

ORIGINAL RESEARCH

Navigating masculinity: a psychosocial qualitative study of transgender and non-binary individuals' experiences

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Abstract

Background: The intersection between Critical Studies on Men and Masculinities (CSMM) and Trans Studies (TS) offers important opportunities for understanding how transgender and non-binary (TNB) individuals experience and negotiate masculinity. Despite growing recognition of the need to bridge these fields, limited research has explored TNB individuals' experiences of masculinity in the Italian context. **Methods:** This qualitative study employed semi-structured interviews with 15 TNB individuals recruited from a gender-affirming healthcare center in Padua, Italy. Participants included 7 transgender men (46%), 4 transgender women (27%), and 4 nonbinary individuals (27%), ranging in age from 18 to 53 years. Data were analyzed using Reflexive Thematic Analysis to explore how participants navigate, resist, and reinterpret hegemonic models of masculinity while constructing meaningful identities. **Results:** Two main themes were built from the analysis: "Identity and Social Recognition" and "Navigating Masculinity". The first theme captures the dialectic between internal self-understanding and external validation, encompassing subthemes of "Recognizing Oneself" and "Being Recognized". The second theme traces participants' critical engagement with normative masculinity through "Compensatory Behaviors", "Rejection of Male Models", and the emergence of "Plural Masculinities". Participants demonstrated remarkable creativity and resilience in developing authentic masculine identities while navigating social and institutional constraints. **Conclusions:** The findings reveal that TNB individuals are active agents who creatively navigate and transform gender systems rather than passive recipients of social norms. The study demonstrates the value of integrating CSMM and Trans Studies perspectives and highlights the importance of social recognition and affirming healthcare in supporting positive identity development. The research has important implications for healthcare practice, policy development, and social change efforts aimed at improving support for TNB individuals.

Keywords

Transgender and non-binary identities; Masculinity; Reflexive thematic analysis

1. Introduction

Masculinity studies emerged in the United States in the mid-1960s, influenced by critiques of authoritarianism and a growing awareness of the political dimensions of personal and sexual experiences [1]. These developments laid the groundwork for a critical examination of gender norms, particularly in relation to male identities, and gave rise to the field of Critical Studies on Men and Masculinities (CSMM). Foundational works such as Carrigan, Connell, and Lee's "Toward a New Sociology of Masculinity" [2] and Connell's formulation of hegemonic masculinity [3] established a framework that conceptualizes masculinity not as a fixed biological essence but as a socially constructed and historically contingent phenomenon.

Within this framework, hegemonic masculinity represents the culturally dominant ideal that legitimizes men's social power while privileging traits such as emotional restraint, competitiveness, and heterosexual dominance. The persistence of these patterns has contributed to what recent scholarship terms "toxic masculinity", referring to the social and psychological costs of rigid gender norms that inhibit emotional expression and relational vulnerability. Conversely, alternative masculinities promote emotional openness, inclusivity, and care, elements increasingly visible in queer, trans, and non-binary communities [4–6].

CSMM examines the socio-historical construction and psychosocial experience of "being a man" and of masculinity itself [4]. Within this field, two main trajectories can be identified:

one frames contemporary shifts as a “crisis of masculinity” requiring a restoration of traditional roles; the other seeks to deconstruct masculinity in opposition to male-dominated systems [5]. Grounded in feminist, queer, and critical gender theories, CSMM emphasizes the heterogeneity and fluidity of masculinities [6], a perspective particularly relevant in the Italian context, where shifting social dynamics call for rethinking dominant and alternative models of masculinity [7]. Empirically oriented studies have only recently gained traction: for example, Todd *et al.* [8] in the U.S. and Anzani *et al.* [9] in Italy highlight the diversification of masculine models drawn upon by both cisgender and transgender individuals, while Van Rossum *et al.* [10] demonstrate how gender norms, social support, stigma, and social identity threats shape masculine experiences.

In the current academic context, where gender is increasingly conceptualized as fluid and multifaceted, establishing dialogue between CSMM and Trans Studies is both timely and necessary. Despite differing theoretical lineages, both fields share a commitment to dismantling normative masculinities and investigating the production and lived realities of gender. Their intersection helps address mutual limitations: CSMM’s potential reinforcement of cisnormativity and Trans Studies’ occasional neglect of male privilege [11]. Integrating these perspectives enables a more inclusive and performative understanding of masculinity as contested, embodied, and continuously redefined through resistance and change. This integrative lens has directly informed the methodological design of this study, particularly through semi-structured interviews.

A central objective of this research is to respond to the recognized need to “build bridges” between CSMM and Trans Studies, advancing a view of masculinity as plural, embodied, and renegotiated [11, 12], in alignment with Butler’s performative theory of gender [13]. This study also aligns with a non-binary gender model [14] and recognizes the diverse and non-reducible nature of transmasculine experiences. Understanding how masculinities are constructed and negotiated is therefore essential for interpreting the clinical and social dynamics that shape participants’ lives. Masculinity norms influence not only how trans and non-binary individuals are perceived by professionals, but also how they navigate recognition and authenticity within medicalized settings. Here, authenticity refers to the possibility of expressing one’s gendered self in ways that feel coherent, self-determined, and aligned with lived experience rather than shaped by external expectations, normative pressures, or gatekeeping demands.

Recent Italian research has empirically examined these dynamics. Anzani *et al.* [15] found that transmasculine individuals often display selective conformity to hegemonic norms, particularly emotional control and self-sufficiency, as adaptive strategies in response to stigma, whereas cisgender men tend to reproduce more traditional and potentially toxic dimensions such as heteronormative dominance and power over others. In a later qualitative study, Anzani *et al.* [16] showed that both cis and transmasculine young adults construct masculine identities through negotiation with role models and “anti-models”, often rejecting hegemonic or toxic forms and instead seeking alternative masculinities grounded in authenticity, respect, and diversity of expression. Parallel to this, Miller [17] and the

special issue on Trans Masculinities edited by Gottzén and Straube [12] illustrate how trans men authenticate their gendered selves through local, context-dependent masculinities that resist universalized or cisnormative standards.

