides within the social world (Choi & Kim, 2016; Grevatt, 2016; Myers, 2016; Puklek Levpušček et al., 2018). However, others discussed situational factors pressurising individuals to resort to collective identification, and consequently yielding to collective expectations, where separation was perceived as otherwise detrimental, intolerable or overwhelming (Doctors, 2017; Eller-Boyko & Grace, 2017; Kotzé, 2014). This identification arises out of necessity or immediate relief from contextual problems (Cavalli, 2017; Rosin, 2015). Consequently, individuation is framed here as fostering a process of collective identification. However, this identification may result out of situational needs and may not necessarily be an outcome of individuation.

Notable discussion was also found to explore the impact of excessive collective identification in having maladaptive implications. Such discussion indicated the experience of psychosocial difficulties for individuals overly identifying with the collective identity and group expectations (Cavalli, 2017; Karataş, Puklek Levpušček, & Komidar, 2017; Stey et al., 2014). Specifically, this inhibits individual differentiation from taking place (Kavčič & Zupančič, 2018).

Facilitation of deeper connections with oneself, others & the world

The review identified the theme of individuation as facilitating a deeper connection with oneself and with others in significant ways. This theme was also found as highly prevalent across the review (occurring in 20/24 research papers) with a high frequency count of 106 times.

Doctors (2017) framed individuation as ultimately reinforcing rather than weakening one's connections within the world. Indeed, individuation was conceptualized as fostering increased consciousness of one's inherent personality and place within the world which, in turn, contributes to their psychosocial maturity and bonding with others (Bonovitz, 2016; Karataş et al., 2017; Komidar et al., 2016; Myers, 2016; Zupančič & Kavčič, 2014). In this way individuation was conceived as a process which increases social solidarity and cohesion, since increased consciousness of one's internal identity increases awareness and understanding of the surrounding world (Eller-Boyko & Grace, 2017; Hoffman, 2014; Kotzé, 2014; Rosin, 2015; Stein, 2017; Young, 2018).

Psychosocial barriers

Psychosocial barriers inhibiting engagement in individuation were encountered within the review. Similar to the previously discussed themes, psychosocial barriers were encountered to have a significant frequency (a count of 116 times) and appeared in nearly every research paper (19/24).

Various psychosocial barriers were discussed by authors as disrupting the individual's ability to individuate. These psychosocial inhibitors included: intrusive and enmeshed parenting styles, excessive dependence on others, fear of disappointment from the collective, fear of fusion with the collective, and boundary diffusion regarding roles and responsibilities within familial structures (Doctors, 2017; Karataş et al., 2017; Komidar et al., 2014; Puklek Levpušček et al., 2018; Rosin, 2015; Valls-Vidal, Garriga Alsina, Pérez-Testor, Guàrdia-Olmos, & Iafrate, 2016; Zupančič & Kavčič, 2014). Specifically, these psychosocial barriers may result in anxious, insecure or avoidant attachment with a collective identity which greatly inhibits the individuation process from unfolding (Cavalli, 2017; Lindsey, 2014; Stey et al., 2014). Myers (2016) described a significant barrier to individuation where *ego*-inflation resulting from excessively identification with a collective identity results in the consequent suppression of the individual nature. In juxtaposition, extreme separation and differentiation may become a hindrance to individuation by resulting in extreme self-centredness or isolation and, consequently, inhibit the capacity to individuate (Lee, 2017; Stein, 2017; Young, 2018). Thus, individuation was conceptualized as a process subject to various psychosocial barriers preventing the individual from engaging in the process.

Development of the individual nature

Many research papers (17/24) made reference to the thematic construct of individuation as a facilitator of developing the individual's uniquely differentiated nature in relation to collective society. This thematic construct contained a moderately high frequency count of 64 times.

Individuation was conceptualized here as a process which brings about greater psychological growth through its prompting of the individual to integrate internal disposition into conscious identity. Significant discussion centred individuation as facilitating a connection to *the Self* through this process (Doctors, 2017; Eller-Boyko & Grace, 2017; Kavčič & Zupančič, 2018; Lee, 2017; Myers, 2016; Stein, 2017; Zupančič, Komidar, & Puklek Levpušček, 2014). In particular, authors conceived of this process as contributing to a sense of wholeness or unity between one's internal and external being (Eller-Boyko & Grace, 2017; Hoffman, 2014; Young, 2018). Similarly, others made reference to this progression of selfhood as an integration of the elements constituting the individual's unique personality towards self-actualization (Bonovitz, 2016; Grevatt, 2016; Kotzé, 2014; Rosin, 2015; Stein, 2017). Consequently, individuation was conceptualized as an important process that promotes the development of the psychology of an individual.

Engagement with the unconscious

The review uncovered approximately two thirds of the research papers (16/24) to discuss individuation as requiring engagement with the unconscious. This theme was found to have a considerably high frequency count occurring 88 times. Individuation was conceptualized here as having a central process of confrontation, reorganisation and integration of unconscious content into ego consciousness.

In confronting the unconscious, a process of restructuring and reorganisation takes place in which internal representations about the world and the individual's identity within it, as viewed by the ego, are questioned. Indeed, individuation was conceived as a process where the conscious and unconscious mind become unified through an increased awareness of all elements constituting one's true identity (Doctors, 2017; Kavčič & Zupančič, 2018; Stey et al., 2014; Zupančič et al., 2014). Specifically, individuation was framed by the experience of confronting aspects of the *psyche* previously repressed or considered intolerable. These were framed as *shadow contents* of one's personality requiring conscious confrontation; an awareness that these are real and tolerable aspects which must be accepted for the individual to flourish (Bonovitz, 2016; Eller-Boyko & Grace, 2017; Kotzé, 2014; Myers, 2016; Young, 2018). As such, the individual may come to question the collective identity, and becomes who they are internally; they may not necessarily conform to expectations within the collective mindset (Rosin, 2015).

Ultimately, the individuation process was framed here as involving an integration process of what is encountered by the ego within the unconscious. This involves the amalgamation of all elements particular to the individual, whether perceived as good or bad, together with those elements from the collective identity which constitute the psyche (Cavalli, 2017; Grevatt, 2016; Hoffman, 2014; Lee, 2017). By doing so, individuation supports the individual in becoming who they are internally and to connect with the world and others in meaningful ways (Stein, 2017; Zupančič & Kavčič, 2014). Individuation is, as such, a process of confronting the unconscious in order to reorganise and integrate the aspects of one's psyche into a more harmonious and cohesive personality.

Further research required

The review identified the thematic construct of further research required on topics related to individuation. Half of the research papers (12/24) were found to discuss the need for further insight into the nature of individuation. Discussion centred largely on the insufficient knowledge available on the impact of cultural factors directing the course of individuation and, as such, future research into context-bound environments was discussed as necessary (Jiang et al., 2017; Karataş et al., 2017; Komidar et al., 2016; Puklek Levpušček et al., 2018; Stey et al., 2014). Others discussion reflected on the need for contemporary research on individuation and how the process might be hindered in light

of recent generational changes (Choi & Kim, 2016; Kavčič & Zupančič, 2018; Komidar et al., 2014; Valls-Vidal et al., 2016). Interestingly, Rosin (2015) noted that there is a specific need for research into the individuation process and its impact on the capacity of counsellors and other psychologists to assist clients to overcome their troubles. However, this idea was not found to be prevalent across the review.

A process of growth & finding meaning

The theme of individuation fostering opportunities for growth and encountering meaning was present in nearly half of the reviewed papers (11/24). Engaging in this process was framed as a path towards psychosocial growth as it facilitates greater insights about oneself and the world (Grevatt, 2016; Hoffman, 2014; Kotzé, 2014). The impact of this experience may end in a sense of greater purpose and meaning for the individual (Bonovitz, 2016; Doctors, 2017; Eller-Boyko & Grace, 2017; Lee, 2017; Myers, 2016; Rosin, 2015). As such, individuation was conceptualized here as an intrinsic process directing us to gain insight about our true nature and, consequently, to find greater meaning, purpose and harmony within the world (Stein, 2017; Young, 2018).

