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Where Repronormativity is Questioned: A Case Study of Male Pregnancy in Berlin

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Abstract

Some trans men can get pregnant and through that decision they question repronormative ideals. This study aims to explore the experience of these men and to understand how Berlin, where they live, may influence their experience of pregnancy. To do so, a case study was conducted and, using semi-structured interviews, two participants talked about their experiences in the city, parenthood, masculinity, pregnancy and social experience. The results were analyzed following the thematic analysis by Braun and Clarke. Four main themes emerged: (1) unseen pregnancy, (2) (un)identity challenges, (3) interpersonal experiences of a pregnant man and (4) specificities of life in Berlin. All the themes seem to be involved with negotiations between their personal experiences and the social expectations about their pregnancy. The main results reveal that pregnancy was conceptualized by participants as a masculine experience, despite the lack of recognition by society. Some characteristics of Berlin - as the existence of a supportive Queer community, the economic and political system, and the existence of certain laws - seem to have an influence on the decision of these people to get pregnant. However, participants reported experiences of discrimination and invisibility. Therefore, despite the evidence of some protector factors, the city is not completely free of the violence inherent to a cisheterosexist system. The principal practical implications of this work are the creation of inclusive

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and safe spaces, free of discrimination, to allow the integration of visibility around masculine pregnancy, if people decide to, in order to improve recognition and respect.

Keywords
men, trans, pregnancy, masculinity, repronormativity, Berlin

Introduction

Some trans men[1] can give birth to their children because their reproductive organs are compatible with pregnancy (Love 2022; Obedin-Maliver & Makadon, 2016; Pereira 2022). By deciding to become pregnant, these people question repronormativity - the social forces that encourage motherhood through the materialization of female identity (Franke 2009; Karaian 2013; Norris and Borneskog 2022). Based on a constructionist approach[2] and aligned with the depathologization movement[3] of trans identities, this paper portrays a case study conducted in Berlin with the purpose of observing the narratives of men who got pregnant and understanding how their context may have influenced their experience of pregnancy.

Berlin: Historical and Cultural Context

The context chosen for the study was Berlin due to its historical and cultural reference regarding transsexualities (Birkhold, 2019; Broich 2017).

The Institute for Sexual Research, where the first sex reassignment operation took place in the Western context (Birkhold, 2019) and where the word "transsexual" was created was funded in Berlin (Broich 2017). It was also where the world's first magazine focused on trans issues was produced: Das 3. Geschlecht (The Third Sex), and the first publication was launched in 1930 (Birkhold, 2019). These events took place during the Weimar Republic, the period between the end of the First World War and the Nazis coming to power in 1933. However, with the rise of Hitler's party, many rights of these individuals began to disappear. From the beginning of the regime until 1945, an estimated 100,000 homosexual men were imprisoned because of their sexual orientation. Many more were sentenced to death and sent to concentration camps. The same happened to lesbians and transgender people (Bradlow 2020). During the dominance of fascism in Germany, both the archive of the Institute for Sexual Research and the publication house of the magazine Das 3. Geshelcht were destroyed (Birkhold, 2019; Edwards 2015), which reflects the discrimination and hatred towards these groups.

Despite the setbacks experienced in the past, many LGBTQIA+ (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual and other identities) people have sought out Berlin for being a safe place where they can express themselves (Petzen 2004). Compared to other places, residents feel less policing of their identities and less

pressure to follow cisheteronormative ideals[4] of family configurations (Preser 2016). Therefore, Berlin is very relevant to the study of *Queer*[5] migrations. It is important to emphasize that *Queer* migration is not simply the change of residence of non-heterosexual people. This occurs when the desires, practices, specificities and performances of people who do not follow cis and heteronormative standards are a decisive factor in the process of change (Fortier 2003; Gorman-Murray 2009).

As we have already seen, the city and its particularities have been shown to enhance the well-being and safety of trans individuals. In terms of legislation, Germany is known for a progressive attitude towards sexuality. It was the first European country to recognize a third gender: diverse (divers in German) (Hutton 2018; TGEU 2018; Bundesgesetzblatt Teil I No48 of December 21, 2018). Although this law only allows intersex people to choose gender diverse (TGEU 2018), Germany has other legislation that aims to protect trans people. Regarding gender recognition, there are legal and administrative measures that allow for gender self-determination (e.g., name changing) without the requirement of going through a medical and/or surgical intervention, sterilization or divorce (TGEU 2020).

