

Georgiann Davis

*Contesting Intersex: The Dubious Diagnosis*

New York: New York University Press. 2015. ISBN: 978-1479887040.

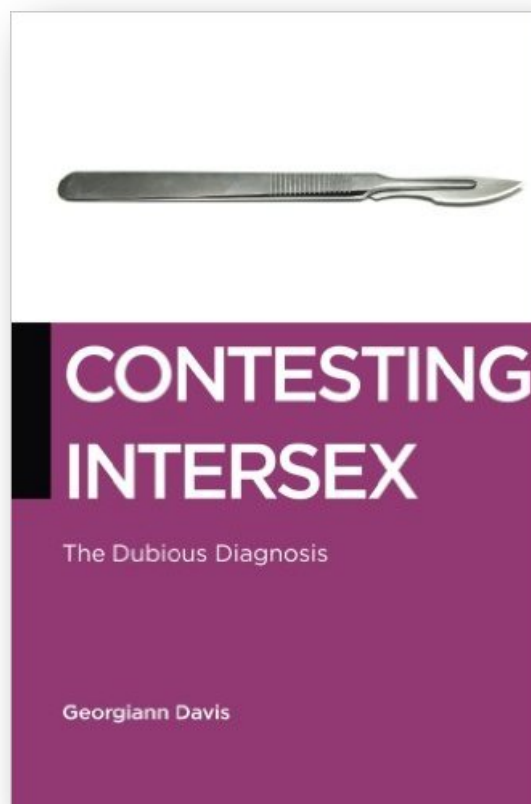
Reviewed by: Hanna Baus, *Humboldt State University*

In *Contesting Intersex: The Dubious Diagnosis*, Davis offers a compelling analysis about the current state of affairs for intersex people. Having discovered she was intersex as an adult, Davis provides a heartfelt account of growing up intersex, how it has affected her research, her career and her life. Here, Davis sensibly addresses the heated debate about the treatment of intersex individuals by medical professionals, and the change from intersex language to the more medically focused terminology of “disorders of sex development” or “differences of sex development.” She also provides an analysis of gender and sexual fluidity that is also a key component in this battle within medical professionals regarding the medical care for intersex people. Davis offers a powerful and emotional argument for better care, as well as, a deeper understanding of the intersex community. She wants the world to understand and see the struggles that the intersex community deals with on a daily basis, especially in regards to the treatment from medical professionals. Davis uses this monograph to entice her readers to take action, to learn about intersex and become better allies.

When she first began this research, Davis was originally an outsider at the meetings and conferences for intersex people. After opening up to those in the support groups, she became a member. Davis opened with an outline of some of the important support groups that are dedicated to working with intersex youth, adults, their families including others that are even open to working with medical professionals. The first part of the book focused on various support organizations, their respective histories, and the advocacy work that

they have been involved with starting in the 1990’s.

Davis then moved into the medical jurisdiction over intersex bodies, and discussed the ways in which intersex people are subjected to questionable procedures that are not always as necessary, or as urgent as they are made out to be. Davis’s in-depth interviews with medical professionals across various fields were particularly interesting. Many doctors to whom Davis spoke discussed feeling uncertain when selecting the sex (read *gender*) for the babies they operated on. Davis expressed this as



dangerous to developing children and teens, and tried to show medical professionals some of the consequences of sex-determining surgeries early on. Between the interviews with doctors and parents of intersex children, Davis effectively showed the tension and tentativeness that goes along with these surgeries on intersex children. While many doctors who were interviewed were quick to defend themselves, Davis did talk to some who were much more open to putting off surgeries, and getting to know the intersex community in an effort to learn how to treat these patients better.

As she moved into the terminology of describing intersex traits, Davis provided an abundance of anecdotal evidence for both sides of the argument. With the advocate and support groups moving forward in the early 2000's, there was a lot of disagreement with the terminology that should be used. Davis pointed out that some individuals preferred the intersex language, while others prefer disorders of sex development (DSD). The divide in terminology caused a great deal of angst in the intersex community, as well as, among their supporters and medical professionals. Here, Davis included her own opinions about what terms should be used and made a point to explain that no one is inherently wrong in this situation; in fact, she suggested that everyone should be able to freely use whatever term is best for them. The anecdotes became a bit redundant here as the stories from those she interviewed seemed to have the same opinions. This chapter was also very laden with intersex language/DSD terminology that made it difficult to discern specific points from the individuals and groups she talked about. However, Davis effectively got her points across about the power in a name when she described how the different terms can have varying effects on the community, and those who support or do not support intersex people.

Davis delved deeper and included the thoughts and opinions of parents who have intersex children. Davis shared stories from

parents who were told to keep the intersex "diagnosis" a secret from their kids for fear of confusing them. She discussed the importance of obtaining correct information about being intersex. A lot of parents stressed that they felt lied to or pressured into surgeries on their children. Davis strongly suggested that medical professionals offer more access to information for parents of intersex children. As it stands, doctors rarely pass on information to parents about the intersex support groups and organizations, which is leading to a disconnect between the medical professionals and the parents of intersex children. While her ideas were relevant and clearly needed, Davis did not offer a solution to this disconnect. Davis simply stated that doctors need to be more open to information from the intersex community, and that the intersex community needs to be more inviting to the medical professionals. Unfortunately, because of the strong distrust and/or misunderstanding between the two groups, she could have included more suggestions to combat these foreseeable issues.

Davis' conclusion left little to be desired, as she seemed to effortlessly wrap up her monograph. She began by continuing her point from previous chapters about why intersex became some sort of disorder and/or problem. She moved forward to note that, regardless of the terminology used to describe it, the resulting arguments about terminology served the purpose of spreading the word about the intersex community. She concentrated on the use of intersex characters in popular television shows aimed at young adults, the rise of meetings and conferences dedicated (at least partially) to intersex people, and a mention of a more cohesive understanding between some medical professionals and the intersex community.

For readers who are not very knowledgeable about the intersex community or about some of the obstacles faced by them, advocates, support groups or the medical field, this book proves to be a perfect starting point.

Though this reads a bit like an autoethnography, which Davis fully recognizes, it provides a great deal of information from various perspectives. It also offers information for many organizations and support groups for intersex people and their loved ones in an easy-to-read format. Throughout the text, Davis acknowledges various viewpoints and outlines any flaws in her research. By including information from all parties associated with the health and community of intersex people, her book is at once emotional and informational. Davis's work is powerful, as it covers heated and sensitive topics in an insightful, and occasionally humorous, way. By opening the doors for discussion, her book allows a whole new

conversation to start that permits intersex topics to come to the forefront. Davis pioneers a very powerful dialogue that could lead to the intersex community receiving the level of medical care and peace of mind that they desire and deserve.

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*Hanna Baus is a current student in the Public Sociology MA program at Humboldt State University. She is on the practicing track and her areas of interest include race/ethnicity, gender, crime and delinquency, and social justice. She is currently working on her thesis on alternative programs for prisoner reentry in rural communities.*