

Sexual Orientation and Gender Identity Definitions and Myths

Part 1: Definitions

Time: 15 minutes

Activity Objective:

Define key terms and concepts related to sexual orientation and gender identity.

Materials: Handout: Sexual Orientation and Gender Identity Terms and Concepts

Activity:

1. Read through the following definitions aloud. Ask participants if they have any questions about the terms and definitions.
2. If you would like to spend more time on these definitions—especially any terms related to local terms and definitions—you may wish to adapt an exercise from Naz Foundation, 2001 or Pact and ICRW, 2010 (citations for these resources can be found on page three).

Sexuality is a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy, and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles, and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, and religious and spiritual factors. (World Health Organization Working Definition, 2006.)

Gender Identity refers to a person's internal, deeply felt sense of being a man or woman, or something other or in between, which may or may not correspond with the sex assigned at birth. Because gender identity is internal and personally defined, it is not visible to others. (Adapted from Currah, Paisley and Shannon Minter. 2000. *Transgender Equality: A Handbook for Activists and Policymakers*. San Francisco: National Center for Lesbian Rights and The Policy Institute of the National Gay and Lesbian Task Force.)

Gender Expression refers to all of the external characteristics and behaviors that are socially defined as either masculine or feminine, such as dress, mannerisms, speech patterns, and social interactions. A person's gender expression may or may not match his/her gender identity or his/her biological sex. (Adapted from Currah and Minter, 2000.)

Sexual Orientation is the organization of a person's eroticism and emotional attachment with reference to the sex and gender of their desired partner, whether a

person's primary attraction is to the opposite sex (heterosexuality), the same-sex (homosexuality), or both sexes (bisexuality).

Gay is a term used in many parts of the English-speaking world to refer to the people, practices, and cultures of homosexuality. It was adopted as an identity in the West by people who are attracted to members of the same sex. Gay can refer to women or men, but is sometimes used to specify men who identify as gay, as opposed to women who identify as gay (lesbians). The abbreviation LGBT/GLBT is often used to refer to communities of lesbian, gay, bisexual, and transgendered people. (Adapted from UNDP and UNAIDS., 2010. *Universal Access: From Vulnerability to Resilience: Strategic Framework for Strengthening National Responses to HIV for Gay Men, Other MSM, and Trans People in Latin America and the Caribbean*. UNDP and UNAIDS.)

Men who have sex with men (MSM) is an epidemiological category that refers to behavior rather than identity. It is thus inclusive of all adult males who engage in consensual male-to-male sex, including those self-identifying as gay, bisexual, or heterosexual in their sexual orientation; and including people who are biologically male regardless of gender identity. (UNDP and UNAIDS, 2010.)¹

Transgender refers collectively to people who challenge strict gender norms by behaving as effeminate men or masculine women, adapting "third gender" roles, or embarking on hormonal and surgical treatment to adjust their bodies to the form of the desired sex. Transgender persons often find that the sex assigned to them at birth does not correspond with the innate sense of gender identity that they experience in life. Transgender may include transsexuals (people whose physical sex and gender identity as a man or a woman conflict); transvestites (people who cross-dress for sexual gratification but do not wish to be a person of the other sex); and intersex persons (people whose sexual anatomy is neither exclusively male nor exclusively female). (Adapted from UNDP and UNAIDS, 2010.)

Homophobia is the fear of, aversion to, or discrimination against homosexuals or homosexual behavior or cultures. Homophobia also refers to self-loathing by homosexuals, as well as the fear of people who live outside of society's standards of what it is to be a "true man" or "true woman."

Heterosexism is the presumption that everyone is heterosexual and/or the belief that heterosexual people are naturally superior to homosexual and bisexual people.

¹ The acronym should be used with an understanding of its limitations; namely, terms aimed at describing objective biological or behavioral facts may not capture socially constructed or individually constructed identities of sexuality and gender; people frequently transition in and out of behaviors and identities, and may not self-identify by their behaviors; behavior-based terms can obscure many other issues related to both health and rights, such as youth, poverty, sex work, drug use, social inequality, homelessness, violence, and incarceration; and internationally generalized terms frequently obscure diversities in people's needs, ambitions, and vulnerabilities.

