Frequently Asked Questions

IOC Policy on the Protection of the Female (Women's) Category in Olympic Sport and Guiding Considerations for International Federations and Sports Governing Bodies

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Contributing authors:
Sone Erikainen, PhD, Katrina Karkazis, PhD, MPH Michele Krech, JSD,
Marcus Mazzucco, JD, and Madeleine Pape, PhD

On March 26th, 2026, the IOC issued a new policy on eligibility for the women's category at the Olympic Games. Based on input from a select working group whose members have not been publicly identified, the new policy requires genetic sex testing of all women athletes seeking to compete in the women's category for the first time since 2000. This new policy increases the exposure of women and girls at all levels of sport to rights violations, unnecessary medical interventions, scrutiny, and harassment.

This FAQ has been developed to assist journalists in quickly navigating the key **scientific, ethical, legal, safeguarding, and equity issues** raised by the new IOC policy. It includes links to relevant resources and recommendations for further reading. Any questions regarding this document or requests for further information from the authors can be directed to humansofsportorg@gmail.com.

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1. Introduction to the SRY gene

Does the SRY gene determine a person's sex?

No. The presence of the SRY gene does not reliably determine a person's sex.

The SRY gene (Sex-determining Region of the Y chromosome) is usually found on the Y chromosome. During early embryonic development, it can initiate the process leading to testis formation. If formed, testes typically produce hormones that influence later stages of bodily development.

Andrew Sinclair, the geneticist who identified the SRY gene in 1990, has emphasized, however, that testis development involves a cascade of interacting genes rather than the action of a single determining factor. Sinclair has also cautioned against treating SRY as a definitive marker of sex. He has explained that an SRY test reveals only whether the gene is present. It does not reveal any information about "how [the gene] is functioning, whether a testis has formed, whether testosterone is produced and, if so, whether it can be used by the body."

Geneticist and intersex specialist Eric Vilain,[1] along with the Human Genetics Society of Australasia (HGSA), has emphasised that no single gene determines the development of sex-related characteristics on its own. In their statement opposing SRY testing in sport, the HGSA specifically said that "[b]iological sex in humans is determined by a complex interplay of chromosomal, gonadal, hormonal, and phenotypic (physical) factors." As biologist Anne Fausto-Sterling has argued, treating any one gene as a "master switch" obscures the fact that the development of our sex characteristics depends on the coordinated activity of many genes. For this reason, the presence of the SRY gene does not indicate that an individual is "biologically male" or has experienced "male sex development."

In a statement addressing proposed policies, the European Society of Human Genetics noted that "the result of such a test cannot determine completely whether an individual should compete in the female category," underscoring that SRY testing does not provide a valid scientific basis for eligibility decisions.

[1] Eric Vilain participated in an expert group convened by the International Olympic Committee in 2016 to develop testosterone-based eligibility regulations.

Is there evidence that the SRY gene is linked to athletic performance?

No. There is no published research showing that the presence of the SRY gene itself is linked to athletic performance.

The SRY gene contributes to one step in early embryonic development that may lead to the formation of testes. Some sports regulations assume that the mere presence of the gene is sufficient to indicate physiological traits potentially relevant to athletic performance. However, not a single study has established that the SRY gene itself causes or correlates with differences in athletic ability.

Athletic performance reflects the interaction of many biological and environmental factors, including physiology, training, nutrition, and opportunity. For this reason, the presence of the SRY gene alone cannot indicate whether someone has any particular athletic advantages. As such, and as stated by the Human Genetics Society of Australasia, SRY gene testing "does not provide any biologically or medically specific information regarding performance enhancement."

2. Scientific evidence and genetic sex testing in sport

What type of mandatory genetic testing did the IOC use?

Between 1968 and 2000, the IOC used several different means of genetic sex testing to determine eligibility for women's competitions. Testing for women during this period was mandatory; the men's category did not have, and has not ever had, a similar policy.

The IOC first relied on a buccal smear (cheek swab) test for the Barr body to verify the presence of a second X chromosome. If the Barr body was identified, an athlete was considered eligible to compete in the women's category.

In 1972, the IOC added a fluorescent body test for the Y chromosome. The Y chromosome has a small region that can glow under special fluorescent dye, which can then be viewed under a microscope. The fluorescent body test also used a buccal smear sample, although this test was used less consistently than the Barr body test.

