

Gender Identity and Sexual Orientation: A Glossary

Jennifer Ervin¹ Anna Scovelle¹ Brendan Churchill² Humaira Maheen¹ Tania King¹

1. Centre for Health Equity, Melbourne School of Population and Global Health, The University of Melbourne, Parkville, Victoria, Australia.
2. School of Social and Political Sciences, Faculty of Arts, The University of Melbourne, Parkville, Victoria, Australia.

Correspondence to: Jennifer Ervin, Centre for Health Equity, Melbourne School Population and Global Health, Level 4, 207, Bouverie Street, The University of Melbourne, Victoria 3010, Australia, e: jennifer.ervin@unimelb.edu.au t:+61 482 441 945

Abstract

Gender and sexually diverse populations remain understudied and underrepresented in research. This is attributable not only to significant and ongoing data collection limitations, where large population-based studies fail to ask adequate questions around gender and sexuality, but also due to continuously evolving terminology in this space. This glossary takes a preliminary step in rectifying these issues by defining and clarifying the application and understanding of key terms related to gender, gender identity, expression, and sexuality. In doing so, this glossary provides a point of reference for understanding key differences in gender and sexually diverse terminology to 1) help guide researchers and practitioners in the use and understanding of terms, and 2) facilitate the utility of more respectful, inclusive, and consistent language application across the public health arena.

Introduction

Gender is one of the most salient and pervasive classifications. Across the globe, in differentiating between people, gender typically transcends any other human categorisation, be that race, age or occupation.¹ From the moment of birth (and often before), gender is at the forefront of both an individual's identity, and the way in which the outside world sees and interacts with them. Sexual orientation is similarly central to an individual's identity but is conceptually distinct and separate from one's gender identity. Both gender and sexual orientation affect everyone in both subtle and overt ways, significantly shaping lived experiences, inter-personal relationships, and opportunities. Importantly, they also significantly influence health and health outcomes, and this is primarily through social stigma, discrimination and marginalisation.

Gender is a dynamic and complex social construct that is recognised as an important social determinant of health (SDOH).² There is increasing recognition that sexual orientation should be treated similarly as a SDOH.³ It is also known that gender and sexual orientation intersect with other SDOH to shape exposures, vulnerabilities, health behaviours and health outcomes.^{4,5} The minority stress model (MST) provides a theoretical underpinning as to why gender and sexually diverse individuals experience poorer health outcomes.^{6,7} MST is based on the principle that the stigma, prejudice and marginalizing ideologies directed towards gender and/or sexually diverse individuals create individual and social stressors which are cumulative, and can result in adverse mental and physical health outcomes.⁶⁻⁸

However, despite this work, there remains much that is not known about the health behaviours and outcomes of gender and sexual minorities. This knowledge gap is at least partly attributable to a lack of data. This lack of data not only limits understanding of the health of people with diverse sex characteristics, gender identities and sexual orientations, but it also represents a significant barrier to health service delivery.⁹⁻¹¹ This means that health systems are ill-equipped to meet the health needs of these population groups, contributing to experiences of exclusion and invisibility. Inclusive data collection, measurement and representation is needed.⁹⁻¹¹ Many researchers, policy makers and service practitioners recognise this, but are unsure how to do this in a respectful and inclusive way.^{2,4}

In this glossary, we define some key concepts to guide researchers and practitioners in the use, application and understanding of terms related to gender, gender identity, expression, and sexuality. In defining these, we also clarify some of the terms and classifications within these key concepts. It is noteworthy that some of the nuance and indeed some of the terms themselves are not necessarily

applicable across all global contexts. Moreover, whilst the terms and concepts do not originate from a singular point of origin, the terms presented here stem largely from Western culture. Too often some gender and sexually diverse groups are defined under the umbrella term of LGBT or its variations, which can be an easy shorthand at times to discuss the larger issues facing this group (e.g., discrimination, stigma). Such umbrella terms, however, may hide the wildly different experiences of sub-groups and individuals within this broader category. For example, young people are increasingly describing their sexual identities using non-monosexual labels, e.g., 'bisexual' or 'queer'.¹² Moreover, this is a rapidly evolving space, and many academic resources and references are out of step with the terms used by community members and practitioners, and thus do not reflect the current language practices and lived experiences of gender and sexual minorities. In a deviation from current academic practices, we therefore draw largely on references and resources from service providers and community organisations in the area.

