

# INTERSEX PRESENTATION BY CODY KENNEDY



Friday, November 3, 2017, 10:00 a.m. PST/1:00 p.m. EST

A Queer Sci Fi Discussion: Cody will share with you what intersex is; what intersex is NOT; how one becomes intersexed; how many types of intersex combinations exist; the difference between organs and glands, and internal and external organs; what it means to live as an intersex person; commentary on surgery; intersex rights and where the law remains gray. Perfect for writers who want to include an intersex character in a story, readers who are curious, and anyone who wants to know more about human diversity.

The presentation will last approximately two hours and will include a Q&A session.



WELCOME! Thanks for joining me today. It's great to see you here. Today I will share with you:

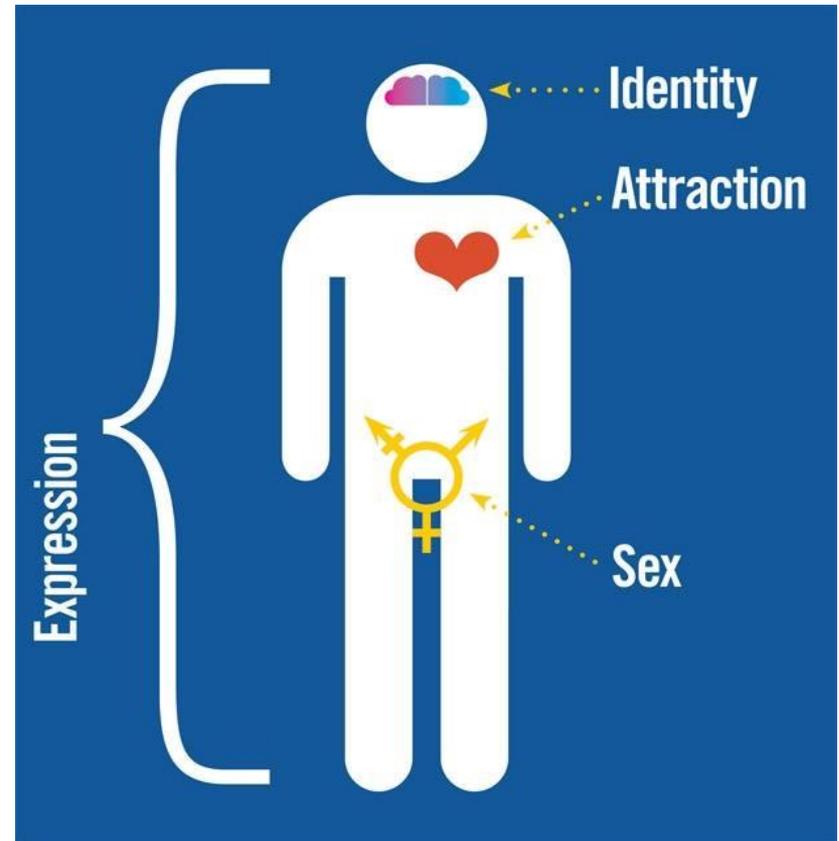
1. How biological sex is created.
2. Chromosome counts and variations on a theme (sex combinations).
3. How biological sex is determined.
4. Primary and secondary sex traits.
5. Commentary on surgery.
6. What intersex is NOT.
7. Intersex rights and the law; where the law remains gray.
8. What it means to live as an intersex person.
9. Creating characters in writing.

A Q&A thread follows at the end of the presentation.

Disclaimer: I am not a scientist or physician, my explanation of genetics is rudimentary at best, and I don't know everything about being intersex.

Let's start with a chart that we're familiar with: THE FOUR COMPONENTS OF SEXUALITY.

As you can see from this chart, I will be discussing only one aspect (INTERSEX) of one component (BIOLOGICAL SEX).





## Gender Identity

Woman

Genderqueer

Man

Gender identity is how you, in your head, think about yourself. It's the chemistry that composes you (e.g., hormonal levels) and how you interpret what that means.



## Gender Expression

Feminine

Androgynous

Masculine

Gender expression is how you demonstrate your gender (based on traditional gender roles) through the ways you act, dress, behave, and interact.



## Biological Sex

Female

Intersex

Male

Biological sex refers to your *objectively measurable* organs, hormones, and chromosomes.

Female = vagina, ovaries, XX chromosomes. Male = penis, testes, XY chromosomes.

Intersex = any combination thereof.



## Sexual Orientation

Heterosexual

Asexual

Pansexual

Bisexual

Homosexual

Sexual orientation is who you are physically, spiritually, and emotionally attracted to based on *their sex/gender* in relation to your own.

