

The struggle to accept unique gender identity in the life of an intersex person in *None of the Above* by I.W. Gregorio

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Abstract

Considering that the issue of sex and gender is getting more and more complicated, the aim of this paper is to deal with the struggle to accept unique gender identity faced by a young female main character with intersex condition as depicted in the novel entitled *None of the Above* (2015) written by I.W. Gregorio. To support the analysis certain concepts are borrowed. Based on the complicated and nonlinear relation between sex and gender as detected by Butler, the focus is on the notion of intersex condition, the medical awareness of intersex condition, the meaning of intersex condition, the proposed medical solution for intersex person, and a specific intersex condition called AIS. The research methods used to support the analysis are a combination of library research method, qualitative research method, and contextual research method in the research frame of feminist literary criticism. The results shows that even in the modern world, a person with intersex condition is still considered as a freak who has to struggle painfully, bitterly, and traumatically to understand, overcome, and finally accept her condition. Understanding and support from medical circle, family and close relative, and some open-minded people, help the young intersex female gain her life back as a female whatever her chromosome is.

Keywords: None of the Above; intersex; AIS; feminist literary criticism; contextual research method

INTRODUCTION

The issue of gender is becoming more and more complicated in this modern world and *None of the Above* (2015) is one of the novels that talks about how complicated and unique gender is. The writer, I.W. Gregorio is a surgeon who is active in the consultation with AIS (Androgen Insensitivity Syndrome) people (Carpenter, 2015). *None of the Above* is her debut novel. It talks about the female main character who was a young, pretty, and happy girl who is active in sports and enjoyed her senior high school days. At prom night when she had planned to lose her virginity to her much beloved boyfriend, an unexpected disaster happened. She felt unbearable pain during penetration that led her visit a gynecologist. After careful examination, it was discovered that she suffered Androgen Insensitivity Syndrome (AIS) or commonly called intersex. Her life turned upside down. When the news leaked, her boyfriend disgustedly left her, her friends stayed away from her. Only her teachers, father, and aunt (her mother had died) who understood her problems and supported her long treatment and surgery. Finally she could have her life back and enjoyed it with her new and understanding boyfriend who does not care about her "chromosome".

Based on the brief summary above and considering that there is no article about *None of the Above*, the writer of this paper proposes to discuss "The Struggle to Accept Unique Gender Identity in the Life of an Intersex Person in *None of the Above* by I.W. Gregorio". The focus of the analysis is on the young pretty female character, Kristin, who suffers from AIS. The discussion will talk about Kristin's life before the diagnosis, Kristin's life after gynecological diagnose, Kristin's support system, and Kristin's self-acceptance as intersex person.

To support the analysis some relevant notions are borrowed. Sex and gender are not the same but both are interrelated in a complicated way. Humans' interest in sex and gender is mentioned by Freud as quoted by Harper: "when you meet a human being, the first distinction you make is "male or female?" and you are accustomed to make the distinction with unhesitating certainty" (Freud, 1933, p. 113 as quoted by Harper, 2007, p. 2). The raw distinction based on heterosexual opinion dominates most of the people in heterosexual community. However, Butler in her book entitled *Gender Trouble* stated straightforwardly that "whatever biological intractability sex appears to have, gender is culturally constructed: hence, gender is neither the causal result of sex nor as seemingly fixed as sex. The unity of the subject is thus already potentially contested by the distinction that permits of gender as a multiple interpretation of sex" (Butler, 1990, p. 8). Thus, although gender cannot be separated

from sex, the first is not the linear result of the latter. A certain gender may represent a complicated sex condition.

That the relationship of gender and sex is not simple and linear as commonly believed can be seen in the real case as follows:

In 1960, the Dutch gynaecologist A.J.M. Duyzings published a case study of an 18-year-old girl, who had come to him because she had not begun to menstruate. After an intensive two-month clinical investigation of the young woman's body, Duyzings established the presence of male sex chromosomes, a shortened vagina, absence of a womb, and undescended testicular gonads. In the face of these findings Duyzings began to doubt the girl's gender, although the girl did not seem to doubt her gender herself (van Heesch, 2009, p. 132).

The female gender of the young girl is not correlated with the expected female sex since her sex is a complicated combination of male and female elements. This real case is in tune with Butler's opinion on the complicated relation between gender and sex. This real case is also reflected in the case of the young female character in *None of the Above* written by I.W. Gregorio.

The realization concerning the intricate relation between sex and gender is growing unstoppable nowadays as can be seen in the following quotation: "The conflation of the terms male/female with man/woman began to erode in the 1950s due to sexologist, John Money, who worked with the intersex population" (Goldie, 2015 as quoted by Vilorio and Nieto, 2020, p. 116). John Money's participation in the intersex community open the eyes of many people that binary division reflected in heterosexual perspective is no longer valid. There are other unique combinations of sex anatomy, not just male and female. The case of intersex begins to attract attention in the modern world as shown in the following quotation: "Starting in the early 1990s, activists instead advocated "intersex" (first introduced by the biologist Richard Goldschmidt in 1917) to describe the set of conditions previously called hermaphroditism—namely, discordance between the multiple components of sex anatomy" (Reis, 2009, p. 154). The quotation above shows that the term intersex used today is coined by Richard Goldschmidt in 1917 to replace the term hermaphroditism. Harper asserted that the term hermaphrodite "serve to dehumanize and stigmatize the living and real individual to whom the word is applied" (Harper, 2007, p. 2). Thus, the term intersex is better than the condescending term hermaphrodite.