Furthermore, we acknowledge that understanding of gender and sexuality as constructs (and their associated terminology) is dynamic and continually evolving, and thus there is a need for continued review of these terms. Importantly, whilst some terms are widely accepted by community members, others are more divisive and thus we recommend researchers actively engage and consult with relevant communities in their work. Where possible, it is critically important that health care providers and social scientists use the term(s) that individuals use for themselves. Finally, noting that this glossary does not exhaustively encompass the full list of terms used by gender and sexual minorities, it aims to provide a point of reference for understanding key differences in the terminology, and thereby allow for more respectful, inclusive, and consistent language and application across the public health arena, and assist in data collection among sexual and gender minorities.

Glossary

1. Gender

Gender is a complex and multidimensional social construct, shaped by the values, norms and attitudes of a given society or era.^{2,4} Gender conveys the psychological, behavioral, social, and cultural aspects of identifying as male, female or other non-binary representations.^{13,14} Importantly, gender is a key social determinant of health.

2. Sex

Historically dichotomous and assigned at birth, sex is typically classified as male or female based on external genitalia. Other biological indicators of sex include chromosomal, hormonal, and internal anatomical characteristics. However, sex is not always dichotomous. Intersex is the term

used to define the 1.7% of the population whose sexual characteristics do not align with binary conceptualisations of sex.^{15,16}

3. Gender identity

Gender identity is a person's deeply felt, inherent sense of oneself as being female, male, neither, both or fluid.^{17,18} Gender identity is internally experienced and thus is not necessarily visible to others. It does not automatically correspond to the sex assigned to a person at birth, and it can develop and change over one's lifetime.¹⁹

4. Gender expression

Gender expression denotes the way a person outwardly communicates or publicly presents their gender. This includes behaviours (body language and voice), physical expressions (clothing, hair, makeup) and social expressions (name and pronoun choice).^{20,21} Examples of gender expression include feminine, masculine and androgynous. For some people gender expression remains constant, whereas for others it may change circumstantially, or over time. Importantly, one's gender expression may not necessarily align with their inherent gender identity.

5. Gender identity terms

5.1 Transgender

Trans or **transgender** is an umbrella term referring to people whose gender identity and/or expression is different from the sex assigned to them at birth.²¹ Being transgender does not imply any specific sexual orientation.²² Transgender includes (but is not limited to) people who may identify as trans woman (assigned male at birth) or trans man (assigned female at birth), and trans people may use a variety of terms to describe themselves including genderqueer, non-binary, trans masc and trans femme.^{18,20} Transsexual is another (more outdated) term that is used by some communities but may be offensive in other groups. Transgender is now the more common and widely accepted term among trans groups. In some cultures, other terms are used to describe transgender individuals. For example, brotherboys and sistergirls in Australian Indigenous culture,²³ kathoey in Southeast Asian societies,²⁰ hijra in South Asian cultures,²¹ and two-spirit people in North American Indigenous communities.²¹

5.2 Cisgender/cis

Describes people whose gender identity aligns with the sex they were assigned at birth.^{17,18} The term non-trans is also used.¹¹

5.3 Non-binary/genderqueer

Umbrella terms used to describe people whose gender identity falls outside the traditional binary narrative and gender norms of male and female.¹⁴ Note that enby or NB is an increasingly

common abbreviated way of saying non-binary.²⁴ Importantly, while some non-binary or gender queer people may identify as transgender, not all do.²¹ Inclusive of a diverse range of alternative gender identities,¹⁴ non-binary communities include those people who may redefine their gender as per the terms below,^{17,25} or decline to subscribe to gender altogether.

