

GENDER

Gender refers to the male or female identity—or other sexual identity—of an individual. The gender to which an individual identifies is not necessarily the same as that individual's biological sex. Biological sex refers to the genetic characteristics and genitalia that make an individual physically male or female. However, an individual may have the chromosomes and genitalia of one gender but the psychological identification of the other gender. Nevertheless, the majority of people have a psychological gender that is the same as their physical sex.

Biological determination of sex

An individual's physical sex is determined by the combination of chromosomes that the embryo receives from the father's sperm cell and the mother's egg cell at the time of conception (fertilization). If a sperm with an X chromosome fertilizes the egg, the baby will be a girl, with XX chromosomes in her cells. If a sperm with a Y chromosome fertilizes the egg, the baby will be a boy, with XY chromosomes in his cells. By approximately the ninth week of pregnancy, either male or female genitalia take shape on the fetus's body.

Development of gender identity

As people grow and develop through childhood and adolescence, their gender identity also develops. Research suggests that both genetic and environmental factors influence the formation of gender identity. Some research has identified specific genetic variations that affect the functions of sex hormones and the structures of certain brain regions, causing, for example, transgender women (individuals who were born male but identify as female) to have brains that resemble the brains of genetic females. This evidence indicates that one's gender identity may be an inborn trait.

Some psychologists believe that personal experiences during childhood play a role in the development of one's gender identity, as well as the extent to which one expresses "masculinity" or "femininity." Most parents raise their children in traditional ways—boys are given toy cars and footballs, while girls are raised with dolls and dresses. By contrast, some parents raise their children in nontraditional ways, such as by allowing their sons to play with dolls or wear dresses. The extent to which these different ways of raising children may influence their eventual gender identity is a matter of debate. However, many transsexuals (people who identify as the opposite gender of their physical sex) begin to behaviorally express their preferred gender very early in life, when still young children, and their gender identity remains fixed throughout life.

Beyond the bipolar gender system

Traditional Western culture and most other cultures of the world have a bipolar gender system, describing people as either male or female and classifying certain behaviors as either masculine or feminine. However, many social scientists believe that this view of gender is more a cultural construct than a biological reality. There are millions of people in the world for whom the bipolar gender system does not apply. For example, in approximately 1 in 2,000 births, individuals are born with some combination of male and female genitalia, though they may otherwise be "normal" and healthy. The gender to which these intersex individuals identify may be neither male nor female.

Furthermore, even individuals with distinct male or female genitalia may not self-identify as male or female. There are people who identify psychologically as male sometimes and as female other times. These people, who can be described as *gender fluid* or *gender flexible*, may dress and behave according to whichever gender they feel like at any given time. Other terms that some people use to describe their gender include *pangender* (meaning "all genders"), *polygender* ("many genders"), *trigender* (referring to male, female, and any of various "third genders"), and *genderqueer* (a comprehensive term for all genders other than male and female). The gender term used by any individual is basically a matter of personal preference.

In light of the reality of people like this, it is clear that the concept of human gender is more accurately thought of as a diverse and complex spectrum or mosaic, rather than as an either-or dichotomy.

Sexual orientation

One's gender is not necessarily related to one's sexual orientation (the gender to which one is sexually attracted). Although most males are attracted to females, and most females are attracted to males, this is not always the case. According to statistics compiled by the Kinsey Institute, a well-known institution of sexuality research, approximately 7% of women and 8% of men identify as "gay, lesbian, or bisexual." Like human gender, human sexuality is most accurately viewed as a spectrum or mosaic of many diverse types.

Gender stereotypes

In every culture, there are customary roles that each gender is expected to fulfill. In the United States and many other nations, it was long expected that the husband would fulfill the "masculine" role by working at a job, earning money for the family, and fixing various home and mechanical problems, while the wife would fulfill the "feminine" role by staying at home, taking care of the children and house chores, and always looking "pretty" for her spouse. These continue to be the expectations in many families.

Since the 1960s, however, there has been increasing rejection of traditional male and female social roles in the West. Today, compared to previous decades, more women are the main income earners in families, more men stay at home raising children, and men may be just as likely as women to be concerned with their hair, their skin, their weight, and other elements of personal appearance.

Historical and cultural perspectives

Although the bipolar gender system has long been the conventional way of looking at gender in the United States and many other nations, this outlook began shifting in major ways during the early 21st century. Evidence of this cultural shift is apparent in the increasing prominence of transgender people in the news—ranging from actress Laverne Cox, who was featured on the cover of *TIME* magazine in May 2014, to former Olympian Bruce Jenner, whose television interview about his transition to female was watched by 17 million viewers in April 2015. Moreover, the LGBT (lesbian, gay, bisexual, transgender) movement, in general, is growing in cultural influence. The general acceptance of "same-sex" marriage today is a historic shift in traditional attitudes about gender roles.

Professional psychological attitudes on gender have also shifted. In 2013, the American Psychiatric Association (APA) discarded the diagnostic term *gender identity disorder* in favor of *gender dysphoria* (as a diagnosis for people whose gender identity does not match their physical sex) in its *Diagnostic and Statistical Manual of Mental Disorders*. The APA made this change partly to remove the stigma associated with "disorder," noting that "gender nonconformity is not in itself a mental disorder."