Archetypes guide the individuation process

The individuation process was framed by a third of the research papers in this review (8/24) as facilitating the ego's interaction with *the archetypes* within the unconscious. Authors discussed these collectively shared archetypes as entering consciousness during engagement with individuation; offering indirect imagery to assist in navigating experiences of confrontation, reorganisation and integration (Cavalli, 2017; Grevatt, 2016; Hoffman, 2014; Lee, 2017; Myers, 2016). These archetypes offer an adaptive orientation which guides the process of realizing one's internal nature in relation to the collective identity (Eller-Boyko & Grace, 2017; Kotzé, 2014; Young, 2018). Thus, individuation was framed here as a process assisted through the resources we have collectively inherited when we engage in the processes of unconscious integration.

Unification of seemingly opposing features

The review identified some of the research papers (7/24) to discuss the unification of seemingly incompatible or opposing features of identity through the individuation process. During individuation, the individual ultimately discovers that seemingly opposing aspects of their true nature are instead compatible, and may be combined together as a harmonious expression of an integrated psyche (Cavalli, 2017; Eller-Boyko & Grace, 2017; Grevatt, 2016; Hoffman, 2014). This unification contributes to a more balanced personality which takes into account every part of identity particular to the individual (Kotzé, 2014; Myers, 2016). Interestingly, Stein (2017) conceptualized this unifying

aspect of individuation as transpersonal; unifying seemingly opposing cultures and people through the human experience of individuation.

Collective expansion & cultural advancement

A quarter of the research papers in this review (6/24) discussed the thematic construct of individuation as a facilitator of collective expansion and cultural advancement. Individuals engaged in individuation were considered to be catalysts for contributing to a wider and progressive collective consciousness. Through individuation, personal growth and understanding develop, and insights about oneself and the world are offered as contributions to the collective archive (Eller-Boyko & Grace, 2017; Grevatt, 2016; Hoffman, 2014; Kotzé, 2014). Consequently, cultures and societies have access to the insights gained by those individuating, and may experience an expansion to their own consciousness about the world (Myers, 2016; Stein, 2017). Thus, individuation was conceptualized here as a process transcending the individual and contributing to the greater collective consciousness.

Illusory individuation

Some authors (6/24 research papers) were found to discuss the concept of an illusory individuation process. Individuation may be presumed as occurring and the ego convinces itself of having engaged with this process (Hoffman, 2014; Myers, 2016; Young, 2018). Specifically, individuals may be relying on identification “as a short cut to avoid finding authentic solutions” for themselves under the belief or guise of individuation (Cavalli, 2017, p. 201). Consequently, individuals may be experiencing an illusory sense of identity in which the unconscious mind has not truly been integrated into ego consciousness (Kotzé, 2014; Lee, 2017). As such, individuation was conceptualized here as being subject to an illusory imitation process.

The ego plays an integral role in individuation

A few papers in this review (4/24) conceived of individuation as requiring the ego to play an integral role. The ego was also conceived as the representative of consciousness which must eventually engage with and interpret content from the unconscious during individuation to develop the individual nature (Lee, 2017; Stein, 2017). Individuation was also conceptualized by the integral role the ego plays, specifically in initial identification with the collective prior to engagement in this process (Cavalli, 2017; Grevatt, 2016).

Requiring sufficient ego development

Two research papers were found to explore the theme of individuation requiring sufficient ego development preceding engagement with the unconscious. This thematic construct was least prevalent in this review but was taken into consideration due to its direct association to the process of individuation. Without sufficient ego development, a process fostered by identification with the collective identity, one may become overwhelmed by the process of unconscious confrontation and integration required in individuation (Cavalli, 2017). Indeed, Lee (2017) cautions that those without sufficient ego development should avoid immediate engagement with individuation as unconscious integration and reorganisation require considerable ego stability. Consequently, individuation was framed here as dependant on one's level of ego development.

Synthetic Constructs derived through Thematic Generation

Following the identification of primary constructs, the deductive process of establishing synthetic constructs began. As with the representative framework established in chapter 5 on gender dysphoria, synthetic constructs were derived in order to supplement the primary constructs and to provide a more insightful representation of conceptualizations of individuation. As such, these synthetic constructs were crucial in reinforcing the explanatory strength of the representative framework on individuation. Through an iterative procedure, the finalised synthetic constructs were established and arranged in descending order of prevalence (see table 9 below). This table will serve as a referential tool in the discussion of these synthetic constructs.

Table 9: Finalised list of Synthetic Constructs derived in Review 2

Conceptual Construct	Number (%) of the 24 papers involving the construct	Occurrence of the construct within the entire review
Beneficial for the individual	20 (83)	106
Difficult experiences to overcome	17 (71)	73
A Lifelong process	17 (71)	29
Challenging the individual	10 (42)	16
Cultural moderators	9 (38)	28
Process varies with personality types & dispositions	5 (21)	31

Beneficial for the individual

The review found the majority of research papers (20/24) to discuss the thematic construct of beneficial effects for the individual engaged in individuation. This idea was centred on individuals benefiting from psychosocial maturation and growth through individuation which, ultimately, may be considered as beneficial to those around them.

The individuation process was associated with the individual gaining resources and developing psychosocial maturity which may assist them in overcoming life obstacles and making sense of the world around them (Cavalli, 2017; Choi & Kim, 2016; Myers, 2016; Rosin, 2015; Stein, 2017). As such, individuation encourages the individual to experience significant shifts in their outlook and orientation to the world. Indeed, individuation was framed as a process facilitating the acquisition of a more balanced, harmonious personality as it prompts all elements constituting the individual to come into cohesion; fostering congruence between internal identity and external identity. Consequently, the individual is found to experience feelings of wholeness and improved well-being (Eller-Boyko & Grace, 2017; Hoffman, 2014; Jiang et al., 2017; Kotzé, 2014; Lee, 2017).

Much discussion was found to centre on individuation as prompting the development of self-reliance in simultaneous occurrence with its facilitation of deeper connections with others. Individuation was conceived as contributing to feelings of agency, self-affirmation and assuredness of one's unique identity as being differentiated yet not in opposition to the collective identity (Doctors, 2017; Komidar et al., 2014; Young, 2018; Zupančič et al., 2014). This experience leads to overall greater satisfaction with and performance in one's life (Grevatt, 2016; Kavčič & Zupančič, 2018; Komidar et al., 2016; Lindsey, 2014; Puklek Levpušček et al., 2018). Thus, individuation was conceptualized as a beneficial process for those engaging in this process, and may be considered to impact both the individual and their relational world positively.

Difficult experiences to overcome

The process of individuation was conceptualized by a high amount of research papers (17/24) by the difficult or negative experiences to overcome in this process. This thematic construct was almost as prevalent as the construct of beneficial effects (20/24 research papers) – making an interesting juxtaposition within the review.

Individuation was framed as having the potential for difficult or negative experiences to arise and to be overcome during the process. Specifically, dysfunctional psychosocial behaviour experienced in extreme identification with the collective identity may need to be resolved. Indeed, excessive identification may result in conflictual dependence, unhealthy disengagement, issues of autonomy, poor capacity for intimacy, risk for affective disturbances, lower life satisfaction and poorer life

performance (Doctors, 2017; Karataş et al., 2017; Kavčič & Zupančič, 2018; Komidar et al., 2014; Lindsey, 2014; Puklek Levpušček et al., 2018; Stey et al., 2014; Zupančič et al., 2014). This extreme fusion with the collective was discussed as imposing a dissociative effect on the individual who experiences a split in their identity; the collective identity in contrast with an internally experienced identity (Cavalli, 2017; Young, 2018). Consequently, these experiences may arise and require resolution through individuation. However, extreme separation was also considered as a dysfunctional experience which might estrange the individual from the collective and may also require resolution in individuation. Indeed, authors established that individuals with dysfunctional independence may experience ego-centeredness without the collective as a moderator, while those with dysfunctional dependence may experience excessive ego inflation (Jiang et al., 2017; Lee, 2017; Rosin, 2015; Valls-Vidal et al., 2016). Thus, individuation was framed by these difficult experiences as requiring resolution through the process.