The new term intersex is explained as follows "Intersex is an umbrella term describing a wide range of natural body variations in sex characteristics. Individuals born with intersex characteristics do not fit typical notions of male or female bodies" (interACT and Lambda Legal 2018; United Nations 2017 as quoted by Petersen, 2021, p. 23). Thus, it can be briefly stated that intersex is the rupture in the common elements of sex parts indicating male or female sex clearly. Medically, the situation of intersex is classified as "disorders of sex development (DSDs)" (Pediatrics 118, no. 2, 2006 as quoted by Harper, 2020, p. 10). This indicates that intersex is still considered as a deviant condition in the heterosexual perspective. On the other side the intersex condition proves that sex and gender is not simply linear as clearly denoted by the following quotation: "Unlike typical males and females, who were defined as men or women, respectively, this was not possible with intersex individuals whose sex as male or female was unclear. This created the awareness that an individual's identification as a man or woman did not always correspond with their biology" (Viloria and Nieto, 2020, p. 116). Biological anatomy or given condition at birth is not always in line with the gender identity of someone making intersex condition interesting and challenging.

Intersex condition needs clarification to avoid any misunderstanding, misjudgment, or mistreatment to intersex people. The following quotation present brief, clear, and detailed information on intersex condition:

Intersex traits are physical, anatomical and biological and are formed in the womb. Intersex traits are not core gender identity, whom you are attracted to or how you express yourself. Intersex is not related to the act of sex. Intersex is not a mental illness. Intersex is not abnormal. Intersex is not the same as transgender (Laukaitis, personal correspondence 2017; Moss, 2014 as quoted by Petersen, 2021, p. 26).

In short, intersex is a given biological condition that does not determine "gender identity" or sexual preference. Intersex is a normal condition that does not refer to insanity or to "transgender". Thus, intersex condition must be accepted as normal condition besides binary division in heterosexual perspective. A person with intersex condition is not a deviant who should be avoided or bullied as represented in the case of the young female character in *None of the Above* written by I.W. Gregorio.

The unique case of intersex condition is further explained by Petersen as follows: "For example, newborns with complete Androgen Insensitivity Syndrome are born genetically male with XY

chromosomes and feature internal testes and female appearing external genitalia” (Petersen, 2021, p. 26). There is a specific intersex condition called AIS in which although the chromosome is XY or commonly known as male chromosome, the outward genitalia is female. AIS is further explained as follows:

Androgen insensitivity syndrome is a condition that affects sexual development before birth and during puberty. People with this condition are genetically male, with one X and one Y chromosome. Because their bodies are unable to respond to certain hormones (called androgens), they may have mostly female sexual characteristics or signs of both male and female sexual development (hermaphroditism) (Parker and Parker, 2007, p. 3).

An unexplained biological rupture in the womb leads to atypical XY chromosome. The person who should be male cannot perfectly absorb the male sex hormone. As a result, the AIS person will appear as a female while having hidden male organs inside their body that he/she does not realize as described in the novel *None of the Above* written by I.W. Gregorio.

As a controversial condition, intersex attracts discussion among the experts, one of them is John Money: “Furthermore, it was theorized by intersex pioneer John Money and others in the middle of the twentieth century that it was important to develop a gender identity consistent with the sex assigned at birth” (Harper, 2020, p. 13). He proposed to correct the intersex condition by directing the intersex person to follow the sex and gender identity he/she is familiar with since birth. This kind of correction is usually in the form of surgery. Since most intersex people are taking female gender identity, thus “Surgery will often be recommended to create, enlarge, or elongate a vagina” (Karkazis, 2008, p. 152). The surgery will fix the imperfect vagina of the intersex person so that she can have sexual intercourse as a female. This surgical corrections have positive result as can be seen in the following quotation: “Nonetheless, there are at least some people diagnosed with an intersex condition who report being happy with their surgical outcomes and with their social positions” (Holmes, 2008, p. 16). The intersex person can continue and enjoy their life as a female after the corrective surgery. All these are depicted touchingly in the novel *None of the Above* written by I.W. Gregorio that will be discussed in this paper.

