



Edited by
Susannah Cornwall

*Intersex,
Theology,
and the Bible*

Troubling Bodies *in* Church,
Text, *and* Society



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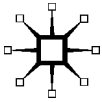
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INTERSEX, THEOLOGY, AND THE BIBLE

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*With love and admiration, in memory of Sally Gross
(1953–2014).*

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Contents

<i>Acknowledgments</i>	ix
------------------------	----

Introduction Troubling Bodies? <i>Susannah Cornwall</i>	1
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Part I Biblical Approaches

1 Who Are You Calling a Eunuch?! Staging Conversations and Connections between Feminist and Queer Biblical Studies and Intersex Advocacy <i>Joseph A. Marchal</i>	29
2 Virtuous Eunuchs: Troubling Conservative and Queer Readings of Intersex and the Bible <i>Megan K. DeFranza</i>	55
3 Hermaphrodites, Eunuchs, and Intersex People: The Witness of Medical Science in Biblical Times and Today <i>John Hare</i>	79

Part II Pastoral and Practical Approaches

4 A Pastoral Theological Reading of <i>Middlesex</i> <i>Nathan Carlin</i>	99
5 Intersex and the Role of Religion on the Path to Health and Well-Being <i>Stephen Craig Kerry</i>	121

Part III Theological Approaches

6 Laws “Needfull in Later to Be Abrogated”: Intersex and the Sources of Christian Theology <i>Susannah Cornwall</i>	147
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7	Intersex on Earth as It Is in Heaven <i>Patricia Beattie Jung</i>	173
	Afterword <i>John Hare</i>	197
	<i>Bibliography</i>	211
	<i>Notes on Contributors</i>	231
	<i>Index</i>	235

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INTRODUCTION

Troubling Bodies?

Susannah Cornwall

Troubling Bodies

Intersex people's bodies have often been understood as troubling, medically and socially, and have been surgically altered and socially concealed as a result. In this book we suggest that there are other kinds of "bodies" that need to be troubled: institutional bodies such as the medical establishment and the Church, and the bodies of discourse on sex, gender, and sexuality, which too frequently take insufficient account of intersex and thereby elide broader accounts of what it is to be a sexed human person.

Most contemporary societies operate with a binary model of sex, assuming human beings are *either* male *or* female, and it is self-evident *who* is male or female. But a significant minority of people do not fit either category. They are described as intersex, or as having a difference of sex development. P.-L. Chau and Jonathan Herring note, "It is not that it is hard to find out whether an intersexual is male or female, but rather that even knowing everything there is to know about them, they do not fall into the accepted description of male or female."¹ An intersex person may have testes, XY chromosomes, a vagina, clitoris, and breasts. They may have ovaries, XX chromosomes, and a clitoris large enough to look more like a penis. They may have XXY chromosomes, or a mixture of XX and XY chromosomes. They may have one testis and one ovary, or a "mixed" gonad called an ovotestis. They may have genitals, which appear "ambiguous," different from those of a typical female or of a typical male. Conditions causing atypical genitalia account, by themselves, for 1 in every 2,500 people.²

Many people with intersex conditions undergo surgery, often in infancy or early childhood. Intersex genitals are altered for a variety of reasons: physical health (e.g., to allow the expulsion of feces), utility (to facilitate standing urination or easier vaginal penetration), or psychological well-being (making a child “more like the other boys” in order to reinforce an appropriately masculine identity). But at least part of the concern seems to be aesthetic: genitals should *look* pleasing—which often means as unremarkable as possible. Critics sometimes claim that aesthetics have been elevated above criteria such as functionality and sensation: a cosmetically “successful” outcome from a clitoroplasty might involve the clitoris’s complete removal. Aesthetic concerns raise questions about *what* constitutes pleasing physical appearance, *how* pleasing genital appearance relates to psychosocial self-esteem for intersex people and others, and *whose* norms of “good” appearance should be privileged.

