

Transition was easy...Detransition was not

Abel, <https://pitt.substack.com/p/detransitioner-perspective-transition-1f1>

Aug 17



My name is Abel Garcia, I was born in 1997 to a Mexican family who came to the US illegally. Due to my parents' illegal status, I was raised by my grandparents because my parents were working non-stop so they could support me. Growing up I was a very shy, quiet, and timid boy, I was and still am an over-thinker. With my father working non-stop, I did not have a male role model in my life growing up. As a kid, I did not feel comfortable as a boy because of my overthinking and also because I was not the most masculine boy growing up. My feeling that I was not a typical boy led to my belief that I must be a girl.

Even though I had issues with what it meant to be a boy or a man while confusing my different nature as a girl/woman, I did not know what the word "transgender" was until I was much older and found the word through YouTube. Not knowing much and assuming that was what I was, especially with my childhood, I believed I was transgender. But because I was a minor I did not move forward on those thoughts, and I just put them in the back of my mind. It was not until after I left high school that I decided to transition from male to female.

I came out as transgender to my friends who were all supportive of my decision, I then came out to my mother a few months later in December of 2015. My mother broke down crying when I came out to her as transgender, she then asked me many questions mostly regarding what if I made a mistake or what if I realized I wasn't transgender, I informed my mother then that I knew this is what I wanted and that I could not be wrong regarding this. A few months later I went to see a therapist regarding my identity as a transgender woman at my local LGBT center, I received a female therapist. This therapist did not know how to handle transgender patients so, after three sessions with her, she then transferred me to her supervisor who had more experience with transgender patients.

The next therapist that I spoke with, immediately affirmed me as a transgender woman and informed me that she had my letter to transition during my first session with her. When I asked her why she felt comfortable recommending this during my first session with her, I was informed that she did not want to gatekeep me from my transition. Even though I wanted to transition then I waited a couple of months before I accepted the letter to transition— a part of me knew that this could be irreversible and due to that possibility, I took a bit longer to start my transition and gave myself a plan regarding surgeries. My original plan was to wait five years before I received top surgery (aka breast implants) and ten years before I got bottom surgery aka penile inversion/neo-vagina.

Before accepting my letter to start hormones, my father had learned about my plans to transition from male to female. My father being Mexican did not approve of my choice and decided to fix me because, at this point in my life, I had not been in a relationship with a woman. My father's idea to fix me was for me to have a relationship with a woman. In 2016, my father took me to Mexicali under the pretense that he needed a backup driver to return from Mexico to the United States. Later in the day after completing his business in Mexico, we parked in a parking lot, and my father then brought me into a "restaurant" for a bite to eat.

The building was painted black both inside and outside, and had tinted windows. I had a horrible gut feeling but I went along with my father because I was in a country where I did not know nor knew how to stand up for myself. After a few minutes of sitting down, I heard my father's voice telling me to stand up and pick a woman. At that moment I realized that I was not at a restaurant but instead at a brothel.

I looked up and noticed a row of women who looked to be in their 20s. My father told me to pick one of the ladies and, not knowing what to do, I picked a random lady from the group. Before she had a chance to lead me inside, my father told the woman that I had picked that he wanted to speak with her alone. I was told to go on ahead without her, but instead I hid around the corner, and I overheard my father informing the young lady "take care of him, it's his first time". After my father and the woman who I was supposed to have intercourse with finished their conversation, the woman walked toward me, and together we walked into a room.

I do not recall most of what happened next, not because I was drugged or anything, but because I have chosen to repress those traumatic memories. From what I do recall, after entering the room, I was told to undress and that she was going to give me a massage. Eventually, we went from the massage table to the bed. While I do not recall exactly what happened next, I could not perform with her, and eventually, our time ended. But before we left the room and went back to my father, I asked her to lie to my father that we had a great time and that it went very well, which she did. I was utterly disgusted by the event but, for my father's sake I acted like I enjoyed the experience. My father seemed proud of me—he believed he had fixed me with this encounter.

Actually though, this experience had the opposite effect. It was the pivotal moment that led to my decision to continue with transition, and to go down a path of self-destruction. I eventually spoke with my therapist informing her of the incident in Mexico but, because she was a

gender-affirming therapist who worked with transgender patients, she did not see my recent trauma as a causal event and continued to affirm me as a transgender woman.

I continued to see my therapist for five more months before I finally moved out of my parents' house and, a month later, I started hormones, after obtaining medical clearance from a doctor who lied to me in saying that I could become a woman, I just needed hormones and surgeries. The doctor even brought in a transgender activist to inform me that I was not just a feminine man, but I was a transgender woman—and he could tell this by the proportions of my body. I sadly believed the lies that I was told.

Once I started hormones, I was happy that I was finally able to be my true authentic self. I was affirmed by everyone who knew that I was transgender. A few months later I got my name and sex marker changed on all my documents and was recognized as a woman legally. A year after I started hormones, I got my letter to get both top and bottom surgery approved. During that session I only requested top surgery, but I did not want to get bottom surgery yet. I did not know it at the time, but I was given both letters of approval at that appointment. I only found out when I got a letter from my insurance company saying that I was cleared to meet up with my surgeons for both top and bottom surgery. I ignored the letter for the bottom surgery at that time.

In May 2018, I had breast implants. Initially, I was very happy with the results of my surgery. Three months after I got surgery, however, I realized that I made a mistake and that this was not for me. I had to then accept that I had damaged my body, but that I would always be a man even if I continued to go down this path of self-destruction. I was just a man—a man who was in the process of being mutilated to appear as a woman—and I was now a decoy or caricature of what I believed a woman looked like.

When I reached out for help to detransition from the therapist who signed off on my transition, I was met with pushback. My therapist informed me that my desire to detransition was caused by childhood trauma. I realized that this therapist would only affirm my transgender delusion, and would never give me the proper help I needed. I looked for a new therapist through my medical clinic—but this new therapist was as worse as the last one maybe even worse.

This was late 2018. In early 2019 I decided that joining the military was the only or best way to get a therapist to sign off on my detransition, because at the time you could not enlist in the military if you were trans unless you detransitioned or finished your transition. My new therapist did not like that I was willing to throw away my progress regarding my transition because of the military and instead told me to look at other avenues that did not require me to detransition. He informed me that I should not be too cavalier regarding my detransition as it could have irreversible damage to my body and be dangerous. I again tried to find another therapist but instead, I found a detransitioner by the name of [Walt Heyer](#).

Mr. Heyer is a detransitioner in his 80s but when I reached out to him, I told him that I had nowhere to look for help and I felt hopeless. After telling Heyer my story and where I lived, he informed me that he had a friend and therapist in my area who could help me fix my life. A few months later I was finally able to see Walt's friend, my final therapist and the one who was able

to help me detransition. During the first session I had with this therapist, he informed me that because we were in California, everything we were talking about and doing, was of my own free choice and not of his doing, because if the state were to find out they would accuse him of conversion therapy and strip him of his license.

