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An intersex perspective on the trans, intersex and TERF communities

By Guest

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Abstract

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Article

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By Cary Gabriel Costello, PhD

Recently I spent several days in a public internet group for "gender critical" people, after a few intersex friends voiced some positive things about this line of thinking. As an intersex individual who gender transitioned from the sex he was assigned at birth, I was puzzled and concerned by this development. I'd read in trans writing that "gender critical" feminists were actively transphobic-yet here were some intersex advocates excited by what they were saying. So I wanted to go have a look for

myself. Were “gender critical” feminists in fact good allies for the intersex community? What would it mean for trans communities if this were so?

Intersex People Critique the Insistence that Sex is a Binary

Simply on the face of it, from an intersex perspective the phrase “gender critical” sounds appealing. Advocates for the intersex community are extremely critical of the way sex and gender are understood and enforced in contemporary Western societies. We live with a social ideology of binary sex that conflicts with the biological reality that sex is a spectrum, and many people are born with bodies that lie between the male and female ideals described in textbooks. The textbooks say “men have XY chromosomes and women have XX,” but there are XX men and XY women, and people with many other sex genotypes (XXY, Xo, and XX/XY mosaics to name just some). Textbooks proclaim “men have a penis and scrotum, while women have a clitoris, labia and vagina,” but many people are born with an intermediate phalloclitoris and labioscrotum. Children are born with a phallus and a uterus, with vulvas but internal testes, with intermediate ovotestes, with external testes but no penis, and with other variant genital configurations.

Sex is a spectrum of variations, in humans and the rest of the animal kingdom. But societies cut that spectrum up into socially-recognized sexes, just as they slice the color spectrum up into named colors. Cultures in different global locations and different historical periods have sliced the sex spectrum up in contrasting ways, just as they’ve named differing numbers of colors when looking at the rainbow. While other social sex systems recognize three, four, or five sexes, contemporary Western societies generally only recognize two: male and female. And people are deeply invested in the ideology that there are just two sexes-it’s been embedded in religion (“Male and female created He them”); it’s graven into our birth certificates and a thousand other forms of ID listing “M” or “F”; it shapes our built environment with bathrooms and locker rooms and the like divided by binary gender; and it underlies our understanding of sexuality, family, and intimacy. So when, inevitably, intersex children are born, it’s treated as a crisis.

It’s hard, growing up intersex in a society that enforces a sex binary, medically, socially and legally. We are subjected as children to surgeries meant to “normalize” our bodies, with lifelong ramifications that can be quite negative (loss of genital sensation, loss of fertility, loss of a source of natural sex hormones, and sometimes assignment to a sex with which we do not grow up to identify). Often we are not told the truths about our own intersex status. Our bodies are treated as shameful, and we are taught to keep our variations secret, closeted. We may find it hard to form relationships, being told both that our “conditions” will drive people away and must be hidden, but also that if we do not disclose them to sexual partners we are deceitful. If our variance isn’t discovered until adulthood, we may find ourselves losing relationships, reputations, even careers, and forced to have hormonal and surgical medical interventions (as a condition, for example, of participating in sports).

Intersex advocates want this to change. We want the natural sex spectrum to be acknowledged, and our bodies accepted. We want to put an end to genital surgeries forced on unconsenting children. We want our gender identities to be respected without our having to alter our bodies medically unless we so desire. We want to remove gender markers from birth certificates, since that requirement is used as an excuse by doctors to force rushed sex assignment decisions on parents of intersex children. We want children to be told the truths about their bodies matter-of-factly, for doctors to stop treating us

like fascinating “cases” to poke and prod, and for society to stop treating us as freaks. We want intersex children to grow up with self-respect, and with the autonomy to express their own gender identities and make their own decisions about what medical interventions, if any, will be made into their bodies.

Intersex people are very critical of the binary sex and gender ideologies of our society, and how they are implemented institutionally. Therefore, a group that says they critique gender from a feminist perspective certainly sounds like it would make a reasonable ally.

Intersex People and “Gender Critical” Politics

The intersex friends of mine who mentioned being drawn to “gender critical feminism” were particularly attracted by the fact that these feminists were critical of the term “cis gender.” Intersex people are often uncomfortable with the application of the terms “cis” and “trans” to intersex experience. The terms apply very poorly because they presume that physical sex is binary (even if allowing that gender identities may be nonbinary). For example, if a person is born genitally intermediate, is surgically assigned female in infancy, and grows up to identify as a woman, is she “transgender” because she was surgically altered to become female, or “cis gender” because she identifies with the sex she was assigned at birth? Either term winds up misrepresenting something about her experience. In any case, gender critical feminists reject the term cis gender, and this has appeal for intersex people frustrated with binary cis/trans terminology applying so poorly to them.

