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# PART I

## SOGIESC AND LGBTI: THE BASICS

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## SOGIESC and LGBTI: The Basics

Sexual Orientation, Gender Identity and Expression and Sex Characteristics (**SOGIESC**) are characteristics, shared by all people. The term itself, "SOGIESC" is often used in the international arena to refer to critical components of sexuality and gender which are recognized under international human rights law. Lesbian, gay, bisexual, transgender and intersex (**LGBTI**) refers to the population whose SOGIESC does not conform to cultural expectations of gender and sexuality. Table 1 sets out the corresponding SOGIESC characteristics and LGBTI subpopulations.

SOGIESC Characteristics	LGBTI Populations
<p><b>SOGIESC</b> Abbreviation for sexual orientation (SO), gender identity and expression (GIE), and sex characteristics (SC).</p> <p>SOGIESC refers to a category of personal characteristics. Everyone has a sexual orientation, a gender identity and expressions, and sex characteristics.</p> <p>Prior to 2017, many people used the term SOGI, referring to sexual orientation and gender identity (e.g. the UN Independent Expert on SOGI, the World Bank Advisor on SOGI). A more comprehensive view of gender expression, as well as the inclusion of sex characteristics, was reflected in the 2017 update to the Yogyakarta Principles. Since then, most international advocates use SOGIESC.</p>	<p><b>LGBTI</b> Abbreviation for lesbian, gay, bisexual, transgender and intersex.</p> <p>LGBTI refers to the population whose SOGIESC characteristics do not conform to cultural expectations of gender and sexuality. Different cultures use different terms to describe people who have same-sex relationships or whose gender identity and expression does not fit a male-female model (such as hijra, meti, lala, skesana, motsoalle, mithli, kuchu, kawein, travesty, muxé, fa'afafine, fakaleiti, hamjensgara and two-spirit). It is not possible to include all these terms in a single abbreviation. Thus, the term LGBTI also refers to these groups even though they themselves may not use the term LGBTI to refer to themselves. When discussing a specific local population, it is preferable to use the terms used by that population.</p>
Gender Identity and Expression (GIE)	Cisgender Transgender Non-Binary Kathoei, Hijra, Muxes, Etc.
Sexual Orientation (SO)	Heterosexual Lesbian Gay Bisexual Men who have sex with men (MSM)/Women who have sex with women (WSW) Tom, Dii, Kuchu, Takatapui, Etc.
Sex Characteristics (SC)	Intersex

Table 1. SOGIESC characteristics and corresponding LGBTI subpopulations.

# 1. Sexual Orientation

Variations in sexuality can be found in all populations (World Medical Association 2013). However, in most countries, very little is known about non-heterosexual populations. Stigma and prejudice has limited the availability of unbiased data about sexual orientation. Until recent decades, homosexuality was considered a disease by most major Western medical authorities (American Psychological Association 2009). As of 2021, homosexuality is criminalized in 70 countries, in large part due to the proliferation of British colonial era laws banning sodomy (Mendos et al. 2020). The desire to prevent and cure people experiencing same-sex attraction and punish those who engage in same-sex sexual activity, has infused much of the research about homosexuality with an anti-LGBTI bias (Park 2016b).

In the mid-1900s, discourse in medicine and public policy began to shift from a focus on homosexuals, as a population, to a focus on sexual orientation, as a characteristic shared by all. By 1990, the World Health Organization had removed homosexuality from the international classification of diseases, and many countries, particularly those in Western Europe and the Americas, began to adopt laws banning discrimination based on sexual orientation. Countries have also begun to enact legal protections regarding gender recognition and some jurisdictions have begun to address the human rights of intersex people. While these advances have been accompanied by more efforts to research and gather data about LGBTI populations, huge gaps in knowledge still exist.

## A. Assessing Sexual Orientation

Sexual orientation is a multi-dimensional concept. Understanding a person's sexual orientation involves measurements of at least three different aspects of an individual's sexuality: Attraction, behavior, and identity (Wolff et al. 2017). Because sexuality is fluid, meaning that it can change throughout a person's life, any assessment of an individual's sexual orientation is based on a snapshot of these three dimensions taken at a particular point in time. Please refer to the section entitled [Data Collection](#) in [Appendix III](#). for more resources.

