

Oral History with Aurora Levins Morales

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Interview of Aurora Levins Morales
SESSION 1 (5/14/2019)

[00:00:00]

APOLLONI: Good morning. It is May 14, 2019. It is eleven o'clock a.m. This is Alexandra Apolloni. We're at the UCLA Center for the Study of Women. I'm here doing an oral history interview with Aurora Levins Morales. Also in the room is Rachel Lee, director of the UCLA Center for the Study of Women. Aurora, I wanted to start the interview by asking you just a basic introductory question: If you had to tell someone in one or two sentences who you are and what you do, what would you tell them?

[00:00:36]

LEVINS MORALES: I was born to tell stories that expand people's sense of what's possible for humankind in order to help us transition towards societies that are good for everyone.

APOLLONI: That's amazing. And can you tell us a little bit about when and where you were born?

LEVINS MORALES: Yes, I was born February 24, 1954 in the mountains of Western Puerto Rico in a tiny little hospital started by antiwar—war resisters, pacifists, who did not serve in the Korean War. I grew up on a coffee farm.

APOLLONI: Can you tell me a bit about your parents and your family background?

LEVINS MORALES: Yes, in fact, I could talk for hours about that. My father comes from Ukrainian Jewish immigrants to the US that came turn of the 20th century. My mother's family were Puerto Ricans who went to New York in 1929. They were both born in 1930. They met in the Communist Party, and they were blacklisted in 1950. The Korean War had just broken out. My father had no intention of fighting—thought that if he was drafted, he would either refuse to go to the induction center or end up being jailed for refusing to follow orders. They weren't sure they were going to get to be together, and so they went to Puerto Rico to see her country and have some time together before whatever happened, happened. They ended up not drafting him—which was a smart move—but they were blacklisted. They couldn't get work. So they bought a farm, so they would at least have a steady supply of food.

My father was a very prominent ecologist, evolutionary biologist. My mother—when my mother died, my brother said that in that moment, a wave of curiosity swept the planet and that children born at that moment would ask really interesting questions. My mother was very

broadly curious. She studied anthropology. She was an amateur naturalist and was writing a book about bromeliads. She was an artist and craftswoman. She studied philosophy of science. She was—my father says—responsible for turning him from a geneticist to an ecologist because she kept asking contextualizing questions “Yes, but what do they do when they're not in the lab?” They married very young. They met when they were eighteen going on nineteen, and married when they were nineteen going on twenty, and then went off to be blacklisted baby farmers in the mountains of Puerto Rico.

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APOLLONI: And what do you remember growing up on a farm in Puerto Rico? What was that like?

LEVINS MORALES: That's about twenty books. It was wonderful. I was born in '54. When I was two, we went to New York for four years while my dad did graduate school. And then went back, went to Rochester for a year, which is where I started writing in first grade. And then went back for the rest of my childhood-childhood. We left when I was thirteen. So seven to thirteen, we lived on the farm. My father taught at the university in the capital, which was quite a long drive in those days. He would leave at four in the morning on Monday and come back Wednesday night—just all his university work was in those three days. The other four days he was at home, doing research and writing, and there was always a microscope on the kitchen table. But we mostly lived up there on the farm.

In the summers, we would sometimes go to the States. Occasionally one of us kids would accompany my dad into the city or an expedition or out on one of his research trips to small islands. But we mostly lived in a house that was floor to ceiling books and crammed with art supplies. My mother once told me that they decided to have children so they would have people to talk politics with because it was the 50s. My mother described herself as a feminist without a movement. She very intentionally went about enriching our growing up. So, she got all these science toys and all these different kinds of art supplies. We went to the local public school, but it was four classrooms for six grades, so most of the grades met a half day. So, she supplemented that with homeschooling. I was entranced with the alphabet from a very early age and loved reading and writing, and so she got us subscribed to mail-order libraries and children's book clubs. My brother began drawing when he was two, so she made sure he had reams of paper and art supplies and taught him how to do woodcuts.

It was a very intensely enriched home environment in the middle of a rain forest, which, those were our—our other parents were the mountains and the sky and the rain forest. We got to roam in this very densely alive environment, climb trees and build houses with banana leaf roofs and dig in the clay. It was, in many ways, very wonderful. There were things that were also really

difficult. Our family was the target of political persecution of various kinds. And this is a whole separate topic—but it does feed into my immune system and my body's responses to things—was that I fell into the hands of a group of child pornographers. So, there was a whole trafficking thing that was going on for me that nobody in the family knew about. I was told my family would be killed if I talked. Parallel to the parts that were really fabulously idyllic, there were a lot of terrifying things. When I was a baby, my parents had papers made out for my adoption by this pacifist family—actually the doctor who delivered me—because they didn't know if they might both end up in jail for a long time, and they didn't want our grandparents raising us. So, I grew up knowing that there could be a pounding on the door in the middle of the night and I'd suddenly be living with a different family. There was enrichment and respect for our minds and our impulses and our creativity, but really not any sense of security. It wasn't—it didn't feel safe. It felt interesting.

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APOLLONI: And I wonder if you could say—so you mentioned your autoimmune disease or disorder, do you see the seeds for that being laid in your childhood?

LEVINS MORALES: I—it's not actually an autoimmune. It's that my body has a lot to fight. I would say the biggest things that impacted that are heavy exposure to pesticides and early terror. I have a body that's on high alert. It's on high alert in many different ways, and it has a lot of different reasons to be on high alert. So, this is a perfect example of my Mind-Body Ecosystem and political system converging and causing certain responses within: within my being. I actually invented a word, *guanakán*, from pieces of Taíno words that means “our center,” but I'm using it to mean “Mind-Body ecosystem.” Because just as the mind body division is often in the way of seeing a holistic picture, individual person and ecosystem, including social ecosystem, is often a false divide. So yes, my *guanakán* was impacted by many things.

APOLLONI: I think what you're saying about being a person experiencing fear and how that was affecting you, and how your body has a lot to deal with, I think that's such an interesting and compelling way to frame what we often think of as just an environmental response. It's broadening our sense of what the environment is. Do you remember when you first started to become aware of that dynamic for you? When did you start to realize, “Oh, the way that I feel emotionally is shaping how my body feels, how my body reacts”?

[00:09:44]

LEVINS MORALES: I didn't really experience it that way. Because I was a child in a rain forest with a lot of stuff happening, there's a way I'm not sure I distinguish between inner and

outer weather. I was a designated problem child. I was the child who had big, dramatic emotional responses to things. There's a certain amount of teasing that came with that. I had an awareness that I was more reactive than—so my mother and I were the two females in the family. My mother said that she felt like her role was as a lightning rod for everyone else's emotions so she got targeted as the explosive, predictable one, even though it was a whole family dynamic channeled through her. I feel like that was also, to some extent, true for me because nobody knew what was going on that was making me so freaked out all the time. But I started—and I also had a fall from an upper bunk bed onto a concrete floor that I now think was the first of my many brain injuries.

I started having what my mother defined as reactive hypoglycemia as a ten (or) eleven-year-old, maybe. I get really shaky if I didn't eat on time. Sugar would send me all sorts of places I didn't want to go. She was having problems with blood sugar, and so she was doing a lot of reading. My mother was a huge consumer of various kinds of self-help information. She really took a lot of charge in that way. She was researching all kinds of things about her own health and about our health. And so, that was the first—I think, my first awareness of significant problems with my health, but only in retrospect. They were—you know, when you're a child, something weird happens and it's like, “Well, everything's weird. The world's weird.” So, I would have these episodes where it would feel like time had slowed down, I couldn't move my muscles, and I had a strange metallic taste in my mouth. Now, it seems obvious that those were partial seizures. To what degree they were triggered by pesticides, to what degree they were triggered by trauma, to what degree they were triggered by having banged my head—who knows? So that was going on probably from the time I was seven or eight, but when I started thinking about my health was probably ten or eleven and then going into my teens.

But the big, emotional, cultural, and environmental shift in my life was leaving the farm to go to Chicago. At that point, I started paying a lot of attention. My best friend's mother—one of my best friend's mothers—was what was then called a health food nut and she paid a lot of attention to the more metabolic kinds of health problems. She was somebody who knew a tremendous amount about nutrition and about supplements and stuff. So, in my teens, I paid a lot more attention to that, and I was having—I was passing out. I would get shaky and exhausted, and really out of it. At the time, we were describing that as a blood sugar problem, but I had also gone into an environment that had really heavy air pollution, a cold damp climate that we were not sufficiently prepared for because of denial about the weather. I had strep throat every winter, all winter for five years. So, it was a progression of an awareness.

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APOLLONI: And how old were you to Chicago?

LEVINS MORALES: Thirteen.

APOLLONI: Okay, so it sounds like you had a lot of people around you who were thinking about health and aware of health and that eventually shaped you thinking about health. Did your mother or anyone ever send you to see health professionals? Or do you have memories of that?

LEVINS MORALES: Okay, rural Puerto Rico, early 1960s—not really any such thing. We got checked for parasites every six months. So, no. Also I want to say that my father became a famous ecologist, but in the early days of farming, this was better living through chemistry. It was a lot of World War II chemical weapons being turned into pesticides. So, this would have been when my mother was pregnant with me and maybe my first two years of life: heavy exposure, DDT, dieldrin—which turns out to be linked both to epilepsy and to the cancer that killed my mom—parathion, lindane, all of these things were being applied to the farm and my father would come home covered with white powder and pick me up. His clothes and mine were washed in the same washing machine. I had heavy exposure at a really critical early age. Dieldrin is used to create epilepsy and lab rats to test anti-seizure meds and the protocol for doing that is very similar to the kinds of exposures that I had, which is a sub-acute level that's not going to immediately trigger seizures, and that's intermittent instead of constant. It lowers seizure thresholds dramatically. So, my father didn't—his transition into ecology and into greater awareness of those things happened later in my childhood.