De/construction of Gender, Body, and (trans)Masculinities

There is already a recognition of gender as socially constructed. However, this does not commonly apply to sex, which continues to be perceived as something "natural" (Cowan 2005). In the literature, several authors have questioned this idea (Butler 1990; Cowan 2005; Morland 2022; Karaian 2013; Preciado 2000/2019) because intersex and trans people prove the fallibility of splitting people into male versus female categories based on reproductive organs (Morland 2022; Preciado 2000/2019). According to Butler (1990), Morland (2022) and Preciado (2000/2019), the social constructions of gender and sex – through the materialization of the body, since sexual differences are not visible to the eye in the daily life but mainly inferred and can be shaped through surgery modifications – are rooted in the widespread idea of heterosexuality as a natural phenomenon and intend to regulate individuals socially and politically.

Spade (2011) points out that gendered language reinforces biological determinism, considering that binary sexual organs define binary identities. As an alternative, the author proposes the adoption of linguistic reconstructions, such as the use of expressions like "people with ovaries" or "bodies with penises" instead of "female organs" or "male body parts" (Spade 2011). Also, MacDonald and colleagues (2016) refer that language has power and can cause distress in transmasculine people, thus, some words such as "chestfeeding" instead of "breastfeeding" should be adopted in a more inclusive language. Through these discursive practices, it is recognizable that masculinity and femininity are not dependent on reproductive organs. Thus, it should not be "nature" nor biology that regulate the body and sexuality, but rather self-identification (Karaian 2013).

Nevertheless, this does not mean to disregard the impact of bodies (Asher 2010). The assumption that certain bodies are not valid because they do not conform to the

standards contributes to trans people's experiences of discrimination (Butler 1993). The higher the visibility of incongruence between self-identified gender and body (Aboim, Vasconcelos, and Merlini 2018), the higher the probability to experience discrimination (Koch-Rein, Yekani, and Verlinden 2020; Rodrigues 2016). Also, perpetuates a "superiority" of masculinity over femininity (Connell 1995; Connell and Messerschmidt 2005), and disregards other types of masculinity that do not meet patriarchal ideals, such as trans masculinities (Saeidzadeh 2020). Despite that, Connell (1995) states that masculinity exists in both men and women's gender practices, which influence various dimensions of people's experiences.

Pregnancy as a Male Experience

Trans men who get pregnant incorporate into their identity construction an experience that is socially seen as exclusively female (Pereira 2022; Rodrigues 2016; Walks, 2015). This is due to the repronormativity, which according to Franke (2009), remains almost unquestioned. Repronormativity manifests through the recognition of the cultural value of women and their bodies, that provides them with reproductive power. Consequently, the pregnant body is subjected to objectification and sexualization. It ceases to be private and becomes policed by acquaintances and strangers (Walks 2015). Repronormativity is also present in the lack of support and encouragement regarding the pursuit of parenthood by trans men (Bower-Brown 2022; Riggs, Power, and von Doussa 2016).

When trans men get pregnant it can be considered a way of transgressing standards of biological and heteronormative parenting within a nuclear family framework (Butler 1988; Renegar and Cole 2023) and, contrary to many trans people who live their lives without others knowing about their trans identity, this may impact that visibility (Currah 2008).

Although at first sight the experience of gestational pregnancy seems contrary to masculinity, it can be an experience of validation because some trans men do not stop perceiving themselves as masculine during this experience (Riggs 2013; Riggs et al. 2021). Pregnant men are not less men than their cis peers, but rather men who can give birth to their children (Riggs 2013; Riggs et al. 2021; Rodrigues 2016). Thus, trans pregnancy in the existent system is still a transgressive idea but the visibility validates the inclusion of pregnancy experiences in masculinity. Here, the transgressive works in a transitory way in which at first it may defy the norm, but over time it is expected that the system legitimates experiences and recognizes them.

Different studies show multiple experiences of male pregnancy. Some trans men referred to be motivated by the desire to have children with their DNA or for their love for kids (Walks 2015); others enlightened the difficulties of dealing with hormonal and body changes due to the pregnancy process and the suspension of testosterone (Charter et al. 2018). A recurrently mentioned bodily change that enhances discomfort is breast growth (Charter et al. 2018; Riggs 2013). Also, the practice of chestfeeding is challenging for some trans men. Nevertheless, some participants conceptualized

chestfeeding from a utilitarian point of view, rather than associating it with the feminine gender (MacDonald et al. 2016; Riggs 2013).

