

GUEST EDITORIAL

Non-binary and gender queer: An overview of the field

Author version

The existence of gender variance is widely documented both historically and cross-culturally (Herdt 1994; Matsuno and Budge, 2017). The term ‘gender queer’ emerged in the 1990s (see Whittle, 1996). It can be defined as ‘any type of trans identity that is not always male or female. It is [also] where people feel they are a mixture of male and female’ (Monro, 2005, pp. 13). Genderqueer identities are diverse but share dis-identification with rigid gender binaries and in some cases, a direct challenge to the social institutions that perpetuate binaries (see Yeadon-Lee, 2016; Bradford et al., 2018; Davy, 2018). ‘Non-binary’ is an umbrella term that includes those whose identity falls outside of or between male and female identities; as a person who can experience both male and female, at different times, or someone who does not experience or want to have a gender identity at all (Matsuno and Budge, 2017). Like genderqueer, non-binary can be traced to the work of transgender and transsexual authors who resisted or transcended gender binaries, for example Bornstein, who stated that ‘Gender fluidity recognizes no borders or rules of gender.’ (1994, pp. 52). The earliest use of terms referring directly to non-binary seems to be around 2000, for example Haynes and McKenna’s collection *Unseen Genders: Beyond the Binaries*.

Estimates of the numbers of non-binary people vary. In a survey in the United Kingdom (UK) with 14,320 responses from trans people, almost 52% identified as non-binary (Government Equalities Office, 2018). However, Nieder et al. (2018) conducted a comprehensive literature analysis that indicated that approximately 80% of trans people identify as exclusively male or female, which leaves 20% to individuals with a gender falling outside of or between male and female identities. There are generational differences; typically a higher proportion of young people identify as non-binary. For instance, in a Canadian study, authors note the growing population of non-binary youth, with 41% of a sample of 839 of trans young people identifying as such (Clark et al., 2018; Yeadon-Lee, 2016).

The last few years have witnessed a shift in the possibilities afforded for gender expression in some countries, however fragile and contingent this development might be. For instance Bragg et al. (2018) in a UK study found ‘expanded vocabularies of gender identity/expression...’ (2018, pp.1). ‘Non-binary’ is now an increasingly recognised social identity in the UK, which has led to some changes in institutional norms and structures, for example the civil service adopting a non-binary identity option (see Monro et al., 2017). Likewise, Nieder et al. (2018) discuss the increased visibility of non-binary and gender queer (NBGQ) people in clinical settings.

Despite some increases in the social acceptance of non-binary, the literature highlights difficulties regarding visibility (Taylor et al., 2018). This is evident at the level of individual subjectivity, for example 76% of non-binary people in the 2018 UK survey avoided expressing their gender identity due to fear of negative reactions (Government Equalities Office, 2018). The issue of invisibility is also pertinent to policy making and practice settings. For instance, where health monitoring systems use gender binary categories, NBGQ people are rendered invisible (see Jaspal et al., 2018).

A small but growing literature exists about healthcare and NBGQ people (see for example Vincent and Lorimer, 2018). The UK Government Equalities Office (2018) found that non-binary people had substantially lower quality of life scores, as compared to cisgender and

heterosexual people. High levels of minority stress and of social discrimination were reported in studies such as Taylor et al. (2018). The research shows that NBGQ people's mental health is worse than that of cisgender populations and it also seems that non-binary people may be at higher risk of mental health problems than binary trans people (Matsuno and Budge, 2017). Motmans and Burgwal (2018) conducted a survey in five countries which demonstrated that non-binary people assessed their health in more negative terms, as compared to the binary trans respondents. They showed significantly higher rates of have a chronic problem, disability, or illness and also of experiences of depression. Their study supported earlier research that demonstrated poorer health amongst NBGQ people as compared with binary identified trans people (Harrison et al 2012). However, Rimes et al. (2017) who (in a survey of 677 young people from the UK) found that non binary young people were less likely than other groups to report suicidality and previous help-seeking for anxiety and depression, and also reported higher levels of life satisfaction than young binary trans people. Overall, therefore, the findings about NBGQ people and health are inconclusive; both practice and the social environment are evolving.

The editorial

This Special Edition about non-binary and genderqueer is very much to be welcomed. The increased prominence of non-binary as an identity is somewhat reflected in scholarship, for example Richards et al. (2017), but in comparison to the binaried trans literature there is a paucity of research (Matsuno and Budge, 2017). Overall, academic production has not kept pace with the growth of non-binary identities, and there are difficulties with erasure of non-binary within the broader transgender category (Fiani and Han, 2018). The Special Edition, with its contributions in areas as varied as healthcare, romance, identity measurement and identity work, will provide an important and timely contribution to the field. It will form a good foundation for the further expansion of NBGQ studies. This expansion is needed, as little research exists in areas such as education (though see Bragg et al., 2018) and a dearth of knowledge in such policing and community safety, asylum and refugee rights, and social care.