### 1. Attraction

Attraction to another person is a common, though certainly not universal, part of one's sexual experience. The attraction component of sexual orientation relates to whether a person is attracted to people of the same gender, or another gender, or both. Traditionally, these options have been framed as attraction to the 'same or opposite' gender, or both. Using the framing of 'same or different' gender recognized that male and female are not the only two gender options. One widely accepted practice for identifying a person's sexual orientation attraction uses information about their gender along with the answer to the following question:

People are different in their sexual attraction to other people. Which best describes your feelings? Are you:

- (a) Only attracted to females;
- (b) Mostly attracted to females;
- (c) Equally attracted to females and males;
- (e) Only attracted to males;
- (f) Not sure?

## 2. Behaviour

Behaviour refers to the gender of the person or persons with whom an individual has had sex. Knowing a person's gender, we can identify an individual's sexual orientation behaviour using the following question:

In the past (X time interval), who have you had sex with?

- (a) Men only;
- (b) Women only;
- (c) Both men and women;
- (d) I have not had sex.

These questions can be altered based on the purpose of the research. Asking about experience over a lifetime would capture those who have experimented. A five-year time interval might capture those who have occasional encounters. A twelve-month time period might exclude adults who are not highly sexually active, but might be more appropriate if the purpose of the research is about recent possible exposure to pregnancy involvement or sexually transmitted infections (STIs). There is a general consensus among researchers to not define the term "sex" but allow respondents to use their own definition. If the purpose of the research is about risk behaviors, questions about specific behaviors, and the frequency of them, might be included.

## 3. Identity

Sexual orientation identity refers to how an individual views their own sexual orientation in the context of their own life and society (Morandini, Blaszczyński, and Dar-Nimrod 2017). In some Western countries, such as Canada, nearly everyone identifies with at least one of the commonly used terms associated with Western sexual identities. Accordingly, Statistics Canada uses the following question on Canadian surveys:

What is your sexual orientation? Would you say you are:

- (a) Heterosexual or straight
- (b) Gay or lesbian
- (c) Bisexual
- (d) Or please specify

In societies that use different sexual identity terms, this survey item may not produce results that are relevant to the local populations. In many parts of the world, Indigenous identities have historic roots in cultural traditions. Examples include hijra (India), meti (Nepal), fa'afafine (Samoa), and injonga (Southern Africa). In many countries, people have created contemporary identities that are neither Western nor traditional, such as lala (China), Dii (Thailand), and Kuchu (Uganda). In many cases, the terms people use to describe their sexual orientation may be the same terms that are used to describe their gender, caste, or religion. Accordingly, any effort to assess sexual orientation must account for the existence of sexual orientation identities as they exist in the population being studied.

