# Contents

1. Introduction 2

2. Equal Opportunities 2

3. Definition 2

4. Understanding the Challenges Faced 3

5. Legislation
   5.1 Equality Act 2010 3
   5.2 The Gender Recognition Act 2004 4
   5.3 The Data Protection Act 1988 4
   5.4 The Human Rights Act 1998 4

6. Practical Issues
   6.1 Trans Respect guidelines for Staff 5
   6.2 Confidentiality 5
   6.3 Single-sex Facilities/Toilets 5
   6.4 Recruitment 5
   6.5 Records 6
   6.6 References 6

7. The Process of Gender Reassignment
   7.1 Support 6
   7.2 Transition Action Plan 6
   7.3 Managing the Reactions of Colleagues 7
   7.4 Sickness and Absence from the University 7

Appendix A: The Transition Process
Appendix B: Example of Action Plan to Support Staff
Appendix C: Terminology
Appendix D: Further Information and Sources of Support
1. **Introduction**

This guidance is designed as a resource for managers to support a member of staff who is considering transitioning to their preferred gender, is in the process of transitioning, or has transitioned. It can also be used to increase staff awareness of gender identity and what may constitute discrimination of trans staff.

The University recognises that transitioning can be a very difficult and complex time for an individual and would wish to act in a sensitive and supportive way by having helpful guidance in place to ease any transitional period. The decision to transition to a different gender is not something a person undertakes lightly and the support of managers and colleagues is vital.

Trans people have been identified as a particularly vulnerable group. Recent research indicates a number of complex issues and negative experiences of trans staff within higher education institutions. We recognise our legal responsibility to protect the rights of trans staff and to ensure that no individual is subject to discrimination or victimisation as a result of the gender in which they present themselves.

This guidance should be read as part of the wider set of policies including the University's [Dignity Policy](#).

2. **Equal Opportunities**

The University values the diversity of its people and is committed to promoting equal opportunities and eliminating discrimination. Therefore staff will apply and operate this guidance fairly and in doing so ensure that there is no discrimination on the grounds of age, disability, gender, gender reassignment, marital status, pregnancy and maternity, race, religious or political belief, sex, sexual orientation or trade union membership/activity.

3. **Definition**

Every person is assigned a gender at birth – male or female. A small number of people find the gender they are assigned does not match their gender identity – their internal sense of where they exist in relation to being female or male. A wide variety of terms can be used to describe a person whose gender identity is different to their birth label. Trans is an umbrella term to describe a broad range of different identities, the most well-known of which are probably transgender, transsexual or transvestite. Please see [Appendix C: Terminology](#). The word ‘Trans’ can be used without offence to identify:

1. People undergoing gender Transition (commonly referred to as a ‘sex change’),

---

1 It is not usually appropriate to use the terms ‘sex change’ or ‘pre-/post-operative’. These imply that the process of transition must involve some form of surgery, which may not necessarily be the case.
2. People who identify themselves as someone with a different gender from that assigned to them at birth, but who may have decided not to undergo medical treatment;
3. People who choose to dress in the clothing typically worn by the other sex. It is worth noting that every person is different: some people transition from one gender to another with ease and others do not; some people will transition to their preferred gender full-time and others will choose to live in their preferred gender part-time.

4. **Understanding the Challenges Faced**

The opposition and barriers that trans people still encounter to the present day are well documented. According to the survey research published as part of the Equalities Review²:

- 73% of trans people surveyed experienced some form of harassment in public (ranging from comments and verbal abuse to physical violence)
- 21% stated that they avoided going out because of fear of harassment
- 46% stated that they had experienced harassment in their neighbourhoods
- 64% of young trans men and 44% of young trans women experienced harassment or bullying at school, not just from their fellow pupils but also school staff including teachers
- 28% stated that they had moved to a different neighbourhood because of their transition

In Higher Education, the Equality Challenge Unit reported in 2009 that 39.3% of trans staff reported negative treatment from students due to their gender identity.

Research carried out by Press for Change in 2009³ reported that trans people are three times more likely to experience a transphobic hate incident or hate crime than lesbians and gay men homophobic hate incidents or crimes. The most common forms of harassment were (unsolicited) comments (44%) and verbal abuse (27%). 15% of the respondents had experienced threatening behaviour and 7% physical abuse.