These contributions collectively reinforce the notion that masculinities—particularly trans and non-binary ones—are plural, embodied, and performative, shaped through ongoing processes of social recognition and resistance to dominant norms. Integrating CSMM and Trans Studies thus constitutes a crucial theoretical shift, enabling scholars to conceptualize masculinity as situated and dynamically negotiated while addressing both cisnormative assumptions in CSMM and the relative under-attention to male privilege occasionally observed in Trans Studies. In this view, trans and non-binary masculinities appear as creative, situated, and resistant configurations continually reworked through embodied practices and critical engagement with hegemonic expectations.

Building on this theoretical convergence, the present study adopts a socio-cultural and psychosocial perspective to examine how transgender and non-binary individuals construct, negotiate, and redefine masculinities within contemporary Italian contexts. Rather than offering clinical recommendations, the study focuses on the cultural, relational, and symbolic processes through which participants make sense of gender and navigate recognition. This approach foregrounds trans and non-binary masculinities as situated practices shaped both by resistance to dominant norms and by the pursuit of social legitimacy, thereby providing the conceptual foundation for the empirical analysis that follows. In the Italian context, marked by persistent binary gender expectations, regionally differentiated sociocultural norms, and a healthcare system still influenced by gatekeeping practices, these negotiations acquire particular significance. Examining masculinities in northern Italy thus reveals how local cultural frameworks intersect with transnational models of gender, shaping the possibilities and constraints through which TNB individuals articulate their identities.

Some Italian clinical centers require a minimum of six months of psychological counseling before initiating hormonal treatments, serving both diagnostic and supportive functions [18]. However, numerous studies highlight that many mental health professionals lack adequate training and cultural competence to effectively support transgender and nonbinary (TNB) individuals [19, 20]. Within the Italian Gender Affirming Pathway (GAP), psychological assessments are often shaped by transphobic assumptions and binary gender norms. As a result, therapy is frequently perceived as coercive and gatekeeping rather than supportive [21, 22]. These dynamics can lead individuals to withhold personal experiences or turn to unregulated sources for hormonal treatments. Such challenges are typically rooted in systemic educational and institutional shortcomings, rather than isolated acts of prejudice. These gaps contribute to experiences of misgendering, pathologization, and invasive questioning about bodies and surgeries—factors that negatively impact mental health and discourage people from seeking care [23].

Despite these barriers, mental health professionals can play a crucial role in helping TNB individuals navigate stigma,

family conflict, and minority stress [24]. Still, trans and nonbinary people in Italy continue to face widespread violence and discrimination in both social and institutional contexts, in line with broader European trends [25]. Recent Italian studies have deepened the understanding of these dynamics, showing how gender identity and healthcare experiences are profoundly shaped by the national socio-cultural context.

For instance, Mirabella *et al.* [26] found that young transgender adults perceive their bodies simultaneously as sources of suffering and self-affirmation, with fragmented healthcare pathways exacerbating body dissatisfaction and psychological distress. Similarly, Costa and Rotundo [27] highlighted systemic barriers in accessing competent and respectful care, including paternalistic and pathologizing attitudes among professionals, and the crucial mediating role of family support.

Building on the minority stress framework, Scandurra *et al.* [28] demonstrated that internalized transphobia and lack of social support are associated with poorer mental health outcomes, while resilience and affirming relationships serve as protective factors. Furthermore, Rosati and colleagues [29, 30] explored the experiences of nonbinary people, revealing that psychotherapy often oscillates between discomfort and affirmation depending on the therapist's cultural sensitivity. Their findings show how binary norms embedded in therapeutic and public spaces—such as gendered facilities and expectations—amplify feelings of invisibility and minority stress.

Studies on adolescents [31] also indicate that nonbinary youth express fluid and evolving gender identities that challenge rigid categorizations, emphasizing the need for more inclusive, personalized, and affirming clinical approaches.

Overall, these contributions portray a complex Italian landscape where gender diversity is increasingly visible but still constrained by binary, medicalized, and paternalistic frameworks. Yet, they also point toward an emerging shift: the gradual affirmation of plural gender narratives and the recognition of lived experience as a legitimate source of knowledge and identity validation.

Although transgender women are not always included in traditional sampling designs for studies centred on masculinity, their presence here represents a theoretically significant and analytically productive component. Their experiences offer valuable insight into masculinity not only as a present identification but as a set of norms, expectations, and practices that may have shaped earlier life stages, socialisation processes, and institutional encounters. Many trans women have engaged with forms of masculinity that were attributed, required, or internalised prior to social and/or medical transition, and their narratives illuminate the ways in which such norms are negotiated, reinterpreted, or resisted over time. Their inclusion broadens the analytical scope of the study, allowing masculinity to be examined as a relational and non-essentialist construct distributed across different gendered positions. This perspective makes visible both continuities and divergences across diverse lived experiences while avoiding a cisnormative narrowing of the conceptual field of masculinity.