5.3.1 *Agender/neutrois/gender neutral/genderless*

People who identify as neither male nor female.

5.3.2 *Bigender*

People who identify as both male and female.

5.3.3 *Polygender*

People who experience multiple gender identities simultaneously, or over time.

5.3.4 *Pangender/omnigender*

People who experience and identify with all genders.

5.3.5 *Gender-fluid*

People who identify with moving and fluctuating between genders.

5.3.6 *Third gender*

People who identify with embodying a third gender.

5.3.7 *Gender-expansive*

People who do not identify with traditional gender identities but are otherwise not confined to one gender narrative or experience.

5.4 Gender non-conforming

Term used to describe individuals who do not conform to the conventional gender norms and stereotypes expected of them based on the sex they were assigned at birth.²⁶ Being gender nonconforming is not the same as being non-binary or transgender, although some people identify with one or more of these terms.²⁰ For example, a cisgender man might wear nail polish as a non-conforming expression of his gender.²⁶

6. Gender affirmation/transition

The process through which a person begins bringing their outer appearance and lived experience into alignment with their self-identified gender.²⁷ Importantly, gender affirmation can be inaccurately conflated with gender affirmation surgery or medical transition. However, these are only possible components of gender affirmation/transition. Consequently, social, medical and/or legal affirmation can be considered to be more nuanced terminology.^{18,27}

7. Gender Dysphoria

Gender Dysphoria is a medical term that describes the diagnosis of clinically significant distress caused by incongruity between a person's sex assigned at birth and the gender with which they

identify.²⁷ In the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), Gender Dysphoria is listed as a clinical mental disorder.²⁸ Importantly, not all transgender and gender diverse people experience dysphoria, nor do they all meet criteria for a diagnosis of Gender Dysphoria. It is noteworthy that in the International Classification of Diseases (ICD) code, gender distress is classified as Gender Incongruence in Conditions related to Sexual Health.²⁸

8. Gender euphoria

This term is used to describe the positive psychological state experienced when one's gender expression aligns with their gender identity. Described by communities as the comfort, confidence, certainty, satisfaction, and joy in response to affirmation (personal and/or by others) of one's body or one's gender.²⁹

9. Gender pronouns

Personal gender pronouns reflect a person's gender identity and denote the way in which an individual would like to be referred to.³⁰ People can have multiple sets of pronouns for themselves. In English, these might be she/her/hers, he/him/his, or gender neutral pronouns such as they/them/theirs or ze/zir/hir.³¹

10. Misgender

To misgender someone is to relate to a person or use language (either intentionally or unintentionally) in a way that does not align with their affirmed gender. A common example of misgendering is using an incorrect gender pronoun to refer to someone.³² Misgendering can negatively impact a person's confidence and wellbeing.³²

10.1 Dead name

Term used to describe the former name a person no longer uses (because it does not align with their current gender identity or lived experience). Using someone's dead name may cause the person distress.¹⁸

11. Sexual orientation

Sexual orientation is a multi-dimensional concept that describes an individual's sexual, emotional, and/or romantic attraction, including fantasy, sexual arousal, sexual behaviour, and identity.^{33,34} It is distinct from a person's gender identity or expression. Moreover, the terms that people use to describe their sexual orientation identity may not match other aspects of sexual orientation such as behaviours, fantasies, and romantic attractions. As an example of the distinction between behaviour and identity, men who have sex with men (MSM) may identify as straight (or gay or other sexual orientation identities). Importantly, sexual orientation can be fluid for some people. Additionally, whilst sexual attraction and/or identity may remain consistent for some people over their lives, for others it can change over time.^{33,34} Sexual orientation terminology^{18,22,35-37} includes (and it is noteworthy that people may identify as more than one of these terms):

11.1 Heterosexual/ “straight”

Attracted to people of the opposite gender.

