

# The Medicalization of **Sex**

AN INTERNATIONAL, INTERDISCIPLINARY MULTIMEDIA CONFERENCE

cosponsored by Simon Fraser University and the New View Campaign  
Vancouver, BC  
April 28 - 30, 2011

## FINAL CONFERENCE REPORT

### Introduction



"The Medicalization of Sex" conference was held in Vancouver, BC at Simon Fraser University's (SFU) downtown campus, April 28 - 30, 2011. Approximately two hundred people from all over Canada, the US, South America, Europe, Australia, New Zealand, and Israel gathered to examine how science, medicine, and the pharmaceutical industry are shaping the public and professional understanding and experience of sex. Included were multi-generational, junior and senior scholars from all branches of the humanities and social sciences, physicians, nurses, counselors, therapists, women's health advocates, sex educators, journalists, and creative artists.

The conference was inspired almost one year prior when Thea Cacchioni, professor of Gender, Sexuality, and Women's Studies at SFU testified against the FDA approval of the drug flibanserin, an ineffective and harmful daily anti-depressant drug proposed to treat women's "low sexual desire." It was there she first met members of the New View Campaign, a feminist scholar-activist group which has challenged the burgeoning sexual pharmaceutical industry since 2000. The FDA experience reminded Cacchioni of the potential power of international, cross-disciplinary alliance and coalition.

Cacchioni decided to organize an interdisciplinary, international, multimedia conference featuring the work of New View members and

others in critical dialogue with the medicalization of sex. The response to the call for papers was very strong but fundraising for the conference proved to be a challenge. The Social Sciences and Humanities Research Council of Canada no longer funds health related research, and critical health studies are not likely to be supported by the scientific funding bodies. Medicalization critics from the US seem to face a similar dilemma. But thanks to the generous support of the Ruth Wynn Woodward Endowment, various faculties at Simon Fraser University, other small donations, high conference enrollment, and the New View Campaign's promotion, the show did indeed go on!

### The Conference

Thursday evening kicked off with a tasty welcome reception at the new Goldcorp Cinema. Catherine Murray, Chair of Gender, Sexuality, and Women's Studies, then introduced the critically acclaimed documentary *Orgasm Inc: The Strange Science of Female Pleasure* with a special talk and Q&A by the director, Liz Canner.



Film Director Liz Canner and SFU Women's Studies Chair Catherine Murray at showing of "Orgasm, Inc."

The screening attracted about 50 members of the public in addition to conference attendees, and sparked lively questions such as:

- Will comprehensive sex education affect medicalization?
- Drug ads use romantic imagery (flowers, wine, dancing) - should we use the idea of romance to challenge medicalization?
- Was Liz sued by Big Pharma about the film?
- Is FSD less of a problem in Europe?
- We need to know how to examine and criticize science and not be blinded by people in lab coats;

- Is female genital cosmetic surgery linked to the repolarization of gender, along with hyper-feminine girlygirliness?
- Do the pharma people believe what they say about women's sexuality? In the film they seem to acknowledge that they are being hypocritical.
- Is ED a real disease while FSD is a created disease?
- As an RN, I was not educated about human sexuality and don't feel prepared to help people with problems, so it's no wonder drugs are taking over.
- The science in these trials seems so pathetic! How can you count "satisfying sexual events" - what does that even mean??

### **Friday, April 29: Profits & Pleasures**

Friday morning we gathered in the historic Segal Business school in downtown Vancouver. The conference began with a generous buffet breakfast and a generous welcome by the President of Simon Fraser University, Andrew Petter, who proudly pointed out that the province of British Columbia is in the vanguard of social justice and sexual rights. BC was the first province in Canada to recognize same-sex marriage.



Segal Business School and the room for invited and keynote lectures at the conference.



Outside the lecture room, we set up the New View project, "Talking back to Female Cosmetic Genital Surgeons."