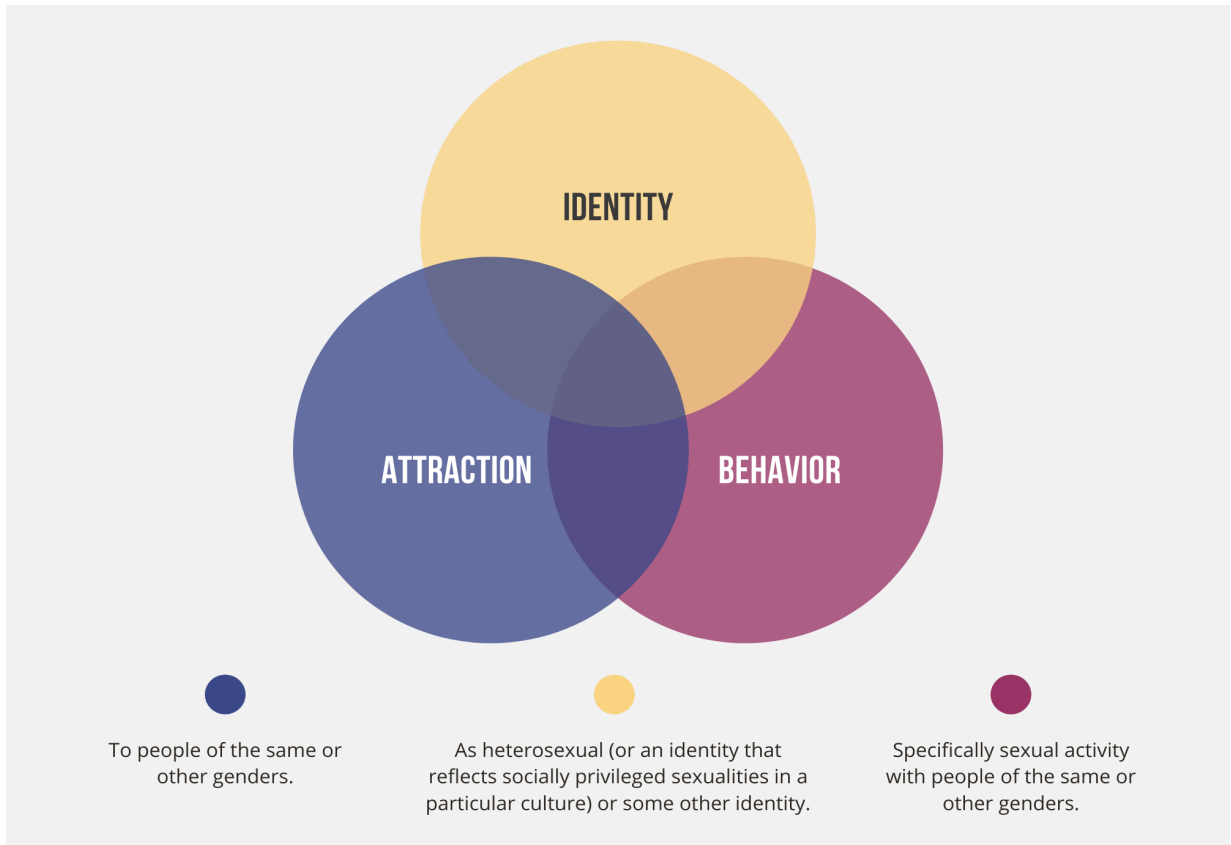


Figure 1. The three dimensions of sexual orientation.

## B. Populations According to Sexual Orientation

Empirical experience has shown that a same-sex orientation in one of the three components does not correlate to a same-sex orientation in the other two (Morgan 2013; Worthington and Reynolds 2009; Geary et al. 2018). For example, a person’s identity, which is entirely self-determined, may have no correlation to a person’s sexual behavior or feelings of attraction. A person who identifies herself as heterosexual has a heterosexual identity, regardless of the fact that she is not attracted to men and only has sex with women. Studies of men in Senegal, Uganda, and South Africa and China, reveal no link between behavior and identity (Larmarange et al. 2009; Baumle et al. 2013, 115-16). In fact, a recent study of MSM/WSW estimated that, globally, most people who have had same-sex sexual activity do not identify as such (Pachankis and Branstrom 2019).

Accordingly, same-sex sexual orientation can be classified into one of seven different configurations. Figure 2 provides an illustration of these configurations as well as examples of who might fit into each.