Under this combined approach to genetic screening, athletes had to demonstrate both the presence of the Barr body (indicating a second X chromosome) and, often, the absence of the fluorescent body (indicating no Y chromosome).

In 1992, the IOC shifted to the polymerase chain reaction (PCR) test for the SRY gene and continued to use it until the 2000 Sydney Olympics, after which the IOC no longer conducted mandatory genetic sex testing, though the practice continued in certain sports.

Genetic sex testing was intended to be less intrusive than the so-called "nude parades" that had preceded it. For example, from the 1966 Commonwealth Games in Jamaica until 1967, all women competitors in the sport of athletics were required to undergo physical examinations, sometimes including genital examinations. However, the move to genetic testing did not end such examinations. Rather, genetic sex testing was just the first screening step, which led to further testing and examinations for many athletes. Historical reports show that these examinations could be extensive and invasive, including examinations of breast and pubic hair development, palpation and measurement of genitalia, and other forms of genital examination.

For further information, see: Sex Testing: Gender Policing in Women's Sport and Gender Verification and the Making of the Female Body in Sport.

For a comprehensive timeline of sex testing in sport, consult this resource compiled by Human Rights Watch.

Why was mandatory genetic sex testing abandoned then? What were the scientific critiques at the time?

Genetic sex testing was abandoned after decades of scientific criticism, ethical concerns, and practical problems. By the late 1980s, a broad international scientific consensus had emerged that these tests were scientifically unsound and ethically problematic. By 1992, the International Association of Athletics Federations (IAAF, now World Athletics) had ended mandatory genetic sex testing, though it took a further eight years for the IOC to follow. As a prominent group of geneticists and medical experts later wrote, "[d]espite compelling evidence for the lack of scientific merit for chromosome-based screening for gender, as well as its functional and ethical inconsistencies, the IOC persisted in its policy for 30 years."

A major concern was that sex was far too complex to be determined by genetic testing alone. Given the complexities of sex-related biology and the important role of a person's social and legal sex, genetic test results mean very little in isolation. The tests wrongly excluded women who should have been eligible to compete — detecting chromosomal variations, but not athletes with an unfair advantage.

Critics also noted that such tests are prone to errors. The PCR test for the SRY gene is around 99% accurate, but in a competition with 600 athletes, a 1% error rate still corresponds to around six false results, potentially leading to wrongful disqualification and severe personal consequences.

These scientific critiques were accompanied by concerns about medical ethics. Geneticists and medical experts emphasised that genetic testing should only be used for medical purposes, not sports eligibility, and that athlete consent was not genuinely voluntary, since refusal meant disqualification. Confidentiality and privacy were also difficult to ensure: if an athlete failed a test and was excluded, their sensitive genetic information could effectively become public.

By the late 1980s, genetic sex testing was so widely discredited that relevant scientists began refusing en masse to conduct it—a significant practical problem for the IOC. At the 1988 Calgary and 1992 Barcelona Olympics, appointed scientists withdrew or refused; during the 1994 Lillehammer Olympics, no scientist from any Nordic country agreed to conduct the PCR test, after which the Norwegian parliament passed legislation making such testing illegal. The scientific flaws of mandatory genetic sex testing can ultimately impede implementation, since sport organisations rely on the cooperation of the scientific and medical community.

For further information, see: From Discredited to Prohibited: A Legal Angle to the History of Genetic Sex Testing Sport and Its Implications in the Present Context

For a summary of scientific critiques from this period, see: The Uses and Misuses of Sex Chromatin Screening for Gender Identification of Female Athletes, Gender Verification in Competitive Sports, and Gender Verification of Female Athletes.

The IOC has described the new policy as "based on science" and "highly accurate evidence." Does scientific research support the reintroduction of SRY testing?

No. The scientific critiques that initially led to the end of genetic sex testing still apply today. Recent research has not provided any scientific justification for the reintroduction of genetic sex testing, including testing for the SRY gene. Notably, there exist no independent, peer-reviewed studies that establish a link between the SRY gene and athletic performance.

The presence of the SRY gene continues to only indicate that a particular genetic sequence exists, not what other sex-related characteristics are present in a particular individual, their sex classification, nor their athletic capabilities.

In the absence of data linking the SRY gene to athletic performance in all sports, disciplines, and events, the IOC cannot credibly claim that universal genetic testing is an evidence-based approach.

