



Future Well-Being of Transgender People in the Workplace

By: Bo Louie Siu

Submitted to OCAD University in partial fulfillment of the requirements for
the degree of Master of Design in Strategic Foresight and Innovation
Toronto, Ontario, Canada, 2022

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Abstract

A global movement over the last decade to promote gender diversity in the workplace has mitigated, yet not eliminated, marginalization of transgender employees and their exclusion from some workplaces. This report examines the current extent and modes of inclusion, marginalization and exclusion, and explores the well-being of research participants from the transgender and gender non-conforming community within their workplaces. The author, a transgender individual currently enrolled in a graduate program, makes sense for readers of the complexities and uncertainties affecting these working people’s quality of life. He identifies causes for hope within their present circumstances and, with that information and several modes of analysis, proposes opportunities to design a future of optimal workplace well-being for transgender people.

This report’s primary research question is: How might we design a future that supports optimal well-being of transgender people in the workplace?

The article explores three transgender adults’ perspectives on and experiences of well-being in their workplaces. At the time of their interviews, the participants all worked in what, since the onset of COVID-19, are known as frontline occupations: education, healthcare, and retail customer service. The author collected survey responses from fifteen anonymous, transgender and gender non-conforming individuals working to provide more diverse perspectives on workplace well-being in frontline and non-frontline occupations. Summaries and multiple modes of analyses paint a clear picture of the range

and commonalities of the participants’ present workplace circumstances and their visions of a future in that workplace more supportive of their well-being.

The research process is modeled on Human-Centered Design, with the research question also serving as the design challenge. The construct of well-being is explored, to strengthen interview and survey data and the Three Horizons map highlighting aspirational futures of well-being. The author additionally analyzes the data through a systems thinking lens, applying system archetypes to uncover improvement opportunities and constraints hiding within these data sets. Each analysis of primary data is contextualized by a review of relevant literature, including a section devoted to the effect on transgender workers of COVID-19 exigencies. Grounded by sustainable development principles, the author designed a prototype of a process to shift workplace paradigms toward achieving optimal well-being for transgender employees.

This report’s primary and secondary research findings, and the early process-prototype, are intended to contribute to knowledge mobilization – the creation and sharing of knowledge – among readers interested in manifesting a future where all workers recognize and value gender diversity and transgender workers’ well-being as beneficial for their workplace and everyone within it.

Keywords: Gender Diversity, Inclusion, Design, Knowledge Mobilization, Strategic Foresight, Transgender, Well-being, Workplace

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Well-being is
fundamental to
quality of life, enabling
people to experience
life as meaningful and
to be creative and
active citizens.”

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Introduction

1.1 Context

The concepts of diversity, equity, and inclusion (DEI) have risen as one of many strategic priorities for workplaces as they move into the future. The workplace is a microcosm of larger society, where the majority function according to social norms and many organizations are promoting that the workplace ought to support the individuals working in it. With this effort, there is a focus on systemic barriers and access, the opportunity for different perspectives in that system, and the individual is supported in light of these challenges.

To date, there is limited research looking at the well-being of transgender¹ individuals in the workplace. I, the author of this report, am a trans individual. A transgender (or trans) person identifies differently from socially prescribed gender norms corresponding to the sex assigned to them at birth (Nagoshi et al., 2012; Austin & Goodman, 2017; Loo et al., 2021). Bearegard et al. (2016) found transgender people are the most targeted minority group that suffers the highest degree of discrimination in employment. Workplace-related research on transgender individuals reveals that discrimination of trans people occurs at all phases of the employment process, including recruitment, training opportunities, employee benefits, and access to job advancement (Shaikh et al., 2016; McFadden, 2015). The literature recognizes underlying issues which create less than hopeful outcomes for transgender individuals. Bourns (2019) summarized that gender transition commonly results in losing a job or struggling in academic settings. These challenges impact one's livelihood and can spiral into a threatening vicious cycle, succinctly described by Divan et al., (2016):

The ways in which marginalization impacts a trans person's life are interconnected; stigma and transphobia drive isolation, poverty, violence, lack of social and economic support systems, and compromised health outcomes. Each circumstance relates to and often exacerbates the other. (p.2)

What if diversity, equity, and inclusion (DEI) efforts added one more concept to the acronym... Well-being? My research report attempts to highlight a forward-thinking outlook on the issues by facilitating conversations with transgender individuals about their well-being in the workplace. The purpose of this report is to demonstrate a potential call-to-action on the uncertainty and complexity of future well-being of transgender people in the workplace. It aims to mobilize the gathering of data intended to honour the voices in this report volunteered from the transgender and gender non-conforming community. It aims to examine the primary question:

How might we design a future that supports optimal well-being of transgender people in the workplace?

¹ Transgender or Trans individuals express a gender identity that is different from socially prescribed gender norms associated with their sex assigned at birth (Katz-Wise & Budge, 2015)



1.2 Gender Transition In The Workplace

Rainbow Health Ontario² defines gender transition as a “host of activities that some trans people may pursue to affirm their gender identity.” Transitioning is a complex process of undergoing gender-affirming phases that may or may not include medical (e.g., hormone replacement therapy, gender-affirming surgeries), social (e.g., using a new name and/or pronoun), and/or legal (e.g., changing official identification documents) elements (Katz-Wise & Budge, 2015; Evans et al., 2021). It is a continuous and sometimes non-linear process which is unique for each transgender individual, and some individuals do not necessarily reach a well-defined completion of their gender transition over a lifetime. Undergoing a gender transition in the workplace adds another layer of complexity to the process (Schilt & Connell, 2007):

In undertaking an open workplace transition, transgender people face the task of doing gender in their new social identity in a way that fits with both gendered workplace expectations and their personal gender ideologies. (p.602)

More information is needed to understand the complexity of obstacles and supports for transgender people in the workplace. Transgender people working in frontline occupations are disproportionately likely to face distinct challenges while transitioning in the workplace. Later, we will hear from the participants of interviews who work in frontline roles in education, healthcare, and customer service. Waite (2021, p. 1847) found that “those with public facing jobs are more likely to report

discrimination.” The forward-facing role while in the process of a gender transition puts that individual at increased risk of the harmful act of misgendering (Sevelius et al., 2020):

Addressing someone by the wrong name or misgendering them through use of incorrect pronouns can feel disrespectful, harmful, and even unsafe to the person being misgendered, since misgendering results in marginalization and communicates that a person’s identity is not being seen or respected. (p.9526)

In Canada, the British Columbia Human Rights Tribunal (BCHRT) recognized misgendering as a harmful or discriminatory act (Nelson v Goodberry Restaurant Group Ltd, 2021). The BCHRT acknowledged that using a trans employee’s name and pronouns correctly is a basic obligation in accordance with fundamental human rights to a workplace free of discrimination and a trans person’s entitlement to recognition of, and respect for, their gender identity and expression.

Discrimination in the workplace appears to be experienced differently for some trans identities. The highest rates of misgendering and breaches of privacy seem to occur for transgender men (Rosich, 2017). “Recognition,” the exact opposite of what the act of misgendering aims to achieve, is important to psychosocial adjustment and well-being for trans women (Katz-Wise & Budge, 2015, p. 151). Research shows that transgender people tend to develop types of discrimination-related vigilance within social environments (Bauerband et al., 2019). In particular, careful observation of what happens in one’s surroundings, a type of vigilance, appears to be highest for non-binary individuals compared to transgender men, and less so for transgender women (Bauerband et al., 2019). Transgender people lose jobs, get demoted, change employment status, or switch jobs after transitioning (Van de Cauter et al., 2021).

2 Rainbow Health Ontario (RHO) is a program of Sherbourne Health in Toronto with a purpose to create opportunities for the healthcare system to better serve LGBT2SQ communities. RHO is also a partner in Ontario’s Trans Health Expansion (THEx), a partnership formed with Women’s College Hospital and CAMH to improve access to transition-related surgeries and post-surgical care.

Discrimination-related vigilance, as described earlier, is likely the key coping mechanism trans employees use to navigate a workplace that is ill-prepared to accept them once they have been “outed”. The coping mechanisms negatively impact one’s mental health and sense of safety creating a hostile situation for all involved (Gaskins & McClain, 2021):

Respecting a transgender person’s chosen name and pronouns is a matter of dignity and safety. Hearing others call them by their chosen name and pronouns is an important form of acknowledgement and respect; this affirmation can strongly reduce negative mental health outcomes. (p.1)

The research on misgendering as it relates to transgender well-being experiences in the workplace is not well-established in existing literature. The Harvard Business Review study about creating a trans-inclusive workplace and the UCLA School of Law’s Williams Institute on LGBT People’s Experience of Workplace Discrimination and Harassment are the most recent pieces of literature examining transvisibility in the workplace (Baboolall et al., 2021, November 10, para. 4).

Empirical research on the impact of misgendering on transgender individuals “is relatively non-existent” (McLemore, 2015, p. 53). Also, a systems analysis of misgendering in the context of well-being in the workplace for transitioning employees working on the frontline is also not found in the literature.

Mechanisms for promoting trans positive health and well-being remains understudied and inadequately understood (Austin & Goodman, 2017; Pitts et al., 2009). Among 36 frameworks reviewed to advise The Public Health Agency of Canada, only one was suggested as a practice-based approach to population health and well-being (Canadian Council on Social Determinants of Health, 2015). Although this framework includes gender, socioeconomic determinants (i.e., discrimination) and social context (i.e., social capital, supports and networks), it fails to account for specific factors related to positive outcomes for transgender people. The Canadian Index of Well-being (CIW) appears to have a similar shortcoming as it does not include gender identity as a core measurement of livelihood and well-being, yet it is used to promote evidence-based community decision making for healthy populations (Muhajarine, et al., 2012). The CIW (Appendix A) was heralded for demonstrating leadership in quality of life and well-being measurement by the Department of Finance Canada (2021).

Well-being research shows that meaning derived from “social relationships and positive contacts with social institutions” offsets alienation (Ifeagwazi et al., 2015, p. 527). For transgender individuals, transitioning can result in emotional hardship and difficulty coping with rejection (Budge et al., 2013). Many transgender and gender non-conforming ³ employees pursue self-protective actions to avoid workplace mistreatment (Beauregard et al., 2016). It has been reported that 1 in 4 trans people are made to use an inappropriate toilet in the workplace early on in their transition and a quarter of trans people will feel obliged to change their jobs due to harassment and bullying (Whittle et al., 2007). Presently, there is little knowledge in the literature reflecting or measuring transgender people’s experiences of well-being.

Research on social supports that matter to transgender people when it comes to a sense of well-being in the workplace could be beneficial to fill existing gaps in the literature. To find a pathway to support future optimal well-being of transgender people in the workplace, it is important to find answers to the following questions:

What is meaningful, in terms of social support for trans people to experience well-being in the workplace?

What visions do trans employees hold about experiencing future optimal well-being in the workplace?

The health and well-being needs of transgender communities have been underrepresented and misrepresented. “Scholars have known for over a decade that the relationship between transgender persons and the LGBT community is complex, and many transgender individuals do not identify or consider themselves ‘LGBT’” (Bauerband et al., 2019, p. 19). Research on sexual minorities in this area commonly examines LGBT (an acronym for lesbian, gay, bi-sexual, and transgender) groups in general, whenever discussing social justice, social connectedness, and inclusive policy development to address health and well-being inequities (Ceatha et al., 2019; Mulé et al., 2009). While the umbrella term LGBT is meant to signify the shared experience of this grouping, being transgender does not determine one’s sexual orientation. Transgender people can have any sexual orientation among those available to them and cisgender ⁴ people alike.

³ Gender Non-Conforming refers to those who have not yet transitioned medically, or do not wish to (e.g. genderqueer, non-binary) (MacKinnon, 2018, p. 80).

⁴ Cisgender individuals express a gender identity corresponding to their sex assigned at birth (Katz-Wise & Budge, 2015).

5 PubMed is the premier research database for the health sciences, used by health care researchers, practitioners, and students around the globe (White, 2020)

All in all, higher quality data is becoming more available that distinguishes gender identity (e.g., trans) from sexual orientation (e.g., lesbian, gay) labels with respect to health-related injustices that particularly impact transgender people (Reisner et al., 2016; Bauer et al., 2017). Inclusion of the first and only peer-reviewed journal dedicated to transgender healthcare was recently accepted by PubMed⁵ (Garofalo & Schilling, 2017). An exhaustive review of literature uncovered no extant study of well-being in the workplace from a trans-centered perspective. Up to this point, there has been no scholarly research looking at a pathway towards future possibilities of transgender people's optimal well-being in the workplace.

Transgender people have specific health needs and unique minority stressors that put them at increased risk of mental health challenges because of societal stigma (Bry et al., 2018; Bauerband et al., 2019). Transgender individuals face discrimination in different ways with higher incidences among trans ethnic minorities, trans people of low social economic status, and older trans individuals undergoing transition (Eyssel et al., 2017). According to The National Center for Transgender Equality (Grant et al., 2011, p. 10): "In virtually every setting, the data underscores the urgent need for policymakers and community leaders to change their business-as-usual approach and confront the devastating consequences of anti-transgender bias."

Nearly a quarter of 6,450 transgender and gender non-conforming survey respondents reported a "catastrophic level of discrimination" by experiencing at least three life-altering events such as loss of job, eviction, assault, bullying, denial of medical services, incarceration, and loss of relationship with partner or children due to gender identity/expression (Grant et al., 2011, p. 10).

1.3 Research Questions

The main research question under consideration is as follows:

How might we design a future that supports optimal well-being of transgender people in the workplace?

Additional lines of inquiry include:

- a) What sorts of future aspirations, visions, and possibilities do transgender individuals hold about well-being in the workplace?
- b) What sort of practices, activities, values, and/or resources can be identified that might contribute to future optimal well-being for transgender people?
- c) What present concerns exist for transgender individuals in a frontline occupation regarding their well-being?

My qualitative primary research focused on gathering insights from individuals with a frontline profession, who are in the process of a gender transition. For the purposes of this study, transition refers to an ongoing gender journey that can involve different phases (e.g., social, legal, medical) at various points in time. For example, a transgender individual might choose to have a legal name change prior to or without medical changes like hormone replacement therapy or surgery. The focus on transgender adults working in a frontline occupation was chosen because they will have more frequent and varied in-person professional interactions. Participants of the semi-structured interviews worked in education, healthcare, and customer services.

Management of confidential information is detailed in Appendix B.

1.4 Guiding Principles

From its inception, this project has been guided by two principles suggested by Tebbe & Budge (2016, p. 1004) for a research process regarding transgender communities: Collaboration and Knowledge Co-Creation.

1.4.1 Collaboration: Empowerment and Collaborative Equity

The principle of collaboration dictates the use of research methods that center on sharing power, giving voice, and assuring equity in partnership with transgender participants. A question during research design might be: “How could this research be collaborative and empowering to participants and to the communities in which it is being conducted?”

Collaborative research comes with a caveat. It is vulnerable to bringing forward such socially ascribed and achieved identities as “*researcher positionality*,” in which the researcher asserts power, intentionally or not, or lacks critical awareness of power, resulting in devaluing the community voices, and diminishing the potential for ongoing partnerships (Muhammad 2015, p.1059).

I saw this as a particular challenge of this project, especially with the qualitative research, where my roles would include: primary researcher, crafter of interview questions, interviewer, and coder for meanings. To mitigate the risks of positionality, I strove throughout each stage to maintain self-reflections on intersectionality of race, class, gender, and empathy for others’ unique experiences. I wove feminist and post-colonial theory into my reflective

process, as suggested by Muhammad et al. (2015). My awareness of “A Trans Feminist Oral History” provided extra grounding to proceed with research, unlike traditional methods, described by Hill (2008, p.335): “A trans-oriented feminist oral history, in contrast, seeks to represent the ‘non-elite,’ the all too ephemeral experience of a community often erased by most histories, providing an alternative perspective on their experiences.”

I paid special attention to respecting the dignity of all participants throughout the project. This is a foundational principle for ethical research with gender diverse persons that suggests mindfulness to routinely address/acknowledge participants’ pronouns and ensure meaningful interactions throughout the entire research process, including decision making for dissemination of research findings (Henrickson et al., 2020).

1.4.2 Knowledge Co-Creation: Relevance and Ownership

This principle guides the researcher to serve the transgender community being studied by producing knowledge that is relevant to that community, and to consider to whom that knowledge belongs. The research decisions

throughout the process should be concerned with the impact on the transgender individuals and community being studies, and the right of trans communities – that one and perhaps the broader community – to the resulting knowledge. Two questions to assure that this principle guides the research-design process might be: “How do I choose the research question(s),” and “In what ways could the findings of this research impact transgender individuals and communities?”

As a transgender person defining the projects goals, objectives and methods, I built on prior knowledge born of my own lived experiences of workplace well-being. In order to carry out ethical research, I structured the project in ways that erected personal boundaries, heightened objectivity and prioritized the privacy and safety of all participants. I studied the challenges, ethical risks and mitigating methods of transgender-researcher-led projects using the community-based participatory research. (Huezo & Collins, 2019; Travers et al., 2013; Katz-Wise et al., 2019). This awareness helped me navigate certain risks in the research design process and during research and analysis. For instance, I de-identified all written materials from which it was at all possible to identify participants (Martin & Meezan, 2003).

02

Project Methodology

HUMAN-CENTERED DESIGN

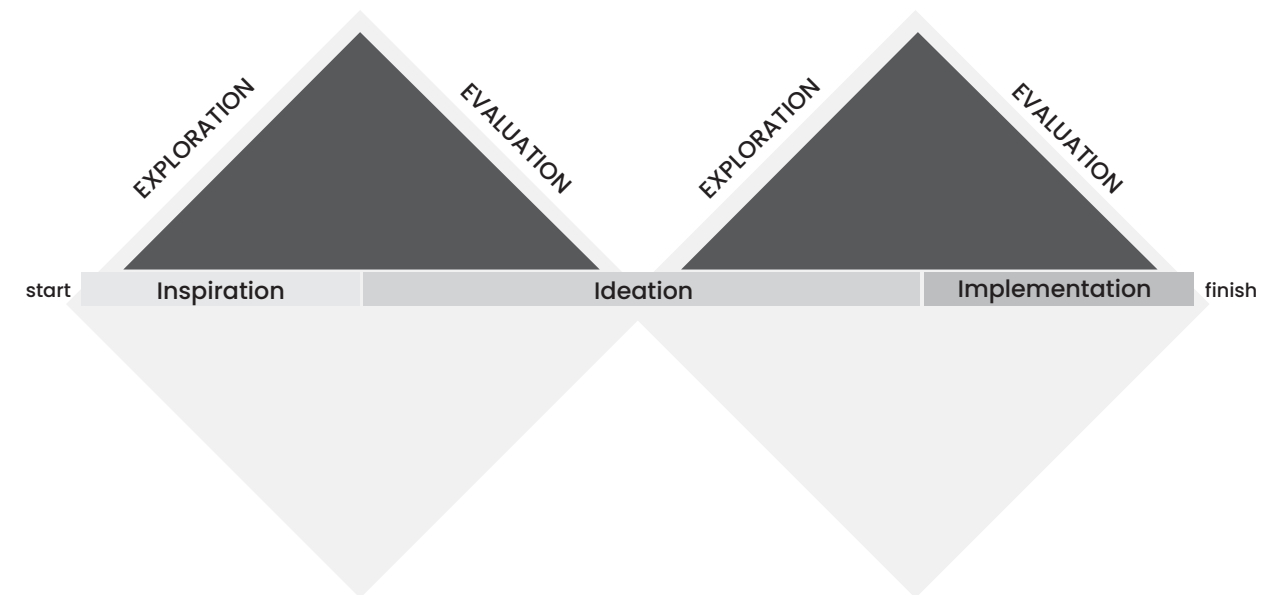


Figure 1. Human-Centered Design phases: inspiration, ideation, implementation. (Adapted from IDEO, 2015)

This project applies design thinking, strategic foresight, and systems thinking into a framework for research-based problem-solving called Human-Centered Design (HCD). HCD begins with inspiration, moves into ideation and closes with implementation (IDEO, 2015). Within the inspiration and ideation phases, the investigator chooses and applies processes of divergence (exploration of information) and convergence (evaluation of information) until a viable, desirable solution

can be articulated, shown in Figure 1. This project dives deeply into the problem of transgender well-being in the workplace using these two HCD phases, and concludes with a solution proposal that, in subsequent work, could be developed using HCD's highly iterative implementation phase: prototyping the solution to several degrees, reexamining, redesigning, putting it into broad use, and studying its effect in solving the problem.

2.1 Inspiration

HCD's INSPIRATION phase is about identifying the problem, articulating the overarching challenge and research questions that motivate the process and shaping the primary and secondary research stages. Inspiration to solve a problem and how to go about solving it grow as the investigator observes and learns from those experiencing the problem and uses primary research methods to dig into their perspectives and gain deeper understanding and context through secondary research.

Primary research methods

I carried out a mixed-methods approach, conducting virtual, semi-structured interviews guided by the Three Horizons technique and launching an anonymous, online, 'Future of Well-Being Survey'. Three individuals volunteered to participate in a single one-on-one virtual interview session and fifteen individuals submitted survey responses. A summary of the participants is available in Appendix C and details of the recruitment strategy in Appendix D.

This study received Research Ethics Board approval at OCAD University (clearance No. 2021-45) and Rainbow Health Ontario promoted this project on their website under Research and Policy from August 24 to September 22 of 2021. Rainbow Health Ontario is a program of Sherbourne Health in Toronto whose purpose is to *create opportunities for the healthcare system to better serve LGBT2SQ communities*.

2.1.1 Three Horizons:

Three Horizons is a relatively simple foresight technique usually practiced in a group setting

to help facilitate dialogue with stakeholders regarding a complex problem (Sharpe et al., 2016). The technique is meant to help participants situate the present moment in relation to the future by encouraging flexible perspectives or mindsets and map different ideas about emergent patterns onto a diagram of 'horizons' (Curry & Hodgson, 2008; Sharpe et al., 2016).

I adapted the five steps involved in the practice of Three Horizons outlined by Sharpe et al. (2016), summarized in Appendix E. This provided a template for facilitating conversations with transgender participants about future well-being in the workplace. A sample of the interview guide is available in Appendix F.

2.1.2 Future of Well-Being Survey:

I COPPE Scale is a valid tool for assessing multidimensional well-being (Prilleltensky et al., 2015). It measures perceived well-being in six domains of one's life: Interpersonal, Community, Occupational, Physical, Psychological, Economic, plus a rating for overall wellness (Prilleltensky et al., 2015). This tool was used for the Future of Well-Being Survey to capture perceptions of multidimensional well-being relative to the past, present, and future. In doing so, the online survey retained good alignment with semi-structured interviews framed by Three Horizons model that looks at a similar timeline of the present and future. The general layout and language of the original I COPPE Scale was modified to broaden the scope of timelines and to make it more user friendly for this research project. Specific details about these modifications have been outlined in Appendix G.

Why a mixed-methods approach? The "methods for progress require creative reasoning and mixed-methods research" (Jones, 2013, p. 271). By combining qualitative (interview) and semi-qualitative (survey) data, I was hoping to be able to explore a greater breadth of information, gathered from a broad community of transgender and gender non-conforming individuals.

The interviews focused on transgender individuals working in frontline occupations. The online survey was designed to capture information about well-being from a broader group of transgender and gender non-conforming participants, working in an array of workplace and educational settings. I wanted the sample to be highly inclusive to make the exploration of experiences and perspectives about workplace well-being robustly representative. While interviews and survey opportunities were made available internationally, in the end, all participants came from Canada or the United States.

Secondary research

A review of literature helped me to identify and articulate elements of the problem and its contexts. For real-world exposure to the problem beyond my own experiences, I monitored social media discussions of transgender people at work. On Twitter, for instance, I read tweets by academics, doctors, advocates, artists, and other professionals who identified as transgender that described specific, identity-related issues and encounters within their workplaces. This work helped me start framing the investigation.

2.1.3 Exploring the Concept of Well-Being

My exploration of the concept of well-being is

focused on sensemaking of the term. The exploration is required as research is limited on the concept of well-being for transgender individuals and with the understanding that knowledge is a construct of the dominant systems of our time and in acknowledging this, I the author of this study will focus on sensemaking of the concept of well-being in this section.

The concept of well-being, on its own, has not been clearly defined in the literature but rather described in terms of qualities, constructs, or dimensions. Well-being is an individual and an organizational quality (Cherkowski et al., 2021) and connected to the social dimension (Lopez-Martin & Topa, 2019). Social connectedness and belonging are both considered critical to enhancing well-being (Ang et al., 2017; Bernstein et al., 2019). Belonging in a workplace means "feeling seen for your unique contributions, connected to your coworkers, supported in your daily work and career development, and proud of your organization's values and purpose" (Kennedy, 2021, p. 47). People and places are two themes which are central dimensions of well-being. 'People' require three different levels of comfort in their workplace environment: physical, functional, and psychological comfort (Myerson, 2014). Laws that protect against discrimination based on sexual orientation and gender identity have been found to be a main priority for well-being among transgender and gender non-conforming individuals (Martinez-Velez et al., 2019). However, gaps in knowledge exist at the level of organizational management and human resources regarding transgender rights when it comes to transitioning at work and protection of transgender employees and their job security (Van de Cauter et al., 2021):

The majority of employers and employees found the legislation of different countries (Europe, US, UK, AUS) insufficient as a backbone for adequate policies, impractical to implement, or not all-inclusive. Experts on transgender rights, advocacy, and support groups can be leaned on for legal guidance and also for the education and support of managers. (p.29)

Well-being has been viewed as a shared concept across all human boundaries while its components may vary between people, societies, cultures, and eras (Tallini, 2011).

Clearly, well-being is complex, as explained by Litchfield et al. (2016):

The term “well-being” is imperfect. It has the advantage of being understood intuitively (at least in the English-speaking world) as referring to “how we are doing” as individuals, communities or society but its broad coverage renders simple definition problematic. This is compounded by the different slants taken by those from an economic, health and social science background—all of whom have an interest in the subject—and the trivialisation of the issue in some parts of the media. (p.1065)

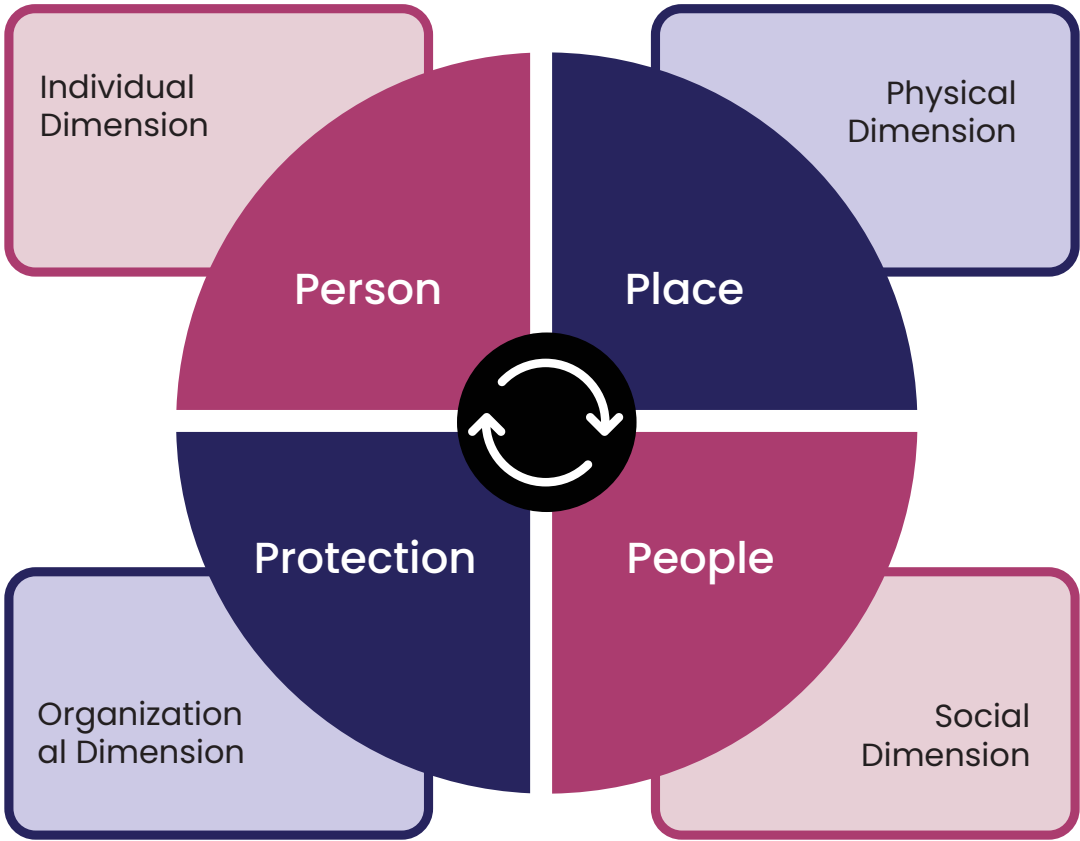


Figure 2. Functional model of multidimensional well-being implemented in this research project.

To summarize current literature on my sensemaking of well-being, I produced a functional model of its multidimensions: individual person, physical workplace, social interactions, and organizational protection (Figure 2). This model was used as a communication tool throughout the research process at three different stages: i) participant recruitment – featured on a background information sheet on well-being for eligible participants prior to scheduled interview; ii) data collection – revisited during interview sessions; and iii) thematic data analysis – used to examine patterns of multidimensional well-being.

Choosing a Future Orientation of Well-Being:

I considered these two key concepts of well-being prior to structuring facilitated conversations with interview participants:

Sustainable well-being refers to “the experience of functioning well, for instance having a sense of engagement and competence, being resilient in the face of setbacks, having good relationships with others, and a sense of belonging and contributing to a community” (Huppert, 2014, p. 1).

Optimal well-being is also known as “flourishing that is considered a multidimensional construct incorporating both hedonic (e.g., positive emotion, life satisfaction, and happiness) and eudemonic (e.g., meaning and purpose, positive relationships, and engagement) aspects of well-being” (Prendergast et al., 2015, p. 1).

The definition for optimal well-being offered a high-level concept and created an entry point to my mixed-methods approach to gathering unique insights about well-being from the transgender and gender non-conforming participants.

2.2 IDEATION

HCD’s IDEATION phase is about making sense of everything learned, generating ideas, and identifying opportunities for design. Convergent visual analysis was performed for semi-qualitative survey data, whereas content and thematic analysis was carried out for the qualitative data from interviews. A future-consciousness map (prototype) was generated from interview insights guided by a foresight model called Three Horizons. Divergent systems thinking led to system dynamics and a retrospective review.

2.2.1 Visual Analysis of Survey (Semi-Qualitative) Data:

For this research study, the I COPPE Scale was incorporated in the **Future of Well-Being Survey** as a series of 5-point Likert scales (Appendix H). The Likert scale is commonly used in social sciences to produce a valid interval level of measurement for psychometric properties like self-reported opinions, preferences, and attitudes (Leung, 2011; Wu & Leung, 2017).

I chose Tableau software as the tool to shape and examine the data captured by a series of Likert scales in the survey design. Tableau (Murray, 2016) is a powerful software platform that enables users to interact with granular data sets, perform quick-iterative analysis, identify patterns, and build data visualizations.

This enabled me to generate visualizations of the survey data in the form of sorted divergent stacked bar graphs and compare overall wellness ratings between two subgroups of survey respondents: four working in a frontline occupation and eleven with other occupations.

This was meant to provide audiences of the report with a graphical representation of results from The Future of Well-Being Survey that was designed (using Qualtrics) to capture a multidimensional assessment of well-being for a broad transgender and gender non-conforming community (Canadian and USA participants). These visuals of the survey data show different patterns for perceptions of well-being in six domains of life pertaining to the past, present and future. The data is sorted (with the help of Tableau) in each data visual showing aggregate percentages for negative, positive, neutral ratings for perceived well-being.

