



# INTERSEX PEOPLE

## What does intersex mean?

Intersex is an umbrella term that refers to people born with physical sex characteristics (such as sexual anatomy, reproductive organs, hormonal patterns and/or chromosomal patterns) that do not fit typical definitions for male or female bodies.

These characteristics may be internal or external, may be apparent at birth or emerge from puberty, or not be physically apparent at all. There exists a broad and diverse spectrum of sex characteristics among intersex people, with more than 40 such variations documented.

Intersex people have the same human rights as everyone else, including to live free from violence and discrimination, to health and to make decisions about their own bodies. However, because their bodies are seen as different, intersex people often face

human rights violations, including violence, stigmatisation and harmful medical practices.

## How common are intersex variations?

According to experts, somewhere between 0.05 per cent and 1.7 per cent of the global population is born with intersex traits. The upper estimate is bigger than the population of Mexico.

## Intersex people and sexual orientation, gender identity and gender expression

Being intersex relates to biological sex characteristics and is distinct from sexual orientation, gender identity and gender expression. Intersex people may have any gender identity, gender expression or sexual orientation, just like the rest of the population. For example, an intersex person could be straight, gay, lesbian, bisexual or

asexual, and may identify as a man, woman, non-binary person or other gender.

## Respectful ways to refer to intersex people

Intersex people use various terms to refer to themselves. Common language includes “being intersex”, “having an intersex variation” and “having innate variations of sex characteristics”.

There are many other terms used in different languages and cultures to refer to intersex people. Some of them may or may not be appropriate or respectful depending on the context – if in doubt, ask an intersex person or organisation! For example, the term “hermaphrodite” is rejected by many intersex people today as outdated and stigmatising. However, some within the community have chosen to use it in an empowering act of linguistic reclamation.





## THE CHALLENGES

### Medically unnecessary interventions

Intersex traits are natural bodily variations. However, in cases where infants have visible intersex traits at birth, in many parts of the world it has become common practice to subject them to medically unnecessary surgeries and other interventions to change the appearance of their bodies to what is considered stereotypically “normal” for girls or boys, while disregarding serious human rights impacts.

These often-irreversible procedures can cause permanent infertility, chronic pain, incontinence, loss of sexual sensation and lifelong mental suffering, including depression. Subjecting intersex infants and children to such medically unnecessary interventions violates their human rights, including their rights to health, physical integrity, to be free from torture and ill-treatment and to live free from harmful practices. Some intersex people also feel that they were forced into sex and gender categories that do not fit them.

Unfortunately, societal pressures and norms around sex and gender are often reflected in the views of doctors and parents of intersex children. They may encourage or give their agreement to such interventions, despite the lack of medical necessity. Parents are often asked to agree to procedures that

violate the rights of their intersex child without being provided accurate information and necessary support. In one survey, half of intersex respondents indicated that no fully informed consent was given before they were subjected to the first medical intervention to modify their sex characteristics. In another survey, the majority of intersex people were given no information on the option of declining or deferring medical interventions, while a fifth were given no information at all about any of the interventions they received. Furthermore, most respondents listed at least one negative impact from the intervention experienced, for some these were life-threatening. These practices have been associated with increased mental health risks for intersex people, including depression, anxiety, post-traumatic stress disorder and suicidal thoughts/attempts.

Studies highlight that medically unnecessary interventions on children too young to provide informed consent are often carried out based on the desires and outdated beliefs of doctors or parents, are not supported by evidence and are unethical.

Given their irreversible nature and negative impact on physical integrity and autonomy, such unnecessary interventions without consent from the intersex person should be prohibited.

Concepts of medical necessity should be regulated to ensure that children are not subject to cosmetic procedures that lack medical indication, necessity or urgency and can cause harm.

Intersex children and adults should be the only ones who decide whether they wish to modify the appearance of their own bodies – in the case of children, when they are old or mature enough to make an informed decision and consent for themselves. Health protocols and standards of care for intersex children and adults should be aligned with human rights standards. Intersex people and their families should have access to independent counselling, support and information, including advice from intersex-led peer support organizations.

### Violence

In some countries, intersex people are subject to abuse if it becomes known that they are intersex or if they are seen as not conforming to societal norms and stereotypes around sex and gender. For instance, intersex children may be subject to abandonment and are at risk of being killed, with documented cases of infanticide of intersex infants in some regions.