Heteronormativity is the assumption that heterosexuality and heterosexual norms are universal and normal, and that these norms are the standard for legitimate social and sexual relations.

Facilitator Note: See resources like the following to amend these terms to reflect the local context, including local terms for women who have sex with women.

1. Naz Foundation. 2001. "MSM and Gay Men's Sexual Behaviors/Identities." P.43 in *Training Manual: An Introduction to Promoting Sexual Health for Men Who Have Sex with Men and Gay Men*. New Delhi: Naz Foundation.

2. Pact, Inc. and International Center for Research on Women (ICRW). 2010. "Sex, Gender Identity, Gender Expression and Sexual Orientation." P.150 in *Understanding and Challenging Stigma Toward Men who have Sex with Men: Toolkit for Action* (Adapted version for use in Cambodia).

Part 2: Myths and Realities: Sexual Orientation and Gender Identity

Time: 30 minutes

Activity Objective:

Recognize and refute common misperceptions about sexual orientation, gender identity, and HIV.

Materials: Flipcharts printed with SOGI myths

Activity:

1. Point participants to five flipcharts hanging on the walls throughout the room, each with a statement about sexual orientation and gender identity (in italics below). Ask the participants to stand and join you by the first flipchart. Read the statement aloud, and ask whether it's true or false. Have participants raise their hand for the response they choose. Go to the next flipchart and do the same, facilitating a brief discussion around participants' responses.

2. As the discussions around each response develop, clarify the misperceptions and beliefs about each myth with the facts detailed after each myth below.

1. *Sex between two men is, by definition, risky.*

False. Variance in gender identities, sexual behaviors, and sexual orientations is not inherently harmful. Sexual orientation does not itself determine risk. People's sexual exposure to HIV varies according to patterns of sexual behavior, condom

use, other sexual risk-reduction practices, and overall HIV prevalence among sexual partners. People's ability to negotiate safer sex, safer drug use, and access to HIV treatment and care can be influenced by poverty, social and gender inequality, drug use, and other social or structural factors.²

2. *Sex between two men is, by definition, coercive.* (Optional)

False. Consensual sex between adults takes many forms, including sex with people of the same and other sexes/genders. So too, does sexual coercion. Coercion is characterized by a lack of consent, regardless of the sex/gender of those involved.

3. *Sex between two men is motivated by love, sexual pleasure, and economic exchange.*³

True. The same things that motivate sex between a man and a woman motivate men to have sex with other men. The reasons may include love and companionship, sexual pleasure, and as a way of earning money in exchange for sex.

4. *Lesbians have little need for HIV prevention, treatment, or care.*

False. Reproductive health programs and providers have traditionally excluded lesbians because they may not have contraceptive needs and because sexual transmission of HIV between lesbians is relatively low; however, providers should not make assumptions about HIV vulnerability based on sexual orientation alone. While the risk of sexual transmission of HIV between two women is very low, women who are lesbians nevertheless face risks for HIV as women and as lesbians. Research shows that many lesbians also have male partners. As women in society, lesbians may be vulnerable to HIV through rape (especially in contexts where sexual violence is used as a "punishment" or "cure" for homosexuality). Finally, just like people of any other sexual orientation lesbians could be vulnerable to HIV transmission through injecting drug use.⁴ Lesbians should have full access to the same range of reproductive healthcare as any women, including information about sexual and reproductive health, STI and HIV counseling and testing, pap tests, breast exams, and fertility services.

5. *Bisexual people are just sex addicts who will have sex with anyone.*

False. Bisexual is the term for people who have affection and sexual attraction to people of either sex. This does not imply that bisexuals are more likely than

² Adapted from UNDP and UNAIDS. 2010. *Universal Access: From Vulnerability to Resilience; Strategic Framework for Strengthening National Responses for HIV for Gay Men, Other MSM and Trans People in Latin America and the Caribbean.*

³ From Pact, Inc and International Center for Research on Women (ICRW). 2010. "Sex, Gender Identity, Gender Expression and Sexual Orientation." *Understanding and Challenging Stigma Toward Men who have Sex with Men: Toolkit for Action* (Adapted version for use in Cambodia). Washington, DC: Pact, Inc and ICRW. p.170.

