



TERMINOLOGY

Introduction

Terminology in the 'transgender' field is varied and constantly shifting as understanding and perceptions of gender variant conditions and gender nonconforming expressions change. The terms described below may vary in their usage and may become outdated. The concept of a typical gender expression associated with a binary man/woman divide is, in itself, unsatisfactory, since **"the expression of gender characteristics that are not stereotypically associated with one's assigned sex at birth is a common and culturally diverse human phenomenon that should not be judged as inherently pathological or negative"**.¹

Gender Identity

Gender Identity describes the psychological identification of oneself, typically, as a boy/man or as a girl/woman, known as the 'binary' model. There is a presumption that this sense of identity will be consistent with the, respectively, male or female sex appearance. Where sex appearance and gender identity are congruent, the terms **cisgender** or **cis** apply.

However, some people experience a gender identity that is somewhat, or completely, inconsistent with their sex appearance; or they may regard themselves as gender neutral, or **non-gender**, or as embracing aspects of both man and woman and, possibly, falling on a spectrum between the two. People have the right to self-identify, and many people reject the whole idea of binary tick-boxes, and describe themselves in **non-binary**, more wide-ranging, open terms such as **pan-gender, poly-gender, third gender, gender queer, neutrois** and so on. Pronouns he/she, his/hers, may be replaced with more neutral pronouns such as: they, per, zie or fey; and the title Mx may be preferred to Mr, Mrs, Miss or Ms.

Sex

Sex refers to the male/female physical development – the phenotype. In an infant, the sex is judged entirely on the genital appearance at birth, but internal reproductive organs, skeletal characteristics and musculature, and the brain, are all sex differentiated. Other factors such as karyotype (chromosomal configuration) are seldom tested unless a genital anomaly is present. There is a presumption that an apparently male infant will identify as a boy, and vice versa.

Gender role

The *gender role* is the social role – the interaction with others which both gives expression to the inner gender identity and reinforces it. Despite the greater gender equality in modern Western culture in terms of the subjects studied in school and at university; the choice of friends; work and domestic arrangements; dress and leisure pursuits, there is still a presumption of conformity with society's 'rules' about what is appropriate for a man or a woman, a boy or a girl, especially in terms of appearance. A significant departure from stereotypical gender expression often causes anxiety and discomfort in those who witness it. Their own discomfort may be reflected back on gender nonconforming individuals, causing a continuous source of stress in social situations.

¹ World Professional Association of Transgender Health (2011) Good Practice Guidelines for the assessment and treatment of gender dysphoria in adults <http://www.rcpsych.ac.uk>

Gender variance/ gender nonconformity

It is now understood that gender identity, although powerfully influenced by the sex of the genitalia and the gender of rearing, is not determined by these factors. There is evidence that sex differentiation of the brain is inconsistent with other sex characteristics, resulting in individuals having a predisposition to develop a gender identity that is not typically associated with the assigned sex. They may dress and/or behave in ways that are perceived by others as being outside typical cultural gender expressions; these gender expressions may be described as *gender variance* or *gender nonconformity*.

Gender dysphoria

Where conforming to society's cultural expectations causes a persistent personal discomfort, this may be described as *gender dysphoria*. When individuals seek to overcome this discomfort by living in the role that is congruent with their gender identity, ongoing stress may be experienced, as mentioned above, because of the adverse reactions of others towards people whose gender expression does not reflect their sex as assigned at birth. Dysphoria, in many trans people, includes some level of disgust with the sex characteristics, since these contradict the inner sense of gender identity.

