



Nonbinary

Best practice guidelines

Recommended supplement: Pronouns and gender inclusive language

Content warning

Surgery is referenced (in-text only, no images).

Definitions

'Nonbinary' (or 'non-binary') refers to a gender that sits outside of the binary (male/female) genders. Nonbinary is an umbrella term; there are many genders, identities, and labels that exist beneath the term 'nonbinary'. Some people use several different labels, while others are just happy to use 'nonbinary'.

There are some abbreviations for nonbinary that you might have seen. The most common of these are **'nb'** and **'enby'**. It's recommended that you avoid using 'nb' because of its alternative meanings. 'Nb' is also used to mean 'non-black' in the context of 'non-black people of colour'. It is also recommended that you avoid using 'enby'. There are a lot of people who don't like the term, particularly when used by people who aren't non-binary themselves. Definitely avoid using all abbreviations for nonbinary in official copy.

Some nonbinary people also identify as 'trans' or 'transgender'. **Trans** is a term used to describe someone whose gender does not correspond with the sex they were assigned at birth. The opposite term is **'cisgender'** or **'cis'**, used for someone whose gender does correspond with the sex they were assigned at birth. You can use the word 'transgender/trans' as an adjective describing a person (e.g. 'transgender woman', 'trans girl', etc). 'Transgendered', 'a transgender', or 'transgenderers' are not grammatically correct usages of the term. Not all nonbinary people feel that 'trans' is a term that applies to them and it's up to individuals to determine this.

Other key terms

'Gender dysphoria', often simply referred to as **'dysphoria'**, is a term used to describe the feeling of discomfort when someone senses that their body, their gender presentation, or the way in which their



gender is perceived and described by others, does not match their gender identity. On the flipside, '**gender euphoria**' is a term that is used to describe the feeling of euphoria or elation someone feels when they are affirmed as their true gender.

'**AFAB/AMAB**' or '**DFAB/DMAB**' are initialisms for '**assigned female/male at birth**' or '**designated female/male at birth**'. Typically this terminology is only used in situations where it is specifically relevant, such as in medical situations.

These initialisms are much more accurate and respectful than phrases such as 'biological female/male', 'natal female/male', 'female/male-bodied', and 'born female/male' because it acknowledges:

- that sex is not the same as gender
- that the gender and sexual characteristics of a person may not be the same as when they were born
- that a person's sexual characteristics do not define whether their body is male or female; this gives people the autonomy to define their own bodies

Not all trans and nonbinary people are comfortable using this terminology. It is respectful to avoid asking questions about or referring to a person's assigned gender. You should always check how an individual prefers to be described, and avoid making assumptions about someone's sex as it was assigned at birth.

Deadnames

A '**birthname**' or '**deadname**' is the name that a nonbinary person used to go by but no longer uses. Often this name may be a source of discomfort or dysphoria for a nonbinary person.

Deadnames should not be used and should never be brought up without the nonbinary person's consent, as they are personal and private. Mentioning a nonbinary person's deadname can out them to people who do not know they are nonbinary, undermine the authenticity of their new name, and even put them in danger of violence or discrimination. The act of revealing a nonbinary person's deadname without their permission is often referred to as the verb '**deadnaming**'.

When representing nonbinary people in media, it is important to mirror the gravity of deadnames in relation to characters. Being flippant about revealing or asking about deadnames in media without any consequences is an inaccurate and potentially harmful portrayal, as it teaches the audience that this behaviour is acceptable.



Note that not every nonbinary person has legally changed their name from their deadname, for a number of reasons. It's a difficult process, and it's not always available to people. This is important to consider if you are involved in managing a workplace, organising an event, or otherwise are required to see a person's identification. A nonbinary person's legal identification may not match their name, and it is important to provide them with a safe space so that they are not required to have their deadname on official materials like email addresses or name tags. It is also important that event volunteers who are checking tickets against identification cards understand that there may be a mismatch between names and are respectful in dealing with this.

Direct language

Use direct language.

- Say 'Charlie is nonbinary', not 'Charlie identifies as nonbinary'
- Say 'Can I check what your pronouns are?' or 'What pronouns would you like me to use?', not 'What are your preferred pronouns?'

Terms like 'identifies as' or 'preferred' create distance between a person and their gender, and some people feel that it implies their gender is less valid.

Androgyny

We need to interrogate our assumptions about what 'gender neutral' is. Not all nonbinary people look androgynous! Some look more masc / masculine, and others are more femme / feminine.

An androgynous or non-androgynous appearance does not make somebody's nonbinary identity more or less valid.

Accessibility

Gender neutral bathrooms are incredibly important at venues. Don't just rely on the one disabled bathroom as a gender neutral option. Covering 'male' and 'female' bathroom signs at a venue with 'gender neutral with urinals' and 'gender neutral with hygiene bins' is a quick fix.



Non-permanent body modification

Binding

A **'binder'** is a chest compression garment worn to make the chest appear flatter. It can be worn by anybody but is often worn by transmasculine people to conceal their chest or to relieve dysphoria around their chest.

Flattening the chest is referred to by the verb **'binding'**. Other forms of binding have also been invented, such as TransTape, which is a medically safe tape that can flatten the chest.