These visual representations of the survey data are displayed throughout this report.

2.2.2 Content Analysis of Interview Data: Using Three Horizons to Draw a Future Consciousness Map

In preparation for content analysis, I fully transcribed all three interview recordings (mp3). Transcripts were imported as text files into Dedoose; a secure web-based application for analyzing qualitative data. Content analysis was chosen to code the transcript material from the facilitated conversations guided by the Three Horizons model. This enabled me to identify what the participants were communicating about present concerns (coded as step 1), envisioning as an ideal future (coded as step

2), pockets of the future (coded as step 3), innovations in play (coded as step 4), and retaining key elements for the desired future (coded as step 5).

A fundamental element of the Three Horizons approach is flexibility to work with three modes of awareness, especially a *third horizon vision* (Sharpe, 2020), shown in Figure 3.

This is the core idea of Three Horizons: to shift our simple, one-dimensional view of time stretching into the future and instead adopt a three-dimensional view in which we are aware of each horizon as a distinct quality of relationship between the future and the present. We call the move into this multi-dimensional view, and the skill to work with it, the step into future consciousness. (p.11)

Content analysis enabled me to capture a Third Horizon (desirable future) vision of optimal well-being in the workplace from a transgender perspective. I illustrated this vision on a Future Consciousness Map, a rough, early solution prototype emerging from the pockets of the future, innovative ideas, and elements of an aspirational future as conveyed by the interview participants.

Typically, the practice of Three Horizons as a futures/strategic foresight technique gets carried out in a group setting and results in a map that depicts all 5-steps of the process. The map in this project illustrates the 3rd Horizon – a desired future; emerging from steps 3 (pockets of the future), 4 (innovations in play), and 2 (visions) of the process. Without full permissions to quote participants verbatim regarding present concerns (step 1)) and features of the present to maintain (step 5), I relied on thematic analysis to work deeply with transcript material by paraphrasing and

extracting meaning regarding transgender well-being in the workplace.

Some data from the transcript material did not fit into the Third Horizon model. Since they recurred repeatedly for all three participants, I additionally coded this material as “recurrent element,” labelled as trans-positive (gender transition, journey) experience at work, frontline component, misgendering, being trans, workplace patterns, or disclosure. Please see Appendix I for the original code structure with descriptions that was generated during content analysis of transcripts.

2.2.3 Thematic Analysis of Interview (Qualitative) Data:

Thematic analysis (TA) is appropriate for analyzing small data-sets: “It can be used to identify patterns within and across data in relation to participants’ lived experience, views and perspectives, and behavior and practices; ‘experiential’ research which seeks to understand what participants’ think, feel, and do.” (Clarke & Braun, 2017, p.297). TA was first popularized within social psychology by Braun & Clarke (2006) and has merit when applied to the field of health and well-being research (Braun & Clarke, 2014).

I followed the phases of thematic analysis suggested by Braun & Clarke (2006), which involved familiarizing myself with transcript data, generating code structures, collating excerpts, and reviewing themes/patterns in relation to the research questions. Doing a content analysis prior to the thematic analysis made the transition smoother, phase to phase, since I had become familiar with the transcripts and original code structure. I chose thematic analysis to go a bit deeper with ‘recurrent elements’ and present concerns

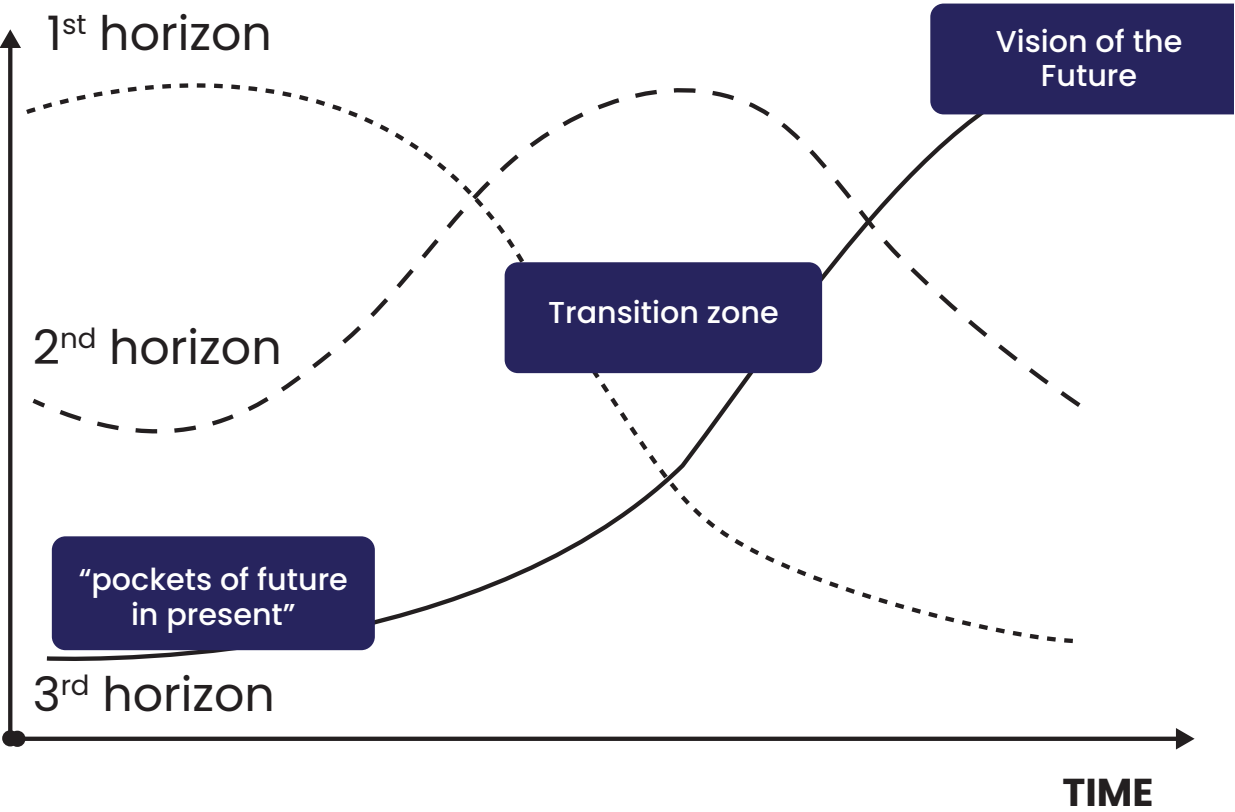


Figure 3. Exploring the third horizon, a desirable future, through transformative dialogue (Sharpe, 2020). Beginning with pockets of the future in the present moment, followed by thinking of alternative paths and innovations in the transition zone, then ending with visions of an ideal future.

(steps 1) and innovative ideas (steps 4) of the Three Horizons model, in search of theme/patterns of well-being in the workplace from a transgender perspective.

I categorized thematic components according to dimensions of well-being using a functional diagram/model (Figure 1) that I created based on my sensemaking of well-being literature. Creating a framework during the ideation phase of a human-centered design project helps organize information, visualize patterns, and articulate segments of data (IDEO, 2015). My categorization process using a four-quadrant model of multidimensional well-being (individual, physical, social, organizational) was not an established or standardized practice, but rather a bespoke analytical tool I used to examine potential patterns and themes on the topic of well-being in the workplace, as extracted from the perspectives and experiences that kept surfacing as a recurrent element or present concern, or in relation to innovative ideas about future well-being. This was a complicated process with many roadblocks, including the ongoing need to check my biases during the analysis. It did serve to help me identify perspectives that pertained to the individual, physical, social, and organizational dimensions of well-being. Also, some perspectives reflected an intersection of two or more well-being dimensions.

2.2.4 System Dynamics:

I chose system archetypes to digest and articulate findings from thematic analysis, specifically two scenarios (macro and micro subsystems). It helped bring to the surface knowledge about the current state of suboptimal well-being in the participants' workplaces.

The system archetypes here highlight current realities of issues and concerns about well-being in the workplace, which the diagrams illustrate. According to my review, this is the first visual illustration in the literature on misgendering and multidimensional well-being in the workplace from a transgender perspective.

2.2.5 Retrospective Literature Review:

Following the primary source research and concurrent with articulating relevant system archetypes, I conducted a second review of literature, this time focusing on transgender history, gender constructs and rigid ideologies. I needed to grasp more context for the question of workplace well-being. While a motivation to achieve greater well-being in the future shaped my first research exploration, after primary source data analysis, I focused my lens on contextual understanding. What conditions, circumstances and previous experiences contribute to these participants' experiences and perspectives about well-being in the workplace? I reviewed literature on misgendering, microaggressions, pathologizing transgender identities, and so on. The retrospective review elucidated the systemic depth of this problem.

Some gleanings from this literature review are cited in the system archetypes section, to substantiate my interpretation of the transcript materials. Resources from this review that were not directly applicable in the narrow scope of this project, yet seemed important, appear in the Retrospective Review section, so that they may provide context for those conducting subsequent studies of and

problem-solving toward better well-being within the transgender and gender non-conforming community.

2.3 IMPLEMENTATION

HCD's IMPLEMENTATION phase is about bringing a solution to life, piloting an idea, and assessing if a solution is working.

I was now at a point of recapping primary and secondary research findings and ready to communicate a concrete answer to my research question and challenge to my design problem: How might we design a future that supports optimal well-being of transgender people in the workplace?

Due to time and resource constraints, this project concludes at the start of the HCD Implementation phase. I lay out a proposal to prototype a learning process. In taking a sustainability approach to future well-being, I discuss the design criteria and suggest key resources to harness for future implementation.

I adapted the Learning Process by Hjorth & Bagheri (2006) to frame a strategic pathway to future well-being, which involves transgender- cultural competency and positive leadership for well-being. These design criteria could potentially lead to creating a significant impact: a sustainable

desirable, viable, feasible design solution to bring about future optimal well-being of transgender people in the workplace.

My intention with applying the learning process in a sustainability approach linked back to the idea of transformation; solutioning for complexity and uncertainty. My affinity for applying HCD approach to this project included its similar element of transformation, which often challenges the status quo (O'Brien, 2012) and the focus on awareness of future potential in the present moment (Sharpe et al., 2016). During Implementation, I was able to leverage the relationship between Three Horizons and *future consciousness* into action-oriented transformation (Sharpe, 2020):

Future consciousness is an awareness of the future potential in the present moment. Three horizons provides a notation and framework for the collective practice of future consciousness for transformative innovation in a simple way – it brings all the perspectives and voices into the room with the potential for constructive dialogue. (p.27)

The learning process highlights the importance of transgender cultural competency and positive leadership within the workplace setting. It provides a launching pad (encouragement) to 'harness resources' on transgender cultural competency which are freely available through Rainbow Health Ontario (online).

03

Facilitated
Conversations

3.1 Exploring the 3rd Horizon: Mapping a future consciousness of well-being from a transgender perspective

This section summarizes insights from facilitated conversations with transgender adults working in a frontline occupation, illuminating a collective third horizon vision of the future. Though illustrating only the third horizon, a key step in formulating it was to identify pockets of the future in the present, follow how the transitional zone bridges between the present and a longer future, and finally, to find how third horizon pattern emerges from the second horizon (Sharpe et al., 2016).

3.1.1 Third Horizon: Pockets of the Future in the Present

Pockets are found by looking at existing practices, from which to build hope and encouragement about future potential. This section identifies pockets of the future in the present gathered from interview participants in discussion about positive signs of supporting transgender well-being in the workplace. Participants were asked to reflect on shifting views, alternatives, values, and better responses related to well-being in the workplace.

Three main pockets or hopeful signs of future well-being in the workplace from a transgender perspective, were identified as the following: 1) transgender visibility through disclosure and accessing preferred spaces that feel comfortable; 2) practices of diversity and gender identity inclusion through communication of pronouns; and 3) opportunities for transgender employees to talk with others openly about gender identity in the workplace.

POCKET #1 TRANSGENDER
VISIBILITY IN THE WORKPLACE

Coming out as transgender to employers and colleagues and being able to access preferred (or safe) spaces at work were considered by the interviewees to be positive indicators of transgender visibility that supported and enable well-being in the workplace.

COMING OUT AS TRANSGENDER AT WORK:

Each participant of the semi-structured interviews shared a positive experience of “coming out,” disclosing their transgender identity in their workplace. Encouraging responses from cisgender people in the workplace surfaced as positive signs to visibility.

For transgender people, to pass is to live authentically (Harrison, 2012). The participant working in the customer service sector shared the positive experience of “passing” in the workplace:

My transition is pretty new. I started in April [2021] and I’m passing. For me it’s been surprising because it was strange in the beginning. I didn’t know I would pass. People call me ‘sir’ ‘oh sir’ and I didn’t have a mastectomy yet. So it’s just interesting. And I still use the women’s bathroom. I don’t go to the men’s one because the women’s one has more space and the men’s not that much.

– Assistant Manager, Customer Service

In the hospital setting, a participant described a positive experience of coming out in the workplace by purposely placing their pronouns

in the staff locker room and immediately identifying as transgender directly to a clinical supervisor, hoping this message would be relayed to other coworkers on the healthcare team:

I did get some positive feedback on it with some of my coworkers at work. Some of them were like ‘oh that was a really smart idea of putting your pronoun underneath your name in the locker room’...it even got to the point where I heard her (cis coworker) using my pronouns to a patient and the patient was like ‘oh I didn’t know they were trans, I’ve been misgendering them, and I have a colleague whose trans’ ...so there is some exposure with regards to trans identity.

– Healthcare Professional, Hospital

Levitt & Ippolito (2014), interviewed transgender participants about stressors of being out as trans and found it was a necessity for the majority of them to balance the values of authentic self-expressions and safety in the workplace. Disclosure, support from managers and coworkers, and a transition plan with work accommodations are important contributors to positive return-to-work experiences for transgender people (Van de Cauter, 2021).

During one of the interviews, a participant described several elements that may have contributed to experiencing transgender visibility in the workplace:

I would characterize my experience overall as positive. I feel like I was very supported by the school board. They took me very seriously, they changed my name on pretty much everything, even before I had a legal name

change, which I do have now. At no point did I feel there was discomfort and at no point did I feel they weren’t taking me seriously or they were treating this like a burden or an inconvenience. So I feel like I had a really positive experience. I definitely have had challenges, but I feel very grateful that I work in a public education sector where, you know, we’re required by law to support trans people.

– Teacher, School Board

One participant, an assistant manager of a commercial retail store, described a sense of relief after coming out about their gender transition in the workplace. This participant also verbalized appreciation for diversity at the company:

To be honest with you, I was anxious because I didn’t know how it was going to be. ...To my surprise, everybody was super cool about it. Respectful. They [coworkers] would say ‘oh you know, I’m going to make mistakes’ and it’s totally fine. I was surprised that I was anxious and then everything was okay. It’s good. So I don’t have any problems at work. [This] company is inclusive in that sense. We have LGBT, we even have diversity in terms of race too.

– Assistant manager, Customer Service

ACCESSING PREFERRED SPACES:

The extent to which a workplace, by policy or through social pressures, dictates a use of gendered spaces such as washrooms and locker rooms is relevant to a transgender person’s workplace well-being. Studies have highlighted the messaging transgender employees take from being pressured or

regulated into using the facilities of the gender they have transitioned away from. “Specific spaces act as a means of policing individuals into gender ‘appropriate’ behaviors based upon preconceived societal norms and expectations” (Davies et. al., 2019, p.872). Gendered public spaces, like segregated toileting facilities, was found to represent “a significant impediment to how trans people structured their lives, moved through their days, interacted with others, and envisioned their futures” (McGuire et al., 2021, p. 17). Conversely, workplace acceptance of a transgender person’s use of facilities that currently suit their needs and the presence of ungendered facilities would signal inclusion and acceptance of diversity.

The assistant manager of a commercial retail store described their positive coming out experience in terms of accessing a preferred washroom where gender-neutral facilities are not available:

I spoke with my HR [Human Resources] and said ‘listen, I feel more comfortable using the women’s washroom’ and she said ‘by all means, yes’ ...because I told her that I’m ‘non-binary’ ...and the female associates...they know that I’m trans and they are okay with that, so I go to that washroom. It’s not a big deal.

– Assistant manager, Customer Service

The healthcare professional mentioned a benefit to accessing a gender-neutral locker room in the hospital:

I think that neutral space does kind of alleviate my anxiety in that sense instead of a girls’ locker room, a guys’ locker room.

– Healthcare Professional, Hospital



Specific spaces act as a means of policing individuals into gender ‘appropriate’ behaviors based upon preconceived societal norms and expectations”

— Davies et. al., 2019, p.872

POCKET #2 CURRENT PRACTICES OF DIVERSITY AND GENDER IDENTITY INCLUSION

All three participants repeatedly talked about communicating pronouns at work was, suggesting that such a small and consistent effort made by others – and logically, the lack thereof – can make a big difference to the well-being experiences of transgender people in the workplace.

One participant found hope in newly introduced staff training on gender diversity, and attributed this to increased awareness of pronouns in the workplace:

They just included that [staff training] to explain ‘what is gender diversity’ ...it’s not just binary like male and female, but is a spectrum and people can navigate in this spectrum and they can be diverse. So it’s really interesting that they created a training, so when you’re new to the company you have to go through a bunch of training and this [Gender Diversity] is one of them. This is something really interesting. And then of course, doing the training you’ll learn. One thing that I noticed, because I came out as transgender, I noticed that they paid more attention to the pronouns. How they’re going to address ...they’re asking other people about their pronouns. This didn’t happen before. Even I wrote on my apron “he and they” ...so they look at my apron and then they know how to react, right.

– Assistant Manager, Customer Service

In the healthcare setting, the participant found encouraging practices of transgender inclusion during new employee training at the hospital:

I remember during training there were at least two examples with transgender patients. That’s a step forward.

– Healthcare Professional, Hospital

And at a later point in the interview:

I thought seeing examples of inclusion in the on-board training made me optimistic to this healthcare place as well too.

– Healthcare Professional, Hospital

The teacher described an experience in which a manager showed support in using pronoun pins and the ripple effect this had in the workplace:

I introduced pronoun pins to my particular school. I started wearing one and my manager liked it enough that she ordered a bunch for the staff to voluntarily wear, if they so choose. If I recall correctly, that prompted her to put her pronouns in her email signature as well. So I felt this was before I came out or even really thought I was trans and it was just nice to kind of see that.... You know once I realized I was trans and started thinking about coming out in the workplace, I had this clear and present indication that I was going to be accepted and that it wasn’t going to be an uphill struggle, because I already knew that my colleagues were supportive of these things.

– Teacher, School Board

Discussing future well-being of transgender people in the workplace in our interview, the assistant manager touched on the use of pronouns and described encouraging signs of improvement and openness,

incorporating pronouns on their email signature, on their apron, and when we're doing a video conference...So they are improving, right...how can I put that ...open! Open to ideas and to make everyone comfortable regarding transition or gender diversity.

– Assistant Manager, Customer Service

This participant later shared a good reason for using pronouns during virtual workplace interactions:

The other thing that I think is going to take time...in conference calls or meetings in general...because now with the conference call you can reach a big number of people and this is important...from my point of view. You use the pronoun, then you're seeing them [trans person] and you're not assuming that someone is a he or she...[they] could be in between.

– Assistant Manager, Customer Service

POCKET #3 TALKING OPENLY AS A TRANS PERSON ABOUT GENDER IDENTITY

Interview participants found encouragement of future well-being in the workplace through the prospect of talking openly with others about gender identity.

The assistant manager in the customer services sector mentioned looking forward to being a representative on a new diversity, equity, and inclusion committee:

So I find it pretty cool, you know for me to be able to represent and come with ideas. So basically, this committee is like 'how can we make it [workplace] better?' Right, especially you know for the cisgender. How they [cisgender person] can understand different generations, how can we make this better? So it's not a barrier and makes me feel really good...respected in the workplace.

– Assistant Manager, Customer Service

The teacher of a School Board explained the positive signs of talking to high school students, and of society at large becoming more aware of transgender people.

Honestly, I've had a pretty positive experience, especially when it comes to just being out and trans in my city. I haven't faced a lot of overt or direct transphobia other than the misgendering, so I feel like the arc of progress is definitely in our direction here and I'm just really encouraged, especially when I have the opportunity to talk to high school students and their parents. Seeing younger people talk more openly about their gender and sexual identities ... is very encouraging to me, because I'm like, 'This isn't rare anymore.' You know? I am not a rarity. This is ... it makes me feel a bit more normative.

– Teacher, School Board



Transgender voices are caught in a vicious circle. When voices are unheard, they are likely to become silenced and marginalized. When voices become silenced and marginalized, they go unheard."

—Beauregard et al., 2016, p. 870



3.1.2 Transition Zone: Innovations in Play

This section explores insights gathered from facilitated conversations pertaining to the second of three horizons, which is considered a “realm of transition” between the first horizon (present concerns) and the third horizon, an aspirational future (Sharpe et al., 2016, p. 51).

I asked participants to share present concerns about well-being in the workplace (called pain points in this section) and ideas about opportunities, resources or supports to address them. Participants exercised an entrepreneurial mindset by suggesting strategic pathways for

overcoming pain points towards achieving well-being in the workplace, what Sharpe et al. (2016) refer to as innovations in play, which may address present concerns or provide a new space for emergence of transformative action. Some insights conveyed foresight of the trade-offs or clash of values, which signal competing alternative paths to future optimal well-being in the workplace.

Pain points might result from gaps in knowledge about what it means to live with a transgender identity or result when the worldview of a cisgender person or group denies transgender rights the status of human rights. This participant contextualizes a positive experience in contrast

to transphobic “backlash” they sometimes experienced:

My school board not just raised the pride flag, they raised the transgender pride flag at their board office this year. It’s understandable that people might be skeptical or cynical of those kinds of gestures because they are symbolic and can be tokenistic and don’t necessarily indicate real change. But I have to admit, as a trans employee of my school board, it really made me feel good to see my identity validated in that way, so publicly. Because as I said earlier there has been this backlash in the last few years, as trans people become more visible in our media, in our society, there are

definitely the voice of transphobic people louder sometimes than they actually are, and so it’s nice to see that my employer is so loudly saying we acknowledge trans people exist and they are welcome here. That does mean a lot to me even if there are imperfections in how that support actually is achieved on a day-to-day basis. It means a lot that that statement is being so boldly made when there’s a lot of pressure from these vocal transphobic people in groups, to not even make those statements in the first place. – Teacher, School Board

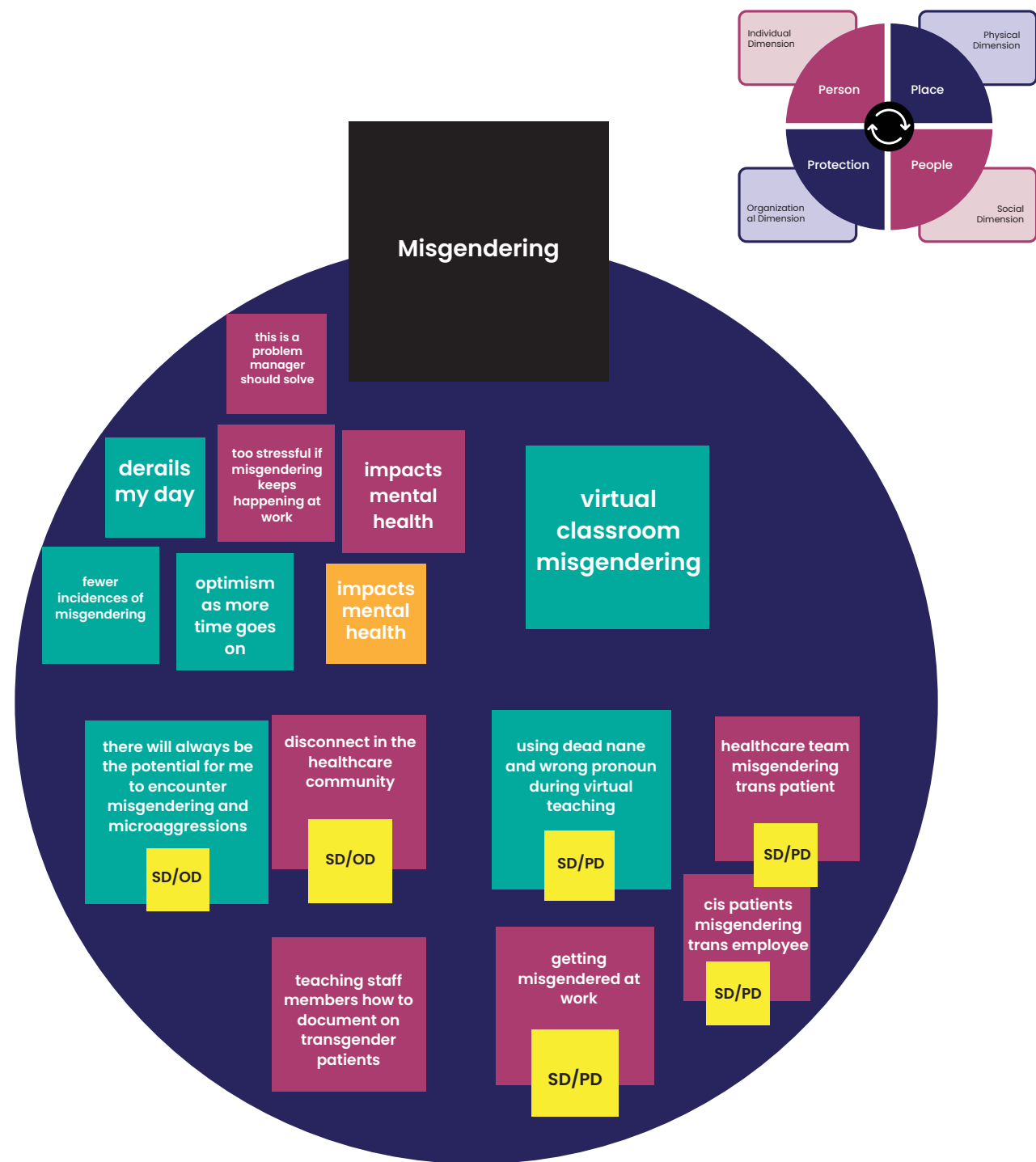


Figure 4. Perspectives gathered from transcript material relating to experiences of misgendering in the workplace. Categorized according to the dimensions of well-being. Some perspectives related to more than one dimension of well-being.

The pain points, gathered from interviews, fall into the broad categories of **misgendering**, **microaggressions**, the risks (perceived and real) of **disclosing and planning for gender transition** in the workplace, and use of **gendered facilities**. These are covered in the next section and accompanied by suggested opportunities or strategic pathway(s) to support future well-being in the workplace.

PAIN POINT: Gaps in knowledge about what it means to live with a trans identity leading to increased vulnerability to misgendering and microaggressions on the frontline.

Key perspectives gathered from interview participants regarding misgendering in the workplace seemed to reflect the individual, physical, social, and organization dimensions of well-being (Figure 4). For example, one participant shared an experience of being misgendered:

I've been in a couple of situations recently where I was a co-teacher in a virtual classroom, so there'd be 2 teachers, and the other teacher would use my dead name or use the wrong pronouns for me ...I'm more than a year into my transition...it's really annoying. I think a lot of it has to do with my voice as well because that's the predominant indicator that people have when were online. So that didn't help.

- Teacher, School Board

One participant touched on questioning of gender identity that occurs in the workplace:

Cis people have curiosities, and they ask invasive questions. Again, impact intention...I know that your intention isn't to hurt but your impact...the consequences to what you're saying. So I think there's bridging the gap in that sense. – Healthcare Professional, Hospital

The healthcare professional drew a few examples of how team members misgender transgender patients in the hospital, which reflects how knowledgeable health professionals (this person's colleagues) in the workplace viewed misgendering or the well-being of transgender people in general.

The participant described an electronic patient charting system that enables clinicians to indicate pronouns used by patients. Despite this, the participant recalled an incident where the healthcare team was misgendering a transgender patient:

So even if the structures are there for identifying trans patients I feel there's still a disconnect even in the healthcare community. Notes could've been clearer..., [for example, a] transgender patient with history of you know whatever. It's the language in their note. So I think there could still be some teaching there with how to document on transgender patients.

- Healthcare Professional, Hospital

This participant also shared a 'triggering' situation of reading doctor's notes that clearly misgendered the trans patient:

I would hate for myself to be misgendered or to have this sort of confusion within my healthcare team if that's the case because I'm trans...I would hate for that to not get translated if I was a patient, a trans patient.

- Healthcare Professional, Hospital



Language is power, and with the simple act of affirming a transgender person's experienced gender identity and adhering to their appropriate pronouns, they can create more positive experiences for this community."

— Delaney & McCann, 2020, p.72

OPPORTUNITIES: Safety for gender identity expression in the workplace through trans-focused education and practical guidelines for communicating with trans employees.

A literature review by Sundus et al. (2021, p.1046) found important "prerequisites to the delivery of ethical and culturally competent care by healthcare professionals for transgender patients," which included: a) "sensitivity training, understanding about transgender stigma and stereotypes, approaches to affirmative care and therapeutic relationship building" 2) "Self-awareness was described as an essential attribute of care professionals... was considered to have a significant impact on transgender care... unconscious personal biases should be identified and managed deliberately through self-awareness and reflective practice."

Kellett & Fitton (2017, p.4) argued that promoting "culture safety" for transgender people must go beyond simply teaching inclusion, and reasonably advocated for "structural and curricular changes that promote safety for transgender individuals and acknowledge and reflect gender diversity" in the healthcare setting.

In an interpersonal context, the lack of transgender awareness can reduce the quality of social relationships that transgender people strive to experience. Levitt & Ippolito (2014, p. 58) found that openly being transgender posed several challenges to finding employment and companionship for a group of transgender adults: "When their transgender status did become known, others often viewed participants with great curiosity or contempt, forgetting that they were multifaceted human beings."

Strategic pathways conveyed by interview participants for bridging gaps in knowledge about transgender identities and achieving well-being in the workplace:

STRATEGIC PATHWAY #1: Enabling trans-positive workplace culture with sensitivity education and communication training.

To enhance the interpersonal working relationships between transgender employees and their colleagues, workplaces can benefit from workplace communication training regarding respectful etiquette on addressing gender-identity expression and diversity. The training would include general guidelines on what to ask, what not to ask, how to ask, and how to correct. An interview participant described this as "101 ally training":

101 on how to be a cis-ally to LGBTQ folks: For example, this is how you use they/them pronouns in a sentence. Break it down so that way at least in the cis (persons) mind there is a way that to help bridge the gap.

– Healthcare Professional, Hospital

The training should serve to reduce ambiguity and misunderstanding, and replace them with greater clarity, confidence, and opportunities for informed, respectful communication.

STRATEGIC PATHWAY #2: Embracing a workplace culture that supports overall trans-awareness and well-being.

Mandatory professional development and education to support a trans-positive workspace provides a foundation for all to have a basic understanding about the human rights concerns and complexity of a gender transition journey. Its usefulness as an opportunity for bridging gaps in knowledge, with organizational infrastructure in mind, was articulated by an interview participant:

More professional development and education for colleagues, I think, would be useful, including support staff like administrative staff and secretaries and custodians and stuff. I think sometimes we forget them or they'll just like 'let's just give the teacher education'... because, as you know, trans people should not be expected to educate people about ourselves. Because I am an educator, that's kind of second nature to me, and maybe I do it even when I shouldn't, just because it's instant. I would say I generally have a pretty good, progressive set of colleagues who've got my back, but a lot of them are older or just not as aware of transgender issues. Other than having more trans colleagues, it would just be nice to have people who already know about this stuff, who are learning about this stuff without me having to say it. So that it's not on me to kind of point out why something I just experienced was a microaggression, or why I'm struggling today with something. Having that awareness would be very helpful, from the part of my colleagues.

