# Intersex Perspectives on Medical Care

**Luis Moreno – CSWGS Seminar & Practicum**

## Background
- Roughly 2% of the population is intersex
- Current treatment paradigms are often nonconsensual and can lead to long-term harm
- Some literature on LGBT+ medical education exists, but rarely includes intersex
- Intersex advocates have called for changes to end nonconsensual treatment on intersex people

## Research Goals
- Assess the understanding of medical residents on adequate care for intersex people and their families
- Identify recommendations of intersex people on adequate medical care based on their personal experiences

## Methods
### Interview
- 1 Semi-Structured interview w/ 44 y.o. cisgender intersex woman from Austin
### Survey
- 23 Residents at McGovern Medical School OB/GYN, Pediatrics, and Psychiatry programs

## Summary of Findings
### Interview
- Stigma/shame from medical interactions
- Trauma from invasive childhood vaginal examinations
- Doctors lacked knowledge to provide adequate care

### Survey
- Terminology: 18/23 familiar w/ intersex
  - However, had trouble defining it
- Avg. 2.37 hrs. of intersex instruction received in medical school
- Most were uncomfortable performing majority of tasks related to intersex care
- 15/23 had no knowledge of intersex activism
- Most agreed with common intersex activist claims

## Recommendations
- Require intersex-specific medical education
- Reduce stigma by connecting patients to online intersex communities
- Eliminate invasive examinations
- Provide psychologist for emotional support
- Center the experiences of intersex people in medical education programs

## Acknowledgements
I’d like to thank Mo Cortez, Koomah, and Chase Findley for being supportive community partners throughout the year. I’d also like to thank Dr. Jaylah Burrell and Dr. Brian Riedel for their guidance and insights. Finally, I thank my fellow researchers Alyson, Emani, and Priscilla for their friendship and inspiration.