### **I. Invited Lecture. The Not So Curious Case of The Designer Vagina - Virginia Braun, University of Auckland**

New Zealand Professor of Psychology Virginia Braun unpacked expert and lay perceptions of women's 'pesky' genitals to make sense of practices from douching to cosmetic genital surgery. She showed how women's genitalia have been seen as a "problem" for men, for women, and for society at least since Freud and the late 19<sup>th</sup> century. As seen in qualitative research, traditional negative societal judgments on

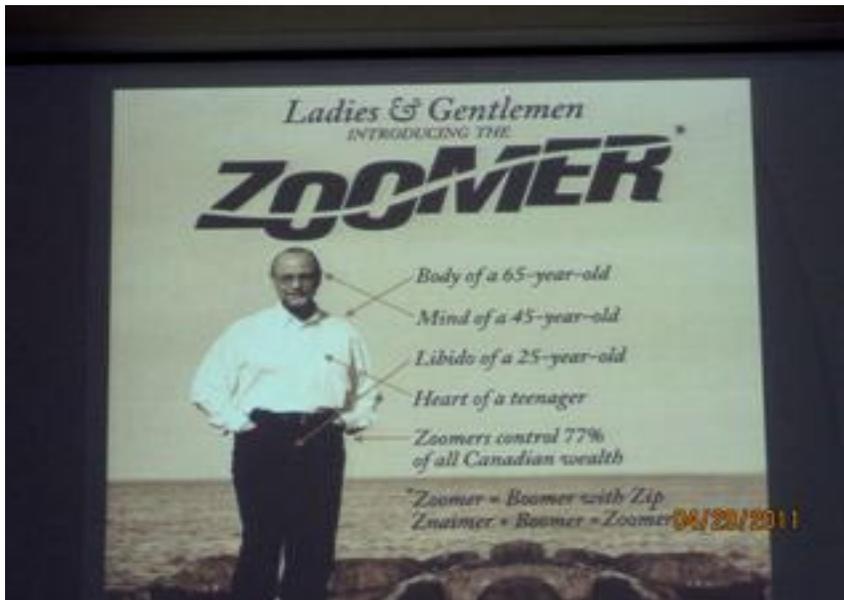
women's genital taste, smell, and appearance are taken up in the dominant cultural vernacular. Whereas women responded to these negative associations during the women's health movement of the 1970s with consciousness raising and collective learning about their bodies, today product and procedure based solutions have made a comeback. The most ubiquitous practice is pubic hair removal but more costly, risky, and permanent surgeries are on the rise including labiaplasty, vaginal tightening, labia augmentations, liposuction, and clitoral hood reductions.



Ginny Braun examined how women's genitals always need to be "fixed" - if not in one way, then in another.

## II. Invited Lecture. Sexualizing the Third Age: Medicalization and the Reconstruction of Sexual Life Courses - Barbara Marshall, Trent University

Barbara Marshall, Professor of Sociology, examined the medicalization of late life sexuality, in particular 'the third age,' a new stage of life for the 45+ age group portrayed by marketers as sexy and sexual. Reversing the trend of sexually inactive seniors, a "new sexual revolution" is widely trumpeted. As boomers age into 'zoomers,' biotechnical possibilities and rejuvenation sciences hold out options such as Viagra to extend phallogentric, heteronormative sex. "Virility surveillance" is offered as the key to overall health, including even those who might happily lay erotic life aside. As former ideas of old age are rewritten, Marshall cautioned us that new celebratory readings can become new disciplinary regimes.