Although the concept of multiple genders may seem new to people of European heritage, this concept has long been recognized in some of the world's cultures, including indigenous people in the Americas and other people in South Asia and elsewhere.

The term *two-spirit* is applied to individuals who are accepted in various Native American cultures as having genders that are neither male nor female. Each of these cultures has its own native expression to refer to these individuals, such as the Lakota *winyankteha*, or *winkte*. In some cultures, two-spirit people dress and behave as the gender opposite to their physical sex. In other cultures, they fulfill "third-gender" or "fourth-gender" roles, which may be associated with special spiritual powers.

In India, *hijra* is the term applied to individuals who were born with male or intersex physical traits but live as females. They are accepted as a type of third gender and are allowed to marry men. Similar groups of "third sex" individuals are recognized in Pakistan, Bangladesh, Thailand, and certain other Asian countries.

Multiple genders are also traditionally recognized in various Pacific cultures, such as the Kanaka Maoli indigenous people of Hawaii. Among those people, individuals known as *mahu* have gender roles that encompass both masculine and feminine characteristics; they are especially valued as educators of ancient traditions and rituals. Still other traditional cultures that recognize and revere multiple genders include the Inca of Peru, the Ankole of Uganda, and the Sakalava of Madagascar.

GENDER DYSPHORIA

Gender dysphoria is the diagnostic name for a condition in which the gender an individual was born with differs from the gender they identify with. A genetic male who self-identifies as female would be diagnosed as having gender dysphoria, as would a genetic female who self-identifies as male. The term *dysphoria* refers to the intense distress and dissatisfaction experienced by individuals with this condition.

Gender dysphoria is also known as gender identity disorder, but many psychiatrists and psychologists now avoid the latter term because of the social, occupational, and legal stigma associated with "disorder." In 2013, the American Psychiatric Association (APA), the largest professional organization of psychiatrists in the United States, discarded *gender identity disorder* in favor of *gender dysphoria* in the fifth edition of its *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*, the primary reference text for the definition and diagnosis of psychiatric conditions. In making the change, the APA noted that "gender nonconformity is not in itself a mental disorder."

Individuals with gender dysphoria typically become aware of the conflict between their gender identity and their body's physical characteristics very early in childhood, often at around age five. A boy might show early signs of the condition by playing dress-up with female clothes and makeup, by playing with Barbie dolls or other girls' toys, by preferring girls as friends, and by engaging in other behaviors that are more common to girls. Conversely, a girl with the condition might prefer activities more common to boys.

A preference for activities associated with the opposite gender does not necessarily mean that a child has gender dysphoria. The key element for such a diagnosis is the mental health of the child. A child who truly has gender dysphoria often feels very sad and depressed about his or her physical gender. These feelings persist for at least several months at a time, and they may be constant. In addition, the feelings of gender dissatisfaction are verbally expressed. For example, a boy might repeatedly cry out, "I wish I was a girl!" He might also insist on being called "she" and his chosen female name.

Unhappiness and distress increase as the child enters adolescence—as hormonal changes typical of the birth gender manifest themselves. The mental turmoil associated with gender dysphoria may interfere with family relationships and friendships, performance at school or work, and other social situations. In the worst cases, an individual might become suicidal.

Individuals with gender dysphoria require psychological therapy as soon as possible. If left untreated, the confusion and anxiety stemming from the condition can lead to increasing social dysfunction and such personal problems as severe depression, alcoholism, and drug addiction.

In conjunction with psychological therapy, a person who is diagnosed as having gender dysphoria is typically guided through the steps for transitioning to his or her desired gender. Transitioning involves dressing and living as the desired gender on a full-time basis. To make the outward appearance of the transgender individual better match the desired gender, hormone therapy is prescribed. The transgender patient may choose to undergo a range of additional medical and surgical procedures, such as (for a male-to-female transsexual) permanent beard hair removal, breast implants, and facial feminization surgery, and (for a female-to-male transsexual)

mastectomy (breast removal). The final step in transition is sex reassignment surgery (SRS), in which the genitals are reconstructed. Not all transsexuals choose to undergo SRS.

After surgery, psychological counseling should be continued. Many post-op (post-operation) transsexuals find peace and happiness, but others do not—and they may even come to regret the surgery.

In the early 1900s, some mental health professionals viewed the symptoms of gender dysphoria as a form of sexual disorder, dysfunction, or perversion. As a result of this misunderstanding, many people were subjected to inappropriate or harmful "treatments," such as the use of drugs or electroshock therapy to try to force them to accept their birth gender. The idea that transgender people could be effectively treated with psychotherapy, hormones, and surgery gained ground after the first widely known "sex change" surgeries in the 1950s.

With the release of *DSM-5* in 2013, gender dysphoria was further removed from the stigma of being a "disorder" as it was described in a chapter separate from the paraphilic disorders with which it had sometimes previously been linked. Paraphilic disorders include such conditions as exhibitionist disorder (involving exposing one's genitals to strangers) and fetishistic disorder (involving the eroticization of women's clothing or other objects). Statistics vary on the prevalence of gender dysphoria, but they agree that diagnoses of the condition are increasing in number.

