



Author: Kath Albury, Christopher Dietzel, Tinonee Pym, Son Vivienne, Teddy Cook
Title: Not your unicorn: trans dating app users' negotiations of personal safety and sexual health
Year: 2021
Journal: Health Sociology Review
Volume: 30
Issue: 1
Pages: 72-86
URL: <http://hdl.handle.net/1959.3/458812>

Copyright: Copyright © 2020. This is the final peer-reviewed accepted manuscript version. The publisher asserts the terms and conditions of the Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) license. See <http://creativecommons.org/licenses/by-nc/4.0/>

This is the author's version of the work, posted here with the permission of the publisher for your personal use. No further distribution is permitted. You may also be able to access the published version from your library.

The definitive version is available at: <https://doi.org/10.1080/14461242.2020.1851610>

Not your unicorn: trans dating app users' negotiations of personal safety and sexual health.

Authors

Kath Albury, Swinburne University of Technology. E: kalbury@swin.edu.au

Christopher Dietzel, McGill University. E: Christopher.dietzel@mail.mcgill.ca

Tinonee Pym, Swinburne University of Technology. E: tpym@swin.edu.au

Son Vivienne, Transgender Victoria. E: son@tg.vic.gov.au

Teddy Cook, ACON. tcook@acon.org.au

ABSTRACT

This article reflects on 14 Australian trans dating app users' accounts of feeling safer (and less safe) when using apps, as well as their experiences of sexual healthcare. We explore both app use and healthcare in the context of the interdisciplinary field of 'digital intimacies', considering the ways that digital technologies and cultures of technological use both shape and are shaped by broader professional and cultural norms relating to sexuality and gender. Drawing on Preciado's (2013) framework of 'pharmacopornographisation', the analysis aims to contextualise participants' experiences of being 'seen' and 'known' by health professionals and other app users. Our findings indicate that both dating apps and sexual health services rely on reductive systems of sorting and categorisation that reinforce binary understandings of genders and sexualities in order to facilitate data management and information sharing practices. Yet these same sorting and filtering technologies can also help trans app users avoid harassment, form intimate connections and seek appropriate healthcare.

Keywords: dating apps, trans people, sexual health, safety, digital intimacies

Not your unicorn: trans dating app users' negotiations of personal safety and sexual health.

Since the mid 2000s, dating apps have become increasingly popular technologies for meeting and chatting to potential sexual and/or romantic partners. As Preciado (2013) has observed, the fields of sexual and reproductive medicine, sexology and pharmacology have developed alongside the proliferation of sexual technologies that primarily aim to enhance or promote sexual desire and pleasures. Drawing on Foucault's (1975, 1978) historical discussions of biopower, and de Lauretis' theorisation of 'technologies of gender' (1987), Preciado proposes a framework of 'pharmacopornographisation' as a means of understanding the ways that gender and sexuality become 'knowable' through a combination of embodied and technological practices. Preciado's account of the co-evolution of popular visual representations of sexuality and gender, and bio-medical and psychoanalytic understandings of 'normal' bodies, allow us to consider the ways that binary understandings of gender have been 'hard-wired' into both clinical settings and dating app technologies. This framework offers a useful lens for reflecting on trans people's experiences of both dating apps and sexual health services, particularly in relation to the tensions that arise in spaces where gender and sexuality are made 'visible' through practices such as sexual history-taking and diagnostic drop-down menus (in the space of healthcare), and through practices of self-disclosure on dating apps. In these spaces, sexuality and gender are classified and understood in ways that can simultaneously offer opportunities for care and intimacy, *and* restrict trans people's self-determination and safety.

This article is grounded in the emergent field of 'digital intimacies' (Burgess et al., 2016; Dobson et al., 2018); an interdisciplinary space that explores sexuality, gender and intimate relationships in the context of digital technologies (such as mobile phones) and digitally mediated settings (such as social media platforms and dating apps). While our discussion is necessarily limited in scale and scope, we deliberately seek to move beyond the risk-focused approach to app use that often characterises both popular conversations and public health communication (Albury et al., 2020). Instead, we explore both the opportunities and limitations that trans dating app users may encounter, asking 1) which aspects of app use contribute to users

feeling safer, or less safe on apps; and 2) what would trans app users like health service providers to know about their experiences of sexual health care?

To this end, we reflect on qualitative workshops and interviews with 14 trans dating app users in New South Wales and Victoria (Australia). Our recruitment material invited ‘trans, including gender diverse and non-binary, people’ to share their experiences of app use. Where participants were cited directly, we have used their self-nominated gender description, and in other places we have used the term ‘trans people’ to describe our participants as an overall group. Trans people’s qualitative accounts of dating app use – and experiences of sexual healthcare – are explored in the context of recent literature addressing the ways that digital media platform design, digital cultures of use, sexual health research and clinical practices may all impose limiting understandings of gender on their users. These experiences are not universally negative, however, with participants reporting multiple occasions where app design and infrastructures have facilitated safe and pleasurable connections with others. Drawing on participants’ accounts of feeling safer (and less safe) when using apps – as well as their experiences of sexual healthcare – we consider the ways that normative assumptions around the ‘knowability’ of sexuality and gender impact trans people’s experiences of both dating and healthcare, in order to suggest some strategies for health service providers seeking to better support them.

