



## What does GSRD mean?

Pink Therapy has expanded our therapeutic and training services beyond the more traditional lesbian, gay, bisexual and transgender LGBT as we found there were many other marginalised groups with an equal or greater need for good mental health support. We also didn't find it helpful to be adding more letters into the acronym or alphabet soup as some refer to it, as this too, was limiting and exclusionary, despite it getting as complicated as LGBTTQQIAAP (lesbian, gay, bisexual, transgender, transsexual, queer, **questioning**, intersex, asexual, ally, pansexual) or even QUILTBAG (queer and questioning, unsure, intersex, lesbian, transgender and two-spirit, bisexual, asexual and aromantic, and gay and genderqueer). So for many years now, we have been using the phrase Gender, Sex and Relationship Diversity (GSRD).

Our descriptions below are our current understanding of marginalised identities, consensual relationships and practices, and not meant to be exclusive. With Gender, we include people on the gender spectrum who might identify as trans, agender, bi-gender, crossdressers, genderqueer, gender fluid, and non-binary and First Nations/Indigenous genders excluded by colonising categories.

We are using two different understandings of the word Sex: Sex as in sexuality, sexual orientation/identities: lesbian, gay, bi- and pan-sexual and those on the asexual spectrum, celibate and those engaged in BDSM/Kink and Fetish.

Sex is also being used to mean: biological sex including intersex and people born with sex characteristics (including genitals, gonads and chromosome patterns) that do not fit typical binary notions of male or female bodies).

In Relationship Diversities: we include people on the aromantic (aro) spectrum, people involved in BDSM/Kink power exchange relationships, sex work relationships, people in multi-partnered relationships (swingers, non-monogamous, polyamorous people, etc.) as well as those in 'monogamish' forms of partnership.

These categories have gone through various iterations since Pink Therapy began over 21 years ago. They will probably continue to change as our understanding of the biopsychosocial approach to gender/sex and relationships develops. Now is an exciting and dynamic time working at the forefront of mental health for marginalised people.

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