WHEREAS, approximately one in 2,000 infants is born having “intersex traits”, which describes a reproductive anatomy that is unable to fall under the definitions of male or female, and can include androgen insensitivity syndrome, some forms of congenital adrenal hyperplasia, Klinefelter syndrome, Turner syndrome, and others; and

WHEREAS, traditionally, in the event that an infant presented with ambiguous sexual parts, they have been surgically treated and assigned a sex. The situation is treated like that of a medical emergency; and

WHEREAS, the surgeries may have lasting, irreversible effects, including scarring, incontinence, sterility, impotence, and the subsequent need for lifelong treatment, including hormone replacement therapy; and

WHEREAS, normalizing surgery continues to be the standard of care for these infants; and

WHEREAS, optimal care for the intersex infant and family involves effective communication and education from a team of experienced health professionals; and

WHEREAS, the nurse’s primary care role reflects the individualized needs of the patient and their family, with whom the nurse should engage in open communication regarding available resources, capacity for self-care, and treatment options; and

WHEREAS, the nurse caring for the intersex infant should be able to offer information on sources of support available to the parents and family of the individual, and provide adequate education in regards to the individual’s special needs; therefore be it

RESOLVED, that the National Student Nurses’ Association (NSNA) encourage its members to ensure parents and families of intersex infants receive honest and complete education from their healthcare providers about their child’s condition and all suitable approaches to care; and be it further

RESOLVED, that the NSNA publish an article in Imprint to educate its constituents about intersex infants and all available approaches to care, if feasible; and be it further

RESOLVED, that the NSNA encourage nurse educators to include discussion of care of intersex infants in their curricula; and be it further
RESOLVED, that the NSNA encourage its constituents to be aware of support organizations in their area for intersex infants and their families and that they be prepared to refer families to such organizations if they encounter the need to do so in their clinical practice; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Academy of Neonatal Nursing, the American Academy of Pediatrics, the American Association of Colleges of Nursing, the American Nurses Association, the Association of Women's Health, Obstetric and Neonatal Nurses, the National League for Nursing, the National Organization for Associate Degree Nursing, and all others deemed appropriate by the NSNA Board of Directors.