

Statement on Intersex Genital Mutilation

Overview

- Intersex Genital Mutilation (IGM) refers to the practice of doctors “fixing” natural intersex variation through surgery and or medications without consent in infancy or childhood.
- The Criminal Code in Canada contains an exception that allows these non-consensual and medically unnecessary medical practices to occur legally.
- Intersex community members, advocates, and organizations have repeatedly made calls to eliminate this section and instead propose including IGM as aggravated assault in the Criminal Code.
- HTHC endorses the demands to end IGM and ensure healthcare for intersex people is rooted in principles of autonomy and informed consent; two concepts that unite intersex and trans communities.

What is Intersex Genital Mutilation (IGM)?

IGM refers to the procedures done on intersex people that seek to reduce any sexual “ambiguity” during infancy or childhood in order to adhere to heteronormative gender development and sexual binaries. Doctors typically pressure parents to allow them to perform these ‘treatments’, frequently deciding the child’s sex for them without regarding the persons own identity, autonomy, or desires. These procedures have high complication rates and lifelong consequences including infertility, loss of sensitivity, and reduced sexual function, among others (1, 2, 3). These outcomes largely contribute to the high physical and mental health disparities that intersex populations experience (2). Some surgeries forcibly sterilize intersex people without their consent and consequently may require intersex people to be on lifelong hormone replacement therapy (2, 3, 4).

Additionally, many intersex people have been lied to about the medical procedures they have undergone and/or their identity as an intersex individual (3, 4). Doctors have refused to answer questions from intersex people about medical procedures they were forced to undergo and have also refused to provide intersex people with their medical records (4).

Western medicine understands intersexuality as a set of distinct pathological conditions that result in deviations from the “normal” course of sexual development (5). This has its roots in colonialism and the sexual binary that was established, which is still being enforced in harmful ways. For example, not all traditions “correct and normalize” intersex people. Intersex individuals were recognized in many Indigenous societies prior to colonization without assimilating to the sexual binary (5).

IGM & Canada

In Canada, [Section 268\(3\) of the Criminal Code](#) contains an exception that allows for medical practitioners to perform intersex genital mutilation “for the purpose of that person having ... normal sexual appearance” (13). There have been repeated campaigns and calls to eliminate this exception, including EGALE’s Fix Hearts Not Parts campaign, the “65 Reasons” open letter to the federal government calling for IGM to be included as aggravated assault under the Criminal Code as well as including standards of informed consent, applications that challenge the constitutionality of the Section 268(3) exception for IGM, and numerous other petitions, health reports, and letters calling for urgent action (3, 4).

IGM & HTHC

Intersex and transgender communities have a shared interest in autonomy and face overlapping barriers to appropriate care. While intersex individuals are forced to undergo medically unnecessary and psychologically harmful surgeries in infancy without their informed consent, transgender individuals are often denied gender affirming care and hormone therapy throughout their lives despite informed consent and strong desire for treatment. Thus, both communities are subject to a loss of decision-making authority over their own bodies, and the two communities are united by principles of consent and autonomy (3).

Trans, non-binary, gender diverse, and intersex people are all harmed by medical, legal, and societal norms, policies, and laws that force individuals into binary sex and gender boxes and punish anyone who does not fit into them. Access to safe, affirming, informed, and consensual healthcare for trans and intersex communities is inextricably linked. This is highlighted by the rise of attempted or successful bans on gender-affirming care that specifically enshrine IGM exemptions into law in the US (8, 14, 15). Transgender and intersex communities are frequently included together when discussing healthcare access and issues for gender diverse people. We recognize that intersex communities face unique human rights, legal, and healthcare-related issues, that intersex organizations and advocates have identified and organized around for decades (9, 10, 11). This includes but is not limited to; the practice of intersex genital mutilation, erasure and discrimination through legal and healthcare sex classification systems, denial of access to medical records and lack of confidentiality in healthcare interactions, and interphobia in a wide variety of settings (7).

As a coalition focused on gender-affirming care access for trans, non-binary, and gender diverse people it is essential that we support intersex communities’ healthcare advocacy. Intersex people deserve healthcare based on the principles of informed consent and patient autonomy, just as trans people do. We echo the demands to end intersex genital mutilation on intersex children and ensure that healthcare for intersex people is based on the principles of autonomy and informed

consent. We call on the federal government to listen to the demands and recommendations outlined above, and to include intersex communities and advocacy organizations in any process that seeks to move forward on these issues.

Advocates & Organizations

Intersex communities, advocates, and organizations have been speaking out about the harms of IGM and working to have the practice stopped around the world. Major healthcare and human rights groups have now condemned the practice of IGM, and instead advocate for: delaying any medically unnecessary surgery until children are able to provide informed consent, ending the practice of withholding medical records from intersex people, and ensuring parents and guardians are not misled, lied to, or pressured when they are making medical decisions for their intersex children (4, 6, 7). Specifically, the [United Nations](#) has found that these forced and coercive intersex surgeries on minors, “violate rights to the security of person, right to bodily and mental integrity, freedom from torture and ill-treatment, and freedom from violence” (12).

Other organizations and advocates include:

- [Physicians for Human Rights](#)
- [United Nations](#)
- [Human Rights Watch](#)
- [Amnesty International](#)
- [World Health Organization](#)
- [North American Society for Pediatric and Adolescent Gynecology](#)
- [Pediatric Endocrine Society](#)
- [Rainbow Health Ontario](#)
- [Registered Nurses Association of Ontario](#)
- [Association of Ontario Midwives](#)
- [Middlesex-London Health Unit](#)

To learn more about Intersex people, the intersex community, the unique barriers they face, and how you can help, visit InterACT (<https://interactadvocates.org/faq>) and ISNA (<https://isna.org/faq>).

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