2. Materials and methods

2.1 Methodology and research design

This study explores the lived experiences of TNB individuals in relation to masculinity, identity, and social recognition. Situated within the framework of critical social and cultural psychology, the research adopts a qualitative methodology to provide an in-depth, first-person account of participants' meaning-making processes. Drawing on semi-structured interviews with 15 TNB participants recruited from a gender-affirming healthcare center in Padua, the study investigates how participants navigate, resist, and reinterpret hegemonic models of masculinity. Data were analyzed using Reflexive Thematic Analysis. The analysis revealed two themes: the first, "Identity and Social Recognition", captures the dialectic between internal self-understanding and external validation; the second, "Navigating Masculinity", traces the ways in which participants critically engage with and reconfigure normative masculinity through compensatory behaviors, rejection of dominant male scripts, and the emergence of plural, non-hegemonic masculinities. Overall, the study offers valuable insights into the diverse and evolving ways gender and masculinity are lived, challenged, and redefined by TNB individuals. Given the nature and scope of our aim and research question, this study adopts a qualitative methodology, which enables an "emic" approach to empirical data and supports a nuanced, first-person understanding of participants' lived experiences [32]. In line with the epistemological foundations of qualitative and reflexive inquiry, we adopted an emic position because our methodological stance prioritizes accessing their lived experiences through their own meaning-making frameworks; this approach allows the analysis to remain grounded in participants' categories, narratives, and cultural contexts rather than imposing external, normative, or clinician-centered interpretative models. The epistemological foundations of qualitative research contribute to the scientific literature by offering novel and often underrepresented insights, along with thick, rich descriptions that open up new exploratory pathways and provide comparative data for future research. Furthermore, this study is situated within the framework of critical social and cultural psychological inquiry [33], which conceptualizes participants as active social and semiotic agents [34], continuously engaged in processes of meaning-making as they structure and make sense of their experiences [35].

2.2 Data collection method

In line with the study's aim, research question, and epistemological framework, data collection was conducted through semi-structured interviews [36]. This method is particularly suited for exploratory research, as it combines pre-defined guiding questions—drawn from existing literature—with the flexibility to accommodate new and unanticipated topics emerging from participants' accounts [37]. The semi-structured interview format fosters a dialogic interaction, enabling both interviewer and interviewee to engage in dynamic exchanges that alternate between moments of reciprocal dialogue and extended participant narratives. The main topics explored in the interview are: gender binarism; masculinity; subjective alternatives (regarding the conception of gender and masculinity); the relationship

with institutions and the medical-psychological pathway. Before conducting the main interviews, two pilot interviews (excluded from the final analysis) were carried out with experienced qualitative researchers to refine the clarity and flow of the interview guide. These served to test the clarity and relevance of the guiding and open-ended questions, and to provide the research team with practical insights regarding the accessibility and appropriateness of the interview protocol (see **Supplementary material** for the “Semi-structured Interviews Guiding Protocol”). Interviews were conducted by a researcher trained in qualitative psychosocial interviewing, who was not involved in clinical care or therapeutic decision-making with participants. This minimized hierarchical influence and reduced perceived pressure to respond in particular ways. Two researchers collaborated in the coding and interpretation of the corpus, engaging in reflexive memoing throughout the analytic process and maintaining a brief audit trail. Data saturation was deemed achieved when no new thematic elements emerged across three consecutive interviews and conceptual redundancy was observed during theme consolidation [38].

All interviews, conducted between February and April 2025, were carried out via Zoom and lasted approximately one hour each [39]. To ensure sample adequacy, a preliminary assessment was carried out, taking into account both the composition and size of the sample, as well as saturation criteria and community norms identified in prior methodological research [40]. Interviews were conducted online to ensure participants’ privacy, reduce logistical barriers, and avoid reinforcing power dynamics associated with the clinical setting. Conducting the interviews outside the healthcare environment supported a more neutral and participant-centered atmosphere, which facilitated open and reflexive dialogue.

The study received ethical approval from the Ethical Committee of University of Padova (reference: 859-b) and was conducted in accordance with the Declaration of Helsinki. Prior to participation, all interviewees reviewed and signed the informed consent and privacy agreement in the presence of the interviewer.

The interviews were conducted by a researcher trained in qualitative psychosocial interviewing, who was not involved in participants’ clinical assessment or therapeutic decision-making within the healthcare centre. This external positioning was communicated clearly at the outset of each interview to reinforce the non-evaluative, dialogic nature of the encounter. The interviewer’s familiarity with transgender and non-binary community contexts facilitated rapport-building and supported a climate in which participants felt able to share personal and complex experiences. In line with the epistemological foundations of Reflexive Thematic Analysis, the research team understood the researcher as an active and situated participant in the knowledge-production process. Rather than conceptualising subjectivity as a source of bias, the team recognised the researcher’s prior knowledge, assumptions, and sensibilities as interpretative resources that contribute to analytical depth and nuance. This stance entailed a continual engagement with one’s own interpretative position, including reflexive consideration of how personal and disciplinary perspectives shape meaning-making. At the analytic stage, two researchers

collaborated to provide interpretive breadth and critical distance. They jointly contributed to coding, theme development, and the ongoing interrogation of assumptions throughout the project. This collaborative configuration enabled sustained reflexive monitoring of interpretative decisions and ensured that the developing analysis remained grounded in participants’ accounts rather than being guided by predefined clinical or normative frameworks [41].

2.3 Participants

A total of 15 transgender and non-binary (TNB) individuals voluntarily took part in the study. Recruitment occurred at the CRRIG (Regional Reference Centre for Gender Incongruence) in Padua, a multidisciplinary public healthcare centre dedicated to gender-affirming pathways and specialised transgender health services. Participants were informed about the study through a flyer distributed in the waiting area and briefly introduced by clinicians during routine appointments (“Interview on gender and ‘the masculine’ in transition experiences”). Participation was entirely voluntary: individuals interested in taking part contacted the research team directly, ensuring full autonomy in the decision to participate and avoiding any involvement of clinical staff in the selection process. Eligibility criteria required participants to be over 18 years old and currently in care at the CRRIG. The resulting sample was heterogeneous in terms of gender identity, life trajectories, and stages of transition: it included 7 transgender men (46%), 4 transgender women (27%), and 4 non-binary individuals (using masculine or multiple pronouns; 27%). Participants ranged in age from 18 to 53 years (Mean (M) = 25.87; Standard Deviation (SD) = 8.77). Employment status was similarly diverse: 4 participants were employed (27%), 7 were students (46%), 1 was both studying and working (7%), and 3 were neither in education nor employment (20%; see Table 1). Participants also differed in their medical, social, and legal affirmation processes, including hormone therapy, desired or completed surgical interventions, and applications for legal gender recognition.

