Including Asexual People in Services
Authors

Rowan Alison
James H. Verardi

With thanks to Tara Catt,
AVEN’s UK outreach team

© 2021 Equality Network
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contents</td>
<td>3</td>
</tr>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>What is Asexuality?</td>
<td>5</td>
</tr>
<tr>
<td>The Ace Umbrella</td>
<td>8</td>
</tr>
<tr>
<td>Asexuality and the LGBTI Community</td>
<td>10</td>
</tr>
<tr>
<td>The Intersections of Asexuality</td>
<td>12</td>
</tr>
<tr>
<td>Key Questions</td>
<td>19</td>
</tr>
<tr>
<td>Why is Asexuality Relevant to Services?</td>
<td>21</td>
</tr>
<tr>
<td>What Can Services Do?</td>
<td>23</td>
</tr>
<tr>
<td>Collecting Data</td>
<td>27</td>
</tr>
<tr>
<td>Glossary</td>
<td>29</td>
</tr>
<tr>
<td>Resources and Further Reading</td>
<td>32</td>
</tr>
</tbody>
</table>
Introduction

This booklet is a resource for service providers on how to become more inclusive of asexual people. It provides definitions of asexuality and related terms, an explanation of why asexual people can be part of the LGBTI community, and descriptions of some of the more common problems of exclusion with suggestions on how to remedy them. Many of these tips will help make your service more inclusive of other LGBTI people, not just those who identify as asexual.

This booklet will provide you with the foundations to start thinking about simple changes to your practice that can ensure you are creating an inclusive service in which asexual people can participate fully.

Further readings, resources and contacts are listed at the end of the booklet.
The term asexual refers to people who experience little or no sexual attraction to other people. As part of the diverse spectrum of human sexuality, asexuality is a sexual orientation like straight, lesbian, gay and bisexual.

An individual’s sexuality is a part of their identity. As with any other sexuality, asexuality is not an indication that there is something wrong with a person, or that they are “broken”. Like other sexualities it can sometimes change over time, but this does not make it any less valid or real.
Asexuality is not the same as celibacy. Celibacy is the voluntary abstinence from sexual activity, regardless of one’s desires. Asexual people do not experience sexual attraction, but some do engage in sexual activity from time to time, for a variety of reasons.

Asexuality is not the same as sexual dysfunction either. Asexual people show the same range of physical responses to sexual stimulation as other groups of people.

It is important to note that sexual attraction is not the same as romantic attraction; the desire to act in a sexual way with other people is separate and distinct from the desire to form romantic bonds with them. Asexual people often describe their romantic orientations with terms such as homoromantic, heteroromantic and biromantic or just use the words gay, lesbian, bi or straight.

People who do not experience the desire to form romantic relationships are called aromantic. As sexual and romantic attraction are different things, aromantic people can be asexual or sexual.
Aromantic people are sometimes included under the asexual umbrella, but this erases aromantic people who do feel sexual attraction. Aromanticism and asexuality share a significant intersection, but are still distinct concepts that need to be looked at separately.

The word “ace” is an informal label for asexuals and other people under the asexual umbrella, and we will be using “ace” and “asexual” interchangeably in this booklet.

The word “allosexual” is used to describe someone who is not under the asexual umbrella.
Asexual is used as an umbrella term for people who do not feel sexual attraction. Within asexuality there are many nuances on the level of attraction: from none at all to occasional or only under certain circumstances. The key is that all the terms under the umbrella relate to levels of sexual desire below that “expected” in society.
Here is a summary of the main terms under the ace umbrella. More detailed definitions can be found in the glossary at the end of this booklet:

**Demisexual**: only experiencing sexual attraction after forming a close emotional bond with another person.

**Grey asexual (grey ace)**: only experiencing sexual attraction on rare occasions, or only under specific circumstances.

**Aromantic asexual (aroace)**: not experiencing sexual or romantic attraction.
Asexuality and the LGBTI Community

Asexuality is a minority sexual orientation, like being lesbian, gay or bisexual. Ace people face similar issues to LGBTI people, like having to “come out” (and then being told they are “going through a phase”), lack of media representation, and even conversion therapy. General attitude surveys in the United States have found that straight people want contact with ace people even less than with gay people and that straight people regard ace people as less capable of experiencing human emotions than either straight, gay or bisexual people. Prejudice and discrimination against ace people is known as acephobia.

So it makes sense that ace people would find a place within the LGBTI community. Ace people who are homo- or biromantic are just as likely to face homophobic and biphobic hate crime as their allosexual counterparts if they show public affection or live together with same-sex partners. And of course ace people of all genders can be trans or intersex and face the same issues as
other trans and intersex people with possibly added complications due to their asexuality.