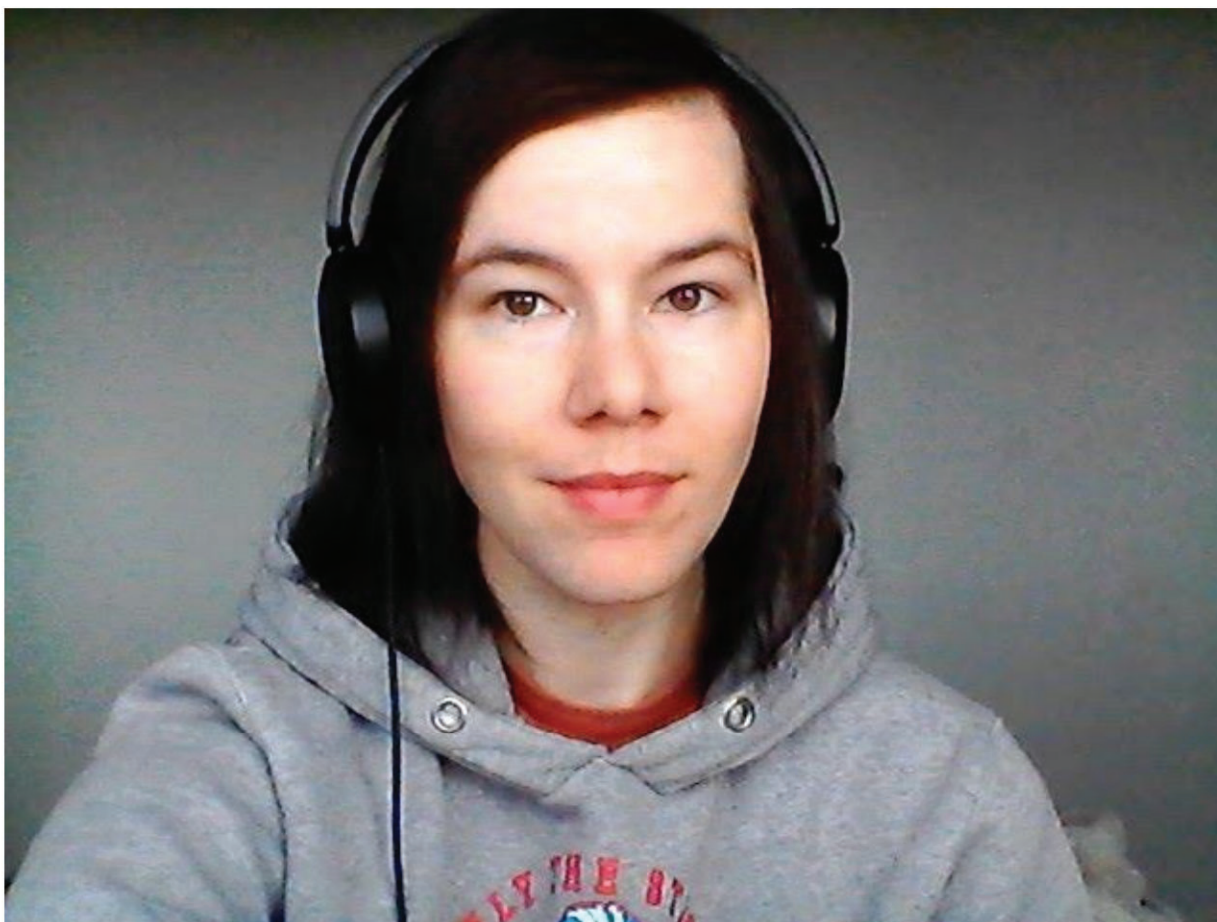
A few months later I started my transition back to being a man. As you will see, this process was infinitely more involved, time consuming and difficult than the cavalier sign off of my original transition—the exact opposite of the way it should be. The process required me to find two medical professionals to sign off on my detransition, submit it to my health insurance and then find a surgeon who would remove my implants. Months passed and I was eventually able to find a second medical professional to sign off on my detransition, but this was after pinpointing who was covered by my insurance and explaining my story to the medical professional and his staff until I was given an appointment. It was an ordeal. Once we secured both letters for my detransition, next we had to submit them to my insurance company which was easier said than done.

Once we submitted the documents to my insurance company, we waited—and then, finally, I was denied! Fortunately, I was able to appeal the decision, which I did and after thirty days I was approved. My implants were removed (by the original surgeon!) in December of 2020. I had to then fight the state of California to allow me to change all my documents back to male, which took a total of 6 months. I then spent the next year and two months wearing a chest binder—the same product that young women wear to transition from female to male to make their chest appear flat. For me the binder was necessary because I had developed gynecomastia from the cross sex hormones I took, from the trauma to my body of having implants added and removed, and because I was overweight. Fast forward to February of 2022 I had one final surgery to finalize my detransition, I had my chest reconstructed to be flat and removed all the excess skin that I had developed. Unfortunately, I could not reverse everything done to my chest, I now have a chest with scars that will forever serve as a reminder of the choices I made.

Looking back to these last seven years, I am a young man in his mid-twenties who has damaged his body for a lie. Amongst the many negative side effects of my “trans journey”, many of which may only be revealed later in my life, my genitals have atrophied and shrunk. I have difficulties relieving myself in the bathroom, and pain when I urinate. I do not know my fertility status, but I do not suspect to be fertile after being on estrogen for two and a half years while compressing my genitals with tight clothes and because of the atrophy I now suffer from. I have also developed a shake on the left side of my body, mostly affecting my shoulder and face. I’ve been told it is more than likely Multiple Sclerosis—which estrogen put me at a much higher risk for. I also have numbness in my chest due to the multiple surgeries I underwent.

I am now speaking out—I think it’s long past time that others learn about the costs of transition, which I am now, sadly, paying. It’s not as advertised, to say the least.

Note: For more on Abel, follow him on twitter at [@officialAbelG](https://twitter.com/officialAbelG)



An open letter

Watson and Others, plus Angus Fox, <https://genspect.org/an-open-letter/>

By [Angus Fox](#) / 22 September 2021

This letter was recently tweeted out by Genspect advisor Sinéad Watson. We continue to be inspired by Sinéad's commitment, and the depth of her understanding of the trans phenomenon. Sinéad's kindness and thoughtfulness shine through, as ever, and we are proud to count her among our team.

Dear Professor Shashank V. Joshi,

I am writing to you on behalf of a group of detransitioned women regarding your fellow Dr Jack Turban. We are deeply concerned with Dr Turban's disparagement of psychiatric intervention

and exploratory psychotherapy, his singular endorsement of affirmative therapies for people with gender dysphoria, and his dismissive and derogatory treatment of those of us who detransitioned due to transition regret.

We are but a few of many that have been the victims of this type of cavalier attitude. We all suffered from gender dysphoria at one point (and some still do), and were led to believe that our best chance of treating our dysphoria was to medically transition. As it turned out, this was not the case. As a result, we now have to live with bodies and voices that have been irreversibly changed (and in some cases damaged) by hormones and surgeries, when what we needed was a compassionate and thoughtful exploration of our gender distress through talk therapy. Some of us will now never be able to have children and many of us live with great distress and regret every day.

Not only did physicians like Dr Turban fail us by sending us down a singular path of transition, they are now letting us down once again by disparaging our experiences and even our existence, when they should be providing us with support to help us heal from our unnecessary medical transitions. The fact that Dr Turban is a psychiatrist at Stanford and uses his credentials to promote his reckless approach is especially troubling, as he has been granted a large and influential media platform. As we see more and more distressed young people following in our footsteps of a rushed medical gender transition, in a few years, we fear the consequences of Dr Turban's activism will be catastrophic and visible to all.

Dr Turban does not hide his disregard for the role of psychotherapy in treating gender distress, and his singular belief in medical and surgical approaches to treating gender dysphoria, whatever its cause may be. Appearing on the GenderGP Podcast episode 'Exploring Detransition with Dr Jack Turban' (2021), hosted by Dr Helen Webberley, a UK physician criminally-convicted for running an illegal clinic, Dr Turban says:

"There's no psychiatric intervention for gender dysphoria. There are medical interventions for gender dysphoria, if you will. And it's not the rule like right, how the psychiatrist's going to treat gender dysphoria, they're not like they're not going to make that go away. The only way that it's ever been proposed that psychiatry can do that was through conversion therapy, which obviously doesn't work:"

As you will read later in this letter, many detransitioners report that they strongly wish they had received exploratory psychotherapy rather than affirmation, thus Dr Turban's insinuation that this would be tantamount to conversion therapy is highly disturbing.

Dr Turban describes detransition, in the GenderGP podcast, as having "*become this really awful word... I feel like 90% of the time when you read it, it's really being weaponized.*" The claim that discussing detransition is problematic due to the topic being "weaponized" has been used to shame and silence detransitioners who try to tell our stories. This bullying of a very vulnerable group is unacceptable, and we find it incredibly worrying that Dr Turban would participate in the accusation that detransition is "being weaponized," furthering the bullying of detransitioned individuals. This is not only a matter of rhetoric. Many of us are unable to receive any

meaningful support from the mental health community. Instead of helping us heal, many mental health professionals informed by the likes of Dr. Turban continue to steer us toward medical transition, unable to accept our lived experience. There are more and more people like us sharing their stories of transition regret openly online, and we implore you to look these up.