And then, when we moved to the States, my family essentially fell apart. My mother—the move to the States was for three reasons. My father had been denied tenure at the University of Puerto Rico for his political activism. My mother wanted to study anthropology; she was excited about the radical potential of anthropology. She had met Anthony Leeds, and some other radical anthropologists in New York, in the 50s. There wasn't a program that would work for her in Puerto Rico. And although this wasn't articulated at the time, she wanted me the hell out of there because we were living in an environment in the countryside where girls my age are getting pregnant and where the models of what women did with their lives involve lots of kids and a lot of alcoholic husbands and no money of their own. She wanted me in a different context. So, we hit Chicago just as the women's movement was exploding. But she—when she got to Chicago, I mean, the week that she started grad school at the University of Chicago, there was a massive student strike because they had advertised courses that weren't actually available. She was—got involved in that. And she was subjected to massive amounts of sexism, racism, and classism as a working-class Puerto Rican faculty wife. The stress of that meant that her attention really got withdrawn from parenting. She was what was keeping it together. My father was—also he didn't have the three-day four-day thing anymore—he was involved on committees, and he had to be involved in the internal politics of the university. Both our parents kind of disappeared, but my mother's disappearance really broke up the structures of care.

My brother and I both left home early, but it's really shocking in retrospect that such intentional parenting turned into pretty intense neglect. I was self-medicating with candy and moved out when I was sixteen and lived with other young people in an apartment and ate junk food. Slowly—actually a lot through my friend's mother—became more aware of health stuff. She would—I would linger at other people's houses, so I could get invited to dinner because we didn't have money for food. There would always be a little bowl of vitamins at her dinner table next to all the food. She got me eating brewer's yeast. So, no professionals of any kind. My health care was pretty badly neglected. My mom saw to it I had birth control. But really, it was my friend Shannon's mother, Irene Custer, who started talking nutrition to me, and my friendship with Shannon that got me started in a lifetime of really researching my own body and the different kinds of alternative health care that I could be in control of.

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This is also the moment where *Our Bodies, Ourselves* came out—when I was seventeen, maybe? I can't remember—right around sixteen or seventeen. But I was part of the women's movement in Chicago, and we would have the speculum circles. And with my daughter, I told her and she was like, “Ew!” I was like “No, honey, you have no idea. It was glorious.” You know, because it was the era of, “Don't bother your pretty little head about anything below your waist; that's our business.” We had a number of women who were preparing to go into medical school and who had access to medical school libraries. They'd go in and research and come out. So, we were—it was not only my own need to learn more about how to manage my body, but that there was a whole movement around me that was having that kind of conversation. And so, okay, “Here's what we found out about yeast infections, and let's all talk about it with each other.” When I went to the get birth control, it was in the context of being in a women's consciousness raising group. They were all a lot older than me, but who talked to me through do you actually want to have sex with this guy or not, and you don't have to, and which birth control is going to be safest for you. So that was really—that period in my teens was really what got me on the path, really, of being a theorist of my own body.

APOLLONI: And you said it was through your best friend that you got into feminist activism. Could you talk about—

LEVINS MORALES: No. It was through my best friend, I got into the health care thing. No, my mama took me. My mother and I both went to join to the Chicago women's liberation movement together. At home, we were having mother-daughter fights; we stepped out the door and we were the youngest and oldest members of that particular circle. There were a few older people later, but—and we were allies. We were among a handful of women of color who were in that particular configuration of that organization, and so we would be allies out of it. But no,

it was my mama all the way. My mother pointed out sexism all the time, and had me thinking about that, and noticing it and would comment and so— no, she was determined to have a feminist daughter.

APOLLONI: And what was it like at the time in Chicago being a woman of color feminist? What was the feminist movement like for you at that time? How did you experience it?

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LEVINS MORALES: So exciting! I try to explain to younger women, first of all, how suffocating that period was for women. That there was a kind of fog, a thick fog. Trying to explain that married women needed a letter of permission from their husband to get birth control. This considered license to have sex with anyone you please. And that sense of really direct blatant ownership of women's bodies, and just how thick and unabashed that particular brand of sexism was. And then, to arrive—okay, so I arrived and was targeted with racism that I had experienced some from my father's family in more subtle ways. I had been sent to a Jewish summer camp where there was one other Cuban boy, and everyone decided that we were a pair.

But I arrived in Chicago proud to be Puerto Rican and found that other people found it embarrassing that—I mean, I had experienced girls in my high school singing, “Puerto Rico, my heart's devotion, let it sink into the ocean,” and slamming their book bags into my legs. There was overt racism in a new way in my life. I had never heard the word “spic” before. There was a lot of police violence going on against people of color. I wasn't—and I didn't get called spic, but I heard it around. It was a very black-white polarized city; my brother and I had the same skin tone, but he had kinky hair from the Jewish side of the family. So, he was an honorary member of the Black Student Association; they say, “Why you walkin' with that white girl?” meaning me. So, there was a lot of the invisibilizing of my identity. A lot of my friends didn't quite get it—that I was culturally different from them, my white friends. They thought it was exotic that I had grown up in Puerto Rico, but they didn't understand that that actually meant I had a different way of living in the world. So, it was very challenging, and I was desperately homesick.

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But the women's movement was this ferment of excitement and possibility. Being in a consciousness raising group and having people go around and just talk about what was hard in their lives and listen to each other and go, “Okay, all of us are having this problem. This isn't a problem with—this isn't a character defect. This is a social problem.” And that moment of “Aha!” when you transition from—it's the moment of political diagnosis where you go from

thinking, “What's wrong with me that my relationship sucks? Why can't I be happy with this boyfriend?” to “All of our relationships are sucking in the same way!” There's a pattern here. What does it mean that all of us are feeling like we're being treated like we're stupid in school or in our jobs? What does it mean that we're having the same fights over and over again with our partners? So being fifteen, and just entering into being sexually active and having my own relationships and thinking about my future, and doing that, in the context of hundreds of thousands of women engaged in a national, international conversation. So, at sixteen, myself and another teenager had a radio show about women's liberation worldwide and would write these scripts and play music and talk about what was happening with women in Cuba and in Vietnam and European feminists and Latin American feminists. So, in some ways, it was the direct—it followed from the childhood I had. My parents had been traveling to Cuba from very early in the revolution; they were very aware of the whole world. But to be in the middle of that and have it be about me.

As a young poet, to suddenly realize that there is this whole realm of experience we've been told was not the subject matter of literature. I remember somebody coming back from California with this little—it's called “Woman to Woman” in a little handmade stapled mimeograph poetry book with a lot of people who became famous later. This was the era where you weren't supposed to sign your name to anything because it was individualist. So it was like, Alta, Susan Griffin, and Adrienne Rich, and Judy Grahn were all in it, but the poems weren't signed. But I remember reading Judy Grahn's common woman poems, and it was about being a waitress, and it was about washing dishes. And it was like, “Oh, our lives.” And that was simultaneous with discovering Nicolás Guillén who was an Afro-Cuban poet and going, “He talks like the people in my neighborhood.” So, it was a time of tremendous permission to be who I actually was. So yes, very, very thrilling. I watched as that movement simmered down, how women's struggles started being individualized, and privatized, and personalized again. So that I started seeing young women once again blaming ourselves for the impact of sexism.

APOLLONI: Did being part of that movement, did that change the way you felt about your body?

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LEVINS MORALES: It's a little hard to say in some ways because a lot of things changed how I felt about my body. I was also pretty numb to my body because of the abuse.

APOLLONI: Right.

LEVINS MORALES: But I'd been a tree-climbing tomboy very used to using my body. Then as I'm coming into adolescence, I'm suddenly being targeted with all the sexual attention and then feeling awkward. But then within this movement—I went a lot—what I think what comes

to mind is clothing and the permission to just dress any old way you please, which was also part of going into the later 60s. But I remember wearing hiking boots, what we called “old lady dresses” from thrift stores—which were shirtwaist dresses with flowery patterns on them—and then a jeans jacket with a feminist symbol embroidered on the back and lace around the edges and total butch femme mix ups of clothing. I was actually a test case around the ban on wearing pants at my high school. I was about to be suspended or expelled when I got expelled for doing some guerrilla theater around the war. So all of those things were fused for me, but I think it changed—it allowed me to find ways to use clothing to express my body that I think that the women's movement gave me an avenue for that. And that what I was expressing had to do with the abuse, had to do with being an immigrant, had to do with the change of climate, had to do with that I was part of a movement against a war that was shredding bodies. But that way of expressing my body into the world with my clothing, I think that's the main thing that comes to mind. These are great questions.

APOLLONI: Thank you. And so, you mentioned doing guerrilla theater. I would love to know more about the kind of activist stuff you are doing.

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LEVINS MORALES: Okay, so I grew up in a very activist family. My father was certainly one of the leaders of the independence of Puerto Rico. Was a theoretician of that move—he wrote an article in 1966 that people still use was a lot called, “From Rebel to Revolutionary.” He was on the editorial board of the independent left journal. And so, we didn't—I didn't go to—I'd go into a few marches and things like that. I mean, I'd picketed at a Woolworths counter in New York around segregation when I was a child. But we were very aware of the movements for decolonization throughout the Third World and very aware of Cuba. For someone living in Puerto Rico, you could hear Radio Havana on your AM radio if you got up early before the CIA jamming station turned on. My parents had been there when I was ten. I really had a sense of myself as part of a worldwide movement for liberation from all kinds of things, so there was a certain degree to which it was seamless to move in.

But the turning point for me was the summer I was fourteen, which was 1968, which was such a year. My family was involved in anti-war activism from a somewhat different angle because a lot of my friends were against the war, but we were on the other side. We weren't just against it because it was an unjust war; we wanted the liberation of Vietnam from colonialism. But the summer I was fourteen we spent in Cuba. My father had helped set up a new biology department at the University and was invited back to teach for the summer. We all went. Being fourteen in Cuba in 1968 meant that everybody took me seriously as a political person in my own right. I had adults asking me so, What do you think Johnson's going to do about this or the other? What do you think about the—within the black liberation movement—the people of

Malcolm X faction and the Martin Luther King faction? What do you think about the emergence of the Black Panthers?” Expected me to have opinions of my own, and we got taken under the wing of a nineteen-year-old—I was fourteen, my brother was twelve. He would just go around the city with us, but he would talk to us about our responsibility as young revolutionaries and (how) you have to have your own thoughts. And we—my parents deal with us was we would babysit and then we would get taken along. My parents—my father's students objected to the exploitation of our labor and arranged for us to each get ten days of Young Pioneers Camp. So, there was a way—the way we were taken seriously there really changed things and we went from being the children of activists to being activists in our own right.