Even ace people who are heteroromantic still face erasure and pressure to conform to expectations of what a relationship should be like. Ace people, like bisexual people, can face discrimination even when in a relationship which allows them to “pass” as straight. In either case, “passing” as straight is painful and adds to the erasure of their identities.

Ace people are in the same situation when their place in the LGBTI community is questioned. Even in contexts where the acronym LGBTIA is used, some people take the A to mean “ally” rather than “ace”. This excludes and sidelines the ace community.

Ace people are twice as likely to experience mental health issues than the general population. According to small-scale studies, two-thirds of ace people experience isolation and alienation due to acephobia and erasure. On average ace people score twice as high on surveys measuring depression and 1.5 times as high on surveys measuring anxiety.
The Intersections of Asexuality

Intersectionality is a framework for understanding how aspects of identity, such as race, sexuality and gender, may overlap, leading to unique kinds of discrimination and exclusion.

For example, a person who is gay and disabled may face situations like a health care provider not acknowledging their same-sex partner, or being unable to enter an inaccessible LGBT+ service. People who are one or the other, gay or disabled, might not have those issues. It is only those people in the “intersections” of minority strands that are affected.

When ace people fall into some of those intersections, a number of issues can arise:
Asexual and Trans

Some ace trans people have difficulty with gender reassignment services because not experiencing sexual attraction can be pathologised by the gender clinic in a way that delays their transition. They can also be told that if they don’t want sex their gender “doesn’t matter”.

Asexuality and Gender

Men are underrepresented in ace communities in general (around 14% of asexual respondents of an online survey identified as men). Men tend to find it harder to come out as asexual because of how sexuality and sexual performance are considered key aspects of masculinity, to the extent that lack of interest or desire are considered emasculating and a source of mockery and ridicule.

Male asexuals may be more likely to have their asexuality treated as a medical problem which could be solved with Viagra or hormones, even though asexuality is unconnected to sexual function.
Asexual and Black, Asian and Minority Ethnic

Asexual people are often assumed to be mostly white, due to stereotypes which make it seem like ace people from other ethnicities don’t exist or don’t count. This is part of a larger set of racist stereotypes which doesn’t allow People of Colour to define their own sexualities or refuses to believe them.

Black women are stereotypically seen as hypersexual, with sex “thrust upon them” as early as their pre-teen years and the sexualisation of Black female bodies leading to the belief that Black girls “don’t look like [a] virgin” by the age of 15-17. Thus being uninterested in sex can be particularly isolating, or a source of mockery and concern that “something must be wrong”.

Many Black and Asian women are particularly subject to sexual objectification. Both of these groups can get very bad reactions, including violence, when they are open about not being interested in sex.

Desexualisation of other ethnic minorities also creates barriers for ace people to come out or
express themselves. When people from cultures which are stereotypically desexualised (e.g. Muslim women) identify as asexual, they are often perceived as being “brainwashed” by their culture, or as “making a religious statement” with their “choice”, or their asexuality may even be considered a symptom of abuse rather than a legitimate sexual orientation.

What both oversexualisation and desexualisation have in common is that they are false stereotypes which take away an individual’s agency to define their own sexuality, and thus make it difficult or dangerous for minority ethnic people (and women in particular) to come out as ace.

The same issues of oversexualisation and desexualisation that affect minority ethnic women affect Black and minority ethnic men as well. Black men are oversexualised in and outside of their own communities, thus making the relationship with sex a matter of cultural, social and personal identity that is not present in majority-white populations, thus men of colour are especially underrepresented in ace communities.
Asexuality and Age

People under 30 are overrepresented in ace communities. This is because asexuality has only been readily available as a self definition in recent years. Most of the information regarding asexuality and most ace communities are only found online, and thus younger people may be more likely to find and identify with that information. Older people who may otherwise identify as ace might not have access to information about it, or they might think it is a “young people’s” thing and reject the label, even if it theoretically would apply to them.

Young people coming out as ace may be told they haven’t matured yet and will change when they are older. Many ace people report having felt excluded during sex education lessons when it was assumed that everybody will eventually be sexual.

Older people coming out as ace may either be told that it is a normal part of aging or encouraged to treat it as a problem that can be solved medically or by improving their self-esteem.
Older asexual people may be especially accused of being prudish by younger people, and some older aces have reported being rejected in LGBT+ groups for this reason.

**Asexual and Autistic**

In a survey of asexual people 7-8% of respondents had been diagnosed with autism which compares to 1% of the general population. Conversely, 26-33% of autistic people appear to be asexual. Ace autistic people face extra challenges because of the false belief that they are not competent to know their own sexuality.
Asexual and Disabled

Some disabled people find it particularly hard to come out as ace because of the notion that disabled people are sexless or unable to have sex. They feel it would undermine the work on sex positivity within disability circles or feel pressured to become part of the sex positivity culture of those circles even though they themselves do not desire sex.