Only one International Federation—World Athletics—has ever published research related to athletes with intersex variations and performance, and that research has been heavily criticised for lack of scientific integrity and ethical concerns. Importantly, such studies contained no information pertaining to the SRY gene and sports performance. As one international group of experts recently wrote, "[n]o primary evidence base exists to justify testing and regulating the genetic sex characteristics of an entire population of competitors."

For further information, see: "Fair and safe eligibility criteria for women's sport: The proposed testing regime is not justified, ethical, or viable;" "Harmful anachronism: World Athletics reinstates gene testing to participate in women's competitions;" "Integrity is needed in the regulation of transgender athletes and athletes with sex variations."

3. Safeguarding and implementation concerns

Who would be required to take the test?

The new IOC policy requires all women and girls competing at the Olympic Games to undergo mandatory genetic sex testing (the youngest Olympian at the Paris Olympic Games 2024 was just 11 years old).

However, as has already been seen in the case of the World Athletics policy, National Federations (NFs) may have wide latitude to decide which athlete populations are to be tested. For example, after World Athletics recently imposed mandatory genetic testing as a condition of eligibility for women's international competitions and world rankings, the Athletics Federation of India (AFI) announced mandatory genetic screening for all athletes competing in "national-level competition" as well as "upcoming athletes," potentially implicating a vast number of women and girls competing at youth and sub-elite levels.

Who will be responsible for implementing this policy, and what risks does that create?

While the exact distribution of responsibilities remains unclear, IFs are likely to delegate testing to NFs to implement country by country. NFs may therefore be expected to manage every stage of implementation, including sourcing their own testing providers, providing information to athletes and their families, managing athletes' personal data, interpreting results, and deciding on any follow-up steps for athletes who return a positive test result.

Accordingly, actual implementation practices and athletes' experiences of taking the test may differ sharply across sports and countries, depending in part on resources and local laws (discussed below). where NFs are well-resourced, there are significant risks that

athletes' confidential medical information will not be handled appropriately and that athletes' rights will not be respected before, during, and after the testing process. In Australia in 2025, for example, women who had qualified for the World Championships were provided with the opportunity to discuss the test with a genetic counsellor. However, they were also informed that they needed to take the test as soon as possible, that failing to do so would mean they could not compete at the World Championships, and that Athletics Australia would not be able to protect them from media scrutiny should they return a positive result.

World Athletics has previously described SRY testing as simple, non-invasive, and harm-free. Is this true?

"Non-invasive" describes the buccal (cheek) swab to collect the sample for the test, which is medically defined as non-invasive because it does not penetrate the skin or physically enter the body. However, it does not describe or accurately capture the experience of mandatory genetic sex testing. As one athlete explained her experience in 2025, "I feel like I have to run a lap around the oval naked, just to prove that I'm female."

In addition to forced disclosure of private genetic information, athletes face potentially highly invasive follow-up examinations. A positive SRY test result is rarely the end of the process. An athlete who tests positive will likely be required to undergo further testing. These often highly invasive procedures, which are imposed not for the athlete's health but to satisfy eligibility requirements, are precisely why the World Medical Association (WMA) has explicitly opposed regulations applying to athletes with intersex variations. The WMA considers such regulations to be "degrading treatment affecting the health, dignity and integrity" of athletes and "a form of blatant violence against women."

Are athletes able to provide free and informed consent to genetic testing?

Consent is not free when provided under coercive conditions. As bioethicists Katrina Karkazis and Morgan Carpenter have explained, athletes face an impossible choice: they must either submit to testing or be disqualified from women's competition. Disqualification usually entails the end of their competitive athletic careers, and often loss of income and financial stability. This effectively amounts to coercion, even when the athlete formally provides consent.

It is unclear what information will be provided to athletes across the more than 200 countries where genetic sex testing will be implemented. It is highly unlikely, however, that all athletes will have access to genetic counselling prior to and following a positive test result. Under previous eligibility regulations, athletes were often not given explanations of the tests being conducted or access to independent medical and legal advice. In the case of Ugandan 800m runner Annet Negesa, irreversible and life-changing surgeries were undertaken without her full understanding. Such experiences show the harms that can occur under a pretense of consent.

What happens if an athlete tests positive?

