

Speaking of Research

South Coast Doctoral Training Partnership Podcast

Series 1 – Episode 3 – Katie Munday

SUMMARY KEYWORDS

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SPEAKERS

Katie Munday, Catherine McDonald

Catherine McDonald 00:03

Hello and welcome to Speaking of Research, a podcast from the South Coast Doctoral Training Partnership. I'm Catherine McDonald, and in this first series of our podcast, we're talking about impact and how researchers can achieve it. We're recording at the amazing Cumberland Lodge, and we're speaking to doctoral researchers about their research, who might benefit from it, and how they hope it will make a difference. In this episode, I'm joined by Katie Munday from the University of Portsmouth. Can you tell me a bit more about it?

Katie Munday 00:37

Yeah, thank you. So, I've been doing work for the last four or five years on cancer service inequity, mental health services inequity, gender identity healthcare inequity. And I see that there's a lot of issues for trans and autistic people across all of these different areas. So have a feeling it's going to be across many more than that. And I appreciate that PhD is supposed to be niche. So, people might think, oh, trans autistic people are there that many of us? Yeah, I'm one of them. Yes, there are. There's quite a high proportion of autistic people who are also trans, or non-binary or generally kind of come under the trans plus umbrella. And it's living within that intersection, as well as other intersections as well. What that means for being at access health care, health care being appropriate, social care being appropriate, and also being, you know, having autonomy and informed choices around health and social care as well. So, I've kept it quite broad, because I'm taking a participatory action research approach. I'm in my year one of PhD but I've just got my co researcher group together. So that's four

other trans autistic adults. I myself am trans and autistic, but I don't want to say, I don't want to talk on behalf of my community. I want to be able to do it with my community as well, and get few people paid as well whilst we're doing that as well, it's quite nice. So that's where I'm at, at the moment. So, yeah, super-duper exciting. And I can't tell you much past that, because until they tell me what we want to have a look at then I can't say, do much more.

Catherine McDonald 02:10

Absolutely. And do you mind me asking, what motivated this research? What is it, personal experience?

Katie Munday 02:16

Yeah, personal experience. And I've been working for the last 11 years with neurodivergent and disabled young people. They are actually a huge part of why I realised in my 30s that I'm autistic and got diagnosed. But also, a lot of them are LGBTQIA plus, and I was having a look at this throughout my undergraduate. Then I started having a look at trans, non-binary, autistic narratives in my MRes, that I also did at University of Portsmouth. So, it's kind of lived experience, professional experience, academic interest. It's fully encompassing everything, I think.

Catherine McDonald 02:54

We're living and breathing,

Katie Munday 02:55

Yeah, literally.

Catherine McDonald 02:58

So you talked a bit about participatory research there as being a part of your methodology. Can you tell us a little bit more about your methodology?

Katie Munday 03:05

Yes, so participatory action research is about working alongside. It's usually a small group of other people, and so we will be having conversations about, what do we want to look at, co designing and CO creating ways for us to talk to potentially other participants. Could be focus groups, could be interviews. Could be, I've got a bit of a background in art space, kind of community-based projects as well. Could be that these four people could come in and completely and utterly blow away anything I thought that we were going to do. So that's really exciting. So again, it's a really difficult question to answer until I've spoken to everyone, really.

Catherine McDonald 03:48

What new insights do you think this PhD is going to provide, and then how do you hope those insights will benefit people?

Katie Munday 03:56

So there's a lot of work already around well, trans and autistic research is relatively new, and a lot of it is based around prevalence. How many autistic people are also trans? How many people in the trans community are also autistic, or could fit some kind of criteria and air quotes for being autistic, and with you know, 70, 80, 90 years of autism research and trans research has always been around the phenomenon of like trans embodiment or autistic embodiment, and so little of it is around what do we want, what do we need, what do we enjoy? How do we live our lives? Recently that started changing in trans autistic research, which is really exciting. But again, I think people, when people hear trans and healthcare together, there's this immediacy of gender "oh, gender identity healthcare, that's what you're talking about". That's super, super important for a lot of people in our community. But you know, we also have other healthcare considerations, so if there's issues with accessibility and not being affirmed in your gender, then it can make things you know, even going to your GP, which a lot of people would probably take for granted, actually, really, really difficult. And then if you're living also with chronic illness issues, mental health issues, which I also do as well, all of these things become, yeah, quite ginormous, really.

Catherine McDonald 05:21

Absolutely. So, in light of the recent Supreme Court ruling, how do you think that's going to affect your research?

Katie Munday 05:29

It's already affected me personally. Anyways, it's very worrying when, when the government can decide who belongs to what group, what identity? And it's worrying on a wider scale than that, because it's not just for trans people that that's going to be effective on it's also for cisgender women as well. If you're taking a bio essentialist idea of what people think it means to be a woman, yes, a very scary time to be trying to access healthcare when you're a trans man who happens to also be autistic and is trying to go in for cervical screening, and you're in a women's health clinic and you are the only person there with a beard and no breasts, and yeah, so I feel like this is just going to add another layer of distrust for trans autistic people to go in and get the care they need. So, I have a feeling a lot of the conversations I'm going to be having with participants are going to be very impassioned, very emotional, and probably with quite a lot of anger and kind of anxiety around just being able to get their very basic health care needs met. But what a time to be conducting this research? Yeah, unfortunately, and with, oh, what's going on in the US just generally? But you know, the rise in kind of anti-vaccine hatred and stuff like that, there's, there's this constant medicalization of trans people,

medicalization of autistic people. So how, how do we engage and how we present in a system that has created us but has created us, not equally to others.

Catherine McDonald 07:13

So how are you going to ensure that your research has the impact you want it to have? What are you going to do to try and make that happen?

Katie Munday 07:22

I think what's worked in my favour is having worked in these spaces previously and still a little bit overlapping as well, because I do many various other things outside of PhD. So, it's already having these networks, already having these people and groups that I can speak to. And having, I don't know how often this likes to come up in research and how much people like to hear this, but social media, is also like a really helpful way to do it, because I want to be able to share information that's also accessible to people. There's no point just writing journal articles that are stuck behind a pay wall that you know 20 people who are interested in it are going to read. So I've been in for all party parliamentary groups as well on cancer and also autism as well. So there's other kind of like policy. My third supervisor is all over health policy, so he will, he will guide me with specifically health policy stuff, which I'm super excited about.

Catherine McDonald 08:23

Fantastic. Well, I hope you have all the conversations that you should be having. Katie, thank you so much for talking to us about your research, and thanks to you for listening to this episode of Speaking of Research from the South Coast Doctoral Training Partnership. To find out more, please visit southcoastdtp.ac.uk. Don't forget to subscribe wherever you get your podcasts to access earlier and forthcoming episodes. This was a Research Podcast production.