

More Light  on...

Intersex

It is likely that you have never heard a minister preach on Matthew 19:11a-12:

Jesus said unto them... For there are some *eunuchs, which were so born from their mother's womb*: and there are some eunuchs, which were made eunuchs of men: and there be eunuchs, which have made themselves eunuchs for the kingdom of heaven's sake. [Emphasis added.]

For people in the church who are born with conditions that make their genetic or anatomical sex unclear, these words of Jesus are filled with grace.

Intersex is defined as a condition of birth where the individual is born with mixed or indeterminate biological sex. Few

people have heard of it, and yet it is more prevalent than Muscular Dystrophy. There are dozens of specific medical reasons why babies are born without clarity about their anatomical sex, and there are numerous different ways that that this lack of clarity manifests itself.

The lack of church attention to the words of Jesus recorded in Matthew 19 reflects the church's intense ambivalence about sex and gender. Eunuchs are described in both the Hebrew and Greek Testaments. Early in history they were men who had been emasculated either as the result of conquest, or to create slaves who could safely guard the ruler's harem. Later the term *eunuch* became associated with those entrusted with the royal household and treasure. While some of these people may not have been physically marked like their forebears, they continued to carry the stigma of being sexually marginalized. Jewish law, with its emphasis on purity and freedom from blemish, forbade access to the holy places to the clearly imperfect

eunuchs. In Matthew, Jesus not only recognized the presence of infants born with unclear genitalia, he claimed them for the kingdom of heaven. Clearly the church has a responsibility to recognize and welcome such as these!

Causes of Intersex Conditions

There are many causes of intersex conditions in infants. They can be roughly divided into prenatal (before birth) and postnatal (immediately following birth). Perhaps the most frequent and disturbing of postnatal causes are circumcision

accidents that result in the permanent loss of an infant boy's penis.

Prenatal causes of intersex conditions include many genetic and chromosomal conditions. The results of these conditions range from

individuals who have both male and female gonads to individuals who appear to have normal sexual development until later in life when it is discovered that they are gonadally and chromosomally opposite to their apparent sex. Some of the medical terms associated with prenatal intersex conditions include:

- Hypospadias
- Chromosomal mosaicism
- Androgen Insensitivity Syndrome (AIS) or testicular feminization
- Klinefelter Syndrome
- Turner Syndrome
- Winged labia
- AND many others

Whatever the causes, at some point in life the discovery of an intersex condition can be very disturbing. It is clear that all faith communities bear a responsibility to care for these individuals and their families.

INTERSEX...

is a medical condition of birth where the individual is born with mixed or indeterminate biological sex. It has traditionally been called hermaphroditism or pseudohermaphroditism and may occur in approximately two in every 100 births.

More Light on Intersex

Ministry with Families and Infants

The tendency of hospitals and physicians has been to treat the birth of an intersex infant as a medical and social emergency. This creates an atmosphere that is not conducive to caring and informed decision making on the part of the family, and tends to place primary decision-making responsibility on medical professionals. Unnecessary, unwanted, and sexually damaging surgery may result.

There are several important things that pastors and congregations can do to help:

- Prepare by educating their communities ahead of time about prenatal sexual development. The pastor can easily use Matthew 19 as the basis of a sermon addressing these issues. Most communities have individuals capable of providing a class or lecture on prenatal sexual development and intersex.
- Providing education for pastors and other caring members on issues faced by families when an intersex birth occurs.
- Making educational material and other resources on intersex available to members and the larger community.
- Creating an atmosphere of openness and acceptance to a wide diversity of gender expressions in their communities. This will help discourage fear-based decisions and premature surgery.

Ministry with Adults Whose Lives are Impacted by Intersex Conditions

Pastors and congregations should become aware of the potential presence of this silent/hidden group within their churches, and provide resources and care where appropriate. Sexuality is a major issue for adults with intersex conditions, and personal relationships are fraught with fear and shame. While some intersex folks identify as gay, lesbian, bisexual, or heterosexual, others describe themselves as asexual, eschewing sexual relationships altogether. Occasionally intersex adults become dissatisfied with the gender of their rearing and elect to transition to the opposite gender. These people may or may not want to describe themselves as transgender.

Understanding Sexual Differentiation

Intersex conditions arise because of an abnormality along the male pathway that interferes with complete masculinization or, in the case of a genetic female, some virilizing influence that acts on the developing embryo. Before about 6 weeks' gestation, male and female embryos develop undifferentiated gonadal tissue and have primordial structures with the potential to produce either male or female genitalia. The genital appearance of the newborn is largely determined by the presence or absence of genetic and hormonal influences responsible for the active process of male differentiation. The fetus tends to develop as a female in the absence of these male influences.

The SRY gene on the short arm of the Y chromosome initiates male sexual differentiation. In the absence of SRY, female sexual differentiation occurs. Under the influence of SRY, the undifferentiated gonad forms a testis, which produces the hormonal milieu that results in male sexual differentiation: testosterone stimulates the wolffian structures (epididymis, vas deferens, and seminal vesicles), and anti-Müllerian hormone suppresses the development of the Müllerian structures (fallopian tubes, uterus, and upper vagina). The conversion of testosterone to dihydrotestosterone occurs in the skin of the external genitalia and masculinizes the external genital structures. Most of this male differentiation takes place by about 12 weeks, after which the penis grows and the testes descend into the scrotum. An error in genital formation may occur at any step in this developmental pathway.

— *American Academy of Pediatrics*

Resources: [Intersex Society of North America \(ISNA\)](http://www.isna.org). <http://www.isna.org>
[Bodies Like Ours](http://www.bodieslikeours.org). <http://www.bodieslikeours.org>
[Androgen Insensitivity Syndrome Support Group \(AISSG\)](http://www.medhelp.org/www/ais).
<http://www.medhelp.org/www/ais>

Fausto-Sterling, Anne. *Myths of Gender: Biological Theories About Women and Men*. Basic Books, 1992.

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