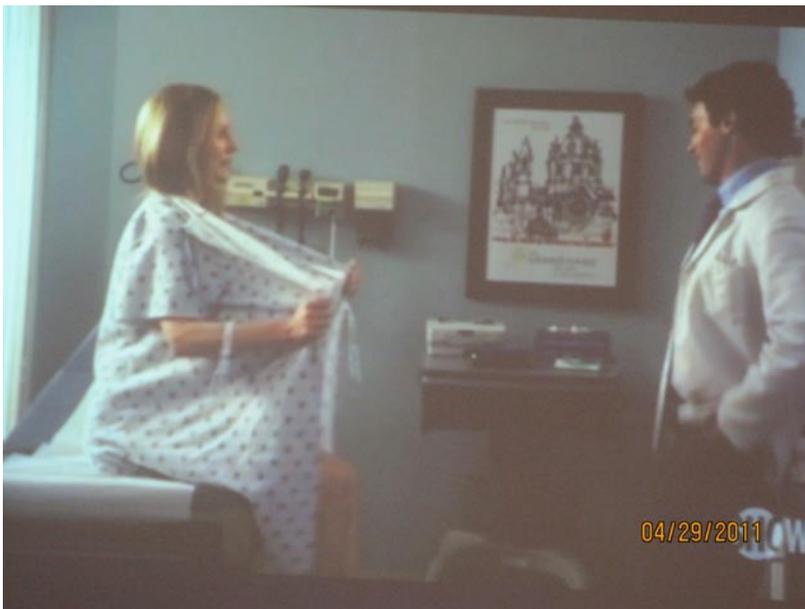


Moses Znaimer, Canadian entrepreneur and pied-piper publisher of "Zoomer" magazine since 2010, repeatedly emphasizes that sexual problems are common and treatable, the central medicalization message. Thus sex

becomes a health imperative.

### III. Invited Lecture. The (Re)Sexualization of the Medical - Judy Segal, the University of British Columbia

As a Professor of Rhetoric Studies, Segal employed a unique perspective when examining 'the sexualization of the medical.' Reversing the conference themes, she analyzed cancer narratives in popular television shows such as *The Big C*, *Sex and the City*, and *Desperate Housewives*. In these programs, sex is used as a device to signal a return to health, a comic ending to a depressing illness experience, a successful 'fighting back' towards cancer recovery. The use of this rhetorical device works because sex has been 'healthicized' in recent popular and medical discourse.



Laura Linney, with stage 4 melanoma in "The Big C" gets sexual with her doctor.

**IV. Media Panel - Exposing the Medicalization of Sex - Liz Canner (director of "Orgasm Inc."), Alan Cassels (drug policy expert, University of Victoria), and Ray Moynihan (investigative journalist, via Skype from Australia)**

Mass media has been a key site through which the public and academic critics have learned about new developments in the



medicalization of sex. Panel members discussed their use of media to 'expose' the medicalization of sex.

Investigative journalist Ray Moynihan described his realization that "female sexual dysfunction" was the perfect example of disease-mongering, a trend he had been watching for years. He reviewed the dangerous conflicts of interest and blurred boundaries between science and industry and the approach he has taken to report on Big Pharma and disease mongering. He has published in newspapers, medical journals, and is co-author of the 2005 *Selling Sickness* (with Alan Cassels) and the 2011 *Sex, Lies, and Pharmaceuticals* (with Barbara Mintzes) that have both raised the profile of the New View Campaign.

Award winning filmmaker Liz Canner described her journey to making the documentary *Orgasm Inc: The Strange Science of Female Pleasure*, a film which takes a behind the scenes look at the sexual pharmaceutical industry which also features the New View Campaign. She encouraged us to make our voices heard in the media and advised us on how to ensure that the complexity of the issues we feel strongly about is conveyed.

Alan Cassels, a drug policy researcher from the University of Victoria, not content to stick to academic channels, frequently writes critical

pieces on medicalization and health care policy for newspapers, magazines, and books including *Selling Sickness* (with Moynihan). He shared a compelling story of the medicalization of bone density to illustrate how pervasive this trend really is.