– Teacher, School Board

Educating others increases understanding and unites everyone around well-being in the workplace. One individual expressed the importance of teaching others about transgender identities with greater awareness of the vulnerabilities and difficulties of the transgender experience. They explained that if cisgender colleagues are engaged in the conversation, and knowledgeable more as insiders than outsiders, then the prospect opens up for moving more smoothly through the identified pain point. Allowing colleagues (or cis counterparts) access to knowledge about what it means to be a transgender person negates the vulnerability for each party:

Because then if you teach people, if they know about it then you have their buy-in, and then if they feel they have your buy-in, it's easier for us to request something because you have more people say, "Oh yes, I agree, like that makes sense." So when you have the buy-in of others in your cause, let's put it this way, it's stronger, and for that you need to teach people, you have to explain to them. Maybe we have people at the [company] that don't even know that they're nonbinary; they feel that the whole time! ...Education is the key. Education, respect, empathy.

– Assistant Manager, Customer Service

There is strong potential for tensions to surface in a workplace where people hold a worldview that does deny transgender rights the value of human rights.

I think a lot about my students and how a couple of years ago, I had a student who was very vocal about how she didn't get, or want to respect, people who use various different pronouns She talked about how she was a big fan of Jordan Peterson ..., and she was very

outspoken about that. I haven't encountered a student yet who has intentionally misgendered me or expressed discomfort with having a trans teacher... I could definitely see a situation where a student says, "Well, I don't want a trans teacher," or is misgendering me and I know that there's recourse, there are alternatives to make sure that the student still receives the education they need, without me having to deal with that. But the more I'm accepted and supported in my workplace, the more potential there is for conflict as people who have bigoted views and transphobic views demand education and because I work in public education, that's a right. Everybody has a right to be educated, but everybody has a right to a safe workplace, and there are definitely potentials for those two rights to experience friction. That's where my administration would have to step in and come up with some solutions for that.

– Teacher, School Board

PAIN POINT: Disclosing and planning for gender transition

Transitioning during one's tenure at a current workplace can involve several steps for a transgender individual, along with many perceived and real risks, such as job loss and socially exclusionary behaviors.

One potentially difficult element of accommodation needed is transition-related medical leave. A supportive transition plan requires "work adjustments such as allowing one to work in another job capacity, location or from home during transition, flexible working hours, alternative performance standards like lighter work duties" following surgery (Van de Caeter et al., 2021, p.30).

One participant articulated their sense of gravity and urgency in finding answers to planning for a medical transition while at a workplace:

I think the one thing I found most apprehensive about coming out at the workplace was that there were no clear, documented policies about how the school board would handle this. The only mention of transgender students were gender identity in my school board's policies and procedures. [It] is just a very vague and general direction of "we respect everybody's gender identity and we accommodate everyone's gender identity." That's reassuring, but it's mostly talking about students. There was nothing like "Here's what we do if we have a trans employee." So it wasn't that I was worried that I wouldn't be treated well by the school board...I was pretty certain I would be. But it would have been nice to have concrete policy documents.

– Teacher, School Board

Maybe just one other thing, just a very general thing, as I think more about my medical transition and I think about the possibility of getting gender confirmation surgery. I am aware that I have the ability to take sufficient leave time for the recovery from such surgery. But just in general, the process for how I do that could probably be clearer. It's not a trans specific issue, but just in terms of my well-being, that's something I'm stressing out about right now. ...Once I know that I've got a date for surgery and stuff, what things do I have to put in motion? Who do I talk to at the school board? It would just be nice if all of that was just laid out a little bit more clearly to take some of that pressure off of me.

– Teacher, School Board

If I could tell people how can you improve and be more supportive for your trans employees, it's make sure you have these clear policies so that your employees are not dependant on the individual awareness and skillset of their supervisors. Make sure there's documentation that they can fall back to, no matter who they are. – Teacher, School Board

STRATEGIC PATHWAY #3: Equitable practices for supporting transitioning employees

Inclusion of transgender employees includes valuing their transition-related treatments, surgeries, and recovery as legitimate medical needs. "Genuine engagement on the part of management and Human Resources" is required to develop and implement policies and practices supporting gender transitioning in the workplace (Van de Cauter et al., 2021, p. 27).

PAIN POINT: Lack of access to a gender-appropriate or gender-neutral washroom

Transgender and gender non-conforming individuals come up against several barriers when using gender-segregated toilet facilities in public spaces and public schools (Davies et al., 2019; McGuire et al., 2021). The concerns, and risks, can be true in the workplace.

Use of such facilities as washrooms and locker rooms appropriate to a person's current or chosen gender, especially when that differs from the gendered label of the facility, can directly impact the safety and well-being of transgender people (McGuire et al., 2021). A transgender person can experience ongoing anxiety regarding tending to their private hygiene needs in the workplace, and may face

risks such as microaggressions, and even violence, by colleagues.

One interview participant described using an available washroom at work in which they feel safe and comfortable. Nonetheless, the person spoke of needing to navigate the intricacies of toileting.

I feel comfortable going to the women's washroom. The whole workplace knows that I'm transitioning and using the women's washroom because I'm comfortable with that. But the customers don't know, so when I'm there and then I have a customer, I feel bad for the customer ...They say, "Oh, my god I'm in the wrong washroom." I say, "No you're not, everything is okay." Many times, when I saw there was another lady that entered, I left and was waiting...I don't want to embarrass people or them to get embarrassed because of that. So this is one thing.

– Assistant Manager, Customer Service

STRATEGIC PATHWAY #4: Building accessible gender-neutral facilities in all workplaces

The risk and anxiety presented to a transgender person regarding gendered washrooms and locker rooms can be obviated by taking a gender-inclusive approach (McGuire et al., 2021).

The most important thing is the washroom. If there was a 3rd option, let's say a family washroom, so that a mom with a baby or a father with a baby, or a disabled person [can access it]...like a neutral washroom...if you feel that, like you are nonbinary and then you don't want to go to the men's washroom or females' washroom, you have an option to go in that

[neutral] one. And then you feel safe. You're not going to feel uncomfortable, like you're going into a washroom that you don't relate.

– Assistant Manager, Customer Service

Though the solution seems simple, when renovations or building of additional facilities are required, it becomes less so. Funding the creation of accessible gender-neutral facilities in the workplace would need to be budgeted and justified as a management priority.

The setback comes from the shareholders, because to add another washroom in every [company] in Canada ...you have to do renovations that cost money. You're not only going to do one store because you know that store you have a transgender [employee], because people can be transferred [to another store]. So the set back is ...capitalism and the shareholders ...they are not going to choose the well-being of the person...it's a corporation. Although there's policies and then effort and training, and there's truly an effort to make everyone comfortable not only trans but like nonbinary and gender non-conforming. But the setback it will be that it's not that important for those who are at the top.

– Assistant Manager, Customer Service



3.1.3 Envisioning an Ideal Future

Interview participants were able to look ahead to the future and share innovative ways to support well-being in the workplace from a transgender perspective. Bry et al. (2018) found that future-oriented optimism was an asset to resilience. Resilience, the ability to “withstand or recover quickly from difficult conditions” is linked to employee well-being and performance in the workplace (Robertson et al., 2015, p. 534). The exercise of linking an optimistic vision of future workplace well-being for transgender individuals to the pockets of that future vision in the present might itself have opened up the transitional zone (Second Horizon) for the participants.

Resilience is the process of positive adaptation to significant threats to well-being...resilience as a process is best described by a systems perspective as it relies on the availability, accessibility, and strategic use of resources (e.g., familial, community, individual) that foster well-being, as well as the capacity of the individual’s environment to change in a way that meets the person’s needs. (p. 1436)

Exploring a new landscape of optimal well-being in the workplace during facilitated conversations with the interview participants, I asked the following questions: What does your ideal future of well-being as a transgender person in the workplace look like? Can you share some ideas about potential supports or resources that could contribute to this ideal future or this vision that you have? Can you talk about any organization training or learning or policy development that signals some sort of action towards the ideal future of your well-being as a transgender person in the workplace?

Visions, aspirations, and possibilities for the reality of future well-being in the workplace emerged from these conversations. In summary, participants envisioned a future that includes *empathy, adaptation, and connection*.

VISION FOR EMPATHY

What does empathy mean? The following definition of choice is from the persuasive essay by Calloway-Thomas (2018) on the interplay of empathy, goodwill, and other-regarding behaviors towards an existence of community that is based on inclusivity, peace, respect, and universal human values:

By empathy, I mean the ability, “imaginatively,” to enter into and participate in the world of the cultural other cognitively, affectively, and behaviorally--what we think, what we feel and what we do. The phrase “imagining the feelings of others,” means that we understand the behavior of others better when we are able to enter their world and “see it” through their eyes. (p. 2)

Linked to the social dimension of well-being, empathy enables “the valuable state of transparent fellow-feeling” that entails knowing how another feels (Smith, 2017, p.721).

In discussion about experiencing future well-being, one participant articulated the importance of empathy as it relates to safety and satisfaction in the workplace:



Without empathy, social justice ceases to exist.”

— Gonzales, 2020, p. 15

I mentioned lots of respect because I think this is something that is really important in human relations that we lost. In the world we live [in] right now, everybody’s very individualistic, they don’t think about each other, so there is no empathy.... If you want to make a better world, make a better workplace – that everybody is safe, and happy working. You need to put yourself in the other’s shoes and as you expect, you have to respect the other. Asking the [person’s] pronoun makes the other feel included...comfortable.... [It] is the key.”

– Assistant Manager, Customer Service

The teacher touched on the presence of empathy in relation to an interaction between social and personal dimensions of future well-being in the workplace:

The ideal future is one in which it doesn’t feel we, as trans people, constantly have to assert our existence and ... not necessarily even fight for our rights or our recognition ... but even just remind people of it. I feel like I’m very accepted by my colleagues, but sometimes because maybe they’ve never really had a trans colleague or whatever, they don’t really understand necessarily what I’m going through or my struggles. Especially, as a very newly out trans person, right? This is a new experience, an aspect of my identity that I’m still working through and processing, so I think, in terms of that personal dimension, part of my ideal future is me being comfortable enough with my trans identity that it feels as fully integrated into my personality as the other aspects of my identity.

– Teacher, School Board

This participant additionally wished for a proactive cultivation of empathetic workplace practices to increase sensitivity and support for transgender members of the school community:

It just be nice for my workplace to be more proactive in supporting people who experience ... marginalized identities rather than having us come to them and say, “This is an issue, this is something that should be addressed.”

– Teacher, School Board

Another participant envisioned greater workplace sensitivity about transgender identities and elaborated on inclusion practices such as increasing new staff members’ knowledge about transgender patients during the on-boarding processes:

Okay, so ideal future would look like ... at least people who are sensitive to what being transgender is. I feel like ... there could be a little bit more education on LGBTQ-sensitive things.

– Healthcare Professional, Hospital

This participant envisioned better ways of approaching colleagues. They also discussed including pronouns on professional identification badges as an act of solidarity with transgender staff members.

Like solidarity. I am part of a marginalized community. Can you understand our struggles, do you get why it’s important for you to tell me your pronouns ... with regards to safety and how much of myself I can share with you?

– Healthcare Professional, Hospital

What if solidarity has the potential to accumulate within the workplace, like other ecosystem capitals such as nutrients, biomass, and physical structure, as Holling (2001, p. 394) posited: “For an economic or social system, the accumulating potential

could as well derive from the skills, networks of human relationships, and mutual trust that are developed incrementally and integrated.” Workplaces that focus on developing solidarity with trans employees, perhaps as a means of social capital, could gradually increase future potential for organizational growth.

VISION FOR ADAPTATION

As transgender visibility continues to rise, workplaces designed to be more inclusive will need to adapt to change, in part by being nimble and staying current on progressive understandings of human diversity.

I guess all of this movement, transgender people now ...we are more out. People can see us. So the company has to catch up with that because more people are coming out. So they have to adapt.

– Assistant Manager, Customer Service

Adaptation as an element of the ideal future of well-being in the workplace was further articulated in connection to a common quality of being human.

In the future, I would like to see, people who are...like to be honest ... in the ideal future, no pronouns, no gender at all. You’re just a human being. Doesn’t matter if you’re a he, or if you’re they, or if you’re a she. No labels I would say. To treat the self as human; that’s what we are.

– Assistant Manager, Customer Service

The participant elaborated on positive aspects of company policy around ‘respecting people’ by welcoming individual strengths and values, and by cultivating a neuro-diverse workplace, is how that environment made them feel:

...I don’t feel that they [colleagues] treat me as a trans person. They just treat me as myself.

– Assistant Manager, Customer Service

Van de Cauter et al. (2021) discussed the benefits to employee and employer of a transitioning employee returning to work, as adjusting working conditions and adapting flexibly to the employee’s return is likely to enhance their work participation.

VISION FOR CONNECTION

Imagine the possibility of the workplace becoming an ecological environment in which connectedness engenders well-being for all, including transgender people. Interview participants shared experiences of, or aspirations for, connecting with others in the workplace. One participant of the Future of Well-Being Survey wrote a comment on their experience of disconnection.

The teacher expressed loneliness, yet foresaw more connection in an ideal future of well-being in the workplace.

My ideal future would be one in which, me being trans is not particularly remarkable. I do feel quite singular ...in my workplace. It’s one thing to be supported and accepted, but it’s

another thing to still feel like you kind of stand out. There are times that I definitely feel very alone. I am not aware of any other out trans educators in my region. Maybe there are and I just haven’t met them? I don’t want to say, “I’m the only one,” but I really strived to connect with trans educators elsewhere in Ontario and other parts of the world because I think it would help my well-being to feel a sense of connection to people who are going through similar experiences to me.

– Teacher, School Board

The retail customer service assistant manager shared a view on belonging to a new workplace committee focused on diversity and inclusion, especially anticipating the prospect of connecting with other trans individuals:

One thing that makes me feel good is this committee that was created I can express myselfI can come with best practice and ideas and talk with other peers and other trans friends and then I can bring that to the table and then have a healthy and positive discussion about it.

– Assistant Manager, Customer Service

One anonymous survey participant commented on identifying as a non-binary person in the workplace and feeling disconnection in spaces lacking LGBTQ-sensitivity. (This respondent reported working in a non-frontline occupation):

Identifying as non-binary is more recent for me as a label. I consider it something more personal for myself, something that is important for me to recognize in myself. I look

fairly gender conforming, so no one questions my identity, and I don’t really care what pronouns people use for me. That said, I don’t think people treat me much different in workplaces for this reason. But outside that, since becoming more comfortable with my own identity, I feel a huge disconnect with any one or any space that isn’t queer – it’s all just really exhausting now. It feels unrelatable and makes me want to disengage.

– Anonymous Survey Participant, Non-Frontline Occupation

Huezo & Collins (2019, p. 158) explored experiences of community from a trans perspective in Alberta, Canada, and found several benefits of connecting with a “local trans community.” These include heightened engagement, knowledge and learning, advocacy, developing a safety net, adapting to changes in larger society, and normalization, meaning a sense of shared experiences (Huezo & Collins, 2019).

Social connectedness contributes to enhanced self-esteem, a sense of personal worth and coping, which is important to overall well-being (Austin & Goodman, 2017). In a systematic review of qualitative research on mental health of LGBTQI(intersex)+ youth, connectedness was identified as a core intersecting theme discussed in social context “where finding a group of peers fosters not only well-being but also opportunities for empowerment, solidarity, and networking” (Wilson & Cariola, 2020, p. 202).

Shore et al. (2011) proposed a 2x2 framework of feeling included in a workgroup, in which there must be complementary high value for individual belongingness and uniqueness. In this scenario, the person can experience

inclusion when “treated as an insider and allowed/encouraged to retain uniqueness within the work group” (Shore et al., 2011, p.1266). In contrast, when an employee has to give up their unique characteristics as the “price of admission,” they are experiencing exclusion or at least pressure to assimilate (Mor Barak, 2015, p.85).

Perceptions of Well-Being in Six Domains of Life: Reflecting on the present

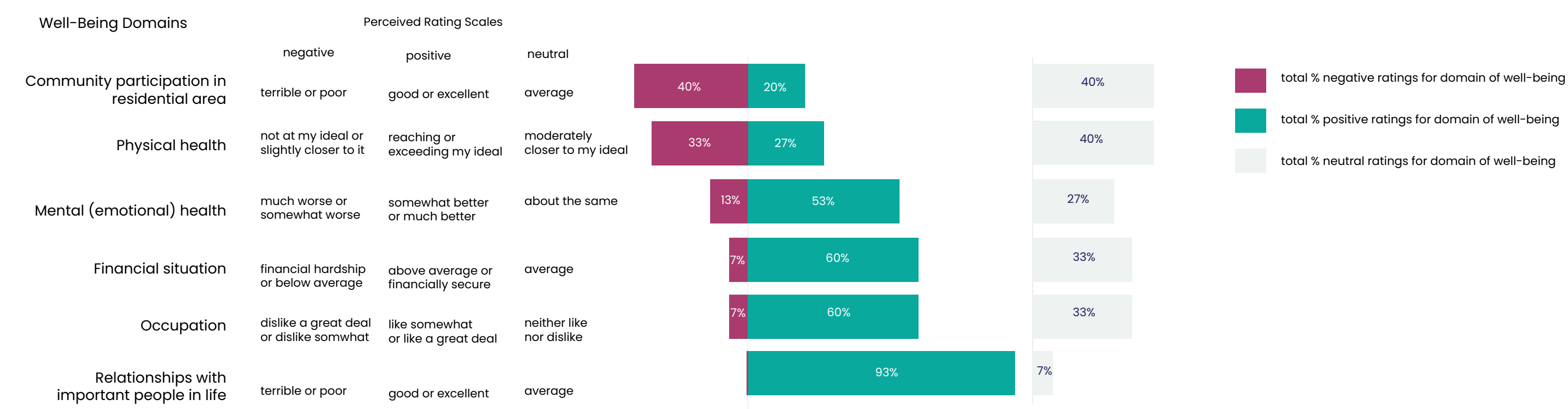


Figure 5. Future of Well-Being Survey results for perceptions of well-being in six-domains of life: Reflecting on the present

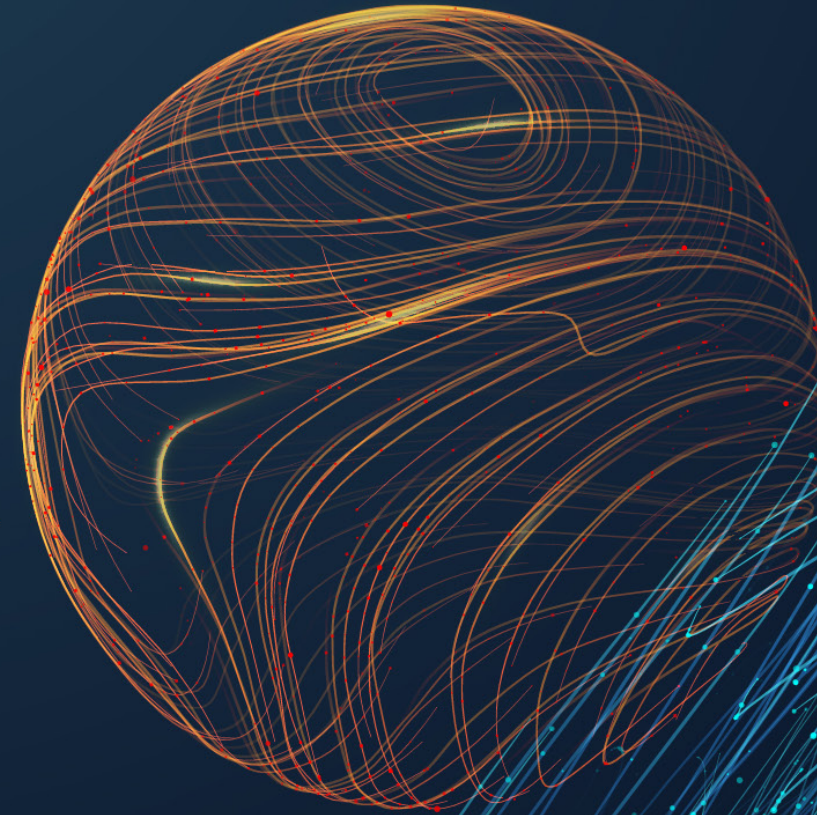
INNOVATIONS IN PLAY

enabling trans-positive workplace culture with sensitivity education and communication training

embracing workplace culture that supports overall trans-awareness and well-being

equitable practices for supporting transitioning employees

building accessible gender-neutral facilities in all workplaces



POCKETS OF THE FUTURE

transgender visibility in the workplace

practices of diversity and gender identity inclusion

talking openly as a transgender person about gender identity

ASPIRATIONAL VISIONS

empathy adaptation
connection

ELEMENTS TO MAINTAIN FOR THE FUTURE

The ongoing support and willingness from my colleagues and my administration to do the work of supporting me and not just me as an individual, but things that affirm the validity of trans and gender diverse people in general. Even before I came out [as trans], we were trending in that direction. ...Especially in education as a workplace, I think a lot of it's about the atmosphere of inclusivity.

– Teacher, School Board

Figure 6. Third Horizon desirable future: A future consciousness map for optimal well-being in the workplace from a transgender perspective.

04

System Dynamics

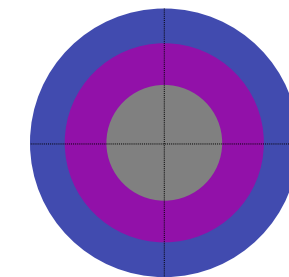
In this section, I share the gleanings from an additional mode of analysis I conducted of the interview data: systems dynamics. Using system archetypes to synthesize and make sense of the transcripts, I combined the archetypes in reinforcing and balancing loops that tell a bigger story about relevant structures and behaviours (Hjorth & Bagheri, 2006).

To answer my research and meet the HCD challenge to find a pathway that supports optimal future well-being of transgender people in the workplace, I wanted to ensure a deep understanding of the pain points that surfaced during the facilitated conversations with transgender individuals in a frontline occupation. I turned to systems thinking, and in particular, to system archetypes for another perspective on the material.

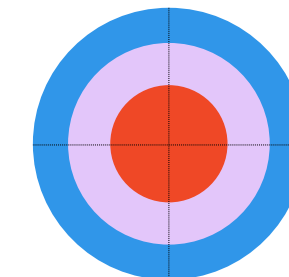
Kim & Anderson (1998) discussed using archetypes to examine an issue, a problem, or a situation systemically:

As you work on a problem—going over the story, identifying key variables, sketching causal loop diagrams—you may suddenly find that something about the story resonates with one or more of the archetypes, giving you a new key for unlocking part or all of your problem. (p.4)

Thematic analysis of the three interview transcripts revealed patterns in the participants' perspectives and experiences on the topic of well-being. I identified two interconnected subsystems to consider when seeking pathways to support future optimal well-being of transgender people in the workplace:



Macro Subsystem:
Being transgender on the frontline in a workplace setting (Table 1).



Micro Subsystem:
Gender journey of disclosure and misgendering in the workplace setting (Table 2).

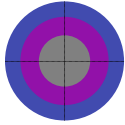


Table 1. Summary of participant perspectives and concepts from transcript material coded for the following recurrent elements: Being Trans, frontline component, workplace patterns. Clustered according to dimension of well-being during thematic analysis.

Recurrent Elements			
Dimention of Well-Being	Being Trans: Experience or situation referring to individual transgender identity in the workplace setting or references to how others get treated and perceived as a transgender being (e.g. treatment of trans patients, trans student)	Frontline Component: Idea, concept, or experience of interaction in the workplace setting with others (i.e., colleagues, students/patient/customers) as a person with visible transgender identity	Workplace Patterns: References gto workplace understanding, inclusion, policies, supports, advocacy, respect, empathy, washroom options for trans employees, pronouns. References to unsupportive patterns or concerns regarding being trans in the workplace
Individual Dimension (ID): personal experience, journey, transitioning phase	<ul style="list-style-type: none">• Voice• Possibility of being a visible proud trans person in the workplace• gender journey• coming out• anxious passing off as a cis-gender person• confidin• pronouns signal oppenness to share about themselves, as a trans person [ID/SD]• able to access appropriate doctors (e.g. endocrinologist) for hormone replacement therapy (i.e. medical transition)• ‘trans people do normal things, have normal professions, {we} get by’• 2In’t triggered by trans patient getting misgendered... obvious confusion on healthcare team• coming out being out feeling safe to come out• I want to represent community be apart of change• confidence in physical appearance, makes work easier to d• feel safe• feel comfortable transitioning• easier to manage people (e.g. perform job) when respected as being trans [ID/SD]	<ul style="list-style-type: none">• there will always be the potential for me to encounter misgendering and microaggressions” [ID/SD]• coming out as trans to certain people at work and hopeful this message would get relayed to the rest of coworkers• exhaustion from teaching others about pronouns• pronouns on name badges would provide a layer of saftey and relief [ID/OD]• being out and feeling safe to come out here	<ul style="list-style-type: none">• navigating overt marginalization [ID/OD]• questionable level of understanding in the workplace about marginalizaed commuities (i.e. struggles) [ID/SD]• getting misgendered by coworkers is stressful• feel safe• feel comfortable
Physical Dimension (PD): workplace setting, environment, technologies	<ul style="list-style-type: none">• pronoun pins• virtual classroom misgendering• transgender people in the workplace [ID/PD]• approach to safety – pronouns on name badge• working with lots of stranger & float staff, therefore pronouns on name ba ges can add safety [ID/PD]• non-binary washroom options would help...important to well-being (“a big deal”)	<ul style="list-style-type: none">• inconsistent practices when it comes to electronic charting system to identify trans patients• bridging the gap in understanding about what it means to be transgendered [PD/SD]• working with a lot of strangers can feel unsafe• pronouns layer of saftey• reaching a big number of people during conference calls... that’s important in terms of using pronouns.	<ul style="list-style-type: none">• pronoun use during conference calls or meetings• optional non-binary washroom for safety and comfort [PD/OD]
Social Dimension (SD): colleagues, coworkers, administrators, supervisors, within the workplace	<ul style="list-style-type: none">• colleagues• others using dead name• using wrong pronoun is annoying• misgendering• microagressions• throws me off• come and go in cycles• not going away entirely• visibly appearing• outwardly trans in a former workplace but language but (trans positive) language was misunderstood by others [ID/SD]• cisgender people might have stereotypes of transgender people (‘they don’t see trans people thriving’, ‘surprised to see trans person out in the workplace’)• providing care to transgendered patients• having conversations with colleagues with transgender family member about what it means to be transgender [PD/SD]• lack of sensitivity• gap of understanding• respect human relations• gender affirming interaction	<ul style="list-style-type: none">• “the more i’m accepted and supported in my workplace the more potential there is for conflict as people who have bigtoed views and transphobic views”• microaggressions will definitely continue to be something that’s not curr ntly working and will likely persist into the future...”• “there is some lack of sensitivity about what transgender means• cis people are curious and ask invasve questions• having converstations at work withh coworkers who have transgender family members• intention isn’t to hurt but lingering impact...cis coworkers not knowing consequences of questioning trans identity at work• colleague using trans pronouns to a patient• supportive colleagues using trans pronouns• pronoun use during conference calls and meetings in general [PD/SD]	<ul style="list-style-type: none">• treatment of patients somewhat reflects how coworkers might view/treat trans employee [OD/SD]• visible pronoun use is a layer of safety [ID/SD]• cis people ask invasive questions about trans people• working with cis trans allies feels safe [ID/SD]• respect• human relation
Organizational Dimension (OD): management, administrators, equity advisor, human resources	<ul style="list-style-type: none">• supportive manager [PD/OD]• Changing people minds about trans and pronouns (e.g. education)• Educating others about trans identities in the workplace [ID/OD]• Respect, feel safe, pronouns normalized, empathy, work life satisfaction [SD/OD]	<ul style="list-style-type: none">• “everybody has a right to a safe workplace”• solutions for two rights to experience friction• disconnect in the healthcare community when it comes to treatment of transgender patients [SD/OD]• staff training for how to treat transgender patients• onboarding training includes transgender patients for healthcare professionals• Hospital staff need to be taught how to document on transgender patients.	<ul style="list-style-type: none">• student’s freedom of expression can be offensive to trans teachers [ID/OD]• training new staff on trans patient treatment



Table 2. Summary of participant perspectives and concepts from transcript material coded for the following recurrent elements: Trans-positive experience, disclosure, and misgendering. Categorized according to dimension of well-being during thematic analysis.

Recurrent Elements			
Dimention of Well-Being	Trans positive Experience: Participants were asked if they would like to share some detail about their gender journey at work and if they could talk about a positive experience regarding their gender transition in the workplace (e.g. Is there anything positive that stood out during that time of coming out or transition within the workplace?)	Disclosure: Coming out as trans in the workplace, transitioning (e.g. medical, social, legal phases) in the workplace	Misgendering: Experiences of misgendering or being misgendered in the workplace setting (i.e. others referring to the participant using the wrong pronoun).
Individual Dimension (ID): personal experience, journey, transitioning phase	<ul style="list-style-type: none">• positive experience• lucky timing• being able to connect with appropriate doctors to access hormone therapy for medical transitioning• establishing oneself in a new workplace as a trans individual• quicker access to hormone replacement therapy as an employee of the hospital• coming out as a trans employee in a new workplace (a fresh new start)• gender affirming interactions with customers and coworkers [ID/ D]	<ul style="list-style-type: none">• “Do I disclose that i’m trans or do I just not say anything?”• social transitioning• being authentic• came out off the bat as trans• medical transitioning	<ul style="list-style-type: none">• derails my day• optimision as more time goes on• fewer incidences of misgendering [coming out]• this is a problem manager should solve• too stressful if misgendering keeps happening at work• Impacts mental health• “this doesn’t effect me at all”
Physical Dimension (PD): workplace setting, environment, technologies	<ul style="list-style-type: none">• electronic patient charting system includes pronoun use for patients [PD/OD]• dissipating anxiety in the workplace and washroom use during transition [ID/PD]	<ul style="list-style-type: none">• coming out as trans in new workplace• pronouns make it easier to come out to the workplace	<ul style="list-style-type: none">• misgendering online by a colleague during virtual teaching/classroom session.
Social Dimension (SD): colleagues, coworkers, administrators, supervisors, within the workplace	<ul style="list-style-type: none">• people in the workplace not showing discomfort with gender transition• socety is becoming more aware and educated and more supportive of trans people.• these things [SD/DD]• positive feedback from coworkers on putting pronoun underneath name in the gender-neutral locker room (communal staff lounge space) [SD/PD]• nice surprise that everybody was respectful [ID/SD]	<ul style="list-style-type: none">• accepted	<ul style="list-style-type: none">• using dead name and wrong pronoun during virtual teaching [SD/PD]• healthcare team misgenderong trans patients [SD/PD]• cisgender patients misgendering healthcare professional who happens to be transgender [SD/PD]• getting misgendered at work [SD/PD]
Organizational Dimension (OD): management, administrators, equity advisor, human resources	<ul style="list-style-type: none">• not treating this (e.g. gender transition) like a burden or inconvenience• competent human rights equity advisor• luck of having an administrator who is aware of social justice issues and understands [SD/ OD]• required by law to support trans people• taken seriously at work	<ul style="list-style-type: none">• supportive manager• competent human rights equity advisor• supported by Human Resources person	<ul style="list-style-type: none">• disconnect in the healthcare comunity [SD/OD]• teaching for documenting on transgender patients• there will always be the potential for me to encounter misgendering and microaggressions [SD/OD]

4.1.1 LIMITS TO SUCCESS:
Transgender Well-Being in the
Workplace

These subsystems represent realities of a reinforcing and balancing loop depicted in a “Limits to Success” scenario (Figure 7). In this scenario, efforts initially lead to success and encourage ongoing efforts. However, over time successful efforts cause limiting actions, slowing down improvements toward the desired outcome (i.e. well-being in the workplace).