Interestingly, Kotzé (2014) discussed the potential for individuation to give rise to a difficult experience for the individual when integrating shadow contents from the unconscious. If the ego is unable to tolerate these aspects of the unconscious as equally real to the personality, the individual may project these onto the world which then encompasses the site of their unacknowledged shadow. Consequently, one may become subject to “stagnation, chaos, melancholia, and remaining unaware of one’s own moral deficiencies” (p. 515). In agreement, Grevatt (2016) conceived of this experience in individuation to place the individual at risk for neurosis should they decidedly deny intrinsic elements of their true nature. Similarly, Myers (2016) described that those who are forced to acknowledge such contents superficially or before they are ready may be at risk for embodying a state resembling psychosis.

As framed by these particular papers within this review, individuation may involve difficult or negative experiences requiring resolution through the process. This is in contrast with the significant benefits which might be gained through individuation for the individual.

A lifelong process

Many research papers (17/24) made reference to the lifelong course of individuation. Individuation was discussed across three distinct phases: initial identification with early caregivers, differentiation and separation in adolescence and emerging adulthood, and over the course of adulthood where the individual nature is continuously integrated into identity. Individuation was framed as having a periodic nature; occurring at several life stages depending on the specific psychological needs of these varying life phases (Karataş et al., 2017; Kavčič & Zupančič, 2018; Komidar et al., 2016, 2014; Myers, 2016; Stey et al., 2014). As the individual engages continuously with individuation across the lifespan, it evolves and is found to have a deeper impact on their psychological growth (Eller-Boyko & Grace, 2017; Kotzé, 2014; Rosin, 2015; Young, 2018). Notably, Stein (2017) and Rosin (2015) add

to the lifelong conceptualization for individuation by remarking that ‘completing’ individuation is unrealistic due to the psychological implications of actualization which this would imply; that one has reached their utmost potential with no further capacity for growth. Accordingly, the review identified these papers to be in agreement of the lifelong nature of individuation.

Challenging the Individual

Various research papers (10/24) were found to conceptualize individuation as involving processes which may directly challenge the individual. One such challenge involves the process of becoming differentiated from the collective identity, and developing one’s distinctiveness from the norm when this is in earnest response to their internal nature. This may be considerably challenging as it may induce feelings of alienation through one’s separation and through the confrontation of personal shadow contents (Grevatt, 2016; Kotzé, 2014; Lee, 2017; Young, 2018). Similarly, Cavalli (2017) conceives of the separation which may be encountered in individuation as involving a mourning process, since individuals have surrendered major dependency which collective conforming had previously provided. A notable challenge identified for the individual was the significant shift in the perspective required of those engaging with individuation; a reorganization of the world and who one is within it (Bonovitz, 2016; Eller-Boyko & Grace, 2017; Hoffman, 2014; Myers, 2016; Rosin, 2015; Stein, 2017). Thus, individuation was conceptualized here as challenging the individual on the path to developing their individual nature.

Cultural moderators

A fair amount of the research papers (9/24) were found to conceptualize individuation with respect to the impact of cultural factors that may direct its course. Social, economic, demographic, and relational factors were identified as changing aspects in culture which alter the way in which individuation may be experienced by individuals (Karataş et al., 2017; Komidar et al., 2016; Valls-Vidal et al., 2016). Indeed, Zupančič et al. (2014) conceived of individuation as a process rooted in cultural realities wherein representations of “self-within-relationships” may vary and, consequently, individuation may be experienced differently in relation to these definitions (p. 1423). Thus, cultural norms perpetuated by collectivistic (associated with Eastern) and individualistic (associated with Western) societies may alter the experience of individuation, and impact the relation one has to the collective identity through individuation (Jiang et al., 2017; Kavčič & Zupančič, 2018; Stein, 2017). Specific consideration was also given to the process of individuation within more traditional cultures whose individuals are subject to differing cultural expectations as an effect of enduring intergenerational solidarity (Puklek Levpušček et al., 2018). As such, individuation was conceptualized as being directly impacted by cultural factors which affect the experiences of individuals developing their individual nature against particular socio-cultural backdrops.

Process varies with personality types & dispositions

A relatively small synthetic construct was derived from a few research papers (5/24): the discussion of individuation as a varying experience for different personality types. Specifically, individuation was likened to psychological typology or core personality types (Myers, 2016). Traits of anxiety and neuroticism were considered to impact the individuation process negatively, while traits of openness, conscientiousness and extraversion were considered to impact it positively (Komidar et al., 2016; Stey et al., 2014). Zupančič and Kavčič (2014) conceived of the experience of individuation as being somewhat predictable for certain traits or personality types. However, these conceptualizations related to dispositions and personality types were not prevalent across this review.

Arranging higher-order Categories

Subsequent synthesis involved the gathering of primary and synthetic constructs into related groups of significant meaning. The use of these higher-order categories served in the construction of an interpreted framework representing conceptualizations of individuation. Accordingly, three categories emerged in discussing the features of individuation: (i) conceptualizations related to individuation as a process experienced by the individual, (ii) conceptualizations related to the nature of individuation, and (iii) conceptualizations related to the impact of individuation on the individual and others (see tables 10a, 10b & 10c, on pp. 81-82, for finalised higher-order categories and their related constructs).

Table 10a: Conceptualizations related to Individuation as a Process experienced by the Individual		
Conceptualization	Number (%) of the 24 studies involving conceptualization	Occurrence of the conceptualization within the entire review
Healthy separation through differentiation	22 (92)	152
Collective identification	21 (88)	106
Psychosocial barriers	19 (79)	116
Development of the individual nature	17 (71)	64
Engagement with the unconscious mind	16 (67)	88
A challenging process	10 (42)	16
The ego plays an integral role in individuation	4 (17)	6

Table 10b: Conceptualizations related to the Nature of Individuation

Conceptualization	Number (%) of the 24 studies involving conceptualization	Occurrence of the conceptualization within the entire review
A lifelong process	17 (71)	29
Further research required	12 (50)	22
Process varies culturally	9 (38)	28
Archetypes guide such individuation processes	8 (33)	29
Unification of seemingly opposing features	7 (29)	37
Illusory individuation	6 (25)	12
Process varies with personality types & dispositions	5 (21)	31
Requiring sufficient ego development	2 (8)	3

Table 10c: Conceptualizations related to the Impact of Individuation on the Individual & Others

Conceptualization	Number (%) of the 24 studies involving conceptualization	Occurrence of the conceptualization within the entire review
Facilitation of deeper connection with the Self, others & the world	20 (83)	106
Beneficial for the individual	20 (83)	63
When the process goes awry	17 (71)	73
A process of growth & finding meaning	11 (46)	56
Collective expansion & cultural advancement	6 (25)	18

An interpreted Conceptual Framework

As with the first review on gender dysphoria, an iterative synthesis process was conducted to use conceptual inferences in establishing a representative framework for individuation. The constructed framework was grounded by the conceptualizations comprising the higher-order categories. The representative framework will be discussed below with further grounding in the establishing contextual literature (chapters 1-3). This discussion will explore the process of developing an individual's nature through individuation, the obstacles that may hinder the process, and the advantages to be gained in time through engagement in individuation. Ultimately, the representative individuation framework will be utilised comparatively with the gender dysphoria framework in assessing the conceptual space and answering the final research question.

Developing the Psychology of an Individual

Individuation was found to be conceptualized fundamentally by the process of developing the individual nature in relation to collective society. This continues to reflect Jung's principle notion of what individuation, through an analytical psychology standpoint, aims to facilitate in the individual (Jung, 1923/1959).