Dr Turban goes on to say:

“when you say detransition people usually think that means like transition regret. It brings up this idea that somebody transitioned, then realize like, oh my god, that was a huge mistake. I’m actually cisgender, I regret every domain of gender affirmation I’ve ever had. And as I’m sure you know, that’s not the reality of the situation.”

Dr Turban is, again, completely dismissing those of us who have experienced transition regret. As detransitioned woman, we are deeply hurt that Dr Turban would find it appropriate to suggest that our pain and distress is not a reality. We do, in fact, regret every domain of gender affirmation we ever had and the irreversible changes that medical transition did to us that we must now live with for the rest of our lives. It is, therefore, highly unprofessional and deeply offensive to see comments like this from a fellow at Stanford.

At the same time as Dr Turban dismisses our existence, he also claims to represent us in research, but his bias is clear: the goal is to minimize detransition because it contradicts Dr. Turban’s professional aspirations to promote transgender medical and surgical interventions. In the GenderGP podcast he also says:

“We have a paper that hopefully is coming out soon, where we took the data from the 2015 US Transgender Survey. So this was a survey of over 27,000 transgender adults in the United States. And we found that of those who had transitioned in some way, don’t quote me on that exact number, but it’s something like 13% of them said that at some point in their life, they had detransitioned. And when we looked at why they did that, the vast majority of them, like close to 90%, I think, had detransitioned due to some external factor.”

We bring to your attention that the 2015 USTS survey that Dr Turban repeatedly uses for his research is an online convenience survey that was promoted by transition advocacy sites. We believe in and support transgender rights and trans people, but respectfully submit that this survey, subtitled “Injustice at Every Turn,” which is full of biased questions that promote a political agenda, serves as a poor base for respectable research. Dr Turban previously attempted to use this survey to claim that psychotherapy leads to suicide; his problematic analysis and conclusions were thoroughly outlined in a rebuttal by Roberto D’Angelo et al. in ‘One Size Does Not Fit All: In Support of Psychotherapy for Gender Dysphoria’ (2020), to which Dr. Turban never replied, even though he had the chance to do so. Instead, he attacked the researchers on Twitter. Dr Turban also used the same survey to attempt to show that puberty blockers saved lives. Another rebuttal showed just how flawed that piece of research was (‘Puberty Blockers and Suicidality in Adolescents Suffering from Gender Dysphoria’ (2020) by

Michael Biggs). Dr Turban failed to respond to that critique in the scientific area, but did go on media circuit to promote his deeply flawed conclusions.

Most recently, Dr Turban misused this problematic sample to discredit detransition experiences in his research, 'Factors Leading to "Detransition" Among Transgender and Gender Diverse People in the United States: A Mixed-Methods Analysis' (2021). Dr. Turban did not seem troubled by the fact that 100% of the respondents were transgender-identified and did not identify as detransitioners. This is an expert from his study:

These [detransition due to internal factors] experiences did not necessarily reflect regret regarding past gender affirmation, and were presumably temporary, as all of these respondents subsequently identified as TGD, an eligibility requirement for study participation.

Dr. Turban's conclusions were that detransition is largely a temporary phenomenon, happens in response to external pressures, and does not really represent a problem for those who detransitioned. These conclusions are highly flawed and ignore those of us who have detransitioned due to transition regret, and who were excluded from the survey for no longer being transgender-identified.

In comparison, recent detransition research conducted within the actual detransition community ('Detransition-Related Needs and Support: A Cross-Sectional Online Survey' (2021) by Elie Vandebussche) found very different results: that most of us detransition due to the internal realization that transition was not what we needed, that transition did not help and can actually make things worse for us, and that we found other non-invasive ways to alleviate our dysphoria. Further, the research showed that detransitioners expressed the need to find alternative treatments to deal with their gender dysphoria, but reported that it was nearly impossible to talk about it within LGBTQ+ spaces and in the medical sphere.

Vandebussche found that most detransitioners currently are in dire need of psychological support on matters such as gender dysphoria, co-morbid conditions, feelings of regret, social/physical changes and internalized homophobic or sexist prejudices. The research confirmed that detransitioners experience prejudice when working with medical and mental health systems, which Dr. Turban's vocal activism directly emboldens and reinforces.

We feel it important to add that in May 2021, the Karolinska Hospital in Sweden issued a new policy statement regarding the treatment of gender-dysphoric minors. This policy has ended the practice of prescribing puberty blockers and cross-sex hormones to gender-dysphoric patients under the age of 18. Finland also revised its treatment guidelines in June 2020, prioritizing psychological interventions and support over medical interventions. Major changes are also underway in the UK, as the NHS has convened a "Cass Review" to examine the practice of transition for young people and the evidence that underlies it.

Thus, it seems evident that there is a growing concern over the proliferation of medical interventions that have a low certainty of benefits, while carrying a significant potential for

medical harm. It is worrying that Dr Turban does not seem to demonstrate the professional curiosity to rethink his endorsement of medical transition for minors and his dismay at psychotherapy and its role in the care of gender dysphoric individuals of all ages.

We are also deeply concerned by Dr Turban's activism to suppress the debate on the proper care for gender dysphoria in the public arena. On May 25, 2021, Dr Turban tweeted the following:

"When I spoke with @60Minutes about their "detransition" story and asked where they found the people to profile – they refused to tell me and became defensive. We still don't know if they searched for people on TERF forums, and transparency would be appreciated."

We bring to your attention that "TERF" (an acronym for "trans-exclusionary radical feminist") is a pejorative term, and that Dr Turban's use of it to smear and dismiss the experiences of the detransitioners who appeared on 60 Minutes is incredibly hurtful. That a fellow at Stanford would criticise 60 Minutes for having a brief segment featuring detransitioners has many of us very concerned that, should one of his patients experience transition regret and subsequently decide to detransition, Dr Turban would be unfit to help them due to his hostility towards the subject.

Therefore, we are deeply concerned with how Dr Turban may practice as a clinician, specifically how he may treat a transgender person struggling with transition regret or a detransitioner seeking to discuss their regret or reverse their transition. His comments on the GenderGP podcast, his flawed use of the USTS, and his hostility towards any discussion of transition regret are all highly problematic and in need of addressing. We ask Stanford to speak out for more thoughtful approaches because, as it stands now, Stanford appears to be silently endorsing Dr Turban's harmful claims that exploratory psychotherapy is tantamount to conversion therapy and that hormones and surgeries are the only appropriate treatment for people with gender dysphoria.

I received affirmative care at my gender clinic. I received no exploratory talk therapy. I injected myself with cross-sex hormones and underwent a double mastectomy. I now suffer from transition regret, and have detransitioned as a result. The distress and harm that I have endured because of the knee-jerk affirmative approach that people like Dr Turban advocates for has been immense. I implore you, on behalf of the detransitioned women who co-signed this letter and myself, to please consider its contents carefully – we wish only to help the many others like us.

Sincerely,

Sinéad Watson

Keira Bell

Rachel Marie Foster

Carol Freitas, co-founder of DetransVoices.org

Cited:

U.S. Transgender Survey Report (2015): [USTS-Full-Report-Dec17.pdf \(transequality.org\)](#)

Exploring Detransition with Dr Jack Turban (2021): [Exploring Detransition with Dr Jack Turban \(gendergp.com\)](#)

One Size Does Not Fit All: In Support of Psychotherapy for Gender Dysphoria (2020): [One Size Does Not Fit All: In Support of Psychotherapy for Gender Dysphoria | SpringerLink](#)

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Detransition-Related Needs and Support: A Cross-Sectional Online Survey (2021): [Full article: Detransition-Related Needs and Support: A Cross-Sectional Online Survey \(tandfonline.com\)](#)

Pubertal Suppression for Transgender Youth and Risk of Suicidal Ideation (2020): [Pubertal Suppression for Transgender Youth and Risk of Suicidal Ideation | American Academy of Pediatrics \(aappublications.org\)](#)

Puberty Blockers and Suicidality in Adolescents Suffering from Gender Dysphoria (2020): [Puberty Blockers and Suicidality in Adolescents Suffering from Gender Dysphoria | SpringerLink](#)

[Angus Fox](#)

Actually, I was just crazy the whole time.