METHODS

There is a combination of relevant research methods used to support the analysis on “The Struggle to Accept Unique Gender Identity in the Life of an Intersex Person in *None of the Above* by I.W. Gregorio.” The first and basic thing is the library research method which “involves identifying and locating sources that provide factual information as well as personal/expert opinions on research issues” (George, 2008, p. 6). Using the library research, relevant information from various valid resources which are useful to support the analysis is borrowed. In general, the whole analysis is done using qualitative research method which “focuses on description and interpretation” (Hancock, Ockleford, and Windridge, 2009, p. 6). It means all data are analyzed based on relevant concepts for sound findings. For the focus on literary analysis, the frame of analysis is based on the feminist criticism which “reads writing and examines its ideology and culture with a woman centred perspective” (Humm, 1995, p. 51). This feminist criticism is chosen because the focus of analysis is on the young female who have to struggle with the AIS condition. The literary analysis is also done using contextual method in which “Context refers to what goes *with* a text, rather than what is *in* it” (Beard, 2004, p. 6). It means without leaving the internal aspects of the novel, the focus is more on the external aspects merging in the novel being analyzed. The internal aspects include character and conflict while the external aspects focus on the nonlinear relation between sex and gender, intersex, and AIS (Androgen Insensitivity Syndrome).

FINDINGS AND DISCUSSION

There are several heart-wrenching findings from the analysis on the novel *None of the Above* written by I.W. Gregorio. The first is that an active healthy female who looks normal may unconsciously have a condition called intersex in which she has XY (male) sex chromosome with hidden testicles. The second is that public tends to easily judge intersex as freak, disgusting deviant, or abnormal species that must be avoided. The third is that a person with intersex condition mostly suffer from deep personal trauma, cruel and unfair public accusation, as well as humiliating ostracized action. The fourth is that the support of loving family, friends, and teachers, as well of the unconditional help of AIS support system, gradually assist the person with intersex condition to accept her condition and to start a happy life again.

For the discussion the focus is on the young female main character, Kristin Lattimer often called Kristin or Krissy, who traumatically discover that she is an intersex person or a girl with an XY (male) chromosome and hidden testicles when she is at senior high school. The analysis is divided into several parts; namely, Kristin before the Diagnosis, Kristin after Gynaecological Diagnosis, Kristin's Support System, and Kristin's Self-Acceptance as Intersex Person.

Kristin before the Diagnosis

Kristin's life as a young female student in the senior year in high school looks perfect at the present moment. She has been able to overcome the sadness of losing her beloved and loving mother due to cervix cancer. Now she is an active, cheerful, happy young female who has two close female friends, Vee and Faith, since they were toddlers. Kristin, or Krissy, is a promising athlete. She is a hurdler and she likes running every morning with her beloved boyfriend, Sam (Gregorio, 2015).

Unaware that she is also popular, she is so certain that Vee, her very popular friend will become the Homecoming Queen. The soaring hope of Vee is crumbled unexpectedly when it is announced that the Homecoming Queen is Kristin and Homecoming King is Sam, Kristin's boyfriend (Gregorio, 2015). This unpredicted announcement makes the relationship of Kristin and Vee is rather awkward. Kristin feels uncomfortable while Vee tries to cover up her injured self esteem.

In this Homecoming night, Kristin has planned to lose her virginity to her much beloved boyfriend, Sam. They also have rented a limo for that special occasion. The much-anticipated special moment does not happen as expected. At first Sam surprisingly thinks that Kristin especially waxes her pubic hair (Gregorio, 2015). The fact is that Kristin has no pubic hair and even she has never had the menstrual period which often make Kristin feel worried, but her aunt, Carla, positively thinks that she is "a late bloomer" (Gregorio, 2015, p. 22). However, the most shocking event is when they are having sexual intercourse. Sam's penetration hurts Kristin so much that they stop trying after two unbearable attempts: "It felt like someone had taken an electric drill to my insides" (Gregorio, 2015, p. 12). Even though Sam tries to be understanding, Kristin feels so upset because she begins to realize there is something wrong with her vagina.

Kristin's Gynaecological Condition

The discussion on this section will be divided into the gynaecological diagnosis, the gynaecological treatment, as well as the impacts on Kristin and her love and social life.

The Gynaecological Diagnosis

Triggered by the disastrous first penetration, the dismayed Kristin decides to visit a gynecologist alone during class hours. The female gynaecologist, Dr. Johnson, asks common question about Kristin's menstrual period and Kristin's negative answer makes her do detail examination. When she examines Kristin's stomach area with her hands she surprisingly feels that there are two small bumps in the inside of the stomach: "Are you aware that you have a small hernia? Two, actually" (Gregorio, 2015, p. 22). Kristin is so surprised about Dr. Johnson's discovery although at first Dr. Johnson think that those two bumps are not a serious medical case. However, her opinion changes when she examines the inside of Kristin's vagina: "Holy sh—!" It was like being torn apart from the inside. I gasped in pain and my knees came together, knocking Dr. Johnson in the forehead (Gregorio, 2015, p. 23). Again Kristin feels the uncommon unbearable pain that make Dr. Johnson worried and recheck again Kristin's inside. Although Kristin has to endure the pain, this time Dr. Johnson finds out that:

"... your vagina is unusually short."

"I'm also having some trouble seeing your cervix for the Pap, so I'm going to bring over our ultrasound" (Gregorio, 2015, p. 23).

The short vagina makes the penetration so painful. However, that is not the only problem because the gynaecologist cannot see Kristin's cervix. At this point, Kristin is at a loss. She is so confused and worried. Her worry is confirmed by the gynaecologist's statement after the ultrasound examination:

"So, Kristin," Dr. Johnson said, "in that ultrasound I just did, I wasn't able to find your uterus—your womb—at all." ... Did anyone ever mention anything to you about something called androgen insensitivity syndrome, or AIS?" (Gregorio, 2015, p. 24).

