Scholars Week

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The Language of Non-normative Sexuality and Genders

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Language about non-normative sexuality and genders

**Asexuality**
Sexual orientation characterized by a lack (or partial lack) of sexual attraction to others (Coined by David Jay in 2001)

**Intersex**
A person born as neither, both, or an indeterminate mix of male and female

**Transgender**
A person who does not identify with the sex/gender assigned to them at birth

**Main Points**
- Non-normative genders and sexualities are pathologized and erased because they challenge cultural norms
- Language used in the medical community influences and reflects societal perceptions of non-normative identities
- Lack of cultural representation renders non-normative identities invisible

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What does it mean to be “non-normative”?
- Not adhering to standard cultural expectations (“norms”)
- **Heteronormativity**: people are naturally one of two genders (male or female) and heterosexual (attracted to the opposite gender)
- **Compulsory heterosexuality** and binary gender roles sustain and enforce heteronormativity

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- **Approx. 1% of the population is asexual**
- **Pathologization**
  - Conflation of sexual attraction and sex drive
  - Assumed to result from hormonal imbalance or past trauma
  - Associated with physical and mental disability
    - Personality disorders (i.e. schizophrenia, anxiety), Neurodevelopmental disorders (i.e. autism spectrum)
  - Asexuality in the DSM
    - IV. lack of sexual attraction symptom for HSDD (Hypoactive Sexual Desire Disorder)
    - V. lack of attraction + distress symptoms for HSDD and FSIAD (Female Sexual Interest/Arousal Disorder)
  - “Self-identification as asexual” precludes diagnosis unless distress indicated
- **Dehumanization**
  - 2013 study: asexuals viewed as “less human” and “more deficient” than other sexual minorities (incl. homosexual, bisexual, and sapiosexual)
  - Sexual desire perceived as key component of humanness
- **Infantilization**
  - Sex viewed as central to adulthood → disinterest in sex denotes immaturity
  - “Late bloomer” mentality
    - Avg. age of first sexual attraction = 10 years old
    - Avg. age of asexual self-ID = 12 years old
  - AVEN 2014 census: range of ages 13-77 self-ID as asexual
- **Conflation of gender and sexuality → Degendering of asexuality**
  - Loss of virginity = “becoming a man/woman”
  - Being a man means sex with women, and vice versa
  - AVEN 2014 census: 26% of asexuals self-identify as something other than male or female

- **Estimated that 1 in 100 babies are intersex in comparison- redheads are about 1-2% of the population**
  - May be physical, chromosomal or hormonal
  - Also may not be present at birth- 1 in 66 babies have late onset adrenal hyperplasia (clitoral growth in childhood or adolescence)
- **Most are declared intersex based on appearance of genitals- anything more than 3/6 in for a girl and less than 1in for a boy is considered abnormal**
  - If genitalia is ambiguous, classification depends on tests and doctors
    - Urologists tend towards boys and endocrinologists tend towards girls
- **Surgeries are usually done shortly after birth**
  - Removes the choice from the patients themselves
  - Avg. of 3-5 surgeries required, sometimes as many as 22 over a lifetime
  - Surgeries are mostly cosmetic in nature- can’t change someone’s biology w/o lifelong treatment
- **NO surgery option is rarely talked about**
  - 1 in 10 parents looked for information outside medical setting
- **Due to the nature of intersex, patients often have medical issues throughout their life and are often kept in the dark about their being intersex until well into adulthood**
- **The secrecy and childhood surgeries are even further damaging when intersex individual doesn’t identify with gender they were assigned**

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- **Transgender vs. Transsexual**
  - Transgender is anyone that doesn’t identify with their ASAB
    - ASAB= Assigned Sex/Gender At Birth
      - In western society we have mapped genders onto sex, so the assigned sex at birth decides the gender assigned at birth
    - **Transsexual** is an older term, specifically someone who has undergone sex-reassignment surgery
      - There is no single, homogenous ‘transgender community’
  - **Forced to pathologize themselves to receive treatment**
    - Specific narratives about their bodies, identities to ‘prove’ to gatekeeping therapists and doctors that they need treatment
      - Could be as complicated as surgery and hormone treatment or as simple as legally changing their names and genders
    - **Gender Dysphoria**, previously Gender Identity Disorder, required to receive treatment
      - Many find that due to intolerance, even with medical diagnoses, they are unable to change their legal names or genders
      - An example of the kind of intolerance trans peoples face is the current situation in North Carolina
  - **‘Real’/‘Biological’ vs. Trans**
    - When distinguishing between trans and non-trans peoples, using ‘real’ or ‘biological’ implies that trans men and women are not truly, biologically men or women.
    - How the term ‘cis’ or ‘cissexual’ was coined
      - ‘Cis’ refers to people that identify with their ASAB