11.2 Homosexual

Attracted to people of the same gender. It is noteworthy that whilst some sexually diverse individuals still use this term, others find it offensive because it was previously associated with a mental illness diagnosis.

11.3 Lesbian

Individuals who identify as women/femme/enby who are attracted to people who identify as women/femmes.

11.4 Gay

Historically, individuals who identify as men/masc/enby who are attracted to people who identify as men/masc. However, the term gay is also used in relation to any person who is attracted to those who identify as the same gender.

11.5 Bisexual/multisexual

Attracted to more than one gender, i.e., people of same gender and people of other genders.

11.6 Pansexual

May be attracted to any person regardless of sex or gender.

11.7 Abrosexual

Someone whose sexuality is changing or fluid.

11.8 Questioning

Someone who is unsure who or which gender (if any) they are attracted to. Context is twofold; i) an important “gateway label” to the queer community for those who may not be ready to own a particular identity or label, ii) someone who investigates their sexual orientation in the context of flexibility.

11.9 Asexual/ace

Someone who experiences little-to-no sexual attraction. However, asexual people may feel other types of attraction (e.g., romantic attraction), and being asexual is not synonymous with a lack of libido.

11.10 Aromatic/aro

Someone who does not experience romantic attraction. Aromatic people may not identify as asexual.

11.11 Demisexual

Someone who feels sexual attraction only to someone with whom they have an emotional connection. In contrast to asexual people, demisexual people may feel sexual attraction, but only after they have formed an emotional bond.

11.12 Allosexual

People who experience sexual attraction and do not identify with asexuality. The term allosexual was developed to decentre the idea that sexual attraction is normative or 'natural' and that conversely, asexuality is abnormal.

12. Heterosexism/heteronormativity

Heterosexism is the term used to describe the construction of heterosexuality as socially and culturally normative, as well as the discrimination that non-heterosexual people may experience due to the normative positioning of heterosexuality.³⁸ Heteronormativity is the social setting or cultural bias that normalizes heterosexuality in favour of opposite-sex/gender relationships, to that of other relationships.³⁸

13. Allonormativity/compulsory sexuality

Allonormativity is the cultural bias that all people experience sexual and romantic attraction.³⁶ A related concept, compulsory sexuality, reinforces the idea that allosexuality is a characteristic of all sexual identities and that all people should seek sexual relationships.³⁶

14. LGBTQIA+

This acronym denotes lesbian, gay, bisexual, transgender and gender diverse, queer (and questioning), intersex, asexual and other (LGBTQIA+).¹⁸ Other common variations of this acronym include LGBTI and LGBTIQ.¹⁸

15. Queer

A broad umbrella term used to describe people whose sexual orientation and/or gender identity and/or gender expression falls outside the dominant societal norms (e.g. heterosexual and cisgender).³³ Historically a derogatory term, queer is now more positively embraced to encapsulate the full range of LGBTQIA+ gender identities and alternative sexual orientations, and is increasingly used as a self-identifying term.^{18,33}

16. Sexual and Gender Minority

Sexual and Gender Minority (SGM) is a term proposed as an alternative to existing acronyms (e.g., LGBTQIA+) as a more inclusive umbrella term encompassing all populations and individuals whose sexual identity, orientation or practices, gender identity/expression, and/or reproductive development varies from traditional, societal, cultural, or physiological norms.^{39,40} Alternatively, Gender and Sexually Diverse is a similarly broad and inclusive term used in some regions.

Acknowledgements

We acknowledge the individual and collective expertise of those with a living or lived experience of gender and sexual diversity. We thank and acknowledge Beth Thomas-Richards, Stephanie Kuczer & Mikayla Budinski for their time and expertise in reviewing the terms and respective definitions in this glossary.