BACKGROUND

Technologies of sex, sexuality and gender

Cultural theorist Paul Preciado links the 20th century mainstreaming and popularisation of commercial and amateur pornography that made sex and gender ‘visible’ in new ways with the parallel mainstreaming and normalisation of pharmaceutical technologies that enhance or optimise users’ appearance – and experience – in relation to both sexuality and gender. In his book *Testo Junkie* (2013), Preciado plots the progression of what Foucault has termed ‘regimes of truth’ in relation to sexuality and gender in the 19th and 20th century. Drawing on de Lauretis’ theorisations of cinema as a ‘technology of gender’ (1987), Preciado explores the relationship between the rise of new photographic and cinematic technologies, and the development of both bio-medical and psychoanalytic understandings of ‘normal’ gender and sexuality. While other

scholars (such as Irvine, 1990) have explored the relationship between early psychoanalytic and sexological research and the emergence of photographic and cinematic pornography (and other forms of sex work); Preciado extends his discussion to consider the parallel development of biomedical research into testosterone and estrogen, and the subsequent commercialisation of hormone therapies for both trans and cis people (2013, p. 388). He proposes the term ‘pharmacopornographisation’ as a means of theorizing the complex “network of power, knowledge and capital” (2013, p. 165) that is evident both within bio-medical assertions regarding the ‘truth’ of bodies and hormones; and within fetishised and/or commercialised representations of sexuality and gender in visual popular culture.

As he has more recently explained it, Preciado’s framework of the pharmacopornographic extends Foucault’s notions of biopower and biopolitics to incorporate recent technological developments of late-modernity, including the emergence of digital media technologies (Preciado, 2020). In this context, it is possible to understand a range of what Preciado terms the “microprostheses and technologies of digital surveillance” – including Viagra, amyl nitrate, sex toys, lubricants, digital diagnostic platforms, social media platforms, self-help publications and tutorials, and photographic filtering software – through a ‘pharmacopornographic’ lens (Preciado, 2020). The conflation of ‘pharma’ and ‘pornography’ calls attention to the ways that both healthcare technologies and mediated representations of sexuality, gender and pleasure can be simultaneously understood as both commodities and expressions of care and intimacy.

While Preciado does not directly address dating app use, his accounts of the historical relationship between sexual and reproductive health research and clinical practice, and ‘recreational’ and/or eroticised practices of sexual representation, warn us against attempts to draw clear boundaries or hierarchies between ‘medicalised’ and ‘sexualised’ understandings of bodies, genders and sexualities. Further, just as researchers have drawn on popular and erotic texts to classify gender, the resulting biomedical ‘technologies of gender’ may also be translated into the design of social media platforms and apps. Clinical settings utilise technologies including medical intake forms and sexual history-taking protocols to sort and categorise clients according to expectations of ‘risk’ that are interwoven with historical expectations of gendered appearance and behaviour. Similarly, dating apps deploy technologies that invite users to

categorise, filter and sort themselves – and others – in normatively gendered sexual and relational ‘marketplaces’.

Trans people’s experiences with dating apps

Like social media platforms, dating apps ‘bake’ gender into their design (Bivens & Haimson, 2016), in order to optimize their ability to aggregate, analyse (and market) user data (Albury et al., 2019; Szulc, 2019). Unsurprisingly, both dating apps and social media platforms have been subject to extensive critiques with respect to the ways that design features impose binary understandings of both gender and sexuality on their users, both via the drop-down menus and other interfaces used to build user profiles, and the facial and voice recognition systems used for security and identity-verification purposes (Ahmed, 2018; Ferris & Duguay, 2020; Scheuerman et al., 2018, 2019).

Trans people’s experiences of dating app use has been addressed within the fields of human-computer interaction, media and communications, gender studies and cultural studies. Significantly, this burgeoning field consistently reveals both positive and negative aspects of platform affordances and in-person experiences for trans users. These tensions and ambivalence are important when considering how health providers might speak to trans people about their sexual experiences, without assumptions or judgement. For example, Scheuerman et al. (2018) found that managing safety was a concern among all of their trans participants and that many had experienced technology-facilitated harm. Trans dating app users have reported being viewed as sexual objects (Lloyd & Finn, 2017) and being fetishised by others online in unwelcome ways (Platt & Bolland, 2017). Research has shown that trans people engaged in online dating have experienced high rates of violence and abuse, including physical violence, psychological violence, and sexual coercion, as well as technology-facilitated violence, such as receiving unwanted sexual images (Dank et al., 2014). Some may also experience additional violence because of their intersecting identities (Crenshaw, 1989) – that is, trans dating app users may feel less safe because of racism, ableism, ageism, and other discriminatory behaviour. Trans people also report that online spaces can offer them safe and comfortable ways to interact (Fox & Ralston, 2016) and can support trans users to explore “identity work” and “world-making” with peers (Schudson & Anders, 2019). Dating apps can be experienced as spaces for connecting with

trans community, and identifying cis users who are respectful and informed about trans identities (Pym et al., 2020).