(And honestly, it's really hard to trust anyone after that.)

Michelle Alleva,

<https://somenuanceplease.substack.com/p/some-reflections-on-the-hysterectomy>



[Michelle Alleva](#)

Aug 24

My sudden desire to transition in young adulthood felt like an epiphany. I came across this concept—transgenderism—which, as I heard it explained over and over, increasingly sounded like something that might apply to me. The visualization I had of the moment I made the decision (because there is a moment in time I can pinpoint) was completely cinematic in my head and has an epic soundtrack.

The part of me that likes to see the positive in everything commends my younger self's flair for the dramatic. I want everything in my life to go like a movie. I want everyone in it to automatically know what I'm thinking and how I'm feeling, I want everything in it to go exactly how I've visualized it a hundred times before, and I want my story to *mean* something because what's the point of suffering this life if it doesn't *mean* anything. (Sorry. Apparently my present self also has a flair for the dramatic.)

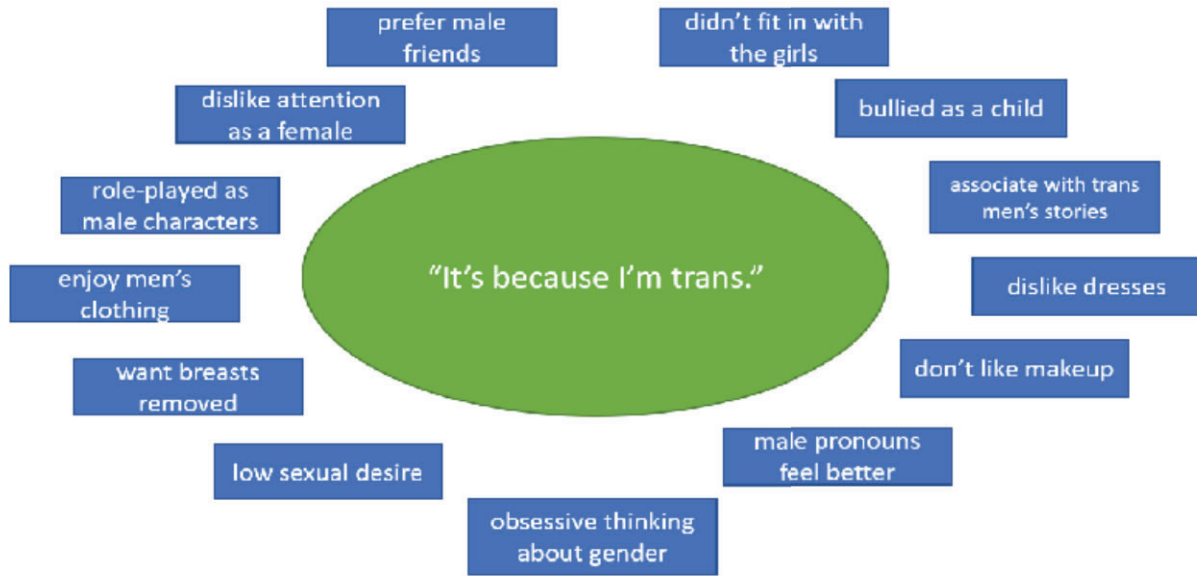
Otherwise, though, having the benefit of what I know today, remembering this moment is kind of sobering. I now understand all the moving parts that make up the so-called epiphany. I now understand how they all went together in a way that gave me the wrong answer. And I've also now learned a word for what I was experiencing: apophenia.

"Apophenia is the tendency to perceive meaningful connections between unrelated things."¹ It's over-interpreting patterns from what is essentially just random noise. It's the same concept that leads people to believe in conspiracy theories. At an extreme, it's a type of delusional thinking... you know, like believing you're not a woman when all of the credible evidence points to the contrary?

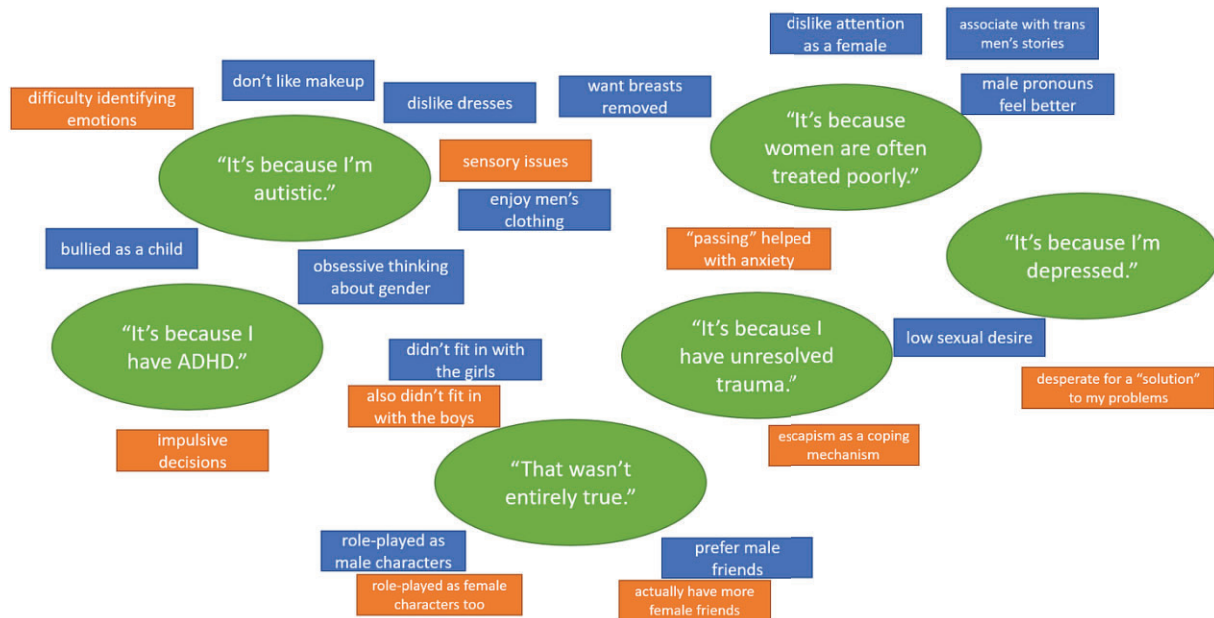
I didn't have an epiphany. I had an apopheny.

When I was making the decision to transition, I came up with a list of evidence that I felt explained why I was not a woman (and was somehow a man instead). I now have better explanations for everything on that list.

I went from something that looked like this:



...to something that looks like this:



I hear frequently that I am meant to take “personal responsibility” for my decision to transition, particularly because I was an adult. This is my take on the situation: I became completely convinced about something that was ultimately untrue. It was a delusional belief. I brought that belief to health professionals who had been taught that it was kinder to affirm the belief than to question it. As a result, I was prescribed cross-sex hormones which caused irreversible changes to my body, and with my belief affirmed, I continued further, having surgeries that disconnected me even further from the reality of my femaleness.

I believe it was medical negligence for them to have failed to properly investigate my delusional belief. My argument is three-fold: “gender identity” is a faith-based belief, not an empirically-recognized condition, and when it comes to medicalization, it is unethical for health professionals to simply accept such a belief at face value; the evidence base for medical transition does not present a straightforward narrative where the benefits always outweigh the risks; and my consent could never have been informed without a proper and thorough exploration of what was affecting my mental health—particularly egregious was the failure to screen for developmental disabilities.

I’ve also written about how [social influence](#) and [developmental disability](#) played parts.

I don’t place blame in one single place. I don’t understand the purpose of yelling “personal responsibility” at me when it is clear that the health professionals who facilitated my transition had their own responsibility towards me. Particularly, I believe they had a responsibility to offer me the type of therapy that would have led to an understanding as in the second diagram above before proceeding to an invasive treatment with permanent effects.

I do have to take responsibility for *something*, though. Of course I do. I may have been delusional, but coming to the wrong conclusion was still my mistake. I have the responsibility of figuring out how I was able to make such a massive mistake. I have to learn from the process. I have to teach myself what critical thinking looks like. I have to recognize logical fallacies. I have to be able to identify abusive behaviour. I have to see red flags for what they are and not what I want them to be. I have to acknowledge that my voice of reason sometimes says things I don’t want to hear but which are true.

