Bisexuality
Presented by Kyle Danner
May 9, 2013
Some Disclaimers

- still grad student; not yet started actual counseling
  - I’m curious, how many practitioners have counseled a client who identifies as bisexual?

- limited exposure to the bi community

- significant attempt was made to focus on the bisexual and avoid information where the “B” was lumped in with the LG for convenience

- research for today’s presentation comes from a variety of resources including academic journals, books written by activists/commentators/practitioners, internet resources, newspaper, magazine articles, and non-profit/activist organizations;

- Power Point with notes and references will be emailed following presentation

- structure of presentation will be in two parts
  1. establish a context for conceptualizing bisexuality
     - hoping for this portion to be more conversational
  2. present findings on treating those who identify as bisexual in the counseling setting
Goal for this slide is to examine individual’s definition and potential limitations

How is attraction defined?
  Sexual, romantic, physical, intimate, etc?

Who is the attraction targeted to?
  To one gender or another reinforcing the gender binary

“Bi-“
  Reinforces the binary
  Possibly implies a choice must be made
My original understanding

Really comes from when I first came out and became involved in the community in the mid-90’s

Problems
• Reinforces gender binary
• Attraction is only at sexual level and does not consider other types of relationships

Kyle’s Definition

• Someone who is sexually attracted to both genders
I mention HRC since it’s our most visible advocacy organization, but its relationship with the bi- and trans community has been problematic which illustrates the stigma both communities still struggle with.

Pros

• Acknowledges that various ways in which relationships can exist (emotional, romantic, sexual etc)
• Acknowledges that attraction can be fluid
• Acknowledges that sexual identity is an ongoing process

Cons

• Reinforces the gender binary
Robyn Ochs’s Definition

Then:
“...I used to define bisexuality as ‘the potential to be attracted to people regardless of their gender.’”

Now:
“I call myself bisexual because I acknowledge in myself the potential to be attracted, romantically and/or sexually, to people of more than one sex, not necessarily at the same time, not necessarily in the same way, and not necessarily to the same degree.”

From: http://www.biresource.net/whatis.shtml

Robyn Ochs bio:

Robyn Ochs is a speaker, award-winning activist, and the editor of the 42-country anthology, Getting Bi: Voices of Bisexuals Around the World and the Bi Women newsletter. Her writings have been published in numerous bi, women's studies, multicultural, and LGBTQ anthologies.
Biresource.net is the website for the Bisexual Resource Center. It started as the East Coast Bisexual Network in 1985 in Boston, which can be considered the center of bi-activism much like San Francisco can be considered the center of gay activism.
More than “bisexual”

- pansexual
- fluid
- queer
- omnisexual
- ambisexual
- poly
- open
- “just sexual”

Why all this discussion about definitions?

- Shows the limitation of the term “bisexual”
  - Implies men and/or women
  - It’s all about sex and ignores the complexity of human relationships

- One commentator said she was fine with “bi-“ but hated “sexual” being in the term because it implied that sex was what it was all about

Consider the terms gay and lesbian

- “sex” is removed since we’re not using “homosexuality”
The next 2 graphs come from a 2011 paper published by The Williams Institute.

The Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy at UCLA School of Law advances law and public policy through rigorous, independent research and scholarship, and disseminates its work through a variety of education programs and media to judges, legislators, lawyers, other policymakers and the public.

Key findings from the study:

• An estimated 3.5% of adults in the United States identify as lesbian, gay, or bisexual and an estimated 0.3% of adults are transgender.

• This implies that there are approximately 9 million LGBT Americans, a figure roughly equivalent to the population of New Jersey.

• Among adults who identify as LGB, **bisexuals comprise a slight majority** (1.8% compared to 1.7% who identify as lesbian or gay).
Key findings cont’d:

- **Women are substantially more likely than men to identify as bisexual.** Bisexuals comprise more than half of the lesbian and bisexual population among women in eight of the nine surveys considered in the brief. Conversely, gay men comprise substantially more than half of gay and bisexual men in seven of the nine surveys.

- **Estimates of those who report any lifetime same-sex sexual behavior and any same-sex sexual attraction are substantially higher than estimates of those who identify as LGB.** An estimated 19 million Americans (8.2%) report that they have engaged in same-sex sexual behavior and nearly 25.6 million Americans (11%) acknowledge at least some same-sex sexual attraction.

  - This last point raises the complexity of behavior, attraction and self-identity

Discussion Question:
If there are twice as many, almost twice as many, bisexuals as LG, why are bisexual’s invisible? Last week Jason Collins came out as gay; name the last celebrity, athlete or public figure who came out as bisexual.

The myths contribute to the invisibility of bisexuals.

These myths “have legs.” They were mentioned repeatedly in both academic and popular literature.

They’re not accepted by the straight community and not really by the LG community; we use terms like “LGBT” to roll up everyone into a nice category, but so often was just say the gay community, or lesbian and gay community.

The myth about being conduits of STIs/STDs goes back to the early years of AIDS and to the more present day “men on the down low”; when this charge is made, we’re essentially saying behavior and identity are the same thing when they’re not

Bi relationships are just as complex as gay and lesbian relationships, or not; some bisexuals want monogamy with their current partner, or they may want poly relationships; yet “poly” is about negotiating the structure of the relationship in an open and honest way;

We judge people’s sexual orientation based on his/her partner
   If you see a man/woman at dinner, what’s your assumption?
   If you see two women at dinner, what’s your assumption?
   If you see two men at dinner, what’s your assumption?
So what do we take from all this?