Consider the anecdotal example of being trans in a frontline work environment (Figure 8, , macro subsystem, left reinforcing loop 1). An employee decides to embark on a gender

transition (e.g., social, legal, medical phases) and takes initial steps in the workplace by disclosing this decision to their colleagues. Initially, the workplace responds positively by making efforts to ensure a level of inclusion, encompassing a reinforcing loop of supportive behaviors (e.g., pronoun name pins, pronoun signifiers in email signatures, supportive manager). The workplace applies inclusionary practices by using that individual’s preferred pronoun, responding to the stated needs of the transitioning employee, acknowledging their medical status, and making them feel supported. This will contribute to supporting that individual’s transition and well-being, especially with respect to cross-dimensional well-being for positive personal and social experiences.

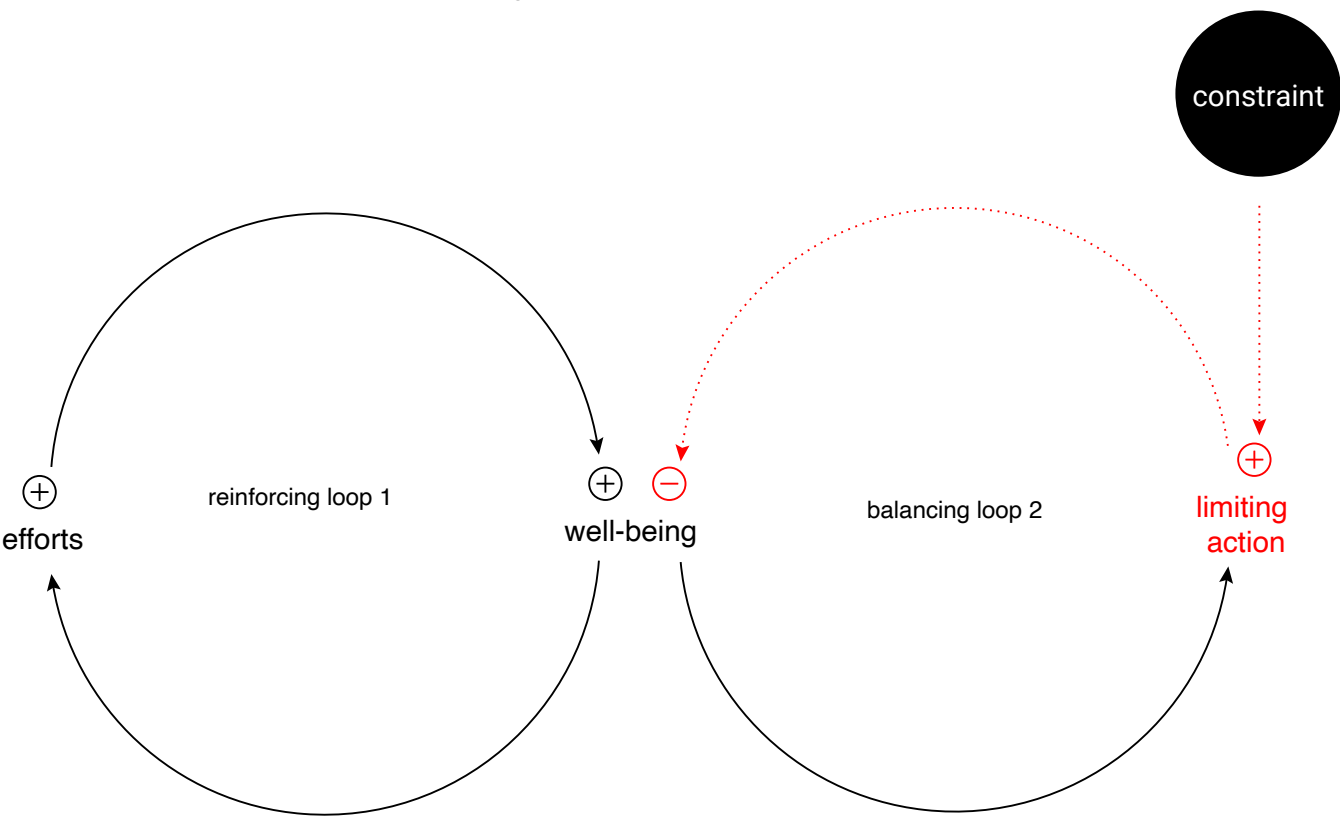


Figure 7. Overview of “Limits to Success” scenario. (Adapted by Kim & Anderson, 1998)

The support provided by the employer for the transitioning employee reinforces trans-visibility in a frontline environment and contributes to well-being in the workplace. However, the constraint in the workplace on the transgender employee’s “disclosure” can arise with unintentional or intentional unsupportive behavior in the workplace, including microaggressions, misgendering, and using a transgender person’s former (‘dead’) name (e.g., assigned name at birth), shown in Figure 8 as an active constraint in the upper right, impacting the micro-subsystem. A constraint may be linked to a dominant culture rooted in structural stigma. Hatzenbuehler & Link (2014, p. 2) defined structural stigma as “societal-level conditions, cultural norms and institutional policies that

constrain the opportunities, resources and well-being of the stigmatized.” Stigma refers to “elements of labeling, stereotyping, separation, status loss, and discrimination co-occur in a power situation that allows the components of stigma to unfold” (Link & Phelan, 2001, p. 367). The presence of the constraint has a counterbalancing impact on the reinforcement of ‘successes of inclusion’ and drives the negative feedback loop of unsupportive workplace patterns to compromise levels of safety and dignity for trans employees (Figure 8, , micro subsystem, right loop 2).

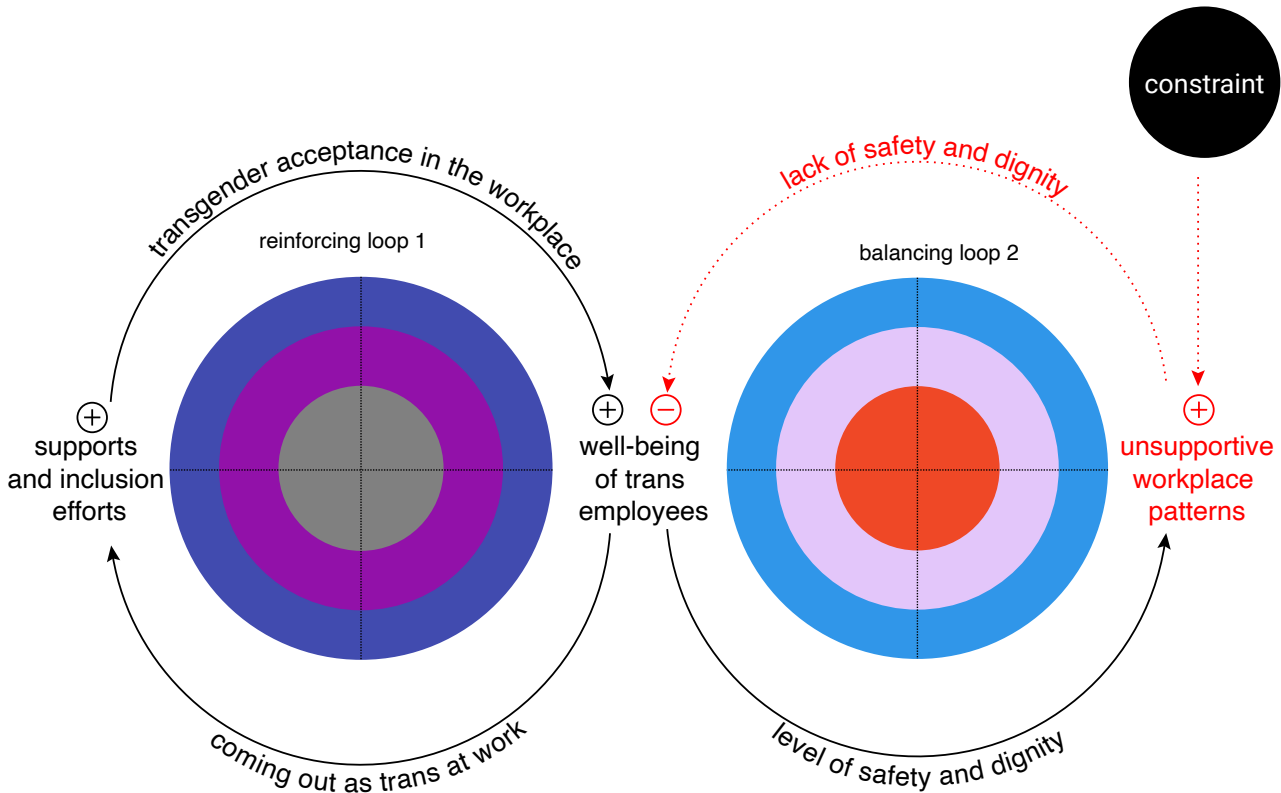


Figure 8. Limits to Success scenario for transgender well-being in the workplace. Being trans in a frontline occupation involves misgendering.

Misgendering is a negative experience for trans people such that it results in feeling stigmatized and devalued. McLemore (2015) offers us a reasonable explanation for stigma:

This stigma derives in part because transgender spectrum individuals are perceived to challenge binary constructions of gender and many people respond negatively to those who deviate from normative gender role expectations. These normative expectations, as well as the stigma attached to those who deviate from these norms, influence the likelihood and frequency in which transgender spectrum individuals are misgendered. Misgendering is one of the more subtle forms of enacted stigma that transgender spectrum individuals' experience as it has the potential to shape how they feel and how they evaluate themselves and their social identity. Examples of misgendering include using an incorrect gender pronoun (i.e., a pronoun "slip") to refer to someone, gendering an otherwise neutral name, or being denied access to one's preferred gendered space. (p. 53)

A constraint (Figure 9) becomes the main driver to unsupportive workplace patterns, that ultimately impact the level of the transgender individual's well-being in the workplace. In our facilitated conversations, the participants each indicated patterns of supportive workplaces, and also identified having to navigate misgendering experiences, invasive questions about their trans identity, and overt microaggressions.

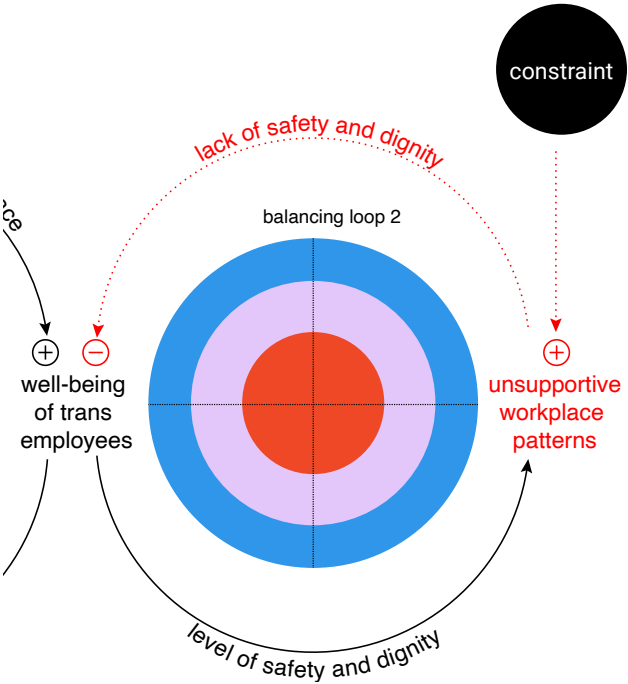


Figure 9. Constraint in the workplace leading to unsupportive patterns for transgender employees after disclosure, eventually diminishes well-being of transgender employees.

With the existence of a constraint on the entire system, small efforts might lead to change in the short-term and be perceived as successes in supporting transgender well-being in the workplace. However, without addressing an overarching system constraint, those successes are limited.

To further explore this system constraint, consider another system archetypes called "Fixes That Fail" (Kim & Anderson, 1998, p.8).

4.1.2 FIXES THAT FAIL: Transgender Well-Being in the Workplace

In a typical "Fixes That Fail" scenario, a problem symptom is detected and the chosen fix appears to work (Figure 10, balancing loop 1). However, attention gets paid to the short-term result, having fixed the presenting symptom, rather than to the problem's more important long-term impact. "We fall into reactive, 'firefighting' mode, continually fixing squeaky wheels instead of making fundamental improvements" (Kim & Anderson, 1998, p.8).

As in the earlier example of Limits to Success, the trans employee has come out in the workplace, requiring colleagues to adjust to changes in this person's new gender presentation. Depending on the trans individual's phase of transitioning, these changes can include a legal name change, use of a new pronoun, and physical changes in their appearance with the use of hormone replacement therapy. Despite these changes, this person encounters misgendering at work, often by a cisgender person (Figure 11).

The fix happens when the cis person acknowledges the error by correcting, and subsequently refers to the trans employee using the correct pronouns. This would be an example of a fix that balances the symptom problem, but is only a short-lived solution in the situation of misgendering (Figure 11, balancing loop 1). Other examples of fixes include having a supportive colleague (e.g. trans ally) who corrects other coworkers and emphasizes pronouns in group situations at the workplace; signaling solidarity and awareness of proper inclusion practices for trans identities.

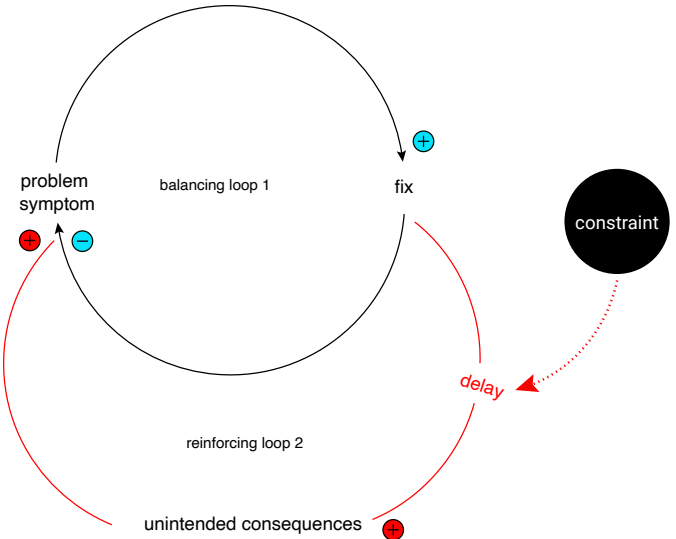


Figure 10. Typical "Fixes That Fail" scenario. (Adapted by Kim & Anderson, 1998)

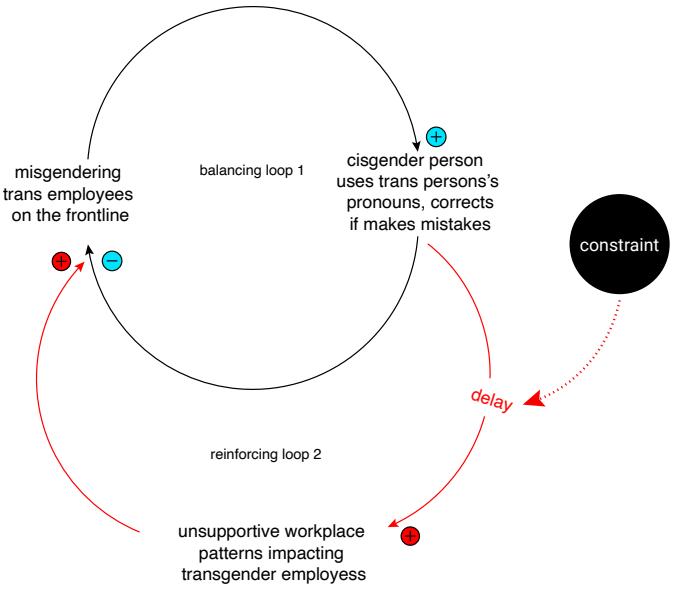


Figure 11. Fixes That Fail for transgender well-being in the workplace.

Delays eventually occur, such as in the case when the person who misgendered the trans employee in the first place does not make an effort to use the trans employees pronouns but instead dismisses them entirely, demonstrated by not referring to that trans employee at all or simply reverting to constantly referring to the first-person name (or a potentially more compromising reference, using a dead-name). Misgendering is micro-aggressive and microaggressions impact well-being (Kapusta, 2016):

Those subject to [microaggressions] may suffer from chronic health problems, persistent anxiety, fatigue, stress, hypervigilance, anger, fear, depression, shame, and a sense of loneliness. The harm of micro-aggressive misgendering in relation to transgender people is commonplace in many different contexts of social interaction. (p. 504)

Misgendering or using a dead-name (former name based on sex assigned at birth) diminish a trans person's journey of affirmation Delaney & McCann, 2020):

In contrast to affirmative experiences, non-affirmative experiences are those that do not support and maintain the phenomenology of the individual. Non-affirmative experience can be understood as misinformation, transphobic behaviours, inappropriate conduct or discriminatory biases. (p.71)

The following were interpreted as examples of delays, gathered from the facilitated conversations with participants: no gender-neutral washroom yet (commercial retail), unclear policies for transitioning employees (education), inconsistent use of pronouns and ongoing misgendering of patients and employees (healthcare).

Delay is another important component in the "Fixes That Fail" story, because it has such a destructive impact (Kim & Anderson, 1998, p.10).

A timely and committed "fix" to "constraints" is necessary to establish a supportive workplace environment for a transitioning individual. Delays set off negative feedback where a transgender employee's well-being is diminished (Figure 10, reinforcing loop 2). To reiterate, constraints and delays drive the reinforcing loop in this scenario. The unintended consequence over time is that the trans employee continues to experience misgendering and microaggressions; a downward spiral ensues, resulting in a lack of safety, dignity, and low sense of well-being at work for trans employees. In some cases, "the negative effects of the unintended consequences are irreversible" (Kim & Anderson, 1998, p.10).

“

The impact of stigma and misgendering on the physical and mental health of trans individuals is profound and lasting.”

— Dolan et al., 2020, p.151

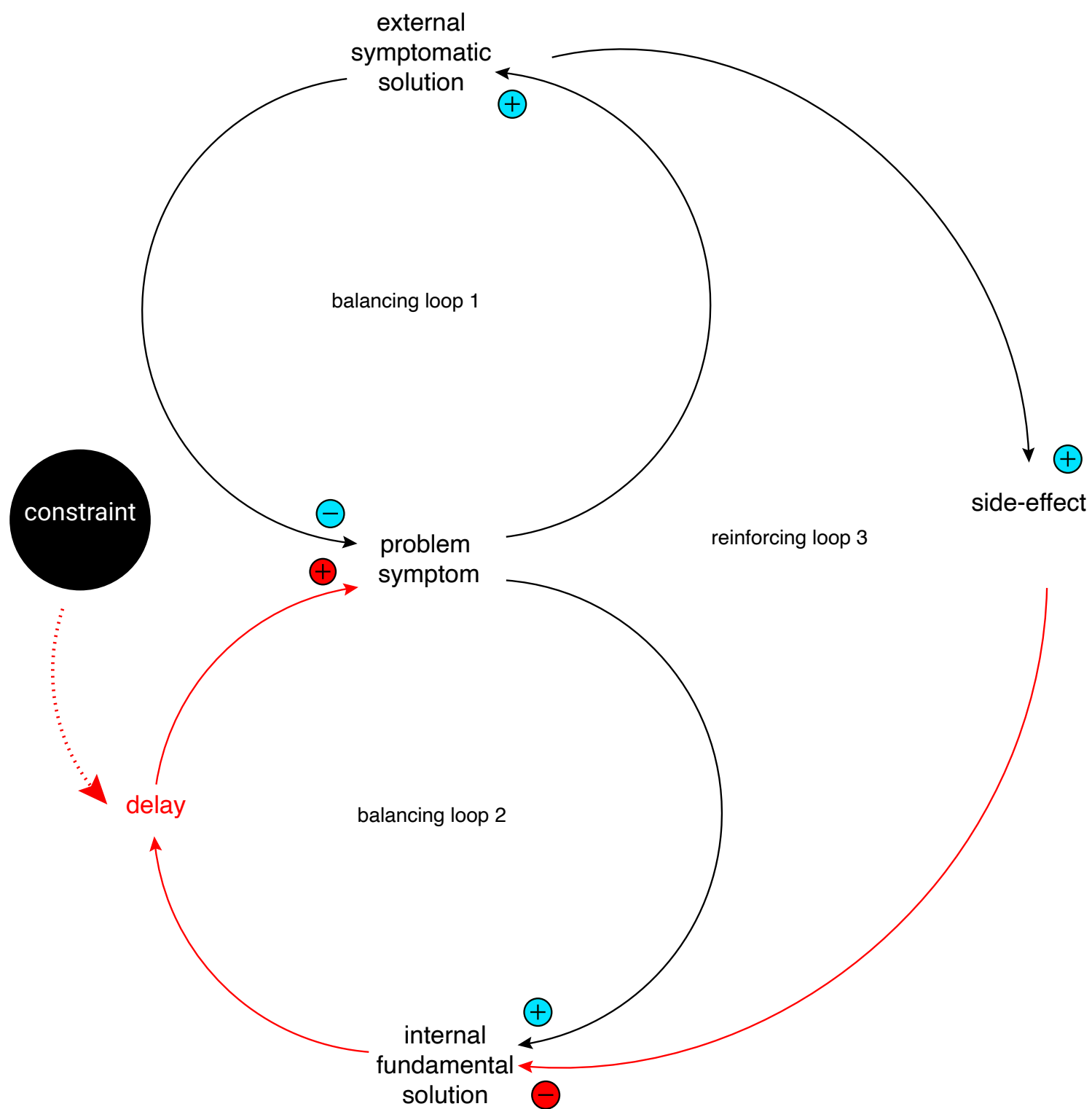


Figure 12. Typical “Shifting the Burden” scenario. (Adapted from Kim & Anderson, 1998)

4.1.3 SHIFTING THE BURDEN: Transgender Well-Being in the Workplace

An extension to “Fixes That Fail” is illustrated using a third system archetype called “Shifting the Burden” (Kim & Anderson, 1998, p. 31), which highlights initial supports for trans employees using a short-term external intervention.

In a typical Shifting the Burden scenario the problem symptom prompts a symptomatic solution that eases the situation for a period (Figure 12, balancing loop 1). Since the solution eases the symptom in the short term, there is no effort made to implement a fundamental solution that is more challenging and time-consuming. This has a side-effect that erodes the ability to implement a fundamental solution, which is meant to address the root of the problem. Thus, the problem symptom is recurring in a figure eight fashion, creating further problems (Figure 12, reinforcing loop 3).

In this scenario, the transgender employee discloses their gender identity in an environment without a policy structure to support their transition. This employee plans for a transition while also navigating incidences of misgendering and microaggressions during frontline working hours, which was previously illustrated as a micro subsystem in the Limits to Success scenario.

To support the employee, workplace leaders may motion a well-intentioned external intervention, see symptomatic solution (Figure 13, balancing loop 1) by hiring a third-party organization to enter the workplace and educate staff on gender identity LGTQ2S+ topics, to increase awareness and inclusion practices.

Bringing in a third-party expert to educate, while well-intentioned, provides a symptomatic solution, a fix, by addressing general awareness of gender identity and pronouns in the workplace resulting in short-lived inclusion practices not specific enough for transgender individuals, especially if one reflects on where an individual is in their gender journey.

This short-term solution produces a side effect, a dependency on external intervention, rather than internal policy and structure (Figure 13, reinforcing loop 3). This diverts resources away from addressing the root-level causes to workplace misgendering and microaggressions, instead of prioritizing the well-being of trans employees. Reliance on short-term external intervention erodes the capabilities of the organization to implement a more robust necessary solution (i.e. trans-focused awareness, policies to address the need for workplace accommodations, and safety and dignity in workplace). As a result, the burden is shifted to the employee to advocate for their well-being without an invested approach and subpar policy infrastructure to specifically support trans inclusive policies.

During the interview session, the teacher discussed the need for professional development and education for colleagues to increase awareness of transgender issues and stated:

Other than having more trans colleagues, it would just be nice to have people who already know about this stuff, who are learning about this stuff without me having to say it. So that’s it’s not on me to kind of point out why something I just experienced was a microaggression or why I’m struggling today with something.

– Teacher, School Board

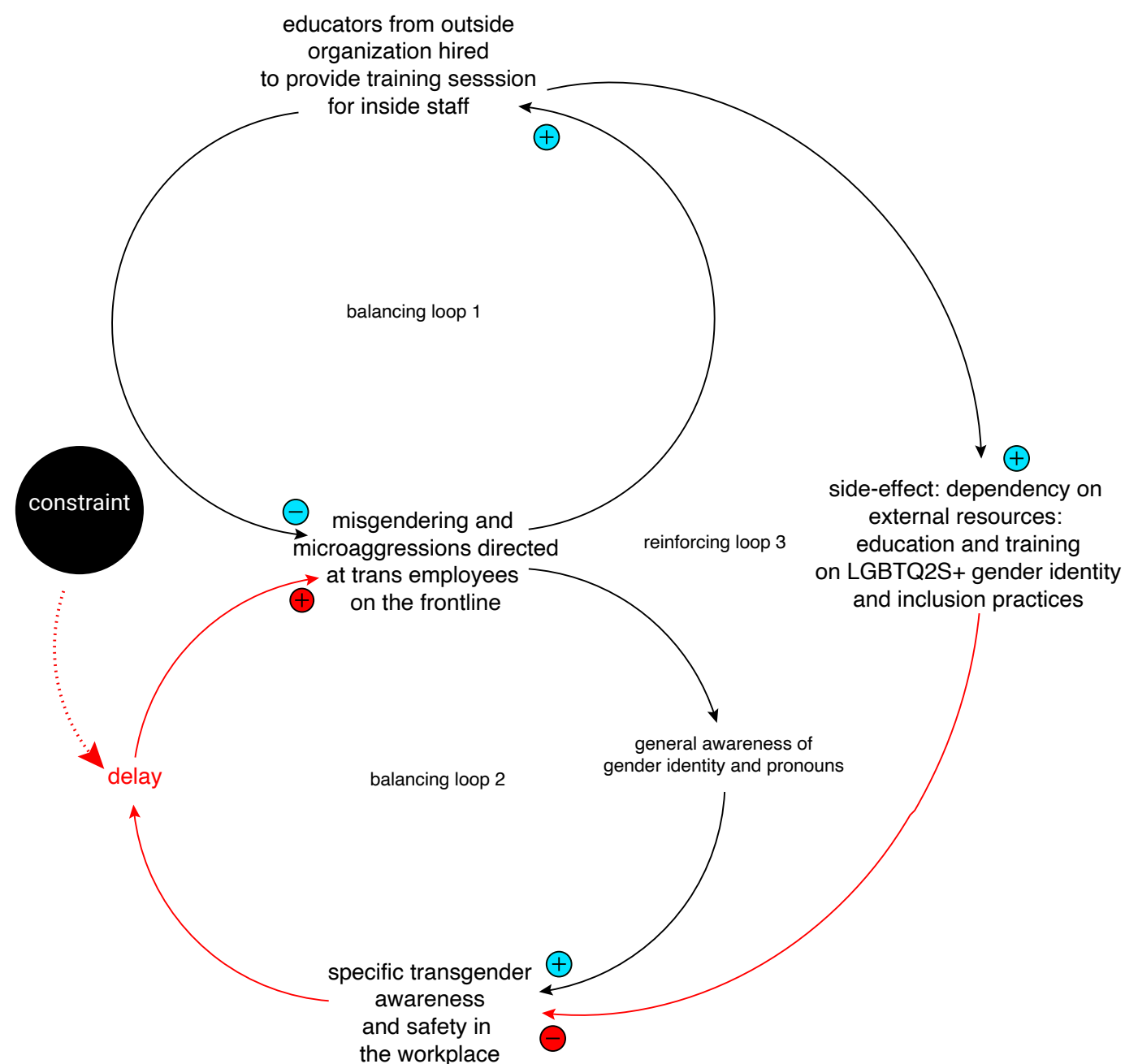


Figure 13. Shifting the Burden for transgender well-being in the workplace.

The system dynamics of ‘Fixes that Fail’ and ‘Shifting the Burden’ co-exist with core Limits to Success for a transgender employee in the workplace.

Transgender individuals often are pressured to seek out support for multiple phases of transition. Without a proper workplace policy framework in place to address the necessity, therein lies a fundamental gap in the ability to support well-being. Interview participants shared ideas for clearer policies in the workplace that demonstrate proactive support when it comes to identifying issues and needs for transgender employees. Adding to these multiple discourses signaling a dominant constraint might be the unconscious bias impacting transgender well-being in the workplace. This is also evidenced in literature on pathologizing transgender experiences.

Transgender identities have been historically pathologized in context of policy analysis on trans inclusion in the education system in Ontario (Martino et al., 2019), also verified by MacKinnon (2018) using a conceptual model. MacKinnon (2018) substantiated that trans identity became viewed as a medical problem throughout social and clinical contexts beginning in the mid-twentieth century:

This transfer from psychoanalytic development theories and psychotherapy over to biomedical interventions and pharmaceutical treatments highlights the relatively recent shift in the culture of medical explanations and treatments in connection to the medicalisation and pathologisation of trans identity. (p.85)

Transgender individuals experience multiple sources of stressors propagated by “Institutional sexism, transphobia, and heterosexism” (O’Neil et al., 2008, p. 291). Kellett & Fitton (2017, p.4) described “erasure” as the “process by which trans invisibility is perpetuated in education, health and other institutions” and emphasized that “failure to acknowledge gender diversity cultivates invisibility.” Negative experiences such as “discrimination, micro-aggressions, lack of social support, structural inequalities” significantly impact work outcomes and well-being (Van de Cauter et al., 2021, p. 3).

05

Retrospective
Review of
Literature

Cisnormative⁶ and heteronormative ideology permeate government policy and social movements, which inherently influence organizational structures and behaviors. In an article titled *'Protecting Cisnormative Private and Public Spheres'*, Degagne (2021) analyzed conservative arguments that delegitimize transgender identities and human rights:

Common and dangerous tropes – that transgender people are deceptive, lie about their gender and change their gender on a whim – have long been used to unsettle and delegitimize transgender people's claims to identity, representation, rights, protections and ultimately social justice.... Accordingly, opponents to transgender rights argue that there is no basis for a claim to group identity, no undue inequality experienced by transgender people and therefore no justification for a request for group protection against discrimination and violence. (p.505)

Prejudice and stigma directed toward gender minorities result in unique stressors, which have been shown to impact the health of transgender and gender nonconforming individuals (Meyer, 2015). Data collected from the Trans PULSE Project, a longitudinal population study on the social determinants of health among transgender people in Ontario, Canada, was used systematically to implement federal and provincial level Human Rights policy on gender identity and discrimination (Bauer & Scheim, 2015). The research team made the following recommendation for a single demographic of the trans population in Ontario, Canada (Bauer & Scheim, 2015, p.8): "Greater social acceptance and support for gender identity are particularly important for trans youth, among whom parental support is a key contributor to well-being."

Collaborators associated with Trans PULSE published a reflection covering several challenges that surfaced during the research project led by two cisgender⁷ academics as co-principal investigators (Travers et al., 2013, p.415): "At one point in the project, we started to get feedback from the trans community about the lack of representation of racialized trans people on this project; this feedback was entirely well-founded."

The Trans PULSE Project focused on experiences of transphobia (Bauer & Scheim, 2015). Lennon & Mistler (2014, p. 63) discussed the utilization of transphobia, which does not account for cultural ideology as it simply "addresses fear of trans-identified individuals instead of capturing the critically central and evidently flawed assumptions that underlie the pervasive cultural system of prejudice and discrimination directed toward the transgender community."

⁶ Cisnormativity is the belief that transgender identities or bodies are less authentic or 'normal.' (Travers et al., 2013, p. 403).

⁷ Cisgender refers to identification with the gender corresponding to an individual's sex assigned at birth (Katz-Wise & Budge, 2015, p. 151).

8 Cisgenderism refers to the “cultural and systemic ideology that denies, denigrates, or pathologizes self-identified gender identities that do not align with assigned gender at birth” through endorsing and perpetuating bias against transgender identities and expressions (Lennon & Mistler, 2014, p. 63).