Transsexual

The terms '*transsexual*' and '*transsexualism*' are now considered old fashioned, and are only likely to be seen in legal and medical documents. Even there, these terms are gradually being replaced with more acceptable terminology, such as 'transgender' and 'trans' (see below). In law, a transsexual person is someone who 'proposes to undergo, is undergoing or has undergone gender reassignment' (Equality Act 2010). For some, this will involve medical intervention to adjust the appearance so that it aligns with the gender identity, and is often associated with changes to the gender role and expression, as well as names and pronouns. These changes may alleviate much or all of the discomfort. The term transsexual is specific, and does not include non-binary identities. The word 'transsexual' should be used as an adjective, not a noun. It is, therefore, never appropriate to refer to an individual as 'a transsexual', or to transsexual people, as 'transsexuals'. The abbreviation 'tranny' is also unacceptable.

Transgender

'*Transgender*' has had different meanings over time, and in different societies. Currently, it is used as an inclusive term describing all those whose gender expression falls outside the typical gender norms. It is often the preferred term for those who change their role permanently, as well as others who, for example, cross-dress intermittently for a variety of reasons including erotic factors (also referred to as transvestism). Those who live continuously outside gender norms, sometimes with, and sometimes without, medical intervention are covered by this term. There is a growing acknowledgement that although there is a great deal of difference between say, drag artists and people who change their role permanently, there are nonetheless areas in the transgender field where the distinctions are more blurred; for example, someone who cross-dresses intermittently for some years, may later change fully to the opposite gender role. Non-binary gender identities also fall under this umbrella term.

Trans men and trans women

The expression '*trans*' is often used synonymously with 'transgender' in its broadest sense. Recently the asterisk has become an additional symbol of inclusion of any kind of trans and non-binary gender presentation – hence trans* person.

'Trans men' are those born with female appearance but identifying as men; and those born with male appearance but identifying as women may be referred to as 'trans women'. The terms may also be used to imply a direction of travel, towards a more masculine or feminine gender expression, rather than a complete transformation of a person's gender status. Many trans people, having transitioned permanently, prefer to be regarded as ordinary men and women, and therefore, cisgender. In these cases, where it becomes essential to refer to their pre-transition status, the phrase 'woman (or man) of trans history' may be used.

Transition

Transition is the term used to describe the permanent full-time adaptation of the gender role in all spheres of life: in the family, at work, in leisure pursuits and in society generally. A few people make this change overnight, but many do so gradually over a period of time, changing their presentation intermittently, and sometimes whilst undergoing early medical interventions such as hormone therapy. Transition does **not indicate a change of gender identity**. The person still has the same identity post transition; the changes are to their gender role, gender expression and sometimes their sex characteristics, to bring these in line with their identity. A period of 12 months living full-time in the gender role that is congruent with the gender identity is currently required before genital surgery is undertaken. Transition in non-binary individuals is more likely to be a shift in gender presentation, rather than a complete change of role; it may or may not include medical intervention.

Affirmed Gender

The process of bringing the gender role and appearance into alignment with the gender identity, 'affirms' that identity. Thus the term 'affirmed' gender, is now becoming more common in describing the post-transition gender status. 'Affirmed' should be used in preference to 'acquired'; the latter is the language of the Gender Recognition Act, and is more appropriately used to describe the acquisition of a Gender Recognition Certificate and new Birth Certificate (see below).

Gender confirmation treatment

Those undergoing transition permanently usually have gender confirmation treatment that includes hormone therapy and often surgery to bring the secondary sex characteristics: breasts and genitalia, more in line with the gender identity. Such surgery is sometimes referred to as gender (or sex) reassignment surgery. The term 'sex change' is not considered appropriate or polite. Surgeries such as facial feminising and body contouring may be chosen, but these are usually not provided on the NHS.

Intersex conditions

There are a number of intersex conditions (renamed Disorders of Sex Development – a clinical description which many in the UK refuse to adopt). In some intersex conditions, the appearance at birth is atypical being neither clearly male nor female. The sex (male or female) assigned, and the anticipated gender role (boy or girl) assumed at that time, may not be consistent with the core gender identity and may, therefore, result in a need to change the gender role at a later stage. In addition, some of these individuals may have had surgery neo-natally to create (usually) a female appearance. This surgery may have a disastrous outcome, since the individual may, in fact, identify as a boy. This occurs in many individuals treated in this way. Surgical intervention before the individual is able to give informed consent is now regarded, by many, as unethical.