This editorial will summarise key areas of relevant theory and will attempt to indicate some possible directions for future research. Its focus is on the global anglophone north. The editorial aims to be thought-provoking rather than directly informing of practice. Some excellent discussions of clinical issues are provided elsewhere, including Taylor et al. (2018).

Theorizing genderqueer and non-binary

I conducted research with a range of UK-based trans-identified and intersex individuals in the 1990s, focusing on those with non-normative gender identities, including genderqueer. Based on this, I developed an approach to theorizing what is now known as NBGQ (2000, 2005), building on the earlier work of authors such as Bornstein (1996) and Halberstam (2002). I explored three approaches: [i] the expansion of male and female categories, which enables the inclusion of non-normative genders. I noted that 'this interpretation of gender problematically erases non-binaried trans identities [because all gender identities are subsumed within an expanded model of male and female] (2005, pp. 36); [ii] Moving beyond gender, or degendering; this has a difficulty in that '...once fluidity is named, it becomes a space which people can inhabit...and is therefore arguably no longer a non-category.' (2005, pp. 37). Non-binary illustrates the way in which what was (in the 1990s) a non-category has become a category that people do inhabit, and in doing so may fuel social change. [iii] The third approach, which has had the most purchase subsequently (see for instance Hines, 2010)

is Gender Pluralism. This entails ‘...conceptualising gender as plural, as a spectrum, a field, or intersecting spectra or continua’ (2005, pp. 37), as a means of moving beyond flawed ontologies that entrench gender binaries. The notion of a gender spectrum is evident in later work on genderqueer (Bradford et al., 2018) and on non-binary, for example Richards et al. (2016) discuss diversifying gender in terms of a spectrum model. Matsuno and Budge state that ‘The term non-binary typically defines a comprehensive scope of gender experiences (sometimes discussed as the “gender spectrum”)’ (2017, pp. 117, see also Fiani and Han, 2018). The spectrum approach is very useful for understanding NBGQ identities, especially when expanded using intersectional approaches, which I discuss briefly below. However, the notion of gender pluralism did marginalise physiological sex, which is problematic as it elides intersex and variations of sex characteristics. I therefore propose here a complementary notion of Sex Pluralism, which encompasses sex characteristic variance as a separate spectrum which overlaps, intertwines with and influences gender pluralism in diverse ways.

As I argued in 2001 ‘The social structuring of trans quite clearly affects the levels of fluidity and the gender permutations that are possible’ (pp. 163). Hines (2010) subsequently developed a materialist analysis of transgender that addresses social structures and inequalities, ‘mapping the formations of power within and through gender and sexual categories’ (pp. 13). This type of approach, where attention moves from the individual towards social structures and processes, is crucial. In seeking to understand NBGQ, we need to ask questions about the conditions in which NBGQ identities can emerge and become socially viable, and the ways in which non-binarism is constrained, shaped, or crushed. Arguably, the emergence of NBGQ in some northern anglophone countries is possible because of what is broadly termed ‘homonationalism’; the deployment of LGBT-friendly policies as part of the dominant national identities of countries (Puar, 2007)ⁱ. In contrast, contemporary political mobilisation supports the reinforcement of gender binaries in a number of states and regions (see for example Kuhar and Paternotte, 2017), making the external expression of NBGQ identities dangerous for individuals in these places. A materialist structural analysis enables understanding of the ways in which gender – including the social erasure or emergence of NBGQ people – is shaped, in the global north and internationally.

Taking NBGQ theory forwards

Arguably, it would be useful for NBGQ theorists to renovate feminist approaches to gender diversity. Whittle stated in 1996 that ‘Feminist theory is now faced with the need to address the dichotomy of biological imperativism and social structure, the differences of sex and gender, which are no longer recognised as synonymous,’ (pp. 203). Sadly, few cisgender feminists rose to the challenge of sex and gender variancesⁱⁱ, which destabilise simplistic notions of unitary male/female categories, and instead a reactionary ‘feminism’ developed that is deeply gender binaried and prejudiced against gender diverse people (see Hines, 2017). The difficulties that anti-trans bigotry raises for NBGQ people require criminological, medical, and sociological attention, but that is beyond the scope of this short piece. Let me turn instead to providing a snapshot of how social forces can shape NBGQ lives. In doing so, I build again on the work of early transgender authors (Bornstein, 1994; Feinberg, 1996).