Ansara & Hegarty (2012, p.141) asserted the shortcomings of transphobia research and showed that cisgenderism,⁸ remains significantly widespread among mental health professionals, as an ideology of prejudice that is “systemic, multi-level and reflected in authoritative cultural discourses.” This results in human experiences getting ignored, invalidated, or disparaged if perceived straying from a health or ideal state of being a heterosexual or cisgender person (Ansara & Hegarty, 2012). Cisgender individuals may exert this ideology by pathologizing and misgendering the other, to such an extent that “cisgenderist language can function to dehumanise, silence and erase” (Ansara & Hegarty, 2012, p. 152).

It is plausible that such a statement holds true for other systems, such as workplaces, for transgender and gender non-conforming adults. The gap in knowledge about experiences in the workplaces from these adult perspectives has largely been ignored (O’Neil et al., 2008):

The preponderance of available information on the workplace experiences and concerns of transgender individuals is available via organizations dedicated to addressing the problems faced by transgender individuals, rather than in scholarly and/or practitioner-focused journals. (p. 290)

Matsuno and Israel (2018) proposed the Transgender Resilience Intervention Model (TRIM), with a primary goal:

To synthesize and highlight research that can inform applied interventions to help transgender individuals increase resilience and overcome mental health risks. Therefore, our focus is on factors that are malleable to change rather than fixed factors such as demographic variables. (p.637)

This “SLIM idea” perpetuates the pathologization of the transgender population. Meyer (2015) warns against the focus on resilience⁹:

I say that a focus on individual resilience is hazardous because, from a public policy perspective, it can remove or reduce social responsibility to protect disadvantaged populations as it creates expectation of individual resiliency. Moreover, as we shift our discourse to individual resilience we risk focusing on the individual response to stress rather than the stressor itself. This shifts the policy implications that is at the origin of the stress concept generally and minority stress specifically. (p. 211)

Using resources to build individual resilience would be ineffective because it absolves systems that oppress transgender people. Meyer (2015, p. 211) noted that “racism, homophobia, sexism, socioeconomic inequality, and other social disadvantages limit individual resilience.” Resilience manifests in response to stressful contextual circumstances. Therefore, if trans employees can achieve optimal well-being in the workplace, it then implies no need to buffer stress, and instead transgender employees can focus on flourishing.

According to Giblon & Bauer (2017), approximately 200,000 Canadians aged 18 and older identify as trans, of which 38.5% reside in Ontario. Despite Bill C-16 passed by Parliament in 2017 to amend the Canadian Human Rights Act by adding gender identity and gender expression as prohibited grounds for discrimination (Irving & Hoo, 2020), a staggering 98% of transgender people living in Ontario reported experiencing transphobia (i.e. interpersonal discrimination, hate crimes, and lack of inclusion within employment settings) at least once in their lifetime (Blodgett et al., 2017).

A critical analysis of transgender human rights politics in Canada highlighted that many transgender people are refused access to healthcare and other essential social services (Irving, 2013). Irving & Hoo (2020, p.220) concluded that “many trans people are still excluded from the workplace, and it is incumbent on legal practitioners and scholars to consider the limits of existing human rights protections in an effort to address this inequity.” It seems not much has changed in terms of the circumstances of the past that researcher highlighted more than a decade ago: “At present, it is not clear whether

communities are actually implementing these organizational changes, after adopting transgender-inclusive nondiscrimination laws (Colvin, 2007, p. 7).” Despite progress in advocacy initiatives and policy changes, current conditions for transgender people in certain workplaces remain to be painful and harmful.

Perceptions of Well-Being in Six Domains of Life: Looking back 3 years ago

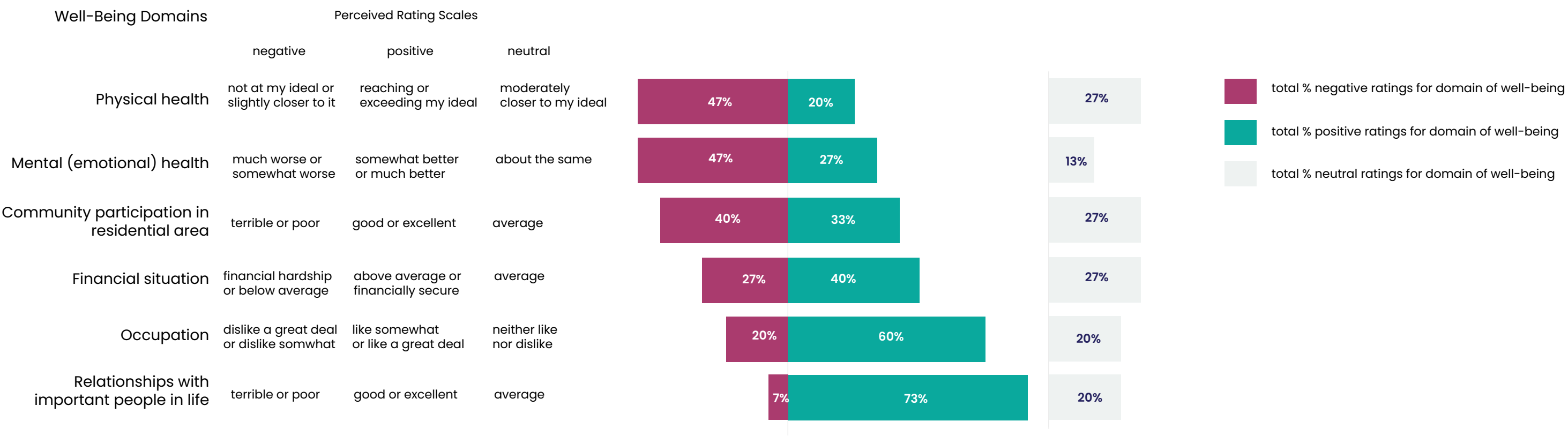


Figure 14. Future of Well-Being Survey results for perceptions of well-being in six domains of life: Looking back three years ago.

06

Multidimensional Well-Being During a Pandemic

The Future of Well-Being Survey and facilitated conversations captured experiences and perspectives about multidimensional well-being in relation to the COVID-19 global pandemic (substantially affecting Canada as of the first quarter of 2020). In this section, I present a few insights from participants on multidimensional well-being amid the COVID-19 pandemic.

Interview Participant:

I feel like over the past year and half of this pandemic, as a teacher, I've been under a lot of pressure in addition to the ordinary baseline pressure that teachers might experience. So that has definitely been a challenge to my well-being. It's challenging because it is very systemic and it's not something that I as an individual can really take steps to remediate. Like it's something that I can endure and talk about but you know the change has to kind of come from a level above me.

– Teacher, School Board

Anonymous survey respondent (working in a frontline occupation):

A lot of uncertainty around my financial situation, mental well-being, etc. in the next three years. I feel like most things are uncertain, including interpersonal relationships, job status, financial status, etc. as I'm transitioning.

– Survey Respondent

Anonymous survey respondent (working in a non-frontline occupation):

I feel like the pandemic has allowed me to have the space to think about and exist in my gender for no one else but myself, which has led me to realize new things about myself. Now, however, going back into the world and interacting with the cisnormative world, I am feeling like I am being forced back into previous habits and behaviours related to my gender identity and presentation, for the comfort of cis-hetero people. This has had a negative impact on my well-being.

– Survey Respondent

These voices of transgender and gender non-conforming individuals stress the impact of the pandemic on well-being, which similarly reflect the findings of recent research by Buspavanich et al. (2021) who found significantly lower levels of well-being during the COVID19-pandemic for transgender individuals of a LGBTQIA (asexual) group compared to cis-heterosexual individuals. Work-related stressors arising from the pandemic could impact well-being. "Critical stressors include working in an essential occupation, a pandemic-related increase in working hours, being self-employed and being on short-time work, both of which are often accompanied by a loss of income" (Zoch et al., 2021, p.4).

The COVID-19 pandemic is considered a global health crisis (Pollard et al., 2020). Abrupt pandemic-related changes in life and working conditions (Zoch et al., 2021), emotional exhaustion (Meyer et al., 2021), shocks to global economies (Jawad et al., 2021), loss and health challenges affecting

both employees and employers (Pal et al., 2021) have surfaced during this crisis forcing a recalibration of the necessity to address well-being in the workplace and society.

Abson et al. (2017) point out that "crises can trigger" structural change towards sustainability:

Both formal and informal institutions may reorganize, and indeed decline, in the face of changing environmental and societal conditions. A key lever therefore lies in ensuring transformational learning and adaptation opportunities invoked by crises. (p. 34)

The COVID-19 crisis has incited societal disturbance and the need for social change. In the next section, I discuss a sustainability approach as we look forward with a proposal to approach the primary research question holistically and strategically.

07

Sustainability
Approach to
Future Well-Being

Addressing discrimination in the workplace and adjusting systemic barriers to benefit the well-being of employees in that workplace is not a new concept. The sustainability of those approaches is the focus of this section for future consideration on designing a future of optimal well-being in the workplace.

In their discussion on well-being and sustainability Helne & Hirvilammi (2021, p.167) propose that “to increase the changes of a transition to sustainability, it is necessary to enrich the understanding of well-being on the basis of a **relational paradigm**, in which the dependency of human well-being on the health of the ecosystems is internalized.” Working outside of this relational view when trying to achieve sustainable well-being means there will be a weak link between humans and ecosystems which are inherently connected (Helne & Hirvilammi, 2021, p.168):

“To find a way out of our predicament, we need a paradigm and a conception of well-being based on our interdependency with the world surrounding us.” Cherkowski et al. (2021) insist on nurturing belief in collective wellness:

For each of us to be well, we need to live and work in systems that value well-being for all; where there is a sense of humanness that values and encourages aliveness, meaningfulness, belongingness, and other qualities that may contribute to our feeling of wholeness at work. (p. 165)

Now is an opportune time to take a sustainability approach to creating a future of optimal well-being in the workplace for transgender and gender non-conforming individuals.

Perceptions of Well-Being in Six Domains of Life: Looking ahead 5 years from now

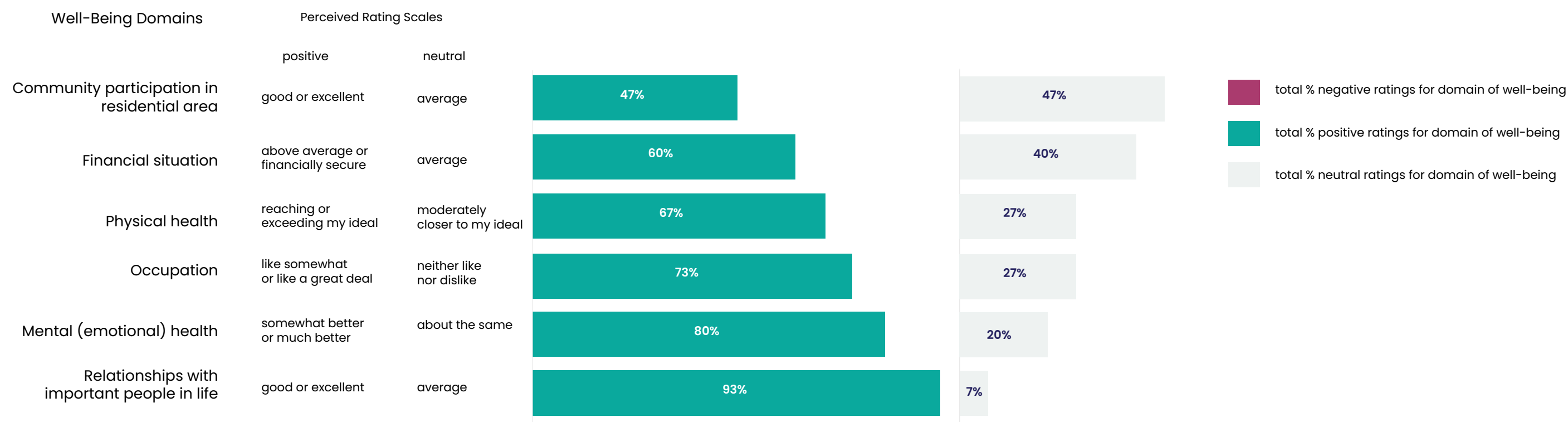


Figure 15. Future of Well-Being Survey results for perceptions of well-being in six domains of life: Looking ahead five years from now

08

Opening a
Pathway

How might we design a future that supports optimal well-being of transgender people in the workplace?

Fundamental to designing solutions that are “successful and sustainable” is making sure to balance what is most desirable to human beings, technically feasible, and financially viable (IDEO, 2015, p.14), as illustrated in the left-hand Venn diagram in Figure 16.

At the intersection of desirability (human needs), viability (is it profitable?) and feasibility (can we build it?) is the innovation “sweet spot.” I have fitted a sustainable design

right there, to open a pathway that supports the future optimal well-being of transgender people in the workplace, illustrated in the right-hand Venn diagram in Figure 16. This model is suitable because “it fits into existing managerial mindsets, since the three constituent elements map roughly on to marketing, finance, and operations” (Kimbell, 2014, p. 193).

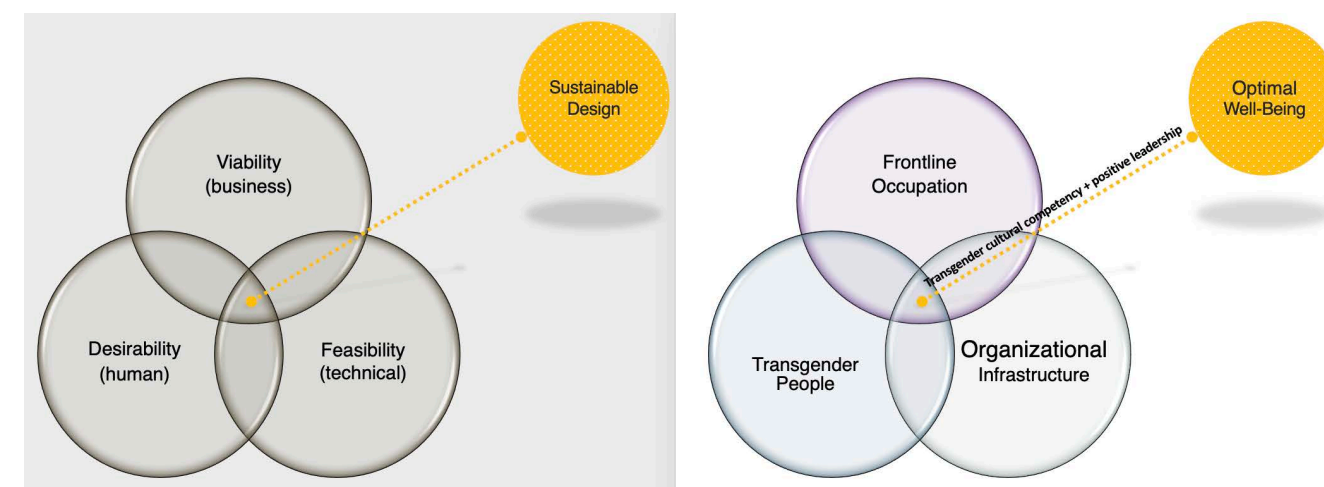


Figure 16. Venn diagram showing an open pathway to a trans-positive future of optimal well-being: Creating real impact is a balancing act, first starting with humans, their hopes, fears, and needs. (Adapted from IDEO, 2015). Transgender Cultural Competency and positive leadership in the workplace setting can provide the necessary structure and behaviours to support optimal well-being of transgender employees in a frontline occupation.



8.1.1 Desirability: Gender transition in the workplace

Transgender and gender non-conforming individuals desire well-being, which is even more essential within the workplace, as it is a space wherein visibility, belonging, and connection are essential for their well-being. McGlade (2019) facilitated focus groups with intersectional transgender participants (including individuals identifying as non-binary, racialized, Two-Spirit, and some living with various disabilities) with the goal to design an ideal inclusive workplace for a social enterprise called *Transaction Works*. The aim was to employ trans youth to build and operate a digital platform of programs and services for the transgender and non-binary population in Ontario, Canada. Upon asking the participants of this feasibility study (McGlade, 2019) about creating an exclusively

remote workspace as a “perfect workspace,” one of the key learnings was articulated as:

Most technology companies would save on infrastructure costs by encouraging employees to use their own equipment and gig or work from home, and something we wanted to tease out of the focus group was to understand if the perfect workplace would be a remote workplace. The result here was a resounding “no!”. Participants in the focus group expressed very clearly that being in a place where they are not the only trans or non-binary person was almost a transformational experience. (p.23)

This finding speaks to a core component of well-being for humans: the need for social connectedness. For a transgender individual who relies on a healthy ‘coming out’ and validation of their new identity, the social connection achieved in an in-person work environment has the potential to very significantly leverage well-being. In their study on *Gender Identity Inclusion in the Workplace*, Ozturk & Tatli (2016) articulated:

The majority of our participants indicated that gender identity was an encompassing and visible aspect of an individual’s way of relating to others, and as such it would be infeasible and unhealthy to keep their gender identity differences hidden. The participants also suggested that once they reached self-acceptance after myriad personal struggles, it became self-defeating to hide at work. Furthermore, those participants who transitioned or were in the process of doing so needed to live in their destination gender in all aspects of their lives. (p. 789)

When a transgender individual makes the big decision to make their transition known in their workplace, it can be understood as a necessary step, and one that is a health-related decision, as great stakes are involved in making the decision to “out” themselves. A workplace has the potential to support this decision with foresight and policies.

8.1.2 Viability: The Business of the Frontline Occupation

In analysis of the viability of developing transgender cultural competency within the workplace, greater well-being has been found to be linked to “reduced monetary burden and increased economic contributions” (Cosco et al., 2017, p. 581) and measures of overall well-being can be used to predict outcomes for employees over time: “employees with low well-being are more likely to leave the company, either through willful withdrawal or involuntary dismissal processes” (Sears et al., 2013, p. 403).

A systemic review (Van de Cauter et al., 2021) on return to work after transitioning described a symbiosis of benefits that extend beyond trans employees:

On the micro level, return to work promotes quality of life, community integration and participation of the worker. On the meso level, the company benefits by reduced costs of recruitment, training, productivity loss, and absenteeism. And on the macro level, society has less expenditure on health care and unemployment costs. (p.2)

In the Sears et al. (2013) review of statements from the top 50 Fortune 500 companies on their implementing LGBT-related policies found they did so because workplace inclusion strategies like these could be financially beneficial or the business through recruitment and retention, ideals and innovation, providing customer service to a diverse customer base, and employee productivity. LGBT workplace diversity policies “can have a positive impact on the corporate bottom line” because “companies that are more diverse and inclusive are better able to compete and have higher levels of innovation and creativity” (Hossain et al., 2020, p. 777). It is estimated that \$64 billion annually is the cost to companies in the United States because of employees, many who were members of the LGBTQ+ community, who exited due to unfairness or discrimination and who needed to be replaced (Thoroughgood et al, 2020).

8.1.3 Feasibility: Organizational Infrastructure

Lack of awareness and a lack of accurate information about transgender identities and gender variance have been the source of major problems encountered by transgender people in the workplace (O’Neil et al., 2008):

In addition to stigma and the pervasive lack of understanding and awareness in the workplace, discrimination against gender variant individuals may also be related to poor workplace preparation for addressing issues associated with transgender employees and deficiency of adequate workplace protections. (p.291)

A positive gender transition experience at work is dependent on several factors, some of which are reactions of management and HR as advocates or mediators, reactions of coworkers, the presence or absence of a transition plan along with work accommodations (Van de Cauter et al., 2021).

8.2 The Future: Shifting Paradigms

To bring greater awareness to the issues, I am proposing the application of the *Learning Process* presented by Hjorth & Bagheri (2006), to incorporate transgender cultural competency and positive leadership in the workplace with the goal to open a pathway towards future optimal well-being. To recap, optimal well-being, also known as “flourishing”, is considered “a multidimensional construct incorporating both hedonic (e.g. positive emotion, life satisfaction, and happiness) and eudemonic (e.g. meaning and purpose, positive relationships, and engagement) aspects of well-being” (Prendergast et al., 2015, p. 1). A general overview of the *Learning Process* as presented by Hjorth & Bagheri (2006) is illustrated in Figure 17.

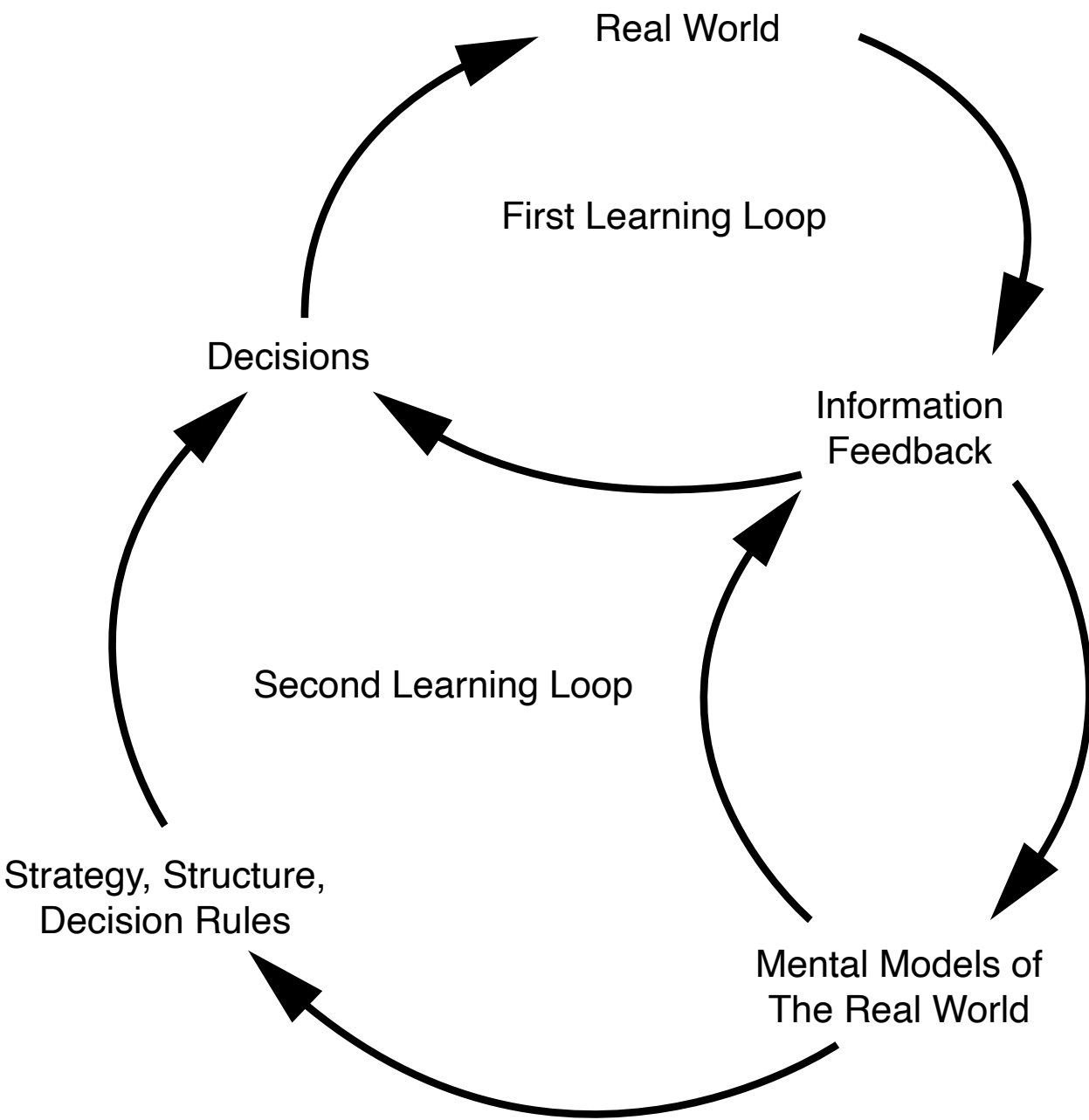


Figure 17. The Learning Process presented by Hjorth & Bagheri (2006, p. 81): In the first learning loop, decisions are influenced by information feedbacks from the real world: however, they are deeply influenced by strategies and decision rules, which are formed by our mental models of the real world. In the second learning loop, the information feedbacks modify the structure of our mental models which will prompt us to update the decision rules.

8.2.1 Adapted Learning Process (Figure 18):

The first learning loop (left causal loop diagram in Figure 18) represents the “real world” or the workplace, which the Retrospective Review of Literature showed to be pre-dominantly cisnormative and guided by cisgenderism. Information feedback from the real-world influences decisions that appear unsupportive to trans employees in the workplace, evidenced by a lack of trans positive policies, microaggressions, and incidences of misgendering.

The present mental models (left causal loop diagram in Figure 18) may include prejudice and discrimination towards trans people becoming constraints influenced by dominant culture rooted in structural stigma. These mental models do not get modified in the second learning loop but instead perpetuate misgendering and microaggressions, resulting in faulty structures. Well-being of transgender people in the workplace presently remains suboptimal, which was demonstrated using systems archetypes called *Limits to Success*, *Fixes that Fail*, and *Shifting the Burden* (Kim & Anderson, 1998).

In the adapted learning process, the second learning loop (right causal loop diagram in Figure 18) provides an opportunity to transform the decision rules. New knowledge activates information feedback that builds transgender cultural competency, updating destructive mental models (i.e. cisgenderism, cisnormativity, transphobic views). These updates lead to positive leadership for well-being that influences transformative strategies, structures, and decision rules, giving rise to trans-positive policies, workplace accommodations, and empathy for transitioning employees.

My adaptation of the Hjorth & Bagheri (2006) learning process aims to create a pathway that supports future optimal well-being of transgender people in the workplace. Transgender multidimensional well-being, an explored area of my research, is new knowledge with limited data currently available that might provide additional richness to developing a learning process that can be implemented by workplaces aiming to become trans-positive (depicted as an activating source of information feedback in Figure 18).

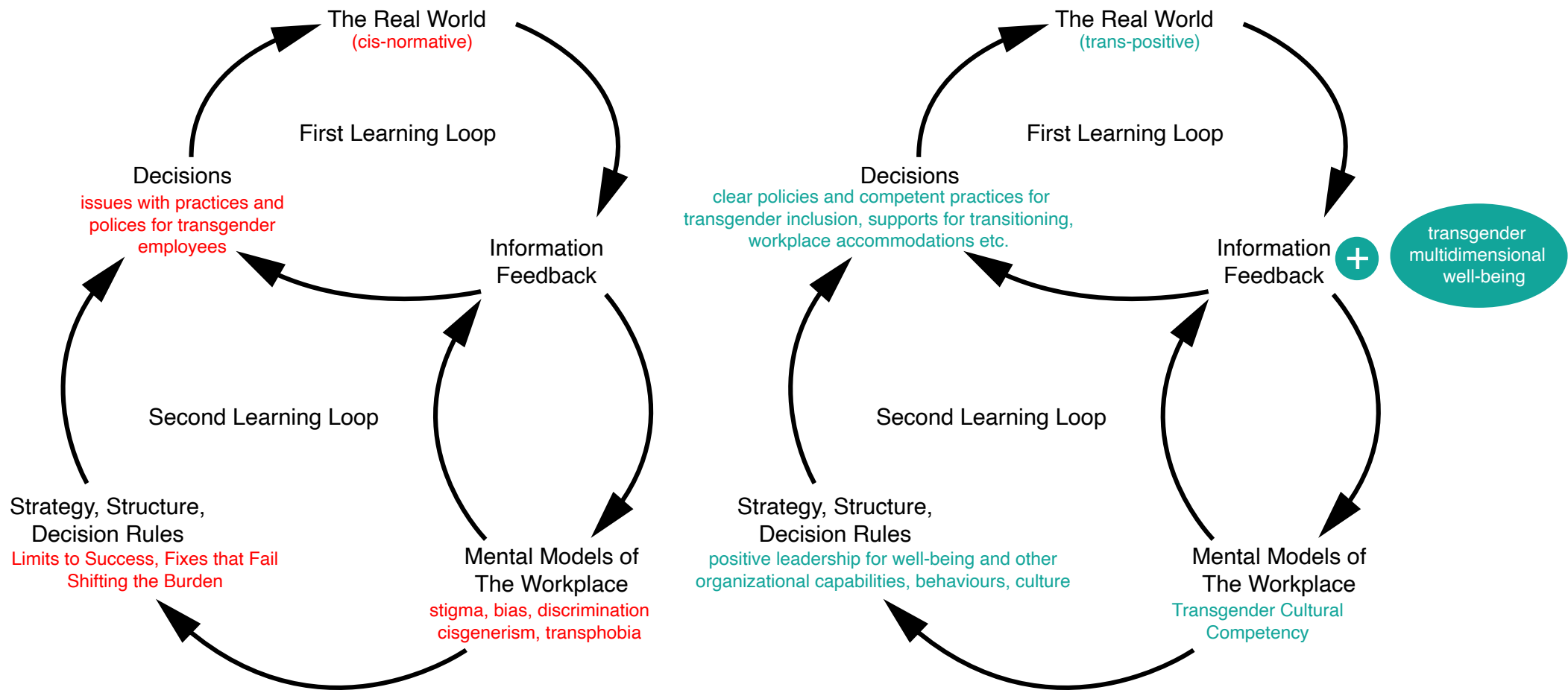


Figure 18. Learning process for transgender cultural competency in the workplace (right causal loop diagram): New knowledge about transgender multidimensional well-being adds to information feedback that directly influences decisions (first loop) and updates mental models (second loop) that leads to a strategy for positive leadership in the workplace, replacing faulty system dynamics (e.g. Limits to Success, Fixes That Fail, Shifting the Burden). In turn, policies and decisions become focused on trans-inclusion, transitioning plans, and accommodation that supports optimal well-being of transgender people in the workplace. (Adapted from Hjorth & Bagheri, 2006)

8.3 Design Criteria for Adapted Learning Process

8.3.1 Transgender Cultural Competency (TCC)

The future of optimal well-being in the workplace hinges on organizational level priorities and policies endorsing transgender employee protection, safety, and visibility. This requires the capacity to embrace transgender cultural competency (TCC) that enables recognition, respecting, and supporting transgender identities and taking steps to build allyship for their well-being.

In *Transgender Studies Quarterly*, Wilkinson (2014, p. 69) offers a comprehensive description:

[TCC] requires recognition and commitment to genuinely understanding and working to address the multiple parameters that impact so many transgender lives. Within this framework of intersectionality, transgender cultural competency involves an understanding of terms, identities, and concepts associated with transgender and gender-nonconforming communities, including utilizing culturally appropriate language and behavior for addressing and working with transgender populations; broadening understanding of the myriad socioeconomic, health, and legal issues that transgender people face; and developing and implementing culturally appropriate systems and service approaches for working with transgender individuals and families. (p.69)

Cultural competency (Davis, 2020, p.15) is “a journey and a pathway towards becoming competent in working with, and between, diverse cultural situations and contexts”. Davis (2020) highlights an important cause-effect relationship, beholding the concept of culture, that suggests a major design aspect of the proposed learning process for TCC in the workplace:

To bring about transformative changes in negative, discriminatory and derogative behaviours and attitudes in institutional, structural and discursive settings necessitates mobilising a creative and dynamic sense of the culture concept. (p.22)

Culture is closely related to worldviews (Davis, 2020). The concept of cultural safety (Wilson & Neville, 2009) has been used in nursing education and clinical practice that requires a partnership to be established between different cultures, such as an individual and an organizational structure, for the purposes of “creating a space for dialogue and a power sharing to joint action” (Garneau & Pepin, 2015, p. 11).

