

Intersectionality of Intersex and Disability

Intersex persons, in the vernacular also known as hermaphrodites, or medically as persons with “*Disorders of Sex Development (DSD)*”, are a comparatively small but heterogeneous group of people born with “atypical” sex anatomies and reproductive organs, including atypical genitals, atypical sex hormone producing organs, atypical response to sex hormones, and atypical genetic make-up (karyotype). In **about 0.2% of the general population** these variations are noticeable enough to have an often severe impact on their lives.¹

From our perspective the most striking intersectional aspect is **how doctors and policy makers frame and “treat” both** persons with intersex variations and persons with disabilities **as suffering from disability in the medical definition, and in need to be medically “cured”** in order to qualify as proper humans – whether they want it or not and whether they enjoy it or not.

In particular we’d like to refer to the **harmful “scientific notions” of intersex** canonised during the Age of Enlightenment, and their **racist, eugenics and supremacist implications**, which still inform the western medical practice today, namely that

- a) intersex is a **subhuman species**, and therefore most frequent in less developed and more primitive sections of the human race, traditionally located in the hotter climates, as well as amongst primates, and
- b) for such less evolved specimens, **harmful practices** that couldn’t be tolerated on fully-fledged humans, like for example clitoris amputations or FGM, are not just tolerable, but downright **necessary to “help” them**, and even approved by a papal envoy.²

While **today’s medical justifications** are more secular and rationalised, the bottom line remains the same: In such specimens, for example amputation or cutting of the clitoris is surely justified.³

To further illustrate these harmful and degrading “scientific notions” towards intersex people, some **practical examples** from Germany:

- **Intersex = “Bastardisation” caused by “Racial Mixing” (Richard Goldschmidt, 1915)**
To this day, it’s conveniently ignored how deeply engrained these racist notions are in the very term intersex itself. While it’s well known that the term was coined by geneticist and zoologist Richard Goldschmidt, it’s hardly ever recognised that it was introduced to describe the blurring of sex markers in gypsy moths as a “*bastardisation due to racial mixing*”.⁴

1 See our NGO Report, p. 9-10,

<http://intersex.shadowreport.org/public/2018-CRPD-LOIPR-Germany-NGO-Zwischengeschlecht-Intersex-IGM.docx>

2 See 2016 CEDAW France NGO Report, p. 7,

<http://intersex.shadowreport.org/public/2016-CEDAW-France-NGO-Zwischengeschlecht-Intersex-IGM.doc>

Dana Aliza Levy: “Conceptions and Perceptions of Human Difference: Albinos and Hermaphrodites in the Enlightenment”, Bachelor Thesis, 2012, see <http://stop.genitalmutilation.org/post/Racist-Roots-of-Intersex-Genital-Mutilations-IGM>
See also our NGO Report, p. 9,

<http://intersex.shadowreport.org/public/2018-CRPD-LOIPR-Germany-NGO-Zwischengeschlecht-Intersex-IGM.docx>

3 For available statistics of the most frequent IGM practices in Germany, see 2017 CEDAW Germany NGO Report, p. 8-10, <http://intersex.shadowreport.org/public/2017-CEDAW-Germany-NGO-Zwischengeschlecht-Intersex-IGM.doc>

4 See 2016 CEDAW France NGO Report, p. 67,

<http://intersex.shadowreport.org/public/2016-CEDAW-France-NGO-Zwischengeschlecht-Intersex-IGM.doc>

- **“Human Heredity Theory and Racial Hygiene” (Baur, Fischer, Lenz, 1936)** The German standard textbook of eugenics in the inter-world-war period, referred to by Hitler in “Mein Kampf”, lists under “*Abnormal Hereditary Dispositions*” several intersex-related diagnoses including “*Hypospadias*”, “*Pseudohermaphroditism*” and “*Intersexuality*”, declaring “*intersexuality*” most likely to be caused by “*abnormal hereditary factors caused by mutation*” (Baur-Fischer-Lenz, 4th edition 1936, vol. 1, p. 402-404).⁵
- **“removal of the clitoris does not interfere with the ability to achieve orgasm” (Jürgen Bierich, 1962)** The renowned German endocrinologist Bierich was an adamant advocate of cosmetic clitoris amputations on intersex children: “*Whenever possible surgery should be carried out before the children reach four years of age. In mild cases removal of the clitoris is all that is necessary. The clitoris should be totally removed and not just amputated, otherwise troublesome erections of the remaining stump may occur. [...] removal of the clitoris does not interfere with the ability to achieve orgasm.*” (Jürgen R. Bierich: “The Adrenogenital Syndrome”. In: Overzier (ed.), “Intersexuality”, 1962, at 379)⁶ To this day, German Society of Endocrinology awards an annual “Jürgen Bierich Memorial Prize”.
- **“In Germany, we don’t want to breed mutants” (German doctor, 21st century)** This was the justification of a German doctor to parents when they complained about why they had surgically removed reproductive organs (ovaries) from their intersex child, without even consulting the parents. The parents thereafter wanted to sue the doctors, but had to give up, because they couldn’t find a lawyer to support their case (Claudia Lang, “Intersexualität. Menschen zwischen den Geschlechtern”, 2006, p. 247).⁷

