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The Ambiguous Beginning of Life and the Binary Pattern: A Phenomenological Analysis of Intersexual Experience

Keywords: indeterminacy, horizon, homeworld, lifeworld, binary pattern, intersexuality, lived body

Słowa kluczowe: nieokreśloność, horyzont, własny świat życia, świat życia, binarność, interpłciowość, ciało żywe

Abstract

In the paper, I offer a phenomenological analysis of the lived experience of intersexuality, which I view from the perspective of indeterminacy concerning the horizon of the givenness of the homeworld founded on the broader basis of the pregivenness of the lifeworld. These horizons define the structure of the sedimentation of subjective experience, as well as the layers of cultural meanings sedimented in the lifeworld. The sedimented layers of self-experience and of the shared lifeworld function as a sphere of indeterminacy, that is, the horizons of constituted phenomena. In this sense, all intentional acts have the nature of horizontal indeterminacy, the layers of which are revealed in the genetic question (Rückfrage) directed toward them. Horizontal indeterminacy also accounts for the distinction between the homeworld and the alienworld, which appears as something unobvious and unexpected against the obviousness of the homeworld, at the same time thematizing the latter. The notion of human corporeality as given in the sex/gender binary is one element of the sedimented conceptual system, which operates as the horizon of indeterminacy of both self-experience and the pre-reflective life-world. A unique opportunity

for phenomenological insight into the constitution of the phenomenon of sex/gender is provided by Hida Viloria's account of her lived experience of intersexuality. Her lived body, first experienced pre-reflectively as a transparent medium and a perfectly handy tool of undisturbed intentionality and unproblematized in sexual activities, gradually underwent alienation under the objectifying gaze determined by the binary pattern of sex/gender. Becoming an alienated object, Viloria's body lost its transparency. She began to experience her corporeality and identity in a way determined by the sedimented "ideology" of sex and gender. Having "tried on" the constructs of masculine and feminine identities, Viloria eventually overcame alienation and, in the process of secondary self-identification, reclaimed her lived body in its intersexuality and her identity in its non-binary gender fluidity.

Introduction¹

The phenomenological tenet of principles demands, "back to the things themselves," but the ideal of unambiguous cognition, that is, the congruity of intentions (noetic intentionality, which gives meaning to sense data)² and intuition³ proves unrealizable, as pure intuition remains a regulative idea and the object is never given with all its qualities available to perception. This problem is addressed by the notion of the horizon. In this sense, "horizon" was brought in by Husserl in his *Ideas*, but it acquired a special significance in his *Crisis of European Sciences and Transcendental Phenomenology*, along with the introduction of the concept of the lifeworld.

The problem of indeterminacy I explore concerns both the internal and external horizons, to use Janet Donohoe's terms (Donohoe, 2019, pp. 170–171). The internal horizon, that is, the horizon of perception, refers to the generic form of an object which is always given in its completeness as the object that it is, although not all of its parts are sensorily perceived.

¹ This research was supported by the National Science Centre, Poland, project number 2015/19/B/HS1/00996.

² Husserl stipulates that "Under intentionality we understand the own peculiarity of mental processes 'to be consciousness *of* something'" (Husserl, 1982, p. 200, author's italics).

³ Husserl's notion of intuition refers to the immediate givenness of self-presenting objects: "every originary presentive intuition is a legitimizing source of cognition, (...) everything originarily (...) offered to us in 'intuition' is to be accepted simply as what it is presented as being" (Husserl, 1982, p. 44, author's italics). See also Hintikka, 2003.

The external horizon can be understood as the horizon of the homeworld, that is, a perceptual field which is grounded on a broader foundation of a pregiven lifeworld. These horizons determine the structure of sedimentation of both individual experiences and cultural meanings ingrained in the lifeworld. The sedimented layers of one's own experiences, as well as those of the shared lifeworld, function as an indeterminate perspective of the constituted phenomena. Thus, every conscious act is experienced against the background of the lifeworld-based homeworld, and in this sense indeterminacy is intrinsic to all intentional acts. The levels of indeterminacy can be revealed by the method of *Rückfrage* developed in genetic phenomenology.

