

Tools for Teaching Gender and Sexuality in Health and Medicine

Katrina Karkazis's *Fixing Sex: Intersex, Medical Authority, and Lived Experience*.

Durham: Duke University Press, 2008

Jennifer Brier's *Infectious Ideas: U.S. Political Responses to the AIDS Crisis*.

Chapel Hill: University of North Carolina Press, 2009

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Teaching the gender and sexual politics of medicine, I sometimes struggle to find material that fits the needs of my undergraduates, especially those at introductory and intermediate levels. Too often, I feel stuck between popular material that has an inadequately critical approach (if any critical angle at all) and advanced, complex texts that I love and lean on in my own research, but that leave my students struggling and frustrated. For that reason alone, I celebrate the publication of both *Fixing Sex* by Katrina Karkazis and *Infectious Ideas* by Jennifer Brier, which treat the “body politics” of intersexuality and HIV/AIDS, respectively. I’ve taught from Karkazis’s book in several courses already, and find that her extremely fluent prose and clear arguments work well for both undergraduates and graduate students. I haven’t yet taught the Brier book, but expect that it, too, will fit the bill.

Fixing Sex is a theoretically sophisticated and nuanced ethnography of medical practice related to intersex conditions—now officially known as “disorders of sex development,” or DSD, referring to conditions in which development of physical sex is atypical, especially when genital morphology is not typical for the chromosome pattern. (I agree with Karkazis when she writes that “my sense is that this term [DSD], though in some ways less culturally loaded than intersex, still leaves intersexuality fully medicalized and construes gender difference as a disorder requiring treatment—a position with which I do not agree” [18]. Like her, I therefore use the term *intersex*, though it, too, is imperfect, and I am sensitive to the fact that either term will contravene the self-chosen descriptor of many people with the conditions that get subsumed under these umbrellas.) Drawing

on fifty-three original, in-depth interviews with clinicians, intersex adults, and parents of intersex children or adults, as well as participant observation in a huge range of public venues, Karkazis offers the most rounded and in-depth view of intersex that is available from any of the recent and not-so-recent texts on this subject.

The book has already been widely reviewed and rightfully praised, so I will focus on those aspects that make it especially useful for teaching. First, the triangulation of voices (clinicians, parents, and people with intersex conditions) is a structurally effective technique for decentering expert views on intersex, whether that expert be a pediatric endocrinologist or a gender studies scholar. Karkazis uses her interview material with great sensitivity, providing both lengthy quotes and the necessary context for appreciating subjects' perspectives. Second, she explores the uncertainty, subjectivity, and multiplicity that underlies clinical decisions and evaluations in this realm, providing a very student-friendly introduction to critical feminist studies of medical practice. Third, Karkazis covers historical ground that students are most likely to have encountered, specifically the David Reimer case (also known as "the John/Joan case"), offering important context and correctives to the most widely known (and badly flawed) account of this case, the book *As Nature Made Him* by John Colapinto (2006). Fourth, Karkazis's account is a sharp rebuttal of the idea that "good intentions are synonymous with good outcomes" (267), a lesson that I find is useful over and over again. Although Karkazis clarifies that the book is not technically an "outcome" study of the medical treatment of people with intersex conditions, and in spite of a generous and empathic tone toward the clinicians whom she identifies as "deeply committed" to their patients, *Fixing Sex* offers a devastating portrait of the results of medical treatment in this realm. Her interviews put the lie to the idealized versions of treatment that indicate one or two genital surgeries with good to excellent outcomes, instead detailing the more usual experience of multiple genital surgeries (especially in the case of people with congenital adrenal hyperplasia, or CAH), and outcomes that are still neither aesthetically nor functionally satisfying to either parents or people with intersex conditions. Just as important, she sheds light on the relentless scrutiny of their genitals, gender, and sexuality that follows nearly all such people from the point of diagnosis throughout childhood and adolescence. While specific surgical techniques are a moving target, Karkazis's analysis shows that clinicians' ardent hopes that they can "normalize" people with inter-

sex conditions is a profound roadblock to crafting interventions that will support the latter's quests to live full and connected lives.

Finally, without ever being heavy handed, *Fixing Sex* offers a profound rethinking of the significance of the very category of sex. Building on Suzanne Kessler's groundbreaking classic *Lessons from the Intersexed*, Karkazis asks, "If one postulates bodies (including genitals, gonads, chromosomes, and hormones), what more does the word sex buy us? . . . The body as a material fact is given, but sex is not" (1998, 13). Contrary to the idea that deconstructions of sex are necessarily at odds with an approach that takes the body seriously, Karkazis achieves this disintegration of sex by attending to the precise details of bodies in context.

With *Infectious Ideas*, Jennifer Brier makes a significant contribution to the political and cultural history of AIDS in the United States. Objecting to the marginality of AIDS in the political historiography of the 1980s and 1990s, Brier urges expansion of the now familiar diagnosis of the AIDS epidemic as political. Again focusing on the value of the text for teaching, I find *Infectious Ideas* especially important for rescuing from oblivion a great many early statements from AIDS activists that linked class and gender analysis to both AIDS prevention and sexual liberation, thereby offering students a broader range and depth of LGBT political perspectives than they encounter in other texts on HIV/AIDS in the United States. Teachers of political history will also appreciate Brier's demonstration of the way that AIDS stimulated and exacerbated numerous fault lines in the conservative coalition that ascended at the same time the epidemic took off.