Another reason some intersex friends of mine may have been drawn to gender critical writing is that in recent months, there have been a series of “mainstream” articles and online posts in which these positions have been sympathetically expressed. For example, one article mentioned by an intersex friend critiqued the term “cis privilege” by caricaturing it as meaning “having a female body is a privilege.” Clearly this is false: because of patriarchy, female bodies are sexualized, framed as weak, and subjected to surveillance. Lots of nonintersex cis women dislike getting periods or feeling constantly at risk of an unwanted pregnancy. Having a female body is not a privilege-but it is also not how trans advocates define cis privilege at all. Trans people actually define cis privilege as “the benefits one derives from being seen as a ‘real’ and ‘natural’ member of one’s identified sex” (lack of public scrutiny of one’s primary and secondary sex characteristics, being able to use a public bathroom with relative ease, having ID that matches one’s identity, etc.). Nor do trans people deny, as the linked article claims, that cis people also suffer from gender policing. Someone who identifies as a woman yet who is very butch in her gender expression can suffer from bathroom panic, and a male-identified person who is quite feminine may well face a great deal of street harassment. That is why trans advocates regularly fight for laws banning discrimination on the basis of gender identity or gender expression. But if you read the article mentioned by my intersex friend and took it at face value, as they apparently did-why, the arguments of trans women sound regressive and ludicrous and enforcing of binary gender stereotypes. Trans women are telling other women their privilege is to enjoy being pretty and silent and submissive and having lots of babies, says the author! If that were true, transfeminists really would be revealed to be patriarchal oppressors in disguise. Only, it’s not true. It’s a false characterization on par with saying that “feminists are man-haters.”

Another factor attracting intersex people to “gender critical” arguments is that they put the idea of accepting the natural body front and center. Instead of rejecting one’s body as defective, embrace it!

This exhortation has enormous appeal to intersex advocates whose central concern is stopping the imposition of “normalizing” genital surgery on intersex infants. If only parents, upon the birth of a child with intermediate genitalia, would look on them, not with dismay, but with the same tender appreciation that parents feel when seeing tiny little sex-typical penises and vulvas on their newborns! If only female-assigned intersex tweens weren’t told they would have to have a vagina constructed soon, because otherwise they would never be able to have sexual relationships. If only so many American children born today and given an “M” on their birth certificates weren’t given genital surgery for hypospadias, sometimes just because the urethra opens low on the penile head instead of the tip. Shouldn’t the person possessing genitals be the one to decide if the risk of loss of sensation in their genitalia is worth the presumed benefit of those genitals looking somewhat more like the idealized binary?

Now, as a practical matter, it turns out that intersex advocates and “gender critical feminists” have very different end positions on medical interventions into the sexed body. Intersex advocates believe that no intervention should be forced-but also that once an intersex person is old enough to give full informed consent, that hormonal, surgical, or others interventions should be performed if that’s what the individual truly wants. Many, many, many intersex people do choose interventions of their own free will. Sure, an intersex person who has vaginal agenesis may have no desire whatsoever to have her pelvis dissected and a neovagina constructed from a section of cheek or intestines or labia. There are so many ways to enjoy sexual relations other than vaginal penetration. But many do want a vagina, to support female identities if they so identify, or because of the great social value placed on penetrative vaginal sex, or in the case of those with a substantial uterus and with ovaries, because they could become pregnant through sexual intercourse. Intersex people often seek hormone replacement therapy to masculinize or feminize their bodies, or surgeries to move their urethras to allow neater or standing urination, or any of a wide number of other interventions. And intersex advocates support all of these choices. We just wish them to be free choices, not forced by doctors or parents or social shaming.

