

Raquel Willis (she/her) (00:01)

Okay, great. All right, okay.

Welcome everyone. I'm Raquel Willis, co-founder of Gender Liberation Movement, and welcome to one of four amazing roundtables for Trans Week of Visibility in Action, which GLM is hosting March 25th through the 31st. This week, we're making one sustained argument. Gender liberation is for everybody.

The fight for trans rights, lives, and liberation is connected to everyone's fight for bodily autonomy, self-determination, and the pursuit of fulfillment. Today's conversation sits right inside that frame. So the right has actively used intersex experiences and existence as a weapon against trans experiences and existence as well.

And while the same administration defends so many things, including non-consensual surgeries on intersex infants and just simply the erasure of intersex people in general, we know that their fight follows no logic.

So our job today is to make sure that we name what the logic should be clearly and to build an analysis that our movements need to fight even better and even stronger. So our amazing panelists, starting with Sean Seifel-Wall, co-creator of Strategy Lab for Intersex Movements or SLIM, Hans Lindahl,

co-creator of Strategy Labs for Intersex Movements, King Mariah Askew, poet, activist, and founder of the Bearded Lady Rebellion Collective, Nessa Calvin, illustrator, videographer, graduate of Interact 2025 Youth Cohort, and Lee Baumgart, co-founder of Tigers, Transgender Intersex Gender Expansive Revolutionary Resources and Services. So let's dig in and I'll start, maybe I'll start with you, Nessa, if that works. ~ So can you share a moment when...Our medical system has made a decision about your body rather than with, about your body, rather than with you. ~ And what did that cost and how does that shape how you move throughout the world today?

Nessa Calvin (02:51)

Right. So, ~ I knew that there was something, let's say unique about my body from around the time I started puberty. ~ I was armchair diagnosed with a condition at 15 that my doctors did no testing for. They just looked at me and said, we think you have this. And I said, are we going to run any blood work? And they said, no. so I got put on medication that for years and years and years did nothing to actually help the symptoms I was experiencing endocrine and metabolically and left me with some side effects that I'm still dealing with today years after stopping taking them. I was 15 when I was initially diagnosed. I was not, it wasn't until I was 20 that I was tested at all for, ~ sorry, I'm going to repeat that part. It wasn't until I was 20 that we actually, that the medical system actually deemed it worth testing what was actually going on with me. ~ It wasn't until 21 that I actually had any imaging done to figure out what the real issue was and when I was put on a medication regimen that actually worked for me. ~ I was paying co-pays for years for hormonal medications that were actively unhelpful. And if I had had doctors listen to me, trust me, believe me, and take a little bit of a deeper dive when I was younger, it could have saved me years of not knowing what was going on.

Raquel Willis (she/her) (04:25)

And can I add another layer? I'll also add this for everyone else as we continue to go around. How did you make the decision to move into your power, that you were going to reclaim your identity and also reclaim your power moving forward?

Nessa Calvin (04:44)

~ my answer to that would actually be it was related to the beginning of my transition because, for people who undergo gender affirming care, you have to see a

bunch of specialists first before they do any treatment for you. ~ and I decided at that time to ask the endocrinologist. was seeing, Hey, I was given this diagnosis years ago. I don't think it's accurate. Can we please run some more tests? And finally, that was the first doctor who said, yeah. sure we can do that. ~ And that taught me that it was okay to push back a little bit on the first thing I was advised.

Raquel Willis (she/her) (05:23)

We love a good pushback. All right, Saifa, I want to kick it to you as well, you know, holding both a moment where you realize the medical industry had made a decision about your body, likely without consent, and also that reclaiming the power after realizing that.

Saifa (05:47)

Yeah, you know, I think for me, ~ what I have realized is that, you know, when I was growing up, there was a lot of lies and secrecy and shame around ~ intersex variations. ~ And there are many, there are many. ~ And I think for me, ~ I didn't have, I think there wasn't thorough informed consent. I think with thorough informed consent, I would have made different decisions because I was actually okay with how my body was changing. ~ And because I wasn't given thorough informed consent, it led to a surgery that would alter the course of my life, right. And so, I think for me, there's a shift, you know, I think... for me the shifts were gradual over time. But I think what became really clear is that my connection to other intersex people learning about their stories, ~ hearing certain strategies, right. Like, ~ you should try taking these hormones or you should try to get a bone density scan. Like, I think ~ coming out of isolation and finding other intersex people, connecting with other intersex people... ~ sharing stories, sharing secrets, sharing strategies, I think that has really sort of shifted the narrative, ~ even that I had internalized, right? ~ So yeah, think it's compared to where I was before and compared to where the movement is now, I think we can see from the panel that our movement is so vibrant and so healthy and so resilient.

Raquel Willis (she/her) (07:38)

I saw some smiles and nods there. Lee, would you like to share?