2.4 Data analysis method

This study employed Reflexive Thematic Analysis (RTA) to examine the qualitative interview data [42–44]. RTA provides a flexible and theoretically coherent framework for identifying patterns of meaning within participants’ accounts while attending to both experiential and sociocultural dimensions of the data. The approach is well suited to the study’s qualitative and exploratory aims, enabling the development of themes that reflect both individual experiences and broader systems of meaning. The analysis followed a recursive and abductive logic, combining deductive coding (based on concepts drawn from the literature and research aims) with inductive coding (allowing new insights and interpretative directions to emerge from the data). Computer-assisted qualitative data analysis software (CAQDAS), specifically Atlas.ti version 23 (Atlas.ti Scientific Software Development GmbH, Berlin, BE, Germany) was used to store, code, and organise the transcripts [45, 46]. The software also supported the grouping of codes and the efficient retrieval of relevant quotations.

TABLE 1. Participants: sociodemographic characteristics of the participants.

Pseudonym	Age	Gender Identity	Pronouns	Place of Residence	Occupation	Gender affirming surgeries	Hormone Therapy
Marco	31	Man	He/Him	Padua	Factory worker	Chest reconstruction	Testosterone undecanoate 1000 mg <i>i.m.</i> every 12 weeks
Maria	53	Non-Binary	All Pronouns	Treviso	Communication sector employee	None	Transdermal estradiol spray (1.53 mg/puff), 3 puffs/day + cyproterone acetate 25 mg/day
Nathan	29	Man	He/Him	Padua	Student and shop assistant	None	Testosterone gel (46–69 mg/day, titrated) + calcifediol 1 tablet/month
Giulio	24	Man	He/Him	Vicenza	Unemployed	None	Testosterone gel 46 mg/day (At the time of interview: pre-GAHT)
Antony	23	Non-Binary	He/Him	Venice	Student	None	Prescribed: testosterone gel 46 mg/day
Giovanni	22	Man	He/Him	Vicenza	Student	None	Testosterone gel 46–69 mg/day (alternating doses) + multivitamin supplement containing vitamin D
Clara	19	Woman	She/Her	Treviso	Unemployed	None	Estradiol gel 1–1.5 mg/day (alternating) + cyproterone acetate 25 mg every other day + fluoxetine 20 mg/day + lithium carbonate 600 mg/day
Mirko	21	Man	He/Him	Padua	Student	None	Testosterone enanthate 250 mg <i>i.m.</i> monthly
Domenico	21	Non-Binary	All Pronouns	Venice	Unemployed	None	Estradiol gel 1.5 mg/day + cyproterone acetate 25 mg/day + vitamin D supplementation
Luna	18	Woman	She/Her	Treviso	Student	None	Not on GAHT
Enrico	30	Man	He/Him	Padua	Logistics employee	Chest reconstruction	Testosterone gel 46 mg/day
Riccardo	19	Man	He/Him	Pescara	Student	None	Testosterone gel 46 mg/day + calcifediol 1 tablet/month
Shampoo	22	Non-Binary	He/Him	Padua	Student	None	Testosterone undecanoate 1000 mg <i>i.m.</i> every 12 weeks
Eleanor	32	Woman	She/Her	Treviso	Shop assistant and teacher	None	Transdermal estradiol spray (1.53 mg/puff), 3 puffs/day + cyproterone acetate 25 mg/day
Aria	24	Woman	She/Her	Verona	Student	None	Estradiol gel (2 pumps/day) + cyproterone acetate 25 mg/day + cholecalciferol 30 drops/week

GAHT: Gender-Affirming Hormone Therapy.

All audio-recorded interviews were transcribed verbatim and uploaded into Atlas.ti. The analytic process began with repeated readings of the transcripts to achieve familiarisation and to identify preliminary patterns. During the coding phase, the researcher systematically coded relevant segments of text, assigning descriptive labels. Deductive and inductive codes were subsequently reviewed, refined, merged, or removed as necessary to improve clarity and analytic relevance. Codes were then organised into categories or code families, which served as intermediate conceptual layers between initial coding and theme development. The research team collaboratively reviewed these categories to construct themes that offered an integrated and coherent interpretation of the dataset as a whole.

3. Results

A qualitative analysis of the interviews revealed 2 main themes structuring the research findings. The first theme, “Identity and Social Recognition”, examines the tension between the search for internal coherence (“Self-recognition”) and the need for external validation (“Being recognized”), highlighting the role of the social context in identity processes. The second theme, “Navigating Masculinity”, investigates masculinity as a dynamic and evolving category, encompassing subthemes such as “Compensatory Behaviors”, “Rejection of Male Models”, and “Plural Masculinities”.

3.1 First theme: identity and social recognition

This theme is a transversal and recurring element in the collected narratives, connecting different lived experiences related to gender, masculinity, and, more broadly, individual life paths. Many testimonies reveal a constant dynamic between two poles: on one hand, the desire to define and consolidate a personal identity—whether gender-related or existential more broadly—and on the other, the confrontation with a socio-cultural context shaped by norms, judgments, but also potential forms of support. This tension is articulated in the two sub-themes: the introspective and reflective dimension of the identity process (“Recognizing Oneself”), the search for legitimacy within society, one’s culture, and through the eyes of others, an outlook often informed by binary norms (“Being Recognized”).

