“The Problem of Intersex”

A Seminar with Ellen Feder

When in the late 1990s I wrote about the development of the diagnosis of Gender Identity Disorder (GID) in children and youth, I treated the subject as exemplary of the development of gender and the kind of power I argued it revealed. I was critical of the diagnosis and its application, but I did not expect, much less hope, that my work would have an impact.

When I began to study the treatment of children with atypical sex anatomies (“intersex”) a few years later, however, my aim was not to illustrate a theoretical point, but to use the tools of philosophy to make change. There has been change in the standard of care since the beginning of intersex activism, especially since 2006, when physicians acknowledged, for the first time, the significant problems that the treatment of atypical sex anatomies has entailed.  And yet, there appear to be as many, or even more normalizing surgeries since that time.

It is no longer obvious how best to change the minds of those who believe sincerely that they are doing right by their own children, particularly when physicians themselves harbor doubt about whether delay or deferral is in the best interests of their pediatric patients. “Demedicalization,” furthermore, is a complicated matter in cases where many conditions associated with atypical sex anatomies require medical intervention for flourishing. I am currently exploring the role that apology can play, and would welcome the opportunity to think through some of the opportunities and challenges that apology in this case may afford.

Readings:

Introduction and Conclusion to Feder’s *Making Sense of Intersex: Changing Ethical Perspectives in Biomedicine* (Indiana: 2014)

“Shame and Humiliation in the Medical Encounter,” Aaron Lazare, *Arch Intern Med*, Volume 147, 1987