## Discrimination

Most countries do not explicitly ban discrimination based on sex characteristics, leaving intersex people vulnerable to discrimination in a range of settings, including health, education, public services and employment.

There is insufficient investment in data collection on discrimination faced by intersex people. Where data exists, it paints a concerning picture: fifty-six per cent of intersex people surveyed in the European Union reported experiencing discrimination, sixty-seven per cent reported being harassed, and seventy-six per cent reported being bullied at school.

### Lack of access to adequate healthcare

Healthcare professionals often lack the necessary training and knowledge to provide appropriate and respectful healthcare that considers the specific health needs of intersex people, including mental healthcare, support and counselling. Intersex people report stigma and

bias within healthcare systems, poor quality healthcare, standards of care that are not respectful of intersex people, and lack of access to medical records. Furthermore, hormone therapies and other treatment that some intersex people need (including sometimes because of the impact of medical procedures they were subjected to without informed consent) may not be covered by medical insurance and are otherwise seldom available or affordable.

### Sports

A number of international sports federations have put in place discriminatory rules that force women athletes with intersex variations to undergo intrusive and humiliating examinations and either undergo medically unnecessary interventions as a condition to compete, or exclude them from women's sport, in both cases violating their rights to employment, health, non-discrimination and physical integrity. These rules are often based on gender and racial stereotypes about who is a woman in general and who is a woman

athlete in particular, and have disproportionately impacted women athletes from Africa and Asia.

All women should be able to participate in sport on an equal basis, including women with diverse sex characteristics.

### Legal recognition

Intersex people need access to legal documents that properly reflect who they are, but often face barriers and discrimination if they need or wish to amend sex or gender markers on birth certificates and official documents. Some intersex people identify as men or women and wish for their documents to reflect this, and some prefer non-binary sex markers (such as the sex marker "x"). This requires access to a simple process to amend sex/gender markers that respect the diversity of intersex people, including intersex women, men and non-binary people, without making assumptions or forcing intersex people into a specific legal sex or gender category.





## TAKE ACTION!

- 1 Educate yourself on the experiences of intersex people, their issues and concerns.
- 2 Speak out when you see discrimination or violence against intersex people.
- 3 Have zero tolerance for pathologizing language, prejudice and negative myths and stereotypes about intersex people.
- 4 Respect the privacy of intersex people and do not make assumptions about their bodies, sex, gender, sexuality or identity.
- 5 Share UN Free & Equal's online and social media content to spread awareness among your friends and social networks.
- 6 Celebrate bodily diversity and support intersex people if and when they choose to disclose their status, for instance through marking Intersex Awareness Day on 26 October and supporting your local intersex community and organizations.

## GOVERNMENTS SHOULD:

- 1 Consult and work with intersex people and intersex-led organisations in the development of research, legislation, and policies that impact on their rights, including on the below recommendations.
- 2 Prohibit medically unnecessary surgeries and interventions on intersex infants and children, protect their physical integrity and respect their autonomy.
- 3 Integrate human rights norms in health protocols and standards of care to uphold the rights to health, bodily autonomy and physical integrity of intersex children and adults.
- 4 Provide healthcare personnel with training (including through updated medical curricula and textbooks) on the health needs and human rights of intersex people and the appropriate advice and care to give to parents and intersex children, being respectful of the intersex person's autonomy, physical integrity, and sex characteristics.
- 5 Ensure that intersex people and their families receive adequate counselling and affirmative psychosocial support, including from intersex peers.
- 6 Prohibit discrimination on the basis of sex characteristics, including in education, employment, healthcare, medical research, sports and access to public services.
- 7 Address discrimination and violence through relevant anti-discrimination initiatives, such as action plans to prevent violence and discrimination against intersex children and adults, and public education and awareness-raising campaigns to advance equality, respect and inclusion and to combat harmful stereotypes.
- 8 Ensure that human rights violations against intersex people are investigated, that perpetrators are held accountable and that victims have access to effective remedy, including redress and compensation.
- 9 Ensure that public officials and personnel (including in the judiciary, law enforcement, immigration, healthcare, education, child protection) receive training to ensure respect and equal treatment of intersex people.
- 10 Ensure that intersex people can amend their sex and/or gender markers on official documents through a simple and accessible administrative process based on self-identification, without any abusive requirements.
- 11 Research, evaluate and monitor the human rights situation of intersex people, including by systematically collecting disaggregated data on medically unnecessary interventions, violence and discrimination.