Intersex bodies, especially those of children, have frequently been figured as troubling and problematic, and this has been used to justify their alteration. But who and what do they trouble? First, intersex troubles the assumption that human bodies come in only two sexes. Indeed, some intersex people describe themselves as belonging to a “third sex.” For some of them, the fact they are neither male nor female (or have characteristics of both male and female) means that gender norms grounded in binary sex are also to be questioned; others are perfectly happy to identify as men or women, but are living proof that gender identity does not always “match” physical sex only in “typical” ways. Intersex bodies also make clear that the binary sex system is not all-encompassing or without exceptions. And it is for this reason, claim some critics, that intersex bodies have often been pathologized, problematized, or altered to make them less exceptional. Surgery to change unusual genitalia has frequently been done on babies and young children, to facilitate their upbringing as “normal” girls or boys. Why should infants’ genitals be considered so significant, and so in need of immediate “correction” when they are atypical? The answer seems to be that *genitals are never significant only in and of themselves*. In societies that operate according to gendered norms, genitals act as “shorthand,” ciphers for how children should be socialized and reared. Genitals that do not send a clear message therefore create problems for broader assumptions about social relations.

In *Gender Trouble*,³ the poststructuralist philosopher and critic Judith Butler argued that gender is not fixed, stable, or incontrovertible, but inscribed and reinscribed by cultural norms and expectations. Gender

does not flow unproblematically from a set of biological facts: rather, it is performed. Of course, people are influenced by various factors, including, for many, social assumptions about “appropriate” expressions of gender. However, for Butler, gender is contingent rather than absolute; something that can be subverted, parodied, and (at times) shown up as repeating or resisting problematic social structures. Troubling gender means showing it up as partially fictive, constructed, and reinforced by social assent and therefore changeable.

But crucially, for Butler, sex is *also* contingent. Sex is not, any more than gender, somehow “prior,” irreducible, or essential. Understandings of physical sex are influenced by culture and society, just as understandings of gender are. Sex must also be troubled, exposed as similarly inhering in a set of social assumptions and norms. Bodies are not read “innocently” when it comes to sex any more than when it comes to race:⁴ we are already influenced by our beliefs and assumptions about what sex and race *are* and how they inhere in bodies. Intersex bodies, because they are unexpected and nonbinary, might therefore trouble some of the beliefs and assumptions with which we operate.

Second, for parents and families, intersex might trouble the assumption that all children can be easily classified as boys or girls, and that all healthy children have an unambiguous physical sex. Much recent impetus for continued early corrective surgery, even since its critique by intersex activists, sociologists, and others, has come from intersex children’s parents.⁵ Parents are, of course, concerned for their children’s well-being. However, many parents, unaware of criticisms of early surgery from intersex adults and others, may also be unaware that their actions in seeking or going along with early surgery, often motivated by fears for themselves and their children if they do not, might in themselves cause damage. Importantly, Katrina Karkazis notes, parental worries are not limited to physical health, but encompass “fears that the child may have been assigned the wrong gender, anxieties about how the child will survive all the typical experiences of childhood, puberty, and adult life with the perceived handicap of their diagnosis or biology, or of having atypical genitals.”⁶

The question is how parental fears and concerns may best be acknowledged and brought into the conversation while also ensuring that longer-term goods for intersex children are not lost. Many scholars argue that, although parental concerns are significant, they should not take precedence over the short- and long-term goods of the child. Parents are influenced by the binary-gendered world in which they live and know their child will grow up; but, suggests Morgan Holmes, this does not

mean they should capitulate to an imperfect system. Holmes believes intersex infants' bodily integrity should take precedence over social concerns, and that "this means adopting a policy of non-interference for any atypical features more troubling to parents than to infants."⁷ Indeed, Elizabeth Reis and Suzanne Kessler assert that physicians should put their energies into influencing parents to accept intersex children's bodily differences, rather than locating the whole problem in the child's body and therefore promoting only surgical "fixes."⁸