Though there is no official medical advice around binding, it is generally agreed that the chest should not be bound for longer than **8-12 hours** as it can cause short-term and long-term pain and rib, lung, and skin damage, even when done safely. There are also forms of binding that can be very dangerous; one commonly represented in media is the use of elastic bandages (commonly the ACE brand elastic bandage) to wrap and constrict the chest, which can damage the skin, ribs, and lungs at a much higher rate than safer binding practices. **Consider avoiding representing these unsafe practices in your game unless the game addresses that they are unsafe**, as it may influence players to reproduce these practices in reality and cause themselves harm.

Tucking and padding

Many trans women and transfeminine nonbinary people tuck their genitals and pad their shape to create a more traditionally feminine appearance. However these are fairly private parts of one's presentation especially as they relate to genitals and shouldn't be portrayed without specific contextual advice from transfeminine team members or consultants.

Transitioning

Social

A **'social transition'** or **'socially transitioning'** is when a person transitions to living as their true gender in social settings, perhaps being referred to by a new name or new pronouns, changing the kind of clothes they wear, using makeup to change how others perceive their gender, and so on. This can be a sudden change or take place gradually, and trans people will often come out in some settings before others—for example, starting to use they/them pronouns and dressing differently around friends while continuing to present as a binary gender at work.



These social changes can relieve dysphoria and produce feelings of gender euphoria, and may make it easier to access medical transition in countries where medical gatekeepers require trans people to 'live in role' as their gender for a certain amount of time before referring them for hormones or surgery.

Medical

'**Medical transition**', or '**medically transitioning**', refers to any medical changes the person may make to relieve gender dysphoria, feel gender euphoria, and/or make their body align more with how they want to be perceived. **Not every trans person decides to or is able to medically transition**, and whether they do or not is a private concern.

There are various procedures that a nonbinary person may pursue:

- Hormone replacement therapy (HRT)
- Hormone or puberty blockers
- Top surgery if applicable
- Breast augmentation
- Bottom or lower surgery (varies from person to person)
- Hysterectomy (removal of the uterus) and/or oophorectomy (removal of the ovaries) if applicable
- Voice training/therapy
- Facial feminisation surgeries (FFS)

'**Hormone replacement therapy**', shortened to '**HRT**', may involve the use of testosterone, estradiol (estrogen), an anti-androgen, and/or progesterone, depending on the hormones naturally occurring in the individual's body and the effect they are trying to achieve.

Effects like inducing feminine or masculine secondary sexual developments and the halting of feminisation or masculinisation may not all occur or take longer to occur for some.

Some people may take HRT at a low dose to control which effects develop, and some may start taking it and stop for various reasons including accessibility, social safety, personal preference and ability to afford therapy. Although prescribing guidelines vary between countries and regions, it's very rare for anyone under 18 to be prescribed HRT for gender transition purposes (despite misconceptions that children are being rushed into medical transition). Instead, minors may be given reversible hormone blockers such as Lupron to allow them to delay puberty of any kind until they're older.

Some transmasculine people may decide to have '**gender affirmation surgery**' (much preferred to archaic



phrasing such as 'sex change surgery'). One is often referred to as '**top surgery**', which is another way of referring to a mastectomy, or removal of breast tissue to make the chest flatter. This surgery can be performed in many different ways that leave different kinds of scars.

Alternatively, some may choose to have a breast reduction instead of a full mastectomy.

'**GRS**' or '**Bottom surgery**' is another form of gender affirmation for transfeminine people, commonly known as genital surgery for trans women or transfeminine nonbinary people. It usually consists of either orchiectomy or vaginoplasty.

Hysterectomy is another option available for transmasculine medical transition. Some may seek this out as a treatment for dysphoria around periods and fertility; others are indifferent and may never have their uterus or ovaries removed; still others decide to keep their uterus and ovaries because they actively want to be able to conceive children.

Finally some nonbinary people may undergo voice training to make their voice sound closer to how they feel it should sound. Some also undergo vocal surgery to alter their vocal chords to achieve similar effects.

Questions to avoid

There are a number of key things to never ask somebody—whether they're nonbinary or not. These include:

- A person's gender assigned at birth
- Whether they have had surgery
- Whether they are on hormones, or have ever been on hormones
- Anything about their body composition
- What their deadname is, or any previous names they have gone by

Resources

gc2b

<https://www.gc2b.co/>

gc2b is a brand that makes transitional apparel for trans people including binders.

Mayo Clinic: Gender Dysphoria

<https://www.mayoclinic.org/diseases-conditions/gender-dysphoria/symptoms-causes/syc-20475255>



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Gender dysphoria, and related medical procedures and treatments

Tell Me Why: FAQ

<https://www.tellmewhygame.com/faq/>

Deadnames, and why *Tell Me Why* developers did not deadname their character Tyler.

Trans Pregnancy: Resources

<https://transpregnancy.leeds.ac.uk/resources/>

Information and resources about trans experiences with pregnancy.

TransTape

<https://transtape.life/>

TransTape is a brand of tape that can be used safely as a binder-alternative for trans people.

Tweet from @fae_femme

<https://twitter.com/u7traviolet/status/1001726055797829632?lang=en>

Information about why 'NB' should not be used for 'nonbinary' because of its existing definition as 'non-black'.

Tweet from @piecreature

<https://twitter.com/piecreature/status/1278172793075568641>

Top surgery scar variations

References

GLADD. 2016. 'Glaad Media Reference Guide'. GLAAD. Accessed 7 June 2021 from

<https://www.glaad.org/sites/default/files/GLAAD-Media-Reference-Guide-Tenth-Edition.pdf>

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