Maybe you’ve known for years that you’re GLBTQ. Or maybe you are only now beginning to question your sexual orientation or gender identity. Regardless of where you might be coming from, it can help to remember that you’re not alone.

Researchers believe that between five and six percent of young people are gay, lesbian, or bisexual. Others identify as transgender or questioning. Widely accepted research concludes that roughly 1 in 10 adults is GLBTQ. Think about these statistics the next time you’re at the movies or a football game. Whether you’re aware of them or not, it’s likely people at your school or in your neighborhood are GLBTQ.

**By the Numbers**
The census of 2010 was the first to count same-sex couples identifying themselves as spouses. Prior to this count, those living in homosexual households were classified as “unmarried partners.” The Census Bureau’s new designation will provide more accurate data on gay households, which could influence future legislative issues.
Yet many people are uncomfortable talking about differences in sexuality, and that can result in ignorance. You’ve probably grown up hearing some of the rumors and myths about GLBTQ people. Even the most well-intentioned people can be misinformed about what it means to be queer.

The most powerful response to bias and ignorance is knowledge. This chapter covers the fundamentals of being GLBTQ. Some of what follows might seem like very basic information, but even if you consider yourself knowledgeable about GLBTQ issues, you may be surprised by what you read.

**GLBTQ Terminology**

One thing that can be confusing about the queer community is the terminology. Sometimes it seems like a whole different language exists. Even among GLBTQ people, there’s a lack of consensus about definitions and which words to use when.

For starters, is it GLBTQ, LGBTQ, LGB with T and Q separate? A few decades ago, it was common to say G&L for gay and lesbian. But language evolves as our understanding of GLBTQ people evolves. When the B (for bisexual) was added, the acronym became GLB or LGB. Then the T (for transgender) and Q (for questioning) joined the party.

In this book, you’ll see the consistent use of the acronym GLBTQ. When an issue applies specifically to gay, lesbian, bisexual, or transgender people, those specific words will be

▼ **Sexual Orientation and Gender Identity**

The American Psychological Association describes sexual orientation as an enduring pattern of emotional, romantic, and/or sexual attraction to men, women, or both sexes. Sexual orientation also refers to an individual’s sense of identity based on that pattern.

According to the Sexuality Information and Education Council of the United States, gender identity is the internal sense that people have that they are female, male, or some variation of these. For many people, biological sex—which is based on chromosomes and sexual anatomy—and gender identity are the same. For others, they are different. ▼
used. And although you’ll read about people being either GLBTQ or straight, not all transgender people are gay, lesbian, or bisexual. In fact, many transgender people are heterosexual, and some just don’t identify with any of the labels. Referring to trans people as GLBTQ doesn’t imply that they are necessarily gay, lesbian, or bisexual in their sexual orientations. But the full acronym GLBTQ is used here for consistency.

Another word used often in this book is queer. This word was once used negatively to describe GLBTQ people (and still is, by some). Now, many GLBTQ people and our allies (supporters) use it in a very positive way. For example, you can find Queer Studies and Queer Theory courses at many colleges. The word queer is used in this book in a positive and affirming way. Queer is simply “other than the expected or average,” which is straight. Some people believe the labels gay, lesbian, bisexual, or transgender are too limiting, so queer is also a great word because it frees you from using a specific label if you don’t want to. It’s your life. How you identify is a very personal decision and one that only you can make.

The glossary (page 200) includes the GLBTQ terms used in this book, along with words you might come across elsewhere. For now, let’s look at the basics.

**G is for gay.** This term often is used to describe both homosexual men and lesbians. As it refers to men, gay describes men who are physically and emotionally attracted to other men. The word gay didn’t come into wide use to describe homosexual people until around the 1950s.

**L is for lesbian.** Lesbians are women who are physically and emotionally attracted to other women. The word lesbian has its origins with the Greek poet Sappho, who was born sometime between 630 and 612 BC For part of her life, Sappho lived on the island of Lesbos. Many of her poems dealt with same-sex love between women, and as a result, the island’s name became synonymous with homosexual women. That’s how the term lesbian was born.
**B is for bisexual.** Bisexual people can be emotionally and physically attracted to people of either sex. Sometimes people refer to themselves as bisexual as a means of identifying themselves as questioning, or they identify as bisexual and then later identify as gay or lesbian. However, many bisexual people are bisexual, period, and that is what they will remain.

Bisexuality is one of the least understood expressions of sexuality. Unfortunately, people who identify as bisexual can face ignorance even from the gay community. They might be told they “just can’t admit they’re gay” or “can’t make up their minds.” Bisexuality has been scientifically proven to be a valid identity (read about the Kinsey Scale on page 10). As with all others, bisexual people should be accepted for who they are.

