intersex

handout: http://www.marchofdimes.com/professionals/681_1215.asp

recall Anne Fausto-Sterling: about 1 in 2000 infants born with ‘ambiguous genitalia’ and 1 in 400, 5 sex-related characteristics do not correspond neatly according to binary model of difference

more variety than even “5 sexes” — hormonal as well as anatomical patterns

our Q: what are various ways in which culture-bearing humans have interpreted and lived with this natural ambiguity? and why?

a) cultures have accommodated the ambiguity

hermaphrodite (hermes + Aphrodite)

1) hijra in India— not so much a ‘natural category’ of person, but a role that can subsume a range of sex/gender nonconformists including intersexuals but also what in west would call eunuchs (castrati), homosexuals, transsexuals, transgendered persons

anthropologist Serena Nanda interprets hijras in the conceptual, cultural context of Hinduism

the hijra is marginalized, but recognized — there’s a conceptual space for intersex

2) guevedoche (‘penis at 12’) Dominican Republic
   = the hereditary genetic mutation that Cal has in Middlesex, which in US has no popular name and is treated as a medical condition — 5 alpha-reductase — “treatable”

in US, are there ways of accepting ambiguity?
“queer” identity — not based on shared essential identity but on shared nonconformism — “queer nation” or “transgender nation”— not in thrall to binary sex/gender distinction in which biology and cultural identity and behavior viewed as both categorically different and ideally congruent

more commonly (mainstream US),

b) rejecting the ambiguity of intersex

we have no social category to accommodate ambiguously sexed individuals (except pornographic freak shows, like in Middlesex — commoditization!)

"hermaphrodite" is not one of the options available on a birth certificate
not only modern US: ancient Spartans practiced infant abandonment

WHY today insistence on 2-sex model of gender difference? clearly defined binaries? as Fausto-Sterling noted, our institutions, laws presume 2 genders

did you read Bill Beeman’s *Baltimore Sun* op-ed piece, “Who are you?”

marriage law is one thing at stake

Q of marriage defined constitutionally as “between a man and a woman” — is that such an obvious statement? what about intersexuals? transsexuals? how WOULD the law define man/woman today, with ISNA and other groups to raise the question of definition?

begs Q of how, as a society, we **should** approach intersexuality

protocols established in 1950s that doctors would do sex determinations without seeking permission or even really knowledge of parents — idea being that gender acquisition would go more smoothly if no ambiguity

Cheryl Chase speaks of sex “determination” in both senses of the word… but this “determination” based not only on “facts” but on technological ability — 90% “determined” female b/c easier to “make a hole than a pole”!

gender identity is a complex INTERACTION of biology and culture (Hubbard) — not just one informing the other

John/Joan case, overseen by Dr. John Money (the inspiration for Eugenides’ Dr. Luce)

‘Joan’ grew up to identify as ‘John’, transitioned to masculine persona
had phalloplasty, married a woman [Rolling Stone story on MIT server]

for the general medical community, what would count as a “successful” sex assignment or reassignment?

often adoption by the intersexed person of the gender role corresponding to the sex assigned by the health care workers + "heterosexual" sexual orientation

not only is equivalence b/w sex/gender at issue, but heterosexuality as normative

**note that the identification of heterosexuality is contingent upon what gender the person was assigned by the medical professionals during infancy**

what are the cultural/ideological underpinnings of this scientific protocol?
Q: is this rational modern science? or patriarchal culture? or can we separate the two?

Cheryl Chase and the ISNA

from the website (isna.org):

“The Intersex Society of North America (ISNA) is devoted to systemic change to end shame, secrecy, and unwanted genital surgeries for people born with an anatomy that someone decided is not standard for male or female.

We have learned from listening to individuals and families dealing with intersex that:

* Intersexuality is primarily a problem of stigma and trauma, not gender.
* Parents' distress must not be treated by surgery on the child.
* Professional mental health care is essential.
* Honest, complete disclosure is good medicine.
* All children should be assigned as boy or girl, without early surgery.”

1) what do you think about routine sex assignment surgery on infants? pro/con
2) what do you think about current transsexual “treatment” of “gender dysphoria”?

NOW: are your arguments concerning intersex and transsexualism philosophically, logically consistent?

transgender/transsexual support based on essentializing gender identity — body is malleable but sex/gender should match up

sex-assignment surgery on infants ALSO based on sex/gender matching — in this sense conceptually consistent w/ transsexualism

but what about intersexual activism (Chase)?

based on essentializing biological sex

gender should be malleable — and sex/gender system itself challenged at least in long term; in short term, advocating ‘choosing’ a gender identity

support of transsexualism is consistent with a major criticism of sex assignment surgery of intersex infants — informed consent — ascription, not achievement, of embodiment

begging question of usefulness and limitations of appealing to “nature,” natural “fact” to legitimate social formations — it’s a political and cultural, not strictly logical, argument

MIDDLESEX: what did you make of Eugenides’ fictional account? helpfully – through fiction – get at experience?