

CHAPTER I

Circles and Squares

Jude can't sleep. It's been an overwhelming day. Eyes fixated on the red dot on the black screen, she tries to reorganize her memory of the afternoon. She'd been curious about the meeting for a while. It's a meeting that she'd signed up for and withdrawn from. But this time – this time – she's gone for it!

She goes over the afternoon's medical talk again and feels her headache coming back. The young doctor seemed kind, genuine, enthusiastic, but unreachable. Jude repeated her question three times, and the answers kept missing the mark. According to Dr. Vergoth's diagram of circles and squares, Jude is a son to her parents. But she is a daughter to her parents. Dr. Vergoth smiled in agreement, and then proceeded to talk about the diagram of circles and squares, just as before!

As sleep continues to evade Jude, she frets again – has she offended that poor doctor? Is she branded an argumentative newbie? At least two persons in the room had put their hand up to speak to the doctor but never got the chance. So-o-o embarrassing. There's still tomorrow to get through. . .

I will say nothing tomorrow.

In fact I don't have to turn up at all.

Am I giving up too soon?

I can take a walk in the morning and rejoin after lunch?

Jude is disappointed with herself. Her “self-soothing” techniques are trumped by the intensity of her “ruminations” – a peculiar psychology word from Lennox pops into mind. Starched sheets and fluffy pillows in hotel rooms are her favorites, yet sleep does not come.

She makes a plan for tomorrow: *I'll sit next to Dillon.* She resets the alarm to give herself extra time to arrive early and choose her seat: *I must park myself at the back of the room. That's the plan.* With a bit of luck, she'll catch Dillon walking in and get him to sit next to her.

Back at the beginning of the day, not long after she had gotten her badge from the organizers, Dillon was among the first to introduce himself to Jude. “Hi, I’m Dillon,” he shrugged his shoulders with a half-smile, “I have hypospadias. This is my third meeting.” Jude’s frozen expression revealed that she didn’t know anything about hypospadias. Dillon continued, “All the doctors told my parents to get me fixed before my first birthday. My mom didn’t like their bedside manners. So she pushed back.”

Jude had struggled throughout the day to piece together all the things people at the meeting were saying about their surgeries and about being fixed. Too soon, too late, too many. . . She wanted to figure out whether Dillon was angry or happy with his doctors. She wanted to react correctly.

It would seem that Dillon’s mother didn’t manage to “push back” for very long. Apparently, a growing Dillon said one day, “How come you sit down to pee and Dad doesn’t? Does Grandma sit down too? How does Grandpa pee? I’m a boy, but I sit down like you and not Dad.” These might have been half-distracted musings of a little boy being his usual quizzical self. But they matched the language of Dillon’s doctors too well. Dillon’s mom berated herself for delaying her son’s surgery. Five months later, Dillon had his first hypospadias surgery.

As she listened attentively to Dillon, Jude felt sure that the people behind her were also talking about surgery. She has only ever had one surgery in her life – a planned Caesarean section five years ago to deliver Sam. She did not want to talk about surgery. But there was no getting away.

Dillon picked up after a short pause:

I remember all my surgeries, I think seven in total? And I might go back one last time, just a small procedure, not sure if I should. I try not to think about all the anesthesia I’ve had. But my doctor’s nice, treats me like a grown-up, doesn’t rush me through my appointment. He’s ok, Dr Da Silva, tells me to date, have relationships, don’t get too hung up about anatomy he says, everyone’s different.

Dillon has on occasions lied to Dr. Da Silva about dating, that “sex” (with his dates) was working out just fine, even though he had yet to experience it.

Dillon regrets how he dealt with his first date. He was in his early twenties then. Having delayed sex with Shauna for some time, when it finally happened, he had not told her that his body might look and work differently. They were already undressed when he suddenly told her that he had never “had sex” before. This prompted many reassuring and loving expressions from Shauna. Their gentle exchanges somehow morphed into mutual apologies, and big hugs, when they abandoned the game. The young people agreed to have a conversation later. But neither of them got in touch.

Almost three years later, having read a few stories on the Internet and spoken to a few men with hypospadias, Dillon approached his next date differently. He met Clare at a bike hire shop in Vietnam. They got on so well that they decided to backpack together for a few days. They were blown away – literally, by a monsoon, on their last day.