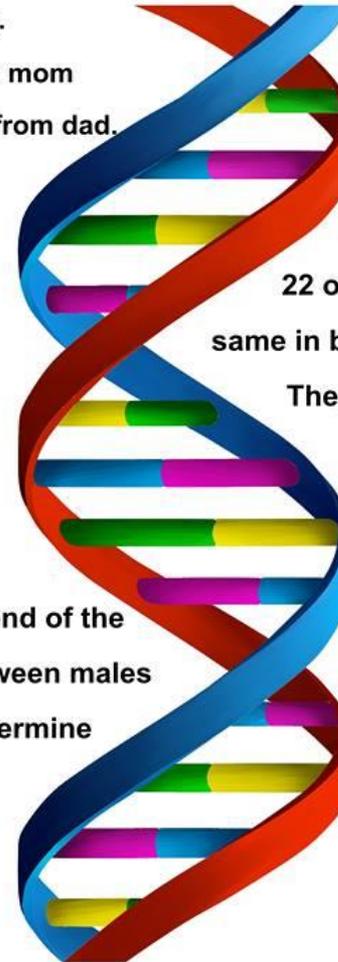
# DNA COMPOSITION

## THE DNA CHAIN:

Biological sex is NOT determined by anatomy (sex traits). It is determined by *objectively measurable* chromosomal mix. Moms can only contribute Xs; dads contribute (what turns into) Ys.

46 chromosomes make up the human body (23 pairs).

Half are received from mom and half are received from dad.



22 of these pairs appear the same in both males and females. They are called autosomes.

The 23rd pair at the end of the DNA chain differ between males and females, and determine which sex one is. They are called chromosomes.

Sometimes, dad doesn't contribute a 23rd chromosome, or dad contributes an extra chromosome.



**ALL mammals begin in female form. Even after dad has contributed a chromosome, the zygote (fertilized egg) is female until that chromosome is bathed in androgen.**

**Androgen (andro means man) is stored on the tip of the Y chromosome. Consider androgen to be testosterone. A certain number of weeks through the gestation period, the tip of the Y chromosome “turns on” and androgen is released. This androgen activates the Y chromosome to become male.**

**For purposes of this presentation, I’m going to omit discussion about the SRY gene and protein. It is the testis-determining factor (TDF),\* and is the DNA-binding protein\*\* encoded by the SRY gene that is responsible for the initiation of male sex determination in humans. [In short, it’s a thing that helps the androgen turn on and bind.]**

**\*also known as sex-determining region Y (SRY) protein**

**\*\*also known as gene-regulatory protein/transcription factor**

## ANDROGEN:

For purposes of example only, we're going to consider that "turning on" of androgen to be a rain shower.

The more androgen the zygote receives, the more masculine characteristics it will form regardless of eventual sex determination. If the zygote is fully immersed in androgen, it will go down an entirely male path.

What happens if the zygote receives no chromosome from dad and there is no chromosome to turn on? What happens if the Y chromosome turns on, and androgen is released, but the zygote is only partially under the rain shower? What happens if the Y chromosome turns on, the androgen is released too late, and the zygote is past the developmental stage for androgen absorption? What happens if the Y chromosome turns on, the androgen is released but the zygote, for any number of reasons, can't absorb it?



What happens if the zygote receives an extra chromosome and is immersed in androgen? Only partially immersed in androgen? Sometimes androgen is not emitted, sometimes androgen can't be absorbed, sometimes androgen is emitted and the zygote doesn't get enough or gets too much. We will go through each of these scenarios. Let's consider the gestation period a conveyor belt, and the release of androgen a rain shower.

## **ONE-CHROMOSOME SCENARIO:**

**ALL mammalian babies begin as FEMALE. X is the basis for life.**

**Sometimes a zygote receives NO chromosome from dad. As such, its genetic structure is XO and no Y chromosome exists.**

**If there is no chromosome to bathe in the androgen shower, the zygote will be FEMALE, will have no male characteristics, the person will not develop during puberty, and will be androgynous.**

**A female does not usually learn about the XO anomaly until puberty arrives and no development occurs.**

All mammal babies start out as female.  
Sometimes, DNA doesn't receive a  
2nd chromosome from dad.

**XO WILL ALWAYS REMAIN XO.**

(f)

Androgen (testosterone)

Rain Shower



NO MATTER HOW MUCH  
ANDROGEN RECEIVED,  
THERE IS NO SECOND CHROMOSOME  
TO TURN MALE. (f)

DIAGRAM #1

One chromosome scenario

## **TWO-CHROMOSOME SCENARIO:**

**Two chromosomes create conventional males and females.**

**As mentioned above, the more androgen the zygote receives, the more masculine the child will be (irrespective of sex).**

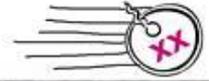
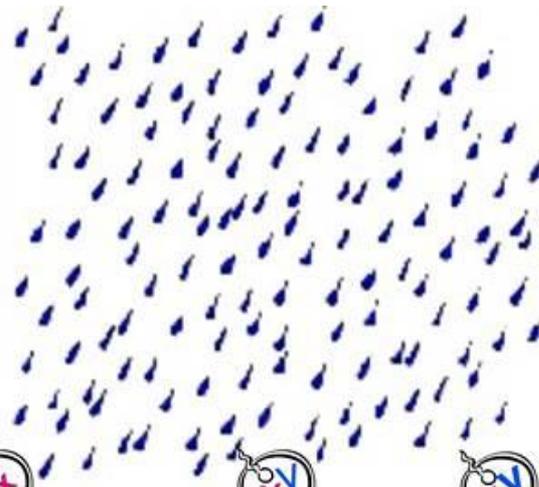
**Conversely, the less androgen the zygote receives, the less masculine (more feminine) the child will be (irrespective of sex).**

**This variation in androgen received/absorbed is thought to be the cause of innate homosexuality.**

All mammal babies start out female.