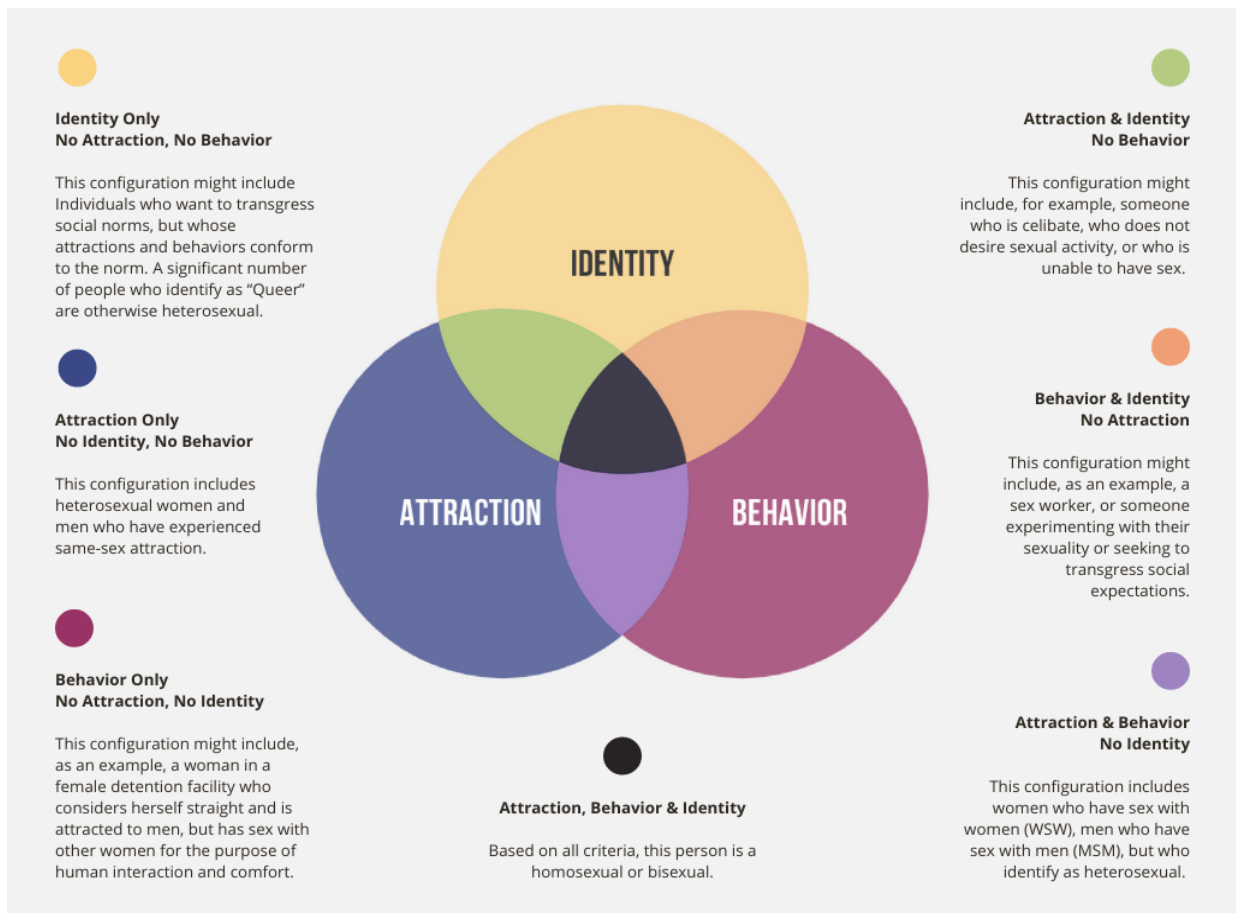


Figure 2. Seven configurations of sexual orientation.

## C. Gathering and Disaggregating Data

In the past decade, a small number of countries in the global north and south have begun to include questions about sexual orientation or same-sex household structure on national population surveys. However, the results of these surveys vary widely. The wording used in these surveys is not uniform and the results are often reported in a way that makes it unclear as to whether the survey measured sexual orientation identity, same-sex sexual behavior, or the experience of same-sex attraction. Additionally, the methods of administering the survey, known to influence the willingness of the respondents to reveal their sexual orientation by up to 65 percent, differs from survey to survey (Coffman, Coffman, and Ericson 2017).

Based on these surveys, estimates of the number of people who identify as a sexual minority range from roughly two to 5.5 percent (Conron and Goldberg 2020; Davis et al. 2017; Valfort 2017). Women are less likely than men to identify as homosexual, but more likely to identify as bisexual (Valfort 2017, 29). Estimates of the population that has engaged in same-sex sexual activity are often at least double the number of those who self-identify. Reliable estimates based on nationally representative data in countries with lower levels of stigma are in the ten to twelve percent range (Valfort 2017). One recent study estimated that in countries with higher levels of stigma, up to 94 percent of MSM and WSW continue to identify as heterosexual (Pachankis and Branstrom 2019).

Some people look to estimates of the MSM population to help assess the total number of sexual minorities. Ideally, governments submit estimates of the MSM population to UNAIDS as part of the effort to assess the impact of HIV on various subpopulations. However, these estimates are frequently derived using unreliable methods and may be purposely underestimated by a political desire to justify a lack of HIV/AIDS related programming. Experts have called these estimates “implausibly low” (Davis et al. 2017) and UNAIDS has said that the “effect of this undercount [on global totals] is substantial” (World Health Organization 2020).

## 2. Gender Diversity

### A. Separating Gender from Biology

Most people begin developing an inner sense of their own gender very early in life. This inner awareness influences how we express ourselves and how we want others to perceive us. For the majority of people, their gender, according to this inner awareness, is the same as the sex/gender they were assigned at birth. These people are referred to as cisgender, “cis” being the Latin prefix for same. Some people may develop an inner awareness that their true gender is different than the sex/gender they were assigned at birth. These people are referred to as transgender, “trans” being the Latin prefix for across or beyond.