The 11th edition of the *International Classification of Diseases (ICD-11)*, published by the World Health Organization, is expected to include a revised classification of "gender identity disorder" when it is released in 2015. A WHO advisory panel suggested no longer listing the condition as a mental illness.

Some issues related to treating people with gender dysphoria remain controversial among experts. These issues include the most appropriate way to treat very young children who express a desire to change gender and the question of whether SRS is excessively performed on certain patients for whom it is not appropriate.

TRANSGENDER

The term transgender is a general expression encompassing anyone who *transcends* (goes beyond the limits of) the traditional concept of male or female gender. It is the "T" in the popular acronym LGBT, which stands for lesbian, gay, bisexual, transgender.

People of various gender identities and sexual preferences fall under the umbrella term transgender. In most cases, the expression is used to refer to transsexuals. Transsexuals are individuals who feel that they were born with the wrong gender. They typically dress and live as members of their desired gender, and many get their bodies changed through hormone therapy and surgical procedures to match that gender. Transvestites, or crossdressers, also fall within the realm of transgenderism. These individuals typically enjoy dressing as the opposite gender, but they usually do not want to become the opposite gender.

Other people for whom the term transgender may be used include drag queens (men who dress as women to entertain others), drag kings (women who dress as men to entertain others), and genderqueer, bigender, androgyne, and intersex people (the latter four terms referring to individuals who have various complex mixes of gender identities, gender expressions, sexual characteristics, and/or sexual preferences). The concept of transgenderism can be extremely complicated, detailed, and weblike.

Many transgender people grow up feeling confused about their gender identities, and they eventually seek treatment from licensed clinical psychologists, licensed clinical professional counselors, or other mental health professionals. For some patients, psychological counseling alone is insufficient. If a patient is diagnosed as having gender dysphoria, or gender identity disorder, the recommended form of treatment may be a complete gender transition, with the use of hormone injections and sex reassignment surgery (SRS). However, some psychologists and physicians object to such radical treatment, believing that it is not effective and may even cause more problems for the patient than it solves. These healthcare professionals may suggest less radical treatment. For example, instead of a complete SRS for a genetic male transsexual who wishes to live as a woman, an *orchiectomy* (removal of the testicles but preservation of the penis) may achieve the desired feminization effects.

Besides struggling with their own gender identity, many transgender people must also confront intolerance and even violence from others. To help transgender individuals deal with such issues—and to work toward greater social understanding and acceptance of transgender people—a number of support and advocacy organizations are available. Transgender people can interact with each other in online social networks, such as URNotAlone (<http://urnotalone.com/>) and The Transgender Guide (<http://tgguide.com>), and they can attend in-person meetings with such groups as the Renaissance Transgender Association (<http://www.ren.org/>) and Chicago Gender Society (<http://www.chicagogender.com>).

Partly through the efforts of such groups, the issue of transgenderism became more prominent in media reports and public consciousness in the early 2000s. In some ways, this enhanced cultural visibility mirrored the earlier increased awareness and social acceptance of homosexuality, which began in the 1970s.

The 2005 comedy/drama movie, *Transamerica*, starring Felicity Huffman as a male-to-female transsexual, was one of the first major American motion pictures to deal with this topic. The 2006 television movie, *A Girl Like Me: The Gwen Araujo Story*, told the real-life story of a transgender teenager who was murdered in California. In 2012, Jenna Talackova became the first transgender woman to compete in a major beauty pageant—the Miss Universe Canada pageant. In 2014, *TIME* magazine featured a transgender person on its cover for the first time—Laverne Cox, an actress in the Netflix series *Orange is the New Black*.

A number of transgender people have been elected to government offices in the United States as well as in other countries. These officials include Victoria Kolakowski, elected a judge to the Superior Court of Alameda County, California, in 2010; Stacie Laughton, elected to the New Hampshire House of Representatives in 2012; and Gypsy Vered Meltzer, elected to the City Council of Appleton, Wisconsin, in 2014. (Laughton later resigned after a previous felony conviction came to light.) In 2010, U.S. President Barack Obama appointed the first transgender woman to a high-ranking government position—Amanda Simpson, as a senior technical advisor in the Department of Commerce.

Many states and municipalities have enacted legislation to protect transgender people and their expression of gender identity against discrimination in employment, housing, schools, and public places. In July 2014, President Obama signed an executive order banning discrimination in the workplace against all LGBT employees of the federal government and federal contractors.

Like many other movements or communities that seek to increase public awareness while also raising the pride of its members, the transgender community uses certain symbols to represent its beliefs. One such symbol is a flag designed with light blue stripes (representing boys) and pink stripes (representing girls) on the top and bottom and a white stripe (representing people who are transitioning between genders or who have a mix of genders) in the middle. Other transgender symbols include butterflies (representing a beautiful transformation from a previous plain phase) and designs that merge the traditional male symbol (a circle with an attached arrow) with the traditional female symbol (a circle with an attached cross).