Sex, Texts, and Cyberspace
Thursday August 13, 9:00-10:30am
Chair: Danielle Peers

Fiona Nelson
University of Calgary
Sex and the Dead Girl
An emerging sub-genre of Young Adult (YA) literature, which I refer to as the “dead girl genre” is characterized by recently deceased female narrators/central characters who not only often embark on exciting new adventures once dead, but sometimes also find that it is only once dead that they are listened to and have their experiences taken seriously. Most strikingly, these books are, for the most part, romances. According to these books, once one is dead (although sometimes it is good enough to be dying), one can find true love and can have sex without consequences. There is no parallel “dead boy” genre; boys do not need to be dead or dying in order to freely pursue sexual relationships. My concern is with these books as artifacts of a culture that allows little to no sexual agency/subjectivity for (living) teenaged girls and young women. Young women’s sexuality is closely monitored, policed and condemned. We frequently hear of cases of young women being harassed and bullied for their (real or imagined) sexual activity (even when it was nonconsensual), sometimes to the point of suicide. I will consider the question of how it is that “dead” has come to be promoted as a viable sexual subject position for young women and how these books might actually nurture a culture of bullying and suicide.

Nicholas Hrynyk
Carleton University
My proposed paper examines the construction, perpetuation, and destabilization of macho style in The Body Politic (TBP), the most widely-circulated LGBT newspaper in Canada between 1971 until 1987, and one that was particularly powerful in shaping Toronto’s gay community. Focusing on the birth and life of macho style from 1973 until 1982, I examine both advertisements in TBP which portrayed macho style as unrealistically ubiquitous in the gay community in advertisements, and the backlash among members of TBP who challenged the rigid definition of macho as a symbol of gay oppression. Macho style was viewed as problematic by members of TBP because it was a multilayered construction that reflected the gay male community’s idea of “straight” masculinity. It was propagated as the apex of sexual desirability because it represented a rejection of effeminacy while “providing” men with the ability to circumvent police detection in mainstream society. I argue that TBP played an important role in institutionalizing white bodies as the benchmark on a spectrum of masculinities and how macho culture became an almost-exclusively white subculture that remains enshrined within the gay male community. I believe my proposed paper fits in with the mandate of the conference because it historicizes the internal and external regulation and policing of gender, sexuality and bodies within queer activist literature. Keywords: Queer; sexuality; gender; masculinity; identity; visual culture; periodicals; representation; and, the body.

Stefanie Duguay
Queensland University of Technology
Right Swiping on Tinderellas: Exploring a Mobile Dating Application’s Regulation of Sexual and Gender Identity Expressions
This paper explores the regulation of sexuality by examining how a mobile dating application’s programming shapes the success of certain kinds of people in finding partners. While gay men’s dating applications (apps) have existed for several years, Tinder is the first dating app to gain widespread popularity. Tinder differs from other dating apps in its design, which imports users’ Facebook information to populate profiles and allows users to swipe through profiles in a game-like manner, placing visual attractiveness and adherence to normative expressions of gender and sexuality at the forefront of partner selection. Through a combined lens of Actor Network Theory and Queer Theory, this analysis of Tinder examines how it has been designed for cisgender heterosexual users. Discourse analysis of Tinder’s features, promotional materials, news articles, and related public discussion alongside interviews with lesbian, gay, bisexual, trans, and queer (LGBTQ) users uncovers this encoded bias. Preliminary data reveals that the app narrows user identities into datable categories, which exclude diverse gender and sexual identities to the point where they become altogether invisible. However, users employ a range of strategies for resisting and subverting Tinder’s normative programming, from bold expressions to subtle cues and combined communicative technologies. As digitally facilitated dating increases in popularity, Tinder’s programming
reflects how coders, designers, and companies perpetuate entrenched forms of sexual regulation.

**Moral Panics**  
**Thursday August 13, 9:00-10:30am**  
**Chair: Claudia Malacrida**  

**Sarah Rudrum**  
*University of British Columbia*  

**Regulation Relationships during maternity care: Reflections on a compulsory approach to couples HIV-testing during antenatal care**  

In contexts of high HIV rates, couples' HIV testing during antenatal care is introduced as a means of preventing mother-to-child transmission. Male partners are screened because of the risk of exposure to pregnant women and their fetuses. At the time of 2012 fieldwork, couples’ testing was a routine provider-initiated test that patients had an express right to refuse. However, in practice this testing was provided in ways that made it appear mandatory. Among the power dimensions at play in a compulsory approach to testing is the normative power to define relationships. The requirement that women bring their husband for testing relied on and reified several assumptions about relationships: it reinforced heteronormativity (the assumption that heterosexuality is the expected norm); it disregarded the experience of single women, and it disregarded the widespread context of polygyny by excluding co-wives. This approach to testing made reproductive health care a site for regulating relationship norms, and simultaneously meant that women’s relationship status and partners’ cooperation or resistance affected women’s access to maternity care. These findings take on new significance in relation to recent legislative changes in Uganda. In addition to the Anti-Homosexuality Act, the lesser known HIV Transmission and Control Act (Aug. 2014) recently passed. This bill criminalizes HIV transmission and makes HIV testing mandatory for pregnant women and their partners.

**Molly Ladd-Taylor**  
*York University*  

**“Ravished by Some Moron”: Panic, Politics, and the Minnesota Psychopathic Personalities Law of 1939**  

Many volumes have been written about how moral panics shaped the boundaries of “normal” sexual behavior and the struggle for sexual rights. However, the policing, containment, and human rights violations of marginalized peoples defined as sexually dangerous have received conspicuously little attention. Today, twenty US states and the federal government have civil commitment laws permitting the indefinite detention of sex offenders. This paper examines the development and early operation of one of the earliest sex offender commitment laws, the Minnesota Psychopathic Personalities Act of 1939, analyzing its origins in the convergence of eugenics, psychiatry, institution management concerns, and a panic over sex crimes in the 1930s. After the high-profile murder of a teenage beauty student, the Minneapolis legislature extended a eugenics-era law providing for the compulsory civil commitment of the “feebleminded” to “sexually irresponsible” persons with normal IQs. Upheld by the U.S. Supreme Court in Minnesota ex. Rel Pearson v. Probate Court of Ramsey County (1940), the Psychopathic Personalities Law subjected as many as five hundred men, many of them gay, to indefinite institutionalization. Today, as in the 1930s, dubious claims about science’s ability to identify sexually irresponsible persons and prevent crime legitimize politically popular, but constitutionally questionable, forms of control. Scholars should not shy away from discussing these issues just because the people affected by them are less than savory.

**Ivan Simic**  
*University College London*  

**Controlling the Sexuality of Youth in Communist Yugoslavia, 1945-55**  

My project looks at the Soviet influences on Yugoslav gender policies, and explores how gender roles were provided, legitimised and disseminated in Yugoslav practice. For this conference I would like to discuss the Yugoslav Communist Party’s policies towards sexuality of the young people, arguing that the Stalinist ideas on youth sexuality were dominant in Yugoslavia, setting the norms for acceptable sexual behaviour of young people. This paper, therefore, analyse how the Party tried to control sexuality of the young people, and what were the consequences for those who did not fit the proscribed norms – particularly for young women whose sexuality was under daily scrutiny and the Party’s policing. In that process sexual minorities were rendered invisible, and the
notions of homosexuality was used to define “normal” practice as its opposite. This project seeks to provide a new insight into Yugoslav-Soviet circulation of policies and cultural representations, as well as the broader repercussions of the Yugoslav-Soviet break. Second, it offers a new perspective on the origins, development and implementation of gender policies in Yugoslavia following the latest application of theories in global gender history. In examining both abstract models and living practices, it further focuses upon the under-researched gap between ideology and practice to reveal the power of cultural patterns in shaping daily lives over official policies and ideologies.

