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Transgender College Athletes: A Special Commentary

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Recently, multiple bills from various states have attempted to ban transgender athletes from participating in sports. Guided by misinformation, these bills and policies set a dangerous precedent that is overall harmful to the well-being of trans athletes. This article discusses clinical, research, training, and advocacy priorities that should be addressed to protect the rights of trans athletes.

Keywords: counseling sexology, transgender, athletes, college, commentary

Introduction

In the year 2020, twenty bills aimed at banning transgender individuals from participating in athletics were introduced into state legislatures (Strangio & Arkles, 2020). Even more recently, several states have passed bills barring transgender girls and women from participating on female sports teams. Bills such as these often contain false information and harmful beliefs that support a narrative that places cisgender individuals above trans individuals. A common claim is that allowing trans athletes to compete will harm cisgender women because trans women have “advantages” as they were born with male bodies. On the surface, this sends the message that women’s bodies should conform to a certain appearance that is not “too masculine” or else that individual is not a “real” woman. Additionally, this form of gender policing is damaging to all women as it further reinforces ideas of women being “weak” and in need of protection. Trans women and girls, in particular, commonly face discrimination and violence on the basis of their gender identity. This is in direct opposition to the statement that trans women somehow have an advantage over cisgender women. In this article, the authors address current clinical, research, training, and advocacy priorities related to this population. The variation of policies at the collegiate, state, and federal level make this topic extremely convoluted as they often do not align. Further, policies cloud the most important issue, the well-being of trans athletes.

Clinical Priorities

The clinical priorities for this population may be especially relevant for college counselors. When working with trans athletes, it is important for counselors to understand that their stressors are different from those of traditional college students. In general, college athletes experience more stress as they balance the roles of athlete and student. Organizational stressors such as pressure from coaches, parents, and the public can be pervasive and often prevail throughout

the athlete’s career.

Another consideration for this population is the impact of hormone treatment therapy and the need for counselors to educate themselves on this topic. In line with the National Collegiate Athletic Association (NCAA) policies, transgender athletes must have completed, initiated, or be in the process of taking hormones as part of the gender transition in order to participate in the sports team that aligns with their gender (NCAA, 2011). Hormone therapy is a common component of gender affirmation and promotes the health and well-being of trans individuals (Baker et al., 2021). Previous reviews of gender-affirming hormone treatment (GAHT) indicate psychological benefits such as reductions in depression and anxiety and overall improvements in quality of life among trans individuals. Although GAHT may improve mental health, clinicians need to assess the family relationships, social support, discriminatory events, and employment status of trans individuals to gain a better understanding of their mental well-being due to the high-risk levels of depression and anxiety, two disorders also common among college students. Because GAHT also has physical impacts, collaborative care with the individual’s treating physician is highly recommended for the most holistic approach. Long-term hormone treatment can impact bone and cardiovascular health (Unger, 2016). This is especially important for athletes to consider as it could leave the individual more prone to sports injuries. It should also be noted that feminizing

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hormone therapy typically causes decreased muscle mass with effects appearing three to six months after treatment begins.

Additionally, the authors urge counselors to utilize an intersectional framework to further understand the multidimensions of identity and experiences among the trans population. Intersectionality explains the multiplicity of identities and how they are embedded within specific social, cultural, and interpersonal contexts (Diamond & Butterworth, 2008). Moreover, it is necessary to recognize the power within social structures in environments such as political, economic, kinship, religious, and educational dimensions to understand its effects on trans individuals. All of these factors are important in the treatment planning process. For example, trans athletes of color are likely to experience compounding discrimination based on their gender identity and race. Further, with recent bills, a trans woman of color may be disbarred from participating in their sport with little legal recourse. By understanding the various connections of gender, race, and social class with sexuality, age, religion, and nationality of trans individuals, counselors are well prepared to offer individualized support and guidance.

Research Priorities

In general, there is a lack of research on trans college athletes. Therefore, the research priorities should further address the mental health and well-being of this population along with the impacts of policies aimed at trans athletes. For example, researching the lived experiences of trans athletes or researching levels of stress, anxiety, and depression. It may often be difficult to find trans athletes who are willing to participate in research or gather enough participants for a meaningful sample size. Trans individuals have cited issues related to mistrust, lack of awareness about research opportunities, logistical concerns, and psychosocial/emotional concerns related to being “outed” as potential barriers to research participation (Owen-Smith et al., 2016). Therefore, when conducting research with this population specific research methods may be helpful (Shaghghi, Bhopal, & Sheikh, 2011). Snowball sampling may be useful in identifying additional participants but could lead to over-sampling of subsets of the population depending on the original participant’s network. Respondent-driven sampling can help address some of these concerns. Indigenous field worker sampling is one way to use trained investigators from a specific community to recruit participants within the community. Facility-based sampling and time-location sampling may be helpful if researchers are aware of locations or organizations that trans individuals frequent. Within the recruitment process, it is essential to ensure that researchers are abiding by all ethical codes pertaining to research.

It is important to note that, while research on trans individuals themselves is important, it does not address issues

of equity and justice. In order to address misinformation, it is also important to research public perception and knowledge of trans athletes. For example, examining athletic administrators, trainers, and coaches factual knowledge (i.e. terminology, gender transitioning process, etc.) of trans individuals and NCAA policies. Consulting with trans rights groups such as the American Civil Liberties Union may also aid researchers in focusing their research on timely issues that can challenge public perception and sources of misinformation.