Another group of scholars quote Walter Miller, a professor of paediatrics and endocrinology, who says, "It seems to me that the main point of prenatal therapy is to allay parental anxiety. In that construct, one must question the ethics of using the fetus as a reagent to treat the parent, especially when the risks are non-trivial."⁹ Since parents are indeed concerned for their children's overall well-being, their desires that their child be happy, healthy, and well adjusted will presumably not be in conflict with what the children will also come to want for themselves. These concerns therefore need not be traded in place of the goods of the child. However, there is still room to discuss *how* this might take place: via (early or delayed) surgery, nonsurgical interventions such as hormone therapy, or nonmedical means. Here, a positive outcome might be that parents are helped to see that their long-term concern (well-being) remains the same, whereas their short-term concerns may be addressed by other means (e.g., education and interaction with support groups).

Third, for doctors, intersex may trouble an association between unambiguous sex and health. Much criticism in the 1990s focused on medics' role in "disappearing" intersex bodies, with the implication that intersex anatomy troubled doctors much more than it would, if left uncorrected, have troubled intersex people themselves. For many doctors working between the 1960s and the 1990s, the assumption (based especially in the theories of sexologist John Money) was that *not* intervening to "correct" intersex genitals would harm the individuals concerned, particularly in psychological terms. Doctors motivated by a desire to minimize harm may therefore find it difficult *not* to intervene surgically for intersex, given the widespread assumption that it is difficult or impossible to be psychologically healthy with unusual genitalia. Some intersex conditions do have elements threatening physical health (e.g., salt-wasting, which can be fatal, associated with some Congenital Adrenal Hyperplasia). Conversely, atypical genitalia such as larger-than-average clitorises or smaller-than-average penises are not threatening to physical health. However, continuing uncertainty about, for example, cancer risks when the testes of women with Androgen Insensitivity

Syndrome (AIS) are left in their bodies,¹⁰ means it has been difficult to separate concerns for physical and psychological well-being. It is important to distinguish between elements of intersex conditions that may indeed threaten health physiologically, and those that may be perceived to threaten emotionally and psychologically, and to interrogate whether surgery is always or inevitably the best solution in the latter cases. A further difficulty is that the term “intersex” currently has to do a lot of work: it is simultaneously an umbrella term for a range of medical conditions, some of which have an element of organic pathology such as salt-wasting, and what we might term an intersex “habitus”: a social and, to some extent, political identity shared by some intersex people.

Indeed, critics and activists have suggested that some doctors, consciously or otherwise, have reinforced a surgical model in which appearance and capacity for heterosexual penetrative intercourse are the primary concerns. The aesthetic concern has prompted particular opprobrium: Kessler asks, if a larger-than-average clitoris “is troubling, offending and embarrassing, who exactly is troubled, offended or embarrassed and why?”¹¹ Karkazis notes doctors’ use of simultaneously moral and aesthetic language for intersex bodies, such as “embarrassing,” “objectionable,” “disturbing,” and “grotesque” for large clitorises.¹² Ellen K. Feder notes that expressions of disgust about intersex genitals made by doctors whom she had otherwise supposed to conduct corrective surgeries because of good intentions concerning their patients’ welfare caused her to reassess what these doctors’ motivations really were.¹³

Fourth, intersex might be troubling to intersex people themselves. Although much early intersex activism in the 1990s focused on the “reclaiming” of intersex bodies as legitimate and good, and some theological “reclamation” has followed a similar path,¹⁴ aspects of intersex embodiment may still be understood as inconvenient or difficult for intersex people. Some women with AIS describe sadness at their infertility, while some women with unusual genital anatomy express worry about their inability to take part in “real” penetrative sex.¹⁵ Many intersex people cannot reproduce because of their anatomy (e.g., a vagina too short to be penetrated; a penis too small to penetrate a vagina; absent uterus and ovaries). Some intersex people find that the consequences of surgery itself (such as genital pain or scarring) make penetrative intercourse difficult or impossible.