So, I got back and the Chicago Democratic Convention riots had happened while we were away. The Chicago Eight/Seven trial is happening. The Panthers were under really concerted attack. I joined the Panther Defense Committee. My brother was really interested in some of the African liberation movements, Mozambique in particular. We were involved, very active in antiwar sit-ins and building takeovers. The invasion of Cambodia—there was a big strike at the university. I was writing poetry about those things, and the beginning of radio work. It was just—there was so much going on. There was such a ferment of activity. There were a lot of choices. I was part of “Women's International Terrorist Conspiracy from Hell.” Do you know about W.I.T.C.H.?

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APOLLONI: I have heard about W.I.T.C.H.

LEVINS MORALES: I was a part of W.I.T.C.H. and we hexed the Playboy building. I went as part of a W.I.T.C.H. delegation to the Chicago Seven trial. We got kicked out of the courtroom because we were all staring at Judge (Julius) Hoffman's head, and it made him very uncomfortable. There was some canvassing. There was some going door to door talking to women about childcare. It's interesting hearing people now talk about that movement and assume that it was all white middle-class women that were only concerned with white middle class issues. We were organizing secretaries. We were talking to working class women about having childcare and being able to up their wages. We were also very attuned to international things. So, a lot of discussions, a lot of reading articles and debating them—the politics of housework, the myth of the vaginal orgasm. There was the Chicago women's liberation rock band. And Naomi (Weisstein), who had written (unclear) “The psychology constructs the female” something was the subtitle I think. She was a good friend of my parents, and I was a groupie of the rock band. They had set up near a coffee house across the street from my high school specifically to recruit us to the left. I didn't know that until much later. So, it was—the particular moment it was made it very easy to be an activist in a lot of different ways.

APOLLONI: And you were writing a lot at this time, right?

LEVINS MORALES: I was filling a journal every three months.

APOLLONI: And was writing a part of your activist work. Do you see that as active?

LEVINS MORALES: It was part of surviving. But yes, I was beginning to write things that—like I was script writing for the radio show. I wasn't really public as a writer till later, but I was writing all the time. I was writing on napkins and scraps of paper. I was constantly putting my thoughts and responses onto paper and reading a lot and writing about what I was reading—my responses to what I was reading. I read a lot of feminist fiction during that period. So, I dropped out of high school when I was sixteen and for the next year and a half when I was not in—before I went away to college, I was just devouring books. Read all of Doris Lessing's novel series, *Children of Violence*. I don't think—I wasn't writing fiction. I was writing journal entries, and I was writing poetry

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LEE: In this period, were you at all thinking about these epileptic episodes? Or is that—no?

LEVINS MORALES: I didn't know that that was what was happening. So those things I'd mentioned earlier, I didn't know what they were. They were just weird things that happened. The first grand mal seizure I had that I was aware of was when I was twenty-two. I recently found out from one of my friends that she witnessed what was probably a grand mal seizure when I was seventeen. But I had—so I had weird things where I just feel foggy headed or drowsy and kind of conk out from blood sugar—probably from environmental stuff. This was—my friends and I were all doing Ouija boards and seances and going into trances, so it was a little hard to distinguish between our ritualized play and things that were going on with my nervous system. But no, I didn't really know about the epilepsy at all then. How we doing?

APOLLONI: We're doing good. I'm just checking—making sure. So following up on Rachel's question, is it—am I correct in assuming that disability activism wasn't necessarily part of your activism practice at this point?

LEVINS MORALES: It didn't—it wasn't a thing. It didn't exist. No, it was not.

APOLLONI: And when did that start to become a thing for you?

LEVINS MORALES: I think we got to backtrack a little bit. Because the next big thing that happens was that I went away to college in New Hampshire. And kind of in the—so I was in a

tiny little, mostly-white school in northern New Hampshire. It made me much more aware of myself as a Puerto Rican. It was a time when Puerto Rican organizing was taking off. There was 1974—there was a huge gathering and Madison Square Garden, Puerto Ricans—there was a lot of organizing around the “Bicentennial Without Colonies” movement. It started pulling me toward Latin America solidarity work, becoming more—reading more Latin America stuff. The school I was at—I got to study political movements more. And then I dropped out of that school because it was falling apart, hitchhiked to California, arrived in the Bay Area in 1976, and joined the Puerto Rican Socialist Party, found La Peña Cultural Center, which had been founded three years before by Chilean exiles and became very involved in that movement.

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But it was also where I came out as a writer. So, the Berkeley Women's Center had a women's writing workshop. I joined it, and that very day I got invited to be part of a public reading and had a very odd experience of suddenly being somewhat celebrated as a writer when I just barely started reading in public. I didn't like the way it felt. There was an upsurge of women's writing—there were women's coffee houses, there were women's radio shows. It was just a lot going on culturally. And we were on the verge of an explosion of women of color writers. But I would read, and people would come up to me and explain why they could never do what I was doing. I'm an organizer, and I was a radical, and it felt horrible to me and it was also mystifying the creative process. And that kind of fan reaction felt really toxic to me. So, I stopped reading my work in public at all for two years until I could figure out how I wanted to handle that. What I started doing was reading work that was in-progress and talking about where I was stuck. When people came up to me and said, “I loved that poem. Wow.” I said, “Well, what exactly did you love and why?” I started getting into more of a different kind of relationship with people. My health started getting more complicated during that same period—the late 70s.

It was also a time when as women of color—so summer of 1978, I was an interviewer on Diana Russell's “Study of the Incidence of Rape,” which was the first randomized study of sexual violence ever. There were an inordinate number of underemployed writers as interviewers on that. Cherríe Moraga was on that. Nellie Wong, I think. Louisa Teish. A whole bunch of people who became well known a few years later. Maybe—I can't remember if it was Jenny Lim on that as well. Lots and lots of folks. We became friends through that process, and we were talking about the ways we were being tokenized. Cherríe and I and a couple of other people talked about starting a small press. For a while, Cherríe and I were a two-woman writing group, and then *This Bridge Called My Back* came out—the beginning of building toward that happened in the late 70s. It brought oppression home into my body in a different way—working with women of color, writing about the ways in which women of color experiences were different than white women's experiences, the very—the physicality of the title of that book. There was—it came out of a refusal to compartmentalize ourselves. Where the men in our

communities of color were saying, “Forget feminism until we've dealt with racism,” and the white women are saying “We're all sisters. Stop talking about racism. You're messing things up for us.” And we were saying no to all of that. In talking about that bridging, we are also saying we refuse to surrender any part of our experience.

[00:43:01]

I mean, in a way, I'm articulating this because you asked, but I hadn't necessarily thought about it in this way before, but it was—it did bring my body into the conversation because of the physicality of racism, because of physicality of sexism, because of what it meant to clear space for that conversation for us. It just shifted the—I wrote a little piece for when the fourth edition came out because I couldn't go to the one of the launch readings, and I talked about the bedrock moving. That there was just—I think that it took me toward the work around disability and health even though I'm a twelve-burner stove. I've never been a single-issue person in my life, and I never will be. I'm always about the connections between issues, but—and I started getting sicker. It's interesting—I got one of the pieces that's in *Kindling*, called Mountain Moving Day starts out—it was a panel about Gloria Anzaldúa for the conference that happens about her work. It was a panel around disability in relationship to her. The point I make in that essay—the beginning of it anyway—people choose which movements are their ground to stand on based on how much solidarity does it bring you. Is it going to bring in more than it takes out of you? And at that point in time absolutely not. But for Gloria as a working class, dark skin complected, Chicana from Texas, dyke, etc., and all the constellation of things she had, to join a disability movement that was dominated by white men in wheelchairs would not have given her anything. It would have made her far more vulnerable to really identify—even though she wrote about body stuff, she didn't claim the identity of being disabled. And why would she? It was—it took a while before that became a viable place for people like me. Also because it was very focused on the classical center of disabilities.

It was really quite a bit later that I started really thinking in terms of the disability movement. But in thinking about the relationship between health and other kinds of liberation—really from the days of *Our Bodies, Ourselves* and the speculum circles—it was so clear that how my access to health care and my experience of illness—that all of that was so connected to all of who I was. As I became more interested in the environmental aspects of colonialism to say pesticides were also being forced on my people and it has everything to do with the colonial status Puerto Rico that I was exposed to that stuff. It has everything to do with both the colonial status of Puerto Rico and my gender that my symptoms weren't taken seriously and that there was no healthcare available, that there weren't any screenings for any of the things that I had. The degree to which the kinds of symptoms that we were reporting in the early days— before we had language for environmental illness—were feminized and treated as hysteria. They're

really—I guess what I’m saying is these things were so intertwined it’s even hard to pull the strands.

[00:47:03]

I was raised to see the connections between everything, every—all these different struggles, both politically and intellectually. My father was an evolutionary biologist and ecologist and my mother was curious about everything. So, my bias was toward “How are these things connected?” My father’s signature phrase was, “The truth is the whole.” In every realm of both my parents’ lives, there was this encouragement to ask a bigger question and always the knowledge that if you ask the wrong question, the answers are going to be ridiculous, and that the questions are almost always too limited. And that you’re taking for granted things that you don’t need to assume are given. So, all of that intellectual training and the political training meant that as I moved into—my experience of health problems was never going to be just about my body. And really from—certainly from the moment we arrived in the States, my instinct with any struggle I’m having is, “How do I collectivize this struggle? There’s got to be other people who have the same problem. Let’s get together and see what we can do about it.” Which comes both from that family background and from growing up in rural Puerto Rico where it’s a much more communal culture.