We have to check our own assumptions about “bisexuality”
• Understatement of the year; easier said than done
• One study of 108 therapists found a specific risk in viewing bisexual clients as conflicted and confused (Mohr, Weiner, Chopp & Wong, 2009)
• Another study of 122 therapists found that clinicians may be likely to hold more negative stereotypes of bisexual men (Mohr, Chopp, & Wong, 2013)
• Going back to the previous slide, I never considered that we judge people’s sexual orientation based on his/her partner; man/women implies a heterosexual relationship etc
• How we define “relationship”
  • More than sexual
• What terms does one use to define himself or herself
• The literature is lacking in specifically working with bisexual clients in the counseling setting; most of the time, “bi” is wrapped up with LG; that’s problematic considering the stigma experienced from the lesbian, gay and straight community;
Methodology

- 49 item questionnaire
- Multiple choice and open-ended
- 217 bi-sexual identified women (71%) and men (29%) responded

General therapeutic qualities

- These include the class Rogerian qualities of empathetic understanding and unconditional positive regard

Therapist must be knowledgeable about bisexual issues

- Includes knowledge of issues around the label “bi-sexual”
- The variety of ways in which bisexuals may construct relationships including polyamory

Active interventions are needed

- Simply being passive left the client wondering whether the therapist was affirming or not
- Positively affirming the client’s bisexuality, and the client’s experience as an individual encouraged the client to share more and to be more open;

Study participant suggestions

- Basic tools of respect, empathy, positive inquisitiveness, and a bias towards client’s unfolding sexual identity
- Client and counselor must take a more active stance of exploring sexual identity, perhaps more so than hetero or homosexual
- Counselors must be aware of internalized biphobia
- Counselors must find creative ways to strengthen client’s positive self-identity
Might be useful for a client questioning his or her own identity
Builds upon Kinsey’s scale
Provides a structure for exploring the various levels of relationships and attractions

Does anyone see a particular issue with this?
It reinforces the gender binary

Remember it was developed in the late ’70s and early ’80s

Therefore, consider developing guiding questions rather than simply handing the client the grid to complete.
Additional Considerations

- Validate how the client self identifies
- Offer possibilities for the interpretation of feelings towards others
- Feeling does not have to imply being
- Give clients permission to see their attractions changing over the lifespan

• Much of this is classic Carl Rogers, unconditional positive regard and empathetic understanding
• Mirror their language
• “Attractions to others can be interpreted as in many platonic affection, admiration, sexual attraction, friendship, or any number of possibilities” (Rust, 2007, p. 23)
• Simply because someone has feelings does not mean they are part of one’s sexual identity.
Possible Presenting or Hidden Issues

- Loss and grief related to former straight or lesbian/gay identity
  - May have to “come out” again
  - May lose some friends

- Feelings of having betrayed a spouse or partner upon discovery of new identity
  - May feel guilt for not being honest about identity in the first place
  - May feel guilt about discovering this new identity
  - Critical to remember that this may happen in a straight or LG relationship

- Balancing monogamy with nonmonogamy
  - May want to explore a relationship with someone of a different gender
    - What does explore mean – sexual, emotional etc?

- Internalized biphobia
  - Lack of role models or social opportunities may reinforce being bi as bad
  - Socializing is often tied to partner’s identity

- Relational difficulties
  - Partner may see the relationship as tenuous given client’s orientation; the partner cannot compete with someone of the opposite gender
  - Partner may feel betrayed, especially if the identity is realized after being together, or being married for some time
Possible Techniques

- Klein Sexual Orientation Grid
- Cognitive-Behavioral Therapy from LGBT perspective
- Subself Dialogue
- Your office environment

Martell, Saffren and Prince’s book, *Cognitive Behavioral Therapies with Lesbian, Gay, and Bisexual Clients*

Subself Dialogue
- Typically done in group since group members can assume different roles, but can be done with therapist
- Can also be used through empty-chair dialogue
- Essentially, the client’s specific part of self emerges
  - The part is affirmed and welcomed
  - The part is given a name by the client
  - Facilitator may ask questions like “How do you feel about your name? What do you like sexually? etc”
  - Helpful to explore at least two parts of self and let the parts dialogue with one another.

Your office environment – are bisexual resources (books, brochures) easily seen
- It’s a subtle but re-affirming way to acknowledge to your client that it’s okay to discuss bisexuality
I first heard this term at ACA’s convention in Cincinnati at an ALGBTIC meeting.

Affectional Orientation:
• “Orientation toward the type of person with whom a given individual is predisposed to bond emotionally and share personal affection.”

This is an important concept from the asexual community (who I did not mention) and is gaining some ground.
Academic References


Popular References

Books

Online Resources
How many people are
lesbian, gay, bisexual,
and transgender?

by Gary J. Gates, Williams Distinguished Scholar

April 2011

Executive Summary

Increasing numbers of population-based surveys in the United States and across the world include questions that allow for an estimate of the size of the lesbian, gay, bisexual, and transgender (LGBT) population. This research brief discusses challenges associated with collecting better information about the LGBT community and reviews eleven recent US and international surveys that ask sexual orientation or gender identity questions. The brief concludes with estimates of the size of the LGBT population in the United States.

Key findings from the research brief are as follows:

- An estimated 3.5% of adults in the United States identify as lesbian, gay, or bisexual and an estimated 0.3% of adults are transgender.
- This implies that there are approximately 9 million LGBT Americans, a figure roughly equivalent to the population of New Jersey.
- Among adults who identify as LGB, bisexuals comprise a slight majority (1.8% compared to 1.7% who identify as lesbian or gay).
- Women are substantially more likely than men to identify as bisexual. Bisexuals comprise more than half of the lesbian and bisexual population among women in eight of the nine surveys considered in the brief. Conversely, gay men comprise substantially more than half of gay and bisexual men in seven of the nine surveys.
- Estimates of those who report any lifetime same-sex sexual behavior and any same-sex sexual attraction are substantially higher than estimates of those who identify as LGB. An estimated 19 million Americans (8.2%) report that they have engaged in same-sex sexual behavior and nearly 25.6 million Americans (11%) acknowledge at least some same-sex sexual attraction.
- Understanding the size of the LGBT population is a critical first step to informing a host of public policy and research topics. The surveys highlighted in this report demonstrate the viability of sexual orientation and gender identity questions on large national population-based surveys. Adding these questions to more national, state, and local data sources is critical to developing research that enables a better understanding of the understudied LGBT community.
Introduction

Increasing numbers of population-based surveys in the United States and across the world include questions designed to measure sexual orientation and gender identity. Understanding the size of the lesbian, gay, bisexual, and transgender (LGBT) population is a critical first step to informing a host of public policy and research topics. Examples include assessing health and economic disparities in the LGBT community, understanding the prevalence of anti-LGBT discrimination, and considering the economic impact of marriage equality or the provision of domestic partnership benefits to same-sex couples. This research brief discusses challenges associated with collecting better information about the LGBT community and reviews findings from eleven recent US and international surveys that ask sexual orientation or gender identity questions. The brief concludes with estimates of the size of the LGBT population in the United States.

Challenges in measuring the LGBT community

Estimates of the size of the LGBT community vary for a variety of reasons. These include differences in the definitions of who is included in the LGBT population, differences in survey methods, and a lack of consistent questions asked in a particular survey over time.

