An *identity* is a combination of labels and features constructed by how one behaves and communicates to others. Identities can be *ascribed,* when an identity is assigned by another person, or *avowed*, an identity personally assigned and acted out. While these identities may align, they could completely contradict as well. Furthermore, Identity is not a rigid construct, but rather something constantly changing and evolving because of one’s actions.

The person I will be discussing for this essay will be referred to as Elle. I have known Elle for almost seven years, and we have been in a relationship for three of those years. Elle’s avowed identity, and how I know them, is a white, femme, gynosexual, chronically ill, college student of Irish descent working as a barista. Elle’s identity also extends to their interest in performing arts, as they are an actor of over thirty theatre productions, a director of several shows, and an experienced singer. These aspects of Elle’s identity are all *social identity groupings* based on the physical, social, and mental characteristics of an individual. Within these groups, there are target groups and agent groups. *Target groups* are groups that face disadvantages, discrimination, and stigmatization. For Elle, their identity as a gynosexual, and as someone with a chronic illness are examples of target groups. *Agent groups* are social identity groups with privilege in society. Elle being white is an example of an identity part of an agent group. That is a brief overview of Elle’s identity, but how did they form this identity?

Identity is defined not by internal factors, but by how one presents themselves to others. Identities are constantly being constructed through communication and actions. Elle’s identity was constructed through multiple means. A continuous and significant involvement in theatre led to that becoming an aspect of their identity, rather than just an interest. As for their sexual orientation, they had been out as gay for many years. They avowed themselves a lesbian identity, however as they discovered more about their gender, they found that the term gynosexual fit them the best. Elle discovered their gender identity after discussing how their gender nonconforming friends felt, and realized they felt similarly. Another identity of Elle’s is that they are chronically ill. They have been their whole life, but for a while it was not a major aspect of their identity. After getting COVID-19 as an immunocompromised person, their health took a toll. They had worse days much more often, and severe flare ups more frequently. Elle wanted to keep this identity private, and in my first four years of knowing them I had no idea they were chronically ill. However, as I was close to them when their health declined, they told me. This behavior can be explained through *communication privacy management theory*, a rule-based theory of a privacy management system. The rules that this example follows is the concealing or revealing of information. Elle’s *motivation* for not disclosing their chronic illness, was that the information could change how someone perceives them. The recipient of this information could ascribe Elle as weak, pity them, or be overly concerned of them. However, due to the *context* of COVID-19, their body experienced a trauma which disrupted the influence of the motivation rule for privacy. This was one example of a struggle Elle has had regarding the display and management of their identity, but what other challenges do they face?

One challenge that Elle faces is with the expression of their gender identity. They experience an *enacted-relational* identity gap. This is the gap between how someone presents themselves, and how that presentation is perceived by others. In Elle’s life, this can be seen most in their relationship with their family. Elle does not identify as a girl, but their family perceives them so, and thus constantly uses pronouns and gendered language that do not align with Elle’s identity. While Elle is not safe to come out within their family, they did to their friends. One way Elle remedied this gap with their friends was through *label changing.* Elle began using going by their middle name, and changed their pronouns to any, but a preference of they/them. Elle did not share their updated pronouns with their family, but did share their preferred name, and was still ignored. While not executed solely for the reason of misidentification of Elle’s identity, Elle has also employed the strategy of *disengagement*. Elle is able to distance themself from those who refuse to identify them correctly. However, they are unable to cut their family out of their life entirely, and they employ a third coping strategy after visits with them. Often, I will pick Elle up from their parents’ house and they will specifically ask me to use their chosen name, rather than a pet name, so they feel more like themselves. They may also talk about how they feel about their gender identity and express themselves more genuinely now that they are out of a more public view. This is called *closeted enactment*. This is when an individual expresses their internal identity when in a safe, private space, while performing socially acceptable behavior outside that space. While it is upsetting that Elle has to put on such a front while around their family, I am happy to be a part of their safe space where they can truly express themselves.

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