I think nearly everyone who transitions experiences that voice of reason. At least, when I experienced doubts about transition, people were certainly happy to remind me that everyone who transitions does. It’s just internalized transphobia. Maybe young transitioners don’t hear it as often, especially if they have a regular routine of people affirming them. As a transitioning adult, though, it’s a lot harder to live in the real world. It’s a lot harder to establish yourself in society. It’s a lot harder to find satisfying relationships. Over time, it gets harder and harder to ignore the fact that it feels like everything you’ve invested into this identity has been for absolutely nothing. All transition does is create virilized women and feminized men, and we have so few long-term studies about what lifelong synthetic cross-sex hormones does to a person. The whole thing is just one giant experiment.

Doubt is why so many true believers, when confronted with biology or the existence of detransition, feel like they have been traumatized by the interaction instead of being able to laugh it off. People who transition are invariably prone to rumination, and doubt can cause a spiral. Imagine the devastation if you are wrong. What's been done to you. What's been done to thousands of others. What we're happily doing to naive little children. The thought would send anyone into a tailspin. Of course it's easier to believe everything's fine.

Imagine feeling your whole life like you're "crazy" until you find a community who assures you that you aren't and enables you on a journey of self-discovery, only to find at the end that... hey, you actually were crazy the whole time. It's a bummer.

I don't know if I'm succeeding at critical thinking. I have a difficult time taking hard positions on anything nowadays. Some days I'll be really firm on one thing, and other days I'll start to loosen up a bit. I'm worried about overcommitting... what if I make a mistake again? I second guess whether I'm doing the right thing. Sometimes when assessing people, I wonder if I'm giving them the benefit of the doubt or just ignoring red flags.

This whole ordeal has left me feeling like I can't trust anyone, including myself. I had a hard time asking for help *before* I transitioned. Health care professionals felt a little safer. Now I don't know if I'll ever be able to forget the kind of recklessness they had with my life. People who loved me cheered me on as I nullified every body function that identified me as a woman, then berated me and claimed I had been radicalized when I shared that I felt like I'd been brainwashed.

How am I supposed to know who has my best intentions in mind? How do I know which authorities to believe? How do I know if the people I think are my friends actually care about my well-being? Which of these people just want me for my story? Who is safe to be vulnerable in front of?

Transition was a form of escapism for me, and escapism is still my coping method of preference. I'm still chronically online. I feel like most of my existence is just a concept on the Internet. Otherwise I'm just electricity auto-piloting a meatsack that barely feels a thing. Most days, it is so difficult to just be present.

I value material reality because it keeps me grounded. It's good to have things that you feel you can safely put your faith in. I trust empiricism. I don't trust me. I've let myself down too many times. But I'll get there.

⁴<https://en.wikipedia.org/wiki/Apophenia>

The Boy Who Shifted Shapes: A Detransitioner's Story

Shape Shifter, <https://reduxx.info/opinion-the-boy-who-shifted-shapes/>

By

Shape Shifter

June 22, 2022

I call myself Shape Shifter.

While the name is not my own, I feel it describes me well. I have traversed the darkest reaches of the so-called “gender spectrum” in search for what – who – I was, and transformed myself in the process multiple times.

I can say now that I am a 31-year-old gay male who lived life as a transgender woman for a decade.

I grew up in predominantly Muslim country in Eastern Europe. From the youngest years of my life, I was ‘gender non-conforming,’ and even before I hit puberty I knew I wasn’t like the other boys. But as I got older, I realized that my sexuality and desire to present myself the way I felt most comfortable was not accepted by the society I had been born into. I was rejected both at school and in the home. Bullied by peers, and treated as a burden by my family for my femininity.

My father would tell me I “wasn’t a real man.”

My mother expressed shame over my height and physical attributes.

It doesn’t take long to drown when you’re thrown into a sea of resentment with no lifejacket.

Slowly but surely, I began to hate everything about myself. My “feminine” body and mannerisms were a burden, as was my sexuality. Still, all I could focus on was improving my English with the dream I could leave my country and move to the West.

When I was 20-years-old, that dream became a reality. I moved to the United States to begin graduate school, and for a moment breathed the fresh air of a liberation I’d never before known. I was finally able to grow out my hair and dress in the manner I preferred, and I could be openly gay without fear of persecution.

But that moment was tragically brief.

A question from a well-meaning classmate would put the breaks to the freedom I was enjoying.

“What are your pronouns?”

I was confused, uninitiated. I'd never been exposed to the concepts present in contemporary gender ideology before, and began to research into it like any curious person would. Little did I know at the time, every page I scrolled through and concept I learned was tugging me farther and farther away from the liberation I had just barely begun to enjoy.

Faced with an avalanche of testaments to affirmation and validation, I began to convince myself I was a “straight woman” trapped in a man's body. After the life I had lived, wrought with such repression and condemnation, it almost made sense.

It explained everything, in fact. The reasons why I never fit in or felt comfortable with my body suddenly became crystal clear. The logic behind it also promised an escape, something I had been desperately searching for my whole life.

I could be free from the homosexuality that I had been shamed for since my earliest years. I could be free from being a “feminine” man. I could be a heterosexual woman. Then I could be accepted, find love, and live a normal life.

In my excitement, I almost immediately began presenting myself as a transgender woman. I distanced myself from my gayness and my maleness. I changed my pronouns and quickly changed my name and legal documents.

But despite my initial feelings I had done the right thing, the escape – the freedom – I sought continued to elude me.

While I had been told while I was growing up that I was too “feminine,” male sexual partners were now telling me I was too “masculine,” and not womanly enough. I decided it must have been because my “wrong body” still needed medical correction.

I was able to get feminizing hormones rather quickly through Fenway Health in Boston, Massachusetts, which only required me to tell them I was living as a woman and “felt” like a girl on the inside. Soon after, I got facial feminization surgery and breast implants.

While my dating pool initially increased, I was told by members of my transgender community that men who were comfortable with my penis were “tranny chasers” who didn't see me as a real woman. This, coupled with the fact these men often didn't want anything to do with me out of the bedroom, made me feel like I would never find true love until I had completed all of the surgeries associated with transitioning. My mental health began to deteriorate, and I decided that I needed bottom surgery in order to feel happy.

I ended up getting two letters from mental health professionals at Fenway Health stating that I had gender identity disorder and that I was a good candidate for sex reassignment surgery. At no point was I asked about my childhood trauma, the repression of my sexuality in my home

country, or even whether I had any co-morbid mental health concerns. They assumed that my depression and anxiety issues were due to gender identity disorder, and that radical medical intervention would be the solution.

I had my surgery in 2015, and my life has been a living hell since then.

The “neo-vagina” the surgeon had constructed was too tight for comfortable penetrative sex, and I started rapidly losing depth despite rigorous and painful dilations because my body was treating the tunnel as a wound and was constantly trying to heal itself.

Within a few months, I was back on the operating table to widen the constructed passage. The surgeon blamed me for not dilating enough, though I had followed the instructions he’d given. Even after I left the hospital, I lost one inch of the canal’s depth in the drive from Pennsylvania to Massachusetts as my body continued to treat the surgical creation as a wound that needed to be closed.

Despite all of my efforts, most of which resulted in extreme discomfort during urination, the canal was narrowing once again.

My second revision was done with a different surgeon, one who harvested tissue from my colon in order to add it to the constructed canal. Within one month, the passage had tightened once again and dilation was painful.

Shape Shifter in a 2017 YouTube video documenting the aftermath of one of his neo-vagina revisions.

By my third revision surgery, I had done so much research that I was begging the surgical team to order certain supplies to keep my passage from closing again. During this surgery, my pelvic bone was shaved down to make the entrance to my hole wider. But after I removed the inflatable stent I had inserted during surgery, I discovered I had developed a colorectal fistula — an abscess-like infection. I had to be scheduled for fistula repair surgery.

The fourth revision to my neo-vagina resulted in the fistula tearing back open.

It was then that I realized no one had known what they were doing. Everything was experimental. All of it was being made up as they went along — and I was nothing more than a guinea pig.