Ly (07:47)

~ I think I largely have an answer similar to Saifa around what made you come into reclaiming and coming into being like, no, this is a part of me and I don't need to hide it. ~ I was one of two intersex people a part of Minnesota Transgender Health Coalition. ~ and I was like the only intersex youth that I know of. and a lot of people would do that. Well, I'm asking you a really invasive question. And that's how I felt really alone and like, had to know everything. And like, I wasn't actually a part of community. and by chance, interconnect ended up having their conference in Minneapolis. And I had been doing a lot of like organizing around intersex activism since I was like a young teen. ~ But I'd never been able to be in community because I was always like, I'm advocating for everybody, but I don't get to just have peers. ~ And that was the first time where I got to meet people who could teach me and people who could tell me that everything I was dealing with and existing with in all of my stories were completely normal. And I didn't have to explain any part of me. There was no part that had to be explained because I just walked in and everyone was like, yeah. Just complete acceptance and knowing that that was even a possibility was so important. Cause I think that it's really easy to lose track of like, ~ like we're fighting for liberation, but what does that even look like? And being around other intersex people was like, this is what it looks like. Like this is what I want. This is what I'm doing this for. And now every time I'm with other intersex people, like this is the point. This is the purpose. It is for this feeling. It is for this acceptance. is for... this joy and wonder and ~ just like this can exist. Like you don't have to be in pain all the time. You don't have to be an ambassador all the time. I was really, really lucky

to be able to do somatic work with Saifa ~ and that unlocked a lot of it. Or like hearing King's poems really, really struck a chord with me. And so it's just being in community is really the point of it all.

Raquel Willis (she/her) (10:14)

Yeah, King, I see you really resonated with a lot of what was just shared. ~ Yeah, tell me how all of this is landing for you, this discussion right now.

"King" Mariah Ayscue (10:29)

It's interesting because before I knew I was trans or intersex, you know, I'm, black indigenous Ramaphel Muncie Lenape. And so that's what I understood about my body. And I also, ~ you know, I have bipolar disorder, contamination OCD and eating disorder history. And a lot of, since I do have my intersex variation causes hyper androgynism in varying different forms throughout my entire 30 year old life. But something that doctors did that really affected me was not understanding my hormone levels and my testosterone always being higher and how that can affect especially bipolar disorder. And so I would say that it was the culturally incompetent care that then affected my intersex and trans care because a lot of the triggers that I was having, wasn't because I was doing something that was triggering like alcohol or something like that. It was directly from different systems of oppression that were affecting me and then triggering me and I was reacting off of that. And so I think that for me, in order to reclaim my trans and intersex identity, I had to also reclaim my Black Indigenous identity and say that I'm deserving of care, you know, that is Black, that is intersex, that is trans, that is intersex. Like all of my intersections deserves care. But it needed to be ~ that way, but it started from a place of dealing with the hormone levels and the balancing and seeing myself as a whole person and not a hormonal imbalanced mess, basically.

Raquel Willis (she/her) (12:30)

Absolutely. mean, go figure, right? Intersex folks are living in intersections. ~ Hans, what about you? Can you share more? And obviously, you've worked on so many campaigns. So I'm very curious about the move from the personal story into that power piece as well.

Hans (12:54)

excited to get to that. I want to offer some specifics, which I don't always, always talk about, but you know, I'm white and a dyke, and I think those demographics very much, you know, obviously interact with the kind of healthcare experiences that a person has. And so when I, a teenager, was finding out this information ~ through distressing medical interactions, You know, my particular experience is that I was born, you know, X, Y with no internal anatomy and sort of a mix of characteristics. And the interactions for me as a teenager in that medical system were 100 % framed around fertility and gender congruity. 100%. And so in that scenario, I always remember as a teenager being told, that the surgeries and the hormones that I was going through were to prepare me for my future husband, right? Those were the words that the doctors used and going through those experiences really laid bare to me that that intersex piece really laid bare the amount of work that it takes to make someone into a white cis woman, right? Like this enforcement piece, this enforcement piece, right? That's so unnatural, that medicine plays a role in the enforcement and the policing of social norms. And that's sort of cross-influential. And Saifa is really influential in my thinking of connecting that to state violence in different forms. ~ And so everything that I went through was connected to, again, fertility and gender congruity, not the osteoporosis that you'll deal with, not you know, what might be your wishes for this, but sort of how can you become someone through this system that reproduces white supremacy dominant bodily norms, right? And so I really love the differentiation that Morgan Holmes, one of the sort of four mothers of intersex studies of intersex movement makes is that like, this is sort of explicitly a queer identity movement. And I think for me, that turn into power came after being a

teacher, I would honestly say that that turned into power was meeting trans people. I think that people who have intersex first and then trans have a different experience than trans and then intersex, that there's an influence to that order. And so for me, coming from where I came from and seeing, whoa, there's this corollary of people who had, at face value, maybe went through similar things, but in a way, that was through consent, it was them being able to shape their bodies instead of being denied the chance to keep their bodies. And so that was really powerful. I love trans people.