Androgen (testosterone)  
rain shower

Receives no chromosomes  
from dad, nothing for  
androgen to turn on. (f)



GESTATION PERIOD

Receives chromosomes  
from dad.

MALE: received right  
amount of  
androgen to  
become male. (m)

Whizzed by and didn't  
receive enough androgen.  
to turn male. (f)

## DIAGRAM #2

Two chromosome scenario.

## **THREE-CHROMOSOME SCENARIO:**

**Sometimes, dad donates an EXTRA CHROMOSOME.**

**A single-chromosome zygote produces one sex option:  
Female.**

**A two-chromosome zygote produces two sex options:  
Female and Male.**

**A three-chromosome zygote produces three sex options:  
Female and Male and Intersex.**

**The XXX zygote is female.**

**The XYY zygote is über male (sumo wrestler, superman).**

**The XXY zygote is male with female traits, and has  
symptoms of female puberty.**

All mammal babies start out as female.  
Sometimes, DNA receives an extra  
chromosome from dad.

## Androgen (testosterone) rain shower

Doesn't stick around long enough  
in rain shower to turn male. (f)



Hangs out in rain  
shower and  
becomes über male. (m)

Whizzes by and collects  
only enough androgen to  
turn one chromosome male.  
(m)

### DIAGRAM #3

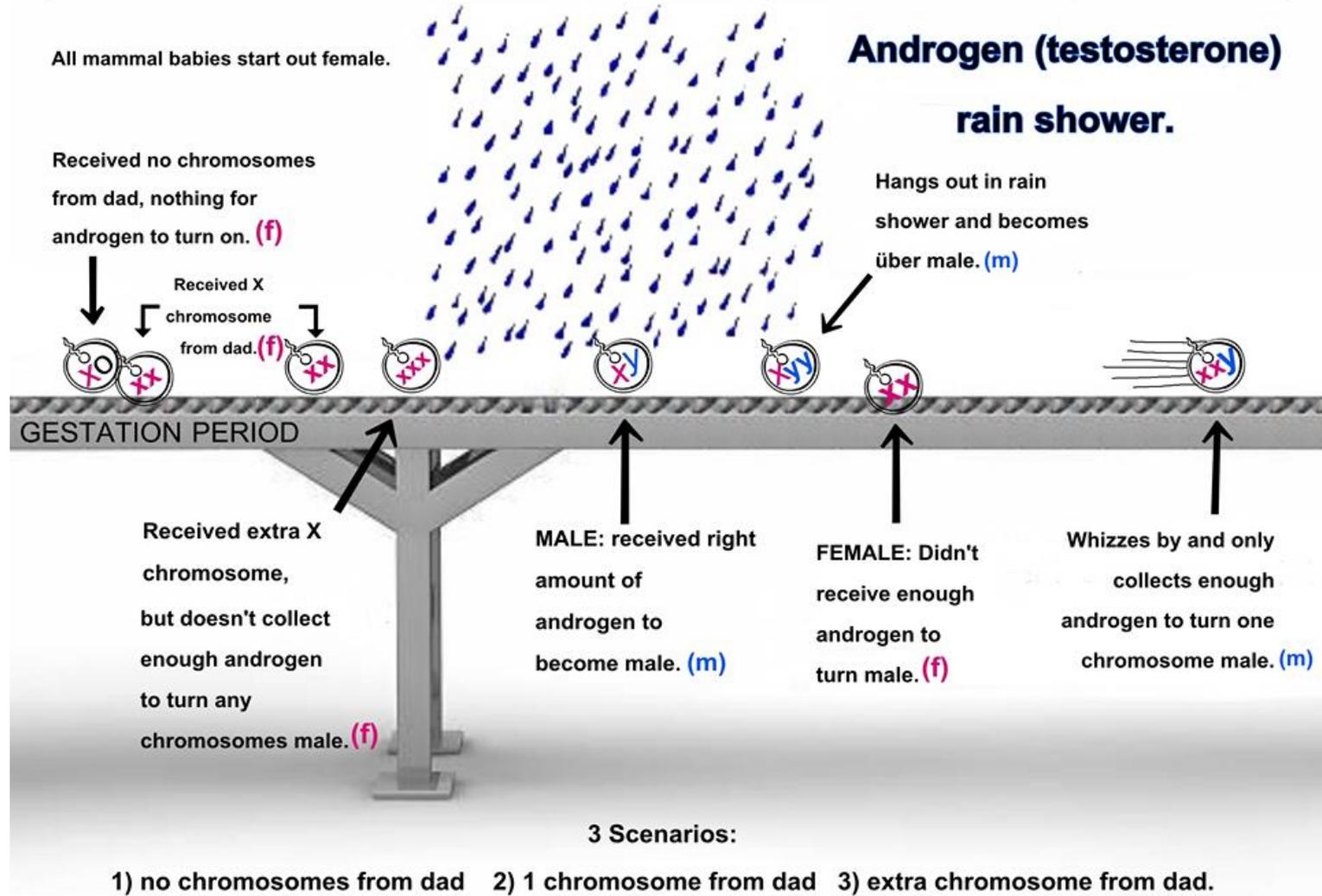
Three chromosome scenario.