Moreover, the implications that hormones may have on the baby's health and development; the discrimination that trans men and/or their children may experience; and the lack of parenting and employment rights, with only 4 countries in Europe and Central Asia recognizing the gender identity of trans fathers and mothers (Belgium, Malta, Slovenia, and Sweden) (TGEU 2020), are fears that men who become pregnant experience as well (Charter et al. 2018; Karaian 2013; Love 2022; Pinho, Rodrigues, and Nogueira 2020; Toze 2018). These individuals still have to deal with the erroneous way in which they are treated and recognized by others (Epstein 2018; Riggs 2013), both in informal relationships and in formal settings, such as health services (Forsberg and Eliason 2022; James-Abra et al. 2015; Mendieta and Vidal-Ortiz 2021).

Assisted reproduction services continue to perpetuate versions of identities, bodies, and parenting configuration based on cis and heterosexual normativity standards (Greenfield and Darwin 2020; Thompson 2005). Also, the non-recognition of trans identities in the reproductive field is reflected in official documents that serve as guidelines for health professionals.

Method

Research Questions and Participants of the Study

Based on the existing literature, the present study aims to understand: (1) How do participants conceptualize pregnancy as a male experience?; (2) How do participants perceive the social reaction to their pregnancy?; and (3) How did Berlin, the context in which participants live in, influence the decision to become pregnant and the experience of pregnancy itself?

To answer the research questions, we conducted a case study A convenience sampling method was adopted to recruit participants. Members of an online group of *Queer* mothers and fathers living in Berlin were contacted as well as informal contacts of the interviewer that were part of collectives of trans people in Berlin.

Two participants met the selections criteria of the study, namely challenging gender by identifying as trans men or non-binary trans masculine person, having experienced pregnancy to become parents and living in Berlin. Participants were immigrants and they were 31 and 35 years old. They both have undergone gender-affirming procedures, such as mastectomy and hormone therapy. At the time of data collection, in 2020, one of the interviewees was in the final stages of his pregnancy and the other had already given birth.

Data Collection and Analysis Procedure

Based on a qualitative approach to explore the experiences of trans men pregnancy in Berlin and the meaning they attributed to the process (Braun and Clarke 2013), semi

structured interviews were used. The interview script was developed and reviewed by academics specialized in gender and trans scientific domains. The script was also analysed by trans people to ensure the relevance of the questions and both participant's suggestions about inclusive language and their self-identifications were integrated (Charter et al. 2018).

Data collection was divided in three parts: informed consent, interview, and biographical questions. The interview questions focused five main themes: experience in the city, parenting, masculinity, pregnancy, and social experience. The process was conducted in English, through the *online Zoom* platform to overcome the geographical distance between participants and the interviewer. The interviews were recorded with the consent of the participants and presented an average duration of 1 hour.

Data obtained were analysed following the six stages of thematic analysis proposed by Braun and Clarke (2006, 2013). A deductive approach was mostly used, because existing literature on the subject was considered during the analysis. Nevertheless, an inductive analysis was also adopted, considering new emerging patterns that were not identified in previous studies. After the interviews transcription the analysis process provided an identification of themes, subthemes and codes, as well as the most expressive excerpts to illustrate them. Also, a central organizer was created and the integrative analysis of the results were written in the final report.

Analysis and Discussion of the Results

In the present study four themes emerged from the analysis of the narratives: unseen pregnancy, (un)identity challenges, interpersonal experiences of a pregnant man, and specificities of life in Berlin. All the themes appear to be linked by negotiations that participants carry out between their personal experience and the social expectation about their pregnancy, thus, this is considered the central organizer of the thematic analysis.

Unseen Pregnancy

This theme focusses on invisibilities that pregnant men experience in their daily lives. Participants pointed out invisibilities in five domains: public space, resources about pregnancy, reproductive health services, non-normative family configurations, and clothing, which seems to have direct consequences on their well-being.