Raquel Willis (she/her) (16:00)

Yes, look, we love trans folks. We love intersex trans folks, which is why I'm so glad that we have this specific intersection here on this panel. Saifa, I want to kick it back to you to maybe start us off with this next round because we've had some conversations about some of the overlaps of care and needs for trans and intersex folks. ~ But also sometimes there are differences as well, but we often hear moments of overlap that may not actually be rooted in truth or moments of differences that may not actually be rooted in truth. And so can you talk about maybe what harm comes from us not having the real conversation about where those divides begin and where those connections? where those connections begin and where those divides may begin.

Saifa (17:04)

Yeah, I feel like trans and intersex folks have such a unique history, right? ~ I think we have to be very honest about the fact that ~ a lot of... When the gender identity clinic was founded at ~ Johns Hopkins Hospital in Baltimore, they actually saw more intersex patients than they saw trans patients, right? So there's always been a constant policing of trans identity, right? ~ And sort of like what the other panelists said, ~ there has always been sort of like... ~ sort of maintaining of this sex gender binary, right. Which is why these surgeries are allowed to keep happening to intersex infants and children and why trans people are systemically denied care, right. ~ Because I do feel intersex and trans people really transgress, really like disrupt the sex gender binary, right. ~ And so I think... there was sort of like an awareness of each other, there was a sort of like... Just sort of like when I think about transsexual menace, transsexual menace like actually, you know, coordinated the protest against the American Academy of Pediatrics Conference in 1996 and invited him to have a attitude, right. But I think what has happened... is that there has been a sort of divergence, right? As trans people got more rights and more access, know, intersex people are very critical of the medical establishment, right? But we also need care. We also need care, right? So the thing is, is that I think we have very legitimate arguments that have been dismissed by the trans community because trans folks, you know, need to access care. then, you know, in the last 15, I would say 15 years, like trans people have been able to access gender affirming care, right? ~ And intersex people, we also want gender affirming care that's on our own terms because we actually get gender affirming care and interventions that we don't want, right? ~ Again, because it's the need to maintain the sex gender binary. And so I think what that looks like on a very practical level is that when you have intersex people who are accessing care, you know, it's not intersex specific, right. Like, for me in my experience as an intersex and trans person is that, you know, they're just like, okay, you're FTM, you want to be a man, we're going to make you a man. And then they're like, we're going to give you these hormones and we're going to do this. And it's not actually looking at my particular variation and what those hormones can mean for my body, right. ~ And so, I think... you know, where we are is this like, you know, and I'll, you know, kind of pass it along is that because of not being aware of this history, not being aware of how the sex gender binary, ~ how it implicates trans and intersex people, of trans people losing that history of like being connected to intersex communities, it has allowed the right wing to actually, you know, weaponize.

intersex identity and experiences to harm trans people, right. And so, I think it's so important that we reclaim that history so that we can actually ~ be prepared for the fight that's ahead of us.

Raquel Willis (she/her) (20:50)

I see some snaps. Any of our snappers wanna weigh in here? Nessa?

Nessa Calvin (20:59)

~ yeah, I guess I just wanted to, ~ sorry, let me start over. ~ can't talk tonight. Yeah. So I guess I just wanted to add on and say, I think that this question in particular, I thought about a lot. I talked to some non-intersex trans friends about this to get their takes on how this has affected them, because I know how it's affected me and my community. And I think the common thread there is that trans people and intersex people are looking to define their bodies by their own terms and have the ability to get the care that they want and deny the care that they don't, which to call it care is, ~ and I think we as a society need to stop looking at gender affirming care as a corrective measure, as something to normalize people and instead look at the person as an individual on their own terms and what they want and what they need and what is good for them. And that is not going to be the same for everyone. And I do think that there are some differences, like Saifa said, in the way that trans and intersex care vary, even if it's people going for the same thing. Like, for example, ~ a woman who is taking estrogen because it's part of menopause treatment is going to be on a different cocktail of drugs than a woman who is taking it because of a dysfunctional ovary or a woman who's taking it to transition and to imply that those are all the same thing or to treat them all as the same thing medically, ~ it means worse quality care for everyone. ~ And while in some ways our movements are very similar and the needs we have are very similar, there are those important distinctions that need to be made in order to respect all the people they affect.

Ly (22:49)

Can I add on to that one? Okay, so I was thinking about this, about how like trans and intersex people need some of the same things from medicine, but we need them in different ways. So I've been on hormones on and off since I, like to masculinizing hormones since I was 18. And they have done nothing for me except to change my voice. ~ And I saw nothing else.

Raquel Willis (she/her) (22:52)

Please, yes.