# #8 BIOLOGICAL SEX IS DETERMINED BY CHROMOSOMES, NOT SEX TRAITS.

**RULE: NO MATTER THE COMBINATION OF X's AND Y's, IF A Y IS INVOLVED, ONE IS BIOLOGICALLY MALE REGARDLESS OF SEX CHARACTERISTICS.**

We see all three zygote options on this conveyor belt.

**NO MATTER THE COMBINATION OF X's AND Y's, IF A Y IS INVOLVED, ONE IS MALE**



Now, let's talk about  
Primary and Secondary Sex  
Traits (characteristics).

PRIMARY sex traits are the  
organs (genitalia and  
gonads) you are born with.

SECONDARY sex traits are  
those that develop during  
puberty.

## PRIMARY SEX TRAITS

(born with)

### Gonads

Testes (including other internal organs)

Ovaries

### Genitalia

Penis (including urethra & scrotum)

Uterus (including vagina)

Vulva (all exterior organs)

## SECONDARY SEX TRAITS

(develop during puberty)

breast development

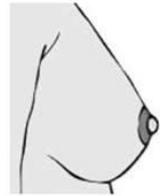
chest/facial hair

pubic hair

Breasts are NOT organs, they are glands. Everybody has them. They play NO role in biological sex.

## **BREASTS ARE GLANDS**

Whether...



**boobs**

or

**boobies**



or

**moobs**



or

**moobies**



**EVERYONE HAS THEM!**

## **INTERSEX IS A CHROMOSOMAL ANOMALY**

Having an *UNconventionally* mixed bag of chromosomes can cause variances in primary sex traits thus creating ambiguous or atypical genitalia AND can cause variances in secondary sex trait development.

## **THE TWIST: A DEVELOPMENTAL (AUTOSOMAL\*) ANOMALY**

Having a *Conventional* bag of chromosomes does not guarantee conventional primary sex traits. One can be born with an autosomal anomaly (developmental deformity). This can occur anywhere in or on the body. As such, variances can **STILL** occur in primary sex traits, but **NO** variance will occur in secondary sex trait development.

## **IMPORTANT DISTINCTION:**

A variance caused by chromosomal anomaly **CAN BE** treated to some extent with hormones.

A variance caused by autosomal anomaly **IS NOT** treated with hormones (unless, of course, the deformity has to do with hormone producing glands - endocrine system).

\*Humans have 22 pairs of autosomes and 1 pair of sex chromosomes (rather, usually 1 **PAIR**, but could be one **LONE RANGER** or **TRIPLETS**).

Now let's look at what we've learned so far in chart form:

## CHROMOSOME GUIDE

CHROMOSOMES	BIOLOGICAL SEX	OCCURRENCE	WORLD POPULATION 7.16 billion	PRIMARY TRAITS (genitals and gonads)	SECONDARY TRAITS (breasts, facial and pubic hair)
<b>XO</b>	Female	1 in 5000 (.0002%)	1,432,000	No ovaries, sterile	Little to none
<b>XX</b>	Female	~ 50%	3.5 billion	"normal"	Conventional girl
<b>XXX</b>	Female	1 in 1,000	7,160,000	"normal"	Normal looking, but tall, slender, can have low range of intelligence
<b>XY</b>	Male	~ 50%	3.5 billion	"normal"	Conventional boy
<b>XXY</b>	Male	1 in 750	9,546,667	Testes quite small, sterile	High-pitched voices, feminine body contours as well as breast enlargement, and comparatively little facial and body hair
<b>XYY</b>	Male	1 in 1,000	7,160,000	"normal"	Very tall, aggressive, can have low range of intelligence
Any of the above*	Intersex	1 in 200 — 1 in 1,500**	4,773,333	Either or both	Either or both
Identity: LGBTQQIAP	Could be any combination of the above!	1 in 10	716,000,000 or 10%	Could be any combination of the above!	Could be any combination of the above!

\* A conventional female (XX) or conventional male (XY) can be considered intersex if genitalia is ambiguous/atypical. This can occur as a result of a developmental anomaly and is *not* a chromosomal anomaly.