5. **Legislation**

5.1 **Equalities Act 2010**

The Equalities Act 2010 has strengthened and streamlined previous equalities legislation. Gender reassignment is one of the nine protected characteristics within the Act and is also included in the Public Sector Equality Duty.

---


Importantly, the definition of gender reassignment within the Act gives protection from discrimination to a person who has proposed, started or completed a process to change their sex. As such, people do not have to undergo a medical process to assign a new gender to be protected by the Act. What matters is that a person has the intention to permanently live, or are already living in their preferred gender role. In short, the Act protects:

- Trans people whether or not they are under medical supervision to undergo gender reassignment,
- People who experience discrimination because they are perceived to be trans people (whether or not they are);
- People who are discriminated against because of their association with trans person

The Equality Duty requires that the University has due regard to the need to:

- Eliminate discrimination, harassment and victimisation
- Advance equality of opportunity; and foster good relations

5.2 The Gender Recognition Act 2004

In the past, a person’s legal gender could only be defined by their birth certificate and could not be changed. The Gender Recognition Act 2004 allows trans people to apply to have legal recognition of their acquired gender.

5.3 The Data Protection Act 1988

Under the Data Protection Act 1998, trans identity and gender reassignment constitute ‘sensitive data’ for the purposes of the legislation. Therefore information relating to a person’s trans status cannot be recorded or passed to another person unless conditions under schedule 3 of the Data Protection Act for processing sensitive personal data are met.

5.4 The Human Rights Act 1998

The Human Rights Act 1998 provides protection to trans people, principally under the right to a private life. The courts have interpreted the concept of ‘private life’ in a very broad way to cover, among other things, a person’s right to express a sexual identity, to live a particular lifestyle and to choose the way they look and dress. It also means that personal information (including official records, photographs and letters) should be kept securely and not shared without the permission of the individual concerned. In addition, the right to privacy states that unless a public authority is acting in accordance with the law, there should be no interference by a public authority with a person’s exercise of their right to a private life.
6. Practical Issues

6.1 Trans Respect Guidelines for Staff

The Equality Challenge Unit recommends the following informal guidelines when supporting trans staff:

- Think of the person as being the gender they identify as.
- Use the name and pronoun that the person asks you to. If you aren’t sure what the right pronoun is, ask. Sometimes it is possible to use you/they/we to avoid the gendered pronouns such as he or she. If you make a mistake with pronouns, correct yourself and move on. Don’t make a big deal out of it.
- Respect people’s privacy. Do not ask what their ‘real’ or ‘birth’ name is. Trans people are often sensitive about revealing information about their past, especially if they think it might affect how they are perceived in the present.
- Similarly, respect their privacy. Do not tell others about a person’s trans status unless they’ve asked you to do so. If documents have to be kept that have the person’s old name and gender on them, keep them confidential.
- Respect people’s boundaries. If you feel it is appropriate to ask a personal question, first ask if it is ok to do so. Personal questions include anything to do with one’s sex life, anatomy (not just genitalia) and relationship status – past, present or future. Questions such as ‘Are you on hormones?’ can be considered personal.
- Listen to the person, and ask how they want to be treated and referred to.

6.2 Confidentiality

Confidentiality is crucial. To ‘out’ someone, without their permission is a form of harassment and a criminal offence and will be treated as such.

6.3 Single-sex Facilities/Toilets

A trans person should have access to ‘men-only’ and ‘women-only’ areas according to the gender in which they live permanently. It should be agreed with the individual the point at which the use of facilities such as changing rooms, shower rooms and toilets change from one sex to the other. It is not acceptable to restrict a trans person to use disabled toilet facilities unless they are disabled.

6.4 Recruitment

Where formal documents are required before commencing employment, confidentiality should be emphasised when asking for birth certificate or passport as if the person has not yet been issued with new identification, the birth certificate will clearly show the person was born with a different name and gender. The same situation can arise with a passport from another country that does not have the same legislative provision as the UK. Therefore, some flexibility may be required in what is asked for.