Ly (23:17)

~ And I was on estrogen before I was on testosterone, ~ kind of against my will. ~ And so when I went to get like trans care, like get on testosterone, I went to a trans clinic because I was like, clearly they're going to know the most. This is going to be the place where I get the most affirming care. And they put in my chart an intersex diagnosis. And then they were like, and suspected other diagnosis, like a different intersex diagnosis. And then they didn't tell me that I had this diagnosis because they were like, well, you're going on hormones anyway, so it doesn't matter. You don't need to know this. And I didn't find out until three and a half years later when ~ that doctor left and I had a new doctor. And they were like, I see this in your chart. And I was like, excuse me? There's what in my chart? Because I, at that point, had been trying to get answers for years about this intersex variation that I really suspected that I had. And they had the proof in this paperwork for years. And I hadn't been masculinizing other than my voice. And they just kept being like, we'll just add more tea. Clearly this will work for you. And it just kept not working. And nothing was being changed because they were like, you have to be like our other trans patients. ~ And it wasn't until I met other intersex people that I had an intersex person who was like, yeah, you need to be on DHT, which is illegal in the United States. ~ And so because people assume

that intersex people are gonna transition the same way that parasex trans people are going to, I'm not actually getting the transition care that I need. And so we could have been doing other ways to see what would work, see what was going to be successful. And I just didn't have that. And that was so frustrating ~ because like intersex people just need different care. And so yeah, I don't know what else to say to that. But I always think about that story when I'm like, no, like we are like, even if we have the same goal, it's going to be different paths. And I think another thing too is like, there's an assumption that when I go into a trans clinic and I'm like, yes, I'm trans, but I'm also intersex. And I have a lot of medical trauma from what was done to me as a kid and a teen, that the assumption is because I have the trauma because I didn't receive the care that I needed. And so they're like, we're gonna give all of the care to you, which is actually a lot to deal with. And I'm like, whoa, or there's the confusion of like... okay, you're intersex, but like, why are you bringing that up? Like we're doing trans care right now. ~ And so just those two identities need to be held and these doctors need to understand intersex variations in order to give us proper trans care.

Raquel Willis (she/her) (26:15)

And Nessa, let's have you respond and then King jump in. And then Hans, I want to add another layer here around kind of the coding discussion. So Nessa, go for it.

Nessa Calvin (26:27)

Yeah, I guess just jumping off of what Lee said, I also wanted to share a personal experience here about sometimes when you are intersex and trans at the same time, those two aspects of your identity can conflict with each other. I, as somebody on the transmasculine spectrum, would love to be on testosterone, and I can't because it is bad for my body. And I've had to take feminizing hormones ~ to deal with some of the intersex related stuff that I'm on. And in that way, I'm definitely not the only person who's experienced this kind of thing before. And I feel like it's not really talked about so much that sometimes what you need in one area of your life and in one area of your medical care and in another don't line up with each other and sometimes hard choices have to be made. And that's, think, kind of an intersex constant struggle. That was all.

Raquel Willis (she/her) (27:22)

Yes, thank you for sharing. And I think there are a number of folks, right, even who may not be intersex, right, or may not know that they're intersex, who may want to transition a certain way and not have the opportunity to do that for a whole host of reasons. So I appreciate you for that vulnerability. King?

"King" Mariah Ayscue (27:51)

I was just going to say, like, really at the core, and maybe this is just ambitious of me to be saying, but like, the whole medical care system just needs to be like, X'd out and just reframed from an anti-colonial care perspective. Because what it comes down to is it's eugenics. All of it's eugenics, all of it's eugenics, like, it's not, that's what it is. So, to me, in this work, there's so many different forms of care, but what ends up happening is anybody of any marginalized intersection is expected to be the eugenic way that they want you to be, right? So, you know, I'm also disabled. I'm, you know, another actually, if I even go back just to my Black Indigenous identity, a small example is just I see visions and I get messages in my dreams. And when I was explaining other stuff that I was dealing with with my original like doctor stuff before I went to a Black therapist, ~ they were like, so it's psychosis. And I said, no, it's not psychosis. It's this. I'm not, I was like, and you know, so there's this, this idea of like, this is the only way you get to exist because, ~ so I just think in general, it's not just about the intersex care and the trans care. think even deeper, it's like, we got to talk about the eugenics of it and like, what does the future of like anti-colonial care look like?

Raquel Willis (she/her) (29:37)

Absolutely, as someone who also, and I've never really said this outside of my writing, my visions come in dreams as well. And I feel like it's definitely a familial thing. ~ Hans, I wanna bring you in here to answer that initial question, but also to talk a little bit more about how providers are coding some trans patients with endocrine disorders or maybe other ~ medical disorders to protect their access to care. What is the cost there and who pays it?