\*\* From ISNA: If you ask experts at medical centers how often a child is born so noticeably atypical in terms of genitalia that a specialist in sex differentiation is called in, the number comes out to be about 1 in 1,500 -2,000 births. But a lot more people than that are born with subtler forms of sex anatomy variations, some of which won't show up until later in life.

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## Now, let's look at only the intersex portion of the CHROMOSOME GUIDE.

Please note the \*\* comment:

From ISNA: If you ask experts at medical centers how often a child is born so noticeably atypical in terms of genitalia that a specialist in sex differentiation is called in, the number comes out to be about 1 in 1,500-2,000 births.

But a lot more people than that (1 in 200 births) are born with subtler forms of sex anatomy variations, some of which won't show up until later in life (puberty or later). Some examples are, including, but not limited to:

Example #1: a male's breasts begin to develop during puberty.

Example #2: a female begins to grow facial and chest hair during puberty.

Some anomalies are treated shortly after birth, including, but not limited to: a uterus is removed from a male who, after genetic testing, shows no other anomaly.

Some people do not know they are intersex until they attempt to have children and find out they're sterile.

# **SURGERY**

## **THE FRIGHTENING OGR SYSTEM**

Gender assignment (genital surgery) is cosmetic surgery, not medically necessary, and constitutes genital mutilation. Ambiguous/atypical genitalia are not diseased, nor do they cause disease; they merely look funny to some people.

The idea behind gender assignment at birth is to give kids the “best chance” at appearing “normal” in society so kids grow up to be believable and straight girls and boys. This is called the *Optimum Gender of Rearing system (OGR)*.

Under the OGR system, it is believed that gender is ALL ABOUT NURTURE. In actuality, it’s a sexist system—literally. It treats children thought to be girls differently than children thought to be boys. A doctor’s primary concern for children thought to be girls is preservation of fertility (not sexual sensation), and for children thought to be boys, it is size and function of the phallus.

The “standards” used for genital anatomy have been arbitrary and illogical. For example, under the OGR model, boys born with penises that doctors consider “small” are made into girls—even though other doctors believe (and show) they can be raised as boys without castration, genital surgery, and hormone replacement. Girls with clitorises doctors consider “too big” still find themselves in operating theaters with surgeons cutting away at healthy genital tissue.

**The OGR system has backfired in enumerable and immeasurable ways. Below are a few examples as to why surgery is destructive.**

- 1. Surgery performs NO function other than a cosmetic one.**
- 2. Surgery causes loss of sensation. If you have had plastic surgery, you know that you lose sensation in the area where tissue has been altered or grafted.**
- 3. Surgery can cause pain. Altered and/or grafted tissue is not elastic.**
- 4. Altered and/or grafted tissue does not contain glands to emit fluids conducive to sexual activity.**  
<https://www.quora.com/Do-transgender-women-get-wet-naturally>
- 5. The human body is not static, it grows. Altered and/or grafted tissue does not grow with the body and must be re-altered through additional surgeries as the body grows.**

**6. Hormone fluctuations occur at puberty and at other times as we age. Natural hormones cause the body to change in enumerable ways. Altered and/or grafted tissue does not transform with hormone changes.**

**7. Administered hormones do not always offset/combat the changes brought on by natural hormones, and administered hormones come with a host of additional problems. Not to mention, it is a constant balancing act. What might work for the first week of a month or a couple of months will not work for the remainder of the month or year, respectively.**

**8. Psychological: There is substantial evidence that people who have been treated under the OGR system have suffered psychological harm. This does not mean doctors intended to harm patients. But good intentions are inadequate reasons to maintain a practice that is shown to be unethical and unscientific.**

**Paradoxically, though all medical experts agree the identification of intersex anatomy at birth is primarily a psychosocial (not a medical) concern, it is still treated almost exclusively with surgery. Parental distress is treated with the child being sent off to surgery.**

## WHEN IS SURGERY MEDICALLY NECESSARY?

When is surgery  
**medically  
necessary?**

**APPROVED**

Some examples of when surgery is necessary:

1. When the body cannot successfully perform a required bodily function such as to void (urine or feces); or
2. When deformed tissue is attached to or grown into a vital organ and must be separated from that vital organ in order for it to function; or
3. When deformity poses a threat to life (e.g., obstructs a passageway or closes off a passageway by pressing against it).

## WHAT INTERSEX IS



*Transsexual*  
*Didelphic*  
**DIPHALLIC**  
**SHEMALE**  
*Hermaphrodite*

## WHAT INTERSEX IS NOT:

1. A transsexual individual is a person who has had their primary and secondary sex traits altered by CHOICE. Intersex people have atypical genitalia by BIRTH. The only things they have in common are certain types of surgery that may be performed (e.g., vaginoplasty) and hormone treatments.
2. A didelphic individual is a female with two uteruses (developmental [autosomal] anomaly, not a chromosomal anomaly).
3. A diphallic individual is a male with two penises (developmental [autosomal] anomaly, not a chromosomal anomaly).
4. Shemale: A male who has undergone breast augmentation.