To this day, **in Germany there has been no coming to terms** with neither the historical nor the ongoing harmful misrepresentations, nor with the ongoing mutilations.

To this day, instead of finally investigating, monitoring and combatting Intersex Genital Mutilation as a serious human rights violation, namely inhuman treatment and a harmful practice,⁸ **German doctors and policy makers continue to misrepresent IGM as supposedly genuine health care** instead, advocated and paid for by the Public Health System.

5 Helga Satzinger (2009), Racial Purity, Stable Genes, and Sex Difference. Gender in the Making of Genetic Concepts by Richard Goldschmidt and Fritz Lenz, 1916-1936. In: Susanne Heim, Carola Sachse, Mark Walker, The Kaiser Wilhelm Society for the Advancement of Science under National Socialism, p. 145-172, at 161-162

For more info in German, see also <http://blog.zwischengeschlecht.info/post/2014/10/08/Rassenmischung-Intersex-Hypospadiе-Scheinzwittertum-Epispadie-DSD-Baur-Fischer-LenzErblehre-Rassenhygiene>

6 See 2016 CEDAW France NGO Report, p. 70,

<http://intersex.shadowreport.org/public/2016-CEDAW-France-NGO-Zwischengeschlecht-Intersex-IGM.doc>

For more info in German, see also <http://blog.zwischengeschlecht.info/post/2012/06/22/Orgasmusf%3%A4higkeit-leidet-durch-Klitorisentfernung-nicht-Jurgen-Bierich-Hamburg-T%3%BCbingen>

7 For more info in German, see also <http://blog.zwischengeschlecht.info/post/2009/05/23/Zwangskastrationen-an-Zwittern%3A-Keine-Mutanten-zuchten>

8 CRPD/C/DEU/CO/1, paras 37-38; CRPD/C/CHL/CO/1 paras 41-42; CRPD/C/ITA/CO/1, paras 45-46; CRPD/C/URY/CO/1, paras 43-44; CRPD/C/GBR/CO/1, paras 10(a)-11(a), 38-41; CRPD/C/MAR/CO/1, paras 36-37; CAT/C/DEU/CO/5, para 20; CAT/C/CHE/CO/7, para 20; CAT/C/AUT/CO/6, paras 44-45; CAT/C/DNK/CO/6-7, paras 42-43; CAT/C/CHN-HKG/CO/4-5, paras 28-29; CAT/C/FRA/CO/7, paras 32-33; CCPR/C/CHE/CO/4, paras 24-25, CCPR/C/AUS/CO/6, paras 25-26; CRC/C/CHE/CO/2-4, paras 42-43; CRC/C/CHL/CO/4-5, paras 48-49; CRC/C/FRA/CO/5, paras 47-48; CRC/C/IRL/CO/3-4, paras 39-40; CRC/C/NPL/CO/3-5, paras 41-42; CRC/C/GBR/CO/5, paras 46-47; CRC/C/NZL/CO/5, paras 25 + 15; CRC/C/ZAF/CO/2, paras 39-40 + 23-24; CRC/C/DNK/CO/5, paras 24+12; CRC/C/ESP/CO/5-6, para 24; CRC/C/ARG/CO/5-6, para 26; CEDAW/C/FRA/CO/7-8, paras 18e-f + 19e-f; CEDAW/C/CHE/CO/4-5, paras 24-25, 38-39; CEDAW/C/NLD/CO/6, paras 21-22, 23-24; CEDAW/C/DEU/CO/7-8, paras 23-24; CEDAW/C/IRL/CO/6-7, paras 24-25; CEDAW/C/CHL/CO/7, paras 22-23, 12(d)-13(d), 14(d)-15(d); CEDAW/C/LUX/CO/6-7, paras 27b-c + 28b-c; CEDAW/C/MEX/CO/9, para 21 – 22; CEDAW/C/NZL/CO/8, paras 23(c) – 24(c); CEDAW/C/AUS/CO/8, paras 25(c) – 26(c)