### **V. Keynote Lecture. The New View Campaign: A Case Study of Scholarship and Resistance to 'FSD' Disease-Mongering - Leonore Tiefer, NYU Medical School**

New View Campaign convener Leonore Tiefer, scholar, clinician, and activist, gave the last talk of the day. She detailed the history of the so-called 'Female Sexual Dysfunction' and then mapped her path of resistance via The New View Campaign, a feminist scholar-activist group she convened in 2000. Tiefer used her experience as a clinical psychologist, sex therapist, and campaign leader to illustrate how to critique, resist, and transform medical models of sexual dysfunction. Her successful intergenerational campaign uses tactics both old (manifestos, scholarly publications, op eds, protests, testimony, lobbying, conferences, and counter-conferences,) and new (art shows, websites, FaceBook, Twitter, online petitions, listservs, and interactive blogs). She concluded by championing sexual humanism, values-guided research, education, and treatment, and recognition of sexual diversity.



New View founder Tiefer on CBS Evening News in 2010 trying to alert the public to the dangers of a new "fsd" drug, flibanserin

### **VI. The Antidote Art Show and Reception**

To round off Day 1, The Antidote Art Show and Reception was held at Gallery Gachet, a unique artist-run gallery in Vancouver. The event showcased the creative work of artists and activists using film, photography, installation, and print to resist the normalizing side-effects of the medicalization of sex. Conference participant Ela Przyblo exhibited a photographic narrative piece exploring the historical

construction of hysteria. As a response to the growing trend of labiaplasty, local artist Rena Del Pieve Gobbi portrayed 9 'cunt prints' of her own vulva created with organic material and india ink. Wrenna Robertson, Vancouver exotic dancer, academic, and activist, displayed large size images from *I'll Show You Mine*, her photography book celebrating vulva diversity.



Pill art installations such as 'Synthetic Happiness' by Irene Loughlin and 'Sweet Sex Pills' (left) by Vancouver artist Shelly Leroux poked fun at the 'pill for every ill' approach to health. Equally important, conference participants and members of the community got a chance to mingle, network, and strategize.

## Day Two: Deviant Bodies

The second day of the conference turned to the broader theme of *Deviant Bodies*, a reference to keynote Jennifer Terry's classic 1995 volume (co-edited with Jacqueline Urla) which connects the many guises of sexual medicalization through history.

### I. Invited Lecture. Nymphomania: A History- Carol Groneman, CUNY

The morning began with Professor Carol Groneman's paper on the history of 'nymphomania.' Groneman's work accentuated the historical construction of sexual norms as she traced changing definitions of female sexual 'excess' in legal and medical documents. As with other forms of sexual medicalization, nymphomania was first labeled in the nineteenth century when doctors and sexologists set out to prove that women were biologically the less passionate sex and was then reinterpreted using psychological frameworks in the early twentieth century. In both cases, whereas male promiscuity was rarely pathologized, women with sexual impulses were subjected to medical

and psychiatric diagnosis and a range of harsh treatments. Both patients and professionals saw a strong sexual appetite in women as a sign of madness. The sexual double standard and the use of the term 'nympho' lingers in popular vernacular (the "happy nympho" this time!) but a more gender neutral discourse of 'sex addiction' still pathologizes sexual excess in contemporary times.