One motivation for corrective surgery for intersex—and performing it early, before children develop long-term memories—has been that individuals might grow up feeling as normal as possible. The assumption has been that atypical genital appearance compromises self-esteem, and

may also compromise clear gender identity, assumed necessary for good mental health. However, atypical genitalia do not necessarily compromise psychological well-being; many people who had intervention for intersex in childhood claim that surgery and its aftermath caused more physical and psychological problems than uncorrected atypical genitalia would have done. Ongoing problems attributed to surgery include: scarring; genital pain (during sexual activity, or constantly); frequent urinary infections; absent genital sensation; feelings of betrayal by doctors and/or parents; mistrust of medical professionals (which may prevent people from seeking medical care); and feelings of abuse and violation, which may make intimate and sexual relationships difficult.

Theological Engagements with Intersex: The State of the Field

In this volume, we note that intersex has often, also, been figured as particularly troubling in theological terms. In much Christian theology, binary sex is considered not just indicative but also imperative: this is the way things were *meant* to be, ordained by God, so any attempt to deny or transcend the binary model is to reject God's blueprint for humanity (this logic underlies much Christian opposition to gender transition and sex reassignment surgery for transgender people).

However, the existence of intersex demonstrates that things are not so straightforward. Not all bodies are, in fact, clearly and unequivocally male or female. Some theologians counter that God *intended* everyone to be clearly sexed even if they are not, so intersex is evidence that something has gone wrong in the natural order. By this logic, it is therefore appropriate to perform corrective surgery for intersex people.¹⁶

However, intersex highlights uncertainty about the binary nature of sex, with a significant minority of people having bodies divergent from male or female ones. Intersex's occurrence in other animal species, including higher mammals, raises questions about the extent to which a solely male-and-female order is "built in" to creation. Importantly, intersex people themselves have long rejected the idea that their bodies are more "fallen" than anyone else's, and some (as I discuss in chapter 6) understand intersex as a specific and positive gift from God. Furthermore, intersex surgery itself might be understood as troubling the integrity or authenticity of the intersex individual's body, gender, or self-presentation.¹⁷

Intersex troubles the idea that humans were created male and female (and individuals only male *or* female) in God's image. It undermines the

assumption that sex is always clear, stable and self-evident, and that gender identity supervenes on it only in certain ways. It disrupts the idea that sex difference as male and female is an ontological, cosmically significant difference in which something key to humanness inheres. In some accounts, it upsets norms of heterosexuality and gender complementarity. But, we suggest in this volume, intersex's capacity to trouble might also be understood positively. Intersex challenges narrow norms of bodily legitimacy and goodness. It contests constricting ideas about the irreducibility of sex, and the gender norms made to rest in it, that have oppressed "normal" heterosexual, cisgender individuals as well as those who more obviously do not "fit." It casts doubt upon theological anthropologies in which maleness and femaleness are made to represent hierarchies of divinity and humanity and in which femaleness is relegated to a responsive role. It may trouble a host of rhetoric about sex and embodiment on which Christians commonly draw in accounts of other issues such as human sexuality.

To what extent is this capacity to trouble already evident in theological accounts of intersex? How has intersex been discussed and treated in extant work by Christian theologians, ethicists, and biblical scholars?

Intersex, Gender, and Sexuality

Although intersex has received too little attention in its own right, it has sometimes been discussed in responses to transgender and gender dysphoria: both those which treat transgender sympathetically,¹⁸ and those which consider it undesirable and sex reassignment surgery illegitimate.¹⁹ The conservative-evangelical Christian Institute figures intersex as "physical illness," and corrective surgery as appropriate medical response.²⁰ Transgender is a "Gnostic" disjunction between body and soul; intersex is a deviation from a desirable, healthy body, made clear by the document's reference to the "plight" of "sufferers of intersex conditions."²¹