Hans (30:17)

I want to build this answer off of what King is doing to kind of expand the frame of like, we're in this place where we have to rely on industrial medicine for a lot of these needs that we have. And I would love for that to not be the case, right? Because the whole system has always been rotten. so I think about things like, the histories of how a lot of trans surgeries were developed on non-consenting intersex youth, right? When we talk about the gender clinics of the 50s and 60s. Like Saifa said, it was more about correcting ~ intersex youth to enforce ~ bodily norms than anything that people would have assented into. And yeah, I think it's a complicated history with ~ the way that medicine as a colonial mess looks for sort of this proof in the body, like is so ~ tethered to observation. And this is related to a story that I brought up Raquel that we were talking about, which is that when I go into the big LGBT clinic in my city, I'm a patient there and I say, huh, how are people dealing with the onslaught against trans care right now. ~ You know, like how are people handling that? Like on the insurance side, how are patients handling that for data privacy fears? And what the provider said to me was, ~ we've just been coding everyone as having an endocrine disorder. And so complicated, right? Because I think it's one of those situations where like the provider said very explicitly to me that like, but don't worry, you're fine. Like that's literally the case for you because you have this safe proof on your body, right? So that if you need to access whatever, it takes a lot of testosterone to be this femme. Like intersex people really fuck with a lot of assumptions about direction, a lot of assumptions about, ~ you know, how medical technologies might work. And that really blew my mind that like relating to the comments about the limitations of the medical system, that it still rests on sort of this physical proof of intersex people being this last ditch stand for trans access. And I hate that. I hate like, I'm angry that people are ignorant of the histories of how the care rests on intersex abuse, but I'm angry at the system, right? ~ When I was at a rally in 2020, for Lion Martin in San Francisco, the trans clinic was about to close. And they spoke about how doctors at that clinic were really integral to getting insurance to do anything with trans care at all in this country. But the grounds on which they did that was making the financial argument that it was cheaper than suicide. That was the grounds. The system has always been rotten, right? So there are just so many ways in which we're pitted against each other to get the things that we need. And I would dream of a day when there's a different way for broader access to the things that we need.

Raquel Willis (she/her) (33:44)

Beautifully put, beautifully put and shout out to Lyon Martin. ~ So this takes us into a conversation about a broader intersex liberation movement. ~ that many folks are not aware of has existed for quite a long time. It's been interesting in my own organizing work, just, you know, whenever I'm meeting groups in other countries and other parts of the world. Often there is more of an intertwining of the fights for intersex liberation and broader queer liberation or trans liberation. And yet here in the U.S., you know, in the so-called imperial core, the belly of the beast, you know, we see very strong delineations between the fight for intersex liberation. Can y'all talk about that, you know, and I think Saifa, you've shared some of where that has deepened at least in the last 15 or so years. But can you talk about the pitfalls of that kind of frame that intersex liberation is so utterly disconnected from queer, trans and gender liberation?

Saifa (35:14)

Yeah, you know, I think why people don't take up the intersex issue is that because I think people feel that it's too hard. What we're talking about biology, people like I didn't take biology, I hated biology. You know, we're talking about chromosomes, we're talking about reproductive organs, we're talking about genitals. ~ We are talking about characteristics of sex. People tune out. And people don't tune in unless they have a personal stake. Like, they have a child who's intersex, they have a sibling who's intersex, they themselves are intersex. And when we kind of expand these conversations ~ around intersex identities to include people with PCOS, then people's ears perk up, right. Because then they're like, I have PCOS. ~ I know someone who has PCOS, right. And you know, I think part of the issue for me is that people really want to distance themselves. And I think it's a really good barometer of where we're at as far as understanding intersex identity, right. That there's still a lot of stigma, there's still a lot of shame attached to being intersex because I have had people in the movement. people in the movement say like, I've had ovarian failure, I have this thing, I have that thing. And then I'm like, and they're like, I see what you're doing and I'm not intersex, right. And so, you know, it's really this distancing that's like, I am not like you, right. And I think when we realize that we all have a stake in this liberation like, then it can help shift the dialogue, right. Because at this point, you know, I have people... People know who I am and not in the terms of media, just in terms of the streets. Like, I can go into a movement space and people know who I am and people know the work that I do. But yet, they still haven't taken up the intersex issue. And so, where's that disconnect, right? And I think it's just like when we think about the arc of liberation is long, right. In terms of movement building, the intersex movement is so young. 30 years old this year, we're young, right. When I think about black liberation, when I think about queer liberation, when I think about black liberation, this is centuries in the making, this is decades in the making. When I think about queer liberation, it's decades in the making. So, the thing is we're still young, but the thing is I think people need to move beyond. Just people, I think people have to have a stake in their own liberation and their own freedom to free their own bodies before they're willing to even think about intersex liberation.

Raquel Willis (she/her) (38:22)

Wow, a testimony, a sermon, really. ~ And I'm wondering if anyone else has thoughts on movement. Lee, it sounds like you have something.