3.1.1 Recognizing oneself

The various life stages of the interviewees appear to mark different moments in the process of identity construction, both in terms of gender and in a broader perspective related to subjectivity. In many narratives, childhood emerges as a crucial phase for the internalization of behavioral codes associated with the sex assigned at birth.

Nathan, 29 years old, recounting his experience, clearly emphasizes this aspect: “Even with children, we tell them how they should behave, which we’ve realized we shouldn’t do, but we still do it in terms of gender. It’s as if, from birth, you force your children to like a certain kind of toy, a certain kind of clothing, a certain color. They have to behave a certain way, speak a certain way, just because of their gender. And I think

that’s not helpful and it’s not something we should be doing, but for some reason, it’s still the norm in society. If it were up to me, I’d just say: forget the labels—they just make everything harder”. Nathan’s struggle resonates with the experiences shared by other participants, who describe their journeys as a forced adaptation to normative gender frameworks. Giulio, 24 years old, also recalls, with a touch of irony, how the expectations tied to his assigned sex at birth played a central role from the very beginning of his life, particularly evident in the hopes and wishes expressed by his maternal grandmother. In this regard, he recounts: “My grandma, a super devout Christian. She couldn’t wait to have a granddaughter, and she dreamed of spoiling her like nothing else in the world. I’ll always remember her saying: ‘I want to see you with long hair, earrings...’ (at least I managed the earrings), ‘a ballerina...’. As for clothes, here I am in sweatpants and Mike’s hoodie. And as for a boyfriend...yeah, that’s a fail too. So basically, this could very well be the perfect example, maybe even the most obvious one of how I’ve completely failed to live up to her expectations”.

Entering adolescence often brings increased self-awareness but also greater exposure to social pressure and conformity. This phase, marked by strong dynamics of conformity, frequently fosters a desire for mirroring and acceptance among peers, thereby reinforcing a binary and stereotyped view of gender. Giulio recounts: “Then there was a time, obviously during the adolescent years, when you’re judged by everyone, especially your friends. So, I started growing out my hair, getting clothes, heels, and all that. I felt it wasn’t me, but it was either that or my friends wouldn’t talk to me. So yes, I think I was pretty influenced by gender binarism, from both sides”. The later teenage years and early twenties often coincide with a more centered sense of identity, characterized by a more reflective approach and a gradual emancipation from external judgment. As Nathan says: “If before you look more outside yourself, in your twenties you start looking inward”. Beyond developmental milestones, hormone therapy plays a central role in identity formation, influencing both bodily perception and subjective self-understanding. Eleanor, 32 years old, who began estrogen therapy about a year ago, shares the emotional benefits: “When I started, I saw emotional benefits too, especially with anxiety”. Mirko, 21 years old, also describes a significant shift in his self-perception and confidence, which he associates with the initiation of hormone therapy. This transformation appears to have developed in parallel with, and in part thanks to, the bodily and psychological changes brought about by testosterone: “Yes, I think that played a role, but I believe testosterone had a greater impact. Seeing changes in my body, results I couldn’t see before, has really boosted my self-confidence”. Finally, some narratives describe identity construction as a dynamic, composite process, like a collage where diverse elements, related or not to gender, are selected and reworked. Shampoo, 22 years old, describes a similar practice within the transmasculine community as well: “It’s kind of a trend I see among all the transmasculine people I’m friends with: taking all these elements considered traditionally masculine or feminine and reworking them creatively. I used to describe being non-binary literally as a collage”.

3.1.2 Being recognized

Socio-cultural context plays a central role in the life and transition paths of the interviewees, proving to be far from marginal in the construction of identity. In many testimonies, the need to know oneself and pursue a sense of authenticity coincides with the need to obtain some form of recognition from others. This search for recognition often clashes with a normative social gaze, which many trans people end up internalizing, especially in the early stages of their journeys, trapping themselves in frameworks they later come to question. Antony, 23 years old, articulates this clearly: “Even after coming out, until last year, I actually tried to box myself into the category of ‘man’, even though I soon realized that I did not fully identify with either culturally recognized position of ‘man’ or ‘woman’. Unconsciously, it was also a bit of internalized transphobia. I had to present this way, dress this way, or else I wouldn’t be recognized. I don’t know, cutting my hair shorter than I liked, *etc.*”. This awareness evolves over time, giving space to new strategies of self-affirmation, including everyday acts of resistance. The pressure to conform to social expectations manifests differently depending on one’s assigned sex at birth and the path they’ve taken. Clara, 19 years old, for example, acknowledges the perceived advantage of having an appearance that aligns with socially recognized standards of femininity: “In a way, I can even say I’m lucky, because what I want, what I want to be, fits the standard of femininity”. However, before beginning her affirmation journey, Clara faced equally strong pressures tied to masculinity, which did not reflect her identity (...) based on the sex you’re born with, your family, your friends, everyone around you, it’s like they expect something from you, they want you to fit into certain boxes, certain patterns. And if you don’t, you often try to force yourself into them. I tried to force myself into them. But it didn’t go well. It got to the point where I tried to kill myself. Despite the pervasiveness of these pressures, the social context can also provide crucial resources for self-determination, especially through friendships and community connections. For many interviewees, friendships represent a space of openness, listening, and non-judgmental recognition. Giovanni, 22 years old, shares a similar feeling: “With the amazing friends I had, I could be however I wanted. They would never question anything, so I was truly myself”. Another important source of support and resonance is the ability to connect with similar experiences through the queer community or social media, which often serve as the first access point to alternative narratives and representations. Seeing people who have gone through transition can serve as a motivational lever and source of hope. Enrico’s experience, like that of many others, highlights how contact with members of the queer community plays a central role in shaping imaginaries and exploring alternative representations of gender beyond normative frameworks: “I had to build my own idea of what it means to be a man and what it means to be a woman. The Lesbian, Gay, Bisexual and Transgender (LGBT+) community helped me a lot in this process, especially by opening me up to categories that go beyond the societal standard, in other words, beyond the binary”.