Baldwin Reichwein and Gillian Hestad
Independent Researchers
The History of Child Rescue (aka Child Saving) in Lethbridge: Circa 1880-1947
Historical research allows us to identify early efforts in Coal Banks (a coalmining town that evolved into the City of Lethbridge) to protect: children at risk of abuse or neglect, infants to be placed-out or adopted; and, deal with young offenders. Events took place under the 19th Century ideology and ethos of the child rescue movement. Victorian morality and the Canadian Criminal Code influenced how child savers operated. Local citizens, at times even local brothel operators, responded to local needs. Under provincial legislation children's aid societies and children's shelters were established in four of Alberta's larger cities, Lethbridge among them, while municipal governments were responsible to finance shelter operations. Child saving also began, albeit under different motives, in residential schools for Aboriginal children, and child saving took place via child emigration from England to Canada. Immigration contributed to xenophobia and eugenic measures. Local volunteers and appointed agents laid the foundation for an infrastructure. After World War II various functions spun off to government and private-sector agencies. During the first half of the 20th century hardship and challenges had to be endured by many citizens in Lethbridge.

The Politics of Reproduction
Thursday August 13, 11:00-12:30pm
Chair: Sarah Rodimon

Sigrun Inga Gardarsdottir
University of Amsterdam
Trans people’s access to fertility options in Europe: What can we learn from Denmark?
This paper focuses on the issue of access to fertility options for transgender individuals. More specifically, how options for starting a family, as a trans person, are affected by protocols for legal gender change in Europe. The possibility of having one's own biological child is significant for many individuals, but can be complicated further or even made impossible for trans people due to legal frameworks. Despite legal developments improving the rights of trans people, fertility options and their accessibility is a subject that has received little due attention or evaluation. Requirements for sterilization as a prerequisite for legal gender recognition, a policy that remains active still in many European countries, represents one of the main hindrances to trans people's fertility. The paper highlights the few recent cases where countries have abolished these requirements, before proceeding to take a closer inspection of the legal changes in Denmark (2014). Using Critical Frame Analysis (CFA), an in-depth analysis of the national political discourse is presented. The results highlight the main arguments used for and against the abolition of sterilization in Denmark. In addition, the paper discusses legal, ethical and social aspects that might continue to be problematic for trans people seeking to start a family, despite recent changes. The insights that result from the analysis are relevant for other countries working towards similar legal changes as well as for additional measures to secure access to fertility options for trans people.

Kimberly Mutcherson
Rutgers School of Law-Camden
The New Kinship is the Old Kinship
This article focuses a reproductive justice (RJ) lens on the market for anonymous gametes in the U.S. and challenges attempts to dismantle the anonymity in that market. First, building on the fundamental nature of the right to procreate, including with reproductive technology, the article emphasizes the experiences of outsider families who use assisted reproduction and the importance of technology in making those families possible.
Second, it critiques family law’s focus on biology as familial destiny, which hurts families in which biological ties between parents and children are not present or are secondary to kinship created by affection and responsibility. Third, the article considers how the regulation of reproduction reinforces reproductive hierarchies that fracture some families or make them impossible to create in the first instance. RJ, with its focus on intersectionality and layered analysis of reproductive oppression, allows scholars to mark those hierarchies and consider how to dismantle them. Fourth, the article argues that eliminating anonymity will have deleterious consequences for people who build their families with commercially purchased gametes, especially families created by single women and lesbian couples. Fifth, the article posits that decreased emphasis on biology is necessary as new reproductive technologies, like mitochondrial replacement therapy, complicate the relationship between biology and family.

Bev Smith
Independent Scholar
Control of Sexuality in Kenya with AIDS
In the 1980s, AIDS has become the subject of religious, political, and medical discourse in Kenya. Responses to AIDS can be used to illustrate the relationship between the churches, the state and medicine in Kenya because the syndrome refracts in different ways. Many churches provide medical care in Kenya’s mission hospitals as well as offering spiritual solace, as they do for any illness. But AIDS is not just any illness: it is a sexually transmitted disease, and the regulation of sexual behavior has long been the domain of religion. Prior to the ascendency of biomedicine in Europe, sexuality was the province of religion primarily as a moral issue. However, AIDS has generated a ‘medicalization’ of sexuality. AIDS is also relevant to Kenya’s churches in the political arena. The health-care avenue is used for political discourse, as churches in Kenya contest the authority of the independent state over and through the medical issue of AIDS. I explore the intersection of medicine, religion and politics in this paper, by discussing a church-sponsored program aimed at educating Kenyans about AIDS.

Policies and Technologies of Population Control
Thursday August 13, 11:00-12:30pm
Chair: Vanja Spiric

Dharashee Das
Simon Fraser University
Is there a “target-free” approach? Lived Experiences of Family Planning Programs
*Skype Presenter*
The Indian population policies discourse since 1990s has given prominence to the reproductive choice framework. This choice framework emerged as a result of discussion among a host of national and international policy-makers and feminists in the International Conference of Population and Development meet in Cairo. The Indian state by incorporating this emergent framework aspired to redeem its global image signifying a population policy shift from a target-oriented approach to a reproductive choice approach. However there has not been a symmetrical translation of policy changes on the ground. It is ironic that though a liberal ideology and sensitivity is propounded in policy discourse it is not idealized in reality. In this paper I ethnographically illustrate the disjuncture of policies and its implementation. Through case illustrations I examine the core policy prescription; is a target-free approach promoted in our family planning programs align with lived realities. I investigate this policy claim through testimonies of poor women who experience the policies in their everyday lives. A similar theme that resonates through the narratives is the continued insistence on tubectomy. Further the narratives also reflect prejudices against poor Muslim women and the different pathways women follow to evade tubectomy. The specific cases will be analyzed through the theoretical lens of asymmetrical translation of development policies; state power to regulate sexuality; and subversion strategies.

Anne Hendrixson
Hampshire College
Population control is not history
Population control targets the fertility of poor women of color in the global South and marginalized communities in the global North. Rooted in eugenics and colonial ideas, it denies reproductive freedom and bodily integrity, while narrowing health care provision. Most countries in the world endorsed the 1994 ICPD “Program of Action” and
rejected the use of targets, incentives and coercion in family planning. Still population control abuse continues. Carried out under the banner of reproductive choice and women’s empowerment, the resurgence of population control ideology and practice holds women’s fertility responsible for serious global problems, like climate change, poverty, resource scarcity and global security threats. Recent instances include sterilization camps in India, coercive sterilization of HIV positive women in Africa and Latin America, and the mass dissemination of controversial long-acting contraceptives in sub-Saharan Africa and South Asia. As the largest population of young people in history is in its reproductive years, population control could undermine sexual and reproductive health, deepen social injustices and entrench damaging stereotypes around ‘dangerous’ fertility. Feminist, queer and trans* theories and experiences destabilize these stereotypes by expanding notions of gender, body and sexuality while situating them in particular contexts and bodies. They provide the basis for transformational sexual and reproductive health approaches that challenge population control and uphold social justice.

Lauren Wallace
**McMaster University**

**Making modern families: Family planning and ideal citizens in northern Ghana**

State-sponsored population policies and programs are often advertised as empowering women and fostering individual choice and agency; however, they also have hidden effects and agendas. Considering northern Ghana as an example, this paper describes the role of population policies in producing new notions of responsible citizenship. I argue that these policies are not simply a form of reproductive control, but offer a process through which new idealized bodies, forms of parenthood and families, are created, politicized, and policed. Eight months of participant observation, focus groups, interviews, and genealogical research were conducted from June 2013 to April 2014 in rural village and clinic settings in northern Ghana. I show that in Ghana, the rhetoric of family planning programs depicts users of contraceptives as modern citizens who are better equipped to take care of their children. Individuals who want or bear large numbers of children are often portrayed as irresponsible citizens. I explore the ways in which women making decisions about contraceptive use and family size are caught between opposing concerns; while women envision family planning as useful and modern, they continue to face economic pressures to have enough children in the face of the government’s failure to eradicate poverty.