Gender-critical feminists, on the other hand, turn out to hold a very different position: that all interventions into the sexed body are mutilations, not just those imposed without consent. Just as it is a mutilation to surgically alter the innocent bodies of intersex babies, they say, it is a pointless self-mutilation for an adult to choose to have their sexed body medically altered, because sex cannot be changed. Chromosomes can’t be altered[1]. A vaginoplasty cannot produce a real vagina, nor a phalloplasty a real penis, they say, and all interventions into the sexed body are motivated by patriarchy and thus counter to the interests of women. The only healthy and feminist response to unhappiness with one’s body presented is to learn to accept it as it is. For intersex people, this just replaces the rigid regime of forcing medical interventions with a rigid regime of withholding them. Switching one constraint on intersex people for another isn’t the motivation for this gender critical position-I don’t know if they are even aware that intersex people desire some medical interventions. The main purpose of their argument that one must accept the natural body is to tell trans people that they must give up on the “delusion” that one can be born with a penis but really be a woman, or born with a vagina but really be a man, or born a human being and really be a member of some alternative sex.

Gender-critical feminists, it turns out, have one central obsession, and that is with rejecting trans people, or more accurately, with rejecting trans women. In other words, they are TERFs.

Gender Crits, Radfems and TERFs, Oh My

Most trans folks are familiar with the label "TERF," standing for Trans-Exclusionary Radical Feminist. This is the term used in most writing by trans people to refer to feminists who oppose the acceptance of trans women in feminist organizations, women-only "safe spaces," and female facilities, and who fight against regulations, laws or policies that would protect trans people from discrimination. The designation "Trans-Exclusionary Radical Feminist" was created by other radical feminists who are not transphobic, and who were upset that the name "RadFem" was becoming associated in the public mind with bigotry against trans people.

Few people actively call themselves TERFs-transphobic feminists generally portray the name as a slur. I used to have the impression that most called themselves radfems, and were older second-wave feminists, who came of age in the era of lesbian separatism and who thought of themselves as "womyn-born-womyn." I thought of them as people whose transphobic framing of feminist politics was frozen in their youths, destined to fade into irrelevance as the rest of the world moved on. But instead there's been an upswing in their movement, probably as backlash to the fact that trans people have become more visible and, while still lagging far behind the rights being secured based on sexual orientation, some protections for people based on gender identity and expression have been won.

Now, the group in which I sojourned called itself a "gender-critical" discussion group. It had rules prohibiting personal attacks and requiring respectful listening, which sounded heartening. Nothing in its mission statement said anything about excluding people, it was open to all, and on its face, there was not a thing about it that seemed bigoted. I could certainly understand why a random intersex person coming across the group would be curious. I myself hoped that the "gender crits" would be different from transphobic radfems, and that their criticisms would be helpful to intersex people. But that's not what happened, and a couple of days spent reading and attempting to have conversations left me feeling depressed and sullied. The gender crits turned out to be TERFs by another name: feminist transphobes. There were a few positive moments, but they were vastly outweighed by slogging through a lot of LOLing about how stupid a person must be to think they can call themselves female when they were born with a penis.

What I think it is important for trans advocates to point out to intersex people is that trans-exclusionary radical feminists believe that sex is a natural binary, innate and immutable: men have penises, women have vaginas and uteri. The TERFs note that gender is a relationship of power, and frame this in an embodied way through binary sex: men seek to control women's uteri, reproductive capacities, and thus lives. The ultimate expression of patriarchy in this framework is the use of the penis to rape. As a result, "gender critical feminists" make the strong claim that anyone who denies that sex is a binary and that genitals determine gender is ignoring the terrorizing of "natal" women by rapists. ("Natal" is their alternative to "cis" to refer to a person who was born with the sex organs expected for someone of their gender.) This "gender-critical feminist" claim puts intersex people in a very bad place, positioned as supporters of rape if we argue that sex is not a natural binary.

Showing that TERF Positions are Not Good for the Intersex Community

Intersex advocates are interested in criticizing binary sex ideology-that's what makes the term "gender critical" sound appealing. But that's not what these transphobic feminists mean by it at all. As

they use it, the phrase “gender critical” denotes being critical of (or more bluntly, rejecting) the concept of gender identity-most especially the fundamental precept of transgender advocacy, which is that when gender identity and legal sex conflict, this provides pragmatic and ethical justification for a change of legal sex. But intersex people don’t reject the concept of gender identity at all. Most intersex people in the contemporary West have a clear gender identity, often as women or men, or sometimes as genderqueer or as identifying with the term intersex as a third gender category, and want their gender identities to be respected. Intersex advocates believe it is of paramount importance to center a child’s gender identity in any decisions made about altering an intersex child’s body, and have been famously fighting the legal case for M.C., a child who identifies as a boy, but whose doctors assigned him female based on their treatment protocols. The “gender critical” feminists’ core belief-that gender identity is a myth or delusion that society should ignore rather than validate-would undermine M.C.’s case. Transgender people need to point this out to retain intersex individuals as allies-and make trans support for children like M.C. clear by supporting the rights of children and adults to refuse imposed medical transition procedures, not just to request desired ones.