Kristin is so shocked at the bombardment of the gynaecologist's confusing statements. For Kristin, short vagina, unseen cervix, no uterus, and AIS, are the terms that are unthinkable, unimaginable, and never crossed her head that may happen to her. Dr. Johnson's further explanation does not make Kristin's confusion decrease:

“It’s just a . . . a unique genetic syndrome that causes an intersex state—where a person looks outwardly like a female, but has some of the internal characteristics of a male . . . Miss Lattimer, I think that you might be what some people call a hermaphrodite” (Gregorio, 2015, p. 24).

Not once does Kristin suspect that she is an intersex or hermaphrodite person since she does not feel anything strange with her body or sexual preference. She is sure that she is a female who likes a male despite some disturbing things such as no pubic hair and no menstrual period. Dr. Johnson has another bomb for Kristin. The two small bumps in her stomach previously assumed to be hernias are actually testicles, parts of male sex organ. At this stage, Kristin’s reactions switch from “I started feeling numb” (Gregorio, 2015, p. 24), “I blinked” (Gregorio, 2015, p. 25), “I closed my eyes again” (Gregorio, 2015, p. 26), and “I was curled up in the fetal position” (Gregorio, 2015, p. 25). All these reactions indicate her emotional chaos mixed with helpless denial and a futile attempt to retreat to the childish comfort zone.

The Gynaecological Treatment

For Kristine and her father as well as aunt Carla, the medical diagnosis as an intersex person presents a gloomy future for Kristin. However, Dr. Johnson the gynaecologist recommends Kristin to consult Dr. Cheng, a female urologist, about the hidden testicles. Knowing that Kristin and her father is in despair, Dr. Cheng tries to be as helpful as possible in giving the explanation. Upon Kristin’s desperate question “So what am I?” (Gregorio, 2015, p. 37), she carefully explains as follows “When speaking about your condition, we use either the term intersex, or disorder of sex development—DSD for short” (Gregorio, 2015, p. 37). However, her explanation does not reduce Kristin’s distress. When Kristin and her father insist on having a surgery to remove the hidden testicles, Dr. Cheng patiently reminds them that “If you take the testicles out, you’ll have to start taking estrogen for bone health” (Gregorio, 2015, p. 38). So there is a risk that must be borne for life. Nonetheless, both Kristin and her father have already determined to take the removal surgery.

Dr. Cheng said that as an intersex person, Kristin is a female with vagina although it is short and without uterus, and with an XY or male chromosome manifested in hidden testicles. Her sexual preference is like females who likes boys since an intersex person is not gay or transgender. Dr. Cheng also gives practical solution for the short vagina that can be done by Kristin herself: “... we can talk about dilation—stretching the vagina naturally. Here’s a sample kit ...” (Gregorio, 2015, p. 39). Although Kristin feels uncomfortable with the solution, she has to do that if she wants to have sexual intercourse. She follows the procedure of vagina elongation dutifully. At this stage, Kristin has not told anybody outside her family’s circle.

The next medical treatment that is much expected by Kristin and her father is the testicles removal surgery. Dr. Cheng, the urologist, reminds Kristin the side effects after the surgery in details:

“Once your testicles are removed, you’ll have to take daily estrogen to replace your hormones ... sometimes testosterone deprivation after surgery causes hot flashes, depression, and mood swings until we get the dosing right” (Gregorio, 2015, p. 95).

Not only does Kristin have to take a pill daily to balance her hormone, she may also have unpleasant physical or emotional disturbances before Dr. Cheng can give her the right dose. Whatever the risk, Kristin as well as her father has firmly decided to remove the hidden testicles (Gregorio, 2015). Kristin feels trapped in the intersex condition that she cannot avoid: “Dr. Cheng hadn’t said that I was a woman. She had said that most people with AIS “identified themselves” as women. Which wasn’t the same” (Gregorio, 2015, p. 99). Kristin has to face the bitter fact that she is not a 100% woman since her chromosome is XY.

Kristin recovers fast and well; however, after a few weeks “I felt flushed, and vaguely sick to my stomach. My heart was pounding so hard ...” (Gregorio, 2015, p. 128). She is not as healthy as before. She is not sick but there are some unpleasant symptoms that she has to endure. When visiting Dr. Cheng, the urologist that operated her, Kristin is reminded by Dr. Cheng that she must forget to take the prescribed pills everyday, thus her body lacks the estrogen after the hidden testicles are removed. Her body is in the menopausal stage and without those hormone supply, Kristin will not be fit as usual (Gregorio, 2015). Seeing that Kristin is emotionally unstable, Dr. Cheng recommends her to visit a therapist, Dr. LaForte. After an awkward moment, Kristin can tell Dr. LaForte all her problem and the bullying actions directed to her. Sympathetically, Dr. LaForte explain to Kristin that the bullying is the representation of transphobia: “Transphobia. Fear and hostility toward transgender people. And anyone who doesn’t fit into the typical gender binary, really” (Gregorio, 2015, p. 142). Although the explanation does not lessen Kristin’s burden, at least Kristin now knows the general

trigger of those bullying actions. The therapist also suggests that Kristin finds support group under the following reasons: "... there are people who care about you. And you are truly not alone. Have you tried reaching out to any other people with your condition?" (Gregorio, 2015, p. 142). Talking to people with similar condition will help more in an emotional and psychological way because they have experienced personally the hardships of being intersex. Dr. LaForte concludes that: "I do think you may be depressed" (Gregorio, 2015, p. 142-143). According to Dr. LaForte, what Kristin is experiencing at that time is depression. Kristin is feeling acute dejection from the public who direct incessant bullying on her.