Jaime Lindsey
**University of Birmingham**

**The Inherent Jurisdiction and the Sexually Vulnerable Adult in English Law**

In this paper I present a critical analysis of the inherent jurisdiction of the High Court and its development alongside the Mental Capacity Act (MCA), both legal guardianship regimes. My focus is on the impact of these regimes on the sexual lives of individuals who experience mental disabilities, albeit that the jurisprudence has developed to allow for protection of the “vulnerable” more widely. In this sense, the courts’ expansionism in this area can be seen as less discriminatory as anyone deemed “vulnerable” could be subject to it, in contrast to the MCA which requires a disturbance or impairment in the functioning of the mind or brain. My critique is based on the theoretical concept of vulnerability as developed by Fineman, in the context of universal vulnerability, and Mackenzie who distinguishes between inherent, situational and pathogenic vulnerabilities. I argue that whilst the inherent jurisdiction may be fairer than the MCA, if this legal approach is to be developed then a more nuanced concept of vulnerability is required. Importantly, I think that there are grounds for interventions in the lives of the vulnerable, whether they be disabled or not, but that their nature and scope must acknowledge the often situational aspects of the vulnerability rather than the internal features of it. As a result, the law’s response should be to focus on the harmful social conditions that inhibit sexual autonomy and allow for unacceptable levels of sexual violence by, for example, restricting the liberty of the perpetrators.
Workshops – Open to All
Thursday August 13, 11:00-12:30pm

HIV Connection Lethbridge
Sexin’ Work

This workshop will explore previous and existing language regarding sex work in Canada and will provide a detailed definition of the sex work profession. The workshop will specifically explain how Canadian law and Bill C-36 directly impact those who deliver and receive services in the sex work industry.

Christine Austin, Joanna Drassinower, Kareem Elbard, Ann Fudge Schormans, Rainbow Hunt, Esther Ignani, Tania Jivraj, Melanie Moore, Renee Morin, Kate Peters, Romeo Pierre, Lynda Roy
Ryerson University

Re-imagining Parenting Possibilities (RPP): A Forum Theatre Workshop

People labeled with developmental disability (DD) consider parenthood in the shadows of eugenics. The segregation, containment and elimination of reproductive rights of those historically deemed feebleminded has disrupted ties of kinship, family and parenting (Rapp & Ginsburg, 2012; Roets, Admams, Van Hove, 2005; Smith 2005). In our contemporary moment, parenting possibilities are framed and contained by professional discourse, which hold labeled people to normative standards of parenting by which they continue to be deemed deficient (Hollomotz, 2012). In this 1.5 hour workshop, members of the Re-imagining Parenting Possibilities Self-Advocate Working Group will lead participants through forum theatre scenes (Boal, 1995) intended to trouble the boundary separating those who are permitted to be parents from those who are not. Self—advocates will perform interwoven parenting stories they have collected from labeled others, inviting workshop participants to enter and change the course of the scene.

RPP is an Ontario-wide community-based, participatory research initiative that employs qualitative, arts-informed methods and interpretive analysis. Using a co-researcher model, the project begins with the experience of disability to re-imagine what we think of as parenting, kinship, care and reproductive justice in non-normative and inclusive ways. Acknowledging the ways in which ‘developmental disability’ and ‘parenting/parenthood’ are culturally constructed and socially, economically, and politically medicated, the project moves beyond a phenomenological account towards a critical interpretation. Our scenes and allow for the revelation of multiple experiences and meanings of developmental disability parenting/parenthood. The project strives to be participative, reflexive and potentially transformative.

Contradictions of Reproductive Autonomy
Thursday August 13, 3:30-5:00pm
Chair: Stefanie Duguay

Claire McCann
Northumbria University

The Regulation of Abortion in Northern Ireland: Controlling Women’s Lives through Legal and Medical Power

Unlike other parts of the UK, accessing abortion in Northern Ireland (NI) is a criminal offence except for in very limited of circumstances: where there is a risk to life or probable risk to the serious and long term mental and physical health. Women who access an abortion, and those medical practitioners who carry out an abortion, in any other circumstances face life imprisonment, if convicted. The majority of women in NI who wish to access abortion services do so by travelling to England or other parts of the EU or by importing unregulated medical abortion pills via online vendors. The regulation of abortion in NI is framed within a morally conservative socio-political context and is moulded through the male dominated institutions of power in the region: politics, religion, law and medicine. This paper will particularly explore the way in which legal and medical power combine to stifle access to lawful abortions through the chilling effect of the threat of criminal sanction both on women seeking abortions and on the medical practitioners who are the gatekeepers to access. The threat of sanction has the effect of shrouding in secrecy the reality of accessing abortion services in NI and reframes the narrative through the good abortion/bad abortion dichotomy. Abortion is a highly charged and politically potent issue in NI and this paper argues that current model of male-dominated institutional power creates a harsh and unforgiving situation which
Anna Bogic  
*University of Ottawa*  
**Democracy and women’s reproductive rights: Contradictions and control in the cases of Croatia and Serbia**  
In the early 1990s, during the transition from socialism to democracy and market economy in geopolitical Eastern Europe, women’s reproductive rights experienced significant retrenchment. This transition, accompanied with a rise in social conservatism and religious revival, witnessed introduction of laws restricting women’s access to abortion, previously covered by universal healthcare under socialist governments. My paper focuses on two former Yugoslav republics, Croatia and Serbia, where the transition translated not only into stricter laws but also growing stigmatization of women choosing abortion, increasing numbers of illegal abortions but also of doctors enacting the “consciousness clause.” Due to the pressure from the Catholic Church, the Orthodox Church, the nationalist political scene, ethnic wars, and neoliberal economic reforms, both countries introduced stricter abortion laws, monetary payments, and a national registry on abortion patients. In addition to documenting these changes, my paper will examine discourses shaped by ethnic wars of the 1990s which identified women’s bodies as important reproducers of the nation. I will therefore link the restrictive abortion laws with the religious and nationalist discourses on women’s duty to perform their reproductive role to ensure the “survival” of the nation. I will conclude with a brief example of one response by feminists and their attempt to raise women’s consciousness by translating a pro-choice American feminist health classic, *Our Bodies, Ourselves.*

Jacqueline Potvin  
*University of Western Ontario*  
**Female Sexuality and Maternal Health: the Biopolitics of Canada’s Maternal Health Programming**  
My research examines how dominant understandings of ‘normal’ and ‘appropriate’ female sexuality affect international development interventions targeting women’s reproductive and sexual health. Despite a growing body of research advocating for the need to recognize sexual empowerment and pleasure as key aspects of sexual rights, development policy and practice addressing issues of sexuality continues to be dominated by biomedical, risk-based approaches to sexual health that often reinforce gender stereotypes by conceptualizing women as sexually passive and needing protection from the (presumably) aggressive and dangerous sexuality of men (Miller, 2000). Through close analysis of the Canadian government’s current maternal health campaign, I examine how understandings of motherhood as the only appropriate expression of female sexuality, together with the belief that the ‘deserving poor’ must be sexually and reproductively responsible, and that agentic female sexuality is both irresponsible and immoral, creates a context in which maternal health becomes one of the few acceptable means through which to advocate for women’s sexual rights and health. These sexual ideologies can help explain why the Canadian government has chosen to focus on maternal health at the expense of a more expansive and radical sexual rights campaign, while also pointing to the ways in which this focus on maternal health acts as a form of biopolitical control over women’s bodies that limits their sexual and reproductive freedom.