Another thing that may initially draw intersex people to TERFs is that they actively deny that they are transphobic, presenting themselves as reasonable women who are victims of slander. They often say they have compassion for “men under the delusion that they are women,” which they present as equivalent to believing one is really a horse or a space alien. They only wish, they say, to help trans people improve their mental health and come to accept their bodies. Accepting one’s body means accepting that one cannot call oneself a woman while having a penis. But participating in discussions with gender crits, it quickly becomes apparent that they are indeed transphobic-and apparently obsessed with penises. They talk about them constantly, and presume that all trans women have them (because they say even a trans woman who has genital reconstructive surgery now simply possesses an “inverted penis”). And penises are always presented as dangerous-“natal girls” might see them in locker rooms and be traumatized, trans-protective laws would mean no woman could ever be sure the person in the next stall didn’t have a penis, and thus pose a threat to her. This obsession with other people’s genitals and validation of the idea that people should be upset by those with the “wrong ones” runs completely counter to the interests of intersex people. It’s the very same binary sex essentialism and acceptance of gender policing that the medical profession uses to justify intersex genital reconstructive surgery. It is the logic used by doctors when they amputate or “reduce” the intermediate phalloclitorises of children they’ve assigned female: unless they do so, the child’s body will inspire shock and repulsion. In painting trans women’s bodies as deceptive, dangerous and disgusting, transphobic feminists paint those born sex variant with the same brush.

TERFs are not just binary sex essentialists, however, dividing the world into oppressors and oppressed through reference to binary genitals. They also have a theory of gender socialization. Their vision of gender socialization is bleak: boys are socialized to dominate, control, and rape women; girls are socialized to submit to this and embrace their oppressors and call this “femininity.” Clearly this is bad, and feminism is a movement of “natal” women that teaches women to recognize and resist this programming. Men, however, are presented as inevitably and eternally shaped by their socialization into patriarchy, as it advantages them. Trans women are asserted to be men, and while they may claim they do not enjoy being treated as men, this is said just to illustrate their blindness to their own privilege. Trans women are inevitably socialized to try to control “natal” women, as evidenced by their belief they

should be able to force “natal” women into “supporting their gender delusion” and treating them as sisters. Again, this rejection of gender identity conflicts with the interests of intersex people. It also paints a simplistic and binary picture of gender socialization, a process which is in fact quite variable and complex, shaped by one’s gender identity and one’s many social locations. Moreover, it is important to acknowledge the intersectional nature of marginalization and privilege, and speak not just of patriarchy but of kyriarchy, taking into account race, age, sexual orientation, (dis)ability, and other dimensions along which power is distributed. And one of these dimensions for nonintersex people is the axis of cis privilege and trans marginalization. Trans women-particularly those who are poor, of color, and/or have a disability-suffer huge levels of social stigma, violence, employment discrimination, etc.

Women who are neither intersex nor transgender need to acknowledge that while they are marginalized as women, they are privileged as cis people. But if trans communities want intersex people to be their allies in getting others to acknowledge this, then they have to take some steps as well. The first step for trans organizers is to recognize and affirm that intersex people don’t have cis privilege in the same way nonintersex people do. An intersex ipso gender person shares some privileges with a nonintersex cis person-having their birth certificate and other ID matching their identified sex, for example. But an ipso gender intersex person is marginalized in other ways like a nonintersex trans person, such as by having the veracity of their gender identity called into question by others due to what is deemed a mismatch with some of their sex characteristics. Furthermore, I hope that nonintersex trans people will acknowledge that they enjoy privileges which intersex people lack, especially that of not facing one or many unconsented-to medical interventions into their bodies, perhaps destroying the very sexed aspects of their bodies with which they matured to identify.