### B. Beyond the Male/Female Binary

Gender is frequently categorized according to a binary of options: female or male. Indeed, some transgender people understand their gender to be male (if they were assigned female at birth), or female (if they were assigned male at birth). Some cultures recognize multiple genders, often because transgender people have a well recognized cultural history. For example, in North America, the niizh mandidoowag, or two-spirit people, date back before European contact. The high courts of Nepal, India and Pakistan have each established a third legal gender category based, in part, on a finding that transgender people have a strong historical presence in local religious cultures. In the Pacific region, the Fa’afafine occupy a third-gender role in traditional Samoan culture (Madrigal-Borloz 2018).

As social and structural stigma eases, many people around the world have begun to identify their gender according to more contemporary gender categories. For example, some people who do not feel comfortable with either of the two binary gender categories of male or female may identify themselves as non-binary. Statistics Canada reports that people have identified their gender using terms such as pangender and genderqueer (Statistics Canada 2021). As one feminist scholar put it, “[t]he insistence of diverse groups on naming themselves and achieving recognition of their distinctness and variety will go on as long as aspirations for democracy exist...” (Petchesky 2009).

### C. Self-Determination of Gender

Each person has the right to determine their own gender, according to international human rights standards (Madrigal-Borloz 2018). Increasingly, countries are adopting laws to ensure legal recognition of gender identity. Beginning with Nepal in 2011, roughly two dozen countries have granted at least limited recognition to a legal third gender. Other countries, led by a groundbreaking effort in Argentina, have adopted laws establishing a simplified process for name and gender change (Madrigal-Borloz 2018). As gender recognition is a rapidly evolving area of law, readers should refer to sources listed in the legal landscape section of Appendix III for an up-to-date listing of laws in each country. However, most people still live in countries where gender recognition is limited, and official documents often do not reflect everyone’s gender identity (Chaim et al. 2020). Accordingly, the most reliable way to determine someone’s gender is simply to ask them.



## D. Gathering and Disaggregating Data

Estimates of the transgender population are rare and vary widely. Most estimates based on how people self-identify range from 0.1 percent to 2.7 percent (Goodman et al. 2019; Valfort 2017, 31-32). One fundamental challenge to estimating transgender populations is the lack of a global standard for the wording of survey questions, lack of uniformity of survey administration methods (e.g., self-administered computer surveys or face to face), and widely varying levels of stigma.

Development practitioners depend on disaggregated data to monitor outcomes and evaluate programs. Thus, it is important to develop methods to identify and track transgender people at the program client/consumer level as well as at the national population level. One approach is to simply ask each person to identify their own gender. This approach respects the ability of each person to self-determine their own gender. While this may work in some contexts, the use of open ended questions on surveys poses two significant problems. First, an open ended question would not identify someone as transgender if they identify simply as male or female. Second, this approach risks creating a multitude of subgroup and data sets, some of which may be so small that they end up being excluded for purposes of statistical analysis. Thus, open-ended questions may result in an undercount of transgender people.

A similar approach would be to provide a range of options that reflect the genders represented in the community being surveyed. In Nepal, for example, research shows that only half of the transgender population identified as transgender, and others identified as male, female, or Meti or Kothi, two Indigenous transgender identities (Nezhad et al. 2014). Such an approach would require an initial assessment of the terms used by local transgender communities, as well as an assessment of the rate at which community members were adopting new, contemporary identities. As above, such an approach may fail to capture transgender people who identify as male or female.

Accordingly, many researchers employ a two-step approach using the following two questions:

1. What is your gender? (Variations might include a list of options, the most minimal would be the following:)
  - (a) male
  - (b) female
  - (c) other
  
2. What sex were you assigned at birth, such as on a birth or baptismal certificate? (Variations of this question in countries where births are not regularly documented might be "When you were born, did your family and caretakers raise you as if you were")
  - (a) male
  - (b) female

If the two answers are the same, the person is cisgender. If they differ, the person is transgender. Respondents could then be mapped according to the following groups (GenIUSS Group 2014).

WOMEN	<b>Cisgender women –</b> Female gender, female gender assigned at birth
	<b>Transgender women –</b> Female gender, male gender assigned at birth
MEN	<b>Cisgender men –</b> Male gender, male gender assigned at birth
	<b>Transgender men –</b> Male gender, female gender assigned at birth
NON-BINARY	<b>Non-binary –</b> Any gender other than male or female, any gender assigned at birth

However, as with all survey questions, one has to keep in mind the purpose of collecting data. If the purpose is to disaggregate and compare cisgender and transgender populations, this method provides a straightforward approach which can be easily adapted to multiple cultural settings. If the purpose is to compare particular subgroups of the transgender population to each other or to cisgender populations, then some other method might be required.