Concerning the public space, participants referred that the pregnant body led to a change in the social perception of who they were (Walks 2015), which evidences the recognition of pregnancy as exclusively female. This invisibility seems to be doubly negative. On the one hand, if they are recognized as pregnant women, they experience the oppression and sexualization of their bodies caused by hegemonic masculinity (Walks 2015):

> (...) cis men were not noticing me anymore and giving their opinions on my body, and then as soon as I started showing pregnant, it doesn't matter if I was wearing my usual clothes (...) that are normally masculine (...) I was again getting noticed by man, and that also was first weird, and then disgusting (...) because I don't want to be sexualized by (...) cis straight men (...) (P2)

On the other hand, if they are recognized as fat instead of pregnant, they do not have access to social rights, such as an available seat on public transport or priority services' attendance:

> (...) if I am on the train or something and it's a bit crowded, nobody looks at me and thinks "Oh I should let this person sit down" (...) (P1).

Therefore, neither type of recognition is protective, which accentuates the insecurity of participants experiences:

> (...) and I worried about going to the swimming pool and things like that, like, would my body be decontextualized? because people wouldn't understand and I would have to adapt for my own safety (...) when I do go out to the world I do kind of wonder who sees me as a pregnant woman and who sees me as a man with a belly (...) (P1)

The invisibility in both resources about pregnancy and reproductive health service show the cisheteronormatity present in the health field (Epstein 2018; Pereira et al. 2022). In addition to the difficulty in finding quality information about the specificities of their pregnancy process, they also face judgments concerning identity and parenting that are not congruent with their experiences (James-Abra et al. 2015):

> (...) I felt a little bit judged with the gynaecologist, that I think one time she mentioned "but why did you take it away [the breasts], if you knew you wanted to have kids?" (P2)

These gaps and invisibilities can cause feelings of inadequacy, and even distress due to lack of references:

> (...) something that has been happening for me lately is that I am misgendering myself because (...) all of the apps, and blogs, and massage courses and groups for pregnant people, (...) probably more than 99 per cent of these resources are very, very gendered and use a lot of assumptions (...) I'm just so intimidated by this language that I don't identify with, that I find myself like referring to myself as she (...) (P1)

Another invisibility pointed out is related to non-normative family configurations that are not recognized in pregnancy and parenting resources and legislation:

> (...) everyone just assumes that the partner of the pregnant person is "he" and that they are married (...) and it seems that the pregnant person is "she" and "mommy" (...) (P1).

This phenomenon creates a legal gap, which can leave these parents and children unprotected (Karaian 2013). To ensure themselves and their family members legal protection, trans men and their partners are often forced to adopt practices about their relationships that do not represent them:

> It was even harder to prove the fact that I am a single parent and that my wife didn't want to adopt this kid, and then it was impossible for the parent who wants to be responsible for the kid to be in charge (...) now I would need to divorce and that takes another year, and then me and the other parent need to be married and then he could adopt, so I think (...) the system by itself it's so ridiculously hard (...) I don't understand if someone wants to be responsible what's the problem? (...) if he was a cis male then he would be directly the father, but since he is not it is not possible (...) (P2)

Finally, clothing was also a dimension in which participants felt neglected. In addition to the political system, cisheteronormative ideals influence the market and its supply. This form of invisibility can reinforce others referred above, especially the public space domain. People are limited to express themselves according to their identity during pregnancy, as mentioned by one of the participants:

> (...) the hardest part was finding clothes that work, because (...) clothes that are made specifically to pregnant people are quite uncomfortable for me (...) (P1).

Consequently, this limitation influences other people's perceptions of them. The difficulty in finding appropriate clothing during pregnancy was also verified in other studies (e.g., Walks 2015).

(Un)identity Challenges

Pregnancy seems to be a phenomenon that generates multiple reflections about identity and strategies to overcome challenges in terms of the self-conception of participants' masculinities and bodies. The social contexts, where the interviews occurred, have an influence in the individual reflections and questioning processes of participants because identity does not exist in a vacuum.

Both participants revealed that the idea of becoming pregnant came very naturally:

> (...) it was really just a feeling (...) [I had the time] to just listen to myself, feelings and intuition (...) and then one day, just out of the blue, I felt like I want that (P1)

As illustrated in the excerpt above, they did not experience a major questioning, since they had the organs and conditions to get pregnant. These results differ from those

that emerged in the study conducted by Charter and collaborators (2018), where participants engaged in a complex process of questioning before starting the pregnancy process, which highlights the diversity of pathways.