Intersectionality:

Culture is considered a social determinant of health recognized in Canadian public health policy; however, minimal research exists on intersectional experiences of marginalization due to gender identity, sexuality, race, and ethnicity (Mulé et al., 2009). Canadian Indigenous Two-Spirit/LGBTQ groups experience “specific intersections of personal, state and structural violence...that are tied to a larger historical and social context of colonization” (Ristock et al., 2019, p. 780). It has been justified that colonialism should be interpreted as a determinant of health for

Indigenous lives (Czyzewski, 2011, p. 10): “Addressing the ongoing effects of colonialism, decolonizing Indigenous mental health discourse and allowing for just and adequate control over key dimensions, such as health services, is inherently related to self-determination and thus improving health.” In general, gender diverse communities are marginalized and excluded from health promotion policy and practice (Molé et al., 2009). Therefore, it is imperative that the well-being of transgender employees living with disabilities and racialized transgender individuals be carefully considered in the development of TCC within every workplace setting.

8.3.2 Positive Leadership for Well-Being

Leadership plays a central role in capitalizing on the human desire for well-being at work (Cherkowski et al., 2021). When it comes to strategic analysis and action, if an organization “has a strong culture and deeply ingrained behaviour,” then changing “structure, management processes, and leadership behaviour” will be necessary to have any success (Crossan et al, 2016, p. 188). Leaders effectively hold power (Block, 2018):

The concept of leadership means that in addition to embracing their own humanity, which is the work of every person, the core task of leaders is to create conditions for civic or institutional engagement. They do this through the power they have to name the debate and to design gatherings. (p.90)

Stein et al. (2016, p.6) carried out “Fem-LED” research to examine the barriers and enablers

for female leadership in Interactive and Digital Media and in the Information Communications Technology sector, which resulted in six strategies for intervention and the researchers suggested “to make them applicable, as well, to transgender people.” Specifically, the strategy to “increase female inclusion” resonates as it recommends that “gender equity numbers and quotas target female inclusion at all levels of the organization and across all functions” (Stein et al., p. 7). This is a compelling strategy to extrapolate in benefit of transgender people, for instance, by empowering trans-led hiring committees, funding trans-led research, and investing in professional development of transgender individuals so they can strive toward and succeed in leadership roles.

Cherkowski et al. (2021) suggest that positive leadership can play an important role in shifting work cultures toward sustainable well-being and collective flourishing:

Positive leadership is about seeing self and others in thoughtful, open, and real ways; so that we come to see each other as humans on a learning journey, each of us with much potential and great offerings, but also with many flaws and challenges. This mutual seeing can become a space of learning, if there is a relational grace extended to each other through compassion and trust such that we grow together. (p. 160)

It is beyond the scope of this research project and my capability to provide a strategic approach that would effectively develop positive leadership. Instead, I encourage future research in the area focused on identifying and developing essential organizational capability, behaviour, and culture aligned with well-being of transgender and gender non-conforming people on the frontline and beyond.

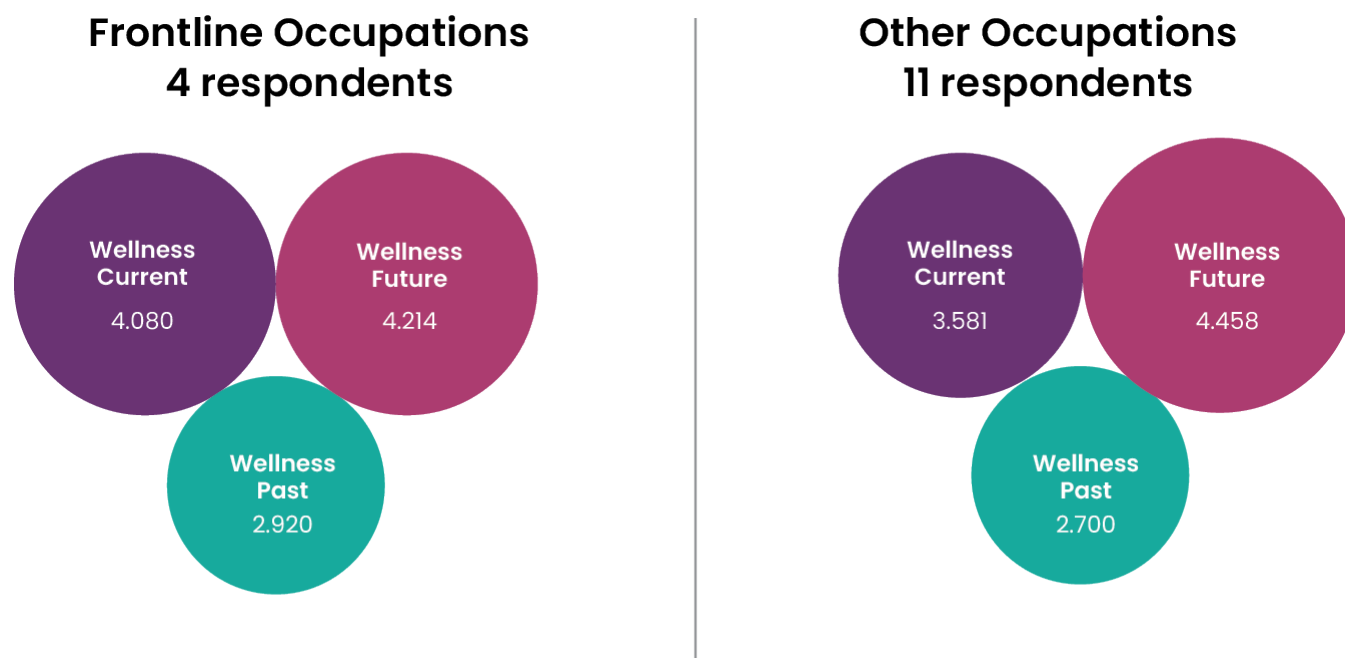


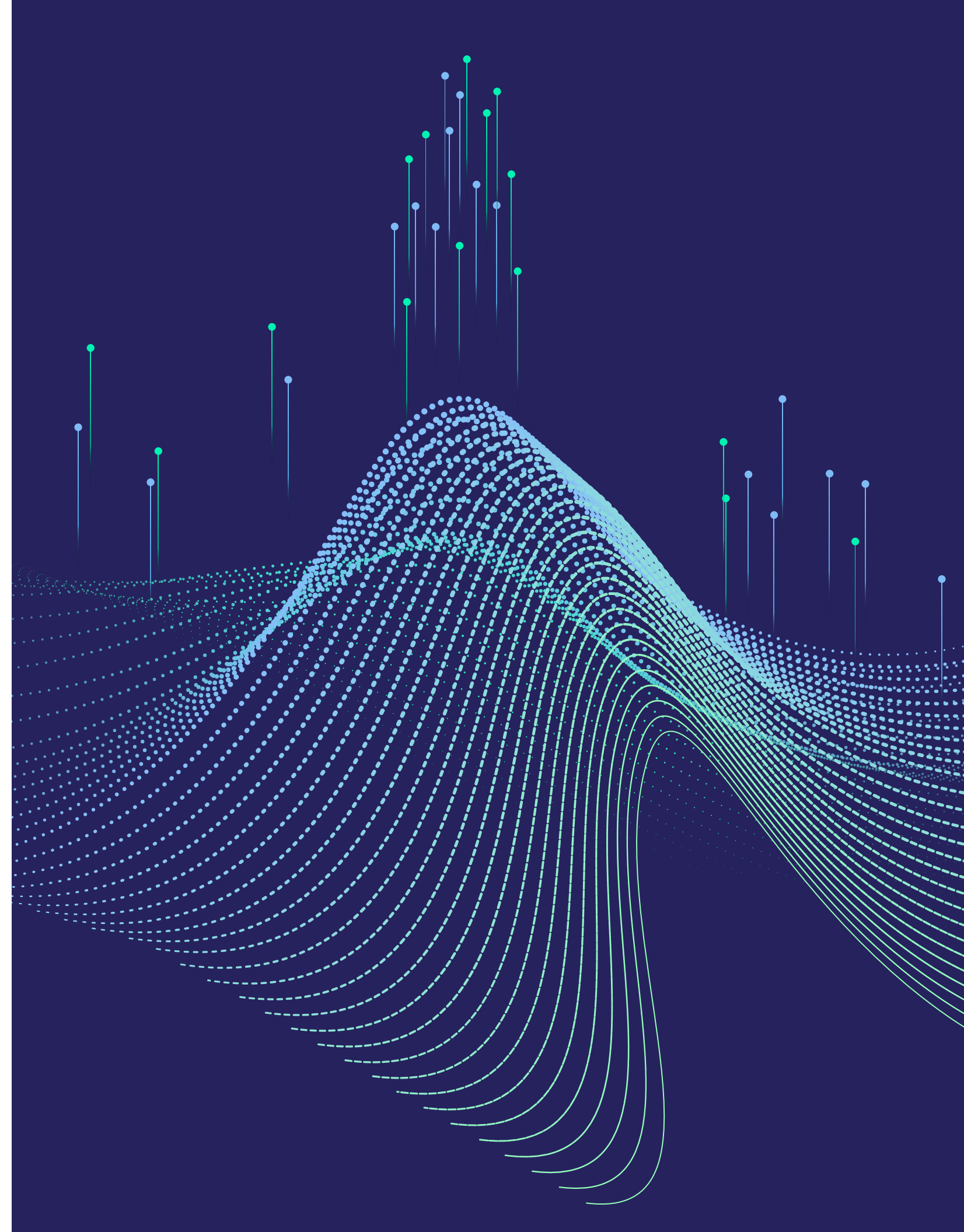
Figure 19. Future of Well-Being Survey results for overall wellness ratings corresponding to the past, present, and future. Looking back three years ago, on average respondents rated previous wellness as 2.8 out of 5 stars. Current wellness ratings averaged 3.8 out of 5 stars. Looking ahead five years from now, on average respondents gave 4.3 out of 5 stars for overall wellness in life, a positive outlook on well-being.

Results from the Future of Well-Being survey showed similarities for ‘overall wellness’ ratings pertaining to the past, present, and future, between respondents in a frontline occupation and those in other occupations (Figure 19). This might suggest shared perspectives regarding general life multidimensional well-being or similarities that may apply to diverse groups in a variety of workplace settings.

In summary, the proposed adapted learning process is meant to shift conscious mental models in the workplace to better shape decisions that will benefit the well-being of transgender and gender non-conforming individuals. Transgender cultural competency

and positive leadership require a shift in “mindset or paradigm” to bring about system change, which can be an effective “leverage point” (Meadows, 1999, p. 17).

Rainbow Health Ontario offers useful resources that can be harnessed in different ways to support the learning process for transgender cultural competency, depending on existing organizational infrastructure (examples are listed in Appendix J).



09

Conclusion

A HOPEFUL FUTURE

I embarked on this project to provide a pathway to a future of optimal well-being of transgender people in the workplace. I approached the work with *creative integrity* (Sharpe, 2020) and identified hopeful possibilities with the participants, using the Three Horizons model to co-create a space to build knowledge about workplace well-being from the perspective of transgender individuals.

Creative integrity concerns our wholeness as humans from two perspectives: from our own perspective, what is proper to each unique life? And from the perspective of our shared life, what do we all regard as the measure of human solidarity in this situation? Creative integrity is never completely pre-defined, it is always essentially open in the face of the future. (p.46)

The participants of this study and I co-created a future consciousness map of well-being that focuses on transgender adults working in frontline occupations. The participants contributed to a body of knowledge relevant to gender diversity, social justice, and strategic innovation, and that adds to transgender health research. It is hoped this document may act as a catalyst for co-creating a transformative future in any space that is compelled to support the well-being of transgender people.

Through the research interviews, this study uncovered a) well-being as a multidimensional experience from a gender identity perspective b) current trends in supporting well-being of transgender adults in the workplace and c) ideas about resources to harness so that we can design a trans-positive future of well-being. These are small, hopefully significant

steps towards creating a sustainable future of optimal well-being in the workplace.

The Future of Well-Being Survey provided more insights into multidimensional well-being in the broader community of employed transgender and gender non-confirming individuals. Past, current and future relationships with important people in life were mostly positive. Current and past community participation and physical health domains, along with prior mental (emotional) health looking back three years ago were found to be mostly rated negatively. Perceived well-being in the future, looking ahead five years from now, favored positively in all six domains of life plus overall wellness ratings scored above average for the present and future.

By applying systems dynamics to the participants' experiences and perceptions of their workplaces, I gained further understanding of the structures and patterns underlying the complexity of their well-being as transgender individuals. A series of system archetypes uncovered critical constraints that may preclude sustainable well-being of transgender employees in a frontline occupation.

A retrospective review of literature revealed ubiquitous, negative outcomes for transgender people. While this project aims to provide a viable pathway for better outcomes, it must also acknowledge the overwhelming reality of hardships in workplaces, and the strong barriers to improvement that still exist.

My design research process was far from perfect. In counterbalancing design and resource limitations, I collected data from two cohorts of participants (interviewees and anonymous survey respondents), focused several analytical lenses on the material, and conducted a second review of literature.



Further reflections on the data analyses appear in Appendix K.

While the exploratory research of this project centered on transgender individuals in the workplace, it would be remiss of me not to acknowledge that many transgender individuals have difficulty accessing work. I conjecture that many of the current concerns uncovered herein lie at the root of their unemployment, and imagine that implementation of the designed solution might serve to open more doors for that segment of the transgender community as it optimizes well-being for those already employed.

**NEW KNOWLEDGE FROM A
TRANSGENDER PERSPECTIVE:**

Re-thinking how knowledge is produced and used is considered a deep realm of leverage for sustainability transformation (Abson et al., 2017, p. 35), which “requires an understanding of how knowledge flows through systems of interest, and how we identify the goals and expectations of sustainable transformations (intent) or select methods and means that help us to get there (design).”

The transgender experience in the workplace, upon thematic analysis, portrays the conflict between the individual reality situated in the ideals of current organizations today. One participant expressed feeling ‘lucky to have an administrator who is aware of social justice issues and understands these things’ when reflecting on a positive experience of coming out as trans in the workplace, while also acknowledging that ‘there will always be the potential for me to encounter misgendering and microaggressions [at work].’

Establishing well-being in the workplace for transgender employees is a high stakes challenge. Meeting the challenge would ensure the safety and dignity of transgender employees, improving both their work life and the over quality of their life. Transformative change in businesses and engrained organizations requires an empathetic, invested and collective effort to gender-neutralize spaces, normalize pronouns, and support acceptance of differences. The benefit to for-profit enterprises might not be immediately apparent. Yet, in a post-COVID-19-pandemic era of worker empowerment, the corporate stakeholders may be open to

embracing the emotional and social capital they can accumulate by optimizing transgender well-being.

KNOWLEDGE MOBILIZATION:

The proposed learning process as a human-centered design (HCD) solution to shift paradigms through transgender cultural competency and positive leadership for well-being was substantiated by holistic views from scholars in foresight, systems thinking and sustainability development. At this stage, my proposal is intended for knowledge mobilization, referring to “a range of active approaches deployed to encourage the creation and sharing of research-informed knowledge” (Freebairn et al., 2017, p. 2). This research only scratched the surface of a complex topic. I hope that it serves as a catalyst to further work to expand diversity, equity, and inclusion practices that are meaningful and impactful to future well-being of transgender and gender non-conforming people.

It is incumbent on current and future governments to stretch beyond standard

practices and consider a spectrum of experiences in their governance to inform future policy frameworks more comprehensively. During the COVID-19 Pandemic, The Department of Finance Canada (2021) published *Toward a Quality of Life Strategy for Canada* that proposed a quality of life framework meant to provide a mechanism to link the country’s Sustainability Development Goals to federal budget priorities and policy.

Canada’s strategy is comprehensive and encouraging for a future look at well-being, however there are some areas that do not include transgender specific well-being as a unique experience. Statistics Canada finally added ‘sex at birth and gender identity’ questions to the Canadian census, meaning the trans and gender non-conforming population has not been adequately considered up until just recently (Gemmill, 2021). Building future partnerships with progressive trans-positive organizations such as Rainbow Health Ontario, The519 Space for Change, and trans innovators in design and academia would enhance knowledge and contribute to future iterations of the Quality of Life framework.

Jones (2017, p. 669) discussed ongoing capacity for expertise and numerous constructive applications of contemporary strategic foresight methods in *The Future of Canadian Governance*: “If foresight is ignored or underused in policy planning and research, governments may miss opportunities for guiding policy and planning decision informed by rigorous, and often provocative, futures prospective.” This project was grounded in foresight methods including Three Horizons, interviews, survey design, and literature review. The research findings highlighted patterns, strategic pathways, and considerations for practices and guidelines sensitive to the well-being needs of transgender and gender non-conforming communities.

NEXT STEPS

Facilitated conversations guided by the Three Horizons model uncovered multidimensional well-being experiences in the workplace from a transgender perspective. This exercise both symbolically and practically created a space for a shared cultural experience of future consciousness, that which holds the potential to create transformational change (Sharpe, 2020, p. 95): “The way forward demands not just new ideas, a few more powerful concepts, but a deep transformation in the way that we think together to inform our actions.”

To move towards implementation of a learning process for transgender cultural competency and positive leadership for well-being, it would be a worthy endeavor to build partnerships, keep iterating, and facilitate conversations on this topic with a larger group of stakeholders as a hosted gathering. When groups of people gather in a room together “communal transformation takes its most visible form” (Block, 2018, p. 97).

I foresee efforts made by future cohorts of graduate students entering the Strategic Foresight and Innovation and Design for Health programs at OCAD University to increase engagement with transgender and gender non-conforming communities as partners and collaborative participants in major research projects and participatory workshops.

I personally glean from this project professional humility, honed skills and more sensitized judgement in research and prototyping for the betterment of a community. I have absorbed a magnitude of lessons about the workplace well-being experiences and perceptions of fellow transgender individuals. I find myself eager to continue exploring the meanings of well-being, and gaining knowledge, and hopefully some wisdom, by continuing to listen to transgender individuals share their experiences, understandings and aspirations.

“

Well-being often plays out in the liminal spaces between us, in our relationships, interactions, and expectations, in our common goals, hopes, and dreams.”

—Cherkowski et al., 2021, p.165

Definition of Key Terms and Concepts

GENDER AND TRANSGENDER RELATED

- **Cisgender or cis** individuals express a gender identity corresponding to their sex assigned at birth (Katz-Wise & Budge, 2015).
- **Cisgenderism** refers to the “cultural and systemic ideology that denies, denigrates, or pathologizes self-identified gender identities that do not align with assigned gender at birth” through endorsing and perpetuating bias against transgender identities and expressions (Lennon & Mistler, 2014, p. 63).
- **Cisnormativity** is the belief that transgender identities or bodies are less authentic or ‘normal.’ (Travers et al., 2013, p. 403).
- **Gender Expression** refers to how humans express gender identity through behaviors and actions such as attire, mannerisms, and speech. This is an overt choice and varies person-to-person, which commonly involves using a chosen name and pronoun (The 519, 2020, February).
- **Gender Identity** refers to a personal sense of self as fitting into a particular gender including but not limited to expressions of being “female/woman, male/man, or a person with a non-binary or other gender identity (e.g., genderqueer)” (Tebbe et al., 2016, p. 952).
- **Gender Non-Binary** is an umbrella term for gender identities that are beyond traditional male/man or female/woman binary categories (Nolan et al., 2019).
- **Gender Non-Conforming** individuals express a gender identity that is different from socially prescribed gender norms associated with their sex assigned at birth but “have not yet transitioned medically, or do not wish to (e.g. genderqueer, non-binary)” (MacKinnon, 2018, p. 80).
- **Gender Pronouns** are used by individuals to express their gender identity by choosing ones within a binary category (i.e., he/him/his and she/her/hers), or using a neutral singular form of they/them/their. New pronouns are being created and used, including zie/hir/hirs, xe/xem/xyr, ey/em/eir (Shotwell & Sheng, 2021).
- **LGBT2SQ** is an acronym for lesbian, gay, bisexual, transgender, Two-Spirit, queer identities.
- **Transgender or Trans individuals** express a gender identity that is different from socially prescribed gender norms associated with their sex assigned at birth (Katz-Wise & Budge, 2015).

WORKPLACE WELL-BEING, ITS OBSTACLES AND SUPPORTS

- **Frontline Occupation** refers to a field of employment and/or role within an organization featuring regular face-to-face interactions with people, such as students, patients, and customers. Social contact is at the heart of day-to-day job duties (Blau et al., 2021). Mostly found within the service and care sectors, frontline occupations include, but are not limited to: educators and healthcare workers; food-service, hospitality, transportation and protective service (police and EMS) providers; and in-person customer service providers (bank tellers, floor salespeople, etc.)
- **Optimal Well-being**, also known as flourishing, is a multidimensional wellness construct comprised of and measured by factors such as experiencing positive emotion, satisfaction, and happiness, as well as the pursuit of purpose and meaningful relationships in life (Prendergast et al., 2015).
- **Microaggressions** are harmful and derogatory, nonverbal or verbal messages communicated, with or without conscious intent to hurt, by any individual against a marginalized individual and/or group (Campbell, 2021).
- **Misgendering** includes using an incorrect gender pronoun (i.e., making a pronoun “slip”), gendering an otherwise neutral name, or denying someone access to their preferred gendered space (McLemore, 2015, p. 53). Misgendering as enacted stigma is ubiquitous and has the potential to shape how transgender-spectrum individuals feel, and how they value themselves and their social identity.
- **Sustainable Well-being** refers to an experience of wellness in life by engaging with others, feeling competent, exercising resilience, relating with others, belonging and contributing to one’s communities (Huppert, 2014).
- **Workplace Diversity, Equity, Inclusion (DEI)**. Diversity refers to observable demographic differences among groups of people (e.g. age, gender, race) and non-observable attributes (e.g. education, ability, culture), considered characteristic of a workgroup or organization. Equity means fairly enabling all members of the organization to access opportunities and achieve positive outcomes. Inclusion is the practice of fostering an organizational culture that cares for diverse groups as opposed to excluding or marginalizing them. This can be evidenced by employees’ perceptions that their unique contributions are appreciated and that they are encouraged to fully participate within their organization (Arsel et al., 2021; Mor Barak, 2015).

FUTURE STUDIES, DESIGN THINKING, SYSTEMS THINKING AND THEIR TOOLS

- **Design Thinking** is a problem-solving practice driven by an interest in human experiences, which draws its range of tools and frameworks from a variety of disciplines (Gobble, 2014).
- **Future Consciousness** refers to the skillful, flexible and articulate awareness that groups can develop together about the potential futures of present moments. This awareness links three natural orientations towards the future (represented by the Three Horizons) to a representation of change based on patterns. It is a workable structure within which to contemplate complex issues over time. Building a group's future consciousness will improve the effectiveness of its transformative discourse (Sharp, 2020).
- **Human-Centered Design (HCD)** is a system of problem-solving comprising three main steps: Inspiration, Ideation and Implementation. HCD posits that all problems can be solved, that the people who regularly face a problem hold the keys to its solution, and that researchers, policy planners and innovators can and should craft opportunities to deeply understand the people they're looking to understand or serve, "to dream up scores of ideas, and to create innovative new solutions rooted in people's actual needs" (IDEO, 2015, p. 9).
- **Inspiration Phase, HCD:** Investigators, problem-solvers and innovators open themselves to creative possibility and trust that "as long as you remain grounded in desires of the communities you're

engaging, your ideas will evolve into the right solutions" (IDEO Field Guide, 2015 p. 29). It is a phase of team building, becoming clear about the challenge, and learning from a diverse people. Answers will emerge to: "How do I get started? How do I conduct an interview? How do I keep people at the center of my research? What are other tools I can use to understand people?" (IDEO Field Guide, 2015 p. 29).

- **Ideation Phase, HCD:** The team shares learnings, makes sense of a vast amount of data and identifies opportunities for design. Generates many ideas, they discard some and keep pursuing others. Rough prototypes are built of solution-design ideas then shared with people who experience the problem under discussion. The team learns from the users' feedback to keep iterating, refining, and building until the solution is ready to be implemented more broadly. This phase helps answer: "How do I make sense of what I've learned? How do I turn my learnings into an opportunity for solution design? How do I make a prototype? How do I know my idea is working?" (IDEO Field Guide, 2015, p. 75).
- **Implementation Phase, HCD,** is when the team brings a designed, tested, iterated and refined solution to life. This is the phase for building partnerships, crafting a business model, piloting the solution and getting it out to market. This phase will help answer: How do I plan for what's next? How do I make my concept real? How do I assess to what extent this solution is working? (IDEO Field Guide, 2015, p. 133).
- **Knowledge Mobilization** is creating and sharing research-informed knowledge by undertaking a range of approaches to increase understanding of evidence,

underlying issues, and values through engagement and contributions from participants with different perspectives (Freebairn, 2017).

- **Three Horizons** is a thought-technique for organizational growth or improvement that imaginatively contemplates uncertain futures while retaining important features from the present. Typically drawn from a facilitated conversation with diverse stakeholders focused on sensemaking and strategic action, this model shows three lines on a graph. Each line represents one system, or action pattern within the area of study (e.g. how an organization operates, particular values in society, or the use of certain technologies) that corresponds to a time span: 1. present concerns, 2. transitional zone, and 3. the future. The horizontal axis represents time while the vertical axis represents value, as relative prevalence. Three Horizons practice creates space for shared creativity and awareness as the three related timelines expand into a collective view of the future (Sharpe, 2020).
- **Sensemaking** is the solitary or group thought process of rationalizing people's actions through retrospective development of plausible images. Viewed as a significant process of mental organization, sensemaking unfolds as a sequence of mental engagement in ongoing circumstances in order to extract cues that allow for a plausible understanding of events (Weick & Sutcliffe, 2005).
- **Strategic Foresight** is an "art-and-research discipline" that involves exploring plausible future scenarios in ways that facilitates our awareness of risks in the present, devising long-term plans, and

extrapolating "trends in innovation (products, services, experiences, and systems) to align with or lead the human needs and institutional changes among stakeholders" (Jones, 2013, p. 307).

- **System Archetypes** are a class of system-dynamics tools. Each archetype represents a storyline, pattern of behavior-over-time and systemic structure. When developed and considered during problem-solving, archetypes can uncover previously obscured resonances, dilemmas and other significant elements of the problem (Kim Anderson, 1998).
- **System Dynamics** is a branch of systems thinking developed to support the study of dynamic behavior in complex systems, drawing on a wide variety of disciplines to provide a common foundation for understanding and influencing how things change over time (Hjorth & Bagheri, 2006).
- **Systems Thinking** links structure to performance, and performance to structure—often to change structure (relationships) and improve performance. It is a mode of understanding reality that emphasizes the relationships among a system's parts, rather than the separate properties of each part (Hjorth & Bagheri, 2006).

11

Bibliography

- Abson, D.J., Fischer, J., Leventon, J., Newig, J., Schomerus, T., Vilsmaier, U., von Wehrden, H., Abernethy, P., Ives, C.D., Jager, N.W., Lang, D.J. (2017). Leverage points for sustainability transformation. *Ambio*, 46, 30–39.
- Ang, S.H., Cavanagh, J., Southcombe, A., Bartram, T., Marjoribanks, T., McNeil, N. (2017). Human resource management, social connectedness and health and well-being of older and retired men: The role of Men's Sheds. *The International Journal of Human Resource Management*, 28(14), 1986–2016. <https://doi.org/10.1080/09585192.2015.1088886>
- Ansara, Y. G., & Hegarty, P. (2012). Cisgenderism in psychology: Pathologising and misgendering children from 1999 to 2008. *Psychology and Sexuality*, 3(2), 137–160. <https://doi.org/10.1080/19419899.2011.576696>
- Austin, A., & Goodman, R. (2017). The Impact of Social Connectedness and Internalized Transphobic Stigma on Self-Esteem Among Transgender and Gender Non-Conforming Adults. *Journal of Homosexuality*, 64(6), 825–841. <https://doi.org/10.1080/00918369.2016.1236587>
- Arsel, Z., Crockett, D., & Scott, M. L. (2021). Diversity, equity, and inclusion (DEI) in the journal of consumer research: A curation and research agenda. *The Journal of Consumer Research*, 1–14. <https://doi.org/10.1093/jcr/ucab057>
- Ashbee, O. & Goldberg, J.M. (2006). *Trans Care: Getting Trans Competent Care*. Vancouver Coastal Health, Transcend Transgender Support & Education Society and Canadian Rainbow Health Coalition. <https://www.rainbowhealthontario.ca/resource-library/trans-care-getting-trans-competent-care/>
- Baboolall, D., Greenberg, S., Obeid, M. & Zucker, J. (2021, November 10). Being transgender at work. McKinsey & Company. <https://www.mckinsey.com/featured-insights/diversity-and-inclusion/being-transgender-at-work>
- Bauer, G. R., Braimoh, J., Scheim, A. I., & Dharma, C. (2017). Transgender-inclusive measures of sex/gender for population surveys: Mixed-methods evaluation and recommendations. *PLOS ONE*, 12(5), 1–28. <https://doi.org/10.1371/journal.pone.0178043>
- Bauer, G., & Scheim, A. I. (2015). Transgender people in Ontario, Canada: Statistics from the Trans PULSE project to inform human rights policy. <https://transpulseproject.ca/wp-content/uploads/2015/06/Trans-PULSE-Statistics-Relevant-for-Human-Rights-Policy-June-2015.pdf>
- Bauerband, L. A., Teti, M., & Velicer, W. F. (2019). Measuring minority stress: Invariance of a discrimination and vigilance scale across transgender and cisgender LGBQ individuals. *Psychology & Sexuality*, 10(1), 17–30. <https://doi.org/10.1080/19419899.2018.1520143>
- Beauregard, T.A., Arevshatian, L., Booth, J. E., & Whittle, S. (2016). Listen carefully: Transgender voices in the workplace. *The International Journal of Human Resource Management*, 29(5), 857–884. <https://doi.org/10.1080/09585192.2016.1234503>