I later discovered the surgeon, Dr. Salgado, who had done my last three revisions was let go from the University of Miami for taking pictures of his patients while they were under anesthesia and posting them to Instagram.

Currently, my neo-vagina is only 1 inch deep. I have spent thousands of dollars flying across the United States trying to find a surgeon with a solution, but I have been told that due to the

amount of revisions I have had, any attempts would likely result in me having to wear a colostomy bag.

I realize now that in my search for freedom... I have mutilated myself.

I lost my perfectly healthy genitals. I lost my 20s. I lost family and friends. I lost my chance at a comfortable, fulfilling sex life.

My insurance, however, has paid out over \$250,000 to surgeons and hospitals for the various hack-jobs that had been performed on my body. Everyone made out like a bandit, yet I had nothing to show for it. Not one of the surgeons who lined their pockets off of my trauma has ever called to check up on me, ask about my quality of life, or see if I was still alive.

In 2018, I made my first YouTube video discussing my complications. At the time, I was still living as a "woman," and I had thought I would document my thoughts and experiences as I believed they were rare.

But after I uploaded my first videos, I had many trans-identified individuals write me and explain they were in similar positions. I realized there were a lot of people with complications, but they weren't included in any official statistics or data.

Just as my journey had started, it would end with research.

I realized hormone treatments were not even FDA approved for treatment of gender dysphoria. That there were no studies proving that hormone replacement therapy was safe in the long run. And, just as I had thought, all of the surgeries were experimental.

But more than anything else, I realized I was not a "woman." I was a gay man who had been sold a lie.

After everything I have been through. I realize medical transition destroyed my mental and physical health, and lowered my quality of life substantially.

At 31-years-old, I have osteoporosis and scoliosis from the impact of hormone replacement therapy. In fact, my testosterone was so low that in January I began taking it to improve my bone density. My T-levels increasing resulted in a slew of extreme emotions towards my transition. It was as though a part of my brain that had been dormant was activated, and I was suddenly wrought with the full depth of the realization that I had made a mistake I could never take back.

I was at my breaking point, and experienced suicidal ideations. Entering therapy helped me realize I had heavy childhood trauma that should have been addressed prior to ever allowing me to proceed with an irreversible medical intervention. I discovered I had borderline personality

disorder as well as body dysmorphia, and no matter how far I took my surgical modifications, I would have never felt “at home” in my body.

Since I have come out as a detransitioner, I have spoken to so many people like me whose stories are important and deserve to be heard. In fact, I believe the detransitioner community will be growing exponentially in the coming years. It is tragic to think about the parents who will one day realize they ruined their child’s body by jumping to “affirm” how they perceived themselves at one moment in time — kids who may have just been gay or gender-nonconforming like myself.

I have also met criticism from those who still subscribe to gender ideology who claim that me speaking on my experiences will take away “life saving” care from trans people.

But I got that care. And where is my life?

Sometimes I feel like I am in a nightmare I will wake up from. My eyes will open and I will have my original body and have my whole life ahead of me to make decisions. Since beginning testosterone, I also sometimes get ‘phantom penis’ symptoms which are extremely traumatic.

Medical detransitioning is even more experimental than medical transitioning, but I am not rushing into anything anymore. One thing is for sure, I will never again identify as transgender woman — a label that not only endorses questionable medical experimentation, but also has a negative impact on the rights and dignity of females.

My idea of freedom is different now than it was those years ago, but the challenges are, ironically, the same.

In addition to the criticism from those who champion gender ideology, I also get flak for having long hair and nails but identifying as a man. Yet again I am being criticized for not fitting certain rigid definitions of masculinity — the very thing that set me down this path in the first place.

But I am done trying to ‘correct’ myself to please others.

I am done shifting shapes.

Shape Shifter

Shape is a guest opinion contributor at Reduxx. He is a recently detransitioned male who now advocates for the rights of gender nonconforming people to be protected from medical transition.

What they took from us

Ritchie Herron, Twitter: <https://archive.ph/dA1wn>

← Thread

 **TullipR**  
@TullipR

#

I want to tell everyone what they took from us, what irreversible really means, and what that reality looks like for us.

No one told me any of what I'm going to tell you now.



6:57 PM · Jun 13, 2022 · Twitter Web App

4,001 Retweets 1,868 Quote Tweets 10.9K Likes

🗨️ ↻️ ❤️ ↗️

 **TullipR**  
@TullipR · 4h

Replying to @TullipR

I have no sensation in my crotch region at all.

You could stab me with a knife and I wouldn't know. The entire area is numb, like it's shell shocked and unable to comprehend what happened, even 4 years on.

🗨️ 24 ↻️ 279 ❤️ 2,426 ↗️


 **TullipR**  
@TullipR · 4h

I tore a sutra 4 days post recovery, they promised to address it, i begged them in emails to fix it, they scorned me instead.

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Relevant people

 **TullipR**  ... **Follow**
@TullipR

Detransitioned Adult Male |
HRT is 🍌 | JK is based |
Team Member @genspect |
Detransition support is
available at
reddit.com/r/detrans

What's happening

MLB · LIVE

Braves at Nationals 

Years later, I have what looks like a chunk of missing flesh next to my neo-vagina, it literally looks like someone hacked at me.

They still wont fix it

7 186 2,056



TullipR 🌈🏳️‍🌈 @TullipR · 4h

No one told me that the base area of your penis is left, it can't be removed - meaning you're left with a literal stump inside that twitches.

When you take Testosterone and your libido returns, you wake up with morning wood, without the tree.

I wish this was a joke

25 311 2,383



TullipR 🌈🏳️‍🌈 @TullipR · 4h

And if you do take testosterone after being post op, you run the risk of internal hair in the neo-vagina. Imagine dealing with internal hair growth after everything?

What a choice... be healthy on Testosterone and a freak, or remain a sexless eunuch.

10 196 2,093



TullipR 🌈🏳️‍🌈 @TullipR · 4h

And thats something that will never come back and one of the reason why i got surgery.

My sex drive died about 6 months on HRT and at the time I was glad to be rid of it, but now 10 years later, Im realising what im missing out on and what I won't get back.

5 178 2,021



TullipR 🌈🏳️‍🌈 @TullipR · 4h

Because even if i had a sex drive, my neo vagina is so narrow and small, i wouldn't even be able to have sex if i wanted too.

And when I do use a small dilator, I have random pockets of sensation that only seem to pick up pain, rather than pleasure.

6 151 1,836



TullipR 🌈♂️ @TullipR · 4h

Any pleasure I do get comes from the Prostate that was moved forward and wrapped in glands from the penis, meaning anal sex isnt possible and can risk further damage.

3 133 1,680



TullipR 🌈♂️ @TullipR · 4h

Then theres the dreams. I dream often, that I have both sets of genitals, in the dream I'm distressed I have both, why both I think? I tell myself to wake up because I know its just a dream.

And I awaken into a living nightmare.

5 142 1,834



TullipR 🌈♂️ @TullipR · 4h

In those moments of amnesia as I would wake, I would reach down to my crotch area expecting something that was there for 3 decades, and it's not.

My heart skips a beat, every single damn time.

10 142 1,794



TullipR 🌈♂️ @TullipR · 4h

Then theres the act of going to the toilet. It takes me about 10 minutes to empty my bladder, it's extremely slow, painful and because it dribbles no matter how much i relax, it will then just go all over that entire area, leaving me soaken.

6 155 1,754



TullipR 🌈♂️ @TullipR · 4h

So after cleaning myself up, I will find moments later that my underwear is wet - no matter how much I wiped, it slowly drips out for the best part of an hour.

I never knew at 35 I ran the risk like smelling like piss everywhere I went.

11 145 1,827



TullipR 🌈🏳️‍🌈 @TullipR · 4h

Now i get to the point where im detransitioned and the realisation that this is permanent is catching up with me.

During transition, I was obsessive and deeply unwell, I cannot believe they were allowed to do this to me, even after all the red flags.

13 331 2,639



TullipR/Ritchie 🌈🏳️‍🌈 @TullipR · 13 Jun

I wasn't even asked if I wanted to freeze sperm or want kids. In my obsessive, deeply unwell state they just nodded along and didnt tell me the realities, what life would be like.