Sarah Rodimon  
*Carleton University*  
**When Pro-Choice is Not Enough: How Canadian Activists are Mobilizing for Reproductive Justice**  
Since the 1990s, women of color activists in the United States have developed the concept of reproductive justice as a holistic framework from which to critique, resist, and dismantle the systems of oppression that shape women’s reproductive lives. Specifically, these activists are building a movement that brings visibility to the ways in which reproduction has historically operated as a site of control and regulation, in particular for women of color, low-income women, women with disabilities, immigrant women, women living in rural and remote areas, and members of the LGBTQ community. In Canada, however, the concept of reproductive justice is just beginning to gain traction among pro-choice circles nation-wide. This paper addresses how Canadian activist and advocacy groups have begun to develop and mobilize their own framework(s) for reproductive justice, and discusses how Canada’s history as a settler-colonial, white supremacist, patriarchal, and capitalist state is linked to the possibility for women to achieve reproductive freedom. The bulk of data informing this paper was collected via textual analyses of materials produced by four distinct organizations: Reproductive Justice New Brunswick; Fédération du Québec Por le Planning des Naissances; Native Youth Sexual Health Network; and Abortion Rights Coalition of Canada. Throughout, I draw on various reports, press releases, websites, and campaign materials, in order to address how each group is advancing a unique framework for reproductive justice in the Canadian context.
**Troubling Sex and Gender**  
*Thursday August 13, 3:30-5:00pm*  
*Chair: Suzanne Lenon*

**A.J. Lowik**  
*University of British Columbia*  
**Sterilization for Documents: Sex reassignment surgery as a condition of legal sex change**

Many jurisdictions around the world require that trans* people undergo sex reassignment surgery in order to amend their formal documentation and identification. Sex reassignment surgery forecloses an individual’s reproductive potential, and as such sterilization becomes a condition for legal recognition. Although rarely named as such, the mandated sterilization of trans* people is, in essence, nothing short of state-sanctioned eugenics. Those people unwilling or unable to meet this condition are rendered unintelligible, are at increased risk of discrimination and violence and are unprotected by the human rights laws bestowed upon citizens of that particular place. Individuals are granted access to a new assignment as (usually) either male or female, based on gender binary, heterosexualized and heteronormative notions of citizenship. This presentation will consider the sexual, reproductive and family forming practices of trans* people, to call attention to the hetero-, homo- and trans-normative underpinnings of these laws.

**Nicoline Miskow Friborg**  
*University of Copenhagen*  
**Exploring the Mexican third gender muxes’ negotiations of heteronormativity in love and sex**

The aim of this paper is to explore how muxes negotiate heteronormativity in romantic and sexual relationships to men. Building on qualitative data from four months ethnographic fieldwork carried out in the fall of 2013 in the Mexican town Juchitán, the paper engages mainly with feminist and queer theory and suggests that rather than seeing heteronormativity exclusively as a regulating structure, attention to the ways in which it is enacted and negotiated can highlight how muxes carve out space for themselves and obtain recognition. The paper goes beyond looking towards catholic family structures as the main regulating factor of muxes’ sexuality and love life and it is its overall argument that muxes’ position as a third gender places them outside of gender binarity hereby enabling them to take a playful and questioning stance towards heteronormativity. While muxes deploy heteronormative structures and feminine erotic capital in flirtations and sexual relationships to men in order to obtain recognition for their practiced feminine bodies, they reject heteronormative and patriarchal structures in longer relationships with men to obtain a sense of female empowerment. The paper concludes by suggesting that paying attention to these negotiations allows both for an understanding of heteronormativity and queerness as fluid, situated and negotiable and for a reconceptualization of agency as not only mere resistance and rejection of norms but also the renegotiation and inhabitation of them.

**Robert Hupf**  
*City University of New York, School of Law*  
**Allyship to the Intersex Community on Nonconsensual Genital “Normalizing” Surgery**

The fight against nonconsensual genital “normalizing” surgery, a primary concern of the intersex community, has gained traction within recent years but needs more support from the larger LGBTQ movement. Using an allyship framework, this Article argues that any such support be based on the lived experiences, concerns, and voices of the intersex community itself; in the past, well-intentioned efforts have advocated for solutions other than those sought after by the community, oftentimes resulting in negligible or even harmful results. The solution sought after by the intersex community is an immediate moratorium on the practice of nonconsensual genital “normalizing” surgery. Theorists and scholars have responded to the problem by suggesting solutions that challenge the sex / gender binary construction, either through 1) the creation of a “third gender,” and / or 2) the removal of government identification practices that require specification of a particular sex / gender. The focus on deconstruction of the sex / gender binary has not resulted in a cessation of nonconsensual genital “normalizing” surgery in any of the nations that have adopted such policies internationally. The solution has also been denounced by intersex activists for miscomprehending the issues and for failing to listen to the expressed concerns of the intersex community itself. Despite this criticism, nations are still adopting these same flawed policies.
Amy Kesselman
State University of New York at New Paltz
In 1997 I was teaching in the Women’s Studies Program at SUNY New Paltz which organized conferences every year. That year’s conference was about women and sexuality which we titled “Revolting Behavior: the Challenges of Women’s Sexual Freedom” thinking that the double meaning of the title would evoke the ways that women claiming sexual freedom was a rejection of prevailing ideas about women, gender and sex. We were unprepared for how vividly this would be demonstrated as the controversy about the conference, amplified by a scandal hungry press, blew up in our faces and eventually resulted in the forced resignation of our college president. During the following year I learned more than I wanted to know about the political architecture of a state under a republican governor and the tentacles of the conservative movement. My presentation will tell this story, describe the influence of the right wing and discuss the conflict between the ideas and values of our assailants and those that we tried to articulate as we presented and defended our conference. In the Wall Street Journal article that inaugurated the attack on our conference. Roger Kimball fulminated that at the conference, which he attended, “Shame was everywhere presented as the enemy of liberation.” He was right about that; our repudiation of shame was a key element of our presentation of women as sexual subjects. Drawing on Michawl Warner’s ideas about the politics of shame I will discuss the ways this played out in the controversy about our conference.

Eugenics and Scientific Subjectification
Thursday August 13, 3:30-5:00pm
Chair: Julieta Chaparro

Karen Soldatic
UNSW Australia
Eugenics and the Formation of the Australian State: Indigeneity, Disability and White Settler Masculinity
*Skype Presenter*
With this paper, I aim to explore the centrality of eugenics in the formation of white settler Australia through drawing upon the interlocking relationship of disability and indigeneity. My analysis focuses on a key historical moment in the Australian experience – the formation of the colonial white-settler society of Australia in its early years (1901–1920s), comparing and contrasting the systems of administrative management of disability and indigeneity. In doing so, the paper reveals the deep materialities of white, able-bodied, masculine, (post)colonial settler rule that bring together disability and indigeneity via gender reproductive controls that diverge and converge via the unfolding eugenic discursive positionings at the time. The conclusion reflects on the transformative effects of managing transgressive bodies and minds under the white able-bodied settler state and its relationship to current nation state restructuring embedded in similar discourse of white able-bodied masculine nationalism.

Susan Schweik
UC Berkeley
Looking Iowa: Eugenics, Its Environments, and the Aesthetics of Intelligence
This talk examines some key events in the history of eugenics and anti-eugenics, in Iowa during the Depression: the removal of children from mothers marked as “mentally defective”; the sterilization of so-called “feeble-minded” women; and most importantly, the “radical, iconoclastic solution” a group of institutionalized women offered for the problem American society framed as low I.Q., in the form of a “bold experiment” done with social science researchers to see whether placement in an institution under their care might potentially reverse “retardation” instead of conclusively confirming it. For a moment, the positive results these women produced seemed to promise radical rethinking of the institution itself--and of the meaning and making of “I.Q.” But in the end their work also served to shore up the ideology of the “intelligence quotient” that held them in place, in that place. Each one seemed, in William Saroyan’s phrase, to “look Iowa.” We are told they were all “white, of Northern European descent.” They were given “women’s work” and contained in conventionally gender-segregated wards. But a
A deeper look reveals a more complicated picture of the race, class, and gender dynamics involved in this story. I’ll get at these first by examining the specific I.Q. tests that could send a small child or grown woman to an institution in Iowa in 1933, showing how the tests and their consequences demanded compliance with unstable racialized and gendered aesthetic norms.