In measuring sexual orientation, lesbian, gay, and bisexual individuals may be identified strictly based on their self-identity or it may be possible to consider same-sex sexual behavior or sexual attraction. Some surveys (not considered in this brief) also assess household relationships and provide a mechanism of identifying those who are in same-sex relationships. Identity, behavior, attraction, and relationships all capture related dimensions of sexual orientation but none of these measures completely addresses the concept.

Defining the transgender population can also be challenging. Definitions of who may be considered part of the transgender community include aspects of both gender identities and varying forms of gender expression or non-conformity. Similar to sexual orientation, one way to measure the transgender community is to simply consider self-identity. Measures of identity could include consideration of terms like transgender, queer, or genderqueer. The latter two identities are used by some to capture aspects of both sexual orientation and gender identity.

Similar to using sexual behaviors and attraction to capture elements of sexual orientation, questions may also be devised that consider gender expression and non-conformity regardless of the terms individuals may use to describe themselves. An example of these types of questions would be consideration of the relationship between the sex that individuals are assigned at birth and the degree to which that assignment conforms with how they express their gender. Like the counterpart of measuring sexual orientation through identity, behavior, and attraction measures, these varying approaches capture related dimensions of who might be classified as transgender but may not individually address all aspects of assessing gender identity and expression.

Another factor that can create variation among estimates of the LGBT community is survey methodology. Survey methods can affect the willingness of respondents to report stigmatizing identities and behaviors. Feelings of confidentiality and anonymity increase the likelihood that respondents will be more accurate in reporting sensitive information. Survey methods that include face-to-face interviews may underestimate the size of the LGBT community while those that include methods that allow respondents to complete questions on a computer or via the internet may increase the likelihood of LGBT respondents identifying themselves. Varied sample sizes of surveys can also increase variation. Population-based surveys with a
larger sample can produce more precise estimates (see SMART, 2010 for more information about survey methodology).

A final challenge in making population-based estimates of the LGBT community is the lack of questions asked over time on a single large survey. One way of assessing the reliability of estimates is to repeat questions over time using a consistent method and sampling strategy. Adding questions to more large-scale surveys that are repeated over time would substantially improve our ability to make better estimates of the size of the LGBT population.

How many adults are lesbian, gay, or bisexual?
Findings shown in Figure 1 consider estimates of the percentage of adults who self-identify as lesbian, gay, or bisexual across nine surveys conducted within the past seven years. Five of those surveys were fielded in the United States and the others are from Canada, the United Kingdom, Australia, and Norway. All are population-based surveys of adults, though some have age restrictions as noted.

The lowest overall percentage comes from the Norwegian Living Conditions Survey at 1.2%, with the National Survey of Sexual Health and Behavior, conducted in the United States, producing the highest estimate at 5.6%. In general, the non-US surveys, which vary from 1.2% to 2.1%, estimate lower percentages of LGB-identified individuals than the US surveys, which range from 1.7% to 5.6%.

While the surveys show a fairly wide variation in the overall percentage of adults who identify as LGB, the proportion who identify as lesbian/gay versus bisexual is somewhat more consistent (see Figure 2). In six of the surveys, lesbian- and gay-identified individuals outnumbered bisexuals. In most cases, these surveys were roughly 60% lesbian/gay versus 40% bisexual. The UK Integrated Household Survey found the proportion to be two-thirds lesbian/gay versus one-third bisexual.
The National Survey of Family Growth found results that were essentially the opposite of the UK survey with only 38% identifying as lesbian or gay compared to 62% identifying as bisexual. The National Survey of Sexual Health and Behavior and the Australian Longitudinal Study of Health and Relationships both found a majority of respondents (55% and 59%, respectively) identifying as bisexual.

The surveys show even greater consistency in differences between men and women.

**Figure 2.** Percent of adults who identify as gay/lesbian versus bisexual.

**Figure 3.** Percent of adults who identify as lesbian/gay versus bisexual, by sex.
associated with lesbian/gay versus bisexual identity. Women are substantially more likely than men to identify as bisexual. Bisexuals comprise more than half of the lesbian and bisexual population among women in eight of the nine surveys considered (see Figure 3). Conversely, gay men comprise substantially more than half of gay and bisexual men in seven of the nine surveys.

Four of the surveys analyzed also asked questions about either sexual behavior or attraction. Within these surveys, a larger fraction of adults report same-sex attractions and behaviors than self-identify as lesbian, gay, or bisexual (see Figure 4). With the exception of the Norwegian survey, these differences are substantial. The two US surveys and the Australian survey all suggest that adults are two to three times more likely to say that they are attracted to individuals of the same-sex or have had same-sex sexual experiences than they are to self-identify as LGB.

How many adults are transgender?

Population-based data sources that estimate the percentage of adults who are transgender are very rare. The Massachusetts Behavioral Risk Factor Surveillance Survey represents one of the few population-based surveys that include a question designed to identify the transgender population. Analyses of the 2007 and 2009 surveys suggest that 0.5% of adults aged 18-64 identified as transgender (Conron 2011).

The 2003 California LGBT Tobacco Survey found that 3.2% of LGBT individuals identified as transgender. Recall that the 2009 California Health Interview Survey estimates that 3.2% of adults in the state are LGB. If both of these estimates are true, it implies that approximately 0.1% of adults in California are transgender.

Several studies have reviewed multiple sources to construct estimates of a variety of dimensions of gender identity. Conway (2002) suggests that between 0.5% and 2% of the population have strong feelings of being transgender and between 0.1% and 0.5% actually take steps to transition from one gender to another. Olyslager and Conway (2007) refine Conway’s original estimates and posit that at least 0.5% of the population has taken some steps toward transition. Researchers in the United Kingdom (Reed, et al., 2009) suggest that perhaps 0.1% of adults are transgender (defined again as those who have transitioned in some capacity).

Notably, the estimates of those who have transitioned are consistent with the survey-based estimates from California and Massachusetts. Those surveys both used questions that implied a transition or at least discordance between sex at birth and current gender presentation.
How many lesbian, gay, bisexual and transgender people are there in the United States?

Federal data sources designed to provide population estimates in the United States (e.g., the Decennial Census or the American Community Survey) do not include direct questions regarding sexual orientation or gender identity. The findings shown in Figure 1 suggest that no single survey offers a definitive estimate for the size of the LGBT community in the United States.