A final core factor in “gender critical” ideology is that while it grows frothy in its fears about trans women, it is weirdly quiet on the topic of other trans people. Trans men are presented by TERFs as just sad women who don’t understand that it’s ok to be a butch woman or a lesbian, victims of Stockholm syndrome identifying with their oppressor. There’s some anger about butch women “abandoning” the women’s community to chase fantasies of joining the oppressor camp, but the basic attitude is that “women who are deluded into thinking they are men” should be pitied and exhorted to return to the fold. Genderqueer people are presented as quite silly, confusing the admirable androgyny to which we all should aspire with a mythic new gender identity. They’re presented as dupes of the “genderist trend,” obsessed with something that doesn’t exist. In this, gender-crits are little different from society as a whole: much more transmisogynist than generically transphobic, paying much less attention to trans men and people with nonbinary gender identities than to the big bugaboo, trans women.

There’s a parallel thing that happens with respect to intersex people. Intersex people who identify as women get fetishized and scrutinized, and may in fact be misperceived as (nonintersex) trans women. On the other hand, those raised as men are mostly invisible to society-in fact, many people believe the old saw that “all intersex people are assigned female at birth.” In fact, at least 1 in 125 children assigned male at birth is diagnosed as having hypospadiacal DSD (disorder or difference of sex development). But doctors carefully avoid the term “intersex” in describing most of them-calling them just “boys with hypospadias”-and very, very few men with hypospadias come forth to claim their intersex status. Fragile masculinity in our society discourages men from doing anything that makes them appear less than fully masculine in society’s eyes. As a result, most, though not all, of the intersex individuals assigned

male at birth who come out to claim their intersex status are those who have nothing to lose thereby, as they identify as women or with a nonbinary gender.

And those intersex children assigned male at birth who mature to identify as female face huge levels of scrutiny. Sadly, this is one of the things that my attract intersex people to “gender critical” rhetoric. That’s because transphobic feminists claim that trans women are using the intersex community to try to force others to treat them with pity. They claim that it’s not intersex people, but trans women who are always going on about intersex issues in public discourse on sex and gender. And they claim that most people presenting themselves as intersex are really trans women pretending to have an intersex status. Unfortunately, when they hear this, a lot of intersex people nod their heads angrily.

I really have to say, as an intersex person, that TERFs did not make up the issue of transgender intersex wannabes being a problem. I have spent many years in support groups and networks for intersex people, and they are often inundated by people either speculating that they are intersex, or flat-out asserting it, wanting to know how to access gender transition services. Now, there are a number of perfectly understandable reasons why people may believe they may be intersex, although this is not the case. There’s so little information given to people about intersexuality in the course of education about biology and sex. And the idea that physical sex traits determine gender identity is widely held. So, if a person does not identify with the sex they were assigned at birth, they are likely to be prompted to wonder if their reproductive organs or genes have caused them to trans-identify. And there’s so little understanding even of what sex-typical genitals are “supposed” to look like or do that people can misinterpret quite typical characteristics as strange. A person with a typical phallus may see a line on the underside and think it must be proof of childhood surgery, when all people have a perineal raphe, which extends up the underside of the typical penis. You’d be surprised how many people have asked me if the fact that their clitoris gets erect when they are aroused is proof that they are intersex. Similarly, a lot of people seem to be unaware that it’s totally typical for women to find some darker hairs on their upper lips, or some whiskers spouting on their chins.

I see no problem with people who are questioning or exploring their gender identities to have questions about how typical or atypical they are in their bodily sex characteristics-though it can be frustrating to try to run an online intersex support board and have people posing questions like these overrunning them. But what is really damaging to the intersex community is when nonintersex people wishing to gender transition decide they are intersex, while knowing nothing about actual intersex bodies-and then run around telling everyone they meet strange stories about what being intersex means. I’ve encountered dozens of such people, and some of the stories they tell are frankly bizarre. Often these stories involve being born with two sets of genitals and reproductive organs, one male-typical and one female-typical, and one of these sets somehow being removed. (One person said his mother forced him to take birth control pills as a child, which caused him to absorb his penis into his abdomen, leaving just a set of female genitals behind. Another told me his uncle had hated his atypical genitals, so had ripped off his testicles and cut a hole for him to menstruate through, and now he just looked like a normal girl. A third told me she had a penis and scrotum in front, but a clitoris and uterus attached to her rectum, and regularly menstruated rectally. And several have told me that they were born with a uterus that doctors removed when they impregnated themselves.) These are not plausible stories because intersex people are born, not with two sets of sex organs, but with one intermediate or mixed set. And a person cannot impregnate themself, even in the extraordinarily rare situation where a person has both an

ovary and a testis and a small vagina and uterus and a small phallus, because a sex hormone balance that allows producing viable sperm will not support a menstrual cycle, and one that will support a menstrual cycle will not support spermatogenesis.