Notably, healthy separation and differentiation from group or collective identities, and their associated expectations, were discussed as potential experiences which individuation might foster. Through engagement with the unconscious, one integrates significant aspects of the personality into conscious awareness which may result in a separation from collective identification. The establishing literature made extensive reference to this process where realization of all aspects contributing towards one's true disposition through individuation may drive the person to differentiate from others (Ciúin, 2016; Pasquarelli & Ripamonti, 2016; Rybak et al., 2000; Tricarico, 2016). However individuation, should it foster this experience of separation, was described as facilitating a healthy balance between connectedness with others and separation from them. Extreme individualism, as established in the contextual chapters, is distinguished as different from separation in individuation since it instead involves excessive detachment and isolation from the collective (Jung, 1923/1959; Kins et al., 2012; Lee, 2017; Tricarico, 2016). On the contrary, individuation was conceptualized as facilitating a meaningful positioning in relation to the collective by challenging an egoistic identity where the individual is excessively self-concerned. Similarly, through healthy separation the individual is driven to avoid extreme fusion with the collective ideal or identity, where a state of ego fixation is challenged by connecting with one's differentiation in consciousness.

In resonance with the contextual literature, this process of balanced separation was discussed as naturally leading to positive psychosocial outcomes for the individual and their relational world (Beridha, 2016; Jung, 1923/1959; Stein, 2017). Specifically, this culminates in the individual experiencing greater agency and deeper, more harmonious connections with the world and others. As such, the representative individuation framework was defined significantly by the outcome of healthy separation when unconscious integration leads one to differentiate from the collective norm.

The process of collective identification was prevalent in the representative individuation framework. Identification with the collective norm was framed as a prerequisite for individuation and as a potential outcome. Collective identification was framed as advantageous due to the resources gained through assimilation with the collective ideal. In the contextual chapters, identification was discussed as potentially operating via the *persona* identity; corresponding with the needs of the ego for adaption and development (Robertson, 2017; Stein, 2017; Tricarico, 2016). Likewise, the review established the experience of building ego strength through collective identification. Hence, in circumstances where the ego would otherwise be overwhelmed by engaging with the unconscious and its contents,

the process of identification takes precedence as a form of relief. Such experiences may better suit the psychological needs and readiness of the individual in question – an idea explored in the establishing literature (Ciúin, 2016; Lee, 2017; Tricarico, 2016). Yet, overly identifying with the collective was itself considered problematic and in conflict with the process of healthy separation. Indeed, congruent with the contextual literature, an array of negative psychosocial implications are to be expected from excessive fusion with the collective norm (Cavalli, 2017; Jung, 1916/1920, 1923/1959; Kins et al., 2012). Thus, individuation involves collective identification both as a prerequisite to the process and as a potential outcome in accordance with insights of one's internal nature from the unconscious. Additionally, identification may serve as an adaptive transient experience of relief when ego consciousness requires increased strength to engage with the process of developing the individual's nature.

Individuation was framed by another principal process: engaging with unconscious contents in developing an individual nature to become differentiated from an original state of ego consciousness. Specifically, confrontation, reorganisation and integration of contents within the unconscious were framed as facilitated by individuation. The ego is integral in this engagement of confronting and questioning unconscious contents; it must face personal and collective shadow contents in restructuring conscious representations about oneself and the world. This was echoed in the contextual literature whereby the persona is inspected with the insights gained from the unconscious and an ultimate surrender of the ego takes place (Robertson, 2017; Tricarico, 2016; Rybak et al., 2000; Young, 2018).

Integration of unconscious aspects may involve unification, or resolution, of seemingly opposing features found within one's psyche in realizing the Self. In this unconscious engagement, archetypes from our collective human inheritance may be encountered indirectly and their interpretation may guide the individuation process in reorganising consciousness. These notions were discussed within the contextual literature as potential encounters when inspecting and engaging with the unconscious (Hopcke, 1999; Pasquarelli & Ripamonti, 2016; Young, 2018). Successful confrontation leads to an acceptance and integration of all elements constituting the individual's natural disposition into a cohesive functioning whole. As such individuation leads to the expression of these elements as forming conscious identity. Hence, the individual becomes uniquely distinguished in their relation to the collective identity. As discussed in earlier contextual chapters, the tension between ego consciousness and unconscious contents finds relief in this process, and the experience contributes to a sense of greater meaning and wholeness as one connects more significantly with their internal nature and the relational world (Beridha, 2016; Robertson, 2017; Rybak et al., 2000; Stein, 2017). As such, engagement with the unconscious is a fundamental feature of the individuation process in developing the psychological individual.

In contribution to the representative individuation framework, and in resonance with the establishing chapters, the process of developing an individual nature was framed as a lifelong process moderated by various contextual factors. Indeed, individuation may take place periodically and in relation to the specific psychological needs of the individual (Myers, 2013; Pasquarelli & Ripamonti, 2016; Robertson, 2017). The review certainly identified distinct life phases influencing the experience of individuation from infancy to late adulthood, and the manner in which a personality type may be expected to direct its course. Additionally, cultural norms and expectations were discussed as impacting how one experiences the process of individuation due to culturally-specific frameworks of individual and collective identity. As individuation was discussed as occurring within diverse cultural backdrops subject to interpreted definition, it may be considered as representing a shared global culture – an idea elaborated on in the contextual literature chapters (Boucher & Maslach, 2009; Brooke, 2008; Chakkarath, 2011; Lee, 2017; Myers, 2013). Thus, individuation, as a process of developing the individual nature in relation to the collective identity, may be expected to vary within each individual with respect to their particular psychological traits and contextual positioning.

Obstacles to Overcome

Various obstacles were identified to impact individuation, and were framed as considerable challenges and hindrances to the developing individual. Certainly, the contextual literature identified individuation to be a challenging process that is not always in the interests of the individual's psychological needs (Jung, 1917/1953; Robertson, 2017). These difficulties may be further complicated by rapid generational and cultural changes in recent times where further research and knowledge on the nature of individuation are required.

In particular, individuation may drive some to separate from collective identification in response to their internal nature, and this may prove to be difficult. Indeed, a mourning process of perceived loss may be encountered by the ego and, consequently, feelings of alienation may ensue. Similarly, the process of shifting internal representations and reorganising consciousness was also framed to challenge the individual, especially in the confronting of shadow contents within the psyche. It was noted in the contextual literature that such encounters may prove to be difficult as ego consciousness is pressured to relinquish its perceived control over the Self, and that this may prove an obstacle to overcome in becoming who they are meant to be (Cavalli, 2017; Edinger, 1992; Robertson, 2017). Furthermore, personal challenges in individuation may lead to various negative outcomes which may further hinder the process. Indeed, as elaborated in the contextual chapters, extreme identification or separation may result in egoistic states that induce the experience of alienation from one's true nature and from the world itself (Cavalli, 2017; Jung, 1923/1959; Kins et al., 2012; Lee, 2017). Similarly, if individuation is engaged with in an illusory way there may be an experience of estrangement once the

illusion of integrating all aspects pertaining to one's internal nature fades. It was discussed in the establishing literature chapters that this experience of illusory individuation is particularly challenging to overcome for some due to the feelings of grandiosity and the ego inflation which it might induce (Jung, 1916/1920; Robertson, 2017; Tricarico, 2016). Thus, individuation was conceptualized in the representative framework as potentially subject to an array of difficult challenges.

Various psychosocial barriers were also identified for their potential in obstructing individuation. These factors contributed to the constructed framework by suggesting that individuation may be a difficult process should contextual inhibitors exert enough influence over the individual. Specifically, individuation was conceptualized to be limited by dysfunctional relational environments that induce anxious, insecure or avoidant patterns of attachment in the relational world. This reduces the capacity to engage with the unconscious in increasing awareness of one's particular traits and may lead to a one-sided ego consciousness with the collective identity. Such notions were discussed in the contextual literature as the consequences of reduced intrapsychic engagement in processes such as individuation (Beridha, 2016; Robertson, 2017; Zimmelman, 2017). Consequently, the psychosocial environment may prove to be a difficult barrier to individuating and developing an individual nature.

A Worthwhile Venture

Various conceptualizations indicated individuation to be a worthwhile experience, and these contributed considerably to the construction of the representative framework. The process of developing the psychology of an individual out of undifferentiated ego consciousness was considered valuable for both the individual and their surrounding world.