So, I was never going to—you know what I had in my teens was horrific menstrual cramps. I remember my mom at one point giving me phenobarbital that she had because of—which was ridiculous—was they were giving it to my brother for his earaches. Because I just couldn’t stand being conscious, and she just knocked me out until it was over. I had gotten an IUD (intrauterine device) because she wouldn’t let me do the pill because she knew how dangerous it was, particularly in that period. But I had a loop. And I hadn’t had a child. And so, I was having ten days of horrifying cramps. It was so clear to me how much it had to do with gender. But also the birth control pill was tested in Puerto Rico, and two women died. A lot of the pharmaceuticals and they were all being produced in Puerto Rico. There were really major public health issues around the people who worked in the factories making birth control pills—had no protection and were inhaling estrogen. So you have little girls who are six getting their periods and little boys developing breasts. So that even like figuring out my cramps and my birth control is never just an individual thing—particularly with the sterilization issue in Puerto Rico. And so, my mother—I mean, I knew about sterilization abuses, I was moving into using birth control. I knew about the testing of birth control pills. I looked at Dalkon Shield and said, “That was not designed by a person with a uterus. That has claws on it. That is a sadistic thing.” Me and all my girlfriends were trying to figure out this stuff in the absence of any consistent health care. There were just the very bare beginnings of women’s clinics. So, yes, that’s a long rambling answer.

APOLLONI: That's a great answer, though. I'm curious, too. This awareness of the history of pharmaceutical testing in Puerto Rico—was that something you were aware of already in the 1960s? Was that part of the conversations around birth control?

[00:50:41]

LEVINS MORALES: I was aware in my teens. Yes. Helen Rodriguez, who—do you know her work?

APOLLONI: No.

LEVINS MORALES: Puerto Rican doctor and very active in AIDS healthcare in New York City. But she was involved—a pivotal person in the struggle around forced sterilization of Puerto Ricans—*La Operación* the film, she's in that. So, she was the most visible person doing that. She was in the Kindness Party with my parents. Yes, so I knew about her work just because my parents talked about what she was doing and her daughters both lived in the Bay Area—that would have been my twenties. But no, I knew about that struggle and about her work. Really, everything my parents were thinking about, they talked about with us.

APOLLONI: And do you remember talking about her work, and about the colonial history of the birth control pill, with other women's liberation activists at the time? Were people interested?

LEVINS MORALES: In my teens? Yes. Because it was part of the conversation that was happening around—in the women's union. *Our Bodies, Ourselves* was addressing, “Let's look at birth control in a larger context.” Now that whole—this was also pre-Roe v. Wade. I knew people were involved in Jane (Collective, or the Abortion Counseling Service of Women's Liberation). I knew more people involved in it than I realized. I didn't know that Heather Booth was the instigator of that even though I knew her. But super, super, super aware of the abortion piece. It was still before the challenges coming from women of color, who were who were saying, “Yes, but sterilization. You're worried about not having babies. We're worried about being allowed to have babies.” That conversation started a little bit later. But yes, I was always very aware of it in the context of colonialism and sexism.

[00:52:52]

APOLLONI: I want to just pause and check in and see how you're doing.

LEVINS MORALES: I'm good. I'm good. I mean, I need to get back and have a rest before my reading, but I have nothing else planned. This is important.

APOLLONI: Good. So, I want to go back to what you were saying about your time in college when your health issues started to become “more complicated,” is how you put it. What kind of care did you seek out at that time? Was it mostly—

LEVINS MORALES: That was actually more—let me try to think I was really tired a lot. We had a women's center I helped organize in Littleton, New Hampshire. I remember my IUD expelled itself right after I broke up with my then-high school boyfriend. I had a very abusive, horrible situation. My parents were out of town. I didn't even know what their health insurance was—that was the neglect stuff going on. I went to the emergency room at Billings hospital in Hyde Park. I didn't go—they had an East and West clinic. The West clinic had to do with faculty and people who had privileges of various sorts, which I should have had access to through my father's insurance, but I had no information about it, which was so reckless of them. I couldn't reach them, and so I went to the East clinic, which was where—it was a Saturday night and it was full of people who had been stabbed and shot. The doctor wouldn't believe me that I hadn't had sex in four months, and he decided I had a tubal ectopic pregnancy. He just didn't believe that I would either tell the truth or know. He insisted on this procedure that involved—you're going to wince—putting a long needle through my cervix and into my uterus to see if there was internal bleeding, which if there hadn't been before—without anesthesia and it was brutal. I developed PID (pelvic inflammatory disease). So, I went back to college. This is after my first year of college, and the pain didn't go away. I ended up going to Planned Parenthood, which was in Concord (New Hampshire) which is an hour and plus away. And because the doctors in our small town were notoriously horrible around anything having to do with women's health and particularly reproductive stuff. A friend of mine got told to, “Hop on the table and show her pussy.”

LEE: Oh my God.

[00:55:36]

LEVINS MORALES: And also, these were the people who enforced the “you can't get birth control without a letter from whatever guy you're sleeping with.” They were horrific. I wasn't going to go anywhere near them: (Doctors) Lewis and Bishop. So, going to Planned Parenthood and then they gave me an injection of penicillin. I went into anaphylaxis from that. So, I was trying to negotiate the major things like that—like infections, but the overall not feeling good really escalated after I got to Chicago—I mean, to California. So, it was in my—I got to California when I was twenty-two. What did I seek out? It's a little hard to remember. I was certainly doing a lot of self-doctoring, trying different herbal things. But it's hard to remember the 70s. I know I read a lot because my daughter's father—I got into a relationship with him in when I was twenty-nine. And I already knew a tremendous amount about—I just had read

voraciously about healthcare. My mother was also doing that and was contacting me about things that she was figuring out.

And there were women's clinics. There was a women's clinic, Berkeley women's health collective. I went there. It was very piecemeal, which is still true. I went to a nutritionist. I went to somebody who did—God, what was it even called? It was some kind of—now I'm having trouble remembering—it's connected to Theosophy or something. It was some form of alternative health care. I had very low blood pressure to the point where I would almost pass out from it. I had a lot of depletion things going on with my body. I would get racing pulses, but then nobody could figure out what was going on. I'd get—I'd have chest pain, go get it checked out, and nothing would show up. And so, I was getting a lot of the typical thing you get, which is, "It's all in your head. Stop making a fuss. Just get on with your life." But the levels of fatigue were getting really, really debilitating. I mean, I didn't have a good doctor until much later. One of my high school revolutionary buddies' sister was a doctor in the Bay Area and he contacted her and said, "She's family. You got to give her a discount." So I saw her—Quentin Young, who was a big health—he was the doctor to the left in Chicago and was one of the early, big proponents of single payer. His son Ethan was a buddy of mine—me and my brothers—and then his sister, Polly (Young) was a feminist doctor in the Bay Area. That was the first time I had a doctor who I trusted to a significant degree. I think that I probably saw a variety of—oh, I saw some homeopaths. But it was this—it was the typical experience of trying to keep this together, and everybody had their one thing that they were into, and they didn't blend at all.

I was getting a lot of contradictory medical advice and getting more and more tired and having more and more digestive issues and started reading about chronic fatigue, started reading about fibromyalgia, started reading about—not yet about Lyme disease—but started reading about what my father called 21st century syndrome. So, my father had moved toward a lot of his—he was at the School of Public Health at Harvard at that point and running a human ecology program and thinking about agriculture and health as ecological issues. And so, it was also my conversations with him. This is much, much later, but I remember saying, "So, speaking as an organism to an evolutionary biologist, if I were to try and take on my own evolution, what would be a good evolutionary strategy?" He started talking about antibiotic dependent bacteria and about oxygen being toxic, and then people adapting to—I don't mean people, I mean creatures—adapting to need oxygen and that we've had relatively short time, in terms of evolutionary pathways, to adapt to all the chemicals in the environment. So, he would talk the health theory with me when I was trying to figure out as my reactions to things were getting worse and worse, and I'm trying to figure out, what do I avoid? And he was saying, "Well, you know, there's hundreds of thousands of chemicals, but the body has twelve defense systems. So, it seems like strategically, it makes more sense to strengthen your body's defense systems and figure out of those defenses, which are the most compromised and which are the strongest. That's a much more efficient use of your energy than trying to figure out everything—every

toxic thing, particularly since they're constantly making new ones.” So, having those conversations with him from a science perspective was also part of it.

[01:01:32]

And I'm trying to remember—so, right before I got with my daughter's father, I had a head injury. Or it was right in the fruit—we had been seeing each other for a couple of months and had just decided to cool off and not spend too much time together. And then I had a head injury and all his caretaker behaviors kicked in, and my need for someone to help me. So, I got deeper into that relationship instead of leaving. But I had a pretty bad head injury—it was misdiagnosed as hysteria. It took me six months to get any treatment that was helpful. And that was the first of—well, except for when I was six but—first of a series of head injuries that—it's a whole constellation of things that the medical system wasn't good at and tended to dismiss. So, that included head injury—it included fatigue and chronic pain and included all the digestive problems and increasing reactivity to mold and chemicals. When I was tested for antibodies to mold, I had antibodies to every single thing they tested me for. I grew up in the rain forest, so the mold had probably been affecting me my whole life. It was a convergence of my getting more information, there being more conversation around me about environmental causes of links between cancer and pesticides, in particular, but more conversations about environment and health. My medical situation getting more and more complicated and they're developing more— inching toward more holistic, integrated treatments available. So, I had the head injury in '83, right in the middle of writing *Getting Home Alive*, which was why it was published in '86 instead of '84. And then—and I was getting sicker and sicker.

And then I got pregnant in '87. It made me far more sensitive to the things around me because pregnancy damps down your immune system. We moved from an apartment that was okay for me into a place that had brand new carpet, brand new paint, brand new particle board, and I got really sick. I started reacting, getting very ill around natural gas. It was the formaldehyde in the building materials that sensitize you to other things, and there's formaldehyde in the natural gas. I started getting hives around things. I started having respiratory problems, just the whole constellation of (multiple chemical sensitivity) MCS-type reactions—which, by the way, normally I don't say MCS. I object to it being described as a sensitivity, which places the problem in the body instead of the world. So, I have gone back to “environmental illness” as a way of talking about it, or I talk about “chemical injury.” But then I had an emergency c-section that really trashed my health further. I started having migraines all the time. I was a new mom, and I wasn't sleeping enough and all the usual things that go with that, but my health was really deteriorating. Okay, I was aware, kind of marginally, of the wheelchair activism of the chaining people in wheelchairs, chaining themselves to things—the beginning of the 504 movement in the Bay Area. Because I didn't have the language to see what was happening to me as disability, it was a cool thing happening over there. And it wasn't my homies that were involved in it.