Joanne Woiak
*University of Washington*

**Agency and Ableism in the Washington State Eugenic Sterilization Program**

My study of the sterilization files from the Washington state archives critiques how disability was defined and deployed during the eugenics era, exploring how concepts of “insanity” and “feeblemindedness” intersected with categories of gender, sexuality, religion, ethnicity, and class in the medical diagnoses and life histories. In this paper, I focus on a 1940 transcript from a mental hospital that records several female inmates being interviewed to determine their eligibility for sterilization. A few of these women are described as having “asked for sterilization,” and some provided detailed narratives of family planning needs and assented to perceived eugenic or therapeutic benefits in order to ensure they would get the procedure. General practice in Washington was to require consent forms for sterilization, though for disempowered individuals that “choice” was often shaped by knowledge that surgery was a prerequisite for returning to their families. The line between coercion and consent was further blurred when women may have viewed the sterilization laws as a way to access birth control. I suggest that some of the female patients in the Washington hospital who accepted sterilization were resisting stereotypes of dependency and incompetency in trying to exercise some degree of reproductive and health care agency. In a few cases, this resistance met with medical opposition as requests to be sterilized were denied, thereby reproducing their oppression as disabled women.

Amy Samson
*University of Alberta*

**Guidance Clinics and Sexual Sterilization in British Columbia, 1933-1972**

Guidance clinics were part of an international trend in channeling resources towards preventative measures, indicating a move away from biological reductionist understandings of mental deficiency and towards considerations for environmental factors. The clinics aimed to assist individuals, predominately children, in adjusting to their surroundings and more generally to society, with the intention of preventing serious mental illnesses. In western Canada, where Alberta and British Columbia maintained eugenics programs, they also served to direct children with mental deficiencies towards sexual sterilization. Focusing specifically on British Columbia, this paper will examine relationships between children deemed to be “mentally defective,” education, health, and welfare professionals, and the provincial eugenics program, as facilitated by the child guidance clinic service, which was established in 1932. Due to the paucity of primary sources on BC’s formal eugenics program, specifically the BC Eugenics Board records, examining the role of the guidance clinics creates an opportunity to explore this history and make an important contribution to our understanding of eugenics in this region.

**Nationhood, Sexuality, and Racialization**

Friday August 14, 9:00-10:30am

Chair: Molly Ladd-Taylor

Nathan Rambukkana
*Wilfrid Laurier University*

**Monogamy Must Be Protected: Canadian Anti-Polygamy Laws from 1892 to 2015 and Beyond**

*Skype Presenter*

The discourses, laws, and policies that collectively work to regulate polygamy specifically, and non/monogamy broadly, are less about protecting women and children from presumed inequality than they are about maintaining a cordon of privilege around the intimate space of the nation. This paper discusses Canadian anti-polygamy laws and tracks them from their 1892 enactment, through to the 2011 reference case, and finally to the current state of the laws and their effects on non-monogamous individuals in Canada. Drawing on intimacy, critical race and feminist theories, I explore how ‘intimate privilege’ operates to maintain mononormativity and fails to address difficult questions about polygamy by functioning as a blunt legal instrument, not addressing the needs of women.
and working to exclude legible polygamous immigration. In particular, through a close reading, I investigate how in the 2011 Reference re: s.293, Chief Justice Bauman draws on a partial and particular view of history, minimizes or ignores evidence presented by female interveners and experts that disagree with his position, and seems to base the majority of his discussions on a combination of faulty big data studies and a stated ideological desire to “protect the societal institution of monogamy.” I conclude with a discussion of the implications of this ruling for non/monogamy in Canada, and in relation to new legal actions that have followed the case and that may lead, in the next decade, to these matters coming before the Supreme Court of Canada.

Suzanne Lenon
University of Lethbridge
Not on Canadian Soil: Bill S-7, Polygamy, and Racialized Population Control

Queer and feminist studies in sexual regulation have long pointed to the ways in which family and intimate ties are never only private matters; rather they might be thought of as "intimate publics" in terms of how and why they are made to matter for the nation-state. Polygamous marriage is but one example. Notably, the current Conservative government in Canada recently introduced Bill S-7 (the "Zero Tolerance for Barbaric Cultural Practices Act"), which amends various pieces of already existing legislation, proposing to, among other things, bar migrants who practice polygamy from entering Canada, and to potentially remove Canadian permanent residents who practice polygamy. In his announcement speech, the Minister of Immigration & Citizenship repeatedly stated that the purpose of Bill S-7 was to prevent “barbaric cultural practices” from happening on Canadian soil. Such a framing conflates racial and geopolitical boundaries, and seemingly forgets that polygamy has long been practiced “on Canadian soil.” This paper will examine Bill S-7 as a tool of sexual regulation as it interlocks with race and immigration, proposing that it functions as a mechanism for racialized population control and nation building.

Mirela Violeta David
University of Saskatchewan

The Chinese Birth Control Movement in Republican China, between eugenics, population control, and women’s health

Margaret Sanger’s visit to China in 1922 represented a watershed moment in considering the merits of birth control for solving China’s social ills such as overpopulation and venereal disease. Male intellectuals debated the merits of birth control in conjunction with eugenic argumentations and its compatibility with leftist and nationalist ideologies. Some were receptive to Sanger’s ideas of coercive national control of women’s reproduction. By the 1930s, women medical professionals internalized both national and eugenic concerns of race regeneration. The symbiosis between racial regeneration and birth control is best seen in how Dr. Yang Chongrui integrated birth control work into her national hygiene program at the First National Midwifery School, which she helped found, and where she was a principal. This paper traces the efforts of a few women gynecologists to ease the reproductive burden of working class women by giving contraceptive advice at their birth control clinics in Beijing, as well as their connections with Margaret Sanger’s international birth control movement. Freeing women from the health hazards of multiple pregnancies was the goal of these gynecologists, alarmed by high maternal and infant mortality rates. I explore these activists’ efforts of disseminating birth control as both practitioners and educators, considering how recurring reproduction was foundational for shaping women’s lives experiences.

Producing and Resisting Marginalization
Friday August 14, 9:00-10:30am
Chair: Nicoline Miskow Friborg

Sheila Sengupta
University of British Columbia, Vancouver

A gendered perspective of the Partition of India (1947): Some concerns around sexuality

In the years immediately following the Partition of India in 1947, mass scale violence saw thousands of women being widowed and abducted. The sexuality of women and its consequences thus became a subject of major concern for the Indian state and the Hindu community. Interestingly, the sexuality of widows did not pose as much problem as the sexuality of abducted women because the latter had been ‘violated by abduction, transgressed by forced conversion/marriage and exploited by impermissible co-habitation/reproduction’. For such ‘unattached’
women, relocation into families was really imperative, as the danger of their sexuality getting out of control posed a threatening challenge. Sexual chaos reflected the chaos that the Nation was going through, and it was necessary that some order be restored in families with women’s sexuality strictly regulated. Those who could not be relocated into their families became the long term responsibility of the State which then adopted the role of a surrogate parent marked by an attitude of benevolence and patriarchy. This paper discusses the role of Abducted Persons Recovery and Restoration Act of 1949 and its twin concerns with regulating the sexuality of women, and the sanctity of legitimate membership to family, a community and Nation, by refusing to allow sexuality to be contaminated by secularity.