Ly (38:39)

I had, when you were talking, I was just thinking about the few allyship, like big moments in my life. And one of them was with Marsha Howard, who's holding it down at George Floyd Square. And I'm a teacher and she's in charge of the teachers union. And I had had an activist crush on her for forever. And I went to go be a delegate and she was just there. And so I was like, hi, hello. ~ I'm a teacher, you're a teacher, I wanna make sure that we're including intersex stuff in the curriculum when we're teaching health. And she was like, yeah, I was a part of ISNA as an ally because I believe in bodily autonomy and so I'm like, I love intersex people. And then she gave me a big hug and I was like, what is happening? No one ever knows us. And in the same moment, I was sitting next to a black indigenous student who had just turned 18. And it was like, I want to learn how to be a delegate for the first time. And I had brought ~ a resolution to the floor that was like, we're going to support intersex people as a part of the party. And she was like, I know intersex people. And she starts just listing things about AIS that she knew. She was like, and they all look younger than they actually are. And I was just like, ~ what? So was a very like fellowship-filled day and then I also think about just like cool local organizers you do and Patricia Weston who like are always talking about us to the point that local orgs like now we're always saying the word intersex even if they're truly including us but they're saying it and it was people who were very deeply deeply entrenched in other movements who knew about

us and if they weren't entrenched in other movements they did not know about us, but it was the people who were really knowledgeable about bodily autonomy for other people that would encounter us through those intersections of fighting for autonomy. And so those are the places where I see actual ally shit is when they have done so much research in bodily autonomy and their groups and then it starts spreading out. And so that's where I find community and like that's where I'm like all organizing has to be intersectional or like it just doesn't it doesn't work it's not real it doesn't exist ~ like part of the part of the ~ i'm going to transition you the way that i would a parasext trans person is because this like there's a they are still believing the sex binary or they're like this is how people have to transition but also that's based off of white bodies and like who's intersex and who's not intersex is based off of white bodies and so Like we see like people who aren't white or like I'm I'm Mizrahi, I'm a Mizrahi Jewish person. ~ So like all of these folks are like the people more likely to be diagnosed as intersex. And they're like, you're not doing whiteness the right way or you're not white. And so your body is non-normative and we have to correct it. And it's similar with the, you're not transitioning the right way. You have to transition in this binary way. Well, it's not gonna work. So then you find like these, you get to sit in the movement with these other groups and you're like, I'm with it with you because if it's not with you, it's not gonna happen. Also shout out Marsha. I love Marsha. Support Marsha.

Raquel Willis (she/her) (42:13)

We love a good shout out. ~ Feel free to add on to that question. I also know I wanted to add a question in here as well because we've spoken a little bit about ~ the visibility piece. So Saifa, you mentioned being good on any. ~any MLK Boulevard basically when it comes to your organizing work around intersex liberation. But obviously when you're a part of any kind of marginalized group, often there are only some stories that rise to the surface, right? And that can be a door that opens, you know, space. And in some ways, it can offer a ceiling of the kind of stories that break through. And so I'm wondering for everyone, what are the kind of narratives around intersex experiences that you want to see more of, particularly in media, but also just in culture broadly? King, would you like to start as our resident artist, poet? Yes.

"King" Mariah Ayscue (43:35)

Can y'all hear me? Okay, sorry, my thing was acting like really strange. ~ Yes, ~ it's interesting. So I work at a movie theater and while I'm still in school and while I was at the movie theater, ~ Julie Cohen ~ lives in my town, I live in Montclair and she brought the Everybody documentary to my theater. I had no idea what it was. Some random white woman came up to me who like is a member with You know, my job, it was like Mariah, cause I'm very openly like before, this was before I knew I was interested, I'm very openly trans. It's like, there's people like you inside of the film. I said, black people, Jane? And she's like, no, well, yes, but the, sex thing. I was like, this white woman is crazy. But anyway, I went to go see the movie and I walked in and Julie was there, but I didn't know it was Julie yet. And so she was like, I saw you, I hope you, cause you know, I'm very clockable cause y'all see how I dress. And so she was like, I was hoping you would come in cause I was sitting outside with my twin and we go into the movie and I'm sitting there and it was actually like you Saifa where you were talking like, you know, that I was like, wait, hold on. And so to me, I was like, I didn't know I was intersex until watching that film and hearing ~ your River and Alicia's experiences. But more importantly, I was like, it wasn't even just seeing a black person. It was seeing a black person who was confident, who is positive masculine, who is, you know, intelligent and smart in these things. And it's like, it's like, nah, like that, that could be me. Like, not just intersex me, but it could be me. There's a future where I can be these things. So to me, I'm like, it just matters when you see somebody who looks like you in the movement in general, you know, of course, Rivers from Jersey. So shout out to that. I was like, I, but you know, to

me, just like sitting there and seeing like someone who looks like me on that screen, talking about these experience in a very blackity black way, like, you know, to me, I was like, that's what was so important. You know, and so now, like with representation wise, that's why my poetry ~ and my music is so important, like for me to express my own experiences ~ in a very accessible way because people can go on my Instagram and look at the poetry or if they want to buy the book, they can buy the book. If they want to go on my Spotify, they can go on the Spotify. in general, they just could have access to my stories in a way. So that way they can, they might say too like, ~ you look like me and you're talking about these experiences. So I just think that we not only need more representation, but it can't just be majority white intersex people. It just can't be. ~ Like I love y'all, but sheesh.