The Impacts on Kristin's Love and Social Life

The first time Kristin knows about her diagnosis, she tries to live her days normally (Gregorio, 2015). She keeps her personal condition secretly. She tries to look as cheerful as she is usually. Even she joins the party with Sam. In that party, partly feels confident with the self-elongation procedure, Kristin has sexual intercourse with her beloved boyfriend, Sam:

I started moving my hips, ... I pulled him against me.
Mistake.

I closed my eyes with the pain but managed to stay quiet (Gregorio, 2015, p. 58).

Kristin's vagina is still too short for Sam's full-length penis and she has to experience again the excruciating pain. Shaken by the first real intimacy turning to be torturing, Kristin is unable to keep her secret anymore to Vee who is so shocked after looking at Kristin's condition after having sex:

"I'm a hermaphrodite."

For a moment Vee's face went completely blank. Then she laughed (Gregorio, 2015, p. 60).

Vee is the first person outside Kristin's family circle to whom Kristin tells her condition. Vee, one of Kristin's best friends, cannot comprehend Kristin's seriousness. She thinks it is just a joke, so that is why she innocently laughs. Because the easy going Vee has known the secret, Kristin seriously asks Vee to keep the secret (Gregorio, 2015). Although Vee seems to be insensitive, she is a good friend that promisee not to change her attitude to Kristin after knowing Kristin's real condition. Kristin also tells Faith, another of her best friend about her condition: "Remember when I went to Vee's OB? It . . . it turns out I don't have a uterus" (Gregorio, 2015, p. 69). However, further explanation to the sympathetic Faith is not possible at that moment because Faith's little sister suddenly appears.

However, beyond Kristin's expectation, the news of Kristin's intersex condition leaks. Who betrays Kristin's trust is not clear yet and later it becomes a never ending prejudice. Kristin starts to get various forms of bullying:

... my phone pinged ... There was no message, just a picture. An old-style movie poster with my face Photoshopped onto the body of a pudgy figure with eighties clothes, and the words:
It's Kris—the Hermaphrodite! (Gregorio, 2015, p. 72).

The cyber bullying is the first that Kristin gets on the way to school with Faith. Shocked and humiliated, Kristin asks who spread the news but she does not get an answer. In her shock, Kristin is more concerned with Sam's reaction if he knows (Gregorio, 2015). When both Kristin and Faith walk along the school corridor, Kristin faces another form of bullying:

The kids on the stairs moved aside to let us through. Just inside, a guy bumped into me with his shoulder, almost knocking my bag off.

"Watch it, Kristopher!" he said, and laughed like he'd just said the funniest thing in the world (Gregorio, 2015, p. 73).

The bullies are tending to be physical by a seemingly accidental shoulder collision followed by a verbal one in the form of changing female name Kristin into male name Kristopher and a loud condescending laugh. Nonetheless these are not the most painful bullies. Sam's reaction is beyond Kristin's imagination:

He'd just opened his locker when I reached him. When I called his name and touched his arm he jerked away so hard he dropped his books. It was worse than a slap.

"Get away from me," he said, without even looking up.

....

"I've got nothing to say to you, you homo," he said loudly, his eyes darting back and forth to people behind me" (Gregorio, 2015, p. 73).

Sam turns out to be an egoistical person who concerns about himself. He is afraid to be bullied by the other students if he is close to Kristin. He is so rough in his action and word. Sam's open reactions are followed by other humiliating verbal sexual abuses towards Kristin by other male students. Facing all

those degrading bullies alone, Kristin feels as follows: “And I began to process how deeply I had been betrayed” (Gregorio, 2015, p. 74). Because she only tells Vee and Faith and Vee seems to avoid her by not coming to school together as usual, Kristin in anger accuses Vee. They have a bitter verbal fight. Kristin is angry because Vee tells her mother and she thinks that the news spreads through Vee’s mother. In the blind anger and deep humiliation, Kristin accuses Vee of taking revenge because Vee still cannot accept her losing the title of Homecoming Queen to Kristin (Gregorio, 2015). Because Vee looks unconcerned in Kristin’s eyes, Kristin becomes angrier and they start hurting each other feeling. The friendship since childhood falls apart because of exploding emotions. Kristin is deeply hurt and becomes prejudiced with Vee’s easy going character while Vee who does feel that she has done anything wrong is provoked by Kristin blind accusation leading her to return Kristin’s harsh words with harsher words. They parted in anger (Gregorio, 2015).