Although pregnancy is socially seen as a feminine attribute, it was not considered that way by the participants when they decided to go ahead with the idea of bearing their children. In other words, the social expectation that pregnancy is not compatible with masculinity did not cause strangeness or prevent participants from following their will. As elucidated in Riggs' studies (2013), pregnancy validated masculinity, as participants continued to perceive themselves as male, regardless of external evaluations, proving that masculinity and pregnancy can coexist in the same body. The same was observed in the present study:

> (...) the [pregnancy] hormones never stop making me feel how I felt in a way, and I always like to be a seahorse, I always talk about myself as daddy, in front of the doctors, in front of the geburtshaus (maternidade em alemao) and in front of people, no matter how confused they get (P2)

One of the strategies that participants used for a self-conceptualization of their pregnancy as masculine was the identity refusal of hegemonic masculinity. Both interviewees listed characteristics of this form of masculinity with which they did not identify, such as the aggressiveness and oppression it generates in others, while still perceiving themselves as masculine:

> (...) I identify as a trans masculine individual and I present as some masculinity person since I start having taste in clothes, and activities (...) I also think masculinity is toxic and abusive and repressive (...) (P2).

These narratives show the existence of alternative masculinities to the hegemonic and more commonly disseminated version of what a man is, evidencing that trans men question hegemonic gender norms (Saeidzadeh 2020), and that masculinity is self-constructed. The process of disidentification from hegemonic practices can be conceptualized as a strategy of resistance and survival because the refusal of certain values empowers the creation of their identity (Grave 2016; Muñoz, 1999).

Regarding the implications that pregnancy has on how participants deal with their bodies, some ambiguity was observed. On the one hand, they stated that pregnancy allowed them to connect with their bodies in a way they had never experienced before:

> (...) I am a desk person, I was never a person who was a lot in touch with my body, I am all the time drawing and spending time on my desk, but doing this really connected me with my body (...) I was so attentive, it was so strong what it was needing, it's a beautiful experience to be an animal, to be moved by needs only, and it brings you such a presence experience, it keeps you anchored (...) (P2)

The participants identification with this narrative shows a distancing from hegemonic masculinity by taking on a discourse that is socially associated to cis women without questioning their masculinity. As observed in the study conducted by Pereira (2022), being pregnant allows the self-knowledge of the person and the recognition of the potency of transmasculine bodies, including pregnancy in the masculinity experience. Therefore, men who become pregnant are not less of a man, but reflect human diversity (Rodrigues 2016). On the other hand, the temporary body changes caused by pregnancy induce distress into participants' lives. These relate mostly to the growth of breast tissue and the cessation of testosterone intake (Pereira 2022; Raja, Russell, and Moravek 2022). As the results obtained by Charter and colleagues (2018), the interviewees created a narrative that body changes are temporary and that after the end of the pregnancy process, they will be able to get back to the congruence between their bodies and identities. To do so, they consider resorting to practices and procedures, such as restarting the intake of male hormones and having another mastectomy:

> (...) I wasn't taking T, and because of all of the hormones of the pregnancy, I was growing a lot of mammary tissue and I think it was the thing that gave me more dysphoria in regards of me and myself and my body (...) I knew it was temporary and I was going to have my body back (...) I guess now I am still dealing with it, because I want to have a second top surgery (P2)

Interpersonal Experiences of a Pregnant Man

There are some specificities in social interactions with pregnant man, which tend to portray relations of power between people and institutions. Here, some protector elements and discriminatory circumstances were mentioned in the participants' discourses, which contributed to their dis/empowerment experiences.

One of them relates to pregnancy as a cause of vulnerability in interpersonal relationships. As it happens in Walks' (2015) study, participants felt victimized by a policing of their decisions and their bodies:

> (...) you become vulnerable and available to the rest of the world, I don't know if it's because you are caring the future (...) but people feel so entitled to tell you all the time what to do, and how to do, or what worked for them and what not (...) so you and your body are vulnerable (...) (P2)

The lack of recognition as people with autonomy, when perceived as pregnant, can generate discomfort and frustration. This reaction to pregnancy by others proves to be like the one experienced by cis pregnant women (Walks 2015), which highlights the invisibility of male pregnancy and the repronormative ideas that a pregnant body is a woman's body.