A number of recent studies have considered the way trans dating app users navigate self representation in their profiles and chat practices, while also guarding their safety. In research by Scheim and colleagues (2019), gay, queer and bisexual trans men found that using apps and other platforms to meet cis men allowed them to “bypass in-person disclosure” of their trans identity, and to pre-negotiate sexual activities and safer sex (2019, p. 578). However, “balancing... potential pleasure against perceived risk” in relation to other app users’ fetishistic, prescriptive or stigmatising attitudes commonly resulted in “some degree of compromise or satisficing” (2019, pp. 579-582). Lloyd and Finn’s (2017) research explores how trans women navigate transphobic, invalidating and fetishising interactions on Grindr (2017, pp. 162-4). While some of their interviewees distanced themselves from “sexualised” self presentation to avoid being fetishised (2017, p. 163), others resisted the norms of cis femininity by deploying “ambiguous authenticities” (2017, p. 165). For example, one participant acknowledged the “validation” she received on apps and refused the regulatory force of aligning trans “authenticity” with muted sexuality (2017, p. 165). The authors suggest that trans women’s accounts demonstrate the limits of “sexualisation” discourse, arguing that dating apps can offer users “productive avenues for (re)working affirmative trans selfhoods and sexualities” (2017, p. 166).

Fernandez and Birnholtz (2019, p. 2) found that their interviewees preferred “direct, proactive” disclosure of their trans identity on dating apps, as it felt safer to disclose with the physical distance of an app. Stating one’s trans identity on a profile was considered to be “less harmful” than more indirect forms of disclosure, insofar as it offered opportunities to filter out harassers, transphobes and unwelcome fetishists and to “guard their time and emotional energy” (Fernandez & Birnholtz, 2019, pp. 10-12). Many sought “a high level of certainty” that they were interacting with the right people, choosing to disclose in more than one part of their profile and in messaging (2019, p. 15). However, the cumulative experience of harassment following proactive disclosure led some participants to delete or avoid particular apps (2019, p. 14). Some interviewees preferred to post multiple photos that showed a range of aspects of their appearance

and gender expression, or to emphasise their “trans-ness” (2019, p. 12), while another preferred to disclose in chat, saying that disclosing on their profile put “arbitrary” emphasis on their trans identity (2019, p. 13). In these examples, the authors highlight a “tension between [participants’] desire for safety and a desire for authentic self-presentation.” (2019, p. 14).

Sexual health and dating apps

Research literature on dating apps in the field of sexual health spans the past decade, beginning with Grindr’s release in 2009, followed by Tinder in 2012. A review of articles on sexual health and dating apps published between 2015 and 2018 ($n = 99$) found that the majority of this research focuses on STI/HIV prevention, mostly in regard to cis men who have sex with cis men (Albury et al, 2019). Although this review found an ongoing theme of ‘sexual risk behaviours’, there was little support for a connection of app use to sexual risk taking or STI/HIV transmissions. Trans people’s sexual health in relation to dating apps and social media use has been addressed in a limited fashion, predominantly in studies focused on cis men who have sex with men (MSM) or LGBTQ populations more broadly (Sun et al., 2018). This tendency is also reflected in more recent research, such as Macapagal et al.’s (2019) study of dating app use among “sexual and gender minority adolescents assigned male at birth” with 6% of their participants “gender nonconforming” and “genderqueer” (and the remainder cis men), and Kesten et al.’s (2019) research on the “acceptability and potential impact” of sexual health information delivered via dating apps for MSM, in which 2 out of 25 interviewees were trans.

Lesbian and queer women (cis and trans) do not appear at all in the 2015-2018 review sample (Albury et al., 2019). This is not limited to research on dating apps, but rather reveals a broader issue in health scholarship: as noted by Stardust et al. (2017, p. 6), data collection in HIV research has consistently overlooked the many trans women who are lesbian or have sex with heterosexual men. HIV risk for trans men and non-binary people has also historically been inaccurately measured in HIV research due to “inadequate gender-related questions in HIV diagnosis and notification process” (Stardust et al., 2017, p. 4). Further, public health and other disciplines have framed sexual health research around differences in sexuality rather than distinguishing between trans and cis people, or among gender diverse populations. Identity descriptions have not always encouraged or permitted trans people to identify themselves and, in

some cases, confused gender with sexuality (e.g., Langenderfer-Magruder et al., 2016). Therefore, trans people may be included in ‘MSM’ literature, even if they are not identified.

In their survey of trans Australians, Callander et al. (2019, p. 9) found that 75.3% of respondents had used online services to seek sex and dating, and “most felt that their gender was not respected by sex and dating web services or the people who use them.” Non-binary app users were the most common group to report feeling that dating apps and websites “did not provide sufficient options to describe their genders” (Callander et al., 2019, p. 9). Callander et al.’s (2019, p. 13) report also found that “failing to respect a patient’s gender can discourage them from accessing important STI and HIV prevention and management strategies” – highlighting the impact that health practitioners can have on trans people’s sexual health.

METHODS

Our research findings are drawn from a larger project that aimed to promote dialogue between 18-35-year-old dating app users and sexual health organisations. To this end, we consulted with four project reference groups, including two app user groups, one mixed group of sexual health promotion professionals, sexuality educators and youth support workers, and one group of trans and gender-diverse health support workers. The project, an Australian Research Council partnership with two sexual health organisations, was approved by the Swinburne Human Research Ethics committee (SUHREC 2018/159), ACON’s Research Ethics Review Committee (RERC 2018/12), and the Family Planning NSW Project Ethical Review Team (PERT 24). Our research differed from the public health studies outlined above in that it was primarily qualitative, and invited participants to define both ‘sexual health’ and ‘safety’ in their own terms. The analytical focus of this paper is trans app users’ accounts of app use and sexual healthcare.