Late into that evening, all was calm again. The sea had turned itself back to a lake. The sky withdrew its shimmering distractions and gave nothing away. Who knows what Clare might have done next. But what followed was not likely to have been on her radar. Under the obligatory straw parasol, with a fifth bottle of Saigon in hand, Dillon decided to spill out his entire medical history.

He spoke at a relaxed pace, with some degree of irreverence for chronology. Clare listened with interest. She asked questions. They were skillfully phrased. She wanted to know how Dillon felt about yet another operation, and whether the hospital had arranged some counseling for him.

To return Dillon's trust, Clare confided in him something she had told no one other than ex-girlfriend Simone. On the day before Clare's sixth birthday, her father left home unannounced. Clare had planned to make Singapore her last stop on this backpacking trip. It's where her father now lives, with his new family. It was to be their first meeting in eight years. But Clare had changed her mind. She was to travel home the next day – Simone was coming out of rehab and her family had asked Clare for help. Clare was happy to go home, really. The reunion thing didn't feel like such a good idea anymore.

Dillon and Clare exchanged sticky embraces without saying anything about keeping in touch. They left the hostel at dawn, separately. Dillon didn't need any promises. Feeling a huge weight lifted, he did a big star jump before crawling into a tuk tuk. He felt ridiculously happy. A few weeks later, he received a call from Clare.

They began a loving relationship. They traveled as much as they could afford to. They introduced their friendship groups to each other. They became passionately involved in climate activism. He showed her how to cook and take better photos. Sex was not such a big part of the relationship. It happened when it happened. And when it happened, it was pleasurable for both.

Clare encouraged Dillon to go back and finish his education. It struck her that Dillon would make a great teacher. Dillon however didn't have a good word to say about school. There were the hospital appointments and admissions of his youth that could not be timed to his vacations – despite his mom's best effort. At one point, he had missed so much school that he had to repeat a whole year. That brought on peer problems, which the school handled really

badly – again, despite his mom’s best effort. Dillon was severely bullied by younger kids for a time and had to change school in the end.

With Clare’s help and support, Dillon was to pass his Math and English exams and became eligible for college. A year ago however, Clare broke up with Dillon. He had gone back on antidepressants, but this made no difference to the outcome of the relationship. Dillon would explain to friends and family that Clare could not cope with his moodiness. Privately, he thought their sex life was to blame. His mind went automatically to his hypospadias and all the surgeries, forgetting that Clare had her own sexuality journey to charter, not to mention attachment issues – legacy from times past.

Jude wonders that Dillon does not see a therapist. She and Yuri had couple therapy. Okay, it didn’t save their marriage, but it did help them with co-parenting. Childcare between them just works. Yuri is happily taking care of Sam this weekend and the whole of the coming week.

Despite a bad night, Jude feels better today – perhaps because there are fewer people at the meeting. Everyone is walking around with dark circles round the eyes looking absolutely pooped. All those empty seats – *did they all have a bad night too?*

Behind Jude sits a young family. Father and child move away at break. Karla, the mother, leans forward to speak to Jude. Jude is taken aback: *Is Karla really asking if I’m “an XY”?* Jude feels under pressure to talk about herself. But, again, there is no need. Karla is quite happy to chat about her little girl. Lulu goes to a famous pediatric clinic – a “*one-stop DSD clinic*” that seems to be all the rage.

Karla is worried that Lulu’s surgery is not yet scheduled. The resurfacing of surgery doesn’t surprise Jude. She is getting used to recantations of vagina, scarring, glans, clitoris, dilators, scrotal resection, curvature and fistula. She discerns no sensations on hearing words like intersex and differences in sex development. They don’t apply to her. *Or do they?* She attends to Karla’s chatter with interest, glad for the support that Karla is getting from an online group for “*CAH [congenital adrenal hyperplasia] parents.*” But Karla’s experience sounds kind of complicated.

Shortly after birth, Lulu had been offered surgery to make her more “*girl-like, down at the front.*” Karla and her husband had chosen to delay this move. They wanted more time to enjoy Lulu first. Having done their research and taken the time to get to know Lulu, they now feel confident to move forward with her surgery before school.

The surgery will make Lulu’s clitoris smaller. The doctors might do other small stuff, but the net effect is that the little girl will look more normal. Lulu can’t wait to go back to the hospital. She’s been promised

swimming lessons “*when the doctors have made everything ok.*” Lulu would be able to use the same changing rooms and toilets as other girls. There would be no need for her new school to take special steps. In a classroom of 30 youngsters, it’s unreasonable to expect overstretched teachers to protect Lulu from being seen and then teased by other children. After the surgery, well, there would be no need to tell the school anything at all. Lulu would not have to be “special.”