⁴ Adapted from Gay, J., K. Hardee, M. Croce-Galis, S. Kowalski, C. Gutari, C. Wingfield, K. Rovin, and K. Berzins. 2010. *What Works for Women and Girls: Evidence for HIV/AIDS Interventions.* New York: Open Society Institute. www.whatworksforwomen.org.

anyone else to have multiple partners or to be less “choosy” about sexual partners.

6. *You can spot a homosexual by the way they look or act. “Feminine” men or “masculine” women are usually gay.*

False. Gender identity and gender expression do not determine sexual orientation or vice versa. Ideas that link the two are rooted in stereotypes meant to preserve very rigid distinctions between men and women; that is, by accusing those who diverge from gender norms of being homosexual. Remember: though GLBT communities sometimes accept or promote gender deviance more than “mainstream” society, almost everyone acts or looks in some way different from the expectations of their sex. Likewise, there is a range of sexual orientation, and many people experience sexual orientation as fluid, or changing over the life course.

7. *MSM engage in the same sexual practices as other couples.*⁵

True. MSM use many of the same sexual practices as heterosexual couples, including: kissing, masturbation, touching, anal sex, and oral sex. These activities are not restricted to sex between a man and woman or MSM but are commonly practiced by both groups. Some of us, for example, assume that all MSM practice anal sex, but in fact, many do not and there are many heterosexual couples who practice anal sex.

8. *Homosexuality is a new phenomenon brought to my region by Westerners.*

False. Despite the fact that homosexuality is more visible in some contexts than others, same-sex intimate behavior is relatively common, having been found in almost every known culture of the world. Further, historians have documented that colonization in many areas altered pre-existing attitudes toward homosexuality, introducing extreme homophobia (rather than homosexuality) by naming, categorizing, and even criminalizing same-sex practices and intimacies.⁶ Others argue that the invention of the term MSM by the development field similarly collapsed diverse experiences into a singular category of “other”—especially separating MSM in the global South from gay (white) men in the North.⁷ Around the world, visibility and acceptance of homosexuality is slowly growing.

3. Explain that all of these statements are actually myths that use judgment and fear to maintain rigid ideas about men, women, and proper sexual desire and behavior:

⁵ From Pact, Inc and International Center for Research on Women (ICRW). 2010. “Sex, Gender Identity, Gender Expression and Sexual Orientation.” *Understanding and Challenging Stigma Toward Men who have Sex with Men: Toolkit for Action* (Adapted version for use in Cambodia). Washington, DC: Pact, Inc and ICRW. p.171.

⁶ Alexander, M. Jacqui. 2005. *Pedagogies of Crossing: Meditations on Feminism, Sexual Politics, Memory and the Sacred*. New York: Durham.

⁷ Gosine, Andil. 2006. “‘Race’, Culture, Power, Sex, Desire, Love: Writing in ‘Men who have Sex with Men.’” *IDS Bulletin* 37(5).

- Justifications for homophobia are frequently based on gender norms, and these often unintentionally influence programming assumptions.
 - An important dimension of the stigma, discrimination, and/or violence that GLBT people experience is related to the fact that they deviate from gender norms—especially in their sexual behavior, but also in other ways.
 - Myths reinforce the perception that same-sex intimacy is rare, exceptional, and/or harmful.
 - Myths are thus used as justifications for stigma, discrimination, and violence, all of which increase HIV vulnerability among GLBT or people thought to be GLBT.
 - Misguided associations between violence and same-sex intimacy may serve to justify and excuse such violence when it happens.
 - Stigma can lead to invisibility or exclusion of and discrimination against GLBT people in HIV testing, counseling, treatment, and care programs.
4. Conclude the exercise by encouraging participants to be alert to identifying myths and to be prepared to engage with the misperceptions that lie behind these myths.