References

1. Cislighi B, Heise L. Gender norms and social norms: differences, similarities and why they matter in prevention science. *Social Health Illn* 2020; **42**(2): 407-22.
2. Phillips SP. Defining and measuring gender: a social determinant of health whose time has come. *International journal for equity in health* 2005; **4**(1): 1-4.
3. Horner J, Roberts NJ. Time to recognise sexual orientation as a social determinant of health. *The Medical Journal of Australia* 2014; **200**(3): 137.
4. Heise L, Greene ME, Opper N, et al. Gender inequality and restrictive gender norms: framing the challenges to health. *The Lancet* 2019; **393**(10189): 2440-54.
5. Logie C. The case for the World Health Organization's Commission on the Social Determinants of Health to address sexual orientation. *American journal of public health* 2012; **102**(7): 1243-6.
6. Meyer IH, Frost DM. Minority stress and the health of sexual minorities. In: Patterson C, D'Augelli A, eds. *Handbook of psychology and sexual orientation*: Oxford University Press; 2013: 252-66.
7. Testa RJ, Habarth J, Peta J, Balsam K, Bockting W. Development of the gender minority stress and resilience measure. *Psychology of Sexual Orientation and Gender Diversity* 2015; **2**(1): 65.
8. Tan KKH, Treharne GJ, Ellis SJ, Schmidt JM, Veale JF. Gender Minority Stress: A Critical Review. *J Homosex* 2020; **67**(10): 1471-89.
9. Victorian Government Departments Agencies and Service Providers. Data collection standards - Lesbian, gay, bisexual, transgender and intersex communities. *Victorian Family Violence Data Collection Framework*, 2021. <https://www.vic.gov.au/victorian-family-violence-data-collection-framework/data-collection-standards-lesbian-gay-bisexual#why-do-we-need-to-collect-information-about-lgbti-people> (accessed 19th July 2022).
10. Canberra LGBTIQ Community Consortium. A guide to LGBTIQ-inclusive data collection. 2017. <https://genderrights.org.au/wp-content/uploads/2020/03/LGBTIQ-Inclusive-Data-Collection-a-Guide.pdf> (accessed 19th July 2022).
11. Stonewall. DO ASK, DO TELL - Capturing data on sexual orientation and gender identity globally. 2016. https://www.stonewall.org.uk/sites/default/files/do_ask_do_tell_guide_2016.pdf (accessed 19th July 2022).
12. Bochicchio L, Carmichael AJ, Veldhuis C, Stefancic A. What We Lose When We "Don't Say Gay": Generational Shifts in Sexual Identity and Gender. *Soc Work* 2023.
13. American Psychological Association. *APA Dictionary of Psychology* (2nd ed.). 2nd ed. Washington, DC; 2015.
14. LGBT Foundation. Non-Binary Inclusion. 2022. <https://lgbt.foundation/who-we-help/trans-people/non-binary> (accessed 1st February 2022).
15. Intersex Human Rights Australia. What is intersex? 2021. <https://ihra.org.au/18106/what-is-intersex/> (accessed 19th July 2022).
16. Fausto-Sterling A. *Sexing the body: Gender politics and the construction of sexuality*: Basic books; 2000.
17. American Psychological Association. Guidelines for Psychological Practice with Transgender and Gender Nonconforming People *American Psychologist* 2015; **70**(9): 832-64.
18. Australian institute of Family Studies. LGBTIQ+ communities - Glossary of Common Terms. 2019. https://aifs.gov.au/sites/default/files/publication-documents/22-02_rs_lgbtiqa_glossary_of_common_terms_0.pdf (accessed 1st February 2022).
19. Wood W, Eagly AH. Two Traditions of Research on Gender Identity. *Sex Roles* 2015; **73**(11-12): 461-73.
20. Ontario Human Rights Commission. Policy on preventing discrimination because of gender identity and gender expression 2014. <https://www.ohrc.on.ca/en/policy-preventing-discrimination-because-gender-identity-and-gender-expression> (accessed 7th February 2022).
21. Human Rights Campaign Foundation. Transgender and Non-Binary People FAQ 2022. <https://www.hrc.org/resources/transgender-and-non-binary-faq> (accessed 7th February 2022).
22. Human Rights Campaign Foundation. Glossary of Terms, 2022. <https://www.hrc.org/resources/glossary-of-terms> (accessed 7th February 2022).
23. VincentCare. Gender & Sexuality Inclusive Practice Guide. 2019. <https://www.vincentcare.org.au/wp-content/uploads/2019/05/Gender-and-Sexuality-Inclusive-Practice-Guide-2019.pdf> (accessed 19th July 2022).
24. Tzesis J. What It Is to Be Nonbinary or Enby. 2021. <https://www.psycom.net/nonbinary> (accessed 13th October 2022).