Ann Fudge Schormans  
McMaster University  
Dis/fatherhoods and crippled commons  
For disabled men, fatherhood is largely institutionally constrained and culturally disavowed through state strategies of pathologization and containment. Drawing on recent critical posthuman theories (Nayar, 2014), and ideas about dis/human studies (Goodley & Runswick-Cole, 2014), we explore the possibilities offered by disability to trouble the individual, agentive, self-determining rational, male human subject at the heart of normative fatherhood, while simultaneously asserting disabled men’s humanity in their normative desire to father. We ground our analysis in our three empirical projects, (S)expressing Disability, Photochangers and Reimagining Parenting Possibilities. In each project, disabled men from their varying social locations, narrated their aspirations, experiences and disappointments related to fatherhood. While their stories were contoured by their dis/ablest contexts, they sought out and created non-normative strategies within their experiences of fatherhood. Such strategies, we suggest, allow consideration of the ways in which disability might further how we conceive of men, fathers and fatherhood. To this end, we trace how dis/ability offers an epistemic and practical challenge to normative human conceptions of fathering and fatherhood. We conclude by considering how a posthuman dis/abled fatherhood, can help us imagine a ‘crip commons’ that rests upon and nurtures co-operative relations, sharing and mutual care, moving towards ‘crip futures’ (Federici, 2012; Kafer, 2013).

Linda McDonald  
Self-Advocate  
Parents say NO!! I say YES!! I am a normal person, too  
The learning goal of my presentation is to not let people tell you that you cannot when you can do what you put your mind to. It is about barrier I faced as a person with a disability to be where I am today, happily married and living with my husband how also a disability. Some barriers are getting a boyfriend, getting pregnant and not knowing what to do, not having to money to raise kids, and getting married. Bringing the knowledge of the barriers that I have overcome to get to where I am today happily married for 10 years.

Md. Azmain Muhtasim Mir  
Comilla University  
Social and Sexual Segregation of Poor Lepers in Bangladesh  
Leprosy is highly stigmatized disease in Bangladesh. The stigma is attached with the lepers and also with their family members. Bangladeshi people are scared to get marry lepers and their offspring. Because, common beliefs represent that, Leprosy is an infectious disease and a result of sin. This belief and attitudes lead lepers, poor in particular, to hide themselves from society and even from their family. They admit themselves in hospital to get rid of this disease and sin. Based on qualitative interviews with 20 lepers who were admitted in Tuberculosis & Leprosy Hospital, Mymensingh, Bangladesh, this paper intends to explain how lepers are become ‘deviant’ and stigmatized in Bangladeshi society, how this stigma affects their sexual and social life and also their family life. Data shows that, poor lepers often admit in this hospital as they get food and all medical services without cost. However, most of the poor lepers became sick again after their departure from the hospital as they did not have sufficient support for them in family and community level. The condition of lepers leads Bangladeshi people to think that leprosy is an infectious disease, which is not curable at all. Although, G.O and N.G.O medical programs has been campaigning that, in Bangladesh all types of leprosy is not infectious. However, people often exclude them from this fear, and this categorization by medical and social discourses drives them to a ‘deviant’ and ‘other’ category in society, who are sexually and socially perceived as ‘Untouchable’.
Workshops – Open to All
Friday August 14, 11:00-12:30pm

Right to Love Group
Everyone Has the Right to Love
Over the last decade the Right to Love Group in conjunction with the Calgary Sexual Health Centre and the Disability Action Hall have worked on real life campaigns educating the community. We have been involved with social media campaigns, community events, a vital statistics submission to change the marriage act due to the everlasting effects of the eugenics movements of institutionalization in our legislation. We are especially proud of our partner, the Calgary Sexual Health Centre, who has now created a provincial training program for caregivers and is piloting it across the province, in particular in the City of Calgary. We would like to tell you about this from the perspective of people with disabilities and how we use art, conversation, and the everyday places to engage people with everyone has the right to love.

Connections Counselling and Consulting Foundation
“Was child welfare in the room when your child was born?” How the stigma of disability and system deterrents turn parenting with a cognitive challenge into a Herculean task
Learning goals: Conference participants will gain insight into the sexual education and reproductive autonomy of more than 25 adults with cognitive challenges who have chosen to be parents. Connections will show the impact of sexual education/autonomy, influenced by a disability, and how this experience influences present-day parenting capacity. The premise of this research is that parenting supports and education will be more effective if the parents’ past experience is understood and reflected in a more responsive approach to supports. A combination of research results and the voices of participants will provide a rich context describing what is effectively eugenics – or newgenics – and the reality for most adults with cognitive challenges who want choices in life like other Albertans. With its 25 years of experience providing parenting supports to parents with cognitive challenges, Connections will share best practices and recommendations for policy changes in response to the results of the profile and experience reflected in the 25+ person survey.

Eugenics and Nation Building
Friday August 14, 1:45-3:15pm
Chair: Karissa Patton

Erika Dyck
University of Saskatchewan
Sterilizing History: Eugenics and its Legacy in Canada
*Skype Presenter*
In 1969 Prime Minister Pierre Elliot Trudeau flippantly remarked that, “the state has no business in the bedrooms of the nation,” as he introduced landmark legislation that decriminalized contraception, abortion and homosexuality. Since then, however, the state has remained in the bedrooms of some Canadians and attempted to creep back into others, in particular, by revisiting the laws on abortion. A closer look at the realities of reproductive rights since the 1970s reveals a much more complicated picture with a varied set of reactions and experiences to reproductive health, autonomy and family planning. This paper examines some of the reproductive experiences faced by Canadians in the 1970s. While the legal changes introduced by Trudeau removed regulatory oversight from so-called ‘healthy’ families, the same gesture redoubled efforts to bring family planning discourses into the lives of other families, for example, Aboriginal and Inuit women and individuals with intellectual and physical disabilities. Relying on documents from Library and Archives Canada’s collection on birth control, and the Donald Zarfas files about sex education for people institutionalized under the label ‘mental retardation’, this paper considers some of the ways that Canadians were subjected to more strenuous restrictions over their reproductive lives in spite of the so-called era of liberalization.
Amy Kaler
University of Alberta

Mothers’ Duties: The United Farm Women of Alberta and the Sexual Sterilization Act, 1909-1928

Between 1928 and 1972, the Alberta government sterilized approximately 2800 people, often without their knowledge, let alone consent. This programme is now universally condemned as a violation of human rights and an abuse of state power. Yet not so long ago, prominent interest groups were eager to claim it as a triumph for Albertans, especially women. This contrast provides the problematic for this paper. Based on archival sources focusing on the United Farm Women of Alberta, the women’s wing of the ruling party and the primary advocates for sexual sterilization in the two decades leading up to 1928, I ask: How did sterilization come to be seen as the apex of “advanced legislation” in Alberta, rather than as the indefensible act of hubris that it appears today? Why did Albertans, primarily but not exclusively women, perceive sterilization as not only justifiable but humane and reasonable? And why were women, who bore the brunt of the Act, also its strongest advocates? I distinguish between “high” narratives of eugenics, in which eugenic projects and the philosophies behind them are understood as the products of beliefs about science, perfectibility, and the triumphs of certain types of people over others; and “low” narratives, in which support for negative eugenic policies is grounded in pessimistic perceptions of the failures of society. I argue that the “low” narrative had greater traction with the UFWA than “high” eugenics and drove the adoption of a range of policies and positions, of which sexual sterilization became the most notorious.

