

# An overview of asexual self-identity



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# Me and my work!



- Transcending sexualisation: a constructivist grounded theory of asexual self – identity.
- 2014 – 2020.
- **RQ: ‘What are the social processes involved in constructing an asexual identity?’**

How do individuals define their asexual identity?

What processes inform the development of the identity?

How does the identity impact on relationships with others?

How does the identity affect health and wellbeing?

# Asexuality

Most commonly defined as the lack of sexual attraction to anyone, or low or absent interest in or desire for sexual activity. (see Slide 24)

Alfred Kinsey [Kinsey Institute for Research in Sex, Gender & Reproduction] (1948, 1953) identified an element of possible sexual behaviour that was 'suggestive' of altered levels of attraction and desire from that which was expected within the population.

This group were labelled as 'Group X' by Kinsey et al (1948), there was no further exploration of this demographic until some years later (McInnes 2012).



# Anthony F. Bogaert (2004)

Secondary Data Analysis from a national probability sample about sexual behaviour (N > 18,000) of British residents.

Bogaert (2004) labels 'asexuals' – as those who report feeling **no** sexual attraction to others - constitute 1% of the population.

Ignited academic interest in asexuality.

# Why bother?

Irrespective of how it is characterised, asexuality remains barely intelligible.

People who identify as 'ACE' experience discrimination and stigmatisation (McInnis et al 2012, Gazzola and Morrison 2012, Foster and Scherrer 2014).

In some LGBT circles, asexuality has struggled to gain acceptance (Mosbergen 2015).

Calls from academic and the asexual community for greater visibility and a more rounded understanding.

# Things that people say to people who identify as asexual

AVEN (Asexuality Visibility and Education Network) (2012)

*"You just have not had sex with enough people yet ... "*

*"Are you SURE you weren't molested?"*

*"So, you're going to have a lot of cats when you're old?"*

*"You'd SO be a lesbian!!!!!"*

*"You've had sex before so you can't be asexual"*

*"You obviously aren't doing it right"*

# Quantitative studies

- Researchers seeking to measure desire, arousal, orientation and inhibition and female and male sexual functioning and distress suggest that some people who identify as asexual *do* feel sexual attraction to men and women (Prause and Graham 2007, Brotto et al 2010).
- Brotto and Yule (2011) use quantitative data to suggest that asexuality is not a disorder of sexual arousal.
- Brotto et al (2014) suggest that some people who identify as asexual are more likely to have relationships that do not involve sexual activity than non-asexuals, and people with Hypo Sexual Desire Disorder (HSDD) share a similar disinterest in sexual activity.

## More recently

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- Asexuality is finally breaking free from medical stigma (Parshall 2024).
- Gould (2023) How to know if you are asexual. *“Asexuality is a sexual orientation in which someone experiences little to no sexual attraction toward others”*
- Ferguson (2021) What does it mean to be asexual? *“Asexual people, who might use the term “ace” or “aces” for short, typically don’t experience sexual attraction or want to pursue sexual relationships with other people”*

# My research

- Twenty-one participants who self-identify as asexual took part in semi structured interviews.
- Recruited through a number of online asexuality forums and through local and regional LGBTQIA networks.
- No strict definitions of asexuality were used, and there were no exact criteria to meet in order to be considered suitable to take part. Individuals were recruited from the asexual community through a purposive sampling technique. Inclusion criteria were;
- Anyone who embraced an asexual identity or self-identified as asexual.
- Age 18 and over.
- Sufficiently fluent in English.

