

To the 3rd National Report of Taiwan, Republic of China

Shadow Report on CEDAW

Reporting Group: Organization Intersex International – Chinese (Oii-Chinese)¹

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As the only intersex-led human rights-based organization in Taiwan, we call for Taiwan government to achieve the following demands. The demands echo several demands from the first Public Statement by the Asian Intersex Movement.³

1. To end harmful practice

According to :

General recommendation Joint general recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/general comment No. 18 of the Committee on the Rights of the Child on harmful practices (2014)

Article 2

States Parties condemn discrimination against women in all its forms, agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women and, to this end, undertake:

(b) To adopt appropriate legislative and other measures, including sanctions where appropriate, prohibiting all discrimination against women;

(d) To refrain from engaging in any act or practice of discrimination against women and to ensure that public authorities and institutions shall act in conformity with this obligation;

¹ Oii-Chinese is the first Chinese speaking intersex organization based in Taiwan since 2008. See <http://www.oii.tw/>

² Chiu, Ai-Chih (Hiker Chiu) is the intersex activist come out publicly in Taiwan, the initiator of “Global Free Hugs with Intersex movement”, the Asia representative in the UN Intersex Expert Meeting hosted by the UNHRC in 2015 and the leading organizer of the first Asia Intersex Forum in Feb 2018.

³ The first Public Statement by the Asian Intersex Movement [link](#) [PDF](#)

The harmful practice of the Genital Mutilation on intersex infant is still reporting in Taiwan.⁴ A big regional hospital in the southern Taiwan was reported to perform the plastic surgery for normalizing genital and vagina on infant with CAH without consent. The news report also stated that there are 300 CAH cases in Taiwan now.

Demands:

- We strongly call state to put an end to mutilating and ‘normalising’ practices such as genital surgeries, psychological and other medical interventions through legislative and other means. Intersex people including intersex women, intersex transwomen must be empowered to make their own decisions affecting their own bodily integrity, physical autonomy and self-determination. To put an end to inappropriate medical practices and protocols, including the administration of medication for gender selection and medical interventions on foetuses and newborn babies, as a result of lack of awareness about intersex people and intersex variations. To protect intersex people from discrimination by adding the ground of sex characteristics to anti-discrimination legislation and to ensure protection against intersectional discrimination.
2. To support parents to ensure the best interest for the children with variations of sex characteristics or intersex traits

According to:

Article 5

States Parties shall take all appropriate measures:

(b) To ensure that family education includes a proper understanding of maternity as a social function and the recognition of the common responsibility of men and women in the upbringing and development of their children, it being understood that the interest of the children is the primordial consideration in all cases.

Demands:

- We call for state to include the human rights-based intersex education in the family education and antenatal counselling and support for parents, to ensure the interest of the children is the primordial consideration in all cases.

According to the news report in Taiwan, the first medical intervention to normalize the intersex child was practiced on a six-year old in 1956 and was

⁴ Congenital Adrenal Hyperplasia, males and females difficult to distinguish; 2015-10-21; China Times

described as a great achievement. The early-aged treatment for intersex infants was promoted largely by western medical doctors since then. The surgery age of the intersex was getting down to one-year old infant since 1988. The first call to parents for not giving early gender assignment surgery on the intersex infant was voiced by a doctor in 1996. But, the reality is that we can still read the news report nowadays about the early medical normalization surgery on the female intersex infant with CAH in Taiwan⁵. Doctors can only perform surgery under request from and with consent by the parents. Obviously, we can see that parents of the intersex child in Taiwan lack of human rights-based resources and support to make the best decision for their children. This is also the real experiences that are reported by intersex parents to Oii-Chinese. So, we call for state to provided human-rights based intersex education and antenatal counselling and support for parents to ensure the best interest of the children is the primordial consideration in all cases.

3. Providing human rights-based intersex education to eliminate discrimination against women with variations of sex characteristics or intersex traits from medical professional and healthcare takers.

According to:

Article 2

States Parties condemn discrimination against women in all its forms, agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women and, to this end, undertake:

- (d) To refrain from engaging in any act or practice of discrimination against women and to ensure that public authorities and institutions shall act in conformity with this obligation;
- (e) To take all appropriate measures to eliminate discrimination against women by any person, organization or enterprise;
- (f) To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women;

Demands:

- We call for state to eliminate all discrimination against women including women with variations of sex characteristics or intersex traits by providing human

⁵ Congenital Adrenal Hyperplasia, males and females difficult to distinguish; 2015-10-21; China Times

rights-based intersex education to medical doctors and all related healthcare takers. To ensure that all professionals and healthcare providers that have a specific role to play in intersex people's wellbeing are adequately trained to provide quality services.

The social discrimination against women with variations of sex characteristics or intersex traits is the key reason that pushes the doctors and the parents to adopt the medical intervention as a means to remove the social stigma on female intersex infants without consent. This is the key human rights violation to intersex infants and children that is still happening in Taiwan. We believe the doctors and related healthcare takers are the most urgent groups that need to get support from the state to learn about human right-based intersex issues and medical care. A human rights-based manual provided will be an easy and helpful start. We call for state to provide human rights-based intersex education resources for these groups.

Reference

Congenital Adrenal Hyperplasia, males and females difficult to distinguish;
2015-10-21; China Times

腎上腺增生症作祟 雌雄難辨



雌雄難辨！台東女嬰罹患先天腎上腺增生症出現男性性徵，左圖明顯可見小雞雞；右圖為經重建整形後逐漸恢復女性性徵。（郭韋綺攝）

台東小男嬰因嚴重尿道下裂合併隱睪症，原要手術開刀治療，照超音波找不到睪丸，深入診斷發現罹患罕見腎上腺增生症導致陰蒂及陰唇肥厚，乍看像是小陰莖和陰囊，其實是如假包換的女嬰，經賀爾蒙治療、陰道整形已漸恢復女性性徵。

收治女嬰的義大醫院小兒科醫師陳亮宇指出，女嬰出生被診斷尿道下裂及隱睪症，從台東轉來有輕微電解質異常，診斷是脫水、鹽分流失的失鹽症造成，做超音波發現腎上腺腫大，奇怪是找不到睪丸，詳細檢查發現罹患罕見先天性腎上腺增生症。

他表示，腎上腺增生症會刺激體內的雄激素增加，引起女生性徵異常變成俗稱「假性陰陽人」，從女嬰陰唇異常肥厚，陰蒂過長像男生「小雞雞」，還有尿道、陰道合併症狀，是嚴重性徵顛倒、性別錯亂案例，難怪父母難辨雌雄誤認成男嬰。

這名女嬰經 2 年賀爾蒙治療，隨即接受泌尿生殖器重建整形術，性徵恢復狀況良好，若未及早發現當男孩養，通常直到父母發現小男生怎麼常跑女廁，青春期乳房突出、有月經才驚覺搞錯性別。

他說，腎上腺增生症必須父母皆帶有此缺陷基因，才會生出性徵異常女嬰，發生率為 1/2 萬，目前全台約 300 例。女孩兒們得一輩子接受賀爾蒙治療，現在最年長病患已 30 歲，未婚。

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