Danielle Peers
Concordia University

The survival of the (physically) fittest: The eugenic past and present of disability sport and physical activity

Through both popular and official Paralympic discourses the parasport athlete is constructed as an inspirational figure and as a testament to the progressive empowerment of people who experience disability. In this presentation, I draw on my genealogical research about inspiration and physically fit disability in Canada to argue that physical fitness practices (including sport) for people experiencing disability emerged as eugenic techniques and served as important tools for the deeply racialized and ableist control of sexual reproduction in Canada. Further, I argue that the eugenic functions and meanings of the physically fit disabled body—and the practices that create him (and, less often, her) – are not only a thing of the past. Rather the practices, subjectivities, and institutions of parasport and inspirational hyperability often serve to reproduce a deep binary between tolerable and intolerable disabled subjects, and serve to justify and reify neo-eugenic notions that only the “fittest” disabled subjects deserve access to self-determination, citizenship rights, sexuality, and reproduction.

Claudia Malacrida
University of Lethbridge

Passive and Active Eugenics: Institutionalization and the Alberta Sexual Sterilization Act

The regulation of disabled people’s reproductive lives has been effected through both active and passive eugenics. Active eugenics in Alberta, Canada between 1928 and 1972 caused over 2800 people deemed to be ‘mentally deficient’ or ‘psychotic’ to be legally involuntarily sterilized. In passive forms of eugenics, the establishment of asylums and institutions in 20th-century Canada sequestered people deemed to be ‘dangerous’, effectively excluding them from a sexual and reproductive life. In Alberta, these two systems cooperated publicly and seamlessly for almost 50 years. In this talk, I examine the relationship between institutionalization as passive eugenics and more active eugenics in the form of involuntary sterilization. Because the Sexual Sterilization Act stripped them of their rights, and because of the intimate relationship between the institution and the Eugenics Board, ‘mental defectives’ were made particularly vulnerable. The Eugenics Board shared a unique and symbiotic relationship to the largest institution for intellectually disabled people in Alberta, the Provincial Training School/Michener Center. The effects of active eugenics are known: but research with institutional survivors illuminates that the effects of passive eugenics are deep and lasting.
**Sexual Economies**  
Friday August 14, 1:45-3:15pm  
Chair: Chloë Taylor

**Jula Hughes**  
*University of New Brunswick*  
**From Abortions to Sex Work: What Decriminalization Can Teach Us about the Role of Stigma in Criminal Law**  
The proposed presentation pursues the idea that decriminalization and its aftermath deserve the attention of criminal law scholars. It presents the development of abortion law post-1969 and particularly following full decriminalization in 1988 in the Maritime provinces as a case study. Focusing on criminal law theory, decriminalization provides an opportunity to empirically test and doctrinally review the interaction between criminal law and stigma. The point of departure is the observation that abortion stigma has continued unabated after decriminalization. In the view of the Supreme Court, the application of criminal law produces social stigma. The Court also relies on the production of stigma as a distinguishing feature of true criminal law, contrasting it with regulatory law. This both suggests that criminal law is uniquely positioned to produce stigma and that regulatory law does not produce stigma. The experience of abortion decriminalization challenges both of these assumptions. Using social stigma theory, I consider the relationship of criminal law stigma to social stigma and its implications for the decriminalization and recriminalization of sex work.

**Julie Kaye**  
*The King's University*  
**Disciplining Indigenous Women: Reproducing Canada's Racial and Sexual Priorities through Anti-Trafficking Discourses**  
Canada criminalized human trafficking through the Immigration and Refugee Protection Act in 2002 and the Criminal Code in 2005. Anti-trafficking efforts initially emphasized migrant sex work as the primary site of trafficking and considered restrictive migration controls as the solution. As Jeffery (2005: 33) highlights, anti-trafficking preserves and promotes Canada’s self-proclaimed identity as “a good, helpful nation,” while functioning as “an exercise in maintaining a particular gendered and raced neo-colonial identity.” Yet, the Canadian anti-trafficking gaze has expanded beyond immigration and foreign policy concerns. Discussions have proliferated to underscore “domestic” forms of trafficking – trafficking within Canadian borders. These discussions center on the relationship between trafficking and the experiences of Indigenous women and girls as “at risk” subjects. This emergence of representations of Indigenous women as “victims of domestic trafficking” begs the question of how Indigenous women’s experiences are portrayed in Canadian anti-trafficking discourses. In particular, what happens when Indigenous women are conceptualized as “domestic”? Informed by a working book manuscript on anti-trafficking responses in settler-colonial Canada, this presentation examines how the inclusion of Indigenous women as “domestic trafficking victims” unreflexively claims to address colonial legacies while criminalizing Indigenous women’s bodies and naturalizing the racial and sexual priorities of the settler-colonial state.

**Mst Shahina Parvin**  
*University of Lethbridge*  
**A Long-Term Method of Controlling Poor Bangladeshi Women’s Fertility**  
This paper examines how health professionals implant Norplant contraceptives in poor Bangladeshi women’s bodies, in the name of their wellbeing, in order to succeed in population control. Based on qualitative interviews with five health professionals and thirty two Norplant users, following Foucault’s theory of power and knowledge, I aim to analyze how health professionals exercise their power by constructing knowledge about poor women’s lives, and how they serve Bangladeshi state’s population control program which is linked with the International population control program and pharmaceutical companies’ interests. I also endeavour to explore how users experience after implanting Norplant, and their reasons for selecting this method of contraception. The data shows that health professionals exercise power on poor women’s lives by constructing knowledge that Norplant is the best method for poor women, and refusing women’s requests for removal of Norplant. The service providers state that they remove Norplant when they think it is necessary because poor women are not aware of their wellbeing, and they do not know the worth and cost of the method. In contrast, the poor women feel that they are not heard and misunderstood by Bangladeshi health professionals. Due to this tendency, Bangladeshi poor women often do not have control of their own bodies, rather their bodies are often used for population control of the poor, which is often harmful to their bodies and causes pain and suffering in their lives.
Transnational Sexual and Reproductive Legacies
Friday August 14, 1:45-3:15pm
Chair: Sigrun Inga Gardarsdottir

Stephanie McColl
Queen's University
Intimate Histories: Situating transnational surrogacy as a colonial project
This project examines how the racial histories of modernity provide a lens to consider transnational surrogacy in India. Using a historical lens to approach transnational surrogacy I bring together two moments in the colonial history of British India, first the period prior to the Indian Rebellion of 1857 that saw the expansion of the British East India Company throughout the India subcontinent, and second post-Mutiny which established direct rule under the British Raj in 1858. In examining these historical moments as expressions of “colonial intimacy” I consider the making and unmaking of strict colonial and racialized categories embedded in the racial, sexual and reproductive economies of concubinage and domestic work in colonial India. From here, unpacking the contextual paradoxes that frame the transnational surrogacy industry in India exposes the colonial continuities that position Indian women’s sexual and reproductive bodies, as concubines, ayahs and surrogates, as geographies that bear the markings of modernity and colonialism. The historical and conceptual frameworks being employed here encourage, and necessitate, broader and more complex thinking around transnational surrogacy practices. To extend the thinking around contemporary transnational surrogacy is my intention; to position surrogacy practices within the processes of racialization and colonization necessarily illuminates the often-overlooked histories and positionalities that frame the reproductive transactions.

Julieta Chaparro
University of Massachusetts-Amherst
The Promise of Empowerment: Women’s Rights, Reproduction, and Democratization in Peru
In this paper I explore the multiple connections between the changing political landscape in Peru during the 1990s and the intensification of governmental control over reproduction by limiting low-income and indigenous women’s fertility. I analyze it through the implementation of the Reproductive Health and Family Planning Program 1996-2000 allegedly aimed at ‘empowering’ poor women through the defense and enforcement of their reproductive rights. During this same period of time, Peruvian society was going through a transitional period that marked the end of the internal armed conflict that pitted the Shining Path, the army, and communities in the Andes and signaled the return of democracy after the self-coup in 1992. These processes took place along with the neoliberalization of the economy and the introduction of Structural Adjustment policies in the health sector. I argue that the program mobilized ideas of women’s rights, empowerment and responsible parenthood as motto for a national-level project of democratization. Yet, in practice, the program had the opposite effects: more than 200,000 low-income and indigenous women were sterilized by the government under the auspices of this program. In the final part, I propose two possible readings of the tension between the goals of conveying a democratic orientation and the curtailing of women’s reproductive capacities.