The patriarchal and heterosexist underpinnings of gender binarism were discussed by Feinberg in 1996. Bornstein (1994) also analysed heteropatriarchal systems of ‘gender defence’. In a nutshell, the gender binaried system is intertwined with institutionalised heterosexism (the assumption that male-female sexual relationships are the norm and the ideal), making it difficult to live in alternative ways. As recently as 2010, there were

assertions that ‘...in mainstream society, living openly beyond the two-sexes/two-genders system would still not appear to constitute a socially viable option’ (Davidman, 2010, pp. 187). Practices of binarism continue, for example the social erasure of third and other sex pronouns such as ‘ze’ (Nicolazzo, 2016) and the existence of gender binaried toilets and uniforms within schools (Bragg, 2018). Monro and Van der Ros (2017) demonstrate the way in which state apparatus and the medical establishment can operate to perpetuate a socially marginal position for non-binary people. Gender binarism may be compounded by trans^{*iii}-normativity – ‘the belief that there is only one way for trans* people to practice their gender...[it] suggests that all trans* people should transition from one socially knowable sex to another’ (Nicolazzo, 2016, pp. 1175). These forces, which operate at cultural, institutional, policy, and legal levels, combine to perpetuate narrow models of sex, gender and sexual identity.

Gender binarism also affects intersex people negatively (see Monro 2005). Whilst this short piece does not address the issues specific to intersex people (intersex is known as DSD in medical settings) it is salient that some intersex people may feel themselves to be non-binary. In the UK survey of LGBTI people, 24% of a population of 1,980 intersex respondents identified as non-binary (Government Equalities Office, 2018). This is a different phenomenon to that of trans non-binary people because intersex people have congenital sex variances that are pathologised and they are usually subject to medical interventions and infants/children to force their conformity to gender binaries, whereas endosex^{iv} trans people seek to transition later in life. There are a few indications in the literature (for example Taylor et al., 2018) that non-binary individuals born without congenital sex variance may seek to identify as ‘intersex’, because they wish to have non-normatively sexed bodies. This is problematic, as it arguably ‘colonises’ an identity that others have no choice about experiencing. Intersex people face profound difficulties that people born with non-intersex bodies avoid, in particular, foetal termination (Jeon and Chen, 2011) and medical interventions carried out on babies and children which are typically reported as having poor and/or damaging outcomes (see for example Creighton et al., 2001; Diamond and Garland, 2014). Intersex organisations are clear that the term ‘intersex’ only pertains to those born with atypical sex characteristics (see Monro et al., 2017). Research is needed about the specific identities and needs of intersex non-binary people.

NBGQ cannot be theorized without considering the other social forces that shape identity and what becomes socially possible in any given context. I therefore conclude this short piece by recommending more intersectional research concerning NBGQ, which could build on Nicolazzo’s (2016) study of black non-binary Americans. Intersectionality concerns the ways in which multiple social forces interact or interlock, so that these forces combine to forge particular social positions (see Crenshaw, 1989). According to McCall (2005), there are different methodological approaches to intersectionality studies. The first of her three approaches, *anticategorical complexity*, deconstructs identity categories. Anticategorical approaches can be used to dismantle gender (and sex) binarism, as well as enabling examination of the classed, racialized ways in which binarism is constructed. McCall discusses another approach to intersectionality, termed *intracategorical* ‘because authors working in this vein tend to focus on particular social groups at neglected points of intersection (McCall, 2005, pp.1771). This approach is useful for understanding the experiences of NBGQ people who are also poor, or of colour, or disabled, or very young or very old (for example). McCall termed a further approach to intersectionality ‘*intercategorical*’. For McCall, ‘*intercategorical complexity*...requires that scholars provisionally adopt existing analytical categories to document relationships of inequality among social groups and changing configurations of inequality along multiple and conflicting

dimensions' (2005, pp.1771). She also notes that identity categories can be used strategically by individuals, in an agentic way. The possibility of exercising agency is important for understanding NBGQ. There is increasing evidence that NBGQ people can feel a sense of pride, empowerment, and positive individuality (Taylor et al., 2018), and any future theory-building needs to embrace and support this.

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ⁱ These states may not support the human rights of other social groups.

ⁱⁱ Monro (2005) and Hines (2010, 2017) are amongst the trans-affirmative feminists.

ⁱⁱⁱ This author used an asterisk – trans*- to emphasise the inclusion of non-binary, and other non-normative gender, identities and practices. In this editorial, I use the term ‘trans’ in the same way; it includes non-normative gender variations and binaried transgender.

^{iv} ^{iv} Endosex is a term used by Intersex activists and allies to indicate a person born with sex characteristics that are seen as typically male or female at birth, therefore not medicalized as intersex. See <https://anunnakiray.com/2017/01/21/intersex-vs-intergender-do-intersex-transsexuals-exist/>