70 844 7,365



TullipR/Ritchie 🌈🏳️‍🌈 @TullipR · 13 Jun

And finally, theres dilation, which is like some sort of demonic ceremony where you impale yourself for 20 agonising minutes to remind you of your own stupidity.

41 580 5,976



TullipR/Ritchie 🌈🏳️‍🌈 @TullipR · 13 Jun

This isn't even the half of it. And this isn't regret either, this is grief and anger.

Fuck everyone who let this happen.

697 1,181 11.9K



TullipR/Ritchie 🌈🏳️‍🌈 @TullipR · 14 Jun

Replying to @TullipR

I haven't deleted anything btw. Thread got mass reported.

242 539 5,905

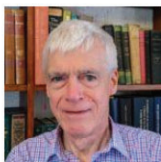
Chloe's story: puberty blockers at 13, a double mastectomy at 15

Chloe Cole & Michael Cook, MercatorNet,

<https://mercatornet.com/chloe-cole-gender-transition/80073/>

Note: most of Chloe's remarks were originally from a speech in the public forum of the California State Assembly.

Laying bare the iniquity of doctors and psychologists who exploit the confusion of children and adolescents.



by

Jul 27, 2022 / 3 mins

[Michael Cook](#)

/ 12



Chloe Cole / Facebook screenshot

The California State Assembly has been studying a bill, [SB 107](#), to declare the state a sanctuary for minors who have been denied transgender -affirming medicine and surgery elsewhere.

SB 107 would permit insurance companies, physicians, and contractors to disregard subpoenas about child custody if the child is being medically treated for gender dysphoria. It would also ban health care providers from providing medical information requested from another state if that state has a policy allowing civil action to be taken against individuals who perform “gender-affirming health care” on children.

A young California woman, Chloe Cole, has testified before legislators in her own state, in Louisiana, and in Florida about her experience at the hands of gender-affirming doctors. She began to transition to a male at 13; she had a double mastectomy at 15; and she detransitioned at 17. Her brief speech lays bare the iniquity of doctors and psychologists who exploit the confusion of children and adolescents.

This is [the text of her address in Louisiana](#). It is heart-breaking.

My name is Chloe Cole, and I am from the Central Valley of California and a former transgender child patient. I am currently 17 years old and was medically transitioning from ages 13-16.

After I came out to my parents as a transgender boy at 12, I consulted a pediatric therapist in July of 2017 and was diagnosed with dysphoria by a ‘gender specialist’ the following month. The healthcare workers are trained to strictly follow the affirmative care system, even for child patients, in part because of California’s ‘conversion therapy’ ban. There was very little gatekeeping or other treatments suggested for my dysphoria.

When my parents asked about the efficacy of hormonal, surgical, and otherwise ‘affirming’ treatments in dysphoric children, their concerns were very quickly brushed aside by medical professionals. I didn’t even know [detransitioners](#) existed until I was one.

The only person who didn’t affirm me was the first endocrinologist I met. He refused to put me on blockers and expressed concerns for my cognitive development. However, it was easy to see another endocrinologist to get a prescription for blockers and testosterone, just like getting a second opinion for any other medical concern. After only two or three appointments with the second endocrinologist, I was given paperwork and consent forms for puberty blockers (Lupron) and androgens (Depo-Testosterone), respectively. I began blockers in February of 2018, and one month later, I received my first testosterone shot. I received Lupron shots for about a year.

After two years on testosterone, I expressed to my therapist that I was seeking top surgery, or the removal of my breasts. I was recommended to another gender specialist, who then sent me to a gender-affirming surgeon. After my first consultation with the surgeon, my parents and I were encouraged to attend a ‘top surgery’ class, which had about 12 Female-to-Male (FTM) kids. I was immediately struck by how early some of them seemed in their transition and how

some were much younger than I was; I was 15 at the time and had been transitioning for 3 years.

In retrospect, the class inadvertently helped to affirm my decision because of the sense of community provided by seeing girls like me going through the same thing. Despite all these consultations and classes, I don't feel like I understood all the ramifications that came with any of the medical decisions I was making. I didn't realize how traumatic the recovery would be, and it wasn't until I was almost a year post-op, that I realized I may want to breastfeed my future children; I will never be able to do that as a mother.

The worst part about my transition would be the long-term health effects that I didn't knowingly consent to at the time. I developed urinary tract issues during my transition that seem to have gotten worse since stopping testosterone. I have been getting blood clots in my urine and have an inability to fully empty my bladder. Because my reproductive system was still developing while I was on testosterone, the overall function of it is completely unknown. I have irreversible changes, and I may face complications for the rest of my life.

I was failed by modern medicine.”

Did Chloe give informed consent to these life-changing procedures? Is her experience really different from the atrocities committed by German doctors at Auschwitz or American doctors in the Tuskegee syphilis studies?



Michael Cook

Purification Rites

Cut Down Tree, <https://cutdowntree.substack.com/p/purification-rites>

An autobiographical essay



[Steven A Richards](#)

Apr 26

There's a concept which I was exposed to a lot while I was transitioning: "testosterone poisoning". It's talked about online and in trans spaces, and is pretty common; I've seen multiple trans women wearing "I survived testosterone poisoning" t-shirts.

The idea is that, for male-to-female trans people, the testosterone naturally produced by their bodies is toxic. It makes them grow hair, causes their bodies to develop in a masculine direction during puberty, deepens their voices, changes how they smell, increases their libido, and often makes them more aggressive and prone to anger. Later in life, it can cause male-pattern baldness. These changes are upsetting and confusing to many young boys as they enter puberty, but most of them learn to cope with, and even appreciate, the changes that come to their body as they grow into adults.

I didn't get that chance, and never will.



I was terrified of what testosterone was doing to me. I didn't want to be a man. I didn't want to be big and hairy. Men scared me. I'd seen my mom assaulted when I was young, and I didn't want to be like the man who'd done that to her. The idea of testosterone poisoning made sense to me because maleness itself terrified me. I'd been bullied a lot in school by other boys, and a lot of that bullying involved sexual abuse—groping, inappropriate touching, striking my butt and genitals, and verbal harassment (wolf-whistling and yelling sexual comments at me). These, I felt, weren't the sorts of things that happened to men. My suffering was only legible if I was a woman.

This background made me vulnerable to the ideology of transgenderism. I had no friends in high school and spent a lot of time online, and I was exposed to the burgeoning social justice/woke movement before it entered the mainstream. When I connected to the internet, I was inundated with messages about the violence of maleness. This wasn't just "toxic masculinity"—I saw feminists saying *all* masculinity was toxic, that all men were rapists, all men were oppressors, all men should be killed. As a white man, I was directly responsible for all of the oppression experienced by women and people of color. I was fourteen years old and had never been in a fight in my life or said a racist or misogynistic word to anyone, but I believed that the circumstances of my birth made me a monster. I wasn't mentally mature enough to think critically about these ideas, or to take them as anything but literal fact. (Literal thinking is common among autistic people, and I would be diagnosed with autism a few years later.) I believed, all the way down to my core, that all men were evil and all women were unimpeachably virtuous. This was black-and-white thinking; it's one of the reasons why so many autistic people are transitioning. I believed that my very existence was sinful.

I picked up these messages from the internet because I was a chronically online loner. Now this stuff is everywhere, online and off. Is it any surprise that teenagers (frequently autistic teenagers who take everything literally) want to transition when they're exposed to societal messages telling them "men are bad, men are dangerous to women, only men have power" and "you can change your gender if you want to"? Young boys will want to transition to escape the masculinity they're being told is harmful and toxic; and while I can't speak with authority on the subject, I imagine young girls will want to transition to escape the violence they're being told is around every corner, in the eyes of every man who looks at them, and to access the power they're being told they're denied. These hyperbolic, oversimplified distortions of a complicated reality are neither healthy nor empowering, and hurt more than they help. Add that onto the fact that puberty is often a miserable experience, and you have an epidemic of child transition. The same pressures that made me want to transition are everywhere now.