Under the new IOC policy, a positive SRY test result automatically results in exclusion from the women's category unless the athlete is willing to undergo further evaluation and is found to have Complete Androgen Insensitivity Syndrome (CAIS) or a similar genetic variation. Such women are permitted to compete, despite having the SRY gene. CAIS is a genetic variation that affects the functioning of androgen receptors, meaning that even if a woman has naturally high testosterone levels, they do not produce their usual androgenic effects on sexual development and physiology. Beyond CAIS, however, other conditions that may be identified in this process—including partial androgen insensitivity, mixed gonadal

dysgenesis, and related variations—show widely differing responses to androgens, even among individuals with the same diagnosis. Moreover, determining androgen responsiveness is complex, and no single clinical measure fully captures it.

As has been seen historically, even with a provision for CAIS, athletes may be excluded solely on the basis of the SRY test. Otherwise, a positive SRY test result will likely trigger further investigations to determine whether the athlete has androgen insensitivity, and if so, whether it is complete or partial. While genetic sequencing offers one means of identifying CAIS, such technologies are not universally available and may be prohibitively expensive. The alternative is considerably more subjective and invasive, as explained by international experts: "[I]t begins with clinical examination to assess clitoromegaly, symmetry of external genital structures, presence/absence of breast development, extent of sexual hair, involves palpation of genitalia, and so forth." Such invasive examinations have already been conducted under previous iterations of World Athletics eligibility rules, as extensively documented in a Human Rights Watch report. Kenyan sprinter, Maximila Imali, has recounted her experience:

> They took me to the Nairobi hospital for the testing. They undressed me in front of a man, the doctor. I remember that day. It was so emotional and I was like, how can a man undress me and tell me to just lie down, I need to see you? So he opened my legs. He tested my chest and he took samples. I was like, why are these people doing this?

As the WMA has stated, such practices in sport "openly deny women's rights, their dignity, their physical integrity and autonomy." The new IOC policy contains no safeguards to ensure these medically unnecessary and highly invasive procedures, often undertaken without the free and informed consent of the athlete, will not take place.

Isn't it better to identify an intersex condition "early"?

No.

Some proponents of mandatory genetic sex testing may claim that it is in the interests of the athlete to identify intersex variations early, presumably in order to provide appropriate medical care. However, many people with intersex variations require no medical intervention at all. Others, such as those with salt-wasting forms of congenital adrenal hyperplasia (CAH), do require medical treatment for health reasons, but this is distinct from the kinds of testing and classification at issue here. Clinical care in these cases is guided by symptoms, risk, and patient well-being, not by the need to classify bodies for eligibility, and many individuals do not need or want clinical intervention related to these variations. In many instances, there is no clinical indication to identify these variations, and certainly no need to do so for the purposes now being proposed. "Early identification" is best seen as serving sports organisations seeking to avoid controversy at major championships, in the process subjecting women and girls across the world to unjustified testing with extremely limited oversight.

4. Violations of domestic and international law and medical ethics

Does mandatory genetic testing in sport comply with legal restrictions on this practice?

No. Requiring genetic sex testing as a condition of participation in sport violates clear legal restrictions on genetic testing at domestic, regional, and international levels. This exposes IFs, NFs, the IOC, and others involved in implementing mandatory genetic testing to various forms of possible legal action.

First, the Convention on Human Rights and Biomedicine, along with many domestic jurisdictions—such as Austria, France, Norway, and Switzerland—prohibit genetic testing unless it serves a health-related or medical research purpose, which sex testing for the purposes of sport eligibility clearly does not.

Second, free and informed consent is a fundamental precondition for genetic testing in most jurisdictions. Not only do individuals below a certain age lack the legal capacity to consent, the consent of an athlete of any age cannot be freely given when it is a condition of sports eligibility.

Third, the above-mentioned Convention on Human Rights and Biomedicine prohibits discrimination based on genetic characteristics, while the International Declaration on Human Genetic Data stipulates that genetic data should not be used in ways that stigmatize individuals or groups. However, genetic sex testing rules are both discriminatory and stigmatizing. First, they target only women and girls for testing; and second, they exclude those with a particular genetic trait, resulting in direct impacts such as loss of income as well as the further marginalization of transgender and intersex people, not only in sport but in society at large.

Fourth, certain jurisdictions specifically prohibit making genetic testing or disclosure of test results a condition of a contract, agreement, or access to goods or services (see e.g., Canada's Genetic Non-Discrimination Act), and prohibit anyone other than medical practitioners or researchers, and particularly employers, from requesting or using genetic information (see e.g., the United States' Genetic Information Nondiscrimination Act). Sport governing bodies run afoul of these laws if they require athletes to undergo genetic testing as a condition of eligibility.

