

WTA GENDER PARTICIPATION POLICY

PURPOSE

The purpose of this policy is to address the eligibility of entry into and participation in WTA Tournaments based upon a player's gender and identification as a woman. The criteria and guidelines designated in this policy are intended to provide players with the ability to compete on a level playing field in a safe, competitive and friendly environment that is inclusive, fair and free of discrimination.

<u>SCOPE</u>

The WTA continually strives to promote and support values of equality, progress and growth. Since its revolutionary founding in the 1970's, the WTA's mission has always been to provide generations of women with the opportunity to compete and participate in women's tennis at a professional level. This mission is what helps to set the WTA and women's tennis apart from all other sports and organizing bodies and remains a vital part of the WTA's integrity and principles.

In furtherance of the WTA's mission, tradition and values as the global leader in women's professional sport, and in recognition of our changing world and evolving understanding of gender identity, the WTA feels that it is important to set forth a fair and non-discriminatory policy that addresses the eligibility of entry into and participation in WTA Tournaments based upon a player's gender and identification as a woman. The policy works to promote much needed sensitivity around gender identity and will be updated from time to time and subject to review in light of any scientific or medical developments in order to ensure that it continues to reflect the values and principles of the WTA and its members.

WTA notes that essential to this policy are the definitions and terms used and referenced. Because language has the ability to shape our perceptions and views of other people, the WTA has worked to use and incorporate accurate language when discussing gender, gender identity and transgender people. A complete list of the definitions and terms used or relating to this policy can be found in Appendix A to this policy.

POLICY

I. Transgender Players

The following guidelines set forth the eligibility of entry into and participation of transgender players in WTA Tournaments:

A) A player who transitions from male to female (also known as a trans female (MTF)) is eligible to enter into and participate in WTA Tournaments under the following conditions:

i. The player has declared that her gender identity is female. The declaration cannot be changed, for purposes of entry into any WTA Tournament, for a minimum of four (4) years.

ii. The player undergoes hormonal treatment for gender transition and demonstrates that her total testosterone level in serum has been below 10 nmol/L for at least twelve (12) months prior to her first WTA Tournament (with the requirement for any longer period to be based on a confidential, case-by-case evaluation, considering whether or not twelve (12) months is a sufficient length of time to minimize any advantage during competition).

iii. The player's total testosterone level in serum must remain below 10 nmol/L throughout the period of desired eligibility to enter into and participate in any WTA Tournament.

iv. Compliance with these conditions may be monitored by testing, which testing shall be administered in WTA's sole discretion based on standards of reasonableness and fairness and in consultation with physicians and medical experts. In the event of non-compliance, the player's eligibility for competition in WTA Tournaments will be suspended for twelve (12) months.

B) A player who transitions from female to male (also known as a trans male (FTM)) is not eligible to enter into or participate in any WTA Tournaments if he is undergoing hormonal treatment for gender transition.

II. Hyperandrogenism

At this time, WTA has no hyperandrogenism regulations in place. Entry into WTA Tournaments shall be open to all women tennis players based on merit, subject only to the conditions herein and those set for in the WTA Rulebook and the Age Eligibility Rule. Players whom have been legally and psychosocially female since childhood (including pre-pubertal sex re-assignments) shall be eligible to participate in WTA Tournaments.

III. WTA Discretion

The WTA understands that the situation of each player may vary and that subject matters addressed herein are highly sensitive in nature. Therefore, each player evaluation conducted pursuant to this policy will be addressed confidentially on a case-by-case basis. The legitimate privacy interests and legal rights of all players will be respected at all times. Ultimately, WTA has sole and absolute discretion with respect to all decisions and/or determinations made herein.



Biological/Anatomical Sex — The physical characteristics typically used to assign a person's gender at birth, such as chromosomes, hormones, internal and external genitalia and reproductive organs. Given the potential variation in all of these characteristics, biological sex should generally be viewed as a spectrum or range of possibilities rather than a binary set of two (2) options.

Cisgender – A term used to describe a person whose gender identity aligns with those typically associated with the sex assigned to such person at birth.

Gender — The complex relationship between physical traits and one's internal sense of self as male, female, both or neither as well as one's outward presentations and behaviors related to that perception. Biological sex and gender are different; gender is not inherently connected to one's physical anatomy.

Gender Identity — One's inner concept of self as male or female or both or neither. One's gender identity can be the same or different than the gender assigned at birth. Most people become conscious of their gender identity between the ages 18 months and 3 years. Most people have a gender identity that matches their assigned gender at birth. For some, however, their gender identity is different from their assigned gender. Some of these individuals choose to live socially as the other gender and may also hormonally and/or surgically change their bodies to more fully express their gender identity. All people have gender identity, not just transgender people.

Gender Expression — Refers to the ways in which people externally communicate their gender identity to others through behavior, clothing, haircut, voice, and other forms of presentation. Gender expression also works the other way as people assign gender to others based on their appearance, mannerisms, and other gendered characteristics. Many transgender people seek to make their external appearance—their gender expression—congruent with their internal gender identity through clothing, pronouns, names, and, in some cases, hormones and surgical procedures. All people have gender expression, not just transgender people.

Transgender — Sometimes used as an 'umbrella term' to describe anyone whose identity or behavior falls outside of stereotypical gender norms. More narrowly defined, it refers to an individual whose gender identity does not match their assigned birth gender. Being transgender does not imply any specific sexual orientation (attraction to people of a specific gender). Therefore, transgender people may additionally identify as straight, gay, lesbian, or bisexual.

Sexual Orientation — Term that refers to being romantically or sexually attracted to people of a specific gender. Our sexual orientation and our gender identity are separate, distinct parts of our overall identity. Although a child may not yet be aware of their sexual orientation, they usually have a strong sense of their gender identity.

Hyperandrogenism – A medical condition which causes a person to produce high levels of hormones.

FTM (Female-to-Male)/Affirmed male/transboy — A child or adult who was assigned to the female gender at birth but has a male gender identity.

MTF (Male-to-Female)/Affirmed female/transgirl — A child or adult who was assigned to the male gender at birth but has a female gender identity.

Transition — The process by which a transgender individual lives consistently with his or her gender identity, and which may (but does not necessarily) include changing the person's body through hormones and/ or surgical procedures. Transition can occur in three ways: social transition through changes in clothing, hairstyle, name and/or pronouns; hormonal transition through the use of medicines such as hormone "blockers" or cross hormones to promote gender-based body changes; and/or surgical transition in which an individual's body is modified through the addition or removal of gender-related physical traits. Based on current medical knowledge and practice, genital reconstructive surgery is not required in order to transition. Most transgender people in the United States do not have genital reconstructive surgery.

Transsexual — An older term that originated in the medical and psychological communities and is still preferred by some people who have permanently changed - or seek to change - their bodies through medical interventions, including but not limited to hormones and/or surgeries.