Brier examines five sites of early AIDS work to make several linked arguments about the function of AIDS in recent political history, as well as how specific political struggles and tensions have shaped the epidemic and responses to it. Although the early chapters cover historical periods that have been widely analyzed, Brier brings a fresh perspective and a great deal of overlooked material to rethink the early years of AIDS. For example, in the first chapter, she sets out to correct three historical claims that she identifies as characterizing much that has been written about AIDS: "that lesbians did not play a role in theorizing how to contain AIDS through politics, that the gay press did nothing about AIDS, and that people who embraced the healthy potential of gay liberation just wanted an excuse to have sex in irresponsible ways" (13). Readers familiar with the vast critical literature on AIDS might object to Brier's claim that her correctives in this chapter are novel, but should nonetheless rejoice at her compilation of evidence

from the early years of AIDS activism. Indeed, one of the great strengths of the book is Brier's use of impressively broad and diverse source materials, including multiple archives (e.g., the Act Up Oral History Project, the presidential libraries of Ronald Reagan and George H. W. Bush, the C. Everett Koop papers at the National Library of Medicine, and archives of the AIDS Office of the San Francisco Department of Public Health), original interviews, and published materials. It is especially heartening to see interviews from the Act Up Oral History Project put to such good use, and it is likewise refreshing to see material from the gay and lesbian press treated systematically and with depth. As a result of this close reading, Brier suggests that a reperiodization of the gay liberation movement is in order. Gay liberation, far from ending with the AIDS epidemic, was a crucial resource for early responses to AIDS, forming the foundations both for the articulation of the concept of safer sex and for ongoing public conversations about the meaning of community and sexual liberation.

A large chunk of the first chapter covers historical material similar to that found in Jean Carlomusto's recent documentary *Sex in An Epidemic* (Carlomusto 2010), in which Carlomusto argues that "first, safer sex had to be invented amidst an alarming lack of information that existed before the discovery of HIV in 1984; and second, safer sex as a concept had to be sold by the persistent and creative persuasion of community-based groups all across the country" (<http://www.outcast-films.com/films/sie/index.html>). Both Carlomusto and Briers linger on *How to Have Sex in an Epidemic*, the brief manifesto that Michael Callen and Richard Berkowitz jointly penned in 1983. Teaching the film together with this book would be a terrific strategy for courses in LGBT political history, queer studies, or sexuality studies, as they highlight multiple ways that gay sexuality was understood in the 1970s and 1980s as a basis for community building and broad progressive politics, and not just a site for realizing "identity" or individual rights.

Brier's second chapter, "Marketing Safe Sex," is a brilliant exploration of the dynamic interplay of the commercialization of gay venues and social marketing approaches to AIDS prevention, and the resulting reification of gay male communities as white and economically privileged. The piece echoes Allan Bérubé's classic "How Gay Stays White and What Kind of White It Stays" (2001), providing an analysis of institutional strategies that complements Bérubé's reflections on smaller-scale group dynamics that fuel white exclusivity. The insights Brier offers on the class and racial

politics at work during this moment of LGBT history and gay history are profound. I look forward to teaching this chapter in conjunction with the aforementioned article by Bérubé, as well as some classic 1980s pieces by African American gay artists (I like to use works by the poet Essex Hemphill [1986] and the film *Tongues Untied*, by Marlon Riggs [1989], both of whom died of AIDS and incorporated brilliant analyses about race, sex, love, and liberation in their works).

As important and well-conceived as this book is, I do have a few complaints, which is probably inevitable for someone who has spent years working on and teaching about AIDS. I was disappointed by the lack of attention to AIDS work that focused primarily on drug users, both because this has been a site of equally fascinating political challenge and transformation and because this could have furthered Brier's attention to the class and race politics of gay and lesbian vulnerability and responses to the epidemic. Gay men and lesbians constitute large and especially hard-hit segments of the drug-using population, but there is scant mention of such strategies as needle exchange and no mention of the harm reduction movement or the vast network of street-based outreach to drug users and sex workers, grassroots responses to AIDS organized largely by current and former street people. Likewise, I found the chapter on Ford Foundation initiatives to fit rather awkwardly with the rest of the book, providing somewhat oblique insights into the on-the-ground response to AIDS by women in the Global South. I would have liked to see an analysis of how and why Ford's innovative support for grassroots projects serving women at risk for HIV/AIDS outside the United States fits with its limited ability to conceive women's risk in the U.S. context as similarly structurally shaped via poverty, racial segregation, and policies such as the war on drugs. Still, the arguments I have are not so much with what is in the book as with what is left out of it, and given the vast scope and complexities of the AIDS epidemic, it is not realistic to ask one book to fill all the remaining gaps in the political history of AIDS in the United States. I mean it as a tribute to Brier's thoughtfulness that I would like to see her, in particular, wrestle with these questions. In the meantime, I'm grateful for what she's accomplished with this important book.

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