Other specificity is the intersectional dimension of discriminations because participants showed concerned about experiencing other forms of oppression in their

identities besides pregnancy. They referred to be afraid that aspects such as race, sexual orientation, gender identity, non-normative family configurations and work choices can have an influence on their well-being and their children:

> (...) a person pushed me off my bike and I broke my collarbone and I don't know why they did this, they probably could have chosen any reason because I'm like pretty ambiguous... race and gender and sexuality, so people can just, like, project what they don't like onto me (...) (P1)

According to intersectionality theory, the various identity categories of belonging interrelate on multiple levels and create a specific experience of oppression, so this interaction should be considered (Pizzinato et al. 2020). Thus, some of the negative experiences that these participants were subjected to, from discrimination in legal matters to being victims of hate crimes, may involve a diversity of motivations beyond questioning the repronormative ideas.

In the narratives were identified privileges that masculinity appears to bring to participants in their social interactions when recognized as men. They referred to experience security and other advantages:

> (...) I automatically get privileges of being a man, the privileges and all the responsibilities, like simple aspects, being always opening and closing the door, people always direct to me instead of my feminine friends on making decisions on anything (...) it gives me some sort of safety to transit in this world, because I have less of a chance to be raped, violated, abused (...) not only physically, but emotionally (...) (P2)

According to (Brittan, 1989), what is common to all forms of masculinity is power, and the benefits evidenced by the participants may stem from this form of dominance that privileges men over women. Despite the protective aspects experienced due to being perceived as men, the privileges ceased to exist in certain contexts when they were recognized as pregnant. Pregnancy and other forms of oppression seem to weigh more than masculinity when considering other people's attitudes towards men who become pregnant. Another possible justification relates to the invisibility of male pregnancy, thus when recognized as pregnant they are perceived as female, as discussed in the theme "unseen pregnancy".

The presence of supportive figures in the pregnancy process are essential to assure positive consequences on their well-being (Charter et al. 2018; Pereira 2022), because it can contribute to protect from some forms of oppression. Both participants reported a positive reaction from their closest relations. One of them even stated that he felt his pregnancy as a collective experienced lived by their *Queer* friends and peers:

> (...) now that I am pregnant, like many of my trans friends, Queer friends are just so happy and excited, like, they feel like it's part of them as well, in a really nice way (...)I feel really reached out and offered a lot of support in really major ways (...) (P1)

When their experiences were not "validated", or when their closest contacts did not have the answers they were looking for, considering the specifics of their pregnancy process, participants resorted to the internet:

> I would say, find the supportive people in your life, even if they are like people you don't know on the internet who are willing to validate your experience (...) (P1).

New technologies can be a protective factor and have a positive impact in connecting people with identical experiences. In addition, these online platforms subvert some cisheteronormative norms and become a safe place, where these people can behave in a genuine way (Hoffkling, Obedin-Maliver, and Sevelius 2017; Myslik 1996).

A final specificity is the preference to avoid hospitals for childbirth, choosing to give birth at home or in a private maternity setting. These choices seem to be based on the fear of dealing with oppressive and cisheteronormative assumptions about their experiences. Participants believe that they will be better treated and can have specialized support away from the public health system:

> (...) it was something that I always had thought about [having a home birth] and so feeling seen, in terms of being seen in the terms of my body and my gender, and be able to be surrounded by people who will respect me and see me (...) (P1)

The public system should provide a specialized and respectful care. However, this does not happen, and participants tend to resort to external and often private services to avoid discrimination and more oppression. These results are congruent with the informal practices related to reproductive health observed in the results of Charter and collaborators (2018) study. Pereira (2022) observed a fear of obstetric and transphobic violence in institutions highly marked by gender specificities, which led to a major preference for private maternity facilities.

Specificities of Life in Berlin

The city economic and political system influence the decision and the way trans men live their pregnancy experience (Charlton et al. 2021).

Both participants are migrants and highlighted how the lifestyle they had in Berlin, especially having time and economic power, were determinant to the decision of getting pregnant:

> (…) living in here and having this kind of slower pace of life and also like socialism (laughs), I felt very supported and kind of I guess made room to me to think about that (…) it just felt like a possibility here (P1)

> (...) I am finding myself with some time, and somehow some money (...) when I have time and money, I can invest time on somebody else (...) (P2)

According to Diener and collaborators (2009), factors such as high incomes, human rights, and social equality have an influence on peoples' subjective well-being, which seems to be directly linked with the decision to become pregnant. These factors are present in Germany, considering that it is pointed out as the fourth best country in the world to live in the Best Country Rankings 2020, year of the data collection.