Meanwhile, bullying actions directed to Kristin does not stop. Somebody uses paint to write verbal bullying on Kristin’s locker: “STaY aWaY, TRaNNY FaGGOT” (Gregorio, 2015, p. 83). Because there are many students looking at it before Kristin comes, Darren tries to lead Kristin to another direction, but his effort is unsuccessful. Darren is also in the senior year. He has known Kristin for a long time when Kristin’s widower father dated Darren’s divorced mother a few years ago. Darren is kind hearted and attentive. The distressed Kristin on walking home is almost hit by a car if not saved by Darren. The sympathetic Darren can understand Kristin’s feeling because he has once been in a rather similar situation. Although it is not about Darren himself, but his father’s sudden declaration that he is a gay and divorces her shocked mother affects young Darren’s life a lot. Not only does he endure personal trauma, but he also gets bullying actions from other unknown people (Gregorio, 2015). Having passed such bitter experience, Darren of course knows Kristin’s emotional and psychological trauma.

Kristin’s Support System

After knowing that she has an intersex condition, Kristin is emotionally and psychologically fragile. The bullying actions that follow make her very down. In that devastated condition there are people outside the doctors who unconditionally support and help Kristin in many ways so that she can pass the fragile phase. The first and foremost is her father. Although at first he is shocked and saddened by Kristin’s intersex condition, he is the first one who starts to face the fact. His love for Kristin is unquestionable, as said by aunt Carla: “You know we’ll love you no matter what. Remember when you were little and your dad always said that he’d love you forever and ever, until the sun fades?” (Gregorio, 2015, p. 40). Aunt Carla takes care of Kristin after the death of Kristin’s mother due to cervix cancer. As for Kristin’s father, tirelessly he finds as much information as possible from the internet about intersex after returning home from work. He also finds support group for Kristin and he even has contacted parent support group. He encourages Kristin who seems reluctant to contact the support group (Gregorio, 2015). Although he loves Kristin very much, he is also a strict father. When Kristin is very drunk after going to the party with Vee and Faith, he punishes Kristin for a week without cellphone, internet at home, and car. He also limits Kristin’s time for running (Gregorio, 2015). This shows that he is a good father who does not let loose his daughter eventhough she has serious medical diagnosis. When finally the father knows that everybody in Kristin’s school has known about, he is so devastated and feels so sorry for Kristin: “Oh, Krissy. No wonder you don’t want to go to school. Why didn’t you tell me earlier?” (Gregorio, 2015, p. 129). To make Kristin feel cared and love, the father makes “with freshly made blueberry whole wheat pancakes” (Gregorio, 2015, p. 144), a specialty made by her father when her mother was still alive. Not only that, her father also asks Kristin to do an outside activity together: ““It’s a beautiful day. Why don’t we go for a run together?” (Gregorio, 2015, p. 144). It is strange because her father does not like physical. Her father wants to show that he cares for her so much. There is another hidden purpose of the father’s asking Kristin to run together in the bright day light when Kristin has changed her running time in the late afternoon after the diagnosis to avoid meeting people. The father wants to show Kristin that the people in their neighborhood do not change their attitude to Kristin, they say hello as usual. Kristin who at first is afraid to meet them and has tried to avoid them is so relieved by their attitude: “I was smiling” (Gregorio, 2015, p. 146). Kristine’s father also gives another little bright hope to Kristin: “I finally found the right NCAA guidelines,” he said, “and people with AIS are considered women for competitive purposes. They can’t take your scholarship away” (Gregorio, 2015, p. 130). Thus, the dread that Kristin will lose her scholarship will not happen. However, Kristin must go to school as

usual to keep the scholarship. The fact is that Kristin is reluctant to go to school due to the bullying actions.

Another help is from the school. Kristin's case and the bullying actions that follow are also heard by a caring teacher, Ms. Diaz (Gregorio, 2015). Sympathetically, Ms. Diaz also offers several academic helps to Kristin to a little bit ease her burden. When the cyber bullying does not stop that makes Kristin decides not to go to school, Ms. Diaz offers a temporary solution: "Technically, there's a six-week limit to home instruction. But that is flexible if your physician requests more time ... The one requirement you still need to meet, Kristin, is your community service project" (Gregorio, 2015, p. 125). Thus Kristin does not need to attend school for six week until the bullying subsides and Kristin is ready emotionally and psychologically. As for the "community service project", to avoid meeting people who knows her and will direct bullying to her, Kristin deliberately chooses the farthest, the Caritas Helath Clinic (Gregorio, 2015, p. 131). Only two students volunteering there, Darren and Jessica. Both of them do not have a problem with Kristin's condition. Kristin gradually becomes closer to Darren but Darren has a girlfriend (Gregorio, 2015). Another good news for Kristin's future is an email from Coach Auerbach: "My dad had forwarded her the relevant NCAA guidelines, and she'd been able to convince the school board to reinstate me to the team. Would I like to come to practice starting tomorrow?" (Gregorio, 2015, p. 169). Kristin's father struggles so hard so that Kristin does not lose her scholarship. However, the one and only requirement is that Kristin must attend school and practice as hard as before with Coach Auerbach. At this stage Kristin is not ready yet to go back to school and meet other students.