In my own experience, trans people of all genders present as intersex wannabes and tell strange stories about their bodies, trying to gain support from others to secure binary gender transition services or to validate their genderqueer identity. A particular focus on trans women as intersex wannabes probably just reflects transmisogyny on the part of TERFs and, sadly, some intersex people. Hopefully this phenomenon will fade away as transition services become easier to access, but today it's still a big problem for the intersex community, because these wannabes spread disinformation, sometimes setting themselves up as "intersex authorities" to people around them. Some of this disinformation can be actively dangerous, and none of it helps demythologize intersex reality in the general populace. Unfortunately, the substantial frustration in the intersex community about trans gender wannabes plays a large part in making transphobic feminist rhetoric sound attractive to intersex people. If the trans community wants intersex people to ally with it, it is very important that trans people educate themselves on what intersexuality actually means, and call out other trans people they hear telling impossible stories of having had two sets of genitals in childhood, or having impregnated themselves.

It's not just a problem that some trans people tell bizarre stories of impossible intersex bodies. Trans people are going to continue to alienate intersex people if they continue to assert the more abstract claim that the entire trans community has the right to call itself intersex, because trans people have an intersex brain, or the brain of one binary sex in the body of the other. This claim deeply alienates intersex people for two reasons. First, the impulse to appropriate the term intersex is based on the presumption that it is better to be deemed an intersex person than a trans person. This indicates a profound ignorance of all the pain and marginalization intersex people face-in other words, it illustrates nonintersex privilege. And secondly, the people who make this "intersex brain" case generally go on to assert that they deserve free gender transition services, because intersex people get those services for free as children, as society understands in their case that this is medically necessary. This claim presents the central problem against which intersex advocates struggle-forced genital surgery performed on unconsenting children-as both necessary and good. Arguments in favor of forced sex assignment surgery on intersex infants (or adult intersex athletes, or any other group of intersex people) are so maddening to intersex advocates that they can drive people into the arms of TERFs.

Steps Trans People Can Take to Support Intersex People and Keep Them as Allies

1. First and foremost, since TERFs believe that the "natural" sexed body should be accepted rather than medically altered, many commenters in the "gender critical" discussion group I visited were opposed to performing genital surgery on intersex infants, seeing it as a mutilation. This aligns with the central focus of intersex advocacy: stopping the imposition of genital surgery on unconsenting intersex infants. Trans advocates tend to describe hormone therapy or genital reconstructive surgery only in positive terms. When someone presents a surgery as mutilating, trans advocates may immediately attack them as transphobic. This is very alienating to intersex people, and it is time for a more sophisticated approach. What trans people need to do is shift from arguing that hormonal treatment and genital surgery are lifesaving wonders that are never misapplied, to talking about a fight only for

positive interventions into bodily sex, and never for negative ones. What distinguishes good from bad medical interventions into the sexed body are autonomy and full informed consent. Centering full informed consent will allow trans people both to counter transphobes and support intersex allies. When a transphobic critic claims that “confused girls are amputating their breasts,” for example, the reply can be, “Chest reconstructive surgery is supported by the American Medical Association as a treatment for gender dysphoria. Those transgender individuals who receive it are not confused, but have undergone careful counseling and have given their full informed consent. As trans people, we believe very strongly that interventions into the sexed body should only be performed with the full informed consent of the individual involved. For example, we oppose genital surgery when it is imposed on intersex infants, who cannot agree or disagree to it.”

2. In addition to becoming more vocal critics of intersex infant genital surgery, trans people can show that “gender critical” feminists make bad bedfellows for the intersex community by focusing attention on TERF insistence that sex is a binary. In the discussion group I visited, the fact that people are born sexually intermediate was somehow said not to undermine the “natural” sex binary because intersexuality was presented as a disorder, and, I was informed, “you can’t take a disorder and call it a sex.” Group members believed intersex infants must be assigned to a binary sex. Removing sex-markers from birth certificates generally, leaving the sex marker on the birth certificate blank, or designating the child “X” instead of “M” or “F” until the child self-identifies-various alternatives suggested by intersex advocates-were dismissed. Removing binary sex markers from IDs, or at least expanding the gender options and making them easy to change, are also goals of the trans community. Trans advocacy about gender markers on identity documents is widespread, but rarely if ever addresses the central intersex concern about such markers: that requiring an “M’ or “F’ on the birth certificate leads to hasty binary sex assignments for intersex children. Making this issue a regular part of all trans advocacy about gender markers, and offering to work in partnership with intersex groups on it, would be a good way to strengthen trans/intersex community ties.

