Learning the Lingo

This list, compiled from various sources, is terminology commonly used when discussing gender variance, expression and identity. We embrace some less common terms because we believe that they more accurately describe the experiences of gender variant youth and their families. These terms are italicized.

Sexual Orientation - A person’s romantic, spiritual and emotional attraction to another. Sexual Orientation is often confused with gender identity; however, is related to who you are attracted to, rather than your gender identity. Some common sexual orientations are queer, gay, lesbian, bi-sexual, pan-sexual, and heterosexual.

Gender Identity - The internal sense of masculinity or femininity that a person experiences, not always congruent with biological sex or gender assigned at birth. Gender identity is who you are not who you like.

“Gender Identity Disorder” - “Gender Identity Disorder” is a diagnostic category in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), published by the American Psychiatric Association (APA, Revision IV-TR, 2000). In its current form, the diagnosis is controversial among transgender advocates and mental health professionals. TYFA supports reform and rethinking of the diagnosis as it appears in the DSM-IV. For more information, please visit www.gidreform.org

Gender Dysphoria- A persistent distress with one’s physical sex characteristics or assigned birth sex role.

Gender Expression- The ways in which a person socially presents themselves to the world through clothing, hairstyles, toys and other preferences. Most people’s gender expression is congruent with their physical sex characteristics or birth sex.

Gender Variant- Those whose gender identity or expression differ from expectations for their physical sex characteristics or birth sex.
**Affirm**- We use the word ‘affirm’ to acknowledge the gender identity of an individual. It is our position that they are not changing their gender rather we are changing our perceptions based upon what the individual has expressed to us.

**Affirmed Female**- (mtf or m2f) An individual who was born anatomically male, however, identifies as female.

**Affirmed Male**- (ftm or f2m) An individual who was born anatomically female, however, identifies as male.

**Social Transition**- The outward change in appearance and/or presentation that affirmed females and affirmed males may undergo in order to express their gender identity.

**Medical Transition**- Undergoing medical intervention(s) to alter physical/sexual characteristics of one’s body in order to affirm their gender identity.

**Tanner Stages**- The 5 stages of puberty represented on the Tanner growth chart. These stages are based on the growth of pubic hair in both sexes, the development of the genitalia in boys, and the development of breasts in girls. This is the criteria that endocrinologists use to determine the appropriate intervals for medical intervention with either puberty inhibitors or hormone treatment.

**Puberty Inhibitors, GnRh Inhibitors, Puberty Suppressors, Hormone Suppressors, Puberty Blockers**- Medications prescribed by an endocrinologist to delay the onset of puberty. The effects of these medications are reversible. These drugs prevent the devastating unwanted secondary sexual characteristics that occur during adolescence for children whose gender identity conflicts with their birth sex.

**Hormone Treatment, HRT (Hormone Replacement Therapy)**- The introduction of hormones by an endocrinologist or other health care provider to facilitate development of the desired secondary sexual characteristics associated with the gender identity of the individual. Some of the effects of hormone treatment may not be reversible.

**Gender Reconstructive Surgery**- (SRS or Sexual Reassignment Surgery) Surgical procedure(s) performed on an individual whose gender identity does not match their assigned birth sex.

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