Similar understandings of intersex as undesirable and beyond the bounds of God's intention for creation recur in other evangelical theologies. Here, intersex bodies trouble not just social norms of gender, but ontological ones: God intended everyone to be clearly and exclusively male or female; everyone is not clearly and exclusively male or female, therefore God's plan has been disturbed. Dennis P. Hollinger argues intersex results from "the fallen condition of our world," and believes medical intervention is appropriate:

Sexual anomalies and abnormalities certainly call us to understanding and compassion for those who experience such distortions, just as any

physiological or emotional ailment calls for a similar response. With today's medical advances, many of these distortions can in part be rectified in the direction of divine givens . . . From a Christian ethics perspective, there is a normative structure toward which we are called.²²

In this account, "divine givens" are *so* "given" (and intersex *so* undesirable) that it is proper to reinforce them even when another kind of physical sex manifests.

Brian Brock, in his discussion of Oliver O'Donovan's account of transgender,²³ says: "In affirming that the material differences of sexual dimorphism are a created good, Christians are not at the same time saying that sexual difference will never present hermeneutic difficulties, as it does in hermaphroditism."²⁴ Brock, like O'Donovan, emphasizes that the existence of intersex does not undermine the givenness of human sex. But also like O'Donovan, Brock seems not to appreciate the irony of endorsing bodily givenness for transgender people (and insisting all humans "attend to and learn to live with created structure"),²⁵ while negating its significance for intersex people. Brock's characterization of intersex as "hermeneutic difficulty" is insufficient: real lives are involved, and intersex raises more profound questions about the "givenness" of human embodiment and its outworking only along certain lines.

From a liberal Anglican perspective, John Hare questions the "self-evident" goodness of binary gender, and argues that intersex also has implications for theological understandings of human sexuality. Hare holds that "the condition of intersexuality is an interesting one to 'think with' in the context of the contemporary debate about the ethics of homosexuality."²⁶ He expresses dismay that intersex was not adequately addressed in the 2003 Church of England document *Some Issues in Human Sexuality* despite the fact that transgender, arguably less common, received a dedicated chapter. Hare says, "Such an omission speaks powerfully of an agenda dominated by the particular dynamics of an internal church debates rather than one that seeks to speak to the diversity of actual human experience and the challenges that individuals face."²⁷ He holds that intersex should, if properly acknowledged, lead Christians to reexamine their assumptions about whether some church-leadership roles should be sex-specific and if so how sex is to be determined; whether homosexuality can continue to be figured as falling short of the created ideal; who may legitimately marry whom; and, most fundamentally, whether humanity can indeed be divided unambiguously into males and females. However,

he notes, “Perhaps because the issue of intersexuality has not been properly addressed within recent ethical discussions about sexuality, the fundamental character of this question has often been persistently avoided.”²⁸ He holds that the Church of England bishops’ assertion that “to be a human person is to exist bodily as either male or female and to relate to God and other people as such”²⁹ is deeply problematic: “This rigid division implies that intersexual persons cannot have a proper relationship with God or other people, as they cannot properly exist bodily as male or female.”³⁰ More recently, “Men and Women in Marriage,” a 2013 report from the Church of England’s Faith and Order Commission, is clearly grounded in similar doctrine to that of the 2003 document, and states unequivocally, “Persons are not asexual,³¹ but are either male or female.”³²

Intersex and Personhood

The Church of England bishops, and others who hold similar lines, might counter that, in making a general assertion about the vast majority of human beings who do fit definitions of maleness and femaleness, they are not saying that intersex people are somehow nonhuman or nonpersons. But such statements exclude by attaching cosmic and theological significance to the maleness and femaleness of the majority (and only the majority). Sadly, overtly exclusionary rhetoric following the kind of logic Hare identifies in the bishops’ statement is not unprecedented. Sally Gross reports,