Participants were recruited via partner organisation mailing lists and social media accounts. Fourteen trans users of dating apps (median age 23.5) participated in interviews and workshops conducted from 2018-2020. Participants used different terms to describe their gender, including male, trans-male, non-binary, female, trans woman, genderqueer, non-binary transmasculine, agender and “not that”. Sexual identities included gay, lesbian, straight, queer, bisexual, and

pansexual. Cultural identities were self-described as Aboriginal/European, Anglo-Australian, Caucasian/Scottish, Caucasian, White/Pākeha, Australian, Maori/Australian, Aboriginal, and “Mixed as.” We use self-nominated descriptors of sexuality and gender identities throughout this paper. All names are pseudonyms. Tinder was the dating app most used by participants, followed by Grindr. Other apps mentioned included HER, OKCupid, Bumble, and Scruff. Participants also reported using other social media and chat platforms for dating or hooking up, including Instagram, Tumblr, Reddit, Craigslist, Fetlife and Discord.

As Barker and colleagues (2012) observe, creative research methods (particularly visual methods) can offer opportunities for participants to express aspects of their lived experiences of sexuality and gender that may not emerge in more ‘traditional’ research settings. For this reason, we incorporated elements of creative and visual research methodologies into both research workshops and one-to-one interviews. Interviews were conducted via a modified “media go-along” (Jørgensen, 2016), in which participants were invited to share their personal history of app use, and experiences of negotiating personal safety and sexual health on apps. Interviewees were invited to open any dating apps currently on their phones (without sharing their screens with the interviewer), and reflect on past interactions with other users, using their own app history as a visual prompt.

Workshop activities included drawing (and discussing) maps or timelines depicting all the apps and platforms participants had ever used for dating and hooking up, with attention to any interruptions or shifts in app use over time. Participants were also invited to share their ‘top tips’ for app use (in the style of an online dating advice article); and to design two alternative profiles for a hypothetical friend who had not previously used apps. The first profile contained elements that might signal a ‘dateable/trustworthy’ app-user, while the second profile was full of ‘red flags’, or signs the app user might be unsafe or untrustworthy. This design activity prompted extended discussions of the ways participants crafted their own profiles to promote safe, pleasurable encounters, and the ways they interpret others’ profiles as more or less safe. At the close of the workshop, participants were invited to tell us what they wanted sexual health services to know about their experiences.

Interviews and workshops were facilitated by both trans and cis members of the research team. They were audio-recorded, transcribed and coded using Nvivo software by two cis researchers via a process of abductive analysis (Tavory & Timmermans, 2014), which combines inductive and deductive approaches. Prominent sub-themes identified included: developing confidence and establishing boundaries; filtering out deceptive users; experiences of harassment and abuse; navigating app infrastructures (regarding binary gender and sexuality categories); disclosure of trans status and educating cis users; and sexual health discussions both on apps and with health professionals. Following preliminary analyses, this article was co-authored by a team of trans and cis researchers, including two members of the trans project advisory group.

TRANS PEOPLE’S EXPERIENCES OF DATING APPS

Feeling safer on dating apps

Eight participants discussed having felt unsafe or vulnerable to violence or harassment on apps or in meetups, with two commenting that this was under-acknowledged by cis friends. Nine participants described encountering app profiles or experiencing chats that were transphobic, biphobic, racist or discriminatory towards sex workers, and Stephen (27, bisexual, trans male) felt app developers should take a stronger stance in counteracting discriminatory attitudes on their platforms. Participants had a range of strategies for interpreting other users’ profile information in order to screen out stigmatising, fetishising or discriminatory users.

Deceptive users and fake profiles were a concern for the majority of our participants, who discussed strategies for filtering these out by interpreting profile information and photos as well as navigating the chat/messaging process. For Blair (23, lesbian, female), this meant taking time to check whether a user’s “story” was consistent, and meeting only after a week or two of chat. Social media platforms – such as Instagram or Facebook – were an important avenue for establishing trust while dating, although participants used these in different ways.

Some felt more secure when they could access their match’s social media accounts – for three of our participants, failure to move app-based chats to other social platforms was considered a ‘red flag’, or sign that the other user had malicious intent. This aligns with findings from other studies

of contemporary digital intimacies which identify what Madianou and Miller (2012) have termed “polymedia practices”, in which app users connect across a range of social media platforms – including chat and picture-sharing platforms – to establish trust and negotiate safety within intimate relationships (Albury et al., 2019; Cassidy, 2018; Venema & Lobinger, 2017). However, some were wary about requests to move a conversation to social media too quickly (or at all), expressing privacy concerns.