Public policies are also an important aspect in the lives of trans people. One of the participants mentioned that some particularities of the German legal system have direct implications on their well-being and shared that he finds very relevant the law that allows the change of gender marker to diverse, which entered into force in 2018 in Germany (Bundesgesetzblatt Teil I No48 of December 21 2018), allowing him to change his gender identity:

> (…) in some ways I feel more [legally] protected here than I did in the [country I was born] and (...) it's nice to know that if I can become a permanent resident here then I could change my gender marker to non-binary If I want to (...) (P1)

As mentioned, this law only applies to intersex people and requires a medical certificate. Therefore, trans people are not eligible for this gender marker change process (TGEU 2018). This suggests that although laws seem progressive and inclusive, these can neglect certain people for their specificities. Moreover, there is also a lack of protective laws for trans people in other fields, considering some invisibilities in the legal system that these individuals pointed out and were problematized in the "unseen pregnancy" section.

In Berlin, there are some positive spaces and experiences in an oppressive system. Here, participants can express themselves in ways that are congruent with their identities, especially since there are other *Queer* people with whom they share their routines and "validate" their experiences (Preser 2016). Nevertheless, participants also reported negative experiences of victimization showing that despite Berlin having certain characteristics that protect LGBTQIA+ people, it is not yet free of violence caused by the cisheterosexist system. One factor that might influence these ostracizing experiences may relate to the increase of far-right extremists' representation into the German parliament in 2018, which has shown its intentions to deprive LGBTQIA+ people from rights (Hutton 2018). These discrimination discourses that come from power figures legitimize behaviours, which can be reflected in greater discrimination in the public space against LGBTQIA+ people. To protect themselves from this discrimination, participants sought to move in *Queer* spaces where they feel they are respected, thus avoiding oppressive experiences:

> (...) I think in Berlin, we have the privilege to be able to live in a small [Queer] bubble (...) and then outside I think it's different (...) trans feminine people, they do receive a lot of aggression (...) (P2)

This strategy of seeking closeness with people with whom they identify to overcome discrimination is documented in the studies of Mara and collaborators (2020) as well.

The overall characteristics and conditions provided in Berlin highlight the importance of the place people live in to consider the decision of getting pregnant.

Conclusions

This study aimed to understand some specifics of the lives of pregnant men living in Berlin. Their experiences proved to be complex and involve several negotiations.

The invisibilities that emerged associated with male pregnancy in several dimensions, such as in the public space, pregnancy resources, reproductive health resources, non-normative family configurations, and clothing, are conceptualized as the main reason for negotiations made by pregnant men, as their personal experience is not recognized in the social environment of which they are a part of. It is known that lack of visibility is a common experience of LGBTQIA+ people throughout history (Reed 2018). However, men who get pregnant seem to suffer from a heightened invisibility because they do not follow the standards of repronormativity as well and this reality is common in other contexts besides Berlin, such as the United States (Charlton et al. 2021). Also, in their social relationships these experiences were problematized in two dimensions that involve both the constraints that influence the social experience of participants as well as the importance of feeling supported. Pregnant men find themselves in a very specific social situation: on the one hand, they have access to some privileges by being read as men; on the other hand, they incorporate pregnancy into their identity, which is seen as feminine and can lead to being mistaken for a woman. In the balance between oppressions and privileges, the benefits of being read as male disappear when perceived as pregnant and can expose them to discrimination, but the visibility also allows people to access support and rights associated with pregnancy. The emerging results demonstrate the intersectionality of oppressions, as participants fear other characteristics of their identities that increase discrimination, in addition to the repronormativity. To counterbalance the discriminatory experiences, social support proved to be essential in the everyday context, in the online context and at the time of delivery. The results highlight the importance of social support in the well-being of participants.

Another element of these negotiations is the identity challenges participants face, due to the implications of pregnancy on their masculinity and bodies. The conceptualization of masculinity by participants contradicts hegemonic masculinity and is in line with a constructionist approach. Results highlight that masculinity is self-constructed and that personal identification is the major criterion to define it, since participants continued to see themselves as men while experiencing something that is

socially seen as exclusively feminine (Walks 2015). Therefore, trans masculinities emerge in this study as a liberating and fluid form of masculinity, as they adapt to the specificities and needs of people, rather than the opposite.