Karla has been outraged by some of the comments on the Internet about surgery. Someone even calls it “female genital mutilation.” Karla can’t get over why people, including clever clogs like college professors, could be so cruel to parents doing the best they can: *Have they ever brought up a girl with a. . .?* Karla does not waver. It is her job to do the best for Lulu; other people are welcome to come to their own conclusions.

Karla confides in no one about Lulu’s condition except three other CAH parents. These parents live in Sweden, Belgium and Australia. She has never met any of them in person, but they have compared detailed notes about steroid treatments, and they have shared their hopes and fears about their daughters’ future. They are like a little peer group within a peer group.

These mutually supportive parents reassure each other that it’s fine if their daughter turns out to be a little tomboy. That would be kind of cute, in a way. Of course it would be better if the child were to play with girls too, not just boys. Sometimes the topic of sexuality would come up. They only want their daughter to be happy. So what if the girl turns out to be gay? But, of course, it would be so much easier if they were to turn out straight.

Almost four years ago, Baby Lulu’s debut caused mayhem in the labor ward of the local maternity hospital. The doctors eventually diagnosed CAH and reassured the parents that they had a little girl – “*absolutely.*” The parents were given excellent written information and upbeat videos on CAH. Between them, the couple have managed Lulu’s steroids beautifully. She is a happy, healthy little girl. As a family, they go to as many support group meetings as possible. They don’t want to miss out on anything. Somewhere along the line, they have even gotten comfortable with Lulu’s somewhat wrinkly and protruding genitals – something once thought unimaginable.

When it comes to surgery, Karla and her husband have gone over the pros and cons and uncertainties for months. It has been exhausting. They have even gone as far as to find before and after photos in medical journals. It’s clear to them that those after photos look really good. They have been warned that in the future Lulu may disagree with their decision. But, you know, parents get the flak no matter what they do. The couple are fully prepared to shoulder any parent-blaming in the years to come.

A good while back, Karla was given the option to see the hospital psychologist. It was hard for her to find the time. Besides, they were quite catered for in terms of support. When the surgery was agreed, however, Lulu's doctor raised the subject again. He said that pediatric psychology was the only gap missing in Lulu's care plan, and that the child psychologist could prepare Lulu for the surgery and Karla for talking to Lulu about it later.

Karla thinks to herself: "*I don't get this. Isn't talking to Lulu something for me to figure out? How many more times do I have to go over the grounds about surgery?*" Nevertheless, the doctor insisted that psychology was part of "*the team approach.*"

That sounded like a tick box exercise to Karla. She was unimpressed. She accepted an appointment to humor the doctor but had no intention of keeping it. Privately, much as she was grateful to the clinic, she was not prepared to travel for two hours to have Lulu's surgery rubber stamped by a psychologist: *I am not depressed; I am perfectly capable of deciding for my child.* Karla has a great relationship with her daughter and has no doubt that she can talk to Lulu when the time comes: *There really isn't anything else to discuss.*

There are moments, however, when Karla is dazed. These moments can come randomly – in the middle of cutting up carrots or waiting for the coffee to brew, in the car at the traffic lights, in the middle of the night. . . Memories, questions, fears, hopes and dreams would pile on:

Did that really happen to us?

What would Lulu be like now, if she didn't have the CAH?

She won't wear her new dress, is she a tomboy?

Does she know she's a girl – absolutely?

Will she get a moustache in her teens?

Why am I still sad? Can she see through me? Will this affect her?

They say "acceptance," am I "acceptance" enough?

Karla's husband is very quiet. He never says his name at support group meetings. Today he looks lethargic and disinterested. It's hard to tell whether he is troubled by the same thoughts as his wife or just bored. He only repeats that he wants what's best for Lulu: "*For her to grow up happy, meet someone who loves her and takes care of her, for her to have kids.*"

With a headful of tumbling locks, Lulu's eyes are permanently fixed on the tray of chocolate brownies at the back of the room. Jude muses over those things that every parent in the room says they want for their kid. She has done them all. She has been in love. She has been married. And she has a kid. Born with a womb but no ovaries, a fertility clinic implanted in Jude

“high quality embryos” created with sperms from Yuri and eggs donated by someone far away. Sounds simple enough. It took almost four years before she conceived Sam. Another story.