Three participants felt that app platforms offering formal identity verification (such as Bumble’s blue check mark, which indicates the profile has been verified by a staff member) would help them to feel safer, but recognised the limitations for trans app users whose appearance may not match the app developer’s understandings of ‘appropriate’ gendered presentation. Blair suggested it was a problem for trans users when app platforms instituted official identity verification, as they may not be out, and/or their appearance may alter as they affirm their gender. She initially used exclusively text-based platforms to avoid the issue of profile photos: “I didn’t want people to associate – because I wasn’t out back then, if they saw me on a dating app – to realise that I was presenting as female and that I was trans.”

Two participants were also on the alert for ‘chasers’ – that is, app users (usually cis men) with a highly sexualised and fetishistic attraction to trans people. Avery (24, queer, ‘not that’) said, “Anyone who approaches me for being gender non-conforming in any fucking way are usually fetishising that, and straight up that’s a fuck no... keep chasers chasing.” Parker (22, straight, trans-male) noted that although some users attempt to deter ‘chasers’ in their profile text (i.e., “not your unicorn”), they felt this strategy had limited efficacy. Experiences with cis men on apps were viewed as unsafe in a range of contexts. Three participants reported frequently encountering fake profiles (where photos or in-app chat signalled ‘catfishing’) on queer women’s apps, or seeing cis men’s profiles on mixed-gender apps when the user had elected not to be matched with men at all. Others had encounters with cis men on queer men’s apps that they experienced as pushy, prescriptive, or aggressive.

Disclosing trans identity on apps

Participants discussed the challenges of disclosing trans and non-binary identities on apps, acknowledging that while placing the information upfront in a profile could filter out the wrong users, it could also render them vulnerable to intrusive questions and fetishisation. Experiences of disclosure varied widely, with some participants suggesting that the design of specific apps (and collective cultures of use) had a significant impact in this respect:

My gender's more accessible because I've ticked the trans box on Grindr, but for Tinder that didn't come around for a very long time and with Tinder... most of them are generally cisgender straight women and they're not really down for meeting a trans person. So I find that Grindr, people are more accepting of hooking up with a trans person. Yeah, because this app has always had the system there to identify as trans. (Quinn, 24, bisexual, male)

Alex (26, lesbian, non-binary) felt that identifying as 'non-binary' in their Pink Cupid profile was rejected by some lesbian cis women as "high-maintenance" because it required dates to "remember your pronouns". Sam (23, pansexual, non-binary) had rarely had problems disclosing non-binary identity on HER, but cautioned that this was not necessarily evidence that trans people were welcome on the app: "maybe people are less shook by a non-binary person than like a binary trans person" on that platform.

Participants also reported encountering transphobia in user profiles (e.g. 'cis4cis') as well as in chats. Max (23, queer, non-binary transmasculine) had encountered transphobic reactions from cis straight app users, and described switching between gender and sexuality categories regularly on Tinder to avoid them: "if I'm showing myself as a man I'll only look at the [queer] men, and if I'm showing myself as a woman, I'll only look at the queer women." A range of approaches were reported in terms of responding to cis app users asking intrusive questions about bodies and identities (both on apps and after meeting for dates in person). Four participants were strongly opposed to answering cis users' questions, feeling they should self-educate. However, Blair was happy to do this as she compared it to her own curiosity about other trans people's experiences. There was no consensus among participants regarding how to respond to trans app users' questions. Jesse (34, gay, male) specifically avoided in-app chats with other trans users who they

felt were seeking information or social support. In contrast, Avery said they had directed a trans app user to trans-inclusive spaces and resources.

Despite the challenges outlined here, the majority of participants found their overall experiences with apps to be positive. For example, Quinn experienced Grindr as a space where they felt affirmed in their body and identity: “There’s always been a space for me on Grindr... the acceptance of me is their attraction to men and I’m part of that.” The range in participants’ experiences suggests that dating apps are spaces that hold potential for trans dating app users to feel more and/or less safe depending both on the app’s technical infrastructure and the attitudes of fellow app-users.

Apps and sexual health

A number of participants said they wanted to receive information about sexual health and sexual health resources through apps. Since some apps already provide reminders about getting tested for STIs and HIV, participants felt it would be valuable for apps to be active in sexual health promotion more generally. Notably, they suggested incorporating pop-up notifications and links to community organizations, resources and information. Avery emphasised the importance of “having a plan” in relation to sexual health on apps, and this included knowing in advance how to respond to slut-shaming or the use of stigmatising language around sexual health (e.g., ‘clean’) in app-based chats.

‘Safe sex’ was understood by participants to mean different things depending on context. For example, Tristan (32, bi, male) said that although he personally associated sexual health with regular HIV/STI testing, knowing his status, and using contraception, his own check-in app conversations prior to meeting up were limited to confirming a preference for condom use.

A number of participants observed that sexual health is discussed less frequently within the lesbian community than among gay men – and this was reflected in their experiences of using apps. Blair said that women might check in about STI status after getting to know one another better (she herself usually asked), but also thought that sexual health was viewed as less relevant

for lesbians. Alex was frustrated that lesbians “don’t disclose things”, however they felt that apps incorporating STI testing into profile fields would feel “invasive” to app users:

I find the lesbian community don't really open up about sexual health a lot. Within the apps it's not talked about. I'm quite an open person so I usually do ask these things and people sometimes will be like, 'Oh, this is a bit invasive' and I'm just like, 'Well, no not really it's just your sexual health. It's me caring about myself and caring about you.'