[01:05:55]

And also, in a part of the problem, there were all the people—there was a whole health food movement that was—I'd been interested in healthy food from my teens. Around health food stores and natural healing, there was a whole, very hippy-ish, new agey movement that had some good information, but was very, very focused on making the world safe for me individually. It was like, “Get your water filter and get your enzymes and ferment your food. “But it didn't say anything about food systems most of the time. There were some people who were talking about this, but mostly not. And the structure—the story of environmental illness was very geared toward white experiences and mostly class privileged white experiences. So, simultaneously, you had black mothers in Richmond, California fighting around air quality and asthma and their kids and the oil refineries. That wasn't part of the world of environmental illness people. Environmental justice was starting to emerge, but most of the people who were—but then often in the environmental justice movements, there wasn't any health care. There wasn't really an individual health, like, “Yes, but what do I do about my body that's falling apart?” So, there's a real split between systemic thinking and individual self-care. And a real split around—the people who diagnosed environmental illness were naturopaths and integrative medicine people and people of color couldn't afford that. Poor folks couldn't afford that. They were getting diagnosed with asthma or indigestion or allergies instead of environmental illness. So, it hadn't cohered.

There were the very beginnings of—let's see. I'm still in the 80s—the different rivers had not flowed together yet. During that period, there started being more conversations that were bridging that. So, you had women of color organizing around women of color healthcare. Those conversations, of course, took in the social and the personal body stuff, and there was a convergence starting to happen with that. I'm trying to think—I've been told that I'm one of the grandmothers of the healing justice movement. And because of *Medicine Stories*; *Medicine Stories* didn't come out till '98. The writing I was doing about, “trauma is oppression writ small; oppression is trauma writ large”—I wasn't reading other people doing that. I'm sure there were other people wrestling with those questions. I feel like it was earlier than that, earlier in the 90s, that particularly some of the black women organizing around health care was seeping across that—some of the specific environmental justice. There had been Love Canal. There had been Three Mile Island. There had been more places where people were organizing around the impact on their own families of environmental toxins. But I mean, even now, there's still a lot of segregation of the different aspects of all of this. I didn't start hearing about the—I'm trying to think when MCS first entered into my field of vision. But we're talking now about—I didn't become really bedridden until the early 2000s.

[01:10:25]

But my health was—I was really struggling. I didn't have a movement of people around me who could help me understand that my inability to track things and to hold down a regular job that—I remember I had a job for about four months that was a nine to five thing, and each day, it was harder and harder to get up and get there in time. In the early 90s, I had had some teaching jobs that I could not—I couldn't do it. I could do a discussion in the classroom, but tracking this reading on this date, means that discussion here, means that paper is due here—I couldn't do it. I had a gig at the University of Minnesota, and I collapsed halfway through the semester. So, I was still experiencing a lot of “Why can't you get it together? What's wrong with you?” from other people, including people in my family. What I would I call my version of the welfare queen narrative, which is that I was expecting other people to take care of me and that's why I wasn't really getting it together and do a job and just get it the hell together. It's not that hard. I didn't understand why it was so hard for me. Now, I was also operating on top of multiple brain injuries, and there wasn't a lot of understanding.

I was very fortunate that when I had a brain injury in '83—after I was told I had conversion hysteria and was trying to work a technical editing job with a brain injury—I fell apart on the job again. I was given three tasks, a task that had three components, and I couldn't remember more than two at a time, and I was just turning in circles. I went in the bathroom stall and just started crying. My supervisor found me and sent me home. Then two days later, there was an article in the newspaper about a brain injury advocacy group in Massachusetts, and my supervisor's boss saw it and sent it to me. I was able to connect to one of the few clinics in the Bay Area that was doing rehab for what was now called mild traumatic brain injury. But if you didn't have a cracked skull, they acted like there was nothing wrong with you. And so, I was struggling with a lot of undiagnosed problems. One of the things I talk about in *Kindling* is the diagnosis is so political, you know? The constellation of symptoms I had—it was to my advantage to diagnose it as one thing or another at different moments. Am I going to call this chronic fatigue or am I going to call it Lyme or am I going to call it brain injury? All of those things contribute. Our medicine still has the illusion that most ailments have a single cause and a single set of symptoms and don't know how to wrap their minds around something that is a body responding to millions of insults of various kinds, all converging. You can't separate out whether my brain fog is from a head injury, from mold in the atmosphere, from my gut not functioning properly, from—there isn't—it's not tagged. But different avenues of approach to that symptom set are going to get you treated differently. And so, going through the medical system and experiencing all of these contradictory, highly judgmental diagnoses and trying to figure out where am I going to be treated well, and when—I would have over and over, somebody would have some magic cure, you know? This particular supplement is going to do it or this particular therapy—most of them would work for three weeks, and then the novelty would wear off from my body, and my body would go, “Uh-uh, that's not it.”

[01:14:28]

Right around 2000, I had another bad, bad head injury. I lost about four months that I don't remember. My community really—I needed a lot of support. My partner at the time was very not supportive. I tried to function on top of it. That relationship fell apart and that was very traumatic. I was single parenting, and I ended up in bed, and I was pretty much in bed for the next five years. Gave me a lot of time to think and read and watch every episode of *Friends* two hundred times. I've been trained to theorize my own condition—to study it, to cross reference, and to figure out who else is struggling with something that's either the same or similar. There were online support groups. That was a new thing. I could go online and get on a listserv of people with environmental illness and go, “Ah, that's interesting.” Also, I had been studying different things, other than the single-issue illness groups, and so there was interesting cross conversation. I've been in the Lyme groups, the MCS groups, the head injury groups, the fibromyalgia groups, and none of them really satisfied.

So then, in the evolution of my thinking where I really entered into disability justice organizing is really much more recent. In 2007, I had a stroke. It's not entirely clear what sort of stroke. It may have been as a result of complicated migraine clenching for long enough to cause actual deprivation of oxygen. But I was misdiagnosed. Even with that, I was told it wasn't really a stroke. I was sent home. The right side of my body didn't work properly. It took a while to get health care, and the health care I got was really so minimal. I had forty-five minutes of rehab once a week, which is ridiculous. They weren't really even doing rehab—they were giving me survival strategies, how to live with my disability. There's the game you have to play with authorization for treatment, which is that you have to be improving, but not too much. You can't be at a plateau. It's like this formula for whether you deserve to continue getting treatment. At the point where they decided “No more for you,” they gave me half the cost of a power wheelchair and they told me, “You're never going to be able to do long walks. You might be able to ride your chair to a store and walk down the aisle for something. But that's it. That's all you're going to get.” At which point after—and they gave me a wheelchair—the wheelchair, which I got by having this stroke, gave me the mobility that, if I'd had a wheelchair for my fibromyalgia and chronic fatigue, I would have been in that movement.

But because I had a wheelchair, I was able to go see a performance by Sins Invalid. And because I had a wheelchair, I was visible to people as someone with disabilities for the first time. Everyone was constantly telling me I looked fine. “I'm really struggling.” “You look fine.” “Well, you look good.” So, I had the opposite problem of people with very easily perceived disabilities who have to prove that they're competent. I had to prove that I had struggled. And so being in the wheelchair was liberating in many, many different ways. I would call it my best disaster—that stroke—because I could get around. I was too tired to walk to the corner mailbox before the stroke. I could get around, I got seen—I was visible as a disabled

person and I entered into disability community. The first time I saw a performance by Sins Invalid, I said, “I want in. I've got to be part of this.” It was so in line with the things that I had been writing about.

[01:18:53]

And then after about six months in the wheelchair, the novelty of it and the thrill of being able to leave the house wore off a little bit, and I called my father and I said, “I know you don't like asking for favors, but you need to ask for me to get free treatment in Cuba.” And he did. And within three days they approved a course of treatment for me. My father had contributed so much to Cuban science that they were like, “Of course.” At the CIREN, International Center for Neurological Restoration, where people from all over the world were being treated, it was very innovative. It was completely integrated. I saw a homeopath and neurologist who respected each other. I was treated with flower essences by a psychiatrist. And within a few weeks, they had me walking a block. And by the end, I was walking all over. I didn't need the wheelchair anymore, except when I had extreme fatigue occasionally, but I gave my wheelchair away soon after. So that combination of experiences—it was that moment that Gloria Anzaldúa didn't have.

There was a movement that was going to give me more than it took. There was a movement that was ready for what I had to offer. And sometimes you don't actually let yourself become aware of what you have to offer until there's a place to receive it. And suddenly, there were people who were hungry for what I had to say. Now I had written *Medicine Stories* that had been published in '98, so it had been out for a decade, but there was somewhere to go with it from that point. So really I came late to disability organizing because it wasn't yet the movement I needed to be. It wasn't going to—I couldn't see the connection between the fight for ramps other than “It's a justice issue, and I'm for all kinds of justice.” It was it didn't feel personal to me until there was a movement that incorporated chronic illness and that was centering people of color and that was centering queer folks and that was feminist and that talked about capitalism and colonialism. And so the first show, I was in—no, it was the second show, the 2011 show. We had all this material about indigenous Caribbean people woven into a story that was also about eugenics and was really weaving together a very broad range, and it looked like my life. Finally, it looked like my life. The ramp fight didn't look like my life.

And there was also a hierarchy of disability where it was the people who were born disabled versus the people who became disabled. People who were in the classic disabilities—who were deaf, blind, or in a wheelchair, or had significant movement, mobility issues—were at the core of the movement. Chronic illness organizing was it was considered disability lite, which is kind of my experience in more ways than one. I identified as bisexual at a time when the people I wanted to hang out with politically were all lesbians. All my organizing work was with women,

but I was suspect. I was considered lesbian lite. I referred to it as having a tourist visa to dykeland. And so, in a lot of ways, chronic illness replicated that because it was disability lite even though a lot of the disabled people I knew were healthy, and they weren't struggling with energy every day. And they—I mean, some people were both, but a lot of people weren't. They were struggling with physical obstacles and all the social attitudes that really comprise disability, but they weren't sick. And it's a whole different set of narratives around being sick. I think it was around—somewhere in that same period, that Billie Rain—do you know Billie? DJ (disability justice) activist in Seattle?