Principally, individuation was considered a beneficial endeavour for the individual who stands to gain considerable psychosocial growth should the process be taken in earnest. The natural unfolding of the individual's integrated identity through individuation situates them with a greater consciousness and internal resources to overcome obstacles in the world. Moreover, as established earlier in the contextual chapters, the individual comes to operate more harmoniously within the world with increased agency in the knowledge that they may be differentiated from, yet not antagonistic towards the collective identity (Jung, 1923/1959; Stein, 2017). Indeed, individuation was framed as fostering significant connections with oneself and to the world and others which lead to experiences of meaning and a sense of wholeness. As such, increases in life satisfaction, life performance and overall well-being are to be expected. This draws parallels with the contextual chapters where individuation was found to function within the psychosocial space to the advantage of the individual (Rybak et al., 2000; Tricarico, 2016; Young, 2018). Through individuation one may ultimately align their internal nature and external identity into cohesive congruence and flourish within the world. Thus, individuation was

framed as a worthwhile venture by the psychosocial growth it prompts and the meaning which this may bring to one's life.

In contributing to this framework where individuation is considered as a worthwhile experience, cultural advancement and collective expansion were identified as positive effects resulting from individuals engaged in individuation. In the establishing literature chapters, discussion took place situating the fragmentation and state of disconnection in the modern era due to reduced intrapsychic engagement (Beridha, 2016; Robertson, 2017; Zemmelman, 2017). As a form of intrapsychic engagement, individuation facilitates consciousness and insights about one's true nature and the rapidly progressing world which, ultimately, contribute to collective knowledge and resources. Thus, as a worthwhile venture individuation can be seen to challenge a largely unconscious modern era. Certainly, individuation was established in the contextual chapters to connect the individual and society into a reciprocal relationship of mutual advantage in fostering collective progression and preventing one-sided stagnancy (Boland, 2017; Fraser, 2009; McKenzie, 2010; Robertson, 2017; Rybak et al., 2000). As such, the representative framework for individuation was found to conceptualize individuation as greatly beneficial for both the individual and the world in which they exist.

Assessing the Conceptual Space

Within the previous chapter it was determined that the representative framework for gender dysphoria was somewhat resistant to problematic gender discourse. Signs of resistance were encountered in the conceptual space through challenging the notion that gender nonconformity or incongruence with the binary suggests a disordered experience. Similarly, alternative conceptualizations and the addressing of misconceptions regarding gender nonconformity reflect the progressive shifts within the conceptual space towards more sensitive and inclusive conceptualizations. However, this framework was still interpreted to play a significant reinforcing role overall of problematic gender discourse. Such discourse sees gender dysphoria, and by extension an entire *gender diverse* community, to be in pathological distress or in a state of dissatisfaction. Consequently, a cyclical relationship of pathologization (see chapter 5, figure 2, p. 69) was identified as operating within the conceptual space. In response, the representative framework constructed for individuation may offer some resistance to this reinforcing cyclical relationship and, ultimately, to the reimagining and reconstruction the concept of gender dysphoria.

The individuation framework describes the process of forming and developing all aspects inherent to one's internal nature into their expressed identity as a significant means of experiencing psychosocial growth. As such, individuation may require the individual to differentiate from collective expectations and norms when these aspects of the personality are realized to be intrinsic features comprising their

‘true’ nature. Thus, an identity varying from common experiences within the collective may be considered simply as manifestations of individuation where the drives of the psyche have urged the individual to integrate and embrace these features into their conscious identity. The individual may then be found to contribute to the collective identity through this experience of embodiment as a representation of human variation. This experience may be considered as vital for the development of the psychological individual, and in facilitating one’s ability to flourish as a consciously realized being in the world. Moreover, individuation may be a crucial process for progressing collective consciousness to become inclusive of the archetypal experiences offered through the experience of a *gender identity* outside the binary. Becoming who one is meant to be through individuation may be difficult, and perhaps even distressing, but it promotes the overall well-being and functioning of the individual by integrating their internal nature with external expression. Furthermore, the difficulty or distress experienced in individuation may very well be induced by a collective environment which is largely unconscious, and consequently, intolerant of variation to static social ‘norms’.

Therefore, the framework for gender dysphoria, which perpetuates a narrative of internally induced distress, is found to be in substantial opposition to the framework for individuation. Indeed, the latter framework would suggest that those labelled with gender dysphoria are in the process of individuating, but are hindered by the psychosocial barriers and challenges implicated by an insupportable collective atmosphere which is informed by binary expectations of gendered development. This is reflected in the clinical approach of attempting to assimilate the individual into a binary category – whether through psychotherapy or gender transition procedures. Yet, a greater community of gender diverse individuals may present with individual needs to live as a nonconforming identity in accordance with insights gained about their true internal nature as guided by the process of individuation. Certainly, this navigation is a pivotal task for those with *intersex* features whose gender identity is not evident when utilising the binary model.

Gender diverse individuals who do transition into *cisgender* identities may do so perhaps in an attempt to reduce the distress inflicted by the collective, by adopting a persona and, consequently, repress aspects of their true gendered nature. Similarly, those actively aware of this aspect of their psyche may still transition to the binary option as an adopted persona which, while not in complete congruence with internally experienced gender identity, most closely resembles this. This may be considered as an adaptive process of ego identification where differentiation proves too overwhelming, yet is ultimately a hindrance to the individual’s overall well-being and psychosocial maturation. Consequently, many individuals labelled with gender dysphoria may be caught within a discourse perpetuating a narrative of distress as they try to plot their subjective experiences using dominant gender frameworks that do not account for such diversity.

Despite the interpreted incompatibility between these frameworks there is some conceptual room where the concept of individuation may yet be accommodated. Indeed, this gap in the conceptual space may incorporate the contribution of individuation in the development of frameworks aiming to dismantle the pathologising of gender diverse individuals currently implicated within popular gender discourse. Certainly, as identified in the establishing contextual literature (chapters 1 & 2), there seems to be an increasing global consciousness of gender as a dynamic experience of identity under construction for many individuals. The framework of individuation may play a significant role here through validating and adding legitimacy to the experiences of ‘other’ gender identities as creative manifestations of individuation. Collaboratively, individuation holds potential in progressing popular gender frameworks to become more inclusive and representative of a wider gender spectrum. Consequently, efforts to depathologize gender diversity may be assisted and the clinical narrative of distress, dominant in discourse, may be replaced towards a narrative of psychosocial growth through personally authentic expression. This may play an important role in reducing stigmatization, discrimination and abuse – particularly for those labelled with gender dysphoria. Thus, through the concept of individuation we might move towards a reimagined conceptualization of gender dysphoria.

Chapter 7: Conclusion

The previous two chapters established frameworks for the concepts of *gender dysphoria* and *individuation* accordingly. The construction of these frameworks was informed by the conceptual constructs identified within contemporary psychological papers. Through an iterative synthesis process these constructs were interpreted in their contribution to the overall framework derived from each body of literature. As such, the framework for gender dysphoria was used to answer the first research question and its sub-question in drawing conceptual inferences, and in assessing their impact on problematic gender discourse. The second framework, constructed from the individuation literature, contributed in answering the second research question by assessing the conceptual space available within the framework on gender dysphoria for the concept of individuation, as understood within the theory of analytical psychology.

Subsequent discussion will summarise the research process and methods applied in acquiring answers to the research questions and aims of the current thesis. The findings and their implications will then be reviewed. Following this, limitations and strengths will be discussed with respect to the scope of this thesis. Future research opportunities and suggestions will then be discussed as potential endeavours to consider towards the process of depathologizing *gender diverse* identities. Lastly, a concluding thought will bring the thesis to its end by reflecting on the insights gained from engagement in the research process.

A summary of the Research Process

The research process followed a systematic review method, as informed by Bambra (2011) and Petticrew and Roberts (2006), in approaching the two bodies of psychological literature on gender dysphoria and individuation accordingly. The use of this method involved a structured and robust approach to the search, selection, quality appraisal and analysis of the research papers comprising each review. Specifically, the systematic review process involved five essential phases in maintaining rigour and transparency: (1) the formation of concise research questions; (2) the development of a strict research protocol for data selection; (3) the conducting of a literature search; (4) quality appraisal of the selected papers; and (5) the use of explicit methods to synthesise the content within the included papers.