The argument, which was put to me by conspicuously pious, intelligent, theologically sophisticated but fundamentalistic Christians of my acquaintance, is roughly as follows. Gen. 1.27 states that from the beginning of creation, God made each given member of the human species either male or female, and not both or neither. Thus, determinate maleness or determinate femaleness is the mark, above all else, of what it is to be created human. Validity of baptism is reserved for those who are human . . . Since I am intersexed and my congenital physical sex has been found to be as ambiguous as it could be, I do not satisfy the divine criterion for humanness, which requires that one objectively be either determinately male or determinately female. It follows that, like dogs, cats and tins of tuna, I am not the kind of thing which could have been baptized validly.³³

Gross asserts that fundamentalist Christians seem to feel particularly threatened by intersex and “seek to find religious arguments against

it,” perhaps because it undermines a conservative model of sex and gender.³⁴ She says, “It is not uncommon for Christian fundamentalists, faced with intersexuality as a brute fact, to adduce scriptural grounds for the condemnation of avowed intersexuality, at least, as ‘unnatural’ and as something that is at odds with the will of God as expressed in the order of creation.”³⁵ Her claims belie the idea that the only reason Christians do not engage more fully with intersex is that they do not know about it; Gross suspects that they *do* know, but will not give adequate credence to intersex people’s experiences over against the picture of creation adduced from the Bible.

For the Roman Catholic ethicist Margaret Farley, intersex disrupts the frequent theological assumption that gender *must* relate to dichotomous biological difference. Intersex demonstrates that sex is not simply a matter of XX or XY; she asserts, “To attend to differences in this regard is no longer a marginal or minor concern.”³⁶ She notes that intersex raises multiple ethical questions for Christians, including whether they should endorse corrective surgery for intersex, and what intersex “means” for theologies of gender:

The question for all of us is not only what treatment should be given for a condition considered to be pathological, but whether the condition is pathological or not. In other words, if a culture were less preoccupied with male/female sexual division and with boy/girl, man/woman gender differentiation, would the medical imperative regarding intersex persons remain as it is? Or more fundamentally, is gender assignment as a ‘pure’ male or female, man or woman, essential to human flourishing?³⁷

In my own work on intersex and theology, I have queried the assumption of binary sex underlying much theological anthropology, and asked how theological investment in binary maleness and femaleness contributes to a social, cultural, and medical climate in which intersex is unspeakable or to be erased. I have engaged with intersex through transgender, disability, and queer theology, and suggested that, while intersex has important differences from all these, each raises questions about how goodness and legitimacy for “variant” bodies is defined.³⁸ More recently (as I discuss in chapter 6 of this volume), I have undertaken empirical work with intersex Christians in Britain to learn how intersex and Christian identity interact for these individuals.³⁹ I have also explored intersex’s implications for specific recent and ongoing discussions in the Church of England, such as those surrounding the consecration of women to the episcopate.⁴⁰

Intersex and Well-Being

An overt concern for intersex people's well-being informs very little theological work. However, it does underlie writing by psychologists Heather Looy and Hessel Bouma, who note that, while Christians should be wary of assuming that intersex people are inherently "broken," "The mere observation that a phenomenon exists in nature does not by definition mean that it is part of God's intended good creation order. It may well reflect the consequences of the fall into sin."⁴¹ They note that intersex might indeed be understood as "problematic" in the sense that most intersex people cannot procreate, but also point out that many problems arise from stigma, shame, and secrecy, rather than the conditions themselves. Elsewhere, Looy focuses on the implications of intersex for the psychology of people in whose religious communities "any deviation from this [male or female] standard is viewed with concern, as sinful action or distorted creation."⁴² She suggests that Christians acknowledge the psychological as well as the theological complexity of intersex, lest they "leave intersexed people isolated by a culture, including a church, that fears or denies them"⁴³—with serious implications for intersex people's psychological health.