For further information, see Sex Testing on Trial: Legal Barriers to the Genetic Sex Testing in Sport.

Does mandatory genetic sex testing comply with data protection laws?

No. Genetic sex testing violates the European Union's (EU) General Data Protection Regulation (GDPR), which has broad application to international sport. The GDPR applies to sport organizations operating in the EU, athletes residing in the EU, and sport competitions taking place in the EU.

The GDPR prohibits the processing of genetic data, except in very narrow circumstances, such as where the data subject gives explicit, voluntary and informed consent, or where the processing is necessary for and proportionate to reasons of substantial public interest set out in EU or EU member state law.

Such voluntary and informed consent does not exist for genetic sex testing as athletes are forced to grant consent under the threat of exclusion from sport, and often in circumstances where they are not aware of the harms that might follow from the use of their data (e.g.,

invasive follow-up clinical examinations, stigmatization, bullying, and loss of professional opportunities).

There is no EU or EU member state law that describes the purported aim of sex testing in sport as a substantial public interest. Even if there was, the data processing in pursuit of that aim would not be necessary and proportionate due to the lack of scientific evidence that women with the SRY gene have a competitive advantage over other women athletes and the significant harms to athletes that can result from genetic sex testing.

The processing of genetic data for sex testing may also violate data protection laws that have been recognized as providing an adequate level of protection similar to the GDPR, such as in Brazil, Canada, Japan, Switzerland, and the United Kingdom.

Notably, the Privacy Commissioner of Canada investigated the World Anti-Doping Agency (WADA) based on a complaint alleging that WADA disclosed athletes' personal information to IFs, which they used to assess athletes' sex-based eligibility without their knowledge or consent, in violation of Canada's *Personal Information Protection and Electronic Documents Act*. WADA has now agreed to stop allowing IFs to use such data for purposes other than anti-doping.

For further information, see: Using administrative and judicial remedies under data protection laws to challenge the processing of sensitive personal data by international sport governing bodies.

Does mandatory genetic testing in sport comply with human rights law?

No. As several Special Procedures of the UN Human Rights Council have observed, genetic sex testing as a condition of eligibility for women's sport infringes on athletes' internationally recognised rights to equality, bodily and psychological integrity, and privacy. Likewise, mandatory genetic testing infringes rights guaranteed by the European Convention on Human Rights, particularly the right to respect for private life (Article 8) and the prohibition on discrimination (Article 14).

In legal terms, infringements of these rights can only be justified if they are necessary, reasonable, and proportionate to a legitimate aim. The aim of ensuring fairness in women's competition is not achieved by excluding athletes based on a single genetic trait, which has not been shown to provide transgender and/or intersex women athletes with a systematic advantage over their peers. Therefore, mandatory genetic testing, and exclusion of athletes on this basis, cannot be considered necessary or reasonable. Indeed, a Belgian court recently concluded that international cycling regulations excluding transgender women were discriminatory and disproportionate for lack of a scientific basis.

The United Nations Guiding Principles on Business and Human Rights outline the responsibility of sports organisations to respect all internationally recognised human rights. The IOC's commitment to human rights is specified in the Olympic Charter and the IOC Strategic Framework on Human Rights. Other international sport governing bodies similarly commit to respecting human rights in their statutes and constitutions. Mandatory genetic sex testing cannot be reconciled with these responsibilities and commitments

For further information, see the Joint Statement from Legal Experts on Genetic Sex Testing in Sport, which was sent directly to the IOC prior to release of the new policy.

Can medical professionals implement mandatory genetic testing while meeting their professional obligations?

No. As the World Medical Association and others have made clear, the fundamental principles of medical ethics include respect for autonomy, beneficence (acting in the best interests of the patient), non-maleficence (doing no harm), justice, confidentiality, non-discrimination, consciousness, and the defense of human rights. Administering a medical test without a health-related purpose and without free and informed consent clearly violates these ethical obligations. So, too, does administering medical tests on a discriminatory basis—in this case, conducted only on women and girls—and using results to further discriminate against certain women on the basis of their genetic characteristics.

It is for these reasons that the WMA has described eligibility regulations as requiring physicians "to act deliberately in breach of their ethical duties to athletes." If medical professionals agree to undertake genetic sex testing for sport eligibility purposes in jurisdictions where such forms of genetic testing are prohibited by law, they may also be held responsible for violating these laws.