- Bernstein, M. J., Claypool, H. M., Nadzan, M. A., Schuepfer, K., Benfield, J. A., & Nutt, R. J. (2019). Validating the state motivation to foster social connections scale. *The Journal of Social Psychology*, 159(6), 709–724. <https://doi.org/10.1080/00224545.2018.1558882>
- Blau, F. D., Koebe, J., & Meyerhofer, P. A. (2021). Who are the essential and frontline workers? *Business Economics*, 56(3), 168–178. <https://doi-org.ocadu.idm.oclc.org/10.1057/s11369-021-00230-7>
- Block, P. (2018). *Community: The structure of belonging* (2nd edition). Berrett-Koehler Publishers.
- Bourns, A. (2019). *Guidelines for gender-affirming primary care with trans and non-binar patients* (4th edition). Rainbow Health Ontario (RHO) Sherbourne Health, Clinical Practice Publication. <https://www.rainbowhealthontario.ca/wp-content/uploads/2021/06/Guidelines-FINAL-4TH-EDITION-c.pdf>
- Blodgett, N., Coughlan, R., & Khullar, N. (2017). Overcoming the barriers in transgender healthcare in rural Ontario: Discourses of personal agency, resilience, and empowerment. *International Social Science Journal*, 67(225–226), 83–95. <https://doi.org/10.1111/issj.12162>
- Bradford, N. J., Rider, G. N., Catalpa, J. M., Morrow, Q. J., Berg, D. R., Spencer, K. G., & McGuire, J. K. (2019). Creating gender: A thematic analysis of genderqueer narratives. *International Journal of Transgenderism*, 20(2–3), 155–168. <https://doi.org/10.1080/15532739.2018.1474516>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Braun, V., & Clarke, V. (2014). What can “thematic analysis” offer health and well-being researchers? *International Journal of Qualitative Studies on Health and Well-Being*, 9(1), 26152. <https://doi.org/10.3402/qhw.v9.26152>
- Bry, L. J., Mustanski, B., Garofalo, R., & Burns, M. N. (2018). Resilience to discrimination and rejection among young sexual minority males and transgender females: A qualitative study on coping with minority stress. *Journal of Homosexuality*, 65(11), 1435–1456. <https://doi.org/10.1080/00918369.2017.1375367>
- Buspavanich P, Lech S, Lerner E, Fischer M, Berger M, et al. (2021) Well-being during COVID-19 pandemic: A comparison of individuals with minoritized sexual and gender identities and cis-heterosexual individuals. *PLOS ONE*, 16(6), 1–16. <https://doi.org/10.1371/journal.pone.0252356>
- Calloway-Thomas, C. (2018). Empathy: A Global Imperative for Peace. *College Music Society*, 58(3), 1–7. <https://www.jstor.org/stable/26608535>
- Campbell, J. (2021). Microaggressions. In A. E. Goldberg, & G. Beemyn (Eds.), *The SAGE encyclopedia of trans studies*. Sage Publications.
- Canadian Council on Social Determinants of Health. (2015). A review of frameworks on the determinants of health. National Collaborating Centre for Determinants of Health. <https://nccdh.ca/resources/entry/a-review-of-frameworks-on-the-determinants-of-health>
- Ceatha, N., Mayock, P., Campbell, J., Noone, C., & Browne, K. (2019). The power of recognition: A qualitative study of social connectedness and well-being through LGBT sporting, creative and social groups in Ireland. *International Journal of Environmental Research and Public Health*, 16(19), 1–18. <https://doi.org/10.3390/ijerph16193636>
- Cherkowski, S., Kutsyuruba, B., Walker, K., & Crawford, M. (2021). Conceptualising leadership and emotions in higher education: Well-being as wholeness. *Journal of Educational Administration and History*, 53(2), 158–171. <https://doi.org/10.1080/00220620.2020.1828315>
- Clarke, V., & Braun, V. (2017). Thematic analysis. *The Journal of Positive Psychology*, 12(3), 297–298. <https://doi.org/10.1080/17439760.2016.1262613>
- Colvin, R. A. (2007). The rise of transgender-inclusive laws: How well are municipalities implementing supportive nondiscrimination public employment policies? *Review of Public Personnel Administration*, 27(4), 336–360. <https://doi.org/10.1177/1077800407301777>
- Cosco, T. D., Howse, K., & Brayne, C. (2017). Healthy ageing, resilience and well-being. *Epidemiology and Psychiatric Sciences*, 26(6), 579–583. <https://doi.org/10.1017/S2045796017000324>
- Crossan, M.M., Rouse, M.J., Rowe, W.G., Maurer, C.C. (2016). *Strategic analysis and action* (9th edition). Library and Archives Canada Cataloguing in Publication.
- Crowe, M., Inder, M., Porter, R. (2015). Conducting qualitative research in mental health: Thematic and content analyses. *Australian & New Zealand Journal of Psychiatry*, 49(7), 616–623. <https://doi.org/10.1177/0004867415582053>
- Curry, A. & Hodgson, A. (2008). Seeing in multiple horizons: Connecting futures to strategy. *Journal of Futures Studies*, 13(1), 1–20.
- Czyzewski, K. (2011). Colonialism as a broader social determinant of health. *The International Indigenous Policy Journal*, 2(1), 1–14. <http://ir.lib.uwo.ca/iipj/vol2/iss1/5>
- Davies, A. W. J., Vipond, E., & King, A. (2019). Gender binary washrooms as a means of gender policing in schools: A Canadian perspective. *Gender and Education*, 31(7), 866–885. <https://doi.org/10.1080/09540253.2017.1354124>
- Davis, M. (2020). The “culture” in cultural competence. In Frawley J., Russell G., Sherwood J. (Eds.), *Cultural competence and the higher education sector: A journey in the academy* (pp. 15–29). https://doi.org/10.1007/978-981-15-5362-2_1
- DeGagne, A. (2021). Protecting cisnormative private and public spheres: The Canadian conservative denunciation of transgender rights. *Studies in Social Justice*, 15(3), 497–517. <https://doi.org/10.26522/ssj.v15i3.2440>
- Delaney, N. & McCann, E. (2020). A phenomenological exploration of transgender people’s experiences of mental health services in Ireland. *Journal of Nursing Management*, 29(1), 68–74. <https://doi.org/10.1111/jonm.13115>

- Department of Finance Canada (2021, April 19). Measuring what matters: Toward a quality of life strategy for Canada. <https://www.canada.ca/en/department-finance/services/publications/measuring-what-matters-toward-quality-life-strategy-canada.html>
- Divan, V., Cortez, C., Smelyanskaya, M., & Keatley, J. (2016). Transgender social inclusion and equality: A pivotal path to development. *Journal of the International AIDS Society*, 19 (Suppl 2), 1-6. <https://doi.org/10.7448/IAS.19.3.20803>
- Dolan, I. J., Strauss, P., Winter, S., & Lin, A. (2020). Misgendering and experiences of stigma in health care settings for transgender people. *Medical Journal of Australia*, 212(4), 150-151.e1. <https://doi.org/10.5694/mja2.50497>
- Elo, S., & Kyngäs, H. (2008). The qualitative content analysis process. *Journal of Advanced Nursing*, 62(1), 107-115. <https://doi.org/10.1111/j.1365-2648.2007.04569.x>
- Evans, S., Crawley, J., Kane, D., & Edmunds, K. (2021). The process of transitioning for the transgender individual and the nursing imperative: A narrative review. *Journal of Advanced Nursing*, 77(12), 4646-4660. <https://doi.org/10.1111/jan.14943>
- Eyssel, J., Koehler, A., Dekker, A., Sehner, S., & Nieder, T. O. (2017). Needs and concerns of transgender individuals regarding interdisciplinary transgender healthcare: A non-clinical online survey. *PLOS ONE*, 12(8), 1-26. <https://doi.org/10.1371/journal.pone.0183014>
- Freebairn, L., Rychetnik, L., Atkinson, J.A., Kelly, P., McDonnell, G., Roberts, N., Whittall, C., & Redman, S. (2017). Knowledge mobilisation for policy development: Implementing systems approaches through participatory dynamic simulation modelling. *Health Research Policy and Systems*, 15(1), 1-12. <https://doi.org/10.1186/s12961-017-0245-1>
- Gobble, M. M. (2014). Design thinking. *Research Technology Management*, 57(3), 59-62. <https://doi.org/10.5437/08956308X5703005>
- Garneau, A.B. & Pepin, J. (2015). Cultural Competence: A constructivist definition. *Journal of Transcultural Nursing*, 26(1), 9-15. <https://doi.org/10.1177/1043659614541294>
- Garofalo, R., & Schilling, J. L. (2017). Transgender Health Accepted for Indexing in PubMed Central and Inclusion in PubMed. *Transgender Health*, 2(1), 80-80. <https://doi.org/10.1089/trgh.2017.29001.rga>
- Gaskins L.C., & McClain C.R. (2021) Visible name changes promote inequity for transgender researchers. *PLOS Biology*, 19(3), 1-4. <https://doi.org/10.1371/journal.pbio.3001104>
- Gemmill, A. (2021, May 7). New gender questions in 2021 census 'a good start', transgender, non-binary advocates say. *CBC News*. <https://www.cbc.ca/news/canada/sudbury/gender-questions-2021-census-sudbury-1.6017153>
- Giblon, R. & Bauer, G.R. (2017). Health care availability, quality, and unmet need: a comparison of transgender and cisgender residents of Ontario, Canada. *BMC Health Services Research*, 17(1), 1-10. <https://doi.org/10.1186/s12913-017-2226-z>
- Gonzales, E. (2020). *Exhibitions for Social Justice* (1st edition). Routledge. <https://doi.org/10.4324/9781315232812>
- Grant, J.M., Mottet, L.A., Tanis, J., Harrison, J., Herman, J.L., & Keisling, M. (2011). *Injustice at every turn: A report of the national transgender discrimination survey*. Washington: National Center for Transgender Equality and National Gay and Lesbian Task Force. <https://www.thetaskforce.org/injustice-every-turn-report-national-transgender-discrimination-survey/>
- Hatzenbuehler, M.L., & Link, B.G. (2014). Introduction to the special issue on structural stigma and health. *Social Sciences and Medicine*, 103, 1-6. <https://doi.org/10.1016/j.socscimed.2013.12.017>
- Helne, T., & Hirvilammi, T. (2015). Well-being and Sustainability: A Relational Approach. *Sustainable Development*, 23(3), 167-175. <https://doi.org/10.1002/sd.1581>
- Henrickson, M., Giwa, S., Hafford-Letchfield, T., Cocker, C., Mulé, N. J., Schaub, J., & Baril, A. (2020). Research Ethics with Gender and Sexually Diverse Persons. *International Journal of Environmental Research and Public Health*, 17(18), 1-13. <https://doi.org/10.3390/ijerph17186615>
- Hjorth, P., & Bagheri, A. (2006). Navigating towards sustainable development: A system dynamics approach. *Futures*, 38(1), 74-92. <https://doi.org/10.1016/j.futures.2005.04.005>
- Hossain, M., Atif, M., Ahmed, A., Mia, L. (2020). Do LGBT workplace diversity policies create value for firms?. *Journal of Business Ethics*, 4(10), 775-791. <https://doi.org/10.1007/s10551-019-04158-z>
- Huezo, M., & Collins, S. (2019). "It's about human connection": Transgender community wisdom to inform practice. *Canadian Journal of Counselling and Psychology*, 53(2), 147-168. <https://cjc-rcc.ucalgary.ca/article/view/61216>
- Huppert, F. A. (2014). The State of Well-being Science: Concepts, Measures, Interventions, and Policies. In C. L. Cooper (Ed.), *Well-being* (pp. 1-49). John Wiley & Sons, Ltd. <https://doi.org/10.1002/9781118539415.wbwell036>
- IDEO (2015). *The field guide to human-centered design: Design kit* (1st edition). IDEO.org.
- Ifeagwazi, C.M., Chukwuorji, J.C. & Zacchaeus, E.A. (2015). Alienation and Psychological Well-being: Moderation by Resilience. *Social Indicators Research*, 120, 525-544. <https://doi.org/10.1007/s11205-014-0602-1>
- Irving, D. (2013). Against the grain: Teaching Transgender Human Rights. *Sexualities*, 16(3/4), 319-335. <https://doi.org/10.1177/1363460713479746>
- Irving, D. & Hoo, N. (2020). Doing Trans-Economic Justice: A critique of anti-discrimination laws and inclusive employment policies. *Canadian Journal of Law and Society*, 35(2), 197-220. <https://doi.org/10.1017/cls.2020.15>
- Jawad, M., Maroof, Z., & Naz, M. (2021). Impact of pandemic COVID-19 on global economies (a seven-scenario analysis). *Managerial and Decision Economics*, 42(7), 1897-1908. <https://doi.org/10.1002/mde.3337>

- Jones, K. N., Hoover, S., Glaeser, E., Woods, C. J., Clark, M., & Brewster, M. (2021). Thematic qualitative content analysis of cis-het allies' activism: perceptions of igniting events and barriers to activism. *Journal of Homosexuality*, 1–23. <https://doi.org/10.1080/00918369.2021.1917220>
- Jones, P. (2013). Design for care: Innovating healthcare experience. Rosenfeld.
- Jones, P. (2017). The futures of Canadian governance: Foresight competencies for public administration in the digital era. *Canadian Public Administration*, 60(4), 657–681. <https://doi.org/10.1111/capa.12241>
- Kapusta, S.J. (2016). Misgendering and it's moral contestability. *Hypatia A Journal of Feminist Philosophy*, 31(3), 502–519. <https://doi.org/10.1111/hypa.12259>
- Kimbell, L. (2014). The service innovation handbook. BIS Publishers.
- Katz-Wise, S. L., & Budge, S. L. (2015). Cognitive and interpersonal identity processes related to mid-life gender transitioning in transgender women. *Counselling Psychology Quarterly*, 28(2), 150–174. <https://doi.org/10.1080/09515070.2014.993305>
- Kellett, P., & Fitton, C. (2017). Supporting transvisibility and gender diversity in nursing practice and education: embracing cultural safety. *Nursing Inquiry*, 24(1), 1–7. <https://doi.org/10.1111/nin.12146>
- Kennedy, J. T. (2021). Belonging: the secret to building engagement for employees of all backgrounds. *Leader to Leader*, 2021(99), 45–51. <https://doi.org/10.1002/ltl.20552>
- Kim, D.H. & Anderson, V. (1998). Systems archetype basics: From story to structure. Pegasus Communications, Inc.
- Lennon, E. & Mistler, B.J. (2014). Cisgenderism. *TSQ: Transgender Studies Quarterly*, 1(1–2), 63–64. <https://doi.org/10.1215/23289252-2399623>
- Leung, S.-O. (2011). A Comparison of Psychometric Properties and Normality in 4-, 5-, 6-, and 11-Point Likert Scales. *Journal of Social Service Research*, 37(4), 412–421. <https://doi.org/10.1080/01488376.2011.580697>
- Levitt, H. M., & Ippolito, M. R. (2014). Being transgender: Navigating minority stressors and developing authentic self-presentation. *Psychology of Women Quarterly*, 38(1), 46–64. <https://doi.org/10.1177/0361684313501644>
- Li, S., Marsaglia, N., Garth, C., Woodring, J., Clyne, J., & Childs, H. (2018). Data reduction techniques for simulation, visualization and data analysis: Survey on scientific data reduction techniques. *Computer Graphics Forum*, 37(6), 422–447. <https://doi.org/10.1111/cgf.13336>
- Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology*, 27(1), 363–385. <https://doi.org/10.1146/annurev.soc.27.1.363>
- Litchfield, P., Cooper, C., Hancock, C., & Watt, P. (2016). Work and well-being in the 21st century *International Journal of Environmental Research and Public Health*, 13(11), 1–11. <https://doi.org/10.3390/ijerph13111065>
- Lopez-Martin, E. & Topa, G. (2019). Organizational culture and job demands and resources: Their Impact on employees' well-being in a multivariate multilevel model. *International Journal of Environmental Research and Public Health*, 16(17), 1–17. <https://doi.org/10.3390/ijerph16173006>
- MacKinnon, K.R. (2018). Pathologising trans people: Exploring the roles of patients and medical personnel. *Theory in Action*, 11(4), 74–96.
- Martin, J. I., & Meezan, W. (2003). Applying Ethical Standards to Research and Evaluations Involving Lesbian, Gay, Bisexual, and Transgender Populations. *Journal of Gay & Lesbian Social Services*, 15(1–2), 181–201. https://doi.org/10.1300/J041v15n01_12
- Martinez-Velez, J. J., Melin, K., & Rodriguez-Diaz, C. E. (2019). A preliminary assessment of selected social determinants of health in a sample of transgender and gender nonconforming individuals in puerto rico. *Transgender Health*, 4(1), 9–17. <https://doi.org/10.1089/trgh.2018.0045>
- Martino, W., Airton, L., Kuhl, D., & Cumming-Potvin, W. (2019). Mapping transgender policyscapes: A policy analysis of transgender inclusivity in the education system in Ontario. *Journal of Education Policy*, 34(3), 302–330. <https://doi.org/10.1080/02680939.2018.1478992>
- Matsuno, E., & Israel, T. (2018). Psychological interventions promoting resilience among transgender individuals: Transgender Resilience Intervention Model (TRIM). *The Counseling Psychologist*, 46(5), 632–655. <https://doi.org/10.1177/0011000018787261>
- Meadows, D.H. (1999). Leverage points: Places to intervene in a system. The Sustainability Institute, 1–19.
- Meyer, I. H. (2015). Resilience in the study of minority stress and health of sexual and gender minorities. *Psychology of Sexual Orientation and Gender Diversity*, 2(3), 209–213. <https://doi.org/10.1037/sgd0000132>
- Meyer, B., Zill, A., Dilba, D., Gerlach, R., & Schumann, S. (2021). Employee psychological well-being during the COVID-19 pandemic in Germany: A longitudinal study of demands, resources, and exhaustion. *International Journal of Psychology*, 56(4), 532–550. <https://doi.org/10.1002/ijop.12743>
- McGlade, C. (2019). Transaction works: Feasibility study. Private sector proposal paper. Accessed with authors permission.
- McFadden, C. (2015). Lesbian, gay, bisexual, and transgender careers and human resource development: A systematic literature review. *Human Resource Development Review*, 14(2), 125–162. <https://doi.org/10.1177/1534484314549456>

- McGuire, J. K., Okrey Anderson, S., & Michaels, C. (2021). "I don't think you belong in here:" The impact of gender segregated bathrooms on the safety, health, and equality of transgender people. *Journal of Gay & Lesbian Social Services*, 1–23. <https://doi.org/10.1080/10538720.2021.1920539>
- McLemore, K. A. (2015). Experiences with misgendering: Identity misclassification of transgender spectrum individuals. *Self and Identity*, 14(1), 51–74. <https://doi.org/10.1080/15298868.2014.950691>
- Mor Barak, M. E. (2015). Inclusion is the key to diversity management, but what is inclusion? *Human Service Organizations Management, Leadership & Governance*, 39(2), 83–88. <https://doi.org/10.1080/23303131.2015.1035599>
- Mulé, N.J., Ross, L.E., Deeprose, B., Jackson, B.E., Dalye, A., Travers, A., & Moore, D. (2009). Promoting LGBT health and well-being through inclusive policy development. *International Journal for Equity in Health*, 8(18), 1–11. <https://doi.org/10.1186/1475-9276-8-18>
- Muhajarine, N., Labonte, R., Winquist, B.D. (2012). The Canadian Index of Well-being: Key finding from the healthy populations domain. *Canadian Journal of Public Health*, 103(5), 342–347. <https://doi.org/10.1007/BF03404438>
- Murray, D.G. (2016). *Tableau your data! Fast and easy visual analysis with tableau software* (2nd edition.) John Wiley & Sons, Inc.
- Myerson, J. (2014). Workplace and well-being. In Cooper, R., Burton, E., & Copper, C.L. (Eds.), *Well-being: A complete reference guide*, Volume II (pp.373–389). John Wiley & Sons, Ltd.
- Nagoshi, J. L., Brzuzy, S., & Terrell, H. K. (2012). Deconstructing the complex perceptions of gender roles, gender identity, and sexual orientation among transgender individuals. *Feminism & Psychology*, 22(4), 405–422.
- Nelson v. Goodberry Restaurant Group Ltd. dba Buono Osteria and others, 2021 BCHRT 137. <https://www.canlii.org/en/bc/bchrt/doc/2021/2021bchrt137/2021bchrt137.html#document>
- Nolan, I. T., Kuhner, C. J., & Dy, G. W. (2019). Demographic and temporal trends in transgender identities and gender confirming surgery. *Translational Andrology and Urology*, 8(3), 184–190. <https://doi.org/10.21037/tau.2019.04.09>
- O'Neil, M. E., McWhirter, E. H., & Cerezo, A. (2008). transgender identities and gender variance in vocational psychology: Recommendations for practice, social advocacy, and research. *Journal of Career Development*, 34(3), 286–308. <https://doi.org/10.1177/0894845307311251>
- Ozturk, M.B. & Tatli, A. (2016). Gender identity inclusion in the workplace: broadening diversity management research and practice through the case of transgender employees in the UK. *The International Journal of Human Resource Management*. 27(8), 781–802. <https://doi.org/10.1080/09585192.2015.1042902>

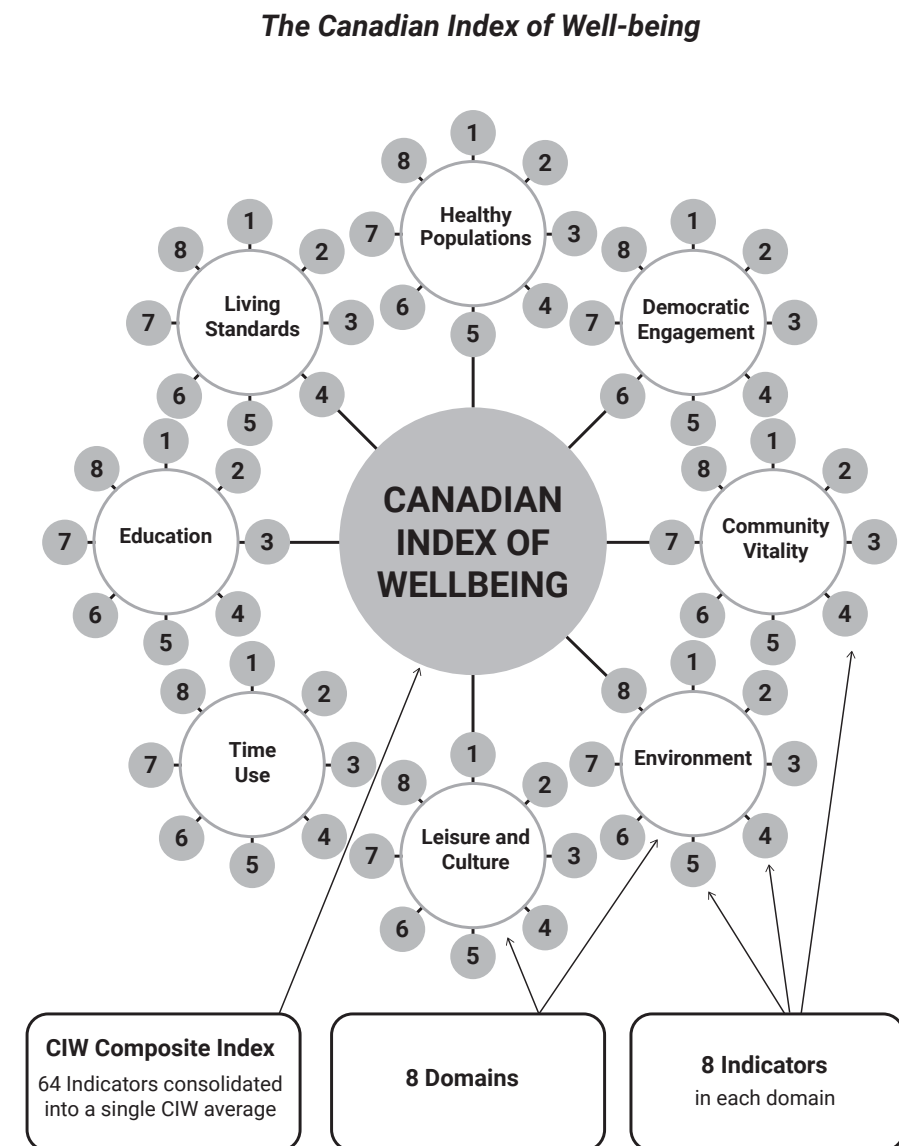
- Pal, I., Galinsky, E., & Kim, S. (2021). Employee health and well-being after a crisis – re-imagining the role of workplace inclusion. *Community, Work & Family*, 1–33. <https://doi.org/10.1080/13668803.2021.1987859>
- Pitts, M.K., Couch, M., Mulcare, H., Croy, S., & Mitchell, A. (2009). Transgender people in Australia and New Zealand: Health, well-being and access to health services. *Feminism & Psychology*, 19(4), 475–495. <https://doi.org/10.1177/0959353509342771>
- Pollard, C. A., Morran, M. P., & Nestor-Kalinoski, A. L. (2020). The COVID-19 pandemic: A global health crisis. *Physiological Genomics*, 52(11), 549–557. <https://doi.org/10.1152/physiolgenomics.00089.2020>
- Prendergast, K. B., Schofield, G. M., & Mackay, L. M. (2015). Associations between lifestyle behaviours and optimal well-being in a diverse sample of New Zealand adults. *BMC Public Health*, 16(62), 1–11. <https://doi.org/10.1186/s12889-016-2755-0>
- Prilleltensky, I., Dietz, S., Prilleltensky, O., Myers, N. D., Rubenstein, C. L., Jin, Y., & McMahon, A. (2015). Assessing multidimensional well-being: Development and validation of the I COPPE Scale. *Journal of Community Psychology*, 43(2), pp. 199–226. <https://doi.org/10.1002/jcop.21674>
- Reisner, S. L., Poteat, T., Keatley, J., Cabral, M., Mothopeng, T., Dunham, E., Holland, C. E., Max, R., & Baral, S. D. (2016). Global health burden and needs of transgender populations: A review. *The Lancet*, 388(10042), 412–436. [https://doi.org/10.1016/S0140-6736\(16\)00684-X](https://doi.org/10.1016/S0140-6736(16)00684-X)
- Ristock, J., Zoccole, A., Passante, L., & Potskin, J. (2019). Impacts of colonization on indigenous two-Spirit/LGBTQ Canadians' experiences of migration, mobility and relationship violence. *Sexualities*, 22(5–6), 767–784. <https://doi.org/10.1177/1363460716681474>
- Robertson, I. T., Cooper, C. L., Sarkar, M., & Curran, T. (2015). Resilience training in the workplace from 2003 to 2014: A systematic review. *Journal of Occupational and Organizational Psychology*, 88(3), 533–562. <https://doi.org/10.1111/joop.12120>
- Rosich, G.R. (2017). *Employment discrimination among people who are transgender and gender con-conforming: A mixed secondary data analysis*. [Doctoral dissertation, Fordham University]. ProQuest. https://con-te-stare-transgender.it/wp-content/uploads/2020/02/Employment_Discrimination_Among_People_W.pdf
- Schilt, K., & Connell, C. (2007). Do workplace gender transitions make gender trouble? *Gender, Work & Organization*, 14(6), 596–618. <https://doi.org/10.1111/j.1468-0432.2007.00373.x>
- Sears, L. E., Shi, Y., Coberley, C. R., & Pope, J. E. (2013). Overall well-being as a predictor of health care, productivity, and retention outcomes in a large employer. *Population Health Management*, 16(6), 397–405. <https://doi.org/10.1089/pop.2012.0114>
- Sevelius, J. M., Chakravarty, D., Dilworth, S. E., Rebchook, G., & Neilands, T. B. (2020). Gender affirmation through correct pronoun usage: Development and validation of the transgender women's importance of pronouns (tw-ip) scale. *International Journal of Environmental*

- Sevelius, J. M., Chakravarty, D., Dilworth, S. E., Rebchook, G., & Neilands, T. B. (2020). Gender affirmation through correct pronoun usage: Development and validation of the transgender women's importance of pronouns (tw-ip) scale. *International Journal of Environmental Research and Public Health*, 17(24), 1-13. <https://doi.org/10.3390/ijerph17249525>
- Shaikh, S., Mburu, G., Arumugam, V., Mattipalli, N., Aher, A., Mehta, S., & Robertson, J. (2016). Empowering communities and strengthening systems to improve transgender health: Outcomes from the Penchan programme in India. *Journal of the International AIDS Society*, 19(3 Suppl 2), 1-9. <https://www.ncbi.nlm.nih.gov/pubmed/27431474>
- Sharpe, B. (2020). *Three Horizons: The patterning of hope* (2nd edition.). Triarchy Press.
- Sharpe, B., Hodgson, A., Leicester, G., Lyon, A., & Fazey, I. (2016). Three horizons: A pathways practice for transformation. *Ecology and Society*, 21(2), 47-58. <https://doi.org/10.5751/ES-08388-210247>
- Shore, L. M., Randel, A. E., Chung, B. G., Dean, M. A., Holcombe Ehrhart, K., & Singh, G. (2011). Inclusion and Diversity in Work Groups: A Review and Model for Future Research. *Journal of Management*, 37(4), 1262-1289. <https://doi.org/10.1177/0149206310385943>
- Shotwell, S., & Sheng, L. (2021). Making a case for studying gender-neutral pronouns in speech-language pathology. *Language, Speech, and Hearing Services in Schools*, 52(4), 1141-1145. https://doi.org/10.1044/2021_LSHSS-21-00021
- Smith, J. (2017). What is empathy for? *Synthese*, 194(3), 709-722. <https://doi.org/10.1007/s11229-015-0771-8>
- Sundus, A., Shahzad, S., & Younas, A. (2021). Ethical and culturally competent care of transgender patients: A scoping review. *Nursing Ethics*, 28(6), 1041-1060. <https://doi.org/10.1177/0969733020988307>
- Stein, S., Westecott, E., Gardner, P., Sharrock, J. (2016). *Fem-LED digital enterprise: Research report summary*, 1-122. Super Ordinary Laboratory. OCAD University.
- Tallini, A. (2011). Health is state of well-being. *BMJ: British Medical Journal*, 343(7821), 435-436. <http://www.jstor.org/stable/23051980>
- Tebbe, E.A. & Budge, S.L. (2016). Research with trans communities: Applying a process-oriented approach to methodological considerations and research recommendations. *The Counseling Psychologist*, 44(7), 996-1024. <https://doi.org/10.1177/0011000015609045>
- Tebbe, E. A., Moradi, B., & Budge, S. L. (2016). Enhancing Scholarship Focused on Trans People and Issues. *The Counseling Psychologist*, 44(7), 950-959. <https://doi.org/10.1177/0011000015608950>
- Thoroughgood, C.N., Sawyer, K.B., & Webster, J.R. (2020, March-April). Creating a trans-inclusive workplace: How to make transgender employees feel valued at work. *Harvard Business Review: LGBT Rights*, <https://hbr.org/2020/03/creating-a-trans-inclusive-workplace>.
- The 519 (2020, February). Gender Expression. Online Glossary of Terms. Retrieved from <https://www.the519.org/education-training/glossary>
- Travers, R., Pyne, J., Bauer, G., Munro, L., Giambrone, B., Hammond, R., & Scalton, K. (2013). 'Community control' in CBPR: Challenges experienced and questions raised from the Trans PULSE project. *Action Research*, 11(4), 403-422. <https://doi.org/10.1177/1476750313507093>
- Van de Cauter, J., Van Schoorisse, H., Van de Velde, D., Motmans, J., & Braeckman, L. (2021). Return to work of transgender people: A systematic review through the blender of occupational health. *PloS One*, 16(11), 1-43. <https://doi.org/10.1371/journal.pone.0259206>
- Vincent, B. W. (2018). Studying trans: Recommendations for ethical recruitment and collaboration with transgender participants in academic research. *Psychology & Sexuality*, 9(2), 102-116. <https://doi.org/10.1080/19419899.2018.1434558>
- Waite, S. (2021). Should I stay or should I go? Employment discrimination and workplace harassment against transgender and other minority employees in Canada's federal public service. *Journal of Homosexuality*, 68(11), 1833-1859. <https://doi.org/10.1080/00918369.2020.1712140>
- Wasilewski, M. B., Stinson, J. N., Webster, F., & Cameron, J. I. (2019). Using Twitter to recruit participants for health research: An example from a caregiving study. *Health Informatics Journal*, 25(4), 1485-1497. <https://doi.org/10.1177/1460458218775158>
- Weick, K.E. & Sutcliffe, K.M. (2005). Organizing and the process of sensemaking. *Organization Science*, 16(4), 409-421. <https://www.jstor.org/stable/25145979>
- Wexler, S. (2018, May 2). Getting your survey data "just so" using Tableau Prep. *Data Revelation*. <https://www.datarevelations.com/tableau-prep/>
- Whittle, S., Turner, L., Al-Alami, M., Rundall, E., & Thom, B. (2007). Engendered Penalties: Transgender and Transsexual People's Experiences of Inequality and Discrimination. *The Equalities Review*, 1-120. <http://www.pfc.org.uk/pdf/EngenderedPenalties.pdf>
- Wilkinson, W. (2014). Cultural competency. *TSQ: Transgender Studies Quarterly*, 1(1-2), 68-73. <https://doi.org/10.1215/23289252-2399641>
- Wilson, C. & Cariola, L.A. (2020). LGBTQI+ youth and mental health: A systemic review of qualitative research. *Adolescent Research Review*, 5, 187-211. <https://doi.org/10.1007/s40894-019-00118-w>
- Wilson, D., & Neville, S. (2009). Culturally safe research with vulnerable populations. *Contemporary Nurse*, 33(1), 69-79. <https://doi.org/10.5172/conu.33.1.69>
- Wu, H., & Leung, S-O. (2017). Can Likert Scales be Treated as Interval Scales?—A Simulation Study. *Journal of Social Service Research*, 43(4), 527-532. <https://doi.org/10.1080/01488376.2017.1329775>
- Zoch, G., Bächmann, A., & Vicari, B. (2021). Reduced well-being during the COVID-19 pandemic – The role of working conditions. *Gender, Work & Organization*, 1-22. <https://doi.org/10.1111/GWAO.12777>

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Appendices

Appendix A: Canadian Index of Well-Being (CIW) framework from Towards a Quality of Life Strategy for Canada by Department of Finance (2021, p. 28)



The Canadian Index of Well-being (CIW) is perhaps the most well-known domestic well-being framework.