Sam noted that although the app HER had a community forum which sometimes hosts discussions about sexual health, they felt that few users engaged with these discussions. Quinn said they list ‘negative’ on their profile and are on PrEP and have regular tests. However, as they did not use condoms and have experienced repeated problems with the supply of their preferred hormones, they sometimes worry about pregnancy when having sex with cis men.

Tristan was new to dating cis men and felt ill-informed about sexual health in this context, and he was concerned that raising the topic on apps would compound his concerns about rejection:

I worry about it in terms of just being trans. Just from the aspect of being rejected as well. Yeah, I worry about sexual health on Grindr because I don’t really know much about the gay community in terms of guys because I used to only be interested in women before.

While Tristan sought more sexual health advice on apps (in the form of ‘top tips’), others felt that apps like Grindr shared too much of this kind of content.

What do app users want health professionals to know?

Participants had mixed experiences of discussing sexual health with general practitioners (GPs) and other health professionals. Many were open to being asked about their sexual history, provided that the information was necessary in context and assumptions were not made about them. Tristan believed it was important for GPs to ask questions about partners and sexual

practices, but it could be “invasive” and “creepy” if the questions did not seem relevant to the consultation. Trust in a doctor was important in feeling that questions were asked in good faith, and trans-friendly clinics were an important aspect of this.

A trans-affirming GP was also thought to be more likely to offer useful prompts for questions patients might not think to disclose themselves, but which were relevant to further health advice. For example, Tristan mentioned his doctor asking if he had developed a sexual interest in men, which he found helpful “because people don’t always disclose stuff... and it’s easier when they’re asked directly.” Blair felt that she lacked knowledge about women's sexual health, and suggested health professionals could check in to make sure trans patients and their sexual partners were aware of what their concerns should be. However, three participants reported feeling judged or “put in a box” by health professionals’ assumptions about their gender, sexual identity and practices. Parker said:

I walk in and you’ve already made up your mind about what I need... don’t question my sexuality. I had a doctor do that to me... he was like, “So what made you think you liked women?” I was like, what the fuck?

Avery suggested that health professionals could offer trans patients more agency by asking them for their safe sex plan at the outset, and then filling in the gaps by asking additional questions if needed. They added that professionals should avoid expecting trans patients to explain sexual practices that the practitioner may be unfamiliar with, and should take more initiative in self-educating about the associated risks of a range of practices.

Within our broader study, app users of diverse sexualities and genders suggested that sexual healthcare professionals were often not well-informed of the ‘ordinary’ role that dating and hook-up apps play in contemporary cultures of sexuality and friendship. This suggestion was confirmed by participants in our professional reference groups, who agreed that while staff in LGBTQ+ community health services were often familiar with the everyday aspects of app use, this was not universally the case in more generalist settings. This suggests that trans app users attending general practices are more likely to encounter service providers who are less aware of

the ways sexual health negotiations could be both facilitated and discouraged by the specific cultures of use and technical infrastructures on diverse apps.

DISCUSSION AND CONCLUSIONS

As noted by Callander et al. (2019), dating app design, sexual health surveillance and reporting practices can all serve as ‘technologies of gender’, imposing binary gender categories on trans people. Within dating app cultures, users are often assumed to be cis by default. Further, while popular apps such as Tinder or Grindr allow users to choose non-binary options for themselves (while constructing their profile), searching and matching are limited to ‘men’, ‘women’, or ‘both’. This places an obligation on trans app users to make a difficult choice: Do they disclose their ‘difference’ in their public profiles (and risk unwanted approaches and/or intrusive questioning by transphobic, predatory, fetishising or ‘curious’ individuals)? Or do they withhold information, and risk being accused of ‘deception’ by transphobic or trans-exclusionary cis users who assumed they were matched with another cis person?

We note that our study focused primarily on trans people’s in-app experiences and did not examine the broader sexual health issues they might confront when dating. Further, our relatively small sample size could be improved upon in order to capture a wider range of trans app users’ experiences. Our findings further suggest there may be significantly different approaches and concerns with regard to both personal safety and sexual health expressed by trans users of apps focused on ‘men seeking men’ or ‘women seeking women’, as opposed to ‘straight’ apps.

As noted above, app-users who identify as non-binary, agender, genderqueer or gender-fluid may also experience specific safety concerns in relation to the binary nature of dating apps’ (and social media platforms’) interfaces and sorting/filtering mechanisms. As Bivens’ (2015) analysis of back-end coding of gender on Facebook revealed:

deep in the database, users who select custom gender options are re-coded—without their knowledge—back into a binary/other classification system [Facebook’s] custom gender project offers the illusion of inclusion since surface changes to profile pages mask the binary regulation that continues underneath, at a deeper level of the software. (Bivens, 2015, p. 885)

Further, for some of our participants, their experiences of using apps and attending to their healthcare needs converged in ways that could easily be interpreted via Preciado’s lens of the ‘pharmacopornographic’. For example, Quinn’s experiences of both sexual health and app use were influenced by their use of ‘MSM’ dating apps in which it was easy for them to negotiate the kinds of sex they desired by openly disclosing their use of PrEP, but more difficult for them to ask questions about sexual health more generally, or discuss their concerns regarding contraception. Other participants reported similar frustrations in sexual health settings, where health professionals mis-gendered them, or conflated their gender expression or gender identity with their sexual identity or preferred sexual behaviours. In these cases, the burden falls on the trans person to either assume the responsibility of educating the health professional, or remain silent, and risk receiving inadequate or unsatisfactory levels of care or information.