Raquel Willis (she/her) (46:59)

Well, I want to take a second, Saifa. I mean, how does it land for you to hear that? Your impact.

Saifa (47:10)

You know, I'm trying not to... Yeah, it makes me... It just makes me teary a little bit, you know. ~ Because I think... ~You know, I do this work so that we can get free, you know. And, you know, I think every day that I wake up, I ask God, I was like, God, you know, protect me and guide me until my feet touch the ancestral plane. That's my prayer every day, you know. And I am, you know, my dad died when he was 50 years old. My mom died when she was 74 years old. ~ And I am going to be 48 this year. And I think for me, I think about like how I'm just so humbled to be able to see this, to see the next generation of leaders who are so defiant and who are so bold. ~when I feel like when I was talking about black issues I was punished, you know. I was punished, I was excluded, I was not supported. ~ But I stayed the course because I feel like for me as a black intersex person I had to create a space for myself to exist. And I feel like when I see King, when I see Ariyanju, when I see black and POC intersex people in a public space... I'm just like, they are creating spaces for themselves to exist, you know, and they are continuing the legacy that we have created and that we are building on, you know? And so I think I am just deeply humbled ~ and in such gratitude for the leaders who will bury me and who will continue to fight.

Raquel Willis (she/her) (49:21)

Hans, I see you. I see you nodding. ~ Obviously you and Saifa are continuously building slim. ~ Yeah, what are you thinking right now? What are the narratives you wanna see more of? What are the kind of leaders that you're excited to see grow into their own right now?

Hans (49:47)

Yeah, woof. mean, I feel like, you know, flowers to Saifa always, because, ~ you know, you've just uplifted so many, so many of us, including myself. Yeah, guess rooting in history a little bit that what Seifer brought up is that intersex work is quite young. 30 years this year, 2026, is the anniversary of the first public protest in Boston. And I think to ground in a couple of historical pieces, a lot of that was in response to or surrounding the fact that FGM law newly passed in the United States explicitly excluded medical IGM, ~ medical clitoral vaginal surgeries on infants. ~ And that's what we see now. The history repeats itself. That's kind what we're seeing in every piece of anti-trans legislation that if someone has a verifiable genetic disorder, then that is, ignore all the above. And we see that in WPATH. see that everywhere. We see that. We're so used to seeing that. ~And coming from, I I think the early intersex movement and still some intersex spaces can be somewhat homogenous, but I think one of the trends is the secrecy and shame that before the internet, people's families were told, tell no one, burn the medical records. Right. So I think to be coming from that 30 years is a blip. Right. And so I'm really excited to be a part of this. And I think what I would really like to

see is a move away from the idea that intersex as sort of like this individual self-discovery process, like I mean, I guess there's that angle, right? Like understanding oneself medically, genetically, whatever. But I would like to see a move away from the sort of like individual holding tight to something that's secret or personal or identity-based to a questioning of sort of ~ where is the line? Because I think we've wrestled with medical control for so long that... We get the question, like, when is someone intersex? And to that I always say, well, when is someone tall? I don't know. But I guess the point is, as we're seeing sex being targeted as the grounds on which we are coming for every civil rights protection, that we're going to be rolling back, you know, using trans people, throwing trans people under the bus by using sex to come for civil rights. We need that story. We need the story that intersex people have always which is that sex is a bodily system that everyone has. It is something that's alive. It's something that changes throughout the life cycle ~ for everyone. If you're intersex trans or not, right, menopause, life transitions, surgeries, whatever, right? Like we need to be thinking about this in more expansive ways.

Raquel Willis (she/her) (52:51)

Beautiful. We all transition at Honey. Constantly. Well, mean, Hans, you brought in the history. mean, maybe it's only right, you know, we end on some of our youth voices and what y'all are excited to be a part of, right? Because you have such a strong foundation as Saif and Han to share. King, you've already spoken to some of this about being able to benefit from the work that folks have been building for y'all to come into. So Nessa and Lee, Nessa and Lee, can y'all share your thoughts on intersex liberation and power right now, but also the narratives that you want to bring into the floor.

Nessa Calvin (53:45)

Yeah, intersex is a fact of life. It's something that happens, something that exists more than a lot of people are willing to talk about. And I feel like there's a lot of ~ when intersex people show up in the news and when intersex issues show up in the news, it's oftentimes, look at this person who's kind of male and kind of female, where do we put them? And it's not really about the person, it's about the categories. And I'm a firm believer that there is no such thing as perfect gender conformity. ~ Being female is defined as the absence of being male and being male is defined as the absence of being female. And we all exist somewhere in the middle of that. And I would like to see less of where do I belong and more stories about I belong where I am. And actually something that it was an idea that I kind of had brewing in the back of my head for a long time, but like Hans kind of helped me bring to fruition when we talked about writing last year, ~ last summer, was someday as a personal project, I would like to make a comic anthology taking real life stories from other intersex people just about some part of their lives that they feel is important and relevant and otherwise would not be told and illustrating them and putting them all together so that people can see that there is infinite beauty and diversity among us.