3.2 Second theme: navigating masculinity

This theme focuses on the concept of masculinity and its identity and social articulations, a central issue in relation to the research question guiding this study. This theme highlights the processual, dynamic, and non-linear nature with which gender, in this case masculinity, is experienced, questioned, and sometimes subverted by the interviewees. The image of “traversing” was adopted to describe a continuous and reflective movement that lies between adherence to normative models of masculinity and the individual and collective attempt to deconstruct or reimagine them. The narratives collected show a constant tension between the internalization of social expectations linked to “being a real man” and the desire to break away from hegemonic models of masculinity, often perceived as oppressive, stereotypical, or inauthentic. Within this theme, three main subthemes were identified: a set of strategies enacted, more or less consciously, to conform to a socially recognized idea of masculinity (“Compensatory Behaviors”), a critical and sometimes painful distancing from social expectations linked to masculinity (“Rejection of Male Models”), the emergence of alternative proposals to hegemonic masculinity detached from the need to conform to a monolithic ideal (“Plural Masculinities”).

3.2.1 Compensatory male behaviors

Compensatory male behaviors can be defined as attitudes or practices adopted, mostly by men, to reaffirm their masculinity when it is perceived as questioned or threatened. A specific focus was dedicated to this topic due to its recurrence in the interviews, particularly among trans men who tend to manifest these dynamics especially during the early phases of their transition or in periods prior to hormone therapy. However, non-binary people, as well as trans women and girls, when mentioning these aspects, generally refer to a past period when they were socialized as men and were required to perform gender according to rigid and stereotyped norms. Here, the focus is mainly on the accounts of trans men as they represent the most frequent cases in the empirical material collected. For many interviewed trans men, masculinity emerges as an identity constantly scrutinized and doubted, especially by cisgender people. These narratives highlight that compensatory behaviors are often linked to a dual level of recognition: on one side, the need to subjectively identify with a legitimized masculinity; on the other, the need to obtain social recognition that does not question one’s identity. Both dimensions intertwine complexly, profoundly influencing the lived experience and self-construction.

Giulio describes a persistent internal conflict between normative expectations and personal experience: “One thing I often say is that, as a trans guy, I feel like there’s this toxic masculinity constantly in my head, in the sense that I don’t feel entitled to do certain things that if a cis man did, I wouldn’t even notice. (...) I feel this kind of toxic masculinity weight”. It is interesting to observe how, in the attempt to assert a recognized male identity, some people report having to renounce or repress aspects of themselves perceived as “feminine”. The rediscovery and integration of these aspects are later described as significant moments in personal growth. Enrico, 30 years

old, emphasizes: “It helped me a lot, and now I live peacefully accepting my feminine side, which I used to hate so much”. Shampoo’s experience, as a non-binary person, is representative of how cisnormative gazes—particularly those enforcing a narrow, standardized ideal of masculinity—are often internalized even by professionals encountered during gender transition processes. Their narrative illustrates how accessing medical or psychological support frequently requires conforming to binary norms, especially for those whose identities fall outside traditional gender categories. “When I started therapy, I came into full contact with the idea of the gender binary, in the most intense way. This is something widely known (...). When you go through those so-called six months before receiving the official approval that certifies you experience dysphoria, it’s common, if you’re non-binary, to pretend to be binary, because otherwise, it becomes much harder. So, during that time, I started, let’s say, to exaggerate things a bit”.

3.2.2 Rejection of male models

A cross-cutting theme emerging from all interviews concerns the rejection of normative or imposed models of masculinity. Whether it is paternal figures, cultural representations, or peer models, this distancing unites non-binary, transmasculine, and transfeminine people. The forms this rejection takes vary, but some common tendencies can be identified. Among them, a critique of an emotionally inaccessible, aggressive, and rigid male ideal stands out. Shampoo describes this model: “For me, it was very much connected to the idea of being solid as a rock, very decisive, also very aggressive in manners. (...) Connected also to not showing emotions other than anger”. Clara, 19 years old, highlights the assimilation of masculinity with strength, virility, and rejection of the feminine: “Pretty stupid things like (...) you can’t cry, you have to show strength: you have to be virile. (...) Things I never adapted to”.

In many narratives, the paternal figure emerges as a primary conduit for the transmission of normative masculinity, often depicted as a limiting model from which participants feel the need to distance themselves. Shampoo reflects: “My whole process with the idea of cis male masculinity came from this close contact with a problematic male figure like my father”. Similarly, Domenico, 21 years old, denounces the impossibility of finding positive or functional male representations within his family experience. The masculinity I see is my dad who doesn’t go to therapy even if he should because he has no idea how to talk about his emotions. However, examples of positive and alternative male models do exist, often embodied by the paternal figure. Riccardo, 19 years old, recounts: “Regarding typical male models, my father is actually very different: a very sweet, empathetic person unlike the stereotypical stone wall, untouchable man. Same with my grandparents, who were always very sweet and had a deep, intimate relationship with their male friends, which I found very interesting”. Another recurring theme in the interviews is the relationship with women and the adherence to, or rejection of, internalized forms of sexism. Many interviewees report having witnessed or been subjected to sexist behaviors, explicitly distancing themselves from sexualizing or derogatory male conduct. Marco, 31 years old, shares a similar experience: “Among men, I often noticed, that comments on women’s

physical appearance were very common, as were jokes of that nature, which I wasn’t used to hearing or making, obviously. And I also sensed that others thought I didn’t like women simply because I didn’t make certain remarks about them”. A relevant element across many narratives is the notion of a “double gender perspective”, which enables various trans and non-binary individuals to observe internalized gender dynamics with greater clarity. This perspective proves valuable in both the deconstruction of hegemonic masculinity and the construction of a more empathetic and reflective subjectivity. Clara’s experience, as a trans woman, also reflects this dual dynamic, one that is both a source of suffering and a catalyst for awareness. Her account reveals how exposure to dominant cisnormative and heteromale behaviors, particularly in early social environments like school, contributed to a deeper critical understanding of gendered power dynamics and objectification: “I was able to witness firsthand how most of my male classmates behaved. They were always looking, like, constantly commenting, saying things like ‘look at that girl’s ass’ or talking about our female classmates as if they were just objects to look at”.