Another party that helps Kristin is the AIS support system. When Kristin feels so down because she is like a social pariah at school and even betrayed by her close friends, she decides that she has to seriously find another circle that will understand her condition. Kristin realizes that she can relate her condition to people with similar condition. Because they have experienced the similar condition, they will understand and will not mock her consciously or unconsciously. Actually Kristin has once contacted the support group in the first stage of the diagnosis, but she does not continue it due to many things that happen to her. Now, she determines to meet face to face, one of the intersex members, Gretchen Lawrence. Their meeting is fruitful for Kristin. Gretchen is a friendly, warm young female still studying in a university who writes an enlightening article on intersex. She is an optimistic and very confident person as can be seen in her words to Kristin: "I'm just telling you to be careful of letting other people define who—and what—you are" (Gregorio, 2015, p. 153). She opens Kristin's mind that because their intersex condition is inevitable, the most important thing is that they have to be able to define themselves. Each intersex person must feel confident about her own existence, because only she alone has the right to her own life, not other people.

Kristin's Self-Acceptance as Intersex Person

In line with the passage of time, Kristine starts to sort out her feelings. She still feels hurt and humiliated however she is trying to open up. Kristin starts the activity that she likes so much, that is running. However, if previously she runs in the morning with her beloved lover, Sam, now she runs alone in the late afternoon with different route. Unexpectedly, it is the route that Darren usually takes. Thus they often meet (Gregorio, 2015). The frequency of their meeting increases when Kristin volunteers in a clinic where Darren also does the same for school project called "community service project". Darren's attitude that does not change makes Kristin feel comfortable especially since they have known each other for a long time. Sometimes Darren rides home in Kristin's car if he does not drive his own car because their houses are in the same direction. On one of these occasions, Darren tells Kristin what he experienced when his father suddenly left his mother for another man. The sudden fact of his father turning out to be gay makes Darren shocked so that he needs very expensive and long therapy in which he learns "To not be too hard on myself. Or my dad" (Gregorio, 2015, p. 190). Implicitly Darren tells Kristin not to blame herself or others. Kristin has to be able to learn to accept her intersex condition. Darren's lifestyle makes Kristin feel not alone with her burden. After that Darren also asks Kristin to stop by since his mother is still awake that night busily experimenting with various éclairs fillings for the client's tomorrow's party. Although his mother has known Kristin's condition, she does not change her friendly and motherly attitude (Gregorio, 2015). This makes Kristin feel accepted as what she is. Kristin offers herself to help and she enjoys her being in the familiar and warm situation. On the other side, both of them begin to feel the growing interest between them but both silently try to suppress it since Darren has a girl friend (Gregorio, 2015).

Kristin's volunteering in the clinic also unconsciously helps her to accept herself. The clinic is poor with minimal facilities. The waiting room is bare and Kristin observes that the small children waiting for the treatment of their mother look bored. She has the initiatives to bring some children's books she has from the time she worked as a baby sitter. Her idea is gladly supported by her father. Kristin also buys some used children's books and toys. This is Kristin's unconscious desire to be useful for others (Gregorio, 20157). After asking Dr. Johnson's permission, she decorates the clinic's waiting room and even plays with the children during the volunteer session when she is free (Gregorio, 2015). Kristin starts socializing again, eventhough with the children. Their happiness makes Kristin feel that she is still useful.

There is an unpleasant event that ends in a sweet reunion of the used-to-be three close friends. During Christmas holiday, alone and lonely, Kristin plans to go to a rather quiet bar to just mingle with people. Unexpectedly she sees Vee and Faith happily queueing in the entrance. A mixture of being left out and betrayed hits Kristin's feeling. However, Kristin now is different from Kristin at the first stage of diagnosis. She does not want to hide or back up again. Kristin who still thinks that it is Vee who has spread the news wants Vee to acknowledge it and then apologizes. However, it turns out that it is Faith who unconsciously spread the news about her condition: "Krissy," she said so quietly I could barely hear. "When I found out, I called Sam to see how he was doing." Her voice trembled. "I didn't realize that he didn't know" (Gregorio, 2015, p. 182). Faith, in a rush, without deep thought, has called Sam to show her sympathy and support, but her action becomes a disaster for Kristin. After they settle all the prejudices, accusations, anger, guilts, and become friends again, Vee supported by Faith suddenly say something surprising:

"I'm talking about you *getting over* yourself. It's been weeks since you've been at school ... Krissy, it's time to *move on*."

....

Anyway, I'm really worried about you. You've become, like, a hermit or something" (Gregorio, 2015, p. 183-184).

Both of them remind and warn Kristin at the same time that she has to continue her regular activities especially attending school. She should not hide herself anymore. She has to be able to step forward, to face the future. What Kristin does not realize is that both Vee and Faith silently are concerned with Kristin's present situation. When Kristin says that she cannot endure the various forms of bullying, Vee and Faith promise that they will help Kristin face those bullying actions side by side (Gregorio, 2015). At this stage Kristin is one step ahead "I was too tired to hate. And too guilty ... all good changes did" (Gregorio, 201, p. 184-185). She begins to realize that she also has a share in the breaking up of their friendship, that she has hid herself, and that everything will be better bit by bit.