It should not be expected that job applicants and interviewees will necessarily wish to disclose trans status, as many consider it a private matter.
6.5 Records

If a trans employee is transitioning and following their statement of intent to transition, their staff record should be changed at a mutually agreed time to reflect their preferred gender and name. This must include all paper records which must be replaced with a full set of new ones in the new name and gender. No records should be changed without the permission of the employee concerned. With the exception of pensions a written note of intent to transition is sufficient for the gender and name on staff records to be changed.

To record changes to pensions, the staff member concerned will need to send their birth certificate to the Pensions Department to ensure their gender is changed on pension records. Only people with a full Gender Recognition Certificate (GRC) can have their pension records changed by HMRC.

6.6 References

References for current or former staff who have transitioned must make no reference to the person’s former name or gender, and must use the appropriate pronoun.

7. The Process of Gender Reassignment

In order to support trans staff it is useful to understand the medical process of gender reassignment that some trans people undergo. Despite recent research showing that gender dysphoria is a biological condition, the medical framework for gender reassignment is based on the premise that gender dysphoria is a mental illness. Subsequently, the framework is controversial and perceived by some to be outdated and discriminatory and, in many respects, equivalent to a medical model being used to ‘diagnose’ homosexuality or define disability. At present, though, it forms the framework for the majority of transitions, and is the basis of understanding for medical professionals. Appendix A: The Transition Process provides an overview of a typical transition.

7.1 Support

An employee going through the process of gender reassignment can seek support from their manager, Human Resources Adviser. Self referrals can also be made to the University’s Counselling Service. It is a matter of personal choice as to who should be contacted, but it is recommended that the contact person works with the employee to agree an action plan to cover the period of their transition. It is imperative that confidentiality is maintained at all times. Appendix A provides an overview of a typical transition.

7.2 Transition Action Plan

The employee and their main contact should write an action plan together for managing their transition whilst at the University. This will include agreeing dates of transition and communication plans; the University being guided at all time by the individual’s preferences. Under no circumstances should any communication or actions be taken without explicit consent of the individual. To ‘out’ someone, without their permission, may constitute harassment and accordingly may amount to a breach of discipline or a
criminal offence. The University will take any such misconduct very seriously. An example action plan can be found in Appendix B: Example of Action Plan.

7.3 Managing the Reactions of Colleagues

An important part of the action plan is the communication about the member of staff transitioning to colleagues and other people they work with such as students or customers. As people transition, the process itself may present challenges for other staff and students who have fixed notions of gender. A member of staff who is transitioning may face a broad range of challenges in their work environment. Section 4: Understanding the Challenges Faced outlines the opposition and barriers that trans people still encounter to the present day.

The trans person may want to tell their colleagues about their impending transition individually. However, in agreement with the member of staff, it may be useful to arrange a meeting with their colleagues. The trans staff member should be free to choose whether they make an announcement themselves, or whether it is made for them by a chosen representative. There should be an opportunity for other members of staff to ask questions in person or by email, either of the person concerned if they are comfortable, the meeting host or another relevant person. It may be useful to circulate some basic ground rules on showing respect for trans people.

7.4 Sickness and Absence from the University

In putting together the action plan, absence management should be discussed. When the member of staff is absent for treatment or surgery the Sickness Absence Management Policy should be followed. Further advice and support is available from the Human Resources Adviser.
Appendix A: The transition process

The chart below provides an overview of a typical transition. Each individual’s situation will vary depending on a range of factors, including whether or not a person opts for medical procedures, and whether they are receiving medical assistance privately or on the NHS.

<table>
<thead>
<tr>
<th>Typical Transition Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>A person identifies that their physical gender is not their actual gender</td>
</tr>
<tr>
<td>The person is diagnosed with gender dysphoria</td>
</tr>
<tr>
<td>The person informs their institution that they are going to present in a different gender</td>
</tr>
<tr>
<td>to commence a real-life experience</td>
</tr>
<tr>
<td>After at least three months, the person begins hormone therapy</td>
</tr>
<tr>
<td>At the person’s request, the institution updates its records to reflect any name change</td>
</tr>
<tr>
<td>and their new gender</td>
</tr>
<tr>
<td>A new staff file is created and any documents revealing their former name and gender</td>
</tr>
<tr>
<td>that must be kept (for example, pension records) are marked ‘confidential’</td>
</tr>
<tr>
<td>After at least 12 months of living in their chosen gender, the person may undergo genital</td>
</tr>
<tr>
<td>surgery</td>
</tr>
<tr>
<td>After two years of living in their chosen gender, whether or not they have undergone</td>
</tr>
<tr>
<td>surgery, the person applies for a gender recognition certificate</td>
</tr>
<tr>
<td>A gender recognition certificate is awarded and the person is issued with a new birth</td>
</tr>
<tr>
<td>certificate</td>
</tr>
<tr>
<td>The person is now legally recognised in their chosen gender – all documents and</td>
</tr>
<tr>
<td>references that have not already been changed must now be changed</td>
</tr>
<tr>
<td>If the person is a staff member who is a member of the institution’s pension scheme,</td>
</tr>
<tr>
<td>they must send their new birth certificate to the appropriate person to ensure their</td>
</tr>
<tr>
<td>gender is changed on pension records</td>
</tr>
</tbody>
</table>
Appendix B: Example of Action Plan to support staff