In a 2020 reflection on the ways the contemporary entanglement of digital technologies, healthcare, gender and sexuality might be understood via a ‘pharmacopornographic’ lens, Preciado argued for a deeper consideration of the “management and production of the body as well as ... the political technologies that produce sexual subjectivity within this new configuration of power and knowledge” (np). Within our study, we see pharmacopornographisation playing out in a number of ways. Both dating apps and health services rely on reductive systems of sorting and categorisation that reinforce binary understandings of genders and sexualities in order to facilitate data management and information sharing practices. Yet these same sorting and filtering technologies can also help trans app users avoid harassment, form intimate connections and seek appropriate healthcare.

We note that there was little consensus among trans people in our study on the practices or platforms they experienced as positive or negative, with many people noting their own ambivalence or complicity and observing that some behaviours and/or platform infrastructures

can have simultaneously positive and negative consequences. Participants reported similar ambivalence in regard to sexual healthcare settings, where their sexuality and gender were challenged or subjected to ‘excessive’ questioning. At the same time, practices of self-disclosure – both on dating apps and within medical settings – were seen as valuable, necessary and even desirable for some. This reflects the deliberate ambiguity evident within Preciado’s theorisations of both sexual popular culture and the medicalisation of sexuality and gender, in which he emphasised the ways that even the most ‘commodified’ or ‘objectifying’ technologies of gender can be deployed strategically and productively by trans people.

As noted above, two participants explicitly said they needed more sexual health information, and wanted to access this both on apps and in healthcare settings. As with dating apps, participants were willing to enter into imperfect sexual healthcare cultures that might not fully ‘see’ or ‘know’ them, but they wanted to be recognised and affirmed in these spaces in ways that did not rely on normative assumptions, stigma or fetishisation.

Both dating apps and sexual health research have drawn on systems of gender classification that construct gendered subjects through a simultaneously technologised and fetishised ‘pharmacopornographic’ lens. Unsurprisingly, our participants reported experiences of sexual healthcare in which seemingly neutral practices (such as questions regarding sexual histories) placed trans people in the position of having to defend, justify or explain their sexualities and genders in ways that were experienced as similarly insensitive and intrusive. We do not conclude, however, that trans app users in our study do not want to discuss sexual health with medical practitioners; rather, they want to have these discussions in informed, trans-affirming contexts.

REFERENCES

Ahmed, A. A. (2018). Trans competent interaction design: A qualitative study on voice, identity, and technology. *Interacting with Computers*, 30(1), 53–71.

Albury, K., McCosker, A., Pym, T. & Byron, P. (2020). Dating apps as public health 'problems': cautionary tales and vernacular pedagogies in news media. *Health Sociology Review*, 29:3, 232-248, DOI: 10.1080/14461242.2020.1777885

Albury, K., Byron, P., McCosker, A., Pym, T., Walshe, J., Race, K., Salon, D., Wark, T., Botfield, J., Reeders, D., & Dietzel, C. (2019). *Safety, risk and wellbeing on dating apps: Final report*. Swinburne University of Technology. DOI: 10.25916/5dd324c1b33bb

Barker, M., Richards, C. & Bowes-Catton, H. (2012). Visualizing experience: Using creative research methods with members of sexual and gender communities. In C. N. Phellas (Ed.), *Researching non-heterosexual sexualities* (pp. 57-80). Ashgate.

Bivens, R. (2015). The gender binary will not be deprogrammed: Ten years of coding gender on Facebook. *New Media & Society*, 19(6), 880–898.

Bivens, R., & Haimson, O.L. (2016). Baking gender into social media design: How platforms shape categories for users and advertisers. *Social Media + Society*, 2(4), 1–12.

Burgess, J., Cassidy, E., Duguay, S. & Light, B. (2016). Making digital cultures of gender and sexuality with social media. *Social Media + Society*, 2(4), 1–4.

Callander, D., Wiggins, J., Rosenberg, S., Cornelisse, V. J., Duck-Chong, E., Holt, M., Pony, M., Vlahakis, E., MacGibbon, J., & Cook, T. (2019). *The 2018 Australian trans and gender diverse sexual health survey: Report of findings*. The Kirby Institute, UNSW.

Cassidy, E. (2018). *Gay men, identity and social media: A culture of participatory reluctance*. Routledge.

Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: Black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *University of Chicago Legal Forum*, 1989(1), 139–168.

Dank, M., Lachman, P., Zweig, J.M., & Yahner, J. (2014). Dating violence experiences of lesbian, gay, bisexual, and transgender youth. *Journal of Youth and Adolescence* 43, 846–857.

De Lauretis, T. (1987). *Technologies of gender*. Palgrave Macmillan.

Dobson, A. S., Carah, N., & Robards, B. (2018). Digital intimate publics and social media: Towards theorising public lives on private platforms. In Dobson, A.S., Carah, N., & Robards, B. (Eds.), *Digital intimate publics and social media* (pp. 3–27). Palgrave Macmillan.