APOLLONI: We've looked at Billie Rain's work. Gracen (Brilmyer) introduced us.

LEVINS MORALES: So, Billie started a Facebook group, "Sick, Queer, and Disabled," SD—no. "Sick, Disabled, and Queer"—SDQ. That is now probably a thousand people and became a community absolutely central to so many people's lives. And it was a skill sharing, knowledge sharing, mutual aid—I mean, people literally had their lives saved on there. There was always somebody awake in some time zone that was logged in and people would get on and say, "Okay, folks, I feel like killing myself today. Can somebody call me?" or "I am having a horrible reaction to this drug. Does anyone else have experience with it?" or "This doctor wants to give me this drug. What do y'all know?" or "Who knows a good doctor for this particular thing who's not transphobic?" It was a huge mutual aid web. And that also really shaped having a community that was thinking about these things together and being—and realizing that to the community, I was an elder. And I've been a very isolated elder. And they were the people who've been reading my work and talking about it, and we were chit chatting all the time. And that group very explicitly centers black, indigenous, and POC (people of color) folks. Every Thursday, those are the only people who can post. And it's been an incredible theory incubator.

[01:25:03]

APOLLONI: Could you talk a bit more about Sins Invalid and the kind of performance work you do with that?

LEVINS MORALES: I'm not currently working with them. I was so entranced. The first performance I saw Nomy Lamm did this amazing piece that was sort of a strip tease of her leg. She was unwrapping the bandages around her prosthetic leg while singing and talking. And it was exquisite. I'm having name retrieval issues today, but the guy whose name I know, Maori guy who did aerial dancing in a wheelchair. And then Leah Lakshmi (Piepzna-Samarasinha)—that was where I met Leah—and some of her dirty river performance stuff about Massachusetts. That super resonated with me because it was about environmental—it was about class and pollution and sickness and craziness and all of that stuff together. The first performance that I was part of, I did—I wrote a piece about the wheelchair as my exoskeleton and how people talk

about being confined to a wheelchair, but the wheelchair was what set me free from being confined to my bed. I talked about it as a kind of carapace: you have the soft body and here's the hard shell that protects me in the world. Patty Berne had the idea of creating a dance for my wheelchair, remote controlled, so I wasn't on stage at all. My picture was projected, and we had a recording of me reading what my writing was, and we had somebody moving my wheelchair, so it danced on the stage while I was talking, which was so creative. And then the other piece was a soundscape in a darkened theater. These are both pieces that are in *Kindling*, but it was "Drifting to Bottom" where it was an erotic piece about chronic fatigue and about being topped by my own fatigue and how I used to have animal sex, and now I have plant sex. I just lie there and wait for pollen to land. And about sea anemones that have like a one-inch reach and about kind of the impact of deep fatigue and about just sort of drifting down into accepting a very passive kind of eroticism that matched my energy level. And that was my voice in the darkened room, which is kind of cool. It was a little weird because I was sitting in the audience, so I was hearing people around me reacting to my voice and not knowing it was me. That was (the) 2009 performance, I think. And then 2011, I had a much bigger role. I did a lot of writing for the show. I wrote bridge pieces that framed how the different parts were connected to each other. So that's the "Listen, Speak" piece at the end of *Kindling*. Patty has Haitian heritage and I have Puerto Rican heritage, so we were talking about indigenous Caribbean people and about—those pieces of writing really weave together forced sterilization, and pesticides, and show institutionalized children and Holocaust survivors and all the different ways that our bodies are made wrong, and it really had the full scope of what I think about it. So, it was very satisfying.

[01:29:12]

It was also by and large, the best I've been treated in an artistic work setting because it was a group of people really consciously trying to do cross-disability access. If you get serious about access, you're going to come into come conflicting needs all the time. But people learning how to be fragrance-free, and some people can't hear, and some people are over reactive—react to noise more overtly. "I can't see in this light." "But I get a migraine with this light." Just overall there was a really deep acknowledgement that our bodies need to be tended well. So, it wasn't like, "Let's rehearse till midnight." It was like, "Everybody needs to get rested, and the food needs to work for everybody." And long access check-ins at the beginning of meetings. I loved that it took forty-five minutes to make sure everybody was okay before we started talking about the business at hand. There were issues that I'm not going to talk about in detail, in terms of the breakdown of leadership structures and things, that made it not a viable place for me to continue to work, but I have tremendous respect for the work itself and for the people who've engaged with it and struggled with it. And for the impact that Sins has had internationally on how people think about disability in the DJ principles poster, some of which comes out of my writing. It really has changed— they played a strong role in changing the conversation. I'm very proud to have been a part of that during kind of one of the peak periods of performance.

LEE: Can I ask a question? You had said that if you want to get serious about access, you're going to come into conflict. And I believe that's true, and we've experienced that. Do you think what was modeled there in Sins was basically—it's like you can't not have conflict. If you're afraid of conflict, you're not going to get serious about access. So is the way that you—that they modeled it—the deep acknowledgement that bodies need to be tended well, that we need rest long rests, access check-ins, good food. Is that, basically, people look for solutions as if there is no conflict? What I'm saying is, you're kind of saying there is conflict and these are the ways to negotiate it.

[01:31:49]

LEVINS MORALES: Well, there are conflicting needs.

LEE: Exactly.

LEVINS MORALES: And so, it involves a lot of creativity. How do we take care of everyone rather than prioritizing? I mean, one of the issues that we didn't haven't really—that the group hasn't yet figured out and our movement hasn't yet figured out is, “How do you do access around developmental disability at the same time?” One of the things that Sins did was acknowledge who can't be in the room because they can't get out of there; they're either institutionalized or they're homebound. And so, they did some video work where they just wanted to make the presence of those people felt. They videotaped a bunch of people in their beds and had that running in the lobby of one of the shows and had actually some live feeds, I think, from people who couldn't actually be there. But my father—one of my father's great sayings was, “Anytime two just causes appear to be in conflict, nobody's asking for enough. You have to ask for more.” So, when loggers and conservationists come into conflict over spotted owls is because neither of them are—or just deforestation in general—neither of them are able to conceive of an economy that takes care of trees and people at the same time. They're trying to figure out their conflicting needs taking the capitalist logging economy as a given, so it looks like they're in inherent conflict, but they're not.

When you have people that have differing sets of needs around access—the Ed Roberts Center is not accessible to me, over in Berkeley. It's the main—it houses seven different disability organizations. It's supposed to be this—and Ed Roberts was a pioneer around access at UC Berkeley, and I can't go there. There was a Latinx disability conference that was happening there, and I was keynoting it, and I couldn't be in the room I was supposed to be in. Because the people designing it didn't listen to the folks with environmental and neurological—they were very firmly anchored in the sort of core disabilities of the movement. There's terrible air circulation. There's fluorescent lighting. There's carpets with dust in them. There's a lot of

things about that space where they weren't able to stop and say, "Okay, we have to expand this, and it's going to make it more challenging, but we have to expand what we're thinking about." So yes, I always think about that when people are coming into one of those fights. Like, "Okay, everybody step back, and ask for more. And let's find the place where these actually converge."

APOLLONI: Two questions I want to ask you, at the same time. Well, I'd love to just hear you just speak a little bit more about your experience, asking for accommodations or asking for spaces to be made more accessible. How has that been for you in the feminist movement or in other kinds of contexts?

LEVINS MORALES: I should have a whole separate doctorate for it, and I should be paid reparations. It's very hard—the progressive movements in this country—I need a bite of something here. Suddenly I'm so hungry.

[01:35:20]

APOLLONI: Do you need a break or?

LEVINS MORALES: No. They're modeled on the old left. And the old left is—it's militaristic. It's industrial. There's a certain ethos to it all, so you have the valuing of sacrificial behavior. It shows—you prove how down you are by not sleeping or eating. The more noise you make, the more radical you are. The most important activism is the street activism, you know? There's a whole layer and a bunch of stuff that shapes left culture, that makes it super, super, super hard. Access gets often seen as a favor being done to a person rather than a stance or political principle. There are—I mean, lots of—I'm part of the co-counseling world and I don't go to workshops because none of the sites are chemically accessible. It's very piecemeal. It's not integrated in.

So, for instance, when I go and I talk, when I'm sponsored somewhere by a Disability Studies program or a disability student group, and people were talking about access, I always want to up the ante and say, "We don't actually want more access to exploitation." Zoom back and ask how would society have to be different for nothing about your body to be disabling? That's the level that people need to be thinking in order to respond in the right way to me. The struggle of when I started working on my tiny house was because the low-income housing co-op that I was in had gotten toxic and the next door neighbor was spraying pesticides. There it was interesting because it was a black family that had owned that house for a long time and the property was their shield against racism. And so, their response when I say the pesticides were making me sick, is, "We're taxpayers. This is our property." And I say, "Yes, but your pesticides are crossing the property line, and they're coming into my house." Access, conventionally defined, is very—it stops a threshold. I was saying, "Yes, but really, all these activities around the house

are affecting me.” I have a handout now. Sometimes I don't update it often enough. But, okay, so I just wanted to say you're hearing chewing noises because I'm diabetic and I'm not going to stop.

LEE: We can stop.

LEVINS MORALES: No, I'm going to keep talking and talk with my mouth full. We don't need to segregate the act of eating.

[01:38:27]

LEE: No, we do not. In fact, I'm going to eat too.

LEVINS MORALES: One of the things that happens is people assume they know what I need. They forget that needs are super varied. Which happened today, when you assumed I couldn't do stairs. Stairs are not an issue unless it's five flights. They want it to be simple. People want it to be very simple and not be labor intensive and don't understand that the labor involved is actually going to make them better at everything else they do. So, I'll say I have a restricted diet, and they'll say, “Oh, we have a vegan restaurant.” I'm going, “Okay, there's no relationship between what I said and what you said. You only know one kind of special diet, and you don't want to think about it.” And so, to say, this conversation we're having is actually completely related to everything you're paying me to speak about in the evening—the privatization of suffering. “It's not my problem.” You know? Or, “Okay, yes, we want you to be able to breathe.” I mean, there was—when my oral history was taken at Smith (College)—the Sophia Smith collection did a whole long video, like six hours—they initially weren't even going to put me up. I said, “No, I'm poor. You are going to put me up.” They put me in an apartment upstairs from a chain smoker. It was making me horribly sick, and they got really annoyed that I was making—they wanted my life story, but my body falling apart didn't concern them. And, so that separation of the frontal lobe products—they think are frontal lobe products, they actually arise from my body—and not being able to see that as part of their scope. And so, it's always a battle.