**T is for transgender.** Transgender people have feelings of being a different gender from their physical anatomies. What it means to be transgender is complicated and often misunderstood. One misconception is that all transgender people want to have surgery and/or take hormones to change their bodies. Some do, others don’t. Another misconception is that all trans people are homosexual. Transgender people are often straight, but just like everyone else, they can be gay, lesbian, or bisexual. Some trans people start out identifying as gay, lesbian, or bisexual, then later realize they are transgender.

Some of the issues and emotions transgender people may face are similar to those that gay, lesbian, and bisexual people often experience. Feelings of isolation and the desire to come out, for example, are experiences that all GLBTQ people may have. However, there are other feelings and considerations that can come with identifying as the opposite physical gender (or not identifying as either gender). Some of these issues are addressed in Chapter 10 (page 167).

**Q is for questioning.** People who are questioning are uncertain of their sexual orientations or gender identities, or they may just prefer not to label themselves with any particular orientation. Many teens are starting to embrace identifying themselves as questioning. A lot of things are changing during adolescence, and deciding that you’re questioning can remove the pressure of having to choose a label like gay, lesbian, bisexual, or straight right away.
A Biology Lesson? The Science of GLBTQ

Why are some people GLBTQ and others aren’t? At this point, there isn’t a definitive answer. Scientists, philosophers, psychologists, and a host of others have offered opinions and theories to answer the question, but for now, there isn’t a 100 percent proof-positive reason. There has, however, been a lot of research attempting to determine what makes people GLBTQ. Thanks to these efforts, scientists, healthcare professionals, and the general public have access to expanded information on sexual orientation and gender identity.

The Kinsey Report

In the 1940s, a scientist named Dr. Alfred Kinsey and his team of researchers conducted a study of human sexuality in men. Based on this research, Kinsey determined that most men are neither completely gay nor completely straight. Instead, while some are at either end of the spectrum, most fall somewhere in the middle. He developed a six-point scale—the Kinsey Scale—to illustrate this spectrum.

The Kinsey Scale was revolutionary not only because it looked at queerness as predetermined, but also because it showed a vast gray area between GLBTQ and straight. Before Kinsey, many experts thought it was black and white—straight people were 100 percent straight and queer people were 100 percent queer. Many also thought that straight people were “normal” and “well-adjusted,” while queer people were “sick” or “deviant.” Kinsey’s
research helped dispel this myth and showed that homosexuality and bisexuality were much more common than previously thought.

Kinsey was so intrigued by his research on male sexuality that he expanded his later work to include women, too. His best-known publications were the books *Sexual Behavior in the Human Male* (1948) and *Sexual Behavior in the Human Female* (1953).

Though the statistical methods Kinsey used to conduct his studies fall short of the standards used for research today, there is strong evidence that people fall on a continuum of sexuality. While some people show up on points 6 or 0, most fall at one of the numbers in between.

If you’ve never thought of sexuality on a spectrum, the idea can be confusing. But if you think about all of the complex factors that contribute to making a single human being, it can begin to make more sense. Every human characteristic is on a spectrum. Even within a single quality, there can be great variety. Take eye color, for example. A person with blue eyes can have light blue eyes, deep blue eyes, or blue-gray eyes. Being human means being varied.

Maybe you’re attracted exclusively to either girls or guys. Maybe you’re usually attracted to boys, but there’s something about that girl in your chemistry class that really intrigues you. Or maybe at the last football game you spent just as much time looking at the cheerleaders as the players. All of these responses are natural.

**BEEN THERE**

“For me, there was a lot of uncertainty in high school. I liked half the guys in my senior class, but I also had a crush on two girls on my block. That’s very confusing at an age when you are changing physically and mentally.” — Enrique, 20

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**Sexual Orientation: The Kinsey Scale**

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<thead>
<tr>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>0</td>
<td>Exclusively heterosexual</td>
</tr>
<tr>
<td>1</td>
<td>Predominantly heterosexual, only incidentally homosexual</td>
</tr>
<tr>
<td>2</td>
<td>Predominantly heterosexual, but more than incidentally homosexual</td>
</tr>
<tr>
<td>3</td>
<td>Equally heterosexual and homosexual</td>
</tr>
<tr>
<td>4</td>
<td>Predominantly homosexual, but more than incidentally heterosexual</td>
</tr>
<tr>
<td>5</td>
<td>Predominantly homosexual, only incidentally heterosexual</td>
</tr>
<tr>
<td>6</td>
<td>Exclusively homosexual</td>
</tr>
</tbody>
</table>

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Why Are People Queer or Straight?

That’s the million-dollar question. Over the course of your life, you’ll hear a lot of theories about why some people are GLBTQ and others aren’t. There are queer people who believe you can choose to be GLBTQ. There are straight people who believe you can’t. Some say it’s like putting on a suit that you can take off at any time. Others believe that it’s something deep inside you. You might even hear someone talk about how an experience “made” someone gay. Lots of people have their own theories about it, and if you haven’t already, you might develop one of your own. You might also decide that you don’t care “why.”