Interest in well-being also underlies Karen Lebacqz's discussion of intersex. Writing in 1997, she notes, "A concern for suffering underlies the best of the current medical paradigm... The intersex child who looks very different from other children may suffer ridicule and scorn."⁴⁴ She argues that Christians need not accept as nonpathological everything "natural," and that there might be good reasons for intervening surgically if this lessens intersex people's psychological suffering. However, like Looy and Bouma, she also acknowledges that, for many intersex people, suffering stems from "social ostracism, rejection and ridicule... Thus, the appropriate response to ambiguous genitals may not be reconstructing the genitals but reconstructing societal response."⁴⁵ Surgery may sometimes be appropriate, given the difficulty of growing up "different."⁴⁶ However, the suffering of intersex children who do *not* undergo corrective surgery may be mitigated by support groups, and "uncorrected" intersex people are helping to strengthen a "politics of difference" in which bodily variation is celebrated rather than pathologized. She concludes, "From a theological perspective, such a shift is justified because it serves the cause of justice."⁴⁷

Teri Merrick asks whether theological anthropologies that assume binary sex are "inhospitable" to lived intersex experience. Noting Augustine's discussion of hermaphroditism in *The City of God*, Merrick

argues that “recapturing an Augustinian recognition of ‘so-called Hermaphrodites’ as deliberate iconic gifts of God can help call into question the gesture of control that results in surgically reshaping the bodies of intersexed children in an effort to ‘naturalize’ them.”⁴⁸ After Lorraine Daston and Katharine Park, she contrasts an Augustinian model of nature as “the servant of God...but capable of playful originality”⁴⁹ with a Scholastic conception—influenced by Aristotle—whereby “nature” could only be understood as good when it manifested along particular lines specifically ordained by God. Merrick calls for a “neo-Augustinian” approach allowing intersex to be understood as manifesting nature’s “playfulness”: within God’s will, but with an acknowledgment that free processes require “contingency, particularity and variety”⁵⁰ in order to be truly free. This account, she believes, “allows us to see atypically sexed bodies as [Augustine] saw them: wonderfully rare and unique creatures intentionally designed by their Creator to have whatever properties they do.”⁵¹

These accounts point to concern for intersex people’s experience, and take social norms seriously but not unquestioningly. The social difficulties associated with intersex are not to be dismissed, but nor are they to be considered inevitable.

Intersex and Scriptural Interpretation

Sally Gross suggests that although many people appeal to Genesis 1:27 to “prove” that people were designed to be male *or* female, it can also be interpreted as suggesting that all humans are (or were, in the primal creation) *both* male *and* female.⁵² Gross also discusses rabbinic glosses of other Hebrew Bible texts, noting a tradition surrounding Abraham’s and Sarah’s putative intersex status.⁵³ This, she argues, makes clear that intersex need not be understood as somehow alien or other to the Bible’s picture of human sex.⁵⁴

For Megan DeFranza, biblical evidence is particularly important because it is the Bible to which theologically conservative Christians appeal when constructing theological anthropology. While liberal Christians might happily engage with critical gender theory, queer theory, and insights from lesbian and gay theologians, conservative scholars approach these sources with more caution. If theological defenses of intersex *always* draw on queer and postmodern critical theory, believes DeFranza, they are unlikely to sway Roman Catholics, evangelicals, and other conservatives, and will therefore not improve things for intersex Christians in these traditions. The figure of Christ might be

particularly significant in this discussion, for “while Evangelical and Roman Catholic theologians begin their theological anthropologies with the narratives of Adam and Eve in the Garden of Eden, both traditions . . . insist that as helpful as the creation accounts may be, these are not to be understood as the paradigm for humanity. Rather, true humanity is found in Christ as a future toward which we are moving.”⁵⁵

Despite acknowledging the nonheterosexuality of some eunuchs, DeFranza does not believe that Jesus’ positive words about eunuchs in Matthew 19:12 necessarily lead to a disruption of heterosexual monogamy as an ideal, predominantly because she wants to affirm “procreative complementarity as a major part of the divine design for sexuality.”⁵⁶ By contrast, other scholars do consider intersex a key for disrupting heteronormativity: as we have seen, John Hare examines implications for Anglican accounts of homosexuality, and, more broadly, Christine E. Gudorf argues that religious movements should operate according to “polymorphous” rather than “dimorphous” models of “sexuality” (within which she includes biological sex, gender identity, and sexual orientation). Intersex is among the phenomena Gudorf presents as a “challenge” to sexual dimorphism.⁵⁷

