

Breaking down the acronym: I

This month, we'll be talking about the I in LGBTQIA: intersex. Intersex people are individuals born with reproductive and/or sexual anatomy that do not fit the conventional definitions of "male" or "female". These variations can include variations in chromosomes, hormones, genetic development, and visible or internal anatomy. Although people are born intersex, some traits may not develop until puberty. Other traits, like chromosomal variations, may not ever be discovered until the individual in question has already passed and their body undergoes an autopsy.

This particular part of the acronym is an extremely complex topic. To understand intersex people, it is immensely helpful to understand the science behind the intersex identity. First and foremost, we need to get rid of the idea that there are only two biological sexes. The two *most common combinations* of sexual chromosomes and reproductive attributes in humans are what we call "male" and "female," but we know now that they are far from the only combinations that occur in the human genome, and that chromosomes are not the only genetic factor that determines biological sex.

For thousands of years humans have determined gender simply by looking at the external reproductive organs of newborns. Boys had penises, girls had vaginas. From this rudimentary method of identification came the concept of androgyny or "hermaphroditism" (I am sure you're all familiar with this term, but you should refrain from using it as it's generally considered outdated and derogatory today), wherein an individual was observed to have mismatched anatomy or both sets of genitalia. The Ancient Greeks saw gender as a spectrum with men and women on opposite sides, "hermaphrodites" at the perfect center, and with many points in between connecting them all. This was the prevailing interpretation of the gender spectrum until the Dark Ages, when a lot of knowledge and philosophy was lost to time. As with many other queer identities, the rights and treatment of intersex individuals has fluctuated ever since then depending on the year and location. Generally throughout history, visibly intersex people were raised to be one gender until they were old enough to decide for themselves whether they wanted to continue to present themselves that way or change to another gender presentation.

Then came the discovery of modern genetics in 1866 and the subsequent boom in genetic research. In the early 1930s, the first surgeries were performed on consenting intersex adults to change their existing anatomy to be as close to their desired gender as possible. While this was a momentous victory for intersex people worldwide, it didn't last; these successful surgeries unfortunately inspired Nazi-era human experimentation on intersex child prisoners (whom the Nazis classified as "homosexuals" alongside trans people due to their gender nonconformity, despite that neither trans nor intersex people are inherently LGB.) Even worse, the attitude the Nazis had towards intersex children spread to other countries and maintained itself well through the 1960s—at which point it became standard practice for doctors to write off intersex children as having "birth defects" and to conduct involuntary medical interventions to "correct their conditions." These so-called "medical intervention" surgeries had no evidence of improving the quality of life of the infant patients, were often only proposed because the adults involved were afraid the child would turn out queer if they didn't get "fixed," usually amounted to nothing more than genital mutilation, often caused lifelong physical or emotional trauma to the children involved, and are still performed in the USA to this day.

With even more advancements in genetic research, we now know that biological sex is not a singular clear-cut designation, but an *ongoing developmental process* that depends on over 25 separate genes—in addition to the chromosomes we all learned about in high school biology class, of which there are six common combinations that don't result in the death of the fetus: XX (female), XY(male), X, XXY, XXXY, and XYY. Accounting for all of these genetic variations, it is estimated that 1/100 people are born with differences in sexual development that would classify them, in some circles, as intersex. But not all of these genetic traits manifest as visible differences; some may cause infertility, while others may change the structure of internal reproductive organs, while others still may lead to under- or overproduction of estrogen or testosterone. Due to the history of genital mutilation disguised as “medical interventions” carried out against visibly intersex people in infancy, it is a large source of debate in the intersex community about which variations and combinations of traits “count” as intersex, how many invisible deviations from the binary are required to be considered intersex without having any visible intersex traits, etc..

It is important to note that trans and intersex are not the same thing. Trans people do not identify with their birth sex by nature, while a good number of intersex people do identify with the sex they were assigned at birth and therefore consider themselves cisgender. The majority of transgender people experience gender dysphoria, while only around 8-20% of intersex people do. Gender dysphoria in intersex individuals is often, though not always, caused by botched “corrective” surgeries that were performed when they were too young to consent.

Additionally, there is a complicated relationship between the intersex community and the LGBT+ community at large. The intersex community has many specific concerns that distinguish them from the rest of the LGBT+ community regarding human rights violations against intersex youth, the way information about intersex individuals is [mis]represented in the mass media, and the amount and quality of resources available for intersex people. Some members of the intersex community believe that being included in the LGBT+ community will distract from those issues. Others see the LGBT+ community as a safe place they want to be a part of because the intersex community and the LGBT+ community share many of the same experiences of oppression and harm based on gender and sex. Either way, the LGBT+ community is defined by fighting for the rights of non-heterosexuals and people who fall outside of the accepted gender binary, and the vast majority of LGBT+ spaces consider intersex people to be part of the family if they so desire. We, too, should strive to make our community a safe place for intersex people to exist without judgement.

Beck Hastings