# Participants, sample, data collection

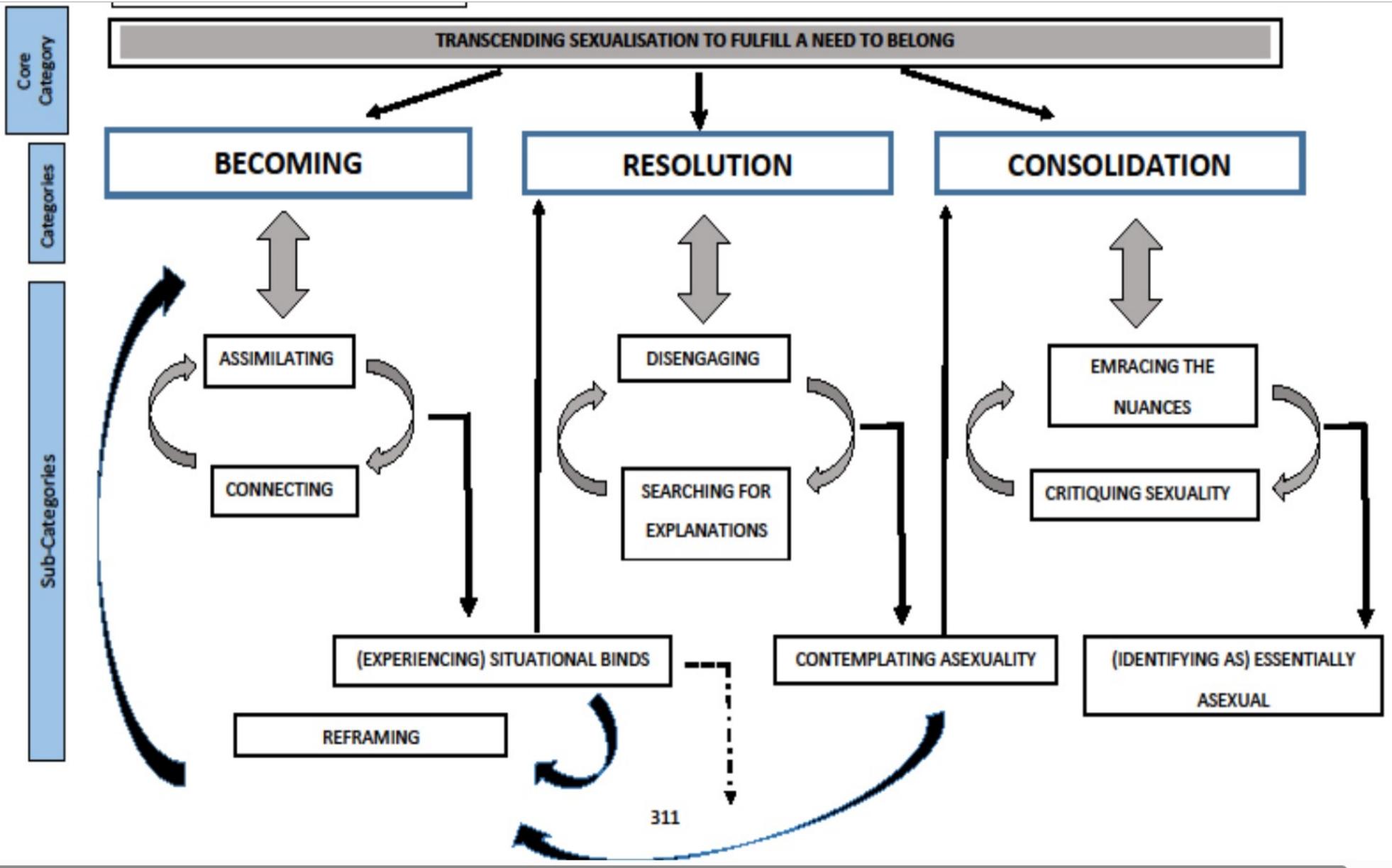


- Age ranged from 18 – 65.
- All but 2 participants identified as either male or female.
- The sample were representative of a mixed population, from United Kingdom (UK), France, Germany, United States (US) and Brazil.
- Selective sampling approaches were used at later stages to gain a more diverse population - including more males and people of colour.
- There was no Black Asian and Minority Ethnic (BAME) representation.
- Interviews were face to face (3), telephone (2), and Skype (16).

# CGT and Bourdieusian social theory.



- Pierre Bourdieu's theory of practice (1977), and logic of practice (1990) used as analytical tools to develop insights into self-identified asexuality.
- Key theoretical concepts - Habitus, Capital, Field and Practice were used to explore the social processes involved in transcending sexualisation to fulfil a sense of belonging.
- [(habitus)(capital)] + field = practice.
- Bourdieu's notions of social structure and disposition and their relationship to Habitus.



# Asexual self-identity model



- (1) Becoming: Assimilating, Connecting, Experiencing situational binds, Reframing
- (2) Resolution: Disengaging, Searching for explanations, Contemplating asexuality.
- (3) Consolidation: Embracing the nuances, Critiquing sexuality, (Identifying as) Essentially asexual.