Jude was only 15 years old when doctors told her that she had “Swyer syndrome.” From memory, the process is best described as firefighting. At one point, someone in the hospital room pulled out a medical journal, and the team of experts argued with each other in front of the family. The letters SRY were blurted out several times. The family had no idea what that meant. Jude’s mother broke down and sobbed uncontrollably. Her father fell silent.

Jude thinks back on that weird time. She sees herself watching the event unfold in her mind’s eye, a bit like a film clip. She was only interested in the estrogen, because she wanted breasts. What did she care about the biology! Frankly, as a horny teenager, unless the doctors could have gotten her a love life, she couldn’t wait to be shot of them.

The hormone did change her body. But her breasts are still quite small. She once mentioned this to a doctor. He immediately suggested a referral to a breast surgeon. *How doctors like to give presents!* Jude rather enjoys her lanky looks – “*very Charlotte Rampling,*” an ardent admirer once remarked.

At this very moment, in the middle of her first “support group” weekend, something flashes through her mind. Her first operation was not the C-section! It was the keyhole surgery to remove her “gonads.” She can’t remember much and hasn’t thought about it at all.

Since that weird animated debate between overexcited doctors by her bedside, Jude’s father has not set foot in the hospital again. He was to retreat from any discussion about Swyer syndrome. Perhaps it was to make up for his neglect that he decided to teach his daughter to sail. Father and daughter were to sail across the Atlantic in due course. And now, daughter has even more seafaring qualifications and trophies than father.

It is not the diagnosis of Swyer syndrome but the horror of Jude’s fertility journey that still makes her hold her breath. She shudders to recall how she might have survived those blighted years of being controlled like a ragdoll. The actual procedures were disgusting. But it was more than that. She and Yuri had to stay in their hated jobs – for the money. There was neither the time nor energy to sail, even if they could afford to hold on to the boat. Her one passion in life was up in smoke. In fact, everything that meant anything to her at all had to be suspended. She simply acquiesced. Her relationship with Yuri was never the same again. Sam will be five soon. The question of how to tell him about his conception is closing in: *The clinic didn’t say anything about that!*

Doing female things hasn't made Jude feel more female – a thought best kept to herself today. In the natural world, females are circles and men are squares. She has a Y chromosome. In the young doctor's diagram, she is a square. Every time she clicks "female" on a form, she feels just that little bit disingenuous. It's as if she doesn't have. . . "legitimacy." That's the weighty word that she once blurted out to Lennox. Maybe that weird SRY argument between the doctors did seed some weird ideas in her.

Jude feels some envy toward the nonbinary youths on the front row this morning. Their crazy hair, funky clothes and big laughs. "*How liberating,*" she thinks, "*to be free from herd mentality.*" Jude has seen them talking to the meeting organizers and other youngsters in the room. She wonders if all of the young people have gotten from the meeting what they had come for. She regrets not making her way to the front of the room to introduce herself before they left. But then it's been so full on!

Trains don't run well on Sunday. Jude's journey home is another classic. Physically and emotionally drained after the most intense two days of her life, Jude finds herself running full pelt with her heavy bag for the train. She collapses onto a seat and feels sick. She switches on the playlist compiled by Yuri but passes out and has very little idea of the rest of the journey home.

The alarm says she's slept round the clock. She is ravenous and remembers having eaten next to nothing over the weekend. She swallows something vaguely edible as she listens to the news, leaning over the sink to avoid dribbling on her silk blouse.

Back at Desk 48, she sips a thick coffee. She has never felt happier looking at the mess on her desk. Her work demands total concentration. Her job title is Assistant Director of Workforce, a destination she did not foresee when she chose to major in French Studies at college.

This is a big week for Jude. She is childfree. And she has tickets! She feels the urge to light a cigarette, but makes do with a few long exhalations. *I love my job.* She never thinks these words without gratitude – but especially this morning. Her new friend Dillon ain't so lucky. He lost his job as a chef last year. Postpandemic, who knows what the future holds for his industry: *Will he train as a teacher now? Shall I call to find out – is it a done thing? Will he be at the meeting next year?*

A colleague asks about the weekend. Jude collects herself and mutters something about a big party at a hotel. She longs to debrief with Lennox. She rehearses her conversation with him. She places her hand over her mouth to suppress an unfamiliar sensation. It feels something like – yes, she dares – triumph. Yes. Yes.