Ace people can have physical disabilities which make it difficult to access LGBT+ venues, spaces and communities.

Statistics show a higher than average percentage of people with mental health issues in the ace community (about 50% more than in the general population.) These people may face extra difficulty getting help with their mental health if their asexuality is seen as part of the problem.
Key Questions

Is asexuality a disease?
No. Asexuality is a sexual orientation like any other. Asexuality is not something that can or should be “cured”.

Is asexuality a result of trauma?
No. Although some ace people may have been through traumatic situations in their past, this has no bearing on their sexual orientation (just like trauma doesn’t cause other sexualities).

What does romance mean for an asexual person?
Many romantic relationships are non-sexual whether the people in them are asexual or not. Asexual people might enjoy the same kind of romantic things as other people, such as physical affection, romantic gifts, and having one or more relationships that are treated as “special”. Nearly 70% of asexual people experience some kind of romantic attraction, while just over 30% are aromantic and prefer platonic relationships with family and friends.
Can ace people have sex?

Yes. Asexuality means not experiencing sexual attraction; ace people are as capable of having sex as anyone else.

Ace people may engage in sex for a variety of reasons, from wanting to please their partner, to wanting to have children. Being asexual doesn’t define a person’s sexual behaviour, and having sex does not disqualify anyone from being asexual.

Can I ask what my ace service user/staff member thinks of sex or if/how they do it?

Would you ask that question to a straight service user/member of staff? Inappropriate questions don’t stop being inappropriate just because you are curious. Only ask if people are sexually active if it is directly relevant to the service you’re providing.
Why is Asexuality Relevant to Services?

“Sexual health services and sex education could help us learn our own sexual boundaries.”

You might already have ace service users, even if you are not aware of that. Ace people make up around 1% of the population (in Scotland that is the equivalent of over 50,000 people). This number is likely to rise as more awareness leads to more people learning about asexuality and identifying as ace.

Ace people are often wary of coming out to services, even when it would be important or relevant to do so (such as to sexual health or mental health services). This may be due to fear of discrimination or erasure, or because it is tiring to explain or defend a part of one’s identity.
If you are able to show you are inclusive of ace people even before they walk through the door, service users will feel more reassured about coming in. They will be more open to you about the issues they face, which means you will be able to understand them and help them more effectively.

Service users who feel included and respected by their service provider are more likely to spread the word about the great service they received, which leads to more service users and better reputation.

Making services more inclusive of ace people can often make them more inclusive of everybody else too.
What Can Services Do?

Treat asexuality as a valid sexuality and not as a problem

“Mental health services need to understand that we are not broken and don’t need to be fixed.”

Ace people report high levels of disbelief and attempts at conversion from friends and family as well as services, so simply doing this is already helpful.

Listen to what service users tell you about themselves

If a service user says they are ace or aromantic, believe them and use the information appropriately, without questioning the service user’s self-knowledge.
Respect people’s right to use terms that best fit them

If a service user says they are grey-ace or demiromantic, use those terms when referring to them. You can ask for clarification if necessary.

Avoid assumptions

“"My asexuality doesn’t mean you shouldn’t respect my life partner."

• Don’t assume ace service users don’t have partners or important relationships, or make assumptions about those relationships

• Don’t try to “fix” people who seem not interested in sex or romance

• Don’t assume the person accompanying your service user is not someone important in their life just because they are not sexual or romantic partners

• Don’t assume ace service users don’t have or want to have children
Take a Person Centred Approach

Your service users know the best ways for you to help them feel included. Listen when they tell you their needs and strive to meet them as best as you can.

Avoid loaded and irrelevant questions

See the Collecting Data section on page 27.

Avoid oversexualising people and situations

Bars cafes and clubs — do non pick up nights for people looking for romance without sex.

Oversexualisation is a problem for many LGBT+ people and especially ace people. Avoid bringing sex into conversations or publicity for events, e.g. don’t call someone’s clothes or fancy dress “sexy” and don’t assume, for instance, that everyone going on a club night out is looking for sex.
Make your acceptance of ace people visible

Mention asexuality by name where appropriate. Have ace inclusive materials visible at receptions or online. Don’t use language which implies that everyone has a sexual partner or is seeking sex or romance.

Continue to improve your inclusion

Listen to feedback from your users and staff on how to improve inclusion. If mistakes are made, apologise and learn from them so that they are not repeated. If service users understand that you have a genuine will to improve, they will be more understanding and more willing to engage despite mistakes.
Collecting Data

Collecting data about service users can help improve service provision. It gives services a better idea of who is accessing their services and who the service might be unintentionally excluding.