5. Hermaphrodite: Though the intersex community has reclaimed this term “hermaphrodite” as the gay community has reclaimed the term “queer,” the ONLY creatures that are hermaphroditic are those that can SELF-IMPREGNATE. Many animals and plant species can do this. An intersex individual is not hermaphroditic in that s/he/they do not have both sets of WORKING reproductive organs.

6. SYNDROMES: A syndrome, by definition, is a set of characteristics that consistently repeat in human nature ONLY grouped together. Syndromes come with a variety of symptoms and can imply any number of things NOT necessarily applicable to an intersex individual or related to being intersex.

By way of example, Turner Syndrome is caused by a missing X chromosome or part of an X chromosome. Symptoms can be severe and ongoing medical care is necessary through life.

HOWEVER, please do not assume that everyone who is XO (received no chromosome from dad) has Turner Syndrome.

<https://www.mayoclinic.org/diseases-conditions/turner-syndrome/symptoms-causes/syc-20360782>

# INTERSEX RIGHTS ARE HUMAN RIGHTS.

**INTERSEX HISTORY** has been brief until recently; and there is no entirely accurate accounting of the history of the treatment of intersex people outside of medical “progress.”

A reasonably accurate history of that medical progress can be found here.

<http://www.isna.org/faq/history>

A timeline can be found here:

[https://en.wikipedia.org/wiki/Timeline\\_of\\_intersex\\_history](https://en.wikipedia.org/wiki/Timeline_of_intersex_history)

What these histories do not include is the treatment of intersex children who are largely aborted, or drowned at birth (even to this day); or the hideous experiments performed during WWII.

The goal of intersex advocacy groups is to help people understand intersex conditions as human rights issues. ISNA maintained, as its fundamental principle, the same principle fundamental to the LGBT rights movements: that one’s genitals are primarily for one’s own use, not for the comfort of others.

It wasn’t until April, 2005 when the [Human Rights Commission of the City and County of San Francisco](#) published the first report on the treatment of intersex people by a human rights institution, entitled “A Human Rights Investigation into the Medical "Normalization" Of Intersex People,” that human and humane rights were considered for intersex people.

[http://www.isna.org/files/SFHRC\\_Intersex\\_Report.pdf](http://www.isna.org/files/SFHRC_Intersex_Report.pdf)

**INTERSEX  
RIGHTS  
ARE  
HUMAN  
RIGHTS.**

In 2006, the [Yogyakarta Principles](#) on the Application of International Human Rights Law in relation to Sexual Orientation and Gender Identity, including Principle 18 on Protection from Medical Abuses, including "all necessary legislative, administrative and other measures to ensure that no child's body is irreversibly altered by medical procedures in an attempt to impose a gender identity without the full, free and informed consent of the child" was published. Intersex and transgender activist [Mauro Cabral](#) was the only intersex signatory to the Principles.

In 2011, [Christiane Völling](#) became the first intersex person known to have successfully sued for damages in a case brought for nonconsensual surgical intervention.

In April 2015, [Malta](#) became the first country to outlaw non-consensual medical interventions to modify sex anatomy, including that of intersex people.

## US Intersex Rights by Category

### THE LAW

Where do we stand now?

Not very far along in the US. In fact, the US lags most of the world in intersex rights. Malta leads the world, Australia appears to be second.

InterACT is now our only hope.

<https://interactadvocates.org/>

Physical integrity and bodily anatomy:	NO	The U S provides no rights or rights protections.
Reparations:	NO	The U S remains silent, allowing jurisdictions to adjudicate as they see fit.
Anti-discrimination:	Partial	Partial in healthcare only.
Access to Identification Documents:	NO	The U S offers no rights or rights protections to documents reflecting intersex gender.
Access to same rights as other men and women:	NO	Laws on genital mutilation are not enforced.
Changing M/F Identification documents:	NO	The U S remains silent, allowing jurisdictions to adjudicate as they see fit.
Third Gender or Sex Classifications:	Partial	The U S remains silent, allowing jurisdictions to adjudicate as they see fit. OPT IN for California, New York City, Ohio, Oregon only.
Can intersex people marry?	Unclear	No case has been decided by the Supreme Court.
Which public restroom can an intersex person use?	Unclear	No case has been decided by the Supreme Court.



## What's it like to be an intersex person?

I was born long ago and my experiences are not representative of the opportunities of intersex people today. I encourage you to focus on today's environs, to support intersex people, the right NOT to have surgery, the rights to be treated as other binary and non-binary sexes, and to understand that intersexuality is no more than a genetic trait—whether by chromosomal design or autosomal chance.