However, combining information from the population-based surveys considered in this brief offers a mechanism to produce credible estimates for the size of the LGBT community. Specifically, estimates for sexual orientation identity will be derived by averaging results from the five US surveys identified in Figure 1.

Separate averages are calculated for lesbian and bisexual women along with gay and bisexual men. An estimate for the transgender population is derived by averaging the findings from the Massachusetts and California surveys cited earlier.

It should be noted that some transgender individuals may identify as lesbian, gay, or bisexual. So it is not possible to make a precise combined LGBT estimate. Instead, Figure 5 presents separate estimates for the number of LGB adults and the number of transgender adults.

The analyses suggest that there are more than 8 million adults in the US who are LGB, comprising 3.5% of the adult population. This is split nearly evenly between lesbian/gay and bisexual identified individuals, 1.7% and 1.8%, respectively. There are also nearly 700,000 transgender individuals in the US. Given these findings, it seems reasonable to assert that approximately 9 million Americans identify as LGBT.

Figure 5. Percent and number of adults who identify as LGBT in the United States.
Averaging measures of same-sex sexual behavior yields an estimate of nearly 19 million Americans (8.2%) who have engaged in same-sex sexual behavior.\textsuperscript{1} The National Survey of Family Growth is the only source of US data on attraction and suggests that 11% or nearly 25.6 million Americans acknowledge at least some same-sex sexual attraction.\textsuperscript{2}

By way of comparison, these analyses suggest that the size of the LGBT community is roughly equivalent to the population of New Jersey. The number of adults who have had same-sex sexual experiences is approximately equal to the population of Florida while those who have some same-sex attraction comprise more individuals than the population of Texas.

The surveys highlighted in this report demonstrate the viability of sexual orientation and gender identity questions on large-scale national population-based surveys. States and municipal governments are often testing grounds for the implementation of new LGBT-related public policies or can be directly affected by national-level policies. Adding sexual orientation and gender identity questions to national data sources that can provide local-level estimates and to state and municipal surveys is critical to assessing the potential efficacy and impact of such policies.

\textsuperscript{1} This estimate uses data from the National Survey of Family Growth and the General Social Survey.

\textsuperscript{2} Since the NSFG data only survey 18-44 year olds, this estimate assumes that patterns in this group are the same for those aged 45 and older. It may be that older adults are less likely to report same-sex attraction. If so, this estimate may somewhat overstate same-sex attraction among all adults.
References

Australian Longitudinal Study of Health and Relationships. Australian Research Centre in Sex, Health and Society, La Trobe University, Wave 1 Summary, 2005.


Note: This report includes estimates cited from the National Epidemiological Survey on Alcohol Related Conditions and the National Survey of Sexual Health and Behavior.


About the Author

Gary J. Gates, PhD is the Williams Distinguished Scholar at the Williams Institute, UCLA School of Law. He studies the demographic and economic characteristics of the LGBT population.

About the Institute

The Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy at UCLA School of Law advances law and public policy through rigorous, independent research and scholarship, and disseminates its work through a variety of education programs and media to judges, legislators, lawyers, other policymakers and the public. These studies can be accessed at the Williams Institute website.

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Bisexuality: Myths and Realities

Sexuality runs along a continuum. It is not static, but rather has the potential to change throughout one's lifetime, and varies infinitely among people. We cannot fit our sexuality into nice neat categories that determine who and what we are.

**Myth**  Bisexuality does not really exist. People who consider themselves bisexuals are going through a phase, or are confused or undecided. Ultimately they'll settle down and realize they're either homosexual or heterosexual.

**Reality**  Some people go through a transitional period of bisexuality on their way to adopting a lesbian/gay or heterosexual identity. For many others bisexuality remains a long-term orientation. For some bisexuals, homosexuality was a transitional phase in their coming out as bisexuals. Many bisexuals may well be confused, living in a society where their sexuality is denied by homosexuals and heterosexuals alike, but that confusion is a function of oppression. Fence sitting is a misnomer; there is no "fence" between homosexuality and heterosexuality except in the minds of people who rigidly divide the two.

**Myth**  People who consider themselves bisexual are really heterosexual, but are experimenting/playing/trying to be cool/liberated/trendy/politically correct.

**Reality**  Whether an individual is an experimenting heterosexual or a bisexual depends on how s/he defines her/himself, rather than on some external standard. While there certainly are people for whom bisexual behavior is trendy, this does not negate the people who come to a bisexual identity amidst pain and confusion and claim it with pride.

**Myth**  People who consider themselves bisexuals are actually lesbian/gay, but haven't fully accepted themselves and finished coming out of the closet (acknowledging their attraction to people of the same gender).

**Reality**  Bisexuality is a legitimate sexual orientation. Many bisexuals are completely out of the closet, but not on the lesbian/gay community's terms. In this regard, it is worth noting that many lesbians and gay men are not completely out of the closet and their process is generally respected. It is also worth noting that the lesbian/gay community whose "terms" are in question here has tended to be white and middle class, and the terms may be quite different for working class lesbians, gays of color, etc. Bisexuals in this country share with lesbians and gays the debilitating experience of heterosexism (the assumption that everyone is heterosexual and thereby rendering other sexual identities deviant and/or invisible) and homophobia (the hatred, fear, and discrimination against homosexuals).
**Myth**

Bisexuals are shallow, narcissistic, untrustworthy, hedonistic, and immoral.

**Reality**

This myth reflects our culture's ambivalence over sex and pleasure. The "sex" in bisexuality gets overemphasized, and our culture projects onto bisexuals its fascination with and condemnation of sex and pleasure.

**Myth**

Bisexual means having concurrent lovers of both sexes.

**Reality**

Most bisexuals are primarily attracted to either men or women, but do not deny the lesser attraction, whether or not they act on it. Some bisexuals are never sexual with women, or men, or either. Bisexuality is about dreams and desires and capacities as much as it is about acts. Bisexuals are people who can have lovers of either sex, not people who must have lovers of both sexes. Some bisexual people may have concurrent lovers, but bisexuals do not need to be with both sexes in order to feel fulfilled.

**Myth**

Bisexuals are promiscuous hypersexual swingers who are attracted to every woman and man they meet. Bisexuals cannot be monogamous, nor can they marry or live in traditional committed relationships. They can't be celibate.