In order to make data collection more helpful for all your user base, consider these points.

“Medical services — believe us when we say we’re not sexually active.”

Ask the right questions

The questions to ask service users depend on the service offered. Sexual health services may need to ask in-depth questions about sexual behaviours, while housing services only need to know about relevant relationships.

Most service providers who already ask about sexual orientation in their equality monitoring
forms need only to add an extra option for “asexual”. This allows ace people to answer accurately and makes it clear that your service acknowledges and is inclusive of asexuality.

Be clear why you want to know

Even if you are just asking about sexual orientation with a set of tickboxes, it is best practice say clearly why you are asking those questions, and to give people the option of leaving answers blank.

Phrase questions appropriately

Remember that ace people are often asked intrusive questions and often have to educate people about their sexual orientation when it is brought up in conversation. So it is important to never make assumptions about ace people’s behaviour when planning questions. This will improve engagement and help avoid alienating your service users. In many contexts it’s better to avoid using terms like spouse or partner and for instance talk about important relationships instead.
Glossary

Acephobia

Prejudice or discrimination including erasure of asexual people.

Allosexual and Alloromantic

These are terms used to describe individuals who do not fall into the asexual and aromantic spectrum. Typically people who experience sexual or romantic attraction frequently, and do not identify as ace, aro or any of the other associated terms.

Aromantic

Aromantic people experience little or no romantic attraction to others. As with asexuality, this is not a choice, but an intrinsic part of their individuality.

Aromantic people may or may not enjoy activities that are often seen as romantic, for example, kissing or holding hands. They may also be uncomfortable with romance, be single,
have a partner or be married — those are all individual characteristics that vary between aromantic people.

**Asexuality**

Asexuality is a lack of sexual attraction. Asexual people are not drawn to people sexually and don’t desire to act sexually on attraction to others. Asexuality is a spectrum which includes many forms of attraction, e.g. sensual or aesthetic. Asexuality is often shortened to ace.

**Demisexual**

Demisexual people only experience sexual attraction after forming a close emotional connection with a person. It is something more commonly seen in romantic relationships but can occur in any type of close emotional relationship with another person. Demisexuals are not choosing to abstain from sex, they simply lack the attraction until a close emotional relationship is formed. Demisexuality is considered to be part of the grey-asexuality spectrum.
Grey Asexuality

Grey asexual (or grey-ace, grey-A) people identify in a number of different ways. Some grey ace individuals may use the word asexual to make it simpler to identify to others. However grey aces can also fall into any of these categories:

• do not normally experience sexual attraction, but do experience it on occasion

• experience sexual attraction and drive, but not strongly enough to want to act on them

• people who can enjoy and desire sex, but only under very limited and specific circumstances

Just as asexuality is a spectrum, the definitions for grey ace are not just limited to the above.

Each of these definitions also have a counterpart for romantic attraction.

Oversexualisation

Regarding people, cultures and situations as highly sexual, often inappropriately and without reference to people’s own desires.
Resources and Further Reading

bit.ly/2RmPZ1i

Asexual Visibility and Education Network (AVEN)
asexuality.org

Borgogna, N C; McDermott, R C; Aita, S L and Kridel, M M, 2018. “Anxiety and Depression Across Gender and Sexual Minorities: Implications for Transgender, Gender Nonconforming, Pansexual, Demisexual, Asexual, Queer, and Questioning Individuals”
bit.ly/2yEQSfa

Bradley, David J, 2020. “Responding to Asexual Hate Comments”
youtu.be/LHho-Sz02h4

bit.ly/2wnDdZa


Gupta, K, 2017. ““And Now I’m Just Different, but There’s Nothing Actually Wrong With Me”: Asexual Marginalization and Resistance” bit.ly/3e3juyZ
bit.ly/2xdyz0m

bit.ly/30sQJGPs

bit.ly/3d040Mo

Yule, M A; Brotto, L A and Gorzalka, B B, 2013. “Mental health and interpersonal functioning in self-identified asexual men and women”
bit.ly/39URtGH
Large print

If you need this document in larger print or another format or language, please contact us on 0131 467 6039 or en@equality-network.org.

This document is available in PDF format on our website: www.equality-network.org

Equality Network

The Equality Network is a national lesbian, gay, bisexual, trans and intersex (LGBTI) equality and human rights charity in Scotland.

30 Bernard Street
Edinburgh EH6 6PR
Telephone: +44 (0) 131 467 6039

www.equality-network.org
Email: en@equality-network.org

LGBTIScotland
equalitynetwork
LGBTIScotland

Registered Scottish Charity: SC037852
Company limited by guarantee: SC220213
Published: June 2021