The final phase of the systematic review made use of a critical interpretive synthesis (CIS) process as an explicit means of synthesising the conceptual content found within the selected research papers. This method was informed by Dixon-Woods, Cavers and Agarwal et al. (2006) and was crucial for the purposes of this thesis which sought to go beyond an aggregative or summative approach to data

synthesis. Traditionally in systematic reviews an aggregative approach is used to combine evidence across the research papers in positing conclusive claims of effect. However, the research objectives in this thesis specifically required critical inspection and interpretation of contemporary conceptual knowledge found across research papers in order to generate contributory theoretical knowledge that, consequently, was grounded by strong explanatory power. The CIS approach was accommodating to that end and was utilised in assessing the impact of contemporary psychological literature on gender dysphoria discourse and, subsequently, to suggest the potential theoretical contribution which the concept of individuation might have in reimagining gender dysphoria and *gender identity* theories

While the CIS approach served as an explicit synthesis method, it was also adapted as an overall orientation to the research process. CIS is distinguishable by its critical, iterative and reflexive approach to systematically reviewing and synthesising literature. As such, the research process was deliberately recursive and flexible across the respective review phases; allowing the refinement of the research methods. This was particularly pertinent when reflexive practices brought on critical insights regarding both content and researcher bias which were otherwise shaping the research questions, search and extraction procedures, quality appraisal and analysis methods. Consequently, the review phases were flexible with respect to these insights while still maintaining the transparency and rigour characterising each particular phase of systematic review methodology.

Through CIS analysis, both bodies of psychological literature were inspected for conceptual constructs which were arranged subsequently into high-order categories of significant meaning. These categories functioned as foundations for the construction of representative frameworks for gender dysphoria and individuation. These representative frameworks were strengthened by the reference of contextual literature discussed in the establishing literature (chapters 1,2 & 3). The framework for gender dysphoria provided the inferences used to answer the first research question; further interpretation of their role towards problematic gender discourse answered its sub-question. Likewise, the framework for individuation was used comparatively with that of the framework for gender dysphoria in answering the second research question. This was accomplished by assessing the availability within the conceptual space for the concept of individuation in reimagining gender dysphoria.

A review of the Research Results

The thematic constructs identified in the first review (on gender dysphoria) were grouped into three higher-order categories with respect to the first research question and its sub-question. These categories were used as the informants constructing the representative framework, and consisted of the following: conceptualizations related to distress or of clinical significance, conceptualizations resisting notions of distress or clinical significance, and matters related to gender dysphoria

reconceptualization. Thus, these higher-order categories provided the answers to the first research question – functioning as the conceptual inferences drawn from the reviewed psychological literature. The sub-question, leading from the first research question, was answered through critical interpretation of the constructed framework in determining the role which conceptualizations played in reinforcing or resisting problematic gender discourse. The last conceptual category of matters related to gender dysphoria reconceptualization supplemented the first two categories in expanding on the conceptual space and the current conceptual contention regarding gender dysphoria conceptualization.

Overall, the representative framework for contemporary gender dysphoria literature was found to reinforce problematic gender discourse albeit with some signs of resistance. However, the conceptualizations playing a resistant role were far less frequent and supported in comparison with those interpreted as problematic. Significantly, the framework was informed by the insistence that those with gender dysphoria, and by extension all *gender nonconforming* individuals, are in a state of distress or life dissatisfaction. Currently, the dominant lens through which gender diversity is understood lies within clinical discourse and understandings which construct and reinforce a narrative of distress. This was evident in prominent conceptual constructs which framed gender dysphoria as subject to many psychosocial difficulties and experiences of comorbidity, and as being a treatable condition through *cisgender* assimilation via psychotherapy or gender reassignment procedures. Moreover, the framework represented substantial referencing of the Diagnostic and Statistical Manual of Mental Disorders (DSM) as a clinical orientation to conceptualizing gender dysphoria or gender nonconformity. Principally, the emergent framework iterated the problematic notion that distress emanates from the experience of internal gender identity being inconsistent with binary expectations of gender development, that is, with sexual (physical) assignment at birth. Through this understanding, access to further healthcare has been substantiated as necessitating a clinical process of adopting this distress narrative to bypass gatekeepers to healthcare. This undervalues the possibility that potential distress in *gender incongruence* may be a consequence of an intolerant social atmosphere towards gender diversity and an unaccommodating *gender binary* framework. As such, this clinical approach towards gender diverse people was identified as reinforcing a cyclical relationship of pathologization (see chapter 5, figure 2, p. 69).

The constructs identified in the second review (on individuation) were all grouped similarly into three high-order categories of significant meaning. As such, the following categories were established as the foundation for developing a representative framework for individuation: conceptualizations related to individuation as a process experienced by the individual, conceptualizations related to the nature of individuation, and conceptualizations related to the impact of individuation on the individual and others. The interpreted framework was used as a comparative tool to assess the conceptual space within the framework for gender dysphoria in accommodating the concept of individuation.

Most notably, the representative framework on individuation described a process of developing the psychology of the individual in relation to collective society. This process of forming and specializing an individual nature takes place over the lifetime by integrating unconscious contents about who we truly are into conscious identity. This may involve an integration of insights about one's personal and collective traits which are difficult to process, described as *shadow* content, due to their perceived undesirability or opposition to the *ego* consciousness. Yet, resolution of this psychic conflict, where all traits within the individual are accepted as significant constituents of their intrinsic nature, is integral in individuation. This process fosters a connection to our true nature and facilitates a meaningful connection with the world and one's relation to the collective identity. However, the framework noted the difficulty of engaging in individuation with respect to the psychological needs and fluctuating readiness of the particular individual, and the psychosocial difficulties which may otherwise hinder or cause the process to go awry. Nonetheless, it was identified that engagement in individuation is a worthwhile venture of significance for the psychosocial maturation of the individual and for the expansion and progression of *the collective unconscious*. Thus, as a significant facilitator of unconscious integration, individuation was conceptualized as a driving force towards balance and wholeness of the *psyche*.

Through comparative assessment of the representative frameworks, the conceptual space was determined to be somewhat accommodating of the concept of individuation in its potential to reimagine and reconstruct the concept of gender dysphoria. However, the representative framework on gender dysphoria discussed gender nonconformity to be caught within a problematic clinical discourse where gender incongruence is viewed as a treatable condition which is mired within a narrative of distress. This was interpreted to be in direct conflict with individuation which considers variation from the gender binary simply as an expression of one's internal nature which has been realized through unconscious integration and unification within the psyche. Indeed, the psychosocial distress or challenging experiences in the gender diverse community may stem primarily from an insupportable social atmosphere which bases stigma, discrimination and abuse within regulatory discourse on exclusive gender categories.

Yet, the conceptual space was identified to challenge these problematic notions somewhat through alternative conceptualizations of gender dysphoria and in addressing related misconceptions. In addition, a changing collective perspective, where gender identity may be viewed as existing within a spectrum, was discussed to be in motion albeit incrementally and not without opposition. It is in this conceptual space where individuation was considered to be accommodated to some degree. Should the conceptual space continue to grow, it may become increasingly open to the concept of individuation, as understood by contemporary analytical psychology, for its potential contribution towards a reimagined and reconstructed gender dysphoria.

Limitations & Strengths encountered in the Research Process

To the knowledge of the researcher, this is the first research endeavour to adopt a dual review process assessing the conceptual capacity available within contemporary gender dysphoria literature for the concept of individuation. This thesis ensured strong explanatory strength for its conclusions about this conceptual space through the characteristic rigour and transparency of the systematic review process together with the iterative and critically reflexive nature of CIS. Each review provided a robust foundation for conceptual comparison and the critical evaluation of the conceptual space. Importantly, through its explanatory power, this thesis contributes in drawing attention to the potential of theoretical literature as both reflecting and regulating problematic gender discourse.