Not entirely linear or sequential for all participants.

# Implications for practice

- Relationship education, as well as relationship and sex education, should be directed towards encouraging a culture that values lasting positive and significant interpersonal relationships with or without sexual behaviour.
- Alternative models of relationship formation that are not intrinsically bound to sexual attraction do exist and relationship education should encourage individuals to think more broadly about relationships and how they could be constructed in more meaningful ways.

# Re-constructing attraction and relationship formation in an asexual paradigm

*“It’s not that you’re missing anything, it’s just that there are other ways to connect, and you have to re-learn the value of those other connections. Identifying as asexual is you saying, you know, ‘I have these other ways of connecting with people, and they are just as valid to me if not more valid than a sexual relationship’. It’s just that plenty of asexual people have sex all the time, it does not mean people are not asexual, it just means that they are not actually having a model of sexual attraction to another person in order to have that sex.*

(Alex (Pseudonym): Non-binary quoiromantic quasexual)

# Re-constructing attraction and relationship formation in an asexual paradigm

*“How to be asexual feels like, for me, like, so I don’t like, have the sexual scripts, they are not innate in me, but eventually I’ve learned them. So, I do have them as a concept. ... So that now I, if I’m having a conversation how I should behave, right, because I’ve learnt them, but I don’t feel them naturally in me. I am capable of being sexual – it’s just that it wasn’t innate, so it is artificial in a way, but at least I know. I had to learn that, to function in society. So that’s it”*

(Sharon (Pseudonym): Female aromantic asexual)

# How do asexuals define their identity

Through expressions of weak social construction theory, where participants believe themselves to be born asexual, whilst at the same time acknowledging a fluidity of sexuality.

They consider themselves as 'born this way', and this gave rise to the category within the asexual self-identity theory as **essentially asexual**.

For participants, definitions of asexuality are informed by the repeated themes within their life stories. Patterns of **struggles to negotiate sexuality from a very early age, and the distinctive and preferred 'asexual features' of their closest and most intimate relationships** were a constant within their stories.

# How does their identity impact their relationships with others?



Participants considered the impact of disclosure on others, and the impact of disclosure on their relationships with others.

Data suggested that

1. Participants' experiences of transcending the sexualised world, existed within a framework of **societal heterosexism**.
2. Heterosexism **privileges** heterosexuality and stigmatises, but to an extent tolerates other sexual behaviours.
3. Heterosexism fails to accommodate non-sexual behaviours and practices in affectionate relationships.

# Relationships with others

- Affected by an ‘Anticipated hostility’ seen in previous work with the lesbian and gay community.
- Participants reluctant to disclose their identity to close friends and family, happier to be perceived as ‘belonging to any identity’ as long as the narrative associated with the identity is one which conforms to their understandings of a traditional relationship paradigm.
- Believed family members would be more accepting of a non-heterosexual identity rather than an asexual identity.

# Mental health and wellbeing



Literature review: a possible relationship between self-identified asexuality, mental health and well-being, discrimination and stigmatisation (see - Jones, Hayter, Jomeen, 2017):

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/jocn.13862>

Identifying as asexual meant that participants became embedded within a phenomenon of contrasting experiences; from reassurance and satisfaction to stress and anxiety.

Equally, the decision to hide one's asexual identity was also found to be stressful.

# Mental health and wellbeing



- Four participants disclosed that they had sought therapy through either counselling or a psychologist during the process of becoming and resolution.
- Five participants disclosed that they suffered with and had been treated for depression.
- Four participants identified depressive symptoms, which predated their consolidation stage.
- Three participants were treated for depressive symptoms pre consolidation stage.

# Mental health and wellbeing

Two participants identified that mental ill-health became a feature in their lives after they identified as asexual.

The mechanisms of the relationship between self-identity and MHW in terms of cause and consequence remain unclear, and an area that this study was not able to shine any further light on.

It is clear, that 38% of the sample identified engagement with psychology, counselling, and/or antidepressant medication and given this finding, the emotional wellbeing of people who identify with an asexual narrative should be a matter of concern for health and social care professionals and warrants further exploration.