Our experience of what is perceived as "normal" is shaped by the sedimented givenness of the homeworld founded on the pre-reflective and takenfor-granted pre-givenness of the lifeworld. Since the "normality" of everyday experience is not thematized and as such remains tacit, both the homeworld and the lifeworld operate as indeterminate horizons of the constitution of everyday phenomena. If something unexpected is encountered against that indeterminate background, it is experienced as an alienworld, which prompts the recognition of the indeterminacy of the homeworld and helps make it more, though never completely, determinate (Donohoe, 2019, pp. 170–176).

The Binary Pattern

The normative concept of the human body as given in the sex/gender binary is an important part of the sedimented meanings of the homeworld, which functions as the indeterminate horizon of everyday experience. As ingrained in the lifeworld, sex/gender has always been conceived of in binary terms, even if initially it was not conceptualized as male and female, but rather as male and the other, following Aristotle's influential account of sex. Exploring the ways in which an encounter with "non-normative" (intersex, transgender, non-binary, or gender-fluid) bodies experienced as an alienworld can help reveal the layers of sedimented meanings that have become indeterminate horizons in the constitution of the phenomena of sex and gender appears a promising venture.

As explained above, the binary pattern of organizing phenomena, such as in the male-female/man-woman binary, forms an important part of the sedimented meanings of the homeworld and the lifeworld, which operate as the indeterminate horizons of everyday experience. The question is whether this holds for scientific rationality as well. Analyzing the problem from a phenomenological point of view, we can helpfully rely on Merleau-Ponty's claim that the scientific view is derived from the direct perception of the world and that the perceptual world is prior to and a precondition for any scientific conceptualization and articulation. In his *Phenomenology of Perception* Merleau-Ponty states, "The whole universe of science is built upon the world as directly experienced, and if we want to subject science itself to rigorous scrutiny and arrive at a precise assessment of its meaning and scope, we must begin by reawakening the basic experience of the world of which science is the second-order expression" (Merleau-Ponty, 2002, p. IX).

Shaun Gallagher and Dan Zahavi also observe in *The Phenomenological Mind* that "our knowledge of the world, including our scientific knowledge, arises primarily from a first- and second-person perspective, and science would be impossible without the experiential dimension" (Gallagher, Zahavi, 2012, pp. 99–100). This indicates that scientific discourse is embedded in the world of experience as its higher-order articulation. From there, the authors go on to reiterate Husserl's claim that "[e]ven the most exact and abstract scientific results presuppose the intuitively given subject-relative evidence of the lifeworld" (Husserl, 1970, p. 139).

If this pertains to strictly defined, abstract scientific objects, it is all the truer for things such as sex and gender. Biological sex, let alone gender and sexual identity, is a highly complex and nuanced phenomenon. Variety has been recognized by philosophers as a fundamental characteristic of nature since the pre-Socratics, and since that time attempts have also been made to arrange this array of diverse phenomena into one or another conceptual framework. Interpreting biological sex in line with the binary pattern marks an effort to impose, as Thomas Laqueur puts it, "the sense of opposition onto a world of continuous shades of difference and similarity" (Laqueur, 1992, p. 19). In his *Making Sex*, Laqueur traces the evolution of beliefs about the differences between, initially, male and the other and, then, male and female anatomies. In doing this, he examines the way they were represented in anatomical atlases and highlights that their illustrations were deeply

influenced by ideas, or rather biases and prejudices, concerning the respective feminine and masculine social positions and cultural roles.

The difficulty of telling the sex of a newborn was depicted in medical treatises written in the 18th and 19th centuries (Laqueur, 1992, p. 169). New anatomical findings and discoveries did not necessarily contribute to a more insightful approach to the problem of sex, because they were interpreted selectively, in conformity with the sedimented pattern of binary categorization. Some findings were given centrality, whereas others—those not fitting the male-female opposition—were neglected, and in this way the binarity of the phenomenon of sex remained unchallenged, furnishing the sedimented cultural narrative with an anatomical camouflage. Laqueur elucidates how "powerfully culture operates on the body" (Laqueur, 1992, p. 241) by suppressing natural similarities to maintain the purported opposition of the female and the male. Thus, although intersexuality has aroused interest among medics since Hippocrates, and multiple physicians have been known for their attempts to study intersexuality, 4 their interpretive efforts have remained enclosed in the binary paradigm.