This action plan should be confidential and discussion should take place to agree where copies are kept and who should have access to them.

<table>
<thead>
<tr>
<th><strong>Action Plan to support staff transitioning gender</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact your Human Resources Adviser</td>
</tr>
<tr>
<td>Does the employee feel comfortable continuing in their current role? Are there any temporary or permanent changes to the role which should be considered to support the employee?</td>
</tr>
<tr>
<td>What is the expected timescale of the medical and surgical procedures (if any), if known? Identify periods of planned absences relating to the process</td>
</tr>
<tr>
<td>Is any time off required for medical treatment? If so how will this be dealt with?</td>
</tr>
<tr>
<td>What will the employee’s new title and name be?</td>
</tr>
<tr>
<td>When do they wish to start dressing and presenting as their affirmed gender? Again, will this be phased? (This may not necessarily be the same date as above)</td>
</tr>
<tr>
<td>Are there any dress codes which need to be considered? (Do new uniforms need to be ordered?)</td>
</tr>
<tr>
<td>When does the employee wish to use toilet and changing facilities appropriate to their affirmed gender?</td>
</tr>
<tr>
<td>When, how and which Human Resources records and or systems will need amending? (Consider for example: online records, university ID card, staff records and databases, finance records)</td>
</tr>
<tr>
<td>When and how should colleagues be informed of the transition? (Consider for example: will there be a need to arrange any training for colleagues? Who should be trained? Who will deliver this training?)</td>
</tr>
<tr>
<td>Is there any education material which could be used?</td>
</tr>
<tr>
<td>If this action plan is not drawn up with input from line manager consider how and when they might need to be involved</td>
</tr>
<tr>
<td>Actions agreed</td>
</tr>
<tr>
<td>Date of next meeting</td>
</tr>
</tbody>
</table>
Appendix C: Terminology

In order to understand the social, medical and legal implications of trans issues, it is important to be aware of the variety of terms that may be used.

**Affirmed gender (sometimes may be called 'new' role).** These terms are preferred to the term ‘acquired’ gender. The new gender of a person who has socially transitioned and had their gender reassigned and/or legally recognised. It is possible for an individual to transition and receive legal recognition of their affirmed gender without medical assistance.

**Gender** consists of two related aspects: gender identity, which is a person’s internal perception and experience of their gender; and gender role or expression, which is the way a person lives in society and interacts with others. Gender is less clearly defined than anatomical sex, and does not necessarily represent a simple binary choice: some people have a gender identity that is neither clearly female nor clearly male; however, the overwhelming majority of the population has a gender that accords with their anatomical sex. It should be noted that currently, for the purposes of the law, gender is binary – people can only be male or female.

**Gender dysphoria** (Greek ‘dysphoria’ = dissatisfaction) is a medical condition in which a person has been assigned one gender (usually at birth on the basis of their sex), but identifies as belonging to another gender, or does not conform to the gender role society ascribes to them. Gender dysphoria is not related to sexual orientation. People who have severe gender dysphoria are usually diagnosed with gender identity disorder.

A person with gender dysphoria can experience anxiety, uncertainty or persistently uncomfortable feelings about their birth gender. They may feel that their gender identity is different from their anatomical sex. This dysphoria may lead to a fear of expressing their feelings and a fear of rejection and in some cases deep anxiety or chronic depression. Sometimes a person with gender dysphoria assumes an identity in the opposite sex. This may involve undergoing hormone and, perhaps, surgical procedures to change their sex.