The biggest battle is finding housing. It's extremely difficult to find a place to sleep where the bed isn't saturated with laundry detergent. Where I'm staying now, the bed isn't, but the towels are. I forgot to bring my towel. Or people will say “No, no. We don't have any fragrance. We don't use incense. We don't smoke. We will take away the scented shampoo.” But their dish soap is Joy, and it means I can't wash my own dishes. It's not being able to think comprehensively about it. The more I can give them a handout in advance—and not only a list because it has to be a shift in perspective too to say, this is what's currently happening, but here's the realm of things you should be asking questions about and thinking about. So, there's

the issue of pain. There's the issue of breathing. There's the issue of digestion, like all—my body needs to be in good shape for me to spend a couple hours on the stage. And yes, that is your responsibility. It's part of the fee that you pay for having me, but it's exhausting. It's exhausting. It's really hard work.

If I can't remember all the different things—which I've got lots of cognitive stuff with my memory—if I can't remember them, and I forget something, it can be really, really serious. One time I was—it was actually Billie Rain invited me to stay at their place, no fragrance, but it turned out to have mildew. I couldn't even get past the front door. I spent the evening and the whole night until two in the morning with people driving me around sniff testing one house after another, trying to find a place that I could safely sleep. I now travel with a tiny little air filter, which helps some, my own sleeping bag, a little bottle of dish soap, a little bottle of laundry soap. I'm about to acquire a sonic (ultrasonic cleaner)—a little gizmo that washes clothes sonically—because laundry. If I'm gone from home for more than a couple of days, how do I make sure I have clean underwear? But none of these things are—they should be standard.

[01:42:51]

APOLLONI: Right.

LEVINS MORALES: Everybody should be thinking about universal access. And the other thing is conferences. Nobody actually enjoys wall to wall sessions. Everybody could make use of gaps between. Everybody knows, but nobody actually acknowledges in the planning of conferences, that the best part of the conference is the conversations in the hallway between the sessions. The sessions are meant to be catalysts and to let you know who you want to have more conversation with. How they really should be structured is there's a session, and then there's a break that's as long as the session. And you have fewer sessions. You don't cram in the maximum amount of information, but what you allow is for micro-rhizomes to form. You allow people to network around the ideas that they brought, rather than—somebody who's not from the academic world just said to me, somebody who's an artist organizer said, “Do you know that academics all come together and they just stand and read their papers? Why do they do that? That's so boring. Couldn't people read the papers ahead of time and then discuss them? Because they're all in one place physically, why do they read—?” And I was like, “I know, isn't that strange?”

[01:44:12]

So part of the conversation is stop for a moment and think about whether the sick and disabled movement, we're leading this, what would it look like? Think about what the labor movement would be if it was led by crips? It would not be about the things it's about now. It would change the nature of work and safety—so many things. So, what if the forms of our organizing work all

took care of us as if we were already liberated? What would it look like if the disability consultant team was always in charge of structuring the conference? There would be so much more time. People think that food access is super, super complicated, and you got to have two hundred special meals. It's actually really simple. You have a lot of single ingredient dishes that people can mix and match according to their needs. It's simple. I was at a disability workshop in the co-counselling year ago that was catered by local person, and there was the roast turkey and there were dishes of quinoa. And there were like twenty million things on the table. And each person could customize what they needed. Rather than "Our main dish is going to be chicken roasted with potatoes and green beans and a dessert. What is the special meal? And I have twenty people who need special meals, oh my god, so overwhelming." It's overwhelming because they're assuming that the most efficient way to do things is actually a way that's not at all efficient if you're trying to do access. So it's how do we step back and question what we're taking as a given? It's about asking the wrong question. It's not, "How many special meals do we need?" It's, "What would what would catering look like if it assumed that we are not standardized in our food needs?" I mean, it sort of—then it becomes obvious that you want to give people as much flexibility with as little labor for the kitchen crew as you can.

There's no earthly reason why anybody should use scented laundry products.

APOLLONI: (snaps)

LEVINS MORALES: The intensity of how toxic they are is really horrifying. But that's become—it's become a special need to not be soaking in—what is it they found out in long—in the fragrances and chemicals in fabric softener? Five hundred different chemicals, twenty-eight known carcinogens, nineteen neurotoxins, and eleven mutagens. What reason would anyone have to use that? But when you start asking that question, what you get into is all of the oppression issues associated with smell. You get all the ways that our bodies are made wrong and that we're told to cure that with fragrance. Particularly, I've had a lot of run-ins with women of color around fragrant personal products. There's these ways that it's both sexism, racism, the "you smell bad" content of the oppression, that's like, "This is my fragrance, and you're not separating me from my fragrance. This is my thing." And it echoes for me: "We're taxpayers." It's like, "This has been my defense against a certain place of feeling disempowered and bad about myself, and you're not going to touch that. Too bad if it makes you sick. Go away from me, and then you won't get sick." I recently stayed—I went to my daughter's wedding and had to stay at an Airbnb place that turned out to have eight plug in air fresheners. I was so sick. Even after she took them all out of the house, it was so intense that I stayed in the house—stayed out as much as I could, but I had to sit there. I had nowhere else to be—stayed in that house for three nights. A week later, I arrived back in Berkeley and got out of the Uber that had brought me from the house and the person coming out to meet me said, "Wow, that car has a lot of fragrance." It was what was on my clothing and luggage. It took six rounds of detox to get

the clothing even to where I could touch it. Those plugin air fresheners have multiple ingredients that are considered unsafe in any quantity at all. This is like my big struggle around housing when I try and use Airbnb. I have to say, “Do you not use—? This place in Puerto Rico, they said, “No, no, we don't use any of that.” We got there and they had a little thing that you stick in the bathroom and it just disperses smell. And was like “Oh, I forgot about that.”

[01:49:22]

It's part of the conspiracy to sell people consumer goods to make capitalism and all other forms of oppression less painful. There's something you can buy that'll make you feel better. So, artificial jasmine scent in your house will make you feel less of how the structures of society tell you you're worthless. At least you smell nice. So there's so much of a bigger conversation to be had around what my body is saying because my body can't comply. It can't comply with capitalism. It can't comply with those demands. That's good news for everybody else. All the things that our bodies can't tolerate are things that are going to give other people cancer in forty years. They're trying to do business as usual. This is the thing about climate and the ecological collapse is happening, but people keep trying to do business as usual and not think about it too much. So, I guess a thread running through this entire conversation has been zoom back, look bigger, where the connections? Because we can't actually—the truth is the only way that I will have complete access is when we change the economy and our ecosystem. The obstacles to my access are blowing in the wind. They cross all boundaries. They don't respect threshold and doorways. When Hurricane Maria hit Puerto Rico, there was a huge pile of toxic ash that has now been distributed over the entire country, and all the soil and water is contaminated with stuff from that ash. A corporation that dumped it there was supposed to—legally required to—secure it against storm and in a hurricane zone. They didn't do it. You can't just say, “What kind of shampoo should I use?” It's way too micro. But you also can't just say, “You know what women's liberation means to me is these three little things here.” Everything requires zooming out. That kind of sounded like a last sentence didn't it?

APOLLONI: It did. I had one last thing I wanted to ask you about—

LEVINS MORALES: Go for it.

[01:51:50]

APOLLONI: Which was I wanted to ask you to tell us about your vehicle for change and building your house.

LEVINS MORALES: Yes. Okay, so I had been in this low-income housing co-op for fourteen years. And part of the reason I moved there after I split up with my daughter's father was

wanting a place that I could have more control over. It had carpet. I tore up the carpet. I put down wood parquet floors. I tore up linoleum. I put—repainted with nontoxic paint. I had a long legal battle with the city around turning—disconnecting, the open gas heater. They kept insisting it's substandard. “If you don't have a heater,” and I'm going, “It's going to kill me. I want electric space heaters.” And trying to adapt that space for myself. But I didn't ultimately have control over it because I couldn't control the building as a whole. The other people in the building were very hostile. I offered to pay for all the laundry detergent for everyone if they would just use that in the laundry room. It was six apartments. They said—I'll pay for all of it, but nobody was willing to do it because their personal rights were being violated. One of them actually told me, “I have a right to not be helpful.” I had to hand—either I or my personal care attendant—had to hand wash all of my laundry and hang it on the line except that we had to take it in every time the neighbors were spraying. So, it was (a) huge labor intensive thing. Then it just got untenable in the building. I had gone away—I would go away on trips and come back and get sick and think it was because I was too tired from the trip. Then I went away for a conference locally and came back and got sick. And was like, “Oh, this is not about travel.” I got so ill that I had to vacate it within a week.

I spent four—three, four months homeless sleeping in people's studies and porches. In the course of talking to a friend I said I knew that if I—that whatever my next project was going to be, had to be on wheels so that I could leave if local conditions changed. I said to my friend, “I wish I could live in a Romani wagon.” I went, “Huh.” I started Googling, and the tiny house movement was brand new at that point, but the Tumbleweed Company had a website. They were doing workshops on design. To comfort myself as I struggled with all of this, I started sketching floor plans, like what would my house be like? One of the many things my mother loved was sketching floor plans and designing spaces and figuring out cool little things that folded out and became other things. She would have been an amazing designer. I started looking into it. I started having conversations because this is my instinct to organize with other people. And I say, “Berkeley is the birthplace of disability movement, certainly in the US, and it's got a commitment to universal design. Why don't we advocate for a tiny house compound as accessible housing?” Because I had visited the place in Marin County. I knew about it. But my impression of it was the problem with building a fixed thing is that you're going for lowest common denominator. What does everybody have in common? But that doesn't necessarily meet everyone's needs. I said, “What if we build a common building that was like that, but everyone had their own little units that they could customize?” And they were mobile, so they could go away, they could come back. If they needed to move away, they could without—and they wouldn't lose their investment in their home.