## **II. Invited Lecture. Intersex, Fetal Dex, and the Disordered Medical World - Elizabeth Reis, University of Oregon**

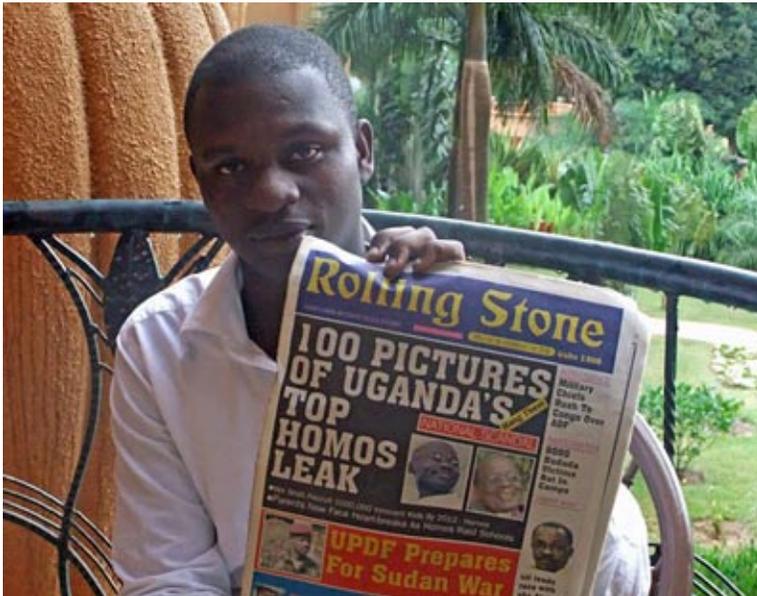
Women's Studies Professor Elizabeth Reis examined the medical profession's dedication to maintaining the often shaky sex-gender binary via the surgical alteration of intersex bodies. Despite known psychological and physiological side effects, physicians use arbitrary measures of sexual identity to conduct these surgeries in infancy. Recently, intersexuality has been re-medicalized via the use of the term "Disorders of Sex Development" (DSD). One worrisome trend is the off-label prescription of fetal Dexamethasone, a steroid administered to pregnant women seen as at risk for having children with a virilizing adrenal gland disorder. Theoretically, the drug would prevent genital virilization (though not the rest of the endocrine syndrome), but most of the women taking this drug will not have an affected child, there might well be other fetal effects, and the drug itself has never been tested or approved for this use. This example of how genital dimorphism became an urgent medical issue raises a variety of ethical and political concerns.

## **III. Invited Lecture. Confessions of the Flesh: Aiming for Objective Measures of Desire - Rebecca Jordan Young, Barnard**

In her talk, Women's Studies Professor Jordan Young addressed measurement, research design, and the relationship between politics and these sometimes dry topics by posing the fascinating question: how do we measure sexual desire? She began by briefly listing the normative "sexual logics" of contemporary culture and ended by showing that it is these assumptions that guide research, rather than a "let the facts speak for themselves" attitude, as is widely thought. She reviewed the various "objective" measures of sexual desire and showed how different measures don't correlate, forcing researchers to fall back on pre-existing categories and definitions. Whether it is penile and vaginal plethysmography, pupil measures (blink response time, glance time), or fMRI, the research assumptions speak louder than the data.

#### **IV. Keynote Lecture. Transnational Sexual Politics: Exporting Ex-Gay Therapies to the Middle East, Africa, and Latin America - Jennifer Terry, UC Irvine**

Professor Jennifer Terry has been studying the medicalization of sex in the American context for the past two decades. In Vancouver she argued for more transnational feminist work in this field. In a world shaped by colonialism and now globalization, the medicalization of sex is one of many cultural exports taking hold across national borders. Terry traced the rise of US inspired 'ex-gay' movements in Uganda. Leaders from the American Christian right wing have drummed up fear of 'homosexual imperialism' in this former British colony and several organizations are working to "reform" homosexuals using a range of strategies. These movements helped inspire recent anti-gay legislation in Uganda and the outing of known gay men and lesbian women in a national newspaper.



One newspaper article incited the public to 'hang them' and led to the 2011 violent killing of David Kato, a Ugandan LGBT rights activist (at left before his death, holding the newspaper).