**Gender Identity Disorder (GID)** refers to a person with Gender dysphoria or associated symptoms; the most profound form is Trans-sexualism

**Gender presentation/expression** - While gender identity is subjective and internal to the individual, gender presentation, either through personality or clothing, can determine how a person’s gender is perceived by others. Typically, trans people seek to make their gender expression and presentation match their gender identity, rather than their birth sex.

**Gender recognition certificates (GRC)** are issued under the Gender Recognition Act 2004 by the gender recognition panel. The holder of a full GRC is legally recognised in his or her affirmed gender for all purposes. This means that the person in question now belongs to their affirmed gender in both a legal and a social context. A full GRC is issued to an applicant if they can satisfy the panel that they fulfil all the criteria outlined in the Gender Recognition Act 2004. The act requires that the applicant has, or has had,
gender dysphoria, has lived in their affirmed gender for two years prior to the application, and intends to live permanently in their affirmed gender. See page 13 for more information about gender recognition certificates.

It is unlawful to ask a trans person for a GRC, as once a person has obtained a certificate they are required to disclose their past only in very rare circumstances. See section 2.2 of this guidance for forms of identification that you can ask a trans person to provide.

**Gender/sex reassignment** is a process undertaken under medical supervision to reassign a person's gender by changing their physical sexual characteristics. Gender reassignment or transition includes some or all of the following social, legal and medical adjustments: telling one's family, friends, and/or colleagues; changing one’s name and/or sex on legal documents; hormone therapy; hair removal, voice therapy and possibly (although not always) chest and/or genital surgery.

Gender reassignment is also referred to as sex reassignment. In fact, the term gender reassignment is considered by some to be inaccurate, as people with gender dysphoria do not change the gender with which they identify they change their sexual characteristics to match their gender identity.

**Intersex** is a biological condition that people are born with. Intersex people can have a combination of male and female anatomy; as a result, their biological sex cannot easily be classified as either male or female. Until recently, the medical profession encouraged parents to elect for surgery on their intersex baby so that their child would conform to stereotypical male or female appearances. Subsequently, many intersex people encountered difficulties later in life as the gender prescribed by the medical profession and their parents was different from the gender with which they associate. Today, parents are advised to delay surgery until their child reaches puberty so that the child can inform decision-making. Not all intersex people opt for surgery, and many will consider themselves to be intersex rather than male or female.

In addition, there are a number of sex chromosomal variations which may not produce any visible anatomical variation in a person, and which may not be detected until puberty or even later in life. This can include medical conditions such as Turner’s syndrome, Klinefelter’s syndrome (XXY syndrome), and mosaicisms whereby half of a person’s cells have one form of sex chromosomes and the other half another (eg XX/XY mosaicism).

While trans issues are different from intersex issues, intersex people who had their gender incorrectly prescribed at birth may decide to transition to the gender with which they identify later in life.

**Legal gender** In the past, a person’s legal gender was defined by their birth certificate and could not be changed. The Gender Recognition Act 2004 means that people can now apply to gain recognition of their affirmed gender for all legal purposes.

**Lesbian, gay, bisexual and trans (LGBT)** While trans status is different from sexual orientation, the forms of prejudice and discrimination directed against trans people can be very similar to those directed against lesbian, gay or bisexual people, and historically
the two communities have coexisted and supported each other. As a result, action and support groups often have a broader remit than sexual orientation.

**Physical (anatomical) sex** refers to a person’s physical or anatomical sex (male or female).

**Real-life experience or test** is a phase during gender reassignment in which the individual must live, work and study in the gender with which they identify before they can start hormone therapy and/or undergo surgery. Trans staff and students may require confirmation from their institution that they are undertaking real-life experience. Real-life experience can also be called the real-life test.

**Sexual orientation** is different from gender identity, and the two are not related. Trans people, like any other people, can be heterosexual, lesbian, gay or bisexual.

**Trans** inclusive term for those who identify themselves as transgender, transsexual or transvestite. The term ‘trans’ can be used without offence but should only be used as an adjective, for example ‘a trans student’.