**Reality**

Bisexual people have a range of sexual behaviors. Like lesbians, gays or heterosexuals, some have multiple partners, some have one partner, and some go through their entire lives or certain periods without any partners. Promiscuity is no more prevalent in the bisexual population than in other groups of people.

**Myth**

Bisexuals spread AIDS to the lesbian and heterosexual communities.

**Reality**

The myth above allows discrimination against bisexuals to be legitimized. The label "bisexual" simply refers to sexual orientation. It says nothing about whether one practices safe sex or not. AIDS occurs in people of all sexual orientations. AIDS is contracted through unsafe sexual practices, shared needles, and contaminated blood transfusions. Sexual orientation does not "cause" AIDS.

**Myth**

Politically speaking, bisexuals are traitors to the cause of lesbian/gay liberation. They pass as heterosexual to avoid trouble and maintain heterosexual privilege.

**Reality**

Obviously there are bisexuals who pass as heterosexual to avoid trouble. There are also many lesbians and gays who do this. To "pass" for heterosexual and deny the part of you that loves people of the same gender is just as painful and damaging for a bisexual as it is for a lesbian or gay person. Politicized bisexuals remain aware of heterosexual privilege and are committed enough to lesbian/gay/bisexual rights not to just abandon lesbian/gay communities when in heterosexual relationships.
Myth  Bisexual women will always leave their lesbian lovers for men.

Reality  Although this does sometimes happen, bisexual women also have good, long-term relationships with lesbians. There are bisexuals for whom bisexuality is a phase; there are also lesbians for whom lesbianism is a phase. There are bisexuals and lesbians who never really come to grips with their sexuality and internalized homophobia. Bisexual women who truly accept themselves and their sexuality will leave a relationship - with a woman or a man - when it no longer works for them. As hard as it is to get clear about the reasons a relationship may end, and as many challenges as lesbian relationships in particular may face, the notion that bisexual women can't handle lesbian relationships is just a stereotype.

Myth  Bisexuals get the best of both worlds and a doubled chance for a date on Saturday night.

Reality  Combine our society's extreme heterosexism and homophobia with lesbian and gay hesitance to accept bisexuals into their community, and it might be more accurate to say that bisexuals get the worst of both worlds. As to the doubled chance for a date theory, that depends more upon the individual's personality than it does upon her/his bisexuality. Bisexuals don't radiate raw sex any more than do lesbians, gays, or heterosexuals. If a bisexual woman has a hard time meeting people, her bisexuality won't help much.

Myth  Bisexuals are desperately unhappy, endlessly seeking some kind of peace that they cannot ever find.

Reality  Like lesbians and gay men who have been told that they will live awful lives, bisexuals can respond that much of the pain comes from oppression. People concerned about the "awful lives" of bisexuals should join the fight against homophobia.

It is important to remember that "bisexual," "lesbian," "gay," and "heterosexual" are labels created by homophobic, biphobic, heterosexist society to separate and alienate us from each other. We are all unique and don't fit into distinct categories. We sometimes need to use these labels for political reasons and to increase our visibility. Acknowledging and accepting the differences and seeing the beauty in our diversity facilitates our sexual esteem.

*Excerpted and altered from Sharon Sumpter's and Amanda Udis-Ressler's pieces on the myths and realities of bisexuality. Both Sumpter and Udis-Ressler are self-identified bisexuals.
Introduction

New concepts and new research offer opportunities to change the way people understand and conceptualize sexual orientation. This article explains how we use these ideas in teaching about sexual minorities.

Bobbi Keppel has tested this material with many groups in the last year. Whether they are heterosexual, homosexual, or bisexual, many of the attendees report thinking differently about sexual orientation after these presentations. They say they are able to ask questions and discuss sexual orientation more easily when they use the common vocabulary and the model shown here. Frequently, this is the first time that people with several different identities have been able to find their commonalities and discuss their experiences and differences with understanding and acceptance.

The Klein Scale (Figure 3) and directions for filling it out (Using the Klein Scale) are grouped together in this file.

Use of a 3-dimensional visual model helps people see how sexual orientation is a complex construct made up of several different aspects or components. These aspects of sexual orientation may be represented either as cards which form a deck, or as slabs which form a block (see Figure 3).

In an intimate workshop setting, we encourage attendees to fill in a copy of the Klein scale, and ask those who are comfortable doing so to share their choices. There are usually enough interesting differences among people who share a sexual identity, and enough similarities between people who have different sexual identities, that many of the concepts in the Implications and Points to Make section at the end of this article are illustrated very clearly. In a less intimate setting, such as a lecture presentation, we bring up the points that we want people to hear and see. We then send them away with a copy of the Klein scale to mull over.

The rest of this article is the text of our presentation, including points to make during each presentation. Drawing figures freehand on a chalk board or overhead projector during the presentation makes it more visually interesting and encourages questions from and interaction with the attendees.
Kinsey

For many of us, our first concept of sexual orientation was simply that everyone was either heterosexual or homosexual. Period.

The Kinsey Heterosexual-Homosexual Scale provided our first reconceptualization of sexual orientation. On the Kinsey scale, sexual behavior is represented as a continuum from exclusively heterosexual to exclusively homosexual (see Figure 1.) To make it easier to quantify behavior for research purposes, the scale has 7 equal, numbered intervals, but it is a continuum and in-between points (such as 1.5 or 2.67) may be used.

Using the Kinsey Scale

To use the Kinsey scale, choose a point on the continuum which corresponds to your relative amounts of sexual experiences with the same sex and with the other sex in your life up to now.

Klein[2]

When Fritz Klein et al. extended the conceptualization of sexual orientation far beyond Kinsey's earlier work, they offered us a chance to broaden our understanding further.[3]

The Klein Sexual Orientation Grid uses 7 classifications (the same number as Kinsey) and uses less emotionally "loaded" reference point descriptions (see Figure 2.)

Figure 1: Kinsey Heterosexual-Homosexual Scale

Figure 2: Klein Sexual Orientation Scale
Klein examines the element of time in more detail than Kinsey. He asks about sexual behavior during the *present* (the most recent 12 months,) the *past* (up to 12 months ago,) and the *ideal* (which is as close as one can get to intention and prediction of future behavior.) At this point in a presentation, we draw two more scales, and label the three scales *Past, Present, and Ideal* (see Figure 3).