## **CREATING INTERSEX CHARACTERS IN WRITING:**

**Please remember that the only truly hermaphroditic creature is one that can self-impregnate. While many species of plants and animals can do this, humans cannot do this.**

**More importantly, consider how the human brain processes information.**

**Finally, consider that we only know what we know. In short, our species, with this DNA, on this planet, in this environment, in our culture only knows a spectrum from MALE to FEMALE. On Jupiter, they may enjoy a spectrum from rock to mist, from air to water, from imported Martian physalis/<sup>1</sup> to the rare and highly sought-after Plutonian capuacu/<sup>1</sup>. For all we know, the rumors about Venus flytraps are true—they may be carnivorous after all. We simply don't know what we don't know. The sci-fi and fantasy genres allow us tremendous latitude in creating characters. But what we do not want to do is to call a creature a hermaphrodite when s/he/they are intersex. We do not want to call a creature intersex, when s/he/they are mist... or water.... or a physalis... or a plain old Venus flytrap.**

**<sup>1</sup> <https://themysteriousworld.com/top-10-rarest-and-tastiest-fruits-in-the-world/>**

# CHARACTER WORKSHEET

Our brains process information in this order:

1. *Feelings*
2. *Thought*
3. *Emotions*

When we first see or meet someone, we *feel* certain things, then we *think* certain things, and then we *emote* certain things. Combining all three, we form a conclusion. All this happens within split seconds within our brains and is called **PERCEPTION**.

We are conditioned by society (among other things) and, based on how the brain processes, we tend to think in the following order based upon what we **PERCEIVE**:

- |             |                          |              |                          |            |
|-------------|--------------------------|--------------|--------------------------|------------|
| Biological  | <input type="checkbox"/> | Female       | <input type="checkbox"/> | Male       |
| Expression  | <input type="checkbox"/> | Feminine     | <input type="checkbox"/> | Masculine  |
| Orientation | <input type="checkbox"/> | Heterosexual | <input type="checkbox"/> | Homosexual |

## Identity

We generally do not consider identity until we speak with a person because we do not know how they feel about themselves.

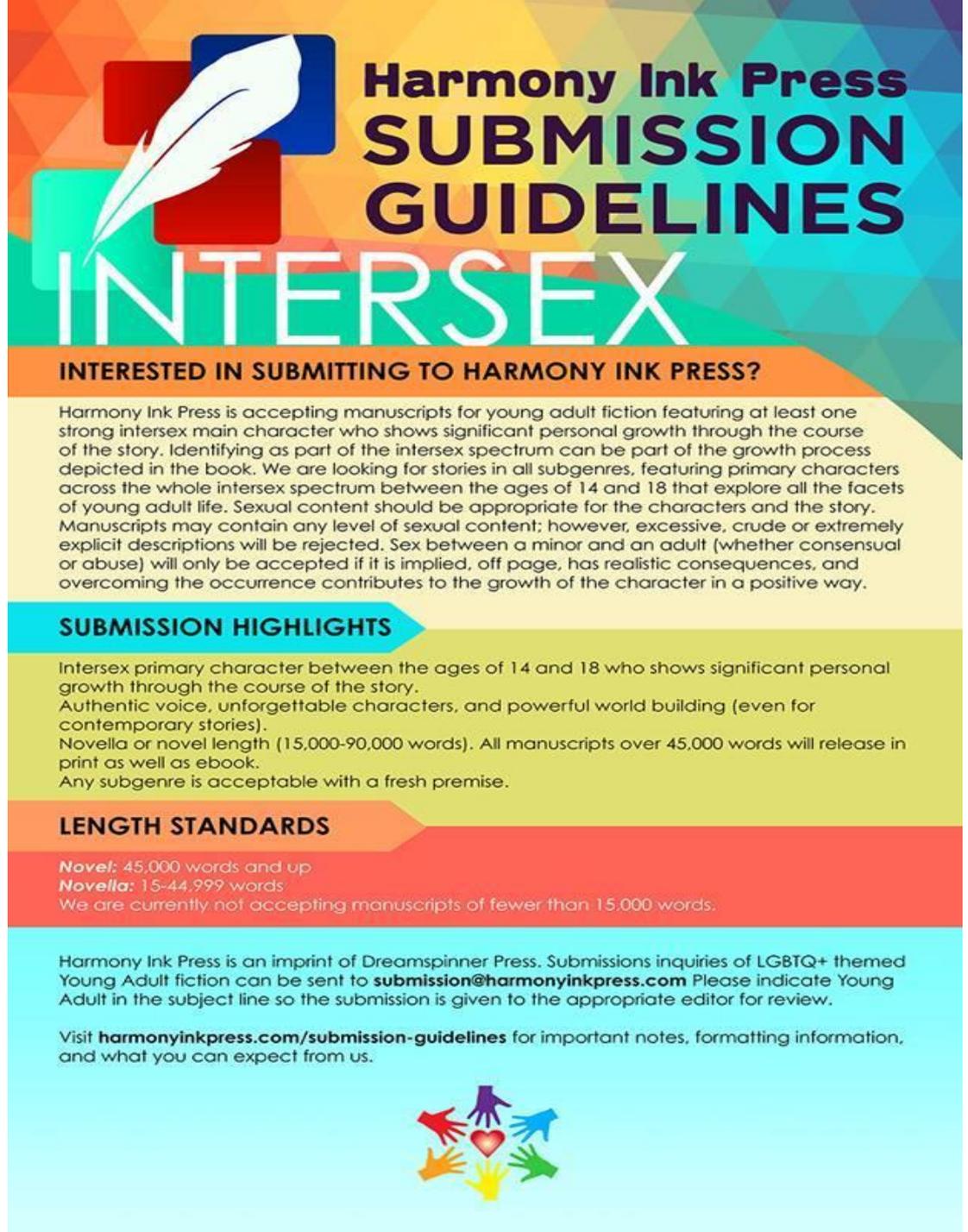
As such, we also tend to write on these axes (*\ak-sēz\*). When creating characters, we may wish to consider a different order, and add the spectrum.

