

Non-Binary Gender Identities

Fact Sheet

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What is non-binary gender identity?

How many people are non-binary?

Pronouns

Experiences of non-binary people

Non-binary mental health

also

(continued on reverse!)

et al transgender

KEY TERMS

Non-binary gender identity: gender identities that do not fall exclusively in man/male or woman/female categories. Some examples include genderqueer, gender fluid, agender, and bigender. Within non-Western cultures, individuals from groups such as Two Spirit people, Fa'afafine, or Hijra are sometimes considered to comprise a 'third' gender, but may or may not identify as non-binary or transgender.

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

Binarism: assumption that gender experience is binary and devaluation of non-binary experiences of gender.

Cissexism/cisgenderism/cisnormativity: assumption that everyone identifies within the gender assigned at birth, and devaluation of non-cisgender experiences or perspectives in favor of cisgender ones, via behaviors, actions, attitudes, and microaggressions.

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 & may be considered microaggressions.

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RECOMMENDATIONS FOR CLINICAL PRACTICE

Avoid gender binary assumptions. Culturally aware 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" and that