The biggest change from previous work is Klein's inclusion of many aspects of sexual orientation in addition to sexual behavior. These include *sexual attraction, sexual fantasies, emotional preference, social preference, lifestyle preference,* and *sexual identity.* (Keppel and Hamilton add *political identity,* and both Klein and Keppel and Hamilton have refined the reference point descriptions to be successively more descriptive and less emotionally "loaded.")[4]

We represent the aspects of sexual orientation as a stack of cards (see Figure 3.) Each card represents a particular aspect of sexual orientation (sexual attraction, social preference, etc.) Each card has three time scales (past, present, ideal.) Taken together, a deck of cards gives a view of several aspects of a person's sexual orientation over time, and can be used as a basis for discussing sexual orientation and identifying commonalities and differences.
Figure 3: Aspects of Sexual Orientation
(adapted from Fritz Klein by Bobbi Keppel and Alan Hamilton)

Key: Choice of partner or associate
1. Other sex only
2. Other sex mostly
3. Other sex somewhat more
4. Both sexes equally
5. Same sex somewhat more
6. Same sex mostly
7. Same sex only

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<thead>
<tr>
<th>Sexual Attractions</th>
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<tr>
<td>Ideal</td>
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<th>Sexual Fantasies</th>
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<td>Ideal</td>
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<th>Social Preference</th>
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<td>1 2 3 4 5 6 7</td>
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Using the Klein Scale

To use the Klein scale, on each card choose one point on each of the three time scales. Each scale represents a continuum, so you may pick points which are not at any of the reference points. For instance, if you feel that you are halfway between reference points 1 and 2 on a scale, you can describe that as 1.5 or 1-1/2.

The time scales are:

Past: Your life up to 12 months ago.
Present: The most recent 12 months
Ideal: What do you think you would eventually like?
For this explanation of the aspects of sexual orientation, we start with the card at the top of the page (the rear-most card in the deck), and work our way forward:

**Sexual Attraction:** To whom are you sexually attracted?

**Sexual Behavior:** With whom have you actually had sex?

**Sexual Fantasies:** Whom are your sexual fantasies about? (They may occur during masturbation, daydreaming, as part of real life, or purely in your imagination.)

**Emotional Preference:** Emotions influence, if not define, the actual physical act of love. Do you love and like only members of the same sex, only members of the other sex, or members of both sexes.

**Social Preference:** Social preference is closely allied with but often different from emotional preference. With members of which sex do you socialize?

(different reference point descriptions are used for the remaining aspects.)

**Lifestyle Preference:** What is the sexual identity of the people with whom you socialize? (Add "All" as a choice for each scale on this card.)

**Sexual Identity:** How do you think of yourself?

**Political Identity:** Some people describe their relationship to the rest of society differently than their personal sexual identity. For instance, a woman may have a *heterosexual* sexual identity, but a *lesbian* political identity. How do you think of yourself politically?

------- End Figure 3: Aspects of Sexual Orientation -------

**Implications and Points To Make**

Sexual identity (how people think of themselves) sometimes has little to do with their sexual behavior. Three different people may have the same distribution of sexual behavior in the past and/or present, but have three different sexual identities: homosexual, bisexual, or heterosexual. This may be confusing at first, but is important to remember. This point is often useful in helping people to understand that just because someone has a different sexual identity does not necessarily mean that that person's sexual behavior is different from their own. Conversely, the fact that someone else has the same sexual identity does not mean that that person's sexual behavior is the same as their own.

People who think of themselves as bisexual, heterosexual, or homosexual may find they are quite similar in some aspects and different in others. For example, in choosing people to spend time with in social activities, most women hang out with women and most men hang out with men. That is, both women and men show a *social preference* for members
of the same sex. According to many national surveys, whether their sex is male or female, and whether their sexual identity is homosexual, bisexual, or heterosexual, most people have an *emotional preference* for women as close friends. We may all be more alike than we think.

Klein's research and the experience of many people indicates that sexual identity can be fluid (at least for some people), and can change from one period of a person's life to another. A person's identity may move to a new position on the continuum; that is,

- a heterosexual may change to a bisexual or homosexual identity;
- a bisexual may change to a homosexual or heterosexual identity;
- a homosexual may change to a bisexual or heterosexual identity.

Many people were sure that they would be, for instance, heterosexual all their lives, but discovered later that they no longer were. It therefore behooves one to treat others as one would like to be treated, regardless of one's current sexual identity, because one's sexual identity may change.

Both Kinsey's and Klein's work gives some evidence that older people are more likely to have been sexual with both sexes than are younger people. This contradicts conventional wisdom, which says that sexual experimentation is common among youths but uncommon among adults.

Despite the fact that someone may have had different sexual identities at different times, each sexual identity was appropriate and valid for that person in its time.

In some areas, the Lesbian and Gay male communities take the position that bisexuels are not welcome in the Lesbian and Gay communities, that they do not exist, and/or that they are "traitors to the cause" and "sleeping with the enemy." This collection of attitudes is often termed "biphobia." It usually occurs with greater frequency and virulence in Lesbian communities, where it is associated with negative feelings about and political action against patriarchy and women's oppression. It is also clearly present in Gay male communities, often in the more subtle form of deprecation and ridicule of bisexual identity. In biphobic communities, an individual who might otherwise identify as bisexual may choose to suppress attractions to and activities with one gender or the other in order to identify as either heterosexual or homosexual. Alternatively, a person may switch back and forth, trying alternately to identify as homosexual or heterosexual.

Where there is no information about and support for bisexuality, a person may identify as heterosexual or homosexual, or alternate between them.
Footnotes

[1] "Sexual orientation" and "sexual preference" have often been used interchangeably. To emphasize that how a person thinks of herself or himself is often not a matter of choice (preference), the politically correct term has become "sexual orientation."

[2] Bobbi Keppel and Alan Hamilton have adapted Klein, et al. (op. cit.) by using a scale like Kinsey's.


[4] Discuss social preference and emotional preference from Implications and Points to Make section.


About the Authors

Bobbi Keppel is a social worker. She is the Coordinator of the Maine Bisexual People's Network, is a co-founder of the Unitarian-Universalist Bisexual Network (later merged with Interweave), and served on the Advisory Board of the East Coast Bisexual Network. She is a trainer for the Welcoming Congregations program in the Northeast District.