Given the significant body transformations during pregnancy, this is expected to be a challenging dimension for those who become pregnant (Strang and Sullivan 1985), regardless of their gender. In the case of trans men, it seems to be a cause of particular suffering because the cessation of testosterone intake produces changes that make their bodies less congruent with their identities. To deal with these negative aspects, participants focused on the temporariness of these changes.

Regarding the context where this experience is lived, participants pointed out some important characteristics of Berlin. Besides the social support from peers living in the city, the economic and political privileges provided in Germany were highlighted. These had a direct implication on the participants' decisions to get pregnant. Regarding public policies, some protective laws were shown to exist, although others were found to be lacking. Although Berlin presents a set of characteristics that favour the lives of these participants, they are not free from oppression, considering the invisibilities, discriminations and the absence of laws that attend to their specific experiences. The fact that these experiences occur in Berlin, which is known for its respectful attitude towards LGBTQIA+ individuals, shows that even in the seemingly most progressive places these individuals are not entirely free from various forms of violence. This phenomenon may indicate the existence of violence against these men in more conservative places. As such, it becomes relevant to give visibility to the experiences of these people as a form of resistance to the ostracization. As Riggs and colleagues (2021) refer it is important to normalize the experience of conception and also recognize the specific challenges that people face in their lives. These findings also highlight the importance of considering the negotiation between identity politics, that can provide social support of people but tend to assume a single identity belonging to a group, and intersectional politics, that attend to intersectional belongings of a specific person (Crenshaw 1991/2012). The negotiation between identity politics and intersectional politics will involve a risk exercise: the risk of recognizing the complexity and tensions that this negotiation incorporates; the risk of calling for reflection within one's own criticism and self-criticism; the risk of identifying and questioning our places of privilege (viviane v. 2014); the risk of identifying vulnerabilities and building on them and, with them, spaces for alliances (Bachiller 2012); the risk of a journey of the concrete lives of those who have been historically oppressed. To conclude, the main practical implication that arises from these results is the creation of inclusive and safe spaces, free of discrimination, to allow the integration of pregnant men experiences in the negotiations concerning in/visibility. These should focus on areas where participants identified lack of recognition (public space, pregnancy resources, reproductive health resources, non-normative family configuration, and clothing). Some strategies that should also be adopted are: education of health professionals, especially in areas that deal with reproductive health; production of content on inclusive pregnancy; creation/change of laws related to parenting issues and trans family configurations;

creation of clothing and accessories that suit pregnant men; and awareness campaigns to make the experiences of these people visible. However, keep in mind that this is a small case study and these strategies are based on what both participants shared. For deeper generalizations further research and community outreach with trans masculine populations would be required.

Future studies should focus on the issues of negotiation of visibility and the cost associated with it in other geographic and social contexts. The questioning of re-pronormativity allows us to think masculinities in a more fluid and flexible way, since pregnancy does not jeopardise masculinity, but conditions and rights to a positive living of male pregnancy need to be addressed.

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Notes

1. Trans men" refers to individuals who identify with the male gender. The term trans* is an umbrella concept that encompasses different experiences and it is, also, associated with activism movements and the demand for the right of gender self-determination (Platero 2014). Throughout this paper, the terms "trans men" and "trans masculine individuals" will be used. Authors acknowledge that there are people who identify as trans men but other people who reject the category man and self-identify as non-binary trans masculine people. Therefore, when the category "trans masculine" is applied the person does not necessarily identify as man. However, trans men and men will be used in the text frequently because the authors want

to emphasize that people with a masculine expression can defy repronormativity. This choice does not intend to value one concept over others (Rodrigues 2016), because the individual self-identification always prevails. As such, the fallibility of the term used is assumed (Missé 2014).

2. Approach that questions social constructions presented in the realities and experiences of human being (Nogueira 2001).
3. The depathologization movement defends that transsexuality should not be considered a pathology, because the real disease is in the transphobic beliefs of society and not in trans individuals (Arán, Zaidhaft and Murta 2008; Rodrigues 2016).
4. Cisheteronormativity is a concept used to describe social, cultural, and political privileges of heterosexual orientation and congruence between sex assigned at birth and gender identity (cisnormativity) over alternative sexual orientations (e.g., homosexuality) and gender identities (e.g., transsexuality).
5. Queer is a word of English origin and an umbrella concept to define identities that do not follow cisheteronormative standards. Originally the word had a negative connotation. However, it was appropriated by these individuals as a way of claiming their identities and rights (Jagose 1996).

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