

DRAFT AETC SOGI COP GLOSSARY

This draft is based on the glossary in Arrigotti, M., Chase, K., & Dinno, A. (2022). [Preliminary \(Year 1\) Report to OHA on Pediatric SOGI](#) (p. 30) [Report]. Oregon Health Authority, Office of Equity and Inclusion.

Cisgender: A gender modality in which a person’s gender identity is aligned with the gender assigned to them at birth.

Deadnaming, dead-naming: Using a name that a person has previously used to identify themselves but no longer uses, especially when the name change is the result of a change in a person’s outward-facing gender identity or expression. See also: misgendering.

Detransition, de-transition, retransition: Some gender minority experiences are characterized by a typically long period identifying as a gender different than the gender assigned at birth, including with outward expression of the different gender, and then shifting away from this second gender. This can happen because someone grows into accord with the gender they were assigned at birth (e.g., detransition back to gender assigned at birth). This can also happen because someone grows into still a third gender (e.g., detransition to a nonbinary gender identity and/or expression). Anti-transgender and anti-gender minority individuals sometimes try to use detransition in arguments against affirming care, and against the legitimacy of a detransitioning or detransitioned person’s history with gender.

Gender assigned at birth: The presumed gender assigned by parents/caregivers, community, and society, typically but not always assigned on the basis of anatomical sex.

Gender expansive parenting: A style of parenting that is open to and/or supportive of the idea of gender nonconformity emerging in their children. In addition, some parents do not assign binary genders to their children at birth, instead choosing to assign agender/not assigning gender and/or assigning nonbinary gender, and may do so with the support of the communities in which their children are being raised.

Gender assigned at birth: A gender role assigned by parents and communities to a child at birth, usually, but not always, based on the sex of the child, and typically, but not always using binary gender categories (girl or boy).

Gender minority/majority: A categorization of gender identities and gender modalities that identifies whether or not a person’s gender identity conforms to socially prescribed and privileged concepts of gender (these privileged concepts being primarily “cisgender man” and “cisgender woman” in Oregon at time of writing).

Gender modality: Describes an axis of experience with ‘transgender’ and ‘cisgender’ at either end, with ‘questioning’ being a middle option. ‘Transgender’ describes the rejection of or expansion beyond one’s gender assigned at birth, with ‘cisgender’ being the complementary notion of a sense of self in conformity with one’s gender assigned at birth.

Group-specific services: Resources intended to address the needs of a specific group. Reproductive healthcare for people who can get pregnant, gender affirming care for people whose gender modality is not cisgender. Such resources are not limited to health care.

Health equity framework, also population health equity framework: As defined by Whitehead (1991), the health equity framework requires that we use data to identify health disparities between two

populations, identify unjust social mechanisms that cause these disparities, and craft interventions to ameliorate or eliminate these disparities

Health inequity: A health disparity that is unjust. A useful framework for ‘unjust’ here is a social process which is unfair in its treatment of two groups, and which is unnecessary. An example of a health disparity which *is not* a health inequity is the different mortality rate among the general 15yo population and the general 85yo population; the difference is a necessary consequence of the 6 decades of wear and tear on the population of 85yo bodies, and is largely fair, since the population of 15yo bodies will have the opportunity to accumulate those 6 decades of wear and tear. An example of a health disparity which is unfair is the mortality rate of police homicides among Black Americans versus white Americans, which is a consequence of anti-Black police policies and institutions (e.g., stop-and-frisk).

Inclusive practice/inclusion: Welcoming all people and making explicit space for the full diversity of a population, especially those from historically marginalized and oppressed groups.

Misgendering, mis-gendering: Referring to a person as a different gender than the one they identify as, especially when aware of the person’s gender identity. See also: deadnaming.

Nonbinary (gender identity), also non-binary, non binary, EnBy, enby: A gender identity that is neither exclusively feminine gender (e.g., woman, young woman, girl), nor exclusively masculine gender (e.g., man, young man, boy). For example, some specifically identify as a particular third gender (e.g., ‘Two-Spirit’, ‘critter’, ‘unicorn’, many others); some identify as agender (not all agender identify as nonbinary gender); some identify as a non-specified third gender; some identify as multiple genders (e.g., ‘woman and man’, gender fluid) at the same time, or at different times, or in different contexts.

Questioning (gender identity): A gender identity that describes a person’s state of exploring, developing, or changing their gender identity.

Questioning (gender modality): A gender modality that describes a person’s state of exploring, developing, or changing relationship between their gender identity and the gender assigned to them at birth

Questioning (sexual orientation): A sexual identity that describes a person’s state of exploring, developing, or changing their sexual orientation.

Sex assigned at birth: A categorization of a person’s reproductive biology into a limited number of stereotyped categories (male/female, occasionally intersex), typically based on visible features of reproductive anatomy or karyotype.

Sex conforming/sex non-conforming: A categorization of people’s physiologic sex that identifies whether or not a person’s body conforms to the normative stereotyped categories of reproductive physiology and anatomy (i.e., how well a person’s body fits into the prescribed categories of “male” and “female”). There are many ways to have a body that does not conform to stereotyped sex categories, some examples include, intersex conditions, gender affirming therapy or surgery, injury or surgical intervention (e.g., hysterectomy, mastectomy, orchiectomy to treat cancers), etc.

Sexual minority/majority: A categorization of people’s sexual identities that identifies whether or not a person’s sexual orientation conforms to socially prescribed and privileged concepts of sexuality (i.e., cis-normative and heterosexual and monogamous).

SOGI: Stands for “sexual orientation and gender identity,” we also use it to reference gender modality, sex, aspects of sexual behavior, and gender expression. Should *not* be confused with or conflated with LGBT, LGBTQIA2S+, or any queer umbrella term; SOGI aspires to represent all genders, sexes, and orientations.

SSGM: Sex, sexual, and gender minority. Each of the aspects of sex, sexual orientation, gender identity, and gender modality involve privileged positions. We use minority to indicate people occupying non-privileged positions (e.g., intersex people, asexual people, nonbinary people, transgender people). We add the additional “S” to expand upon the common abbreviation “SGM”, indicating ‘sex minority’, to represent people whose bodies do not comport with stereotyped sex categories, which include intersex, but also people who have had gender affirming surgeries or therapies (“transsexuals”), people who had alterations to reproductive anatomy due to cancer, surgery, etc.

Transgender: A gender modality in which a person’s gender identity rejects or expands beyond the gender assigned to them at birth.

Two-Spirit: A pan-North American indigenous non-binary or third gender label. Not all American Indian individuals with transgender experience, or non-binary gender identity necessarily identify as Two-Spirit. Some South Pacific cultures have adopted the term Two-Spirit in a similar vein. Some tribal advocates in Oregon have suggested that this identity should not be explicitly included in SOGI tools unless someone has already identified in some way with North American indigenous, tribal, Indian, or similar racial or ethnic identity.