Alan Hamilton is a former president of the East Coast Bisexual Network (a.k.a. the Bisexual Resource Center) and a co-founder of the Unitarian-Universalist Bisexual Network (later merged with Interweave). He has served as newsletter editor for the Boston Bisexual Men's Network and as Treasurer of the East Coast Bisexual Network, and has participated in the organization of several retreats and conferences for Bisexual and Bi-friendly people.
Ten Things Bisexuals Should Discuss with Their Healthcare Provider

The following are health issues identified as most commonly of concern for people who are bisexual. While not all of these items apply to everyone, it’s wise to be aware of these issues. The other factsheets in this series may also be helpful depending on your gender.

1. **Come Out to your Healthcare Provider**
   In order to provide you with the best care possible, your clinician should know you are bisexual. It should prompt him/her to ask specific questions about you and offer appropriate testing. Many providers are less familiar with bisexuality and may make assumptions about your behavior. Be honest and you will get better care. Remind your provider each time you see them about who your current partners are—it may change the screening tests they offer you. If your provider does not seem comfortable with your sexual orientation, find another provider.

2. **HIV/AIDS, Safe Sex**
   Many men who have sex with men are at an increased risk of HIV infection, but the effectiveness of safe sex in reducing the rate of HIV infection is one of the LGBT community’s great success stories. If you are HIV positive, you need to be in care with a good HIV provider. Safe sex is proven to reduce the risk of receiving or transmitting HIV. You should also discuss and be aware of what to do in the event that you are exposed to HIV (Post-Exposure-Propylaxis—contacting your provider IMMEDIATELY following an exposure to explore your options. If you are in a relationship where one of you is positive, you should discuss options for prevention with your provider as well. Although women who have sex with women have lower rates of HIV, if you have sex with a gay or bi man (who have increased rates) it is important to understand their HIV status and how to protect yourself.

3. **Hepatitis Immunization and Screening**
   If you have sex with multiple partners (of any gender) you are at an increased risk of sexually transmitted infection with the viruses that cause the serious condition of the liver known as hepatitis. These infections can be potentially fatal, and can lead to very serious long-term issues such as liver failure and liver cancer. Immunizations are available to prevent two of the three most serious viruses. Universal immunization for Hepatitis A Virus and Hepatitis B Virus is recommended for all sexually active people. Safe sex is effective at reducing the risk of viral hepatitis, and is currently the only means of prevention for the very serious Hepatitis C Virus. If you have Hepatitis C there are new, more effective treatments for that infection.

4. **Fitness (Diet and Exercise)**
   Problems with body image are more common among bisexuals and bisexuals are much more likely to experience an eating disorder such as bulimia or anorexia nervosa. While regular exercise is very good for your health too much of a good thing can be harmful. The use of substances such as anabolic steroids and certain supplements can be dangerous. Being overweight or obesity are problems that also affect many bisexuals. These can lead a number of health problems, including diabetes, high blood pressure, and heart disease and breast cancer.

5. **Substance Use/Alcohol**
   Bisexuals may use substances at a higher rate than the general population, and not just in larger communities such as New York, San Francisco, and Los Angeles. These include a number of substances ranging from amyl nitrate (“poppers”), to marijuana, Ecstasy, and amphetamines. The long-term effects of many of these substances are unknown; however current wisdom suggests potentially serious consequences as we age. If your drug use is interfering with work, school or relationships, your healthcare provider can connect you to help.

6. **Depression/Anxiety**
   Depression and anxiety appear to affect bisexuals at a higher rate than in the general population. The likelihood of depression or anxiety may be greater, and the problem may be more severe for those men who remain in the closet or who do not have adequate social supports. Many bisexuals keep their orientation and sexual behavior a secret from their providers. Adolescents and young adults may be at particularly high risk of suicide because of these concerns. Culturally sensitive mental health services targeted specifically at gay men may be more effective in the prevention, early detection, and treatment of these conditions.

7. **STDs**
   Sexually transmitted diseases (STDs) occur in sexually active bisexuals at a high rate. These include STD infections for which effective treatment is available (syphilis, gonorrhea, chlamydia, pubic lice, and others), and for which no cure is available (HIV, Hepatitis, Human Papilloma Virus, herpes, etc). There is absolutely no doubt that safe sex reduces the risk of sexually transmitted diseases, and prevention of these infections through safe sex is key. The more partners you have in a year, the more often you should be screened. You can have an STD without symptoms, but are still able to give that to others.

8. **Prostate, Testicular, Breast, Cervical and Colon Cancer**
   Bisexuals may be at risk for death by these cancers. Screening for these cancers occurs at different times across the life cycle, and access to screening services may be harder for bisexuals because of not getting culturally sensitive care. All bisexuals should undergo these screenings routinely as recommended for the general population.

9. **Tobacco**
   Recent studies seem to support the notion that bisexuals use tobacco at much higher rates than heterosexuals, reaching nearly 50 percent in several studies. Tobacco-related health problems include lung disease and lung cancer, heart disease, high blood pressure, and a whole host of other serious problems. All gay men should be screened for and offered culturally sensitive prevention and cessation programs for tobacco use.

10. **HPV (virus that causes warts and can lead to anal & cervical cancer)**
    Of all the sexually transmitted infections bisexuals are at risk for, human papilloma virus (HPV) – which cause anal and genital warts – is often thought to be little more than an unsightly inconvenience. However, these infections may play a role in the increased rates of anal cancers in bisexual men. Some health professionals now recommend routine screening with anal Pap Smears similar to the test done for women to detect early cancers. Safe sex should be emphasized. Treatments for HPV do exist, but recurrences of the warts are very common, and the rate at which the infection can be spread between partners is very high. Individuals with a cervix should get routine pap smears as instructed by their clinician.

Author: Robert J Winn, MD AAHIVMS. Medical Director, Mazzoni Center. Philadelphia, PA. Revised May 2012.
The BRC uses bisexual as an umbrella term for people who recognize and honor their potential for sexual and emotional attraction to more than one gender. We celebrate and affirm the diversity of identity and expression regardless of labels.

Our Mission:
The Bisexual Resource Center envisions a world where love is celebrated, regardless of sexual orientation or gender expression. Because bisexuals today are still misunderstood, marginalized and discriminated against, the BRC is committed to providing support to the bisexual community and raising public awareness about bisexuality and bisexual people.

How to support the BRC:
The BRC is primarily funded through the generosity of its donors.