Erin Gallagher-Cohoon
University of Saskatchewan
Dirty Little Secrets: Prostitution and the U.S. Public Health Service Inoculation Study in Guatemala, 1946-1948
In 1947, Guatemalan prostitutes, known to be infected with venereal diseases, were hired by American medical researchers to engage in sexual intercourse with prisoners and soldiers. These women were among the non-consenting and often overlooked subject-groups of the Guatemala Inoculation Study, a human experiment that tested venereal disease prevention among vulnerable populations. Initially, researchers proposed observing the "natural transmission" of venereal diseases through the sexual interactions between prostitutes and male prisoners. Although this experimental method was abandoned, it introduced a gender dynamic into the study that warrants further scrutiny. The prisoners were considered to be the authentic subjects of the experiment; the prostitutes were simply a means of transmitting the infection. The study's reliance on prostitutes draws our attention to the gendered nature of medical experimentation and the unequal power dynamics within clinical settings that leaves certain populations more vulnerable than others. This presentation will analyse the role of
prostitution in the Guatemala Inoculation Study and its continued neglect in the scholarship. The official sources of
the study, the records of Dr. John C. Cutler, began this erasure of the women’s identities and role within the study, an
erasure that continues to this day. I argue that understanding the role of the female experimental subjects is
essential to our ethical critique of the Guatemala Inoculation Study.

Posters
Thursday August 13 - Friday August 14

Lucia Stavig
University of Lethbridge
The Unthinkability of Horror: How women’s rights organizations experienced mass sterilization in Peru
In 1995, Peruvian President Alberto Fujimori inaugurated a new family planning campaign that was to make
publicly funded contraception available to all Peruvian women. The government couched the campaign in the
discourse of women’s rights, arguing that access to contraceptives empowers women. Women’s rights
organizations in Peru helped formulate the campaign, seeing it as a welcome change to Peru’s family planning
policy, which is heavily influenced by the Catholic Church. In practice, however, the campaign turned highly
coercive: between 1995 and 2000 over 300,000 rural, poor or indigenous women were sterilized with a great
number of these sterilizations undertaken without consent and under coercive circumstances. Peru’s indigenous
people have been a constant target of social intervention as so-called backward people. Thus, I read this women’s
rights campaign as the latest economic and social project that sought to create urban consumers out of rural
indigenous peoples under the rubric of neoliberal reform. My particular interest lies in how women’s rights
organizations experienced the coercive turn of the campaign and, more specifically, what made this turn
unthinkable.

Kathleen Herzog
University of Alberta
Shifting Understandings of the Body and Disability
Those unfamiliar with disability scholarship may suppose the body would be a necessary starting point for
engagement with this subject. Indeed, we often judge whether others have or do not have disabilities solely on the
appearance of their bodies, and the general public continues to think of disability largely in terms of what bodies
can and cannot do (i.e. their functional limitations). However, while historical, lay, and medical understandings of
disability have drawn on the body, over the past few decades within disability studies, a social model of disability
was actively used to supplant these biological views, by shifting focus away from the body to the social roots of
disability. This shift in understanding has been widely embraced and highly successful in facilitating many political
gains for individuals with disabilities, but, like preceding views, has also had negative implications. In this
presentation, I draw on interview data to demonstrate how Edmontonian adults with developmental disabilities
attempt to resist both medical and social understandings of disability in their everyday lives, through their
relations with assistive designs and devices, medical procedures, family, and support staff. Additionally, I offer a
more holistic understanding of disability supported by these findings and Deleuze and Guattari’s theory of the
body-without-organs.

Lauren Montgomery
Carleton University
Gentrifying Canadian Urban Centres: Utilizing Commercialization to further stigmatize and ‘other’ sex workers
There is a fear and desire to regulate sexuality, particularly a sexuality that challenges the heteronormative and
patriarchal norms of past and present Canadian society, sex workers, their work, and their bodies have often been
sites of desired regulation and control for the Canadian government. Laing and Cook (2014), have noted that since
sex workers work in urban environments, “sex workers, clients, and the spaces in which people buy or sell sex are
frequently the subject of intervention from those governing cities” (p.505) In the case of sex work, controlling
bodies and sexuality intersects with the regulation and construction of urban spaces, and this often occurs in the
form of gentrification. This paper will explore how the gentrification of urban spaces in Canada has been used by
municipal government to ‘other’ and further stigmatize sex workers in Canadian cities. This paper will explore how
gentrification of Canadian urban centres reinforces the construction of sex workers simultaneously as agents that
must be controlled and regulated, and as agents that must be removed from society. This paper will use the sex work-as-work framework, which considers sex work a legitimate and valuable form of labour to discuss and critique the process of gentrification. It will also provide a Marxist critique of gentrification, and will use aspects of urban geography and feminist theory to explore how gentrification further stigmatizes sex workers in Canadian urban centres.

Chantelle Fitton
University of Lethbridge
The Role of Place in the Experiences of Sex Workers
Control over sex workers has been well documented in Canada both in policy and within public discourse. While legislation governing sex work is created at the federal level and affects all sex workers in Canada, individual experiences with enforcement and social stigma vary according to place of work, gender, ethnicity, ability, and social position. Most research pertaining to the Canadian sex trade emerges from large cities with certain homogenous characteristics not common in smaller communities, such as established strolls for outdoor sex workers, sex work-specific resources, larger client bases and the possibility to make choices about clients and service provision, as well as greater opportunities for anonymity. In contrast, little is known about how sex worker experiences differ in other settings, such as small cities or rural communities. My proposed research will explore sex worker experiences in a small Alberta city, focusing on the role of place in shaping experiences. I will use photovoice as a Participatory Action Research method to involve participants in exploring their individual contexts. Photos will complement semi-structured interviews and act as a platform to engage the community in powerful, visual exhibitions that highlight the findings. This research will help to broaden our overall understanding of sex worker experiences by emphasizing place as a consideration. Practically, it will offer an opportunity to create dialogue on issues such as stigma, rights and social control that affect the community and its members.

Franklin Howard
University of Nevada, Las Vegas
I was a nigger, still: Black and White Bodies in the Gay Art of the Twentieth Century
This paper explores the portrayal of the African-American body by famous American gay artists in the late Twentieth Century. Despite being a marginalized group themselves, white gay men often relegated black men to an exoticized and fetishized other, as evidenced by their visual art. A close examination of famous gay artists, like Tom of Finland and Robert Mapplethorpe, coupled with a “queering” of feminist art critique reveals a stark contrast between the portrayal of the two races. After World War II, physique magazines fueled homoerotic fantasies for gay men across the United States, but this mode of communication often prohibited, or at least limited, the appearance of black men as models. A few decades later, Tom of Finland introduced black men into his homoerotic story art. While not American, Tom’s work became iconic for gay men and their art across America, which was problematic given his portrayal of black men. More often than not, his pieces reduced the black male to a phallic symbol or a rapist, tropes common in American history. Robert Mapplethorpe’s photography of nude black men further robbed the black male body of its agency by reducing it to a fetish object- a body to be viewed and not a person to be understood and respected. Essex Hemphill and other critics chastised the gay community for its entirely white social identity, but the racism of the 1980s stood on a larger tradition of othering the black body found within the visual narratives found within gay identity formation.