In the 2000s, the Atkinson Foundation convened a group of experts and researchers to develop the CIW in consultation with Canadians. The framework is currently managed by a team at the University of Waterloo.

The CIW is comprised of 64 indicators clustered within 8 domains. The indicators are consolidated into a single index that is tracked over time, with equal weight given to each indicator.

Some jurisdictions in Canada are currently using the CIW in practice as a tool to assess well-being.

For more information, see the CIW website: <https://uwaterloo.ca/canadian-index-wellbeing/>

Appendix B: Management of Confidential Information

Management of Confidential Information
<p>Files and raw data were managed remotely from a single-user MacOS desktop at home. My computer had an active firewall to prevent unauthorized applications, programs, and services from accepting incoming connections. Its internal hard drive was kept encrypted and password protected. All email access was handled by 2-factor authentication. At all times, I used FileZilla to ensure a Secure File Transfer Protocol (FTP) when transferring files to and from my personal web-accessible directory on the restricted (monitored) OCADU web server. Secure FTP (“a protocol”) provided encryption to protect my password and the data transferred between my computer and the web server.</p> <p>My internet connections were kept safe and private through a Virtual Private Network (VPN) subscription. This protected my computer’s identity or IP address, also secured data by encrypting passwords and content. I used a privacy-focused search engine browser extension, known as DuckDuckGo for Google and Firefox. I routinely cleared my operating system library of caches, browser history, and frequently emptied trash bin. Any raw data on my Mac hard drive was permanently removed from root directory by running terminal commands.</p> <p>The QuickTime Player application was used to playback interview audio (mp3) recordings at various speeds through a Bluetooth headset. After each use, all mp3 recordings were cleared from the ‘open recent menu’ and no copies were retained in a cloud-based library. All raw interview and survey data was synchronized to a secured Microsoft DataOne Drive with restricted access and monitored by OCAD University. This provided the systems, processes, and personnel to reduce the likelihood of personal data breach and to quickly detect and mitigate consequences if breach occurred.</p> <p>Participants were informed that access to raw data would be restricted to myself and both research advisors. To ensure the highest level of privacy and confidentiality, I was the only person to access and handle all raw data during the entire duration of the research study.</p>

Appendix C: Summary of Interview Participants and Survey Respondents

Summary of Interview Participants		
Age range	20-50 years old	
Gender Identity	Transgender Male, Transgender Non-binary, Transgender Woman	
Frontline occupation	Education – Teacher of School Board, teaching students in classroom and online Healthcare – Healthcare professional, treating patients in hospital Commercial Retail – Assistant Manager of commercial retail store, assisting customer services and managing operations	
Transitioning	> 6 months, all participants undergoing various levels of social, legal, and medical transition (e.g., using new pronouns, name changes, hormone replacement therapy, and future aspirations of undergoing gender affirming surgery)	

Summary of Survey Respondents: Age Category, Occupations, Gender Identity, Pronouns		
Age Category	Current Occupations: Four individuals reported having full-time frontline occupations, aged 21 to 49 years old.	
18-20	Not currently employed (1)	
21-29	Full-time job (4); full-time student (1); student (1); contract work, student (1)	
30-39	Full-time job (2); permanent job (1); self-employed (1)	
40-49	Full-time job (1); contract work (1)	
50-59	Full-time job (1)	

Gender Identity	Pronoun	Sample Size
Non-Binary	They/Them	5
	They/Them, She/Her	1
Transgender Female (MTF)	She/Her	3
Transgender Male (FTM)	They/Them, He/Him	2
Gender Non-Conforming	She/Her	1
	They/Them, She/Her	1
Null	He/Him	1
	She/Her	1
Total Survey Participants		15

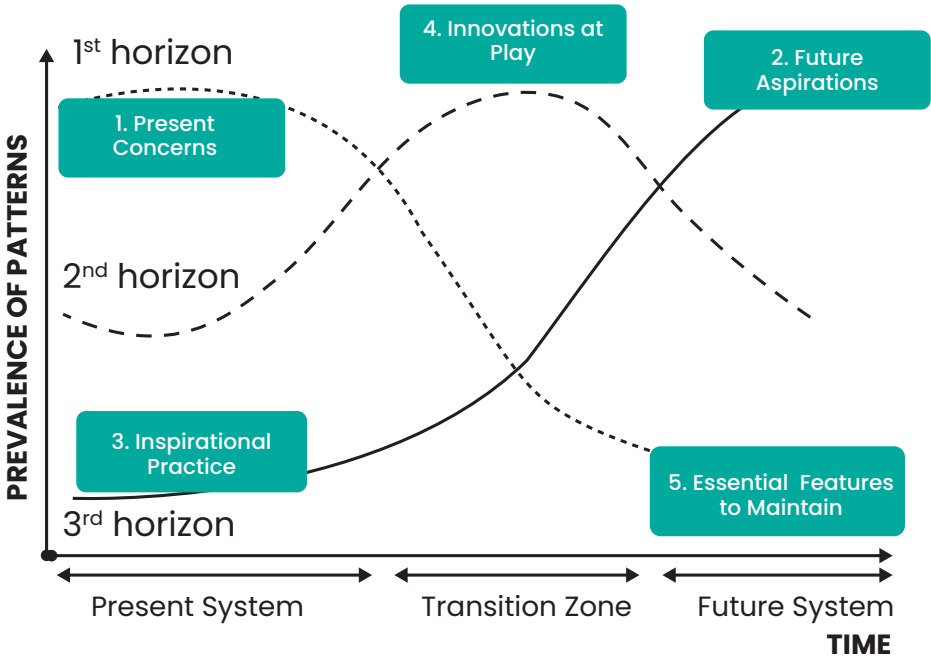
Appendix D: Recruitment Strategy for Primary Research

10 OCAD University Webpace is restricted to academic needs for active students and faculty at OCAD University. OCAD Webpace (webpace.ocad.ca) is a web server tool for educational uses only and usage is bound by OCAD's Acceptable Use (AUP) and Web Technology Policies. This service is monitored regularly for usage inconsistent with OCAD's published policy documents.

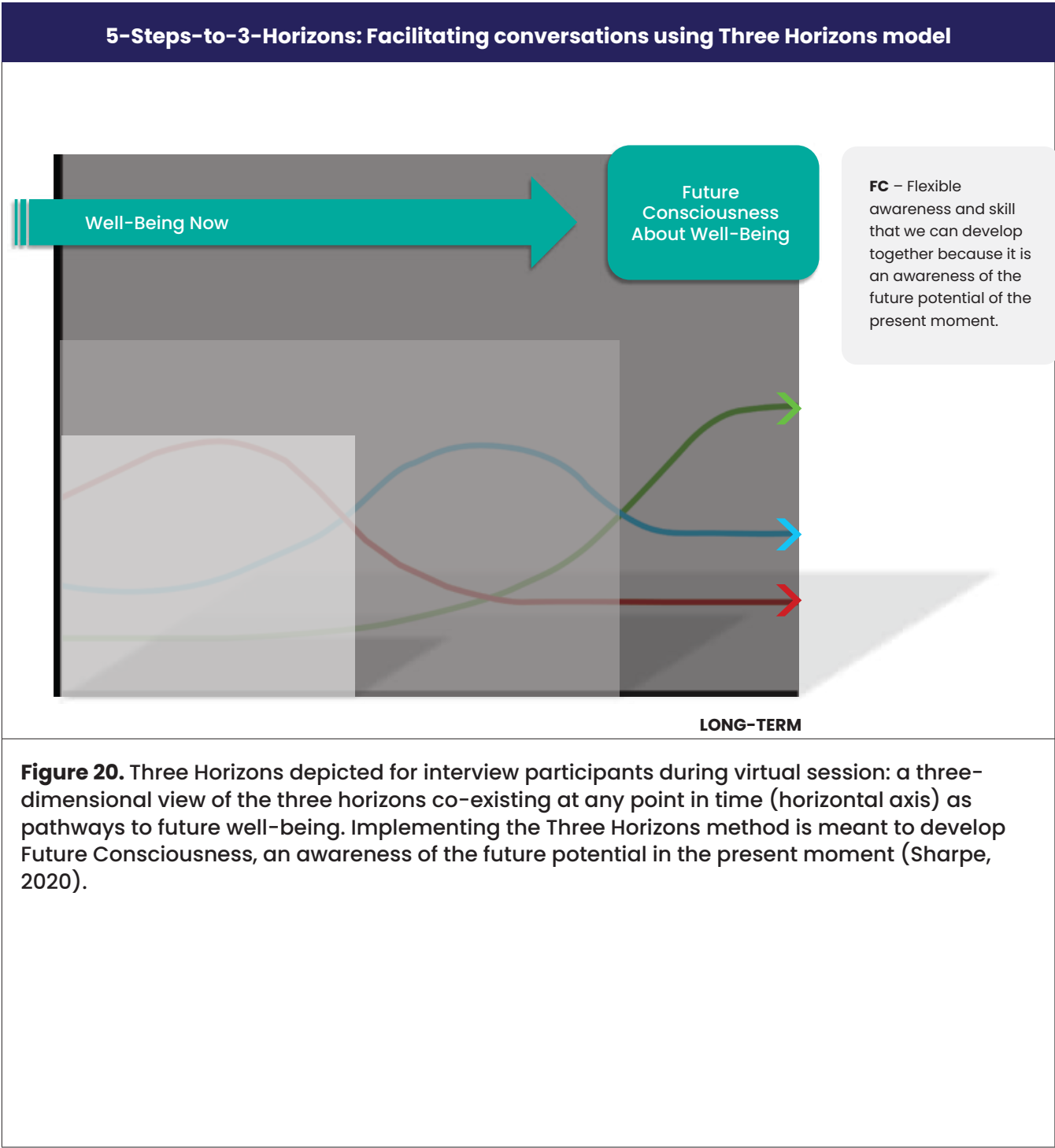
Recruitment Strategy for Primary Research
<p>A feasible digital recruitment strategy was implemented beginning June and ending September 2021, during the COVID19 pandemic. In June, I launched my student OCADU webspace¹⁰ after giving it a user-friendly theme using Bootstrap; a popular front-end open-source toolkit that enables you to build fast, responsive websites using a combination of programming languages (e.g. HTML, CSS and JavaScript).</p>
<p>The webspace became the main channel for informing transgender and gender non-conforming communities about my research and participation opportunities. Initially, I shared a link to my webspace on Instagram and Twitter. Also, there were individuals identifying as trans and gender non-conforming who had been sharing their experiences of misgendering in the workplace on Twitter. These were professionals in academia, healthcare, and customer services spanning Canada, United States, United Kingdom, and Australia. I then began to focus on sharing my webspace URL primarily on Twitter with invitations to interviews and/or surveys via digital flyers</p>
<p>There was very little engagement with my initial posts on Twitter from June to August, which required me to revisit my recruitment strategy. Twitter has been found to be a useful tool for recruiting study participants, however, it requires having a known online presence and many followers that enhance visibility and reputability (Wasilewski et al., 2019). I discussed setbacks in recruitment with my advisors and reached out to trans-focused research networks and organizations. This resulted in a recruitment boost via Twitter and online community-specific audiences; Incl sive Design Community newsletter, Strategic Foresight and Innovation google group, and Rainbow Health Ontario's website under Research and Policy for LGBT2SQ health research. This was a legitimate pivot for the recruitment strategy, explained by Vincent (2018):</p>
<p>It is vital to remember that trans people are far more than their trans status, such that any and all manner of other groups or mailing lists may be potential sources of trans participants – particularly those under-researched individuals who have limited or no contact with any trans-specific group. (p. 110)</p>
<p>Increased engagement with the online survey and general inquiries about the virtual interviews were attributed to this recruitment boost. Subsequent use of social media hashtags like #TransTwitter, #Transgender, #TransRightsAreHumanRights increased engagement with Twitter posts. I maintained privacy of all participants throughout the recruitment strategy by keeping the source from which any participants originated confidential. I carefully handled all screenings and informed c nsent procedures for all three interview participants by phone (one person) and email (two individuals). I recognized the probability that some participants of semi-structured interviews and/or online surveys could be connected by sharing similar social networks within the local LGBTQ2S+ community of downtown Toronto, Ontario. I routinely checked in with my research advisors to openly discuss vulnerabilities of reaching out to the transgender and gender non-conforming community during the recruitment phase.</p>

Appendix E: Summary of the Three Horizons: A five-step practice refined by Sharpe et al. (2016)

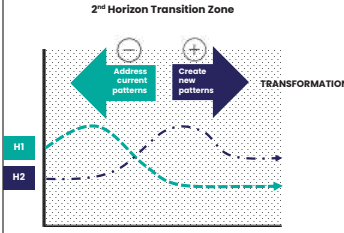
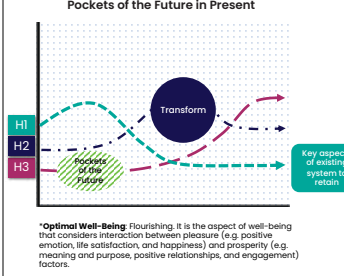
Step and Main Objective	Horizon and Time Space	Mindset or Perspective
Step 1 – Examining Present Concerns by bringing the issue of concern into view and describing the ways in which the current way of doing things is seen to be losing its fit with emerging conditions	First Horizon Present	Managerial mindset, which keeps things going in familiar ways
Step 2 – Exploring future aspirations where visions, aspirations, and possibilities for the reality that will emerge over time are explored as a replacement of the first horizon.	Third Horizon Future	Visionary mindset that holds an imagined future in mind and steers towards it
Step 3 – Exploring inspirational practice in the present to identify “pockets of the future in the present”	Second Horizon Transition Zone	Entrepreneurial mindset that seizes an opportunity
Step 4 – Innovations at play, which is viewed as the realm of transition between the 1st and 3rd horizons where innovations are identified that can be seen to be going in response to the failings of the 1st horizon and possibilities of the 3rd horizon.	Second Horizon Transition Zone	Innovative mindset of trying things out in response to the changing landscape, considering trade-offs and dilemmas
Step 5 – Essential features to maintain of drawing attention to aspects of the old system what will persist into the future within context of the new future system	First Horizon Third Horizon	Future-Oriented



Appendix F: Sampled version of the interview guide used to facilitate conversations with interview participants in this research project



Procedure and Main Objective	Actual question to participants during interviews	Main Visual appearing on a slide for the participant during the interview
Step 1 – Explore present concerns or current challenges related to well-being in the workplace	This is our starting point. Can you talk about any current practices or ‘locked in (rigid)’ structures that might concern your well-being in the workplace? Can you identify a present concern that indicates any challenges that might not support your well-being? What keeps happening in familiar ways that feels unsupportive to your well-being in the workplace?	<p>Present Concerns</p>
Step 2 – Envisioning a desirable future for well-being in the workplace	What does the ideal future of well-being in the workplace look like to you? Can you share ideas about potential supports and/or resources that could contribute to this ideal future of well-being in the workplace? Can you talk about any organization training, learning, or policy development that signals action towards an ideal future of well-being in the workplace for yourself as a transgender person?	<p>Landscape of New Patterns</p>
Step 3 – Building on hope and encouragement stemming from pockets of the future in the present regarding well-being in the workplace	Do you recognize any current practices in your workplace that presently support your well-being? Can you describe a recent situation or positive signs of ‘new’ ways that support your well-being in the workplace? Can you talk about any shifting views, emerging values, alternatives, better responses that support your well-being in the workplace as a transgender person?	<p>Pockets of the Future in Present</p>

Procedure and Main Objective	Actual question to participants during interviews	Main Visual appearing on a slide for the participant during the interview
Step 4 – Exploring the transition zone to consider innovations at play: having an entrepreneurial mindset	What sorts of opportunities, resources, or supports could address aspects of your well-being in the workplace? What sorts of limitations and/or conflicts do you think could exist if your well-being was fully supported in the workplace? *Tradeoffs	
Step 5 – Foresight of key elements to maintain for the desirable future.	This is our ending point. Can you talk about any aspects of ‘what’s not currently working’ that you think will likely persist into the future that would influence your *optimal well-being in the workplace? Can you identify any key or desirable elements from the workplace that could be maintained so that your *optimal well-being needs are fully met in the future?	

Appendix G: Modifications made to the I COPPE Scale in this research project for the ‘ Future of Well-Being Survey’

I COPPE Scale
<p>I COPPE Scale is comprised of 21-items measuring perceived well-being in seven domains of one’s life: Interpersonal, Community, Occupational, Physical, Psychological, Economic, plus overall wellness (Prilleltensky et al., 2015). For each domain, the respondent is asked to give a rating for an attribute pertaining to a timeline with the following labels: past (a year ago), present (now), and future (a year from now). Original validation of the I COPPE scale to measure personal well-being involved a paper-pencil format with a 10-point vertical rating scale for administration, scoring, and statistical analysis (Prilleltensky et al., 2015).</p> <p>The modifications that were made to the layout of the ICOPPE Scale in this project</p> <ol style="list-style-type: none">Rating scale for Domain 1 was placed at the ending of the survey instead of at the beginningTimeline-based language was changed<ol style="list-style-type: none">Now was replaced with present, currentA year ago was replaced with past, looking back 3 years agoA year from now was replaced with future or looking ahead 5 years from nowOverall wellness was labelled instead of overall best possible lifeCommunity participation was labelled instead of community where you liveMental (emotional) health was labelled instead of psychological healthFinancial situation was labelled instead of economic situation

Appendix H: Survey design for this research project

‘Future of Well-Being Survey’ designed for this research project

Qualtrics software was chosen, because of its security features, for the design and publication of the Future of Well-Being Survey. The survey was made available to adults identifying as transgender and gender non-conforming residing in Canada and abroad, between June 25 and September 22 of 2021. Survey was fully accessible on desktop and mobile devices.

Hello

★

Welcome to the Future of Well-Being Survey!

The purpose of this online survey is to capture a multidimensional assessment of well-being from a gender identity perspective. It has been designed to focus on the inclusion of adults living as transgender, non- binary, and gender non-conforming.

Participation will help build a new map that highlights supportive pathways towards optimal well-being in the workplace for these groups of people. Results from this online survey will be combined with research findings gathered from facilitated conversations about well-being in the workplace from a small group of transgender adults. This research project is not funded and there is no intended commercialization of the research findings.

This online survey consists of 14 questions and takes about 5 minutes to complete. It is meant to gather information about age, gender identity, preferred pronoun, type of work, and subjective ratings for seven domains of well-being relative to the present, past and future. This well-being assessment is structured using a modified version of the I COPPE scale that measures Interpersonal, Community, Occupational, Physical, Psychological, and Economic areas of life plus considers a subjective rating for overall wellness. Anonymized responses will not be scored, ranked, or judged but rather aggregated for further insights.

Confidentiality: This survey is made possible using Qualtrics. This tool keeps responses anonymous for each participant so that personally identifiable information and IP addresses do not get stored for the participant. Files are kept confidential and search engines are blocked from indexing the survey link. You will not be required to provide any personal identification information nor email address. Geospatial locations will not be detectable.

Your participation in this online survey is completely voluntary and you may withdraw at any time. You always have the choice of skipping any questions. You may also withdraw at any time by closing your browser, in which case any data stored by incomplete survey responses will be automatically deleted within 1-week. Once you complete the survey we cannot identify individual participants from the raw database and therefore we cannot fulfill any request for your survey information to be retrieved for any review.

If you have questions about this online survey or the research study, please feel free to contact Bo Louie Siu, primary investigator in the Strategic Foresight and Innovation program, Faculty of Design at OCAD University via email: bo.siu@student.ocadu.ca. This study has been reviewed and received ethics approval through the Research Ethics Board at OCAD University [Clearance No. 2021-45]. If you have questions regarding your rights as a participant in this study, then please contact: Research Ethics Board c/o Office of the Vice President, Research and Innovation OCAD University, 100 McCaul Street, Toronto, M5T1W1, 416 977 6000 x4368, research@ocadu.ca

Agreement To Participate: Your agreement indicates that you have read the information above regarding eligibility criteria, purpose, confidentiality, and opportunity to ask any questions about this research study. Agreement to participate is required in order to proceed to the online survey. Proceeding to the online survey indicates that you agree to be a participant of research and may withdraw at any time.

Do you agree to participate?

☐ Yes, I agree to participate

☐ No, I do not agree to participate

☐ Q1

★

What is your age category?

☐ 18-20

☐ 21-29

☐ 30-39

☐ 40-49

☐ 50-59

☐ 60-69

☐ 70 or older

☐ Q2

Which of these best describes your gender identity?

☐ Transgender Female (MTF)

☐ Transgender Male (FTM)

☐ Non-binary (NB)

☐ Transfeminine

☐ Transmasculine

☐ Gender Non-Conforming

☐ Other (type below to specify)

☐ I rather not say

☐ None of the above

☐ Q3

What is your preferred gender pronoun? Please check all that apply.

☐ They/Them

☐ She/Her

☐ He/Him

☐ Ze/Zir

☐ Other (type below to specify)

☐ I rather not say

☐ None of the above

☐ Q4

What is your primary location?

★ City, Province/State, Country

☐

Q5

What best describes your current occupation? Please check all that apply.

☐ Part-time

☐ Full-time

☐ Permanent job

☐ Temporary job

☐ Contract work

☐ Career transition

☐ Self-employed

☐ Student

☐ Disability

☐ Other (type below to specify)

☐ Not currently employed

☐ Rather not share this information

☐

Q6

Do you work in a front-line occupation such as in healthcare, education, or public services?

☐ Yes

☐ No

☐ I rather not say

Q7

Interpersonal Domain of Well-being

Terrible

Poor

Average

Good

Excellent

1

2

3

4

5

Rate current relationships with important people in your life

Rate past relationships with important people in your life, looking back 3-years ago.

Rate future relationships with important people in your life, looking ahead 5-years from now.

Q8

Community Domain of Well-being

Terrible

Poor

Average

Good

Excellent

1

2

3

4

5

Rate your current community participation where you live.

Rate your past community participation where you lived, looking back 3-years ago.

Rate your future community participation where you will live, looking ahead 5-years from now.

Q9

Occupation Domain of Well-being

Dislike a great deal

Dislike somewhat

Neither like nor dislike

Like somewhat

Like a great deal

1

2

3

4

5

Rate your current occupation.

Rate your previous occupation, looking back 3-years ago.

Rate your future occupation, looking ahead 5-years from now.

Q10

Physical Health Domain of Well-being

Not at my ideal

Slightly closer to my ideal

Moderately closer to my ideal

Reaching my ideal

Exceeding my ideal

1

2

3

4

5

Rate your current physical health.

Rate your past physical health, looking back 3-years ago.

Rate your future physical health, looking ahead 5-years from now.

Q11

Mental (Emotional) Health Domain of Well-being

Much worse

Somewhat worse

About the same

Somewhat better

Much better

1

2

3

4

5

Rate your current mental (emotional) health.

Rate your prior mental (emotional) health, looking back 3-years ago.

Rate your future mental (emotional) health, looking ahead 5-years from now.

Q12

Financial Domain of Well-being

Financial hardship

Below Average

Average

Above Average

Financially secure

1

2

3

4

5

Rate your current financial situation.

Rate your past financial situation, looking back 3-years ago.

Rate your future financial situation, looking ahead 5-years from now.

Q13

Overall wellness

Rate your current overall wellness

★★★★★

Rate your past overall wellness, looking back 3-years ago

★★★★★

Rate your future overall wellness, looking ahead 5-years from now

★★★★★

Q14

Is there anything else you would like to share about your gender identity and well-being? If so, please feel free to use the text box below.

End of Survey

Thank you for participating!

Your responses have been captured.

Appendix I: Original code structure developed during content analysis of interview transcripts (qualitative data). Values in square brackets indicate quantity of excerpts collated from transcripts.

Original Code Structure		
Category	Code Structure	Description
Demographic Item [20]	Gender Identity [4]	Transgender Male (FTM), Transgender Female (MTF), Transgender Non-binary(TNB)
	Pronoun [4]	He/Him, They/Them, She/Her
	Occupation [7]	Education – Teacher of School board Healthcare – Healthcare professional of Hospital Commercial Retail – Assistant Manager of Company
	Work Setting (type of organization) [5]	School, teaching classroom Hospital, patient care Retail Company, customers/clients
Three Horizons Model [83]	Step 1 [14]	Step 1 – Exploring present concerns or current challenges related to well-being in the workplace
	Step 2 [13]	Step 2 – Envisioning a desirable future for well-being in the workplace
	Step 3 [18]	Step 3 – Building on hope and encouragement based on pockets of the future in the present regarding transgender well-being in the workplace
	Step 4 [15]	Step 4 – Exploring the transition zone to consider innovations at play: having an entrepreneurial mindset
	Step 5 [18]	Step 5 – Foresight of key elements to retain for the desirable future.
	Trade-offs [5]	Participants asked: What sorts of limitations and/or conflicts do you think could exist if your well-being was fully supported in the workplace? (prompting conversation about tradeoffs, clashes of values, dilemmas)

Original Code Structure		
Recurrent Element [78]	Trans Positive Experience at Work [15]	Participants were asked if they would like to share some detail about their gender journey at work and if they could talk about a positive experience regarding their gender transition in the workplace (e.g. Is there anything positive that stood out during that time of coming out or transition within the workplace? Was there a really positive experience with your transition in the workplace? Can you touch on something really positive about your gender journey or transition within the workplace?
	Frontline component [12]	Idea, concept, or experience of interaction in the workplace setting with others (i.e. colleagues, students/ patient/customers) as a person with a visible transgender identity.
	Misgendering [11]	Experiences of misgendering or being misgendered in the workplace setting (i.e. others referring to the participant using the wrong pronoun).
	Being Trans [22]	Experience or situation referring to individual transgender identity in the workplace setting or references to how others get treated and perceived as a transgender being (e.g. treatment of trans patients, trans student)
	Workplace Patterns [10]	References to workplace understanding, inclusion, policies, supports, advocacy, respect, empathy, washroom options for trans employees, pronouns. References to unsupportive patterns or concerns regarding being trans in the workplace.
	Disclosure [8]	Coming out as trans in the workplace, transitioning (medical, social, legal) in the workplace

Transgender Cultural Competency
<div><div>1. Trans Care: Getting Trans Competent Care (Ashbee & Goldberg, 2006) – a document of guidelines for health and social service providers with the goal of enabling transgender people and loved ones to receive trans-competent care for basic health problems and questions. “As part of being trans-competent, medical professionals are expected to know how to find answers to trans health questions, and about community health options. This includes knowing how to find trans peer and professional resources, and providing advocacy if needed when making a referral” (Ashbee & Goldberg, 2006, p.2).</div><div>2. Media Reference Guide: Discussing Trans and Gender-Diverse People: This is a five-page document opens with a note about the importance to not characterize trans people as having a mental disorder or make assumptions about trans peoples experiences with their bodies and medical transitioning. It outlines eight guiding principles meant to help media reporters cover stories about trans and gender-diverse people respectfully and accurately.</div><div>3. Health Equity Impact Assessment (HEIA) : This is a ten-page document outlining guiding strategies for policy planning, evaluation, and programming with respect to trans and non-binary people. It includes information on social determinants of health, evidence on belonging, culture, and specific outcomes of health disparities effecting LGBT2SQ communities. It summarizes cultural and clinical competence of services providers and organizations, plus includes a number of considerations (e.g. population size, availability of transition-related care, preventative care needs, health needs) and differentiates these according to LGBT2SQ groups relative to Trans and Two-Spirit groups: “For Indigenous peoples, a key determinant of health is their connection to their culture. Colonial policy in Canada attempted to assimilate Indigenous children through residential schools. The result was that Indigenous languages, cultures and traditions were not passed down, including Two-Spirit teachings.” (p. 6)</div><div>4. LGBT Toolkit for creating culturally competent care for lesbian, gay, bisexual and transgender persons. Toronto Long-Term Care Homes and Services collaborated with LGBT representatives to remove barriers (e.g. disclosing sexual orientation, fears of discrimination) impacting seniors’ personal well-being. This is a 146-page document containing resources, training plans, programs and activities meant for enhancing understanding, sensitivity, and responsiveness to LGBT seniors living in Long-Term Care Homes. The toolkit includes a LGBT Cultural Competency Framework involving recommendations for programs and services, governance, human resources, communications, community relations, and physical facility and environmental design.</div></div>

Reflections on my approaches to data analyses
<p>SURVEY VISUAL ANALYSIS:</p> <p>My visual analysis of survey data relied on Wexler’s (2018) guidelines for preparing data to optimize the use of Tableau’s data visualization platform. By following these guidelines, my raw measurements based on Likert scales for multi-dimensional well-being were subjected to new parameters and calculations that could not be verified by additional statistical testing. Statistical and theoretical calculations usually get applied quickly, which can result in less accurate visualizations (Li et al., 2018).</p> <p>Initially, I believed that that the Future of Well-Being Survey would accurately capture multidimensions of well-being using the I COPPE Scale, but then I made several modifications to make the scale suitable for my survey design. This may have affected the validity of the I COPPE Scale. The integration of Excel, Tableau Prep, and Tableau Desktop made handling the visual analysis sufficiently manageable for the small data set of this study (15 surveys) in tracking consistencies, adjusting visualizations, and maintaining integrity of data transferring.</p> <p>CONTENT ANALYSIS:</p> <p>The procedures and results of content analysis can vary depending on the investigator’s style and analytical skills, since there are no guidelines in the literature (Elo & Kyngäs, 2008). When applied to qualitative research in mental health (Crowe et al., 2015, p. 622), content analysis “may be regarded as fairly superficial,” as it aims to describe content occurring at the “manifest level” such as what the participants think about well-being in the workplace.</p> <p>THEMATIC ANALYSIS:</p> <p>Creating a framework (e.g., journey map, relational map, 2x2 plot) during the ideation phase of a human-centered design project helps organize information, visualize patterns, and articulate segments of data (IDEO, 2015). I categorized thematic components according to dimensions of well-being using a functional diagram/model (Figure 1) that I created, based on the literature, to find patterns/themes in perspectives/experiences gathered from interview participants related to well-being in the workplace. I followed this up with a discussion of system dynamics based on clustering thematic components.</p>

Reflections on my approaches to data analyses
<p>My thematic analysis using portions of transcript data fell short of the most robust approach recommended by Crowe et al. (2015, p.618), in which “all transcript data are required in order to arrive at the themes”. Making up for this, I back checked my work multiple times Also, I conducted a thorough content analysis beforehand to account for all five steps of the Three Horizons model, as suggested by Sharpe et al. (2016) and ensured that I re-examined steps 1 (present concerns) and 4 (innovations in play) during the thematic analysis.</p> <p>I was the primary researcher for this project. No one else had access to the raw data. Qualitative thematic content analysis usually involves a strategy to enhance rigor by having two or more analysts on the team to reach consensus on final themes (Jones et al., 2021). Bradford et al. (2019, p.158) applied thematic analysis in a multi-staged fashion including double-checking for “transcription errors or misinterpretations of the dialogue”. Therefore, my process was imperfect.</p> <p>I used a combination of tools including Microsoft Excel, Miro Whiteboard, and Dedoose in my analysis process, which were tools affordable/available to me. NVivo, an expensive software platform, is typically used in qualitative research as “...a logical and systematic approach, without constraining the emergent nature of qualitative data collection and analysis.” (Snkovich & Alfoldi, 2012, p. 838). Nonetheless, Clarke & Braun (2017, p. 297) emphasize that “the hallmark of this form of thematic analysis is its flexibility” in terms of theoretical approach, areas of interest, data set, and overall method applied to generating meaningful qualitative research.</p>