**Trans man** - A person may describe themselves as a trans man – this is a person who is transitioning, or has transitioned from female to male. The term female-to-male (or FTM) is a medical term indicating the direction of a person’s transition and may occasionally be used to describe a trans man.

**Trans woman** - A person may describe themselves as a trans woman – this is a person who is transitioning, or has transitioned from male to female. The term male-to-female (or MTF) is a medical term indicating the direction of a person’s transition and may occasionally be used to describe a trans woman.

**Transgender** - An umbrella term for people whose gender identity and/or gender expression differs from their birth sex. The term may include, but is not limited to, transsexual people and those who see themselves as not clearly fitting into a male or female identity. Transgender people may or may not alter their bodies hormonally and/or surgically. The term transgender should only be used as an adjective, for example, ‘transgender people’.

**Transitioning** is the term used to describe someone changing from one gender to another, with or without medical intervention.

**Transphobia** is a term used to describe discrimination that can be experienced by trans people, which arises as a result of their expression of their gender identity (see Gender).

A **transsexual person** is someone who feels a consistent and overwhelming desire to transition to their preferred gender. Someone in this position will have the medical condition gender dysphoria. This term should only be used as an adjective; individuals should be referred to as ‘transsexual people’ not ‘transsexuals’.

**Transvestite and cross-dresser** refer to someone who dresses in the clothing typically worn by the opposite sex. Generally, people who are transvestites/cross-dressers do not wish to alter their body and do not necessarily experience gender dysphoria.
Appendix D: Further information and sources of support

- **Lesbian, Gay, Bisexual, Transsexual & Questioning (LGBTQ) Staff Network** is for all staff employed by the University of Nottingham who identify as Lesbian, Gay, bisexual, Trans or who are questioning their gender identity or sexuality.

- **Equality Challenge Unit**: Trans Staff and Students in Higher Education. Revised 2010

- **Equality Challenge Unit**: The experience of lesbian, gay, bisexual and trans staff and students in higher education. Research report 2009.

- **Equality Challenge Unit**: Guide for HR Staff, managers and staff supporting students, 2013

- **The Beaumont Society** is a support network that promotes better understanding of the conditions of transgender, transvestism and gender dysphoria. [www.beaumontsociety.org.uk](http://www.beaumontsociety.org.uk)

- **Depend** is an organisation that offers free, confidential and non-judgmental advice, information and support to all family members, partners, spouses and friends of trans people [www.depend.org.uk](http://www.depend.org.uk)

- **Equality and Human Rights Commission** is a statutory body with responsibility for protecting, enforcing and promoting equality across nine protected characteristics – age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, and sexual orientation. [www.equalityhumanrights.com](http://www.equalityhumanrights.com)

- **Forum on Sexual Orientation and Gender Identity Equality in Post-School Education** was established in April 2007 to promote equality and good practice in employment and the provision of post-school education, with a specific focus on sexual orientation and gender identity, or transgender, equality issues. [www.aoc.co.uk/en/Policy_and_Advisory_Work/employment/representation/forum_so_and_gi_equality.cfm](http://www.aoc.co.uk/en/Policy_and_Advisory_Work/employment/representation/forum_so_and_gi_equality.cfm)

- **Gender Identity Research and Education Society** initiates, promotes and supports research, particularly to address the needs of people who have a strong and ongoing desire to live and be accepted in the gender in which they identify, although different from that assigned at birth. [www.gires.org.uk](http://www.gires.org.uk)

- **The Gender Trust** is recognised as an authoritative centre for professional people who encounter gender identity-related issues in the course of their work. In particular, this group includes employers, human resources officers, health workers and information services. National helpline: 0845 231 0505. [www.gendertrust.org.uk](http://www.gendertrust.org.uk)

- **Mermaids UK** provides support and information for children and teenagers who are trying to cope with gender identity issues, and for their families and carers. [www.mermaidsuk.org.uk](http://www.mermaidsuk.org.uk)

- **Press for Change** is a political lobbying and educational organisation that campaigns to achieve equal civil rights and liberties for all transgender people in the UK through legislation and social change. [www.pfc.org.uk](http://www.pfc.org.uk)

- **Transgender Zone** is an online resource that covers all aspects of transgender issues, including a section specifically for female-to-male trans people. [www.transgenderzone.com](http://www.transgenderzone.com)