[01:55:46]

I was talking to people in the city council trying to strategize about that. The problem was everybody else I knew who had environmental illness was too sick, and too discouraged. I couldn't get other people to do it. And so, one of my favorite wise sayings in life is, "Do not attempt—please put on your own oxygen mask before attempting to assist others." The wisdom of airlines! I realized that I couldn't. I had to take care of myself first. I wanted it to be a collective process, but people weren't ready to do that. So, I went to a design workshop. They said my design was already better than most of what people had coming out of the workshops because I was thinking a lot about how do I make it work from my body. Materials was a big question, but also how do I actually live my life as opposed to what people assume. I don't need a living room. I need a place to write. I need a place to sleep. I need to be able to prepare food that's complex. Psychologically, I decided early on I needed a greenhouse because I needed a little Puerto Rico. Plus, I thought I was going to be traveling a lot more—that I would travel for a few years around the country and I wanted a little bit of organic produce and be able to have my greens. It took me six years to finish the design process. I started that in 2010. In 2011, my mother died, and my father was really not doing well. I decided to move to Cambridge to live with him and help him with what I thought was going to be a year-long process of his transitioning into being a single person; never been a single adult—he married so young. It turned out that he needed more and more of my support. Of course, it was naive.

While I was there, two things happened. I found the Institute for Human Centered Design. Do you know them? You should know them. They do consulting on what they prefer to call "inclusion" rather than "access" internationally with governments with companies with lots—they do really interesting, very, very broad kinds of inclusion work. They have a lunch series and have people come in and speak. I was looking at them and I'm looking at their consulting fees and going, "Okay, well, that's not me." I just wrote a letter that said, "Here's what I'm trying to figure out, and would you be willing to have a conversation?" They said, "Sure." I came over and we ended up talking for hours. They were very excited that I was talking about housing that dealt with the environment outside. That didn't—it wasn't just about the door from the door inward. They had me come and present as part of their speaker series. But they essentially mentored me and hooked me up. They connected me to a professor at the New England School of Design who was teaching an advanced architecture course in Universal Design. He had me come in and be a five-week project for his students because he said they're going to go into architectural firms where they would never talk to the client, and that he wanted them to have direct interaction with someone who's actually going to use their product. It was interesting because most of what they designed was useless. They were trying to be clever, but having the conversations with them was very interesting.

[01:59:11]

Two things emerged from that—partly just getting to think with other people. One of the students—she had come up with a floor plan I really liked except that she had ignored one of the principles I had given them, which was, “You have zones of contamination, and the bedroom has to be the cleanest and therefore farthest from the entrance.” Her floor plan was great except she had the door going in through the bedroom. And I looked and I said, “You haven't left me anywhere else to put the door except through the shower.” Ding, ding, ding, ding, ding. Of course, the door should be through the shower. It's the decontamination pathways. So, the entrance is through the shower. It has school lockers built into the wall, for what I—when I thought I was going to have a lot more traveling and people visiting—where people could take a shower and dress in unscented stuff that I had right there in the lockers and stash their outdoor things where I wouldn't have to deal with it.

The other thing was the professor pointing out that being on a trailer meant I actually had two floor levels because one of my challenges is bending because of the back injury. I designed it where there's no under counter, or very little under counter storage on the inside. That storage under the counters is accessible from the outside where it's at waist height. I can stand on the ground and go like this where I would have bend if it was from the inside. I have pantry storage things that you only access from the exterior. I spent a long, long time researching materials. Part of what I was doing was I thought that it would be more fundable if I did the more unusual advanced things. Using material that was pioneering, while more expensive, would also enable me to—it would made it more of a prototype than a model. In some cases, I think I use things that I could have gotten away not using. We did an aluminum shower pan, which we may have needed to do that anyway because the space was very shallow. I did just—gosh, hours and hours and hours for years of, “What are my options with insulation? What kind of wall covering do I want?” I went back and forth between do I want it to be a flatbed trailer? Do I want to try a fifth wheel trailer? Do I want to put it in the back of a truck? It didn't make any sense to have it be one single vehicle because then it meant I had to take the whole thing to the grocery store. Plus, if the truck breaks down, the house is—you want it separate from that. And there's always some degree of contamination from engines.

[02:02:04]

I ended up eventually deciding on a fifth wheel trailer which I had custom built shell. I had to figure out how am I going to heat the space and how am I going to cook. Some people—and different people have different tolerances—and I wanted to be able to be off grid because sometimes I have to be. I wouldn't be able to be in cities. If I was out in a rural area, I just wanted options. I wanted the maximum flexibility about where would be safe for me to be. A lot of rural areas are super toxic. So I had solar power, but then that limits my use of electricity, particularly for heating. I didn't want—I couldn't use propane. A lot of people use propane even if it's enclosed and they think it's theoretically, it's safe. I just—I react to even tiny amounts, so

I couldn't have propane. Some people really can't stand any amount of wood smoke; I actually can do better with wood smoke than I can with propane. So, I have a compact—took forever to find this— but a very compact, high efficiency wood stove that reburns smoke and gases, so that's very low emission. But it took a long time to figure that out. And in cold weather, I could cook on that. But what do I do in hot weather? I do have a hot plate, and when I'm plugged into the grid, I can do that. When I'm off grid, I can't cook anything that takes longer than five minutes, but I also have a sun oven.

So, I've had to piece together what I know about my body. I also had to think about neurological stimulation. I couldn't have a lot of brilliant colors even though I love them because it was going to be too much stimulation in my home space. I had to have neutrals with little spots of color. I didn't want high contrast, light-dark situations because of epilepsy and migraine. I couldn't have regular blinds on the windows. And yes, a bunch of things like that. I crowdfunded for a chunk of the money. It turned out for a lot of the people who contributed, it wasn't really so much about how innovative that house was—some did—but the majority contributed because they wanted to support my work. A lot of people didn't even claim the perks that were offered with the Indiegogo campaign; their perk was that I stay healthy enough to keep writing, which was really moving to me.

[02:04:43]

As I've lived with it, I've learned about things I would do differently. It has a dishwasher, which I'm so glad I put in—the little single drawer dishwasher because I have arthritis in my hands. What I didn't do is include a little washing machine. I have really, really regretted that because access to a good way to do laundry is so difficult. I thought I would use a little hand crank countertop and it doesn't work with my joints. It's too painful. So I learned things just from living in it. But it's been just huge for me to live in a house. I had no housing security at all. Now I live in a space that— it's still a battle to make sure it doesn't get moldy because just breathing creates a lot of humidity. There's some upgrades that we need to do before moving to Puerto Rico where the humidity is super, super high. But my health has improved dramatically since I moved in there. I now have more tolerance when I leave my house because I have most of the time as a reprieve. I'm also parked in an area that has very, very clean air. I'm near the ocean an hour outside of the Bay Area, so the air quality is very good there. It's a cattle ranching area. And really, it's the extension of my house. It's cattle ranching, that means there's not aerial spraying and pesticides. It's mostly dairy farms. There's very little, super toxic stuff around, and the land I'm on—the specific farm—is all organic. And there's little signs posted: “No road-side spraying. This is organic land forever.”

My health in the last two and a half years has really improved from living in that. And it's a conversation starter. It's a teaching tool. Which is what I said when I was building this, “I want

this to be a kind of living essay.” I would stop along the road. People would ask about it, and I tell the story. And there would always be these long conversations both about following one's dream, but about environmental toxicity, about health and housing. So, it's been interesting. Lots and lots of people have written to me and asked me to write a book about it and how I did it and do I want to design them for other people? I'm going, “I wrote—I didn't—I made this house so that I could be a writer of my own things.” I didn't actually want to become a specialist in tiny houses. It was necessity, you know? I used a life jacket. It doesn't mean I want to be a life jacket manufacturer.

APOLLONI: Is there anything else you wanted to tell us before we wrap up?

LEVINS MORALES: We really, really, really, really, really need to be paying attention to the ecological collapse that's happening and not act like we have time to ignore it. So, it's not about stopping what we're doing, but about linking every single thing we do into that. Because a lot of the things that we spend our time talking about are going to be luxuries in a minute. This time when I was in Puerto Rico, I didn't get bitten by any mosquitoes. And that's terrifying. There's been an—I think it was like a ninety percent crash in the insect population in the rain forest there. So now you're having lizards and birds dying because they can't eat. And if the insect population crashes, we're talking about—(interruption)

LEE: Oh my goodness. A bird just flew into the window. That was sort of a weird punctuation.

LEVINS MORALES: Yes. That's intense. Did it fall down?

LEE: It did. Go back out and see. So, do you know why the insect population crashed?

[02:08:37]

LEVINS MORALES: Yes. They don't—insects don't have a way to regulate their own body temperatures. The rain forests actually have a very narrow band of temperature tolerance, so just the degree of warming we've had so far is causing crashes in insect populations. Insects are the bottom line for, you know—well plants are the bottom-bottom line, but insects, I mean, we know they pollinate food, but they also feed a whole lot of other things above them. This is critical, and people have the habit of doing what's habitual, you know? We have a hard time wrapping our mind around that everything is different. And so, we plug along doing what we've been doing. Part of what I've been saying—it was actually the first essay in *Medicine Stories*, which I will read tonight—is that every—there is no issue that isn't ecological. That the crisis of the planet is a crisis of human relations. But we can't work the stuff we do about social oppression between humans without talking about the fact that we have a very short window to try to shift things enough to make it possible for a significant number of us to survive. Our habit

is to keep doing what we know to do. We don't need to start brand new things. We just need to link everything up. So people who are doing Middle East work, for example, and are going, "Well, what? Am I supposed to stop doing that?" I'm going, "No talk about what an ecologically sustainable Middle East would require." Talk about oil. Talk about water. Talk about reciprocity and healing from trauma and what that would make possible in the world. So yes, so we can't afford to not be talking about that no matter what else we're talking about. Punto.

[02:10:52]

LEE: Thank you so much, Aurora.

(End of May 14, 2019 interview)