An identified strength within this research thesis was its use of a contemporary analytical psychological orientation which simultaneously drew from social constructionism and queer theory. This backdrop offered a conceptual frame which directly countered notions of pathology or 'normative' development in gender identity. Rather, gender identity was framed as an internal, intrapsychic experience brought into the social realm through discursive and performative construction. This understanding may be considered to be particularly helpful towards the depathologization of gender diverse individuals as it challenges the gender binary which sees gender identity to be deterministic and static. Thus, this thesis may be considered to contribute to the contemporary space of reimagining and reconceptualising gender dysphoria. On a theoretical level, it may collaborate with gender diverse individuals themselves and with the efforts of equal rights advocates towards a more inclusive collective consciousness on the spectrum of gender identities present within human experience.

With consideration to the scope of this thesis, the research protocol was developed specifically to target particular academic databases for psychological literature. The papers for inclusion were, as such, limited to this field of research. The available literature was limited further by the particular institutional affiliation of the researcher and the associated level of access to databases. Consequently, a more comprehensive analysis of conceptual literature available within cross-disciplinary fields and other institutions was not possible. Thus, the conclusions drawn from this thesis are not necessarily generalizable to other platforms where gender dysphoria conceptualizations may otherwise be depicted and discussed differently, such as representations found within social media and other popular modes of social discourse.

The overall research process, which was characterised by critical interpretive synthesis protocols, may also be considered as having associated limitations. Specifically, the interpretive approach to the data, while a feature typical of most qualitative research and in accordance with the research aims, may be subjected to considerable bias. The role of interpretation may influence the identification of

conceptual constructs and their role within emerging frameworks with respect to the researcher's critical and theoretical orientation towards the concerned literature. However, a creative process of interpretation is inherent to CIS as a necessary method for analysing complex bodies of literature beyond aggregative summaries (Dixon-Woods et al., 2006; Wakefield et al., 2018). As such, complete transparency was not possible in the research process; acknowledging that the established frameworks were not infallible constructions of knowledge. Nonetheless, the researcher maintained a system of reflexive practice to counter directional forces rooted in implicit responses towards research content. Thus, the review phases were administered in an iterative manner with response to insights gained through critical reflection. This was crucial in establishing a research process that was relatively replicable.

Future Research & Considerations

While the scope of this thesis remained within a sphere of critical theoretical discussion, future research endeavours may find noteworthy results in empirical studies with gender diverse individuals themselves. Such studies might use the discursive space to reimagine gender dysphoria in ways that are rooted in the personal insights gained by those individuals individuating as differentiated gendered identities from the binary. This may be a more practical approach to addressing the conceptual space within discourse itself. Participant narratives may be crucial to addressing problematic discourse by offering first-hand accounts of gender differentiation that may serve in deconstructing negative outcomes implicated by the prevailing gender binary. With this in mind, theoretical works should still have a prominent place in the reimagining and reconceptualization of gender dysphoria since psychological literature plays no small role in the construction, reinforcement, or resistance towards problematic discourse. As a platform of considerable influence, future theoretical works may be imperative both by resisting problematic gender discourse and in constructing conventionally accepted knowledge which is representative and supportive of gender diversity. Additionally, consideration and research on conceptualizations found within popular media and across other representative platforms may prove beneficial as these may function in similar influential ways.

A concluding Thought

In the pursuit of conceptualizing phenomena within the social world it is prudent to remain mindful of the structures regulating what is conventionally accepted as immutable knowledge. These structures may be found within intrapsychic and discursive spaces, and implicitly predispose our perceptions of social reality to specific subjectivities. In remaining unconscious of these forces we may become subjected to one-sidedness in which there is limited comprehension or consideration for the vast and dynamic complexities underlying our human experiences. The social world may be considered as progressing invariably, and the unintegrated individual may be left increasingly disconnected from

those around them. It is in this state of unconsciousness that we may come to conceptualize significant aspects of selfhood as abnormal, unnatural and even pathological. This disconnect is manifest within the world today where experiences of personal and inherent identity are dehumanised through a lens of clinical conceptualization and pathologization. Yet, this unaccommodating social sphere is meant to be the very facilitator through which individuals acquire their agency to function as bodily beings. In moving towards a reimagined gender dysphoria, it appears imperative that we venture to become a more collectively conscious society that constructs knowledge which empowers gender diverse individuals to engage fully in becoming who they were meant to be in the world.

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APPENDICES

Appendix 1: Final Papers (49) included in review 1 on Gender Dysphoria				
Authors & Year of publication	Title of the included Paper	Type of Paper conducted	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Bailey (2014)	Transgender Workplace Discrimination In The Age Of Gender Dysphoria And ENDA	Research article	7	47
Berlin (2016)	A Conceptual Overview and Commentary on Gender Dysphoria	Analysis and commentary	19	41
Burke et al. (2016)	Male-typical visuospatial functioning in gynephilic girls with gender dysphoria –organizational and activational effects of testosterone	Research article	5	12
Cousino, Davis, Ng & Stancin (2014)	An Emerging Opportunity for Pediatric Psychologists: Our Role in a Multidisciplinary Clinic for Youth With Gender Dysphoria	Research article	13	46
Couturier, Pindiprolu, Findlay & Johnson (2015)	Anorexia Nervosa and Gender Dysphoria in Two Adolescents	Clinical case report	9	23
de Vries, Steensma, Cohen-Kettenis, VanderLaan & Zucker (2016)	Poor peer relations predict parent- and self-reported behavioral and emotional problems of adolescents with gender dysphoria: a cross-national, cross-clinic comparative analysis	Original contribution	9	26
Defeo (2015)	Understanding Sexual, Paraphilic, and Gender Dysphoria Disorders in DSM-5	Research article	7	16
Defreyne et al. (2018)	Prospective evaluation of hematocrit in gender-affirming hormone treatment: results from European Network for the Investigation of Gender Incongruence	Original article	7	24

Appendix 1 (continued)

Authors & Year of publication	Title of the included Paper	Type of Paper published	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Erasmus, Bagga & Harte (2015)	Assessing patient satisfaction with a multidisciplinary gender dysphoria clinic in Melbourne	Research article	8	10
Firth (2014)	Childhood abuse and depressive vulnerability in clients with gender dysphoria	Research article	9	42
Firth (2015)	Childhood abuse, depressive vulnerability and gender dysphoria: Part 2	Original article	15	45
Feusner et al. (2017)	Intrinsic network connectivity and own body perception in gender dysphoria	Original article	9	20
Gregor, Davidson, Hingley-Jones (2016)	The experience of gender dysphoria for pre-pubescent children and their families: a review of the literature	Review article	13	48
Heylens et al. (2018)	The Co-occurrence of Gender Dysphoria and Autism Spectrum Disorder in Adults: An Analysis of Cross-Sectional and Clinical Chart Data	Brief report	11	40
Hilario (2017)	Contestation, instrumental resistance and strategic conformation within the diagnostic process of gender dysphoria in Portugal	Research article	9	37
Holt, Skagerberg & Dunsford (2016)	Young people with features of gender dysphoria: Demographics and associated difficulties	Research article	11	45
Jokić-Begić et al. (2017)	Croatia Needs a Gender Incongruence Diagnosis for Prepubertal Children	Commentary article	9	23
Junger et al. (2014)	More than Just Two Sexes: The Neural Correlates of Voice Gender Perception in Gender Dysphoria	Research article	11	23
Kuyper & Wijzen (2014)	Gender Identities and Gender Dysphoria in the Netherlands	Original article	12	21

Appendix 1 (continued)