25. Human Rights Campaign Foundation & Gender Spectrum. Supporting and Caring for our Gender Expansive Youth. Washington, DC: The Human Rights Campaign, 2012.
26. Ferguson S. What Does It Mean to Be Gender Nonconforming? *Sexual Health*, 2021. <https://www.healthline.com/health/gender-nonconforming> (accessed 8th February 2022).
27. Telfer MM, Tollit MA, Pace CC, Pang KC. Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents. Melbourne: The Royal Children's Hospital, 2020.
28. Reed GM, Drescher J, Krueger RB, et al. Disorders related to sexuality and gender identity in the ICD-11: revising the ICD-10 classification based on current scientific evidence, best clinical practices, and human rights considerations. *World Psychiatry* 2016; **15**(3): 205-21.
29. Austin A, Papciak R, Lovins L. Gender euphoria: a grounded theory exploration of experiencing gender affirmation. *Psychology & Sexuality* 2022: 1-21.
30. Conrod K. Pronouns and gender in language. *The Oxford Handbook of Language and Sexuality* 2020.
31. Lesbian G, Bisexual, Transgender, Queer Plus (LGBTQ+) Resource Center,. Gender Pronouns. 2022. <https://uwm.edu/lgbtrc/support/gender-pronouns/> (accessed 31st May 2022).
32. McLemore KA. Experiences with Misgendering: Identity Misclassification of Transgender Spectrum Individuals. *Self and Identity* 2015; **14**(1): 51-74.
33. American Psychological Association & National Association of School Psychologists. Resolution on gender and sexual orientation diversity in children and adolescents in schools. 2015.
34. Moleiro C, Pinto N. Sexual orientation and gender identity: review of concepts, controversies and their relation to psychopathology classification systems. *Frontiers in psychology* 2015; **6**: 1511.
35. Smart Sex Resource. Sexual orientation. 2022. <https://smartsexresource.com/topics/sexual-orientation> (accessed 8th February 2022).
36. Mollet AL, Lackman B. Allonormativity and Compulsory Sexuality. *Encyclopedia of Queer Studies in Education*: Brill; 2021: 26-30.
37. The Trevor Project. Multisexual Youth Mental Health: Risk and Protective Factors for Bisexual, Pansexual, and Queer Youth Who are Attracted to More than One Gender. 2021. <https://www.thetrevorproject.org/research-briefs/multisexual-youth-mental-health-risk-and-protective-factors-for-bisexual-pansexual-and-queer-youth-who-are-attracted-to-more-than-one-gender/#:~:text=Multisexuality%20refers%20to%20sexual%20identities,pansexual%2C%20omnisexual%2C%20and%20queer>. (accessed 13th October 2022).
38. Rainbow Resource Centre. Heterosexism. 2012. <https://rainbowresourcecentre.org/files/12-11-Heterosexism.pdf> (accessed 18th October 2022).
39. National Institutes Of Health Sexual And Gender Minority Research Coordinating Committee. NIH FY 2016-2020 Strategic Plan to Advance Research on the Health and Well-being of Sexual and Gender Minorities. Bethesda, MD: National Institutes of Health, 2015.
40. Ayhan CHB, Bilgin H, Uluman OT, Sukut O, Yilmaz S, Buzlu S. A Systematic Review of the Discrimination Against Sexual and Gender Minority in Health Care Settings. *Int J Health Serv* 2020; **50**(1): 44-61.