You can contribute directly by sending a check to the address below, or through Wainwright Bank’s Community Room (communityroom.net) or The Network for Good (networkforgood.org).

You can also make indirect contributions with your online shopping. Before you head to Amazon.com, go to biresource.net and click through—every purchase helps the BRC continue its work. Or register at iGive.com and designate the BRC as the organization to benefit from a wide variety of online shopping.

How to contact the BRC:
Bisexual Resource Center
P.O. Box 170796
Boston, MA 02117

617-424-9595
brc@biresource.net

www.biresource.net

“The BRC has a long history of rocking our world. I have a deep and abiding respect for their fierce history and am thankful for BRC leadership and organizational staying power.”

- Lani Ka’ahumanu
Each year the BRC responds to hundreds of phone calls and e-mails requesting information, media commentary, and support. Thousands also access www.biresource.net for information on how to locate bi communities around the world and bi culture and merchandise.

Making Connections

The BRC distributes *Getting Bi: Voices from Bisexuals Around the World*, edited by Robyn Ochs and Sarah Rowley, which shares the life experiences of hundreds of bi people. Now in its second edition, *Getting Bi* has even more international voices included.

The BRC is an active political partner on the state and national fronts. As a founding coalition member of Mass Equality, the BRC was at the forefront of the fight for marriage equality in Massachusetts and continues to advocate for more statewide political change.

The BRC is also part of a statewide coalition of organizations led by Massachusetts Transgender Political Coalition (MTPC) to help push the adoption of H.R.1722, which outlaws gender-based discrimination and hate crimes.

On the national front, the BRC joined an NGLTF-coordinated coalition of over 360 groups from across the U.S. in 2007 to advocate a trans and gender expression inclusive Employment Non-Discrimination Act (ENDA).

The BRC is also the only bisexual organization in the National Coalition for LGBT Health.

The BRC also has an active yahoogroup that helps to publicize various bi events and connects the various communities across the country. To join, visit yahoogroups.com and search for biresourcecenter.

The BRC’s Goals and Objectives:

- To educate the general public as well as civic and professional organizations on bisexuality and the concerns of bisexual people.
- To further a better understanding of bisexuals, help build community, and eliminate social isolation by organizing public forums, panels, discussion groups, and social and cultural activities.
- To build bisexual community by providing a gathering place for the bisexual community, both in real and virtual spaces.
- To work for social and economic justice and the elimination of prejudice and discrimination on the basis of sexual orientation and gender identity.
- To provide technical assistance and support for local bisexual leaders and organizations, connect them to the national bisexual movement, and help articulate a clear national agenda.

IT’S NOT A PHASE, IT’S MY LIFE.
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What do we mean by “bisexual”? 

The BRC uses bisexual (or BI for bi-inclusive) as an umbrella term for people who recognize and honor their potential for sexual and emotional attraction to more than one gender (pansexual, fluid, omnisexual, queer, and all other free-identifiers).

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It’s not a phase, it’s my life.

By Ellyn Ruthstrom
BRC President

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The Bisexual Resource Center is a nonprofit 501(c)(3) educational organization incorporated in the Commonwealth of Massachusetts.
I was walking down the street in Jamaica Plain a few days ago when two people with clipboards approached me and asked, "Do you have time for gay rights?" I cheerfully replied that I always had time for gay rights and stopped to listen to their pitch. The young man took the lead and giggled a little, looking at the woman with him. He seemed new to the task. He began, "The Human Rights Campaign is a gay and lesbian organization..."

I stopped him there, "I thought it was a gay, lesbian, bisexual, and transgender organization." He was a little startled but tried to recover, "Oh, yes, it is but it's just so long to say..." "That's too bad," I said, "because I'm bisexual and HRC's record on inclusiveness is really poor. Sorry, I can't support you today."

Sadly, there are still many national LGBT organizations that give short shrift to bisexual and trans visibility within their outreach and policy development. Bi activists constantly try to claim our space within the greater LGBT community, often feeling our work gets erased like a sand castle below the high water mark.

I’ve drawn up a few tips that can certainly be taken into account by organizations, but my main focus was on the individual level. Straight allies can benefit from these recommendations, but I know that a lot of them developed for me more from my experiences with gays and lesbians over the years.

1) **Believe that I exist.** Despite ongoing scientific research that seems so determined to disprove the existence of bisexuality, plus the general lack of interest by the greater gay and lesbian community to acknowledge us, we really do exist.

When I tell you I’m bisexual, please **don’t try to talk me into redefining my identity** into something more comfortable for you. Please don’t tell me that if I haven’t been sexual with more than one sex in the last three, five, or ten years that I am no longer bisexual.

2) **Celebrate bisexual culture along with me.** We have a vibrant and rich cultural history within the bi community. Not only do we have fabulous examples of cultural communities that accepted and practiced bisexual living/loving—Bloomsbury Group, Greenwich Village, Harlem Renaissance—but from Sappho to Walt Whitman to Virginia Woolf to James Baldwin to June Jordan, we have many daring voices that have expressed love beyond the monosexual confines.

3) Please **don’t try to convince me that people who lived bisexual lives in the past would have been gay** if they had lived today. You don’t know that, I don’t know that, and your insistence that it is true says that you believe that people were bisexual only out of necessity, not by desire. I believe there have always been bisexual people just as you may believe there have always been gay and lesbian people.

4) **Validate my frustration with the gay and lesbian community** when they ignore or exclude bisexuals. Please don’t try and defend an action such as a keynote speaker who is addressing a LGBT audience but consistently says “gay and lesbian” when referring to all of us. It bothers me, so even if you don’t think it’s that important yourself, please don’t try and talk me out of my feelings.

5) **Ask me, if appropriate, about my other-sex relationships and my same-sex relationships.** Bisexuals live our lives in multiple ways. Some of us are monogamous and we would like to discuss that relationship openly with the people in our lives, no matter whom it is with. Some of us have more than one relationship going on and we’d like to be able to share that with others without feeling judgment.

6) If there is some sort of bisexual scandal in the news, **don’t use it as an opportunity to make derisive remarks about bisexuals generally.** As we know, all communities have examples of “bad behavior,” and painting everyone with the same brush doesn’t create much understanding between us.

7) **When I’m not around, or any other bisexual, speak up when bisexual people are being defamed or excluded.** It’s great when we can witness your support, but I’d love to know you are helping us even when we are not looking. You’ll be the best ally possible!