Inconsistencies in development may be associated with atypical sex chromosomes such as Klinefelter syndrome (XXY), Jacob's syndrome (XYY), or atypical combinations of 'X'

and 'Y', such as XXYYY, XYYY and so on, including mosaicism (more than one chromosomal configuration in the same individual). Genetic anomalies that are particularly associated with unusual genital appearance are: Androgen Insensitivity Syndrome, Congenital Adrenal Hyperplasia, 5 α reductase or 17 β Hydroxysteroid Dehydrogenase (HSD) deficiencies. Most of these conditions, are associated with unusual pre-natal hormone levels. Other conditions such as Cloacal Extrophy may be included in this group since babies with this condition may have poor genital development, which has led to male (XY) babies being surgically assigned as girls.

Sexual orientation

Sexual orientation is a separate issue from gender identity. Sexual orientation is associated with the sexual attraction between one person and another. This is quite different from the internal knowledge of one's own identity. Trans people may be gay, straight, bisexual or, occasionally, asexual. Their sexual relationships may remain the same through the transition process or, sometimes, they shift. So a person who is living as a man, and is in a heterosexual relationship with a woman may, having transitioned to live as a woman, continue to be attracted to women and seek a relationship with a woman – or – may be attracted to men, and therefore seek a relationship with a man. Sometimes trans people make lasting relationships with other trans people, so the possibilities are many and varied, and do not necessarily fit comfortably into typical categorisations of sexual behaviours. Those who remain in a long-term relationship, despite one partner having transitioned cannot be categorised by any existing terminology, since the sexual orientation of the non-trans partner does not change; the orientation of the trans partner may or may not shift, as described above. Sometimes, for clarity, the terms: androphilic (attracted to men); and gynaephilic (attracted to women) may be used.

Gender Recognition Certificate

In 2004 the Gender Recognition Act was passed, and it became effective in 2005. Those people who have undergone a permanent change of gender status may endorse their new gender status by obtaining legal recognition in the form of a Gender Recognition Certificate (GRC). Applicants must provide paper evidence to the Gender Recognition Panel indicating that they have already changed their name, title and gender role, on a continuous basis, for at least two years; there is an expectation that they intend to live in the altered gender role for the rest of their lives. A medical opinion indicating that the applicant has experienced gender dysphoria is necessary. However, no medical treatment is required. Successful applicants acquire the new gender status 'for all purposes', entitling them to a new birth certificate registered under the changed name and title, provided that the birth was registered in the UK.

The GRC has strict privacy provisions which must not be breached by any person acquiring such information, in an 'official capacity'. Disclosure to a third party could be a criminal offence (GRA s22(4)) (some limited exceptions apply)

The Marriage (Same-Sex Couples) Act, 2013,

Until the introduction of the Marriage (same-sex couples) Act, the only marriage available was between a 'man' and a 'woman'. Many trans people were, and are still, in such long-term marriages.

Prior to the introduction of this new Act, a married trans person, wishing to obtain a GRC, would either have to divorce, or to annul the marriage using an Interim GRC. A civil partnership could then be formed if the couple wished to stay together. However, under the Marriage (same-sex couples) Act, a marriage that pre-dated the new Act, in which one

person wishes to obtain a GRC, can now be converted to a same-sex marriage, with the consent of the spouse; a civil partnership remains an option in these circumstances.

Since the introduction of the 2013 Act, there are same-sex couples opting for this form of marriage, rather than a civil partnership. If one partner in the 'same-sex marriage' wishes to obtain a GRC, the same-sex marriage will have to be converted to 'marriage' with the consent of the spouse.

Pre-existing civil partnerships, where one partner transitions and is seeking to obtain a GRC, the couple must convert to marriage, with the consent of the non-trans partner.