# Sexual attraction and desire ....



- Theories of belonging provide greater insight into asexual self-identity construction than theories of sexual attraction.
- This research is a step towards asexuality being understood as something that is more suited to being explored through the lens of **connecting, belonging and the formation of lasting, positive and significant interpersonal relationships.**
- Participants alluded to the importance of the formation of social bonds and connections, not only in terms of how connecting with others gave rise to an awareness of a world that was driven by sexual expectations but also about the fact that the need to connect with and form meaningful relationships with others was the thing that propelled them forward to their asexual identity.

# Being 'essentially' asexual

A preparedness to wrestle for a recognition of the value of relationships that are not solely based on sexual attraction, sexual desire and sexual intimacy.

Recognition that throughout society, and throughout their journey to asexuality, there exists a culture of a supremacy of sexuality.

Arriving at a place where one can selectively engage with the struggle to fulfil a sense of belonging rather than step aside.

Data suggests that participants were able to impose their own asexual values, language, and ways of behaving in relationships upon the supremacy of sexuality.



This study highlighted the strength and relevance of the desire for interpersonal attachment (Baumeister & Leary, 1995).

Presenting a new perspective of asexual self-identity to the existing body of empirical work.

The construct that defined asexual self-identity in this work was belonging.

# References

Baumeister, R. F. & Leary, M. R. (1995) The need to belong: Desire for interpersonal attachments as a fundamental human interaction. *Psychology Bulletin*, 117(3), 497-529.

Bogaert, A. F. (2004) Asexuality: Prevalence and associated factors in a notational probability sample. *Journal of Sex Research*, 41, 279 – 287.

Bourdieu, P. (1990) *The Logic of Practice*. Cambridge: Polity Press.

Bourdieu, P. (1993) *The Field of Cultural Production: Essays on Art and Literature*. Cambridge: Polity Press.

Brotto, L. A., Knudson, G., Inskip, J., Rhodes, K. & Erskine, Y. (2010) Asexuality: a mixed methods approach. *Archives of Sexual Behaviour*, 39, 599 – 618.

Brotto, L. A. & Yule, M. A. (2011) Physiological and subjective sexual arousal in self-identified asexual women. *Archives of Sexual Behaviour*, 40, 699 – 712.

Brotto, L. A., Yule, M. A. & Gorzalka, B. B. (2015) Asexuality: an extreme variant of sexual desire disorder. *Journal of Sex Medicine*, 12, 646 – 660.

Ferguson (2021) What does it mean to be asexual? [Asexual: What It Means, Facts, Myths, and More \(healthline.com\)](#)

Foster, A. B. & Scherrer, K. S. (2014) Asexual-identified clients in clinical settings: implications for culturally competent practice. *Psychology of sexual orientation and gender diversity*, 1(4), 422 – 430.

Gould (2023) How to know if you are asexual. [Am I Asexual?: Signs, How to Talk About It \(verywellmind.com\)](#)

- Gazzola, S. B. & Morrison, M. A. (2012) Asexuality: an emergent sexual orientation. In Morrison, T. G., Morrison, M. A., Carrigan, M. A. & McDermott, D. T. (eds) *Sexual Minority Research in the New Millennium*. United Kingdom: Nova Science Publishers, 21 – 44.
- Hinderliter, A. C. (2013) How is asexuality different from hypoactive sexual desire disorder? *Psychology and Sexuality*, 4(4), 167 – 178
- Kelleher S, Murphy M (2024) The identity, development and internalisation of asexual orientation in women: an interpretative phenomenological analysis. *Sex and Relationship Therapy*, 39(2): 359-389.

Kinsey Institute Online (2015) data from Alfred Kinsey's Studies (1948, 1953). Diversity of Sexual orientation. Available online from <https://kinseyinstitute.org/research/publications/historical-report-diversity-of-sexual-orientation> [Accessed 20th January 2015]

MacInnes, C. C. & Hodson, G. (2012) Intergroup bias towards group X: evidence of prejudice, dehumanization, avoidance and discrimination against asexuals. *Group Processes Intergroup Relations*, 15(6), 725 – 743.

Prause, N. & Graham, C. A. (2007) Asexuality: Classification and characterisation. *Archives of Sexual Behaviour*, 36, 341–356.