## 3. Sex Characteristics

In the past few years, issues related to sex characteristics and intersex people have become integrated into advocacy about sexual orientation and gender identity. The intersex community is a visible part of the LGBTI movement in the global south, possibly to a degree that exceeds its visibility in the global north. Due to the activism of intersex advocates in the global north and south, UN bodies that enforce treaties on torture, civil and political rights, the rights of children, and the rights of persons with disabilities have all recognized that intersex people face human rights violation and that States are obligated to prevent such violations from occurring (United Nations Office of the High Commissioner for Human Rights 2016; United Nations Committee on Economic Social and Cultural Rights 2016; United Nations Committee on the Rights of the Child 2019; Carpenter 2020).

### A. Understanding Intersex

The Office of the UN High Commissioner for Human Rights describes intersex people in the following way: “Intersex people are born with sex characteristics (including genitals, gonads and chromosome patterns) that do not fit typical binary notions of male or female bodies” (United Nations Office of the High Commissioner for Human Rights 2016b). Sex characteristics are physical features that correspond to cultural and medical notions of being male or female. This includes roughly two dozen physiological systems including the genitalia, reproductive anatomy, chromosomes, hormones, physical features emerging from puberty, and the shape and alignment of certain musculoskeletal systems. Most people have sex characteristics that all align with maleness, or that all align with femaleness.

Some people are born with one or more sex characteristics that do not align with the same sex. For instance, intersex infants might be born with external genitalia that does not match internal organs such as testes and ovaries. Congenital adrenal hyperplasia, a common cause of intersex among people with XX chromanones, produces masculine features, impacts fertility, and cause a variety of health problems. Androgen insensitivity syndrome is found in intersex people who were born with female-patterned genitalia, but lacking some internal female reproductive organs and having undescended testes.

Children born with atypical sex characteristics are often subjected to procedures commonly referred to as ‘sex normalizing,’ which attempt to make them conform to sex and gender stereotypes. These include medically unnecessary surgery and other procedures, performed without informed consent, and often leaving children with irreversible physical harm, infertility, and severe mental suffering (Physicians for Human Rights 2017). In some countries, such children are considered cursed and their families are persecuted (Office of the United Nations High Commissioner for Human Rights 2016a).

## B. Intersex, Gender, and Identity

Intersex status is distinct from gender. The premise that biology determines gender underlies the view that intersex constitutes a different gender. Because the bodies of intersex people include sex characteristics that are typically male as well as sex characteristics that are typically female, intersex people are sometimes described as having a gender that is neither completely male nor completely female. However, equating intersex with gender does not reflect the experience of intersex people themselves.

When a baby is born with sex characteristics that do not all align with one biological sex, the response is often to perform surgery and begin medical treatment for the purpose of assigning a sex. Often the expectation is that the child's gender will develop according to the sex that has been assigned to them through surgery. In reality, these interventions are frequently unsuccessful and children begin to express gender-related characteristics that are different from the sex they were assigned. Gender relates to a person's inner awareness of their own gender, as well as how they express that gender. Intersex people do not necessarily feel that their sex characteristics impact how they perceive their gender.

Intersex is primarily a physical characteristic, often revealed by an assessment of a person's physiology. Thus it is not primarily an identity. However, similar to being HIV positive or having a high IQ score, being intersex can be an identity if an individual wants others to know they are an intersex person.

## C. Intersex Populations

Estimates of the size of the intersex population come from studies of medical records. These studies look at the prevalence of conditions that are considered intersex. Estimates of the proportion of intersex people in the general population run from 0.5 percent as high as 4 percent (Blackless et al. 2000). Most of the variation in numbers is not a question of how many people have a particular condition, rather it is due to differences defining what kind of conditions are considered intersex. Intersex advocacy organizations, as well as the United Nations, cite studies that conclude that 1.7 percent of births are intersex (United Nations Office of the High Commissioner for Human Rights 2016a).



*Currently, governments in most developing countries do not collect data about LGBTI people, and only a few come close to having representative data about subgroups. Stigma, discriminatory laws, lack of resources, and the low status of women are all contributing factors to the lack of data about LGBTI people, particularly for sexual minority women and trans people. Without such data, it is not possible to measure health and economic disparities using the same methods used for other populations.*

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