Notably, the primacy of the binary pattern was not undermined even by disagreements over the distinctive features of sex (Dreger, 1998, pp. 20–23). This means that not only gender, but also sex is constructed, which is emphatically pointed out by researchers of intersexuality, formerly known as hermaphroditism, because intersexuality reveals that sex, just like gender, falls outside the binary system (Dreger, 1998, pp. 15–16; Viloria, Nieto, 2020, pp. 115–119; Ziemińska, 2018a, 2018b, 2022).

It is obvious that the binary pattern has had an enormous impact on people who belong to the intersex community—individuals born with what are medically referred to as ambiguous genitalia, but what intersex people prefer to call an androgynous or a genital variant (Viloria, Nieto, 2020, p. 78). As the website of one of their organizations explains:

⁴ This group includes, for example, the Renaissance physician Paolo Zacchia, who wrote on hermaphroditism in his book *Questionum medico-legalium* (Laqueur, 1992, pp. 140–141), the Polish physician Franciszek Neugebauer (1856–1914), and the French surgeon Samuel Jean Pozzi (1846–1918), to whom Julian Barnes devoted his book *The Man in the Red Coat*. Neugebauer and Pozzi were the heads of the first chairs of gynecology. They not only documented the cases of intersexuality, but also extensively published and lectured on the subject.

"Intersex" is an umbrella term used to describe a wide range of natural variations in sex characteristics that do not seem to fit typical binary notions of male or female bodies. Between 0.05 percent and 1.7 percent of the population is born with intersex traits. These traits may be visible at birth, at puberty, or, in the case of some variations, not at all. Intersex is considered a sex and gender minority (SGM) by the National Institutes of Health (NIH) and was formally designated as a health disparity population by the NIH in 2016. (https://interactadvocates.org/wp-content/uploads/2018/09/interACT-Lambda-Legal-intersex-hospital-policies.pdf)

The Intersex Society of North America (ISNA) has argued that it is not the bodies of intersexual people that make their lives difficult, but the cultural demands forced upon their bodies.⁵

It seems interesting to look into the lived experience of intersexual individuals. Regrettably, first-person narratives of the lived experience of intersexuality are scarce. One of the very few personal accounts of alleged hermaphroditism is to be found in Barbin's memoir written in the 19th century. Barbin, whose sex was erroneously identified at birth as female, had a specific anatomical structure of the genitalia, known as hypospadias (Dreger, 1998, pp. 51–52). While there have been several first-person reports of the experience of transitioning,⁶ accounts of the lived experience of intersexuality are unique.

Drawing on Miranda Fricker's concept of the hermeneutical form of epistemic injustice, Renata Ziemińska has observed that "[p]eople with intersex traits or nonbinary identities are not properly understood and cannot understand their own experience because there is no hermeneutical resource" (Ziemińska, 2022, p. 409). Against this background, Hida Viloria's report of the lived experience of true intersexuality, which fills in the hermeneutical gap, seems particularly interesting and valuable.

⁵ ISNA was active from 1993 to 2008. Its work is continued by interACT: Advocates for Intersex Youth (which has preserved the ISNA website as a historical archive). The inter-ACT-Accord Alliance, the Organization Intersex International (OII), and many other organizations collaborate on the International Intersex Forum.

⁶ Notable examples include Jan Morris, *Conundrum*; P. Carl, *Becoming a Man: The Story of a Transition*; Meredith Talusan, *Fairest: A Memoir*; Jennifer Finney Boylan, *She's Not There: A Life in Two Genders*, and *Good Boy: My Life in Seven Dogs*; Anna Grodzka, *Mam na imię Ania;* and Julia Serano, *Whipping Girl*.