I wanted to transition because my body was my enemy, and my body was the enemy of the world. I hated myself and wanted to punish myself. It was the same feeling that motivates cutting, binge-eating, anorexia, and lashing oneself. My very nature meant I deserved pain. I couldn't remove my whiteness from myself, but maybe I could remove my maleness. The first step was to get rid of the poison coursing through my body: testosterone, the hormone turning me into an animal and a brute. I needed to purify myself.

When you're being poisoned by a chemical which makes your mind and body monstrous—when your very soul is at risk—you'll do anything to make it stop. For me, that meant transitioning. I didn't have any particular reason to want to be female except that women were better than men—in my mind women were smarter, kinder, more empathetic, more beautiful, more moral. I was attracted to women, and felt guilty about that attraction—straight male sexuality, I was told, was repulsive and rapey and objectifying. If I were a woman, I could be attracted to other women in a virtuous way. Maybe I was fetishizing lesbians, but there was nothing leering about it—I simply believed the things that women online were saying about themselves.

Women also, in my perspective as a confused and traumatized fourteen-year-old, were valuable and worthy of consideration in a way that men were not. When women were sexually victimized by men, they seemed to receive sympathy and caring. People moved mountains to protect them. When I told my dad about the sexual harassment I faced at school, he told me I should punch the next person who did something like that to me. My whole life I'd been told that violence was never the answer, and I believed that. I was a gentle soul. Now, because of my sex, I was expected to use violence to protect myself in a way I had no idea how to do. I didn't, and if I had I suspect I would've been suspended for defending myself and the bullying would've gotten exponentially worse when I returned. I didn't receive any protection. If I couldn't handle it myself, I deserved what I got.

I perceived that society viewed women as having inherent value (“women and children first!”) and I envied that, because in my life I felt that no one valued me. My transition wasn't driven by fetishism or misogyny. I was just a lonely, wounded child. All I really wanted was to be loved.

Still, teenagers try on a lot of different identities and beliefs. I'd already had a militant atheist phase. This trans phase might have also passed on its own—if it weren't for the Queer Youth Center. An organization in my area offered resources for “queer youth”, including community groups and sex ed. Opting into a trans identity didn't just mean aligning myself with some vague concept of female goodness, it also gave me a community of friends when I had none. I met my first girlfriend (she called herself a lesbian) at the Queer Youth Center. I went from being utterly alone to being surrounded with love. Adults at the Queer Youth Center affirmed my identity, introduced me to trans activists, and encouraged me to engage in activism myself. (The activism is a central part of the trans movement—these people don't want you to *just* transition, they also want you to spread the ideology. This moral drive to proselytize is part of how the movement has spread so quickly.) While I can't remember if I was ever urged to medically transition, there was definitely a sense that medical transition was the “next step” after adopting a trans identity. I didn't even need that much motivation. People cared about me. I had friends. I was sold.

So I had to transition, which meant I had to convince my parents and doctors to let me transition. Remember, I had been convinced by online hyper-left rhetoric that my soul was on the line here, so nothing was off the table. Adult trans people online gave scripts for how to talk to parents and doctors when you wanted to access trans medical care. I dug through my memories, searching for evidence of a good, gentle female soul buried deep inside my awful, twisted male body. When I was a kid I tried on my mom's sandals. I wore nail polish with my mom and sister. When my mom was nursing my sister, I tried to mimic what she was doing by

holding a doll to my chest. I didn't like haircuts that made me look too masculine. I used these isolated incidents to construct a narrative, and I even convinced myself it was true. I also convinced myself—following the guidance of online transsexuals—that I'd kill myself if I didn't transition. I made suicide threats. I claimed that I'd buy hormones off the black market (again, adult trans women on the internet told me how I could do this if I needed to). I begged, pleaded, and threw fits. Health care providers told my parents that I was trans, that transitioning was the best thing for me, that it would be good for my health. I got my mom on my side, and together we talked my dad into letting me start puberty blockers at 15, after I'd banked sperm (thank God they made me preserve my fertility, because I wouldn't have done it myself) and estrogen at 16. Even this was too slow for me. Every day, my body was masculinizing. Every day, that slow drip of poison was mutating me into a bestial horror.

I wasn't old enough to understand what I was doing to myself. I didn't realize what I was giving up, how permanent these changes I was making were. But I hadn't yet made the worst decision of my life. That would come a few years later, when I decided to have myself castrated.

I was about 20. (I remember being 21 when I got the surgery, while my mom remembers me being 19, and I really don't want to dig up medical records to check—even writing about it conjures traumatic memories.) I no longer cared about being female, but the fundamental self-hatred was still there. I'd chosen a new name—I'd chosen a lot of new names, and none of them stuck—and was telling people to use "they/them" pronouns for me. I wanted to have my testicles removed. They were the source of testosterone, the source of the poison I had to take medication to block. They were symbolic of everything I hated about myself.

No responsible doctor should have performed this surgery. I was frequently changing my name and identity. I had no clear conception of who I was or what I wanted. The delusional thinking which began with me believing I was a woman deep down had morphed into something stranger and darker, encouraged by a trans woman who'd struck up a friendship with me when I was fifteen and they were in their mid-twenties. I saw myself as a being of water and light, an angel imprisoned in a filthy human body. I resented having to eat, sleep, piss, and shit. I particularly hated having sexual desires and wanted to be rid of them. I'd been diagnosed with autism, and would later be diagnosed with OCD. That OCD manifested as a constant fear that my testicles would get tangled up and somehow kill me in my sleep (I told the doctors about this and it didn't raise any red flags). Shortly before the surgery, I'd briefly tried to detransition in a moment of lucidity, but I didn't have a supportive community waiting on the other side to welcome me. After a few months of loneliness, scary changes to my body, and a significantly increased libido that didn't know how to handle, I fled back to the neutering medication and the open arms of my local trans community. All of this should have screamed to any sane person that I wasn't in a mental state where I could understand what this surgery meant or fully consent to it. I needed serious psychiatric help and deprogramming, not to have my balls cut off so I could more closely resemble the sexless angel I wanted to be.

I saw the surgery as a rite of purification. I felt that by removing a part of myself I would become whole. Years of online grooming and ideological brainwashing had made me delusional, but no one pushed back on it. I heard, through my mom, that my dad was worried about me, but we

never spoke about it. I can't remember if he tried; if he did, I'm sure I wasn't receptive. What did he know? The doctors were happy to go through with it, and they had medical degrees. So I took two weeks off work, went into the hospital, and had my balls cut off.

They called the surgery an "orchietomy", but these days I think of it as a castration. I sometimes have nightmares about waking up afterwards. In my dreams I scream and scream, I run through the hallways howling and begging for them to undo it, to fix me, to make me right again. In reality, I stuffed all my feelings of grief, regret, and horror as far down as they would go. My testicles were gone. My healthy endocrine system, which would have begun to function again if I'd ever gone off medication, had been destroyed. For several years I lived with severe cognitive dissonance, constantly pushing away any negative feelings about the surgery, but eventually I had to admit to myself what had happened.

I hadn't cleansed myself, I'd ruined myself, and I'll never get back what I lost. I've made myself permanently reliant on the pharmaceutical industry for artificial testosterone which will never be as good as the real thing and which can be taken away in a heartbeat if I ever lose my insurance or there are problems with the supply chain. I still have phantom pains, and probably always will, as well as intense cramping in my groin when I do certain exercises. I wasn't warned about any of this by the doctor who performed my surgery.

For many people, transition is an obsessive quest to compulsively eradicate one's own sexed characteristics. It's born from ideology, self-hatred, trauma, and grooming by online strangers. Gay, autistic, mentally disabled, and gender non-conforming teenagers, as well as victims of sexual violence, are the most affected. Pharmaceuticals and plastic surgery investors are getting rich off of the butchery, mutilation, and mass sterilization of these vulnerable and traumatized populations. Doctors and therapists who assist people in transition aren't providing care, they're enabling self-harm and practicing eugenics.

A transition is never done. There's always more surgeries, new treatments, more work to do. You can never carve away enough pieces of yourself to be satisfied. You can never rid yourself of the fundamental facts of your own biology. You can never be cleansed of sin.

The end goal of transition isn't self-actualization. It's self-annihilation.