

Non-Binary Gender Identities

Fact Sheet

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What is non-binary gender identity?

Non-binary gender identity is any gender identity that does not fall within the strict categories of contemporary Western societies, which typically consider gender to be binary, e.g., either man or woman. Over the past several decades, the LGBT (lesbian, gay, bisexual, and transgender), feminist, and other social movements have challenged these categories. More recently, there has been increasing recognition and visibility of people who do not identify exclusively as either male or female. This fact sheet provides basic information for psychologists, psychology students, and others who are interested in understanding non-binary gender identities.

How many people are non-binary?

Because there is limited research on individuals with non-binary gender identities, it is difficult to estimate the exact number of people who identify as non-binary. Most research has not included non-binary as a response category when inquiring about gender. From the limited research that has done this, it is estimated that non-binary individuals make up approximately 25-35% of transgender populations (James, Herman, Rankin *et al*, 2016; Barr, Budge, Andelson, 2016; Mikalson, Pardo, and Green, 2014). However, these studies sampled only from transgender populations and did not capture those non-binary individuals who do not identify as transgender.

Pronouns

Pronoun use is an important issue for non-binary people. Some non-binary people choose to use pronouns other than she/her/hers and he/him/his. Some examples of gender-neutral pronouns are they/them/theirs and ze/hir/hirs. It is important to recognize that a person's gender pronouns cannot be assumed from their appearance. One way of being affirming and supportive of non-binary identities is to avoid these assumptions and always ask or provide an option to disclose preferred gender pronouns. It is suggested to make this a universal practice rather than just doing so with people who are LGBT or have an ambiguous gender presentation.

Experiences of non-binary people

Much of what is known about the lived experience of non-binary people comes from personal accounts, including blog posts, personal essays, and postings on social media. From these sources, as well as limited psychological research, it appears stigma experienced by non-binary individuals may differ from that facing other LGBT people. For example, prejudicial attitudes toward non-binary people may be greater than attitudes toward other LGBT people, given the lack of knowledge and information that most people have about this population. The lack of cultural

visibility of non-binary identities may make the identity development process more difficult for non-binary individuals. Further, even after coming to terms with their own identity, they may face additional stress from having to frequently "come out" as non-binary, even in LGBT contexts, and from being mis-gendered or misunderstood.

Non-binary mental health

Even given the limited research on this population, it appears that non-binary transgender people experience greater risk for negative mental health outcomes than their binary transgender peers (James, Herman, Rankin *et al*, 2016). For example, in one study,

KEY TERMS

Non-binary gender identity: gender identity that does not fall exclusively in the categories man/male or woman/female

Gender Binary System: system by which society categorizes gender as falling into one of two categories (man / woman, male / female, masculine / feminine)

Gender Non-Conformity: describes those who do not conform with the prescribed social expectations associated with the gender that matches a person's sex assigned at birth. This term is also used to reference cisgender individuals who fit this description (e.g. butch women).

Cisgender: a person whose gender identity matches the social expectations of the sex they were assigned at birth (e.g. if a person who was assigned female at birth identifies as a girl/woman).

Cisgenderism: assumption that everyone identifies within the gender binary system.

Cissexism / cisgenderism / cisnormativity / cissexual assumption: behaviors, actions, attitudes, and microaggressions that enforce the gender binary or assume the gender binary applies to all people.

AFAB/AMAB*--Assigned female/male at birth. Also DMAB/DFAB (designated male/female at birth) or FAAB/MAAB (female-/male- assigned at birth)

* terms like "born female" or "natal male" are less accurate and may be considered microaggressions

over half of the respondents reported clinical levels of depression and over one third of the respondents reported clinical levels of anxiety (Budge, Rossman, & Howard, 2014). Overall, non-binary people may face greater levels of minority stress and unique forms of minority stress, in comparison to binary transgender peers, a factor which has been associated with higher levels of suicidality (Tebbe & Moradi, 2016).

RECOMMENDATIONS FOR CLINICAL PRACTICE

Avoid gender binary assumptions. Culturally competent clinicians avoid assumptions about a client's cultural identities, instead adopting an attitude of inquisitiveness and empathic attuning to the client. Clinicians can avoid assumptions about binary gender identities and inquire about a client's beliefs and experiences about gender in an open and understanding way.

Understand there is no right way to transition. Clinicians can recognize that clients whose gender identity does not align with their sex assigned at birth may have a range of ways in which they want to "transition" medically and socially. Remaining open to these possibilities and recognizing that a client's wishes and plans may change over time will allow the client to fully explore their options.

Practice using "they" / "them" as a singular pronoun. Using non-binary pronouns can feel awkward at first. Practicing using these pronouns outside of the therapy room will allow clinicians to get more comfortable and fluent in doing so and will make speaking with clients easier.

Identify yourself as an ally. Stickers, signs, or brochures (e.g., www.redbubble.com/shop/nonbinary+stickers) that identify the clinician or agency as a non-binary ally can go a long way in building trust with clients. This can also be accomplished by having a statement about your status as an ally on your web page or introductory forms.

Educate yourself. Continue to seek information about non-binary populations in professional literature as well as personal accounts, blogs, etc. This will help ease the burden on non-binary clients of having to educate their provider.

Create inclusive forms. Intake / client forms can be more inclusive by adding options beyond "male," "female," and "transgender", such as "non-binary" or adding more gender identity options (e.g. genderqueer, agender) and adding a write-in option. This will signal to clients that the clinician is aware of and supportive of non-binary identities and can serve as a springboard for discussion of gender identity

(American Psychological Association, 2015)

RECOMMENDATIONS FOR RESEARCH

Given the underrepresentation of non-binary gender populations in the literature, it is critical that psychologists add to the empirical base of information. Research questions about gender and gender identity should include options beyond "male," "female," and "transgender." Asking specifically about more common non-binary identities such as genderqueer and gender fluid, as well as an "other gender identity" fill in the blank option, allows for accurate information about client's current gender identity.

Research with populations who identify with other kinds of non-binary identities (e.g., multiracial or pansexual people) indicates that there are identity processes that might look different from individuals who hold binary identities. It will be important to determine the specific nuances of experiences that might differ for someone based on their non-binary identity or their gender minority identity. Additionally, research with non-binary populations often misses intersections with multiple identities; thus, attention should be given to the whole non-binary person.

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