3.2.3 Plural masculinities

Alongside a process of distancing from hegemonic models of masculinity many participants describe subjective and alternative ways of embodying masculinity. In several accounts, a more flexible understanding of gender enables the blending of traditional masculine models with alternative influences, originating from diverse cultural backgrounds and non-normative gender expressions, often found within the queer community itself. A particularly significant example is offered by Mirko, who describes how his exposure to K-pop aesthetics and diverse body representations helped dismantle the singular image of masculinity he had previously internalized. Beyond the issue of diverse male aesthetic models, several participants reflect on the rigidity of bodily standards and how such norms deeply shape masculinity. Riccardo, for example, explores how the model he aspires to allows for openly confronting physical insecurities, contributing to a redefinition of masculinity that includes vulnerability: “Physical flaws? I think we men really feel them, maybe not fitting the standard. That’s usually associated with women, but I remember in middle school we had a civic education lesson on eating disorders, and people only talked about women trying to fit the stereotypical female body standard. No one ever mentioned that this is also very much an issue for men. Like being too short, not having broad shoulders, having small hands...these are things many people assume men don’t notice about themselves because they don’t talk about it. But to me, it’s a major, let’s say, problem for masculinity”. An analytical perspective on the transformations underway in masculine ideals is offered by Aria, 24 years old, who, despite not identifying as male, observes these changes, particularly in relation to masculinity as lived by trans men: “Right now, I’m comparing two quite different types of masculinity (...) on one side, the unexamined, misogynistic male, that’s one extreme. On the other, I see a more positive masculinity, one that doesn’t get boxed in by ideas like ‘this is for girls’, *etc.* (...) It seems less standardized, more free (...). And in this new

model of masculinity, I see an evolution—a stepping down from the pedestal and, above all, a loosening of rigid norms that are still stuck in the 19th century, if not earlier”. The idea of hybridization between genders as a transformative element, particularly for masculinity, emerges in many of the collected testimonies. Especially relevant is the contribution of Shampoo, who highlights the difference between cis and trans experiences of masculinity, emphasizing how the latter offers a more radical and deconstructive perspective: “I don’t think trans and cis masculinities are really reconcilable (...). When I started to better understand gender theories, I really embraced this idea that trans existence is inherently tied to non-binarity, even though many trans people do identify within a binary. But being trans also means traversing gender, not simply moving from one to the other, but traversing even toward nothingness”. Although this experience should not be generalized to all interviewees, it is emblematic of how many testimonies point to more fluid, dynamic, and continually redefined notions of masculinity. In this sense, the experiences of those who have crossed gender boundaries, regardless of whether they now identify within a binary framework, constitute a valuable contribution, broadening perspectives and enriching the overall discourse on gender. This is also evident in the experiences of trans men who do align with a binary identity. For example, Giovanni provides a unique and freer perspective on masculinity, precisely because of the journey he undertook to achieve it. He reflects: “(...) I lived for twenty years without any virility at all, the idea of wearing makeup or doing something graceful that might be seen as feminine doesn’t faze me at all. I’m not sure I can say the same for boys born into male bodies, because maybe they’re more terrified of being stigmatized”.

4. Discussion

The findings of this study offer a nuanced and empirically grounded understanding of how transgender and non-binary (TNB) individuals construct, negotiate, and reconfigure masculinity within contemporary Italian sociocultural contexts. The two themes identified—Identity and Social Recognition and Navigating Masculinity—demonstrate that gender identity is not a fixed psychological attribute, but an ongoing relational process shaped through the dynamic interplay of subjective meaning-making and external validation. These findings closely align with existing scholarship showing that transgender people actively develop alternative identity narratives to sustain agency and psychological wellbeing even when social recognition is fragile or inconsistent [47]. Consistent with literature indicating that gender congruence reduces distress, anxiety, and ruminative processes [48–50], participants described moments of self-understanding and bodily coherence as stabilising and emotionally generative. Conversely, experiences of misrecognition—particularly within families, peer groups, and institutional settings—echo research demonstrating the harmful effects of stigma, marginalisation, and restrictive gender norms on mental health and suicidality [32]. The accounts also resonate with emerging work on gender euphoria [51–53], as participants frequently linked affirming bodily changes and self-defined gender practices to states of

pride, joy, or calm. These findings underline the importance of conceptualising gender development not solely through frameworks of dysphoria or suffering but also through affirmative and generative emotional experiences [54–56]. The second theme, Navigating Masculinity, offers insight into how TNB individuals engage with and transform dominant masculine norms. Several participants reported initially internalising or performing hegemonic masculinity—sometimes adopting compensatory or hypermasculine behaviours—to secure social legitimacy or align themselves with expected standards. This pattern is consistent with prior findings on hypermasculinity among trans men [9, 57, 58]. Over time, however, participants frequently distanced themselves from rigid masculine scripts, instead developing flexible, relational, and plural forms of masculinity. These trajectories align with theoretical approaches conceptualising masculinities as multiple, situated, and historically contingent [3, 6, 24, 31], and with evidence that trans experiences can destabilise or reconfigure normative gender regimes [18]. Several participants described masculinity as a personalised assemblage—a hybrid configuration drawing on diverse cultural, aesthetic, and relational influences. Others depicted masculinity as a process rather than a category, emphasising traversal, multiplicity, or even the refusal of fixed gendered endpoints. This perspective resonates with emerging scholarship on post-binary, hybrid, and anti-hegemonic trans masculinities [59].