Lived Experience of Intersexuality

Comparing Viloria's story with the autobiographical narratives of transsexual people, one can notice a remarkable difference. Transsexual authors tend to report their uneasiness with their bodies dating back to early childhood. From the very beginning of their conscious life, their bodies felt odd to them and with time, as their bodies were undergoing puberty-related changes, their sense of alienation gave way to aversion and disgust, although they usually did not even know the concept of transsexuality. 7 Nothing vaguely similar happened to Viloria. Initially, she experienced her body pre-reflectively as a lived body—she did not distance herself from her body; she was her body. She experienced her body as a transparent medium, meaning that she did not reflect on it as an explicitly thematized object. In the fundamental identification with her body she surpassed it, focusing on her projects in the world, with her body serving as a perfect instrument for accomplishing them, not only in her everyday activities but also in her bisexual intimate experiences. Moreover, she felt that the particularity of her genital anatomy clitoromegaly—was a source of great sexual satisfaction, so if there was any perceived separation between her body and the self, it was an enjoyable objectivization of the kind "I and my pleasure-giving body." Thus, her lived body did not fail her as a perfect instrument of her engagement in the world (Sartre, 1956, pp. 401-430; Toombs, 1992, pp. 51-58). This pre-reflective unity with her body was not compromised when she noticed at one point in her childhood that her clitoris was enlarged (although she did not know the word "clitoris" at the time). Even if she objectified her body at that moment, making a part of it an object of inspection, this specific experience did not disturb her basic lived body experience (Viloria, 2017, pp. 14–15).

Viloria's first experiences of bodily uneasiness were induced by the binary-determined objectifying gaze and comments of others (a doctor, a sexual partner) who questioned the way her genitalia looked, saying, "It just isn't normal" (Viloria, 2017, p. 15) and, "You sure it's not a penis?" (Viloria, 2017, p. 48). In the wake of such remarks, her body became a problem to her and her previous pre-reflective experience of her lived body all

⁷ At first glance, their experience may seem to contradict the observations on sex and gender above, but this is an issue of remarkable complexity and falls beyond the focus of this article. I will devote a separate study to it.

but disappeared, replaced by the perception of her body as a problematic object that required clarification and adjustment of her identity. It was then that Viloria's frustration with gender binarity and its accompanying sexism and misogyny intensified, and that she learned that hermaphroditism, which had once fascinated her as personified by the Sleeping Hermaphroditos in the Louvre, was not a mythological theme but a reality by the name of intersexuality. Raised as a girl and self-identifying as a woman for a long time, she decided to adopt a masculine identity: "I want to stop looking like a girl. (...) It's hard to say exactly what has made this desire so strong and this decision so clear. I guess it's the combination of recently learning that I might be a hermaphrodite and being really, really fed up with being devalued as a woman" (Viloria, 2017, p. 60).

Consequently, she stopped "wearing and doing all the things that [she had] been taught to as a woman" (Viloria, 2017, p. 60); she stopped wearing makeup and exchanged feminine outfits and shoes for "comfy clothes and sneakers" (Viloria, 2017, p. 61). She also noticed that she was no longer expected to behave in an amiable way or to keep a pleasant expression on her face: "I quickly realize that I am expected to act, in a lot of ways, just the opposite of how I had as a girl. (...) In fact, it isn't cool to be too polite or nice as a guy. It comes off as weak" (Viloria, 2017, p. 62; author's italics). The most surprising part of Viloria's experience was that she did not have to do anything with her body. On the contrary, she just gave up working on her appearance: "I didn't need to put on a costume to become this new person. In fact, I'd taken one off, one I hadn't even realized I was wearing. It turns out once the girl costume came off, there was a boy underneath" (Viloria, 2017, p. 62). Having been called a beautiful woman not so long ago, Viloria was now taken for a man everywhere, despite the timbre of her voice and her short stature.

Interestingly, although she had had heterosexual experiences, Viloria was mainly a lesbian, and her female partners also began to perceive her differently. Before, she had heard that she was "such a girl" (Viloria, 2017, p. 58),

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⁸ The recognition of androgynous people in Asian and American cultures (e.g., Hijra in India or Muxes in Mexico or Navajo; see Viloria, Nieto, 2020, pp. 32–40) is well known. Remarkably, in Western culture, the dominant binary pattern has consistently been accompanied by the enticing shadow of the androgyne as an alienworld, from Plato's *Symposium* to a range of representations in even very prudish times (for example, the Victorian paintings of Simeon Solomon).

and when she started wearing men's clothes, she heard that she was "such a boy" (Viloria, 2017, p. 70), even though nothing had changed either in her body or in her behavior. From the phenomenological point of view, this experience can be said to have revealed to her the arbitrariness of the gender binary and the significance of the sedimented gendered costume for the experience of femininity and masculinity: "My change in wardrobe reminds me of how some parents dress their babies in gender-specific clothing because, if they don't, people might not know what sex they are. *Oftentimes, parents need clothing to define their children as boys or girls*" (Viloria, 2017, p. 63; emphasis added).