Fernandez, J. R., & Birnholtz, J. (2019). ‘I don’t want them to not know’: Investigating decisions to disclose transgender identity in dating platforms. *Proceedings of the ACM on Human-Computer Interaction*, 3,1–21.

Ferris, L., & Duguay, S. (2020). Tinder’s lesbian digital imaginary: Investigating (im)permeable boundaries of sexual identity on a popular dating app. *New Media & Society*, 22(3), 489-506.

Foucault, M. (1975). *Discipline and punish: The birth of the prison*. Penguin.

Foucault, M. (1978). *The history of sexuality (volume one)*. Penguin.

Fox, J., & Ralston, R. (2016). Queer identity online: Informal learning and teaching experiences of LGBTQ individuals on social media. *Computers in Human Behavior*, 65, 635-642.

Irvine, J. (1990) *Disorders of desire: Sex and gender in modern American sexuality*. Temple University Press.

Jørgensen, K. M. (2016). The media go-along: Researching mobilities with media at hand. *MedieKultur: Journal of Media and Communication Research*, 60, 31-49.

Kesten, J. M., Dias, K., Burns, F., Crook, P., Howarth, A., Mercer, C. M., Rodger, A., Simms, I., Oliver, I., Hickman, M., Hughes, G., & Weatherburn, P. (2019). Acceptability and potential impact of delivering sexual health promotion information through social media and dating apps to MSM in England: A qualitative study. *BMC Public Health*, 19(1236), 1–9.

- Langenderfer-Magruder, L., Walls, N. E., Whitfield, D.L., Brown, S. M., & Barrett, C.M. (2016). Partner violence victimization among lesbian, gay, bisexual, transgender, and queer youth: Associations among risk factors. *Child and Adolescent Social Work Journal*, 33(1), 55–68.
- Lloyd, C. E., & Finn, M. D. (2017). Authenticity, validation and sexualisation on Grindr: An analysis of trans women's accounts. *Psychology & Sexuality*, 8(1–2), 158–169.
- Macapagal, K., Kraus, A., Moskowitz, D. A., & Birnholtz, J. (2019). Geosocial networking application use, characteristics of app-met sexual partners, and sexual behavior among sexual and gender minority adolescents assigned male at birth. *The Journal of Sex Research*, 57(8), 1078-1087
- Madianou, M., & Miller, D. (2013). Polymedia: Towards a new theory of digital media in interpersonal communication. *International Journal of Cultural Studies*, 16(2), 169-187.
- Platt, L. F., & Bolland, K. S. (2017). Trans* partner relationships: A qualitative exploration. *Journal of GLBT Family Studies*, 13(2), 163–185.
- Preciado, P. (2020). Learning from the virus. *ArtForum*.
<https://www.artforum.com/print/202005/paul-b-preciado-82823>
- Preciado, P. B. (2013). *Testo junkie: Sex, drugs and biopolitics in the pharmacopornographic era*. The Feminist Press.
- Pym, T., Byron, P., & Albury, K. (2020). 'I still want to know they're not terrible people': Negotiating 'queer community' on dating apps. *International Journal of Cultural Studies*.
<https://doi.org/10.1177/1367877920959332>
- Scheim, A. I., Adam, B. D., & Marshall, Z. (2019). Gay, bisexual, and queer trans men navigating sexual fields. *Sexualities*, 22(4), 566- 586.
- Scheuerman, M. K., Branham, S. M., & Hamidi, F. (2018). Safe spaces and safe places: Unpacking technology-mediated experiences of safety and harm with transgender people. *Proceedings of the ACM on Human-Computer Interaction*, 2(CSCW), 1–27.

Scheuerman, M.K., Paul, J.M., & Brubaker, J. R. (2019). How computers see gender: An evaluation of gender classification in commercial facial analysis and image labeling services. *Proceedings of the ACM on Human-Computer Interaction*, 3, 1–33.

Schudson, Z., & Anders, S. (2019) ‘You have to coin new things’: Sexual and gender identity discourses in asexual, queer, and/or trans young people’s networked counterpublics, *Psychology & Sexuality*, 10(4,) 354-368,

Stardust, Z., Cook, T., Hopkins, L., Gray, J., & Olsen, K., (2017). *Effective and meaningful inclusion of trans and gender diverse people in HIV prevention*. ACON and PASH.tm.

Sun, C. J., Sutfin, E., Bachmann, L. H., Stowers, J., & Rhodes, S. D. (2018). Comparing men who have sex with men and transgender women who use Grindr, other similar social and sexual networking apps, or no social and sexual networking apps: Implications for recruitment and health promotion. *Journal of AIDS & Clinical Research*, 9(2), 757.

Szulc, L., 2019. Profiles, identities, data: Making abundant and anchored selves in a platform society. *Communication Theory*, 29(3), 257–276.

Tavory, I., & Timmermans, S. (2014). *Abductive analysis: Theorizing qualitative research*. University of Chicago Press.

Venema, R., & Lobinger, K. (2017). “And somehow it ends up on the Internet.” Agency, trust and risks in photo-sharing among friends and romantic partners. *First Monday*, 22(7), <https://firstmonday.org/ojs/index.php/fm/article/view/7860>