Roman Catholic ethicist Patricia Beattie Jung suggests that although Christianity has often affirmed sexual dimorphism as good and intersex as disordered, this may be unjustifiable given that the God in whose image humans are made is “truly beyond human sexual differentiation.”⁵⁸ Jung notes that sexual dimorphism has frequently been “sanctified,” as by the Vatican, which “contends that the inscription of this vital difference onto humanity carries more than biological or psychological import. It is ontological in significance.”⁵⁹ Since, she argues, many Christians know intersex exists but still consider it problematic in some way, “the Christian endorsement of sexual dimorphism no longer rests primarily upon a *descriptive* account of human sexuality as ‘naturally’ dimorphic . . . Rather, most Christian arguments appeal in a direct and straightforward, if highly selective, manner to biblical revelation for their justification.”⁶⁰ Jung suggests that scriptural interpretation should not take place in isolation from engagement with the best scientific and philosophical data of the age, since these insights of human reason are also legitimate sites of God’s revelation. Moreover, she says, even the Bible need not be interpreted as endorsing only dimorphism:

Nowhere does the Bible specify that God created people only either male or female . . . Furthermore, what is theologically central to both biblical accounts of sexual differentiation—the linking of difference to the

human longing not to exist in isolation but to live in intimate, passionate, tender-hearted and delightful companionship with others—is applicable to all persons, whether they are intersexed, male or female.⁶¹

Intersex may have broader implications for hermeneutics. Diana Swancutt argues that the existence of intersex undermines conservative Christians' "colonization of scripture," claiming they "have writ the modern ideological hegemony of the two-sex model into the corpus of scripture, controlling both its meaning and the terms by which morally legitimate sex is determined."⁶² Swancutt believes that contemporary Christian investment in gender complementarity leads to two binary sexes being read back into the Bible: unjustifiably, she argues, since the Bible's writers and early disseminators likely adhered to what Thomas Laqueur dubs the "one-sex" model, with human sex a continuum of more- and less-perfectly executed maleness.⁶³ Following Laqueur, Swancutt argues that the binary, two-sex model of human sex is strikingly recent, and has existed even among religious people only *since* a focus on chromosomes and genetics led to sex being "conceived as dual and ontologically stable."⁶⁴ She holds that scientists researching "hermaphroditism" in the eighteenth and nineteenth centuries mainly seemed concerned to eliminate "same-sex" activity, and that growing disdain for homosexual behavior led to rigid reinforcements of "clear" sex for intersex people.⁶⁵ Engaging with Paul's letters, she argues that he advocates a radical transformation of existing social categories of sex, class, and race in Christ, climaxing at baptism in an "androgynous" body of Christ.⁶⁶

Joseph Marchal also rereads Paul in light of intersex. Marchal's purpose is "to reflect upon the utility of biblical argumentation and interpretation for an intersex critique, but also to demonstrate how attention to this critique challenges biblical interpretation, as it offers a new approach to biblical argumentation about bodies."⁶⁷ Marchal asks what Paul's exhortation in Galatians that Gentiles not let themselves be circumcised might mean for intersex people, who may also seek not to have genital surgery. He concludes that Galatians is about figuring creation and embodiment *multiply*,⁶⁸ and points to a community struggling with its identity in light of baptism into Christ. Just as intersex bodies are not "ambiguously" male or female but unambiguously intersex, so the new identity in Christ relativizes all previous norms.⁶⁹

The multiplicity of readings of texts on sex, gender, and sexuality, and the palimpsest nature of the collection itself, means that the Bible is at best an ambivalent friend to unusually sexed and gendered people. Queer and postcolonial scholars have noted the Bible's transgressive,