Raquel Willis (she/her) (55:19)

Beautiful and you just stated it on record so if anybody try to take that idea you heard it here first. I love it. I love it. Our organizers, our artists, ever the collaborators. And Lee you want to take us home with the final word?

Nessa Calvin (55:26)

If anyone wants that idea, contact me. Let's talk, please.

Ly (55:39)

Yeah, sure. ~ that feels, ooh, that's scary. One of the things that I think of is just like, hmm. One of the worst things that gets our community is the shame. It is the second that you find out that you're in your sex, the second that you're even like, wondering if you are and like going to the doctor, it is shame. It's shame,

shame, shame. You keep that hidden. You keep that under wraps, you do not talk about it. And I'm a sex ed teacher. And this past year, I was teaching my sex ed curriculum. And we have like one little slide that mentions what intersex people are. And I read my little slide, and I had a student raise their hand. And they were like, I have Turner syndrome. And I left school that day and I cried about it. ~ And I was just, that kid had no reservations. I think I might've been a little bit like after, afterwards I like came up to them and I was just like, yeah, if you ever want like intersex community of resources, there's this really cool group called Interact. And they were like, yeah, okay, I'm fine. I'm good. That was so healing for me just to see. Like, oh, this kid has no shame about it. And just being like, oh, that's, we can have that. Like we can have it. And I think that we see that happening more and more and more. Like when I was 15, I was at Pride and we had intersex pins. And this woman burst into tears. And she goes, both of my kids are intersex and all of these doctors are telling me to do surgery and I don't know what to do. And I had just found out I was intersex and I was just like, don't do it. Don't do it. I was so scared. ~ And we became friends on Facebook and her kids have just graduated high school and they're thriving. And they didn't have surgery and they just got to have all that autonomy and they're just existing and thriving. And whenever I come to Hans & Saifa and I'm like, I have this idea. They're like, so we've already started that, but that's so cool. And with a group that's like, with a movement that's only 30 years old, like we're just starting out, right? So when I grew up, there was Isna and that was it. And it was all academic, which was very cool, but like, wasn't really for like 15 year old. ~ Versus I was just told about Yes Philadelphia, which has like genital anatomy coloring pages that are very intersex inclusive and have scales of like, this is how different genitalia can look with different variations. And it's like coloring pages for youth in class. ~ Or I'll be talking with Nessa Calvin. Nessa Calvin's like, look at this illustration series I'm doing. I'm like, what? Or Mariah will be like, here's the most beautiful poems you've ever heard in your life, and they're here. Or Hans is like, and I'm writing these articles, the Scarleteen. And Hans and Cypher, like, I'm doing this timeline. Like, there's just actual resources that are accessible for the very first time in this movement and it is happening now and we get to see it in real time. And so there's not going to be this gap in generation that didn't grow up with resources. They have it out the gate now. And that's the joy that we get to have is we get to have a new generation of intersex youth that will not have this shame because they will have these adults that we have here in front of us to look up to and see and not be alone. It will not be the single BuzzFeed video and that's it. God bless that BuzzFeed video. We need it more than just the BuzzFeed video.

Nessa Calvin (59:34)

I think we've all seen the BuzzFeed video, yeah.

Raquel Willis (she/her) (59:42)

but not a Jubilee video. Okay, wait, I probably should have said that. there it is. ~ okay, great.

Ly (59:48)

and I just wanted to say...

Hans (59:49)

There is one, and it's our friend Jahni who did great. You did great

Ly (59:53)

Yeah!

Hans (59:55)

on there. She nailed it despite, despite Jubilee.

Ly (59:57)

Yes.

Raquel Willis (she/her) (1:00:00)

Right.

Ly (1:00:00)

And, uh, Amelieca, who had that whole little series. So like there is, there's cool stuff now. Um, but I love that buzzing video, but we really needed more. Uh, and I already put this in shot, but I just think it's fun that King's 30 and the movement's 30. Like there is some sort of sign from the universe that is happening right there.

"King" Mariah Ayscue (1:00:21)

You know, I was literally just thinking that. was like, oh my God, you're right. I'm 30. Like the movement's 30. So I'm growing with it.

Ly (1:00:28)

It started when you were born. It was you! You're the movement.

Raquel Willis (she/her) (1:00:33)

You're growing with it. Well, y'all, this has been so beautiful. Lee, I feel like you completely painted, you know, what a vision of intersex liberation, gender liberation, trans liberation, all of it being intertwined is going to look like. We're naming it. We're claiming it on this panel. I want to thank y'all for all the authenticity, the vulnerability, the no backing... back just like fully being here, present in your power. ~ Saifa, Hans, King, Nessa, Lee, y'all are everything. And I'm so glad so many folks get to hear from you next week. ~ And folks should know this is what gender liberation is for everybody looks like in practice, right? And you don't have to be intersex, right? To believe in intersex liberation and to support the fight, the struggle, the striving for it as well. Thank you.