Institutional contexts—particularly psychological and medical settings—emerged as significant sites of negotiation. Participants described feeling pressured to present themselves according to binary and normative masculine expectations during evaluative phases of gender-affirming care, reflecting evidence that gatekeeping practices can amplify conformity pressures and restrict authenticity [11, 20–22]. Despite these constraints, participants demonstrated agency and creativity by drawing on peer communities, queer spaces, and online networks to construct more livable and self-determined masculinities. Their narratives strongly suggest that TNB individuals are not passive recipients of gendered norms but active interpreters and reconfigurers of them. Including transgender women in the sample further deepened the analysis. Their narratives revealed how masculine norms function as a system of expectations, behaviours, and social pressures encountered sometimes long before transition. Transfeminine accounts illuminated how masculine norms are internalised, resisted, or re-signified from positions that are often overlooked within CSMM scholarship [60]. Their inclusion thus prevents a cisnormative narrowing of the analytic field and highlights the epistemic value of transfeminine experiences in understanding how gender systems operate.

Overall, participants’ narratives underscore the centrality of relational contexts in shaping gender identity development. Psychological and social recognition emerged as crucial mechanisms for wellbeing, while community relationships—particularly within queer networks—provided essential resources for developing non-hegemonic, authentic, and relationally grounded masculinities. These patterns are consistent with evidence that affirming interpersonal environments improve mental health outcomes [29, 61].

Clinically, these findings reinforce the importance of dia-

logic, collaborative, and context-sensitive approaches. Rather than treating masculinity as a fixed endpoint to be assessed or verified, psychological support should recognise uncertainty, fluidity, and non-linearity as legitimate aspects of gender development. This is in line with psychosocial models highlighting the interdependence of embodiment, relational recognition, and meaning-making [25, 59, 62].

5. Conclusions

This study provides a nuanced and empirically grounded account of how transgender and non-binary individuals negotiate, reinterpret, and reassemble masculinity within contemporary Italian sociocultural contexts. Participants' narratives reveal that gender identity is not a fixed psychological trait but a dynamic and relational process, shaped through the interplay between self-recognition, embodied experience, and the search for social validation. Moments of coherence between internal identity and embodied change were described as emotionally stabilising and generative, consistent with evidence linking gender congruence to improved psychological wellbeing. Conversely, experiences of misrecognition—particularly within families, peer groups, and institutional settings—highlight the persistent influence of stigma and restrictive gender norms, echoing the broader literature on minority stress and its mental health consequences. Participants also offered important insights into the negotiation of masculinity. While some initially engaged in compensatory or normative masculine performances, these strategies often proved temporary. Over time, many moved towards more plural, relational, and flexible masculinities, shaped by personal reflection, community support, and critical engagement with hegemonic norms. These trajectories underscore that transgender and non-binary individuals are not passive recipients of gendered expectations but active agents who creatively redefine them. Including transgender women in the sample further broadened the analytic field by illuminating how masculine norms are encountered, internalised, or resisted across diverse gendered pathways.

The study is not without limitations. The sample, recruited from a single gender-affirming healthcare centre in northern Italy, limits the transferability of the findings to other regional or institutional contexts. The relatively small sample size and cross-sectional design do not allow exploration of long-term identity trajectories or the temporal dynamics of masculinity negotiation. Future research should adopt longitudinal or mixed-methods approaches and include more diverse participants across regions and sociocultural environments. Further studies would also benefit from examining structural factors—such as healthcare policy, school environments, and media representation—that shape gendered experiences and opportunities for recognition.

Despite these limitations, the study offers meaningful contributions to understanding how transgender and non-binary people actively shape and reimagine masculinity. Clinically, the findings reinforce the importance of dialogic, collaborative, and context-sensitive approaches. Affirming relationships with healthcare providers have been shown to improve mental health outcomes [62], whereas rigid or normative clin-

ical frameworks can undermine wellbeing. Recent scholarship underscores the need for flexible, tailored, and culturally responsive models of gender-affirming care [63–67], and the present findings strongly support this direction. Ultimately, the study highlights the importance of relational, intersectional, and affirming practices across healthcare, policy, and research—approaches that sustain the flourishing of transgender and non-binary individuals and contribute to a broader rethinking of masculinity within contemporary society.

AVAILABILITY OF DATA AND MATERIALS

The data presented in this study are available on reasonable request from the corresponding author.

AUTHOR CONTRIBUTIONS

MR, AG, CDV and IT—conceptualization; validation; writing-review. MR, IT, CDV and FC—methodology, software; formal analysis, investigation, resources, data curation. MR, CDV, AS, FC and SM—writing-original draft preparation; editing, visualization. CDV and IT—supervision. All authors have read and agreed to the published version of the manuscript.

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

The study received ethical approval from the Ethical Committee of Padova (reference: 859-b) and was conducted in accordance with the Declaration of Helsinki. Prior to participation, all interviewees reviewed and signed the informed consent and privacy agreement in the presence of the interviewer.

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CONFLICT OF INTEREST

The authors declare no conflict of interest.

SUPPLEMENTARY MATERIAL

Supplementary material associated with this article can be found, in the online version, at <https://oss.jomh.org/files/article/2027620629576859648/attachment/>

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