Our experience of what is perceived as "normal femininity" and "normal masculinity" is shaped by taken-for-granted meanings of womanhood/manhood as the sedimented givenness of the homeworld founded on the pre-givenness of the lifeworld. Encountering something non-typical is experienced as an alienworld. This experience makes it possible to expose the sedimented structures of the homeworld and to detect the horizontal indeterminacy of the lifeworld. From this perspective, it is rather significant that Viloria would first correct people who addressed her with masculine pronouns because she tried "to broaden their idea of what women can look like" (Viloria, 2017, p. 73), but then she stopped doing so. She began to realize that her case was more complicated and that she "might not be a regular woman anyway" (Viloria, 2017, p. 73). The problem was that there was no way to communicate to people what she really was (Viloria, 2017, p. 76).

In order to resolve difficulties with her corporeality and identity, Viloria decided to contact the ISNA. In meetings with the members of the organization, she discovered the stunning fact that she was one of the few people whose genitals had not been subjected to so-called corrective surgery immediately after birth. For the majority of intersexual people, "scars cover the most sensitive of all human flesh, carved by hands seeking to correct things they saw as mistakes" (Viloria, 2017, p. 92). Viloria found nonconsensual surgeries, or the operationalization of "a narrative of culture in anatomical disguise" (Laqueur, 1992, p. 236), a particularly troubling issue that called for a solution. These treatments were based on the psychosocial gender-identity theory developed by John Money in the 1950s. According to Money's theory, it was indispensable for children to have their gender identity established very early and their genital anatomy had to conform to

the gender standard from the beginning of their lives. This requirement was combined with a strict division into the male and female sexual and social roles and a homophobic emphasis on heterosexuality as the only acceptable pattern of sexuality (Dreger, 1998, pp. 181–182; Roen, 2005, pp. 260–261; Viloria, 2017, p. 108). Katrina Roen observes that one result of the overbearing "imperative to regulate and categorize" has been that "medical science attempts to bend bodies and minds to fit into a simplistic grid of male or female, man or woman, where these concepts are necessarily defined in heterosexist terms" (Roen, 2005, p. 270). Viloria's view on the issue is similar, and she notes that the nonconsensual surgeries prevent intersexual people from growing up "with their own unobstructed experience of their gender" (Viloria, 2017, p. 126).

Following her discovery of her9 intersexuality, Viloria accepted her gender fluidity and realized that she did not "want to live out the rest of [her] days as solely a man or solely a woman" (Viloria, 2017, p. 148). However, very quickly it became obvious how difficult it was to be a non-binary person in a society ruled by the concepts and views constituted according to the sedimented binary categorization of gender, operating as the horizons of both individual homeworlds and the pre-given lifeworld. When trying to find out what type of intersexuality she represented, time and again Viloria faced people refusing to accept her identity as intersex and, instead, obtrusively asking her with which gender she identified more (Viloria, 2017, p. 131). During her public appearances, Viloria was queried about the medications she was taking. Such question were prompted by the presumption that she had congenital adrenal hyperplasia (CAH), or the so-called salt-wasting syndrome, even though she repeatedly asserted that having a benign intersex trait (clitoromegaly), she had never undergone any treatment related to genital anatomy, either surgical or hormonal (Viloria, 2017, p. 128).

Viloria has found herself in many situations bespeaking the ubiquity and power of the binary pattern as the horizon of the world of experience,

2017, p. 193). I abide by this choice and refer to Viloria as she/her.

⁹ Before she discovered her intersexuality, Viloria had identified as a girl/woman. Nonbinary and gender-fluid people usually prefer the pronouns they/their. Having recognized her intersexuality, Viloria likewise tried using the gender-neutral pronoun "ze," at least in her private life (Viloria, 2017, p. 149), but later on, even though she espoused a nonbinary, gender-fluid identity, she returned to feminine pronouns. Viloria stated in a TV interview: "I really want to embrace who I am, which is an intersex woman" (Viloria,