#### **DAYS ONE and TWO: Breakout sessions**

Over the course of the weekend, topics covered in three breakout sessions spanning five rooms (that's a total of 15 sessions with 3 or 4 papers in each!!!) tackled a wide range of sex-medicalization topics from new angles: the histories of eugenics and of early sexology; the pathologization of queer sexualities and masturbation; the psychiatric construction of paraphilias and gender identity disorders; recent marketing and promotion of an HPV vaccine; insights into the new polyamory; conflicts within the transgender communities; international differences in notions of "the normal" and the role of the "expert"; the medicalization of reproduction and birth control; HIV and medical

surveillance; the rise of breast, vulva, and foreskin surgeries; and the shift from sex as deviant to sex as 'healthy.' The wonderful historical studies testified to the growth of work in that field and the many interdisciplinary papers showed the results of crossover training and interests. The breakout sessions were well-attended, and there was lots of time for Q&A. The complete program can be seen at [this website](#).



Just one of the many breakout session classrooms with super a-v!!

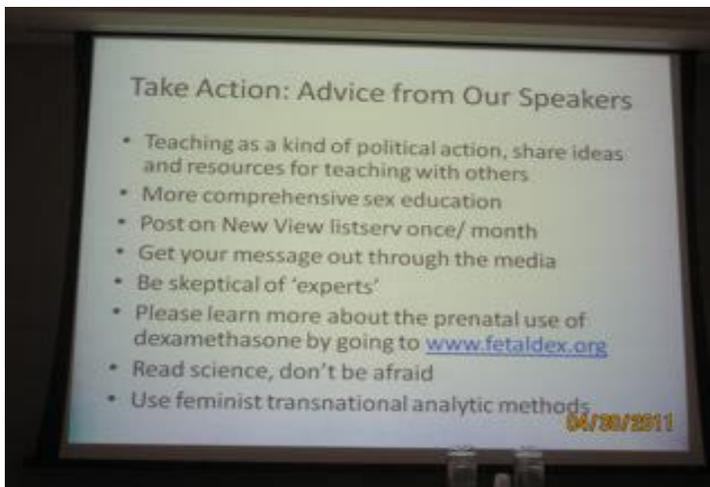
### **CONCLUSION: Theorizing the Medicalization of Sex**

Conference participants seemed to agree that 'sex is more like dancing than digestion,' to use Leonore Tiefer's metaphor of choice. Presenters therefore questioned the use of precious resources to measure sexuality through population studies, surveys, questionnaires, scales, rulers, clinical diagnosis, plethysmographs, and fMRI. All this, when quality sex education continues difficult to access and all evidence is that the definition of sex needs deepening rather than shrinking.

The research presented demonstrated in many ways that the rationalization and quantification of sex is by no means an objective process but one that reinforces a host of normative values, hierarchies, and power relations. Many papers focused on the physiological, psychological, and social risks these developments pose as they limit sexual and bodily diversity, control populations, and pose ineffective solutions to complex socio-political problems.

Several of these issues have been tackled for decades by medicalization, feminist, and social constructionist critics. However, as highlighted in the keynote addresses, two inter-related phenomena have more recently extended the purview of sexual medicalization: 1) the rise and influence of the (sexual) pharmaceutical industry, an industry with far more resources than publicly funded sex education and research, and 2) the global, transnational arena in which the medicalization of sex, originally a western phenomenon, increasingly broadens its reach.

On a hopeful note, resistance to the medicalization of sex was a major theme underlying the conference agenda and outcomes. Each of the keynoters and invited guests was asked to give a 'take home' action point from their scholarship.



This slide lists the take-home action points.

The conference was a success on many levels. The networking among close to 200 people from so many different national, disciplinary, and professional backgrounds will reverberate in many different ways. Everyone was invited to join the New View Listserv, and many already have!

The medicalization of sex is entering a fascinating period wherein technology, culture, medicine, global capitalism, and rapid social change are converging with great socio-political consequences. But clearly this trend is not going unchecked. Scholars and activists are responding to this phenomenon in a variety of interesting ways. A resounding sentiment over the course of the weekend was 'This work can be lonely.' Coalition and alliance involving multiple perspectives is paramount in order to reach our goals: critique, challenge, transform.

A final thanks to our financial sponsors who put their money with their values, and to our volunteers -- many hands made light the load!