3. While it was agreed in discussion in the gender crit group I visited that doctors shouldn’t perform cosmetic genital surgery, I was told that they should examine the infant and assign them to the correct binary sex based on capacity to reproduce in the “very rare” situations in which that would be possible without surgery, and otherwise on genes. This was an odd rule, not comporting with the treatment protocols imposed by doctors, and would lead to results that the discussants seemed unaware would counter their own precepts. For example, people with complete androgen insensitivity syndrome (CAIS), born with typical vulvae and developing female secondary sex characteristics at puberty if unaltered by gonadectomy, would be understood as permanently and naturally male, being infertile and having XY chromosomes. Yet CAIS is often not diagnosed until late childhood or puberty, so either CAIS teens would be forced into gender transitions-a process the “gender crits” frame as impossible-or the TERFs would have to accept XY women. Trans advocates can point out that TERFs propose schemes for assigning intersex children to a permanent binary sex that are even more problematic than those applied by doctors today. Demonstrating that the trans community has considered the outcomes of different sex-assignment schemes, and understand why both the standard medical protocol and the TERF alternative are harmful to intersex children, will prove that trans folks are doing the real work of being allies to intersex people.

4. Since the central point of “gender critical” feminism is that gender identity is a sort of delusion or

myth, the idea that families and society should allow a child to mature to assert their own gender identity (male, female, or something else) is basically incomprehensible to transphobic feminists. This is an important issue to focus on for trans advocates seeking to cement allyship with intersex groups. Intersex advocates urge, in addition to leaving intersex children's bodies intact, assigning them a provisional binary gender marker to deal with institutional forms and spaces requiring one, but following the child's lead, and supporting them in whatever gender identity they grow to have. This is a model trans advocates can certainly support, while TERFs view it as "genderist" lunacy, and that's an excellent fact to point to in showing who the real allies of intersex people are.

5. We've discussed how transphobic feminists try to draw intersex people to them by framing trans people as appropriating intersex issues. Trans advocates can turn this claim on its head by showing that "gender critical feminists" are appropriating intersex issues to try to advance their transphobic goals. The main situation in which intersex concerns were treated as relevant in the group I joined was in the context of discussions of trans-identified children. (A particularly overwrought conversation in the group discussed an article which bore the blaring title "Toddler Aged 3 Assessed for Sex Change at London Clinic," which actually just reported that a 3-year-old was assessed for gender identity issues, not that the child was offered any sort of hormonal or surgical treatment.) A claim made in the discussions of trans-identified children was that for parents to "indulge" this "fantasy" by bringing them to a clinic to be diagnosed, changing the pronoun they used to refer to the child, and/or having the gender marker on their ID changed was analogous to forcing genital surgery on intersex children, and thus a human rights violation that should be banned. I don't see an analogy at all, but rather an inversion: forced genital surgery performed on infants violates their autonomy, while validating a child in their gender identity supports the child's autonomy. I see TERFs appropriating intersex concerns about unconsented-to genital surgery to bash at children who assert a trans identity. And pointing this out is another way to convince intersex people that the trans community is their true ally, and transphobes poor allies indeed.

I followed a recent suggestion that "gender critical" politics might be useful to intersex people, and spent several days reading posts and participating in a group for "gender critical" partisans. What I found was something that left an awful taste in my mouth: a lot of transmisogyny, a denial of the lived reality of trans people of all genders, and an insistence on an immutable sex binarism that frames intersex people as disordered. I was told that most people who say they are intersex are trans pretenders, using a tiny minority to advance their nefarious goal of insisting that gender identity should be respected and genitals treated as nobody's business other than the person bearing them and their intimate partners. And I found the intersex community's concerns being co-opted to vilify parents who support their children in identifying with a gender other than that on their birth certificates.

Intersex people may be drawn to the intriguing moniker "gender critical," but I believe the trans advocates can and must demonstrate that these trans-exclusionary feminists make very poor allies for the intersex community. Trans people should commit to becoming better and more active allies for intersex folks in the future, and ensure that what seems a natural alliance between trans and intersex communities does not founder, but flourishes.

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