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## **Non-Binary Genders: Navigating Communities, Identities, and Healthcare**

Ben Vincent, Policy Press, Bristol, 2020, 250 pages, ISBN 978-1447351924 (pb), £26.99

Recent years have seen a growing and increasingly sensationalist media interest in trans and non-binary identities throughout many parts of the world. This has been only exacerbated by a growing moral panic over what it might mean to question the notion of binary distinctions between female and male, especially in terms of policing access to gendered spaces and healthcare services.

Amidst a wave of concerned op-eds and social media furore, the actual everyday lives and needs of trans and non-binary people are rarely explored. Where documentaries, news stories, and fictional accounts do explore trans and/or non-binary experiences, these often focus on a particular person's journey, perspective, or encounters with discrimination in isolation.

In *Non-Binary Genders*, Ben Vincent offers a refreshing alternative to individualistic narratives of being, focusing instead on non-binary experiences of community and healthcare institutions. Drawing on qualitative findings from diary elicitation and interviews with non-binary people living in the UK, they illustrate how community dynamics can both support and undermine the identity, health, and wellbeing of non-binary people.

Vincent's analysis is especially relevant to community development researchers and practitioners working with LGBTQ populations, but also offers wider lessons around how identity emergence and horizontal oppression can play out within deeply marginalised groups. Similarly their research methods – outlined in detail in the second chapter – will be of interest to readers who wish to explore questions of power, reflexivity, and rapport in studying with marginalised communities.

As Vincent demonstrates, the term 'non-binary' captures a range of identities and experiences that exist between, beyond, and without the binary gender options of 'female' and 'male'. In the review of academic literature that opens their book, they observe that while non-binary genders have a long history both within and outside of Western societies, it is only in the 21<sup>st</sup> century that the specific term 'non-binary' has been widely adopted in an English-language context. This emergence stems from the entwined histories of the transgender social movement and medical discourses of transsexualism.

Complex social, political, and intra-communal relationships between 'trans', 'non-binary', and medical models form a key theme across Vincent's discussion. Both 'trans' and 'transgender' broadly operate as umbrella terms in reference to 'individuals whose identities do not correspond with how they were assigned at birth' (p.8). In this way, they clearly encompass non-binary identities and experiences as well as those of trans women and men. Indeed, one of the key individuals involved in popularizing the term 'trans' in the early 1990s was Leslie Feinberg, who used gender-neutral pronouns and described himself as 'a human being who would rather not be addressed as Ms. or Mr' (Feinberg, 1991, p.1).

However, trans identities have also been deeply pathologized, and remain so within UK medical institutions and law. A burden of proof lies with those who seek to access legal gender recognition and/or specialist medical treatments such as hormone therapy, hair removal, or surgeries. In both contexts, non-binary identities are frequently positioned as invalid. Throughout the book, Vincent therefore explores how and why non-binary people find themselves seeking to prove that they are 'trans enough' – to medical gatekeepers, to other community members, and to themselves.

All of this has enormous consequences for non-binary people's access to communities of identity. For example, Vincent shows how trans communities can function as sites of constraint and rejection for non-binary people, as well as spaces for support and exploration. Medicalization plays an important role in these processes, as 'hierarchies of transness' (p.82) frequently prioritise identities and desires that are most legible within medical settings. These may include for example a straightforward identification with femininity or masculinity, or a desire to undergo particular procedures. In this way, gatekeeping in the context of specialist gender clinics can have a deeply damaging knock-on effect within community spaces.

At their best, trans and queer communities provide an important liminal space for exploration and growth, creating 'possibilities for people who are not openly trans in the daily lives to become "something else for a limited time' (p.111), a stepping-stone to both self-understanding and collective understanding. Vincent's diary elicitation method provides literal illustration of this; the book features beautiful sketches, collage art, and poetry from participants in addition to the indicative quotes more typical of qualitative research.

Importantly, Vincent also shows how support within wider communities of identity and interest can provide spaces for non-binary people to thrive. They explore a range of examples, including bisexual and kink communities, as well as subcultural groups interested in Japanese 'lolita' fashion. Furthermore, they highlight how experiences of oppression in medical settings are compounded for disabled non-binary people. This provides a vital reminder that community development practice with trans and non-binary people will always necessarily involve work outside specifically trans and non-binary spaces.

Vincent rightly notes some important limitations and caveats to the findings reported in *Non-Binary Genders*. Their qualitative data originates from a snowball sample of non-binary people in the UK and much of the original recruitment took place through university LGBTQ groups; consequently, the participants are disproportionately white, well-educated, and seemingly middle-class. By contrast, the UK Government's *National LGBT Survey* demonstrated that the non-binary population is hyperdiverse, and disproportionately experiences severe socio-economic inequalities (Government Equalities Office, 2018). As such, the research represents a snapshot of specific non-binary experiences in a particular time and place.

Moreover, while the book is likely to be of interest to a general readership, it is written in a rigorous academic style. Readers interested in a more accessible text that attends better to the diversity of non-binary experience may enjoy *Non-Binary Lives*, a collection of personal essays by non-binary people which Vincent edited with Jos Twist, Meg-John Barker, and Kat Gupta (Twist et al., 2020).

Regardless, *Non-Binary Genders* represents an importantly scholarly achievement. Ben Vincent has written a pioneering academic text that represents the first significant study of non-binary experiences of community and healthcare in a UK context. It will be vital reading for scholars, activists, and practitioners working with this population.

## References

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