not only in society at large and in medical circles, but also in the intersexual community. A complete self-identification with the non-binary corporeality and the acceptance of it, such as hers, to the point of being proud of one's bodily uniqueness are something of a rarity even among the intersexual community. Viloria likes the moniker "hermaphrodite" and is eager to use it for herself. She presents herself as "basically a hermaphrodite, on the female side" (Viloria, 2017, p. 117) or "a hermaphrodyke to be exact: a herm who was raised as a woman and loves women" (Viloria, 2017, p. 303; author's italics), but at the same time she admits that a lot of intersex people find the term "hermaphrodite" abhorrent: "They don't want to be identified as this third-gender thing, a hermaphrodite. They are reluctant to adopt the third or neutral gender identity as they prefer to be seen as normal men or women with certain medical conditions or physical differences" (Viloria, 2017, p. 195; author's italics). Viloria also relates that intersex activism has been dominated by members who identify themselves as men or women and argue that they represent the identity claimed by the majority of intersexual people, which indeed seems to be the case.

Conclusion

Viloria's lived experience of intersexuality caused her to firmly reject the Chicago Consensus Statement adopted by the medical and intersexual communities in 2006 (Viloria, 2017, pp. 201–205). At the Chicago Consensus meeting in 2005, Disorders of Sex Development (DSD) was proposed as the umbrella term for "congenital conditions in which development of chromosomal, gonadal, or anatomical sex is atypical" (Grover, Hanna & O'Connell, 2020, p. 2). While medical experts insists that the term is purely descriptive, rather than normative (Grover, Hanna & O'Connell, 2020, p. 3), this stance comes across as epistemological naiveté, given the evaluative load of the word "disorder." In Viloria's view, DSD as an umbrella term is not only derogatory but also unnecessary, since people who prefer to identify themselves as women/men can avail themselves of the specific medical names of their respective conditions (Viloria, 2017, p. 264), such as congenital adrenal hyperplasia (CAH), complete androgen insensitivity syndrome (CAIS), partial androgen insensitivity syndrome (PAIS), or 5 α-Reductase-2 deficiency (5-ARD). Besides, Viloria

resents the detrimental medical implications of the denigrating language "officially labeling us as a disorder" (Viloria, 2017, p. 209).

Viloria was relieved to find out that the Organization Intersex International (OII) shared both her negative assessment of the stigmatizing nature of the term "disorders" and her feelings of disappointment and betrayal (Viloria, 2017, p. 205). Nonetheless, she is aware of the fact that the binary pattern is so overwhelming that a considerable proportion of intersexual people cannot overcome it and thus do not accept being an intersex person as their identity. Embracing a non-binary identity is so challenging that they prefer calling themselves a man/woman with some DSD to considering themselves a distinct third gender. Importantly, although "normalizing" surgical procedures on the genitals of very young children continue to be carried out in many countries, the Chicago Consensus of 2006 should be regarded as outdated. The medical community has since developed new standards, based on the notion that irreversible or particularly sensitive treatments should be postponed until an intersex person can participate in the relevant medical decision-making. This change of position is reflected in the modified title of the fundamental medical manual: its first edition of 2012 was titled Disorders of Sex Development, whereas its second edition, which was published in 2020, was titled Disorders/Differences of Sex Development (Hutson et al., 2020). Progress in approaches to intersexuality can be observed in multiple countries (Flor, García Dauder & Hurtado García, 2018). However, based on her lived experience of being intersex, Viloria is reluctant to use the term "differences," considering it another manifestation of the ongoing medicalization of intersexuality (Viloria, 2017, pp. 313–314), and strongly opposes any medical interference except when variations in the body's appearance are accompanied by symptoms that may put the intersex person's health at risk. As an intact intersex person, fully accepting her androgynous identity, Viloria regards "normalizing surgery" as a genital mutilation.

Grappling with her sexuality became a *Rückfrage*-like experience for Viloria, in which she peeled off the layers of sedimented sex/gender binary. It can be argued that she experienced the recognition of her intersexuality as an encounter with an alienworld enabling her to identify the sex/gender binary category as the horizon of her homeworld grounded on the sedimented pattern of the sex/gender binary pre-given in the lifeworld. Her lived experience of intersexuality and acceptance of being intersex/

hermaphrodite encouraged her to play with her non-binary, gender-fluid identity, and with time she was able to fully embrace her "real self" and to reply "I am both" or, alternatively, "I am neither" when asked whether she was male or female.

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