- |             |                          |              |                          |  |                          |            |
|-------------|--------------------------|--------------|--------------------------|--|--------------------------|------------|
| Identity    | <input type="checkbox"/> | Woman        | <input type="checkbox"/> | Genderqueer  | <input type="checkbox"/> | Man        |
| Expression  | <input type="checkbox"/> | Feminine     | <input type="checkbox"/> | Androgynous  | <input type="checkbox"/> | Masculine  |
| Biological  | <input type="checkbox"/> | Female       | <input type="checkbox"/> | Intersex   | <input type="checkbox"/> | Male       |
| Orientation | <input type="checkbox"/> | Heterosexual | <input type="checkbox"/> | Bisexual<br>2-Spirit<br>Pansexual<br>ACE<br>Transgender<br>Transsexual<br>Queer<br>Questioning | <input type="checkbox"/> | Homosexual |



**This presentation is rudimentary and is only a brief overview of intersexuality. I hope I've answered some of your questions. If I haven't, please feel free to tag me and list your question(s) below, or contact me via personal message, and I'll look to answer them to the best of my ability. Thank you for attending this presentation!**

If you'd like to write for Harmony Ink Press, these are the guidelines with respect to intersex characters.



The graphic features a stylized quill pen in the upper left corner, set against a background of colorful geometric shapes in shades of orange, red, blue, and green. The title 'Harmony Ink Press SUBMISSION GUIDELINES INTERSEX' is prominently displayed in the upper right. Below the title, the text is organized into sections with colored headers: 'INTERESTED IN SUBMITTING TO HARMONY INK PRESS?' (orange), 'SUBMISSION HIGHLIGHTS' (blue), 'LENGTH STANDARDS' (orange), and a final light blue section at the bottom. A small logo of colorful hands holding a heart is located at the bottom right.

# Harmony Ink Press SUBMISSION GUIDELINES INTERSEX

## INTERESTED IN SUBMITTING TO HARMONY INK PRESS?

Harmony Ink Press is accepting manuscripts for young adult fiction featuring at least one strong intersex main character who shows significant personal growth through the course of the story. Identifying as part of the intersex spectrum can be part of the growth process depicted in the book. We are looking for stories in all subgenres, featuring primary characters across the whole intersex spectrum between the ages of 14 and 18 that explore all the facets of young adult life. Sexual content should be appropriate for the characters and the story. Manuscripts may contain any level of sexual content; however, excessive, crude or extremely explicit descriptions will be rejected. Sex between a minor and an adult (whether consensual or abuse) will only be accepted if it is implied, off page, has realistic consequences, and overcoming the occurrence contributes to the growth of the character in a positive way.

## SUBMISSION HIGHLIGHTS

Intersex primary character between the ages of 14 and 18 who shows significant personal growth through the course of the story.  
Authentic voice, unforgettable characters, and powerful world building (even for contemporary stories).  
Novella or novel length (15,000-90,000 words). All manuscripts over 45,000 words will release in print as well as ebook.  
Any subgenre is acceptable with a fresh premise.

## LENGTH STANDARDS

*Novel:* 45,000 words and up  
*Novella:* 15-44,999 words  
We are currently not accepting manuscripts of fewer than 15,000 words.

Harmony Ink Press is an imprint of Dreamspinner Press. Submissions inquiries of LGBTQ+ themed Young Adult fiction can be sent to [submission@harmonyinkpress.com](mailto:submission@harmonyinkpress.com) Please indicate Young Adult in the subject line so the submission is given to the appropriate editor for review.

Visit [harmonyinkpress.com/submission-guidelines](http://harmonyinkpress.com/submission-guidelines) for important notes, formatting information, and what you can expect from us.



## Miscellaneous Links:

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[https://en.wikipedia.org/wiki/Timeline\\_of\\_intersex\\_history](https://en.wikipedia.org/wiki/Timeline_of_intersex_history)

<http://www.apa.org/topics/lgbt/intersex.aspx>