



# **The Traumas Affecting Intersex Individuals**

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There are many events in everyday life that can have a negative impact on an intersex individual's life, including social, economic, medical, religious, conservative, and liberally founded interactions. In this research essay we will work to understand the social stigmas surrounding this demographic, the internal and external consequences of being diagnosed with hermaphroditic genitalia, and review the impacts modern day cultures have on the mental well-being of those who identify as intersex. With reference to medical journals, personal experiences from a person who identifies as intersex, and review of societal beliefs held in the United States, we will further understand this category that skirts the line between medical and societal anomaly.

Before delving into the length of this essay, one must first have a general concept of what "intersex" means. Intersex is a personal nomenclature for those who are diagnosed with any number of the forms of "Disorders of Sex Development" (DSD). This is further defined as "DSD has a comprehensive definition including any problem noted at birth in which the genitalia are atypical in relation to the chromosomes or gonads." (Kim, 1) To further explain; it is any atypical malformations of genitalia (typically external). These disorders include XX chromosomal issues such as Congenital Adrenal Hyperplasia (CAH) both complex and simple, those with XY chromosomal complications such as impaired testosterone action, and full sex chromosomal disorders like Turners Syndrome (Kim,2). There are many more intersex disorders than the few listed in this essay, and it is important to note that not all intersex conditions are recognizable at birth. For the purpose of this essay, we will be focusing on 21-hydroxylase-deficient Congenital Adrenal Hyperplasia, also called complex CAH. By focusing our attention on this disorder we can gain more specific knowledge and experience, and recognize the long term affects of a DSD diagnosis on a person presenting with ambiguous genitals from birth.

The first trauma impact derives from the medical field's interaction and understanding of current cases of CAH. A number of tests are used to decide which gender the doctors will choose to "sculpt" the ambiguous genital region to have the presenting features of either male or female. This is often done in early years of childhood and without the consent of the patient (Garland, Jameson, Diamond, 81-102). While attention has been called to these issues, the medical advice is slow to accept new policy. For example, the author of this paper had their "genital normalization surgery" done at 3 years old, shortly before entering foster care. This mutilation practice is still common today and one feminine rights activist noted "[these procedures are common] because intersex conditions generally, and ambiguous genitalia in particular, threatened social norms about sex, gender, and sexuality that structure so much of daily existence that they were pathologized, they argued, and this pathologization justified their treatment with unsuccessful, experimental surgeries and secrecy, causing immense physical and psychological harm." (Clune-Taylor, 690-712). In this author's experience and in the experiences of many others, doctors will employ manipulative language and techniques to goad the parents of a child with CAH into allowing a genital revision surgery; going so far as to say, "there may be a potential for cancerous growths if the genitals remain unrevised". It is important to note here that not only has there been no evidence to support these claims, but the verbiage was also carefully selected as there has been no availability of unbiased observation and study of the likelihood of complications brought into adulthood due to the lack of CAH presenting children, adolescents, and adults who were not forced into revision.

The second common trauma is the effects traditional Christianity has on those who have been diagnosed as intersex. While there are many variations on Christian belief, nearly all of them reference the bible. When speaking in terms of gender and binary conformity, the following

verse is used in support of the Christian lifestyle that pertains to the opposing outlook on intersex individuals. “So God created man in his *own* image, in the image of God created he him; male and female created he them” (Genesis, 1:27). and when specifically asked about their church’s interpretation of gender and gender conformity- especially as it pertains to those born with ambiguous genitalia, one can easily find quotes similar to the following: “So when we consider a condition like intersexuality, does this mean that “transgender” activists are correct when they argue that the traditional understanding of gender as ‘binary’... is outdated and should be discarded?... From a biblical perspective, the answer is “no.” Despite the fact that a tiny fraction of the population faces life with an intersex condition, Scripture teaches that humans are made in God’s image as male and female” (Price, 2015). Intersex children who are raised in Christian homes are forced to ask themselves questions like, “If god made man and god made woman, who made me?”. The detriment this has on a child’s psyche is one this author can confirm years of therapy has yet to heal. When religions have conflicting views and pastors, priests, and bishops give “awe-inspiring” sermons about the devils of transgenderism, bisexuality, and all manner of unseemly gender sins; the intersex child is ostracized. It is not a leap to understand the harm that pushing the cisgendered agenda can wrought on a young mind who’s own physical appearance and presentation of traits they have little to no control over. Reminding a child that “God did not make them” and “being neither man nor woman is a sin”, that they are “condemned to hell” is akin to prejudices of old. This is one of several reasons intersexuality is spoken with hushed tones and fear of rejection from the God-fearing congregation.

The third trauma of intersexuality is the societal reactions and rejections of those individuals who fall into the category of intersex. This is often the most difficult piece of “the puzzle” to get works that can be properly cited. “Shame and confusion may overwhelm parents

whose infant's anatomy doesn't match typical male or female patterns” (Karkazis, 2018). When a sense of secrecy and fear of communal response is pushed on a person from infancy, the

isolation events become more frequent. This author has done their best to ask friends and family they know to consent to an interview to discuss the reactions of their community after they “came out” as intersex.



Many of the adults spoken with have either not gone through that process due to “fear of their friends’ reactions” or were too uncomfortable to discuss the reactions of their peers and loved ones as they still felt they were to blame for the reactions they received. Common life limitations were discussed, however. These events ranged from preventative measures like no “slumber parties” as children or adolescences, to the suspension and expulsion for “coming out” to a small group of friends due to the “grotesque nature” of the conversation. Intersex children are taught to be afraid of their peers and disgusted by their bodies. Even more so than many gendered stereotypes faced in adolescence and early adulthood. When the fear is ignored, and when one does, the visceral reaction of townspeople and complete shunning of an already isolated person further solidifies a life of being alone, even when surrounded by people.

The final trauma is belittling of an intersex person’s struggles by the “new generation” of the Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, and Asexual community.

(also called the LGBTQQIA or LGBT community). When the youth of this group cry outrage at the miniscule events they have to face in today's liberal society, it belittles and removes the personal journeys of those that came before them. Social media posts in Facebook, Reddit, Instagram, and the like, spout phrases like "You don't need to have dysphoria to be transgender" and "All [genitals] look different so we are all a little bit intersex" they defeat the purpose of campaigns to recognize the rights of people who have suffered, truly and terribly. It concretizes the conservative belief that if given a little slack on gender issues, people will be identifying as "rocks," "fey," and animals. By dramatizing their own life's lack of trauma, the new generation causes frustration and pain to those they claim to not only support, but state they sympathize with.

In conclusion, there are many issues affecting intersex people that every day people do not consider. Although this essay has several common traumas that affect many, this is not a comprehensive and total list of experiences. Each person in this category has their own experiences and may experience more traumas, or if they're lucky, none of them at all. We have taken a closer look into the struggles that are faced and hopefully have gained a better understanding of those around us. This can lead to more kindness and advocacy for a safe place to those we know may be dealing with these traumas.

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