For further information, see the Human Genetics Society of Australasia's Position Statement on SRY gene testing in athletes; policy position of the World Medical Association; WMA contribution to the report of the Special Rapporteur on violence against women and girls to the UN General Assembly on violence against women and girls in sport; *Proposed SRY test to determine athletes' sex should be treated with caution.*

5. Broader consequences

Does mandatory genetic sex testing protect women and girls in sport?

Advocates of mandatory genetic sex testing, including the IOC and certain IFs, argue that such measures are necessary to protect fairness and integrity in women's sport. However, as discussed above, there is no evidence that genetic sex testing achieves these protective aims.

At the same time, the harms introduced by mandatory sex testing are concrete and well-documented. Requiring all women and girls to undergo a scientifically dubious test—with potentially life-changing consequences and no real possibility to refuse unless they want to give up their athletic careers entirely—exposes them to significant rights violations. Many women and girls may face highly invasive follow-up examinations and public scrutiny. The risks are particularly acute for athletes in the Global South, where limited access to independent legal and medical advice compounds the potential for further violations.

The result is that women's sport is rendered less fair, less safe, and less equitable—the opposite of the IOC's and IFs' stated purpose. Youth drop-out rates, pay and resource disparities, sexual and physical abuse, online harassment, and a lack of gender equity in coaching and leadership roles continue to be primary factors undermining women and girls in sport.

What are the potential consequences for grassroots and youth sport?

International sports organizations often depict eligibility regulations as impacting only elite competition. In practice, elite eligibility rules also impact women and girls at the grassroots level. Mandatory genetic sex testing establishes the precedent that women and girls' participation is conditional, and that any athlete can be called upon to provide proof of their sex characteristics. This creates an unsafe climate in which any woman or girl who excels at her sport and/or does not meet stereotypical definitions of femininity can be targeted by

peers, parents, sports administrators, or even elected officials. There are already cases of young women in the United States being publicly accused of having an unfair advantage in youth sport, simply because of their appearance. In Alberta, Canada, to great opposition, women and girls are now required to provide proof of their sex category assigned at birth just to be allowed to compete in grassroots sport. For transgender girls and girls with intersex variations, anticipation of physical scrutiny at competitive levels may further discourage their participation in grassroots sports. In all of these ways, policies at competitive levels may "trickle down" to the grassroots.

Rather than making sport more inviting, and ensuring women and girls are embraced in all of their diversity, the new IOC position will make grassroots and youth sport a less safe and welcoming environment.

What are the specific consequences for transgender athletes and athletes with intersex variations?

The reintroduction of mandatory genetic sex testing will have significant consequences for transgender athletes and athletes with intersex variations, from the elite down to the grassroots level. It also has important negative consequences for transgender and intersex communities more broadly, beyond the boundaries of sport.

Transgender athletes are under-represented at all levels of sport and physical activity, not only because of the specific barriers posed by eligibility regulations and federal and state laws, but also because of high levels of stigma and fear of discrimination and harassment. Exceedingly few transgender athletes—women or men—make it to the elite level of sport. Some sports organizations have proposed a third or open category for transgender women and girls. In practice, however, it appears unlikely that transgender women and girls would participate under such conditions.

Women and girls with intersex variations also face grave consequences, with mandatory genetic sex testing potentially paving the way for highly invasive follow-up examinations, medically unnecessary "treatments" or surgeries, and significant stigma. One such athlete who was unnecessarily banned from competition after returning a positive SRY test result is Spanish sprinter Maria José Patiño. As she has attested, the impact of that decision was life-changing:

> [M]y story was leaked to the press. I was expelled from our athletes' residence, my sports scholarship was revoked, and my running times were erased from my country's athletics records. I felt ashamed and embarrassed. I lost friends, my fiancé, hope, and energy.

In more recent years, in addition to life-changing surgery, Ugandan sprinter Annet Negesa has also spoken out about the impacts of being excluded from sport simply for having an intersex variation: "I lost my career, I lost my [university] scholarship, I lost income, and I was no longer able to help my family financially. I lost everything."

The impacts of mandatory genetic sex testing will be felt beyond sport. Sport is a powerful vehicle of social cohesion. But just as sport has the power to challenge stigma and inequalities, it can also exacerbate them. By modeling scrutiny and exclusion, transgender and intersex communities everywhere are made less safe. Such impacts will particularly be felt from schoolyards to medical clinics, making transgender people and people with intersex variations more likely to become the targets of hostile remarks, violence, and mistreatment.