Although both Vee and Faith invite her to join them and others to go to the bar, Kristin refuses because she needs time to compose herself after all those happy but tiring revelation. Not wanting to go home either, Kristin then decides to meet Jessica, Darren and his girl friend, and others, who invite her to join them earlier. They go to a bar and Kristin enjoys their togetherness because they chat about many things without mentioning Kristin's condition. Kristin begins to accept the fact that things are not as awful as she always thinks. Again, Darren rides home in Kristin's car and Kristin admits to Darren that she has hid herself so far and (Gregorio, 2015). Kristin is one step forward in her life, she is able to acknowledge her mistakes and she can tell another person about that (Gregorio, 2015). This is the next step toward self acceptance. What boosting Kristin to accept her condition is the so many real bitter intersex conditions in the links given by the support system. Kristin's intersex condition is not as traumatic as other variants of intersex condition. Reading all testimonies about more terrible AIS conditions, Kristin feels "humbled". She learns that not only that she is not alone, but also that she can create her own future life. "Talking, listening, time" will take care all the wounds and trauma (Gregorio, 2015, p. 196).

A brutal occurrence leads Kristin to build self confidence as herself. At first Kristin goes to a club with Gretchen and her girl friend. They meet Darren there. However Kristin also meets Josh whom she knew only briefly in a club when she was at that time wanted to proof that she was still an interesting female. This time Josh realizes from the spreading news that Kristin is the intersex. His reaction is so brutal: "Where's your dick? Did you, like, tie it back or something?" (Gregorio, 2015, p. 200). Josh not only viciously directed humiliating accusations to Kristin but he also harshly drags Kristin who is shocked and half paralyzed with the brutal humiliation out from the club. Darren who wants to separate them gets into a fight with Josh. Seeing that Darren is losing the fight to the big and stocky Josh, Kristin helps by hitting Josh with a pray can but with no effect. When Josh turns to attack her, Kristin is ready and she practices her hurdling strategy: "And I brought my leg back in my best

hurdler leap, and kicked him in the balls” (Gregorio, 2015, p. 203). Kristin can counter-attack Josh’s blind assault effectively because she has gained her self confidence. Now Kristin can defend herself. When she decides to go home, Darren accompanies her because it will be a rather long journey at night. On the way when Kristin says that she feels uncomfortable to Darren’s girl friend because Darren gets hurt, Darren’s answer is surprising. It turns out that Darren has broken up with his girlfriend because secretly he loves Kristin for a long time (Gregorio, 2015). It is a sweet surprise for Kristin since lately she also has a feeling for Darren but she suppress this feeling because Darren is having a girl friend. Kristin feels inferior because of her condition, however Darren wisely says: “If there’s one thing I learned from my dad leaving my mom, it’s that love isn’t a choice. You fall for the person, not their chromosomes” (Gregorio, 2015, p. 207). For Darren love is an unexplainable feeling. It just happens and it might be to unexpected person regardless that person’s sex or chromosome. Someone just falls in love with someone else. No explanation or reasoning because it is a personal feeling.

With the support of Darren’s unconditional love, the return of the friendship with Vee and Faith, the support from Ms. Diaz. Coach Auerbach, and some other students, the everlasting deep love of her father and aunt Carla, as well as Gretchen with her AIS support system, finally Kristin makes a decision:

“Dad,” I said, “remind me to make an appointment with Dr. Cheng on Monday.”

I felt him stiffen, but I went on. “She needs to fill out some paperwork so Coach Auerbach will let me start practice again once I go back to school.” (Gregorio, 2015, p. 211).

Kristin is strong enough emotionally and psychologically to return to school and faces all the awaiting bullying actions. Kristin is also ready to start practising again as a professional hurdler, but before that she needs a medical letter from Dr.Cheng. Kristin finally can accept her intersex condition and is ready to start a new life as an intersex person.

CONCLUSION

The intersex condition endured by Kristin, the young female main character in the debut novel of I.W. Gregorio entitled *None of the Above* gives many valuable lessons for the readers. The readers’ knowledge on intersex is widened and enriched with the hope of reducing the blind bullying actions to non heterosexual people. Nobody wants to be deviant and that person must have been through deep personal trauma when he/she knows his/her condition. What that person needs is support to accept the condition and to organize his/her life again. He/She does not need another additional burden in the form of accusation, bullying, or ostracization. Through the fictional character named Kristin, I.W. Gregorio, a surgeon who also works for the AIS support system, illustrates emphatically what Kristin has to face after being diagnosed as an intersex. Unimaginable shock and trauma, a series of medical treatments, unconscious betrayal followed by unending bullyings, and almost giving up school and social life parade in a jumble in Kristin’s life. Father’s unending love and support, option of temporary online class from school, real help from support system, and new unconditional love, are Kristin’s lifebuoy when she almost surrender in distress.

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