While some scientists are working to uncover a genetic component that makes people queer, most mental health professionals and GLBTQ advocates believe that being GLBTQ is most likely the result of a complex interaction of environmental and biological factors. The American Psychiatric Association and advocacy groups like PFLAG don’t believe that being queer is a choice. The American Psychological Association maintains unequivocally that “human beings cannot choose to be either gay or straight.” In its pamphlet “Answers to Your Questions for a Better Understanding of Sexual Orientation & Homosexuality” it states, “No findings have emerged that permit scientists to conclude that sexual orientation is determined by any particular factor or factors. . . . Most people experience little or no sense of choice about their sexual orientation.”

Wanting to Change and People Who Want to Change You

Coming to terms with being GLBTQ involves many stages. Early in that process, many teens wish they could change. Some ignore how they feel and try to act as if they’re straight—going on dates, having romantic relationships, and sometimes even having sex.

Many of the people who have gone on to become leaders in the GLBTQ community started out just as confused and scared as you might be. Transgender activist and writer Kate Bornstein, who was born with male anatomy but always felt like a female, writes in her book _Gender Outlaw: On Men, Women, and the Rest of Us_ about her experience of trying to hide her feelings of being a girl. “I knew from age four on that something was wrong with
me being a guy, and I spent most of my life avoiding the issue,” she writes. “I hid out in textbooks, pulp fiction, and drugs and alcohol. I buried my head in the sands of television, college, a lot of lovers, and three marriages.” Bornstein eventually stopped trying to hide and grew to accept and love her true identity.

Similarly, Ellen DeGeneres has spoken openly about her reluctance to come out because of her intense fear of rejection. After her very public coming out in 1997, Ellen’s career did falter for a period of time. Now, however, she has risen to become one of the most beloved figures on daytime television. The Ellen DeGeneres Show won nearly 30 Daytime Emmy Awards in its first six seasons.

Overwhelmingly, mainstream medical and professional organizations maintain that there is nothing wrong with being queer and that no one should attempt a “cure.” In fact, the American Academy of Pediatrics, the American Counseling Association, the American Psychiatric Association, the National Association of School Psychologists, and the National Association of Social Workers all maintain that queerness is not a mental disorder.

In its publication “Answers to Your Questions for a Better Understanding of Sexual Orientation & Homosexuality,” the American Psychological Association states, “Both heterosexual behavior and homosexual behavior are normal aspects of human sexuality. . . . Despite the persistence of stereotypes that portray lesbian, gay, and bisexual people as disturbed, several decades of mental health research and clinical experience have led all mainstream medical and mental health organizations in this country to conclude that these orientations represent normal forms of human experience.”

However, some people believe you can change your gender identity or sexual orientation through therapy or other means. So-called “reparative therapy” or “transformational ministries” try to change or “cure” GLBTQ people. Reparative therapy, which is sometimes called “conversion therapy,” involves psychotherapy aimed at eliminating feelings of homosexuality. Transformational ministries use religion to try to change people. Groups like Exodus International try to “free” people from being queer by pointing them toward God. (For more information on aspects of religion and homosexuality, see Chapter 9 beginning on page 150.)
Reparative therapy and transformational ministries can be very destructive to queer people’s self-esteem because the goal is to convince those who are GLBTQ that their thoughts and feelings are wrong and unnatural. If you need help coming to terms with being GLBTQ, or if you just want someone to talk to, seeking therapy or counseling to discuss these issues is a good idea. But talk to someone who won’t try to make you feel like it’s wrong to be who you are. You don’t need to try to fix who you are, because nothing is wrong with you in the first place.

The National Gay and Lesbian Task Force Policy Institute published a report called “Youth in the Crosshairs: The Third Wave of Ex-Gay Activism.” The report details efforts by specific organizations to target GLBTQ teens and concludes, “There is a growing body of evidence that conversion therapy not only does not work, but also can be extremely harmful, resulting in depression, social isolation from family and friends, low self-esteem, internalized homophobia, and even attempted suicide.” Further, “Many conversion therapy clients were not informed about alternative treatment options, including therapy that could have helped them accept their sexual orientation.” The American Psychiatric Association has condemned reparative therapies, stating that attempts to transform gay or bisexual people into heterosexual people are pointless and often motivated by personal prejudices.

**BEEN THERE**

“When I first started to understand myself and tried to accept who I was, I was devastated. I remember a day when I took out my student Bible and searched for hours on homosexuality. When I finally found it, I was sobbing so hard I could barely breathe. There were a couple of passages that I thought were scolding me. They told me I was evil and hateful, that my kind is unforgiven and will forever burn. It was the harshest thing I had ever read. I probably prayed more within that week than I had ever prayed in my life. I begged for God to tell me if I was wrong and evil. I cried to myself, trying to get myself to believe that I’m not what they say I am. It took me a while to pull through that.” —Sonia, 19