Training Priorities

One of the most important training efforts is to correct inaccurate information about trans athletes. Counselors can work with athletic departments to address these concerns. Many universities also have optional inclusivity training programs for faculty, staff, and students. Cross campus collaboration may be especially helpful in prioritizing the training of those in athletic departments. Learning more about how an athletic department functions can allow counselors to maximize their impact. For example, athletic departments have compliance officers who ensure that NCAA regulations are being followed. Collaborating with an administrative individual like a compliance officer can aid counselors in understanding NCAA regulations as well as the current issues in the athletic department. This will allow for more individualized training. Counselors will likely find that training priorities overlap with issues related to advocacy discussed in the next section.

Advocacy Priorities

The NCAA has long standing policies regarding the inclusion of trans athletes and is committed to diversity, inclusion and gender equity among college athletes, coaches, and administrators (NCAA, 2011). The goal of the NCAA Office of Inclusion is to provide an inclusive space for trans athletes. In 2010, the NCAA Inclusion of transgender Student-Athletes handbook was established as a resource to provide guidance to NCAA athletic programs to ensure trans athletes fair, respectful, and legal access to collegiate sports teams (NCAA, 2011, p. 2). Thus, the authors recommend following overall guidelines outlined in the handbook, which include providing equal opportunity, valuing diversity, and establishing policy (NCAA, 2011, p. 14-15). For example, focusing on developing non-discrimination and harassment policies that include gender identity and expression is imperative. Additionally, anticipate and address trans athletes’ issues in a proactive manner by providing prevention and education workshops to members of the athletics community. Further, becoming knowledgeable about trans identity such as using preferred terminology and language, recognizing current perspectives regarding participation of trans athletes on teams, and respecting the right to privacy

among trans athletes when discussing gender identity promote commitment to equity, inclusion, and respect within the athletic community.

Specific to the educational environment, the purpose of Title IX is to ensure equal treatment of individuals regardless of sex. However, LGBTQ+ individuals often do not have specific protections within Title IX. Many of the discriminatory legislative bills being introduced often cite that they are “protecting women’s sports” by banning trans athletes. In this case, Title IX which is intended to prevent discrimination is being “flipped” leading to direct discrimination in favor of cisgender athletes. Federal policies often undergo frequent changes or additions so it is important to stay up to date on current policies and do “refresher” trainings when changes occur. For example, the recent Supreme Court case of *Bostock v. Clayton County* led to an executive order that states that discrimination based on sex also covers discrimination on the basis of gender identity and sexual orientation (Exec. Order No. 13988, 86 FR 7023 (7023-7025), 2021). This court decision applies to Title VII of the Civil Rights Act of 1964 which is used to inform Title IX. Advocacy work should promote a narrative of inclusion rather than the one of exclusion frequently found in recent bills.

Conclusion

Overall, the focus in clinical, research, training, and advocacy areas should be to address the spread of misinformation regarding trans athletes. The current message is that if you do not “conform” you cannot participate in sports. This direct discrimination affects the overall well-being of trans athletes who may find themselves losing their athletic careers at the hand of these policies. The life of a college athlete is already overwhelming; by clearing the way for trans athletes to participate in sports through advocacy and education, the hope is that some of this stress can be mitigated.

References

- Baker, K. E., Wilson, L. M., Sharma, R., Dukhanin, V., McArthur, K., & Robinson, K. A. (2021). Hormone therapy, mental health, and quality of life among transgender people: A systematic review. *Journal of the Endocrine Society*, 5(4). doi:10.1210/jendso/bvab011
- Diamond, L. M., & Butterworth, M. (2008). Questioning gender and sexual identity: Dynamic links over time. *Sex Roles*, 59(5-6), 365–376. doi:10.1007/s11199-008-9425-3
- Exec. Order No. 13988, 86 FR 7023 (7023-7025). (2021).
- National Collegiate Athletics Association. (2011). *NCAA inclusion of transgender student-athletes*. Retrieved from https://ncaaorg.s3.amazonaws.com/inclusion/lgbtq/INC_TransgenderHandbook.pdf
- Owen-Smith, A. A., Woodyatt, C., Sineath, R. C., Hunkeler, E. M., Barnwell, L. T., Graham, A., ... Goodman, M. (2016). Perceptions of barriers to and facilitators of participation in health research among transgender people. *Transgender Health*, 1(1), 187–196. doi:10.1089/trgh.2016.0023
- Shaghghi, A., Bhopal, R. S., & Sheikh, A. (2011). Approaches to recruiting ‘hard-to-reach’ populations into re-search: A review of the literature. *Health Promotion Perspectives*. doi:10.5681/HPP.2011.009
- Strangio, C., & Arkles, G. (2020, 5). *Four myths about trans athletes, debunked*. ACLU. Retrieved from <https://www.aclu.org/news/lgbtq-rights/four-myths-about-Trans-athletes-debunked/>
- Unger, C. A. (2016). Hormone therapy for transgender patients. *Translational Andrology and Urology*, 5(6), 877–884. doi:10.21037/tau.2016.09.04