Authors & Year of publication	Title of the included Paper	Type of Paper published	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Lawrence (2014)	Gender Assignment Dysphoria in the DSM-5	Commentary article	9	24
Lehmann & Leavey (2017)	Individuals with gender dysphoria and autism: barriers to good clinical practice	Research article	15	41
Leibowitz and de Vries (2016)	Gender dysphoria in adolescence	Review article	22	63
Marshall, Cooper & Rudnick (2015)	Gender Dysphoria and Dementia: A Case Report	Research article	9	15
Moser (2017)	ICD-11 and Gender Incongruence: Language is Important	Commentary article	9	33
Nota et al. (2017)	Brain functional connectivity patterns in children and adolescents with gender dysphoria: Sex-atypical or not?	Research article	7	17
Olson, Shrager, Belzer, Simons & Clark (2015)	Baseline Physiologic and Psychosocial Characteristics of Transgender Youth Seeking Care for Gender Dysphoria Johanna	Original article	14	29
Osborne & Lawrence (2016)	Male Prison Inmates With Gender Dysphoria: When Is Sex Reassignment Surgery Appropriate?	Original article	12	69
Pasterski, Gilligan, Curtis (2014)	Traits of Autism Spectrum Disorders in Adults with Gender Dysphoria	Original article	11	24
Peterson, Matthews, Copps-Smith & Conard (2017)	Suicidality, Self-Harm, and Body Dissatisfaction in Transgender Adolescents and Emerging Adults with Gender Dysphoria	Research article	12	43
Ristori & Steensma (2016)	Gender dysphoria in childhood	Review article	14	41

Appendix 1 (continued)

Authors & Year of publication	Title of the included Paper	Type of Paper published	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Schnieder et al. (2017)	Brain Maturation, Cognition and Voice Pattern in a Gender Dysphoria Case under Pubertal Suppression	Clinical case report	7	14
Schwartz et al. (2016)	Neural Correlates of Psychosis and Gender Dysphoria in an Adult Male	Clinical case report	9	25
Skagerberg, Di Ceglie & Carmichael (2015)	Brief Report: Autistic Features in Children and Adolescents with Gender Dysphoria	Brief report	9	14
Staphorsius et al. (2015)	Puberty suppression and executive functioning: An fMRI-study in adolescents with gender dysphoria	Research article	9	18
Strandjord, Ng & Rome (2015)	Effects of Treating Gender Dysphoria and Anorexia Nervosa in a Transgender Adolescent: Lessons Learned	Clinical case report	9	18
Strang et al. (2018)	Initial Clinical Guidelines for Co-Occurring Autism Spectrum Disorder and Gender Dysphoria or Incongruence in Adolescents	Research article	13	54
Telles Silveira, Knobloch, Silva Janovsky & Kater (2016)	Gender Dysphoria in a 62-Year-Old Genetic Female With Congenital Adrenal Hyperplasia	Clinical case report	12	17
Turan et al. (2018)	Alterations in Body Uneasiness, Eating Attitudes, and Psychopathology Before and After Cross-Sex Hormonal Treatment in Patients with Female-to-Male Gender Dysphoria	Original article	8	21
Turan, Poyraz & Duran (2015)	Prolonged anorexia nervosa associated with female-to-male gender dysphoria: A case report	Research article	8	29
Turan, Poyraz, Öcek Baş, Kani & Duran (2015)	Affective temperaments in subjects with female-to-male gender dysphoria	Research report	7	12

Appendix 1 (continued)

Authors & Year of publication	Title of the included Paper	Type of Paper published	Number of Conceptual Constructs identified	Frequency of occurring Constructs
VanderLaan et al. (2015)	Do Children With Gender Dysphoria Have Intense/Obsessional Interests?	Research article	7	15
Van de Grift et al. (2016)	Body Satisfaction and Physical Appearance in Gender Dysphoria	Original article	9	25
Van Der Miesen, de Vries, Steensma, Hartman (2017)	Autistic Symptoms in Children and Adolescents with Gender Dysphoria	Original article	10	22
Van der Miesen, Hurley & de Vries (2016)	Gender dysphoria and autism spectrum disorder: A narrative review	Review article	12	33
Vrouenraets, Fredriks, Hannema, Cohen-Kettenis & de Vries (2015)	Early Medical Treatment of Children and Adolescents With Gender Dysphoria: An Empirical Ethical Study	Original article	17	39
Winograd (2014)	The Wish to Be a Boy: Gender Dysphoria and Identity Confusion in a Self-Identified Transgender Adolescent	Research article	19	76
Winter, De Cuypere, Green, Kane & Knudson (2016)	The Proposed ICD-11 Gender Incongruence of Childhood Diagnosis: A World Professional Association for Transgender Health Membership Survey	Invited article	9	43
Yildirim, Fis, Akgul & Ayaz (2017)	Gender dysphoria and attention problems: possible clue for biological underpinnings	Research article	12	24

Appendix 2: Final Papers (24) included in review 2 on Individuation

Authors & Year of publication	Title of the included Paper	Type of Paper conducted	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Bonovitz (2016)	The Influence of Personal Analysis on the Analyst's Clinical Style: Idealization, Identification, and the Process of Individuation	Research article	8	24
Cavalli (2017)	Identification – obstacle to individuation, or: on how to become 'me'	Research article	13	56
Choi & Kim (2016)	Influence of SNS User Innovativeness and Public Individuation on SNS Usage Patterns and Social Capital Development: The Case of Facebook	Research article	6	15
Doctors (2017)	Attachment-Individuation: Clinical Notes Toward a Reconsideration of “Adolescent Turmoil”	Research article	10	45
Eller-Boyko & Grace (2017)	Longing for the Feminine: Reflections on Love, Sexual Orientation, Individuation, and the Soul	Original article	13	83
Grevatt (2016)	Meister Eckhart and C. G. Jung: Mysticism, Individuation, and the Transformation of the God Image	Research article	14	33
Hoffman (2014)	Becoming Beautiful: The Aesthetics of Individuation	Research article	12	46
Jiang, Yang & Wang (2017)	Self-disclosure to parents in emerging adulthood: Examining the roles of perceived parental responsiveness and separation–individuation	Research article	9	22
Karataş, Puklek Levpušček & Komidar (2017)	Demographic Factors and Individuation in Relation to Parents Predicting Attachment Avoidance and Anxiety in Turkish Emerging Adults	Research article	8	48
Kavčič & Zupančič (2018)	Types of separation-individuation in relation to mothers and fathers among young people entering adulthood	Research article	11	49
Komidar, Zupančič, Puklek Levpušček & Bjornsen (2016)	Development of the Short Version of the Individuation Test for Emerging Adults (ITEA–S) and Its Measurement Invariance Across Slovene and U.S. Emerging Adults	Research article	9	41

Appendix 2 (continued)

Authors & Year of publication	Title of the included Paper	Type of Paper conducted	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Komidar, Zupančič, Sočan & Puklek Levpušček (2014)	Development and Construct Validation of the Individuation Test for Emerging Adults (ITEA)	Research article	9	50
Kotzé (2014)	Jung, Individuation, and Moral Relativity in Qohelet 7:16–17	Original article	15	37
Lee (2017)	The Role of the Ego in Jungian Individuation and Yogacara Buddhism's Enlightenment	Research article	11	43
Lindsey (2014)	Trait Anxiety In College Students: The Role Of The Approval Seeking Schema And Separation Individuation	Research article	8	31
Myers (2016)	Myers-Briggs typology and Jungian individuation	Research article	16	75
Puklek Levpušček, Rauch & Komidar (2018)	Individuation in relation to parents as a predictor of career goals and career optimism in emerging adults	Research article	9	54
Rosin (2015)	The Necessity of Counselor Individuation for Fostering Reflective Practice	Research article	13	38
Stein (2017)	Where East meets West: in the house of individuation	Research article	15	51
Stey, Hill & Lapsley (2014)	Factor Structure and Psychometric Properties of a Brief Measure of Dysfunctional Individuation	Research article	10	33
Valls-Vidal, Garriga Alsin, Pérez-Testor, Guàrdia-Olmos & Iafra (2016)	Young Adults' Individuation with Mother and Father as a Function of Dysfunctional Family Patterns, Gender and Parental Divorce	Research article	6	25
Young (2018)	“True Religion”: Individuation, Alchemy, and Poetry	Original article	14	44

Appendix 2 (continued)

Authors & Year of publication	Title of the included Paper	Type of Paper conducted	Number of Conceptual Constructs identified	Frequency of occurring Constructs
Zupančič & Kavčič (2014)	Student personality traits predicting individuation in relation to mothers and fathers	Research article	10	52
Zupančič, Komidar, Puklek & Levpušček (2014)	Individuation in Slovene emerging adults: Its associations with demographics, transitional markers, achieved criteria for adulthood, and life satisfaction	Research article	10	77