

# Polare Edition 14

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## Editorial

by Jasper Laybutt, Polare Editor

**W**elcome to issue fourteen of *Polare*. The months certainly fly by. As usual, we have been fortunate enough to receive much quality material to present to you.

Firstly, there is an overview of gender theory which provides an accessible insight into theories that have helped shape current thought on gender, and all it can imply. Needless to say, such theories are as ever-changing as the shifting sands of time. "Pesticides Cause a Gender Change" is a quirky little piece that gives food for thought, while "The Trouble with Frank" provides an insightful critique of a recent Australian book release which is already proving controversial.

This month, we also see the Gender Centre's annual general meeting, where we bid farewell to our trusty management committee - a hearty thanks to our current line-up for the good work they have done. If you are a member, don't forget to make sure you've got the relevant details to ensure you can cast your vote.

Some new and exciting projects will also be launched in the coming weeks, including a support group for partners, families and friends, a new F.T.M. group called "Jocks", an F.T.M. partner's support group, and a twelve-step program for people with gender issues. It's good to see more and more community groups coming to the fore. Look for information on these groups inside.

... and don't forget to peruse the "Community Noticeboard" for new entries.

## Manager's Report

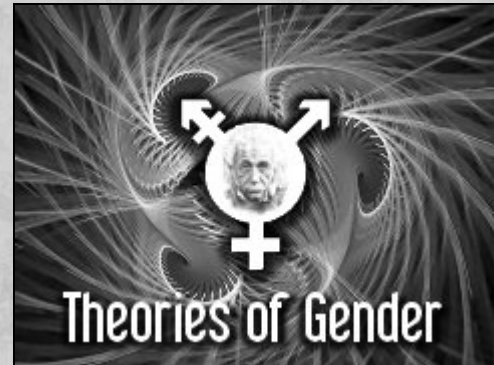
by the Bill Robertson, Gender Centre Manager

**A** joint project has been initiated between the Multicultural H.I.V./ AIDS Education and Support Service and the Gender Centre. This hopefully will be the beginning of a formalised process whereby people with gender issues from Non-English Speaking Backgrounds (N.E.S.B.) can have greater access to the information and services that the Gender Centre has to offer.

The Multicultural H.I.V./AIDS Education and Support Service specifically targets fifteen different language groups across the Sydney Metropolitan, Hunter and Illawarra health areas. An understanding of culture as well as language is vital if people are to receive services that are accessible and equitable. Co-workers from target language groups co-work with other health professionals in a support and educative role.

## News in Brief

## Feature Articles



**The lessons of history demonstrate again and again that the first people to challenge particular social roles and customs have always been vilified and shunned.**

### Theories of Gender

Transgenderism has been pathologised and problematised and has been largely perceived as an individual rather than a social issue. In this article, Louise Glanfield takes a look at queer theory, biological determinism, the binary system, social facts and natural law.

### Transsexuals in Italy

14th April 1982 was a triumphant day transsexuals in Italy. On this day, law number 164 for which they had fought hard, was passed, giving Italy's transsexuals the right to officially change their sex.

### Watching Out for Discrimination

Recently, the Inner City Legal Centre acted for a person who was refused a rebate on the cost of hormone therapy because his birth certificate said female and the hormones in question were male hormones and the rebate was not available for females.

### Pesticides Cause Gender Change

There is evidence that a range of pesticides, industrial compounds, and at least one food additive are causing sex hormone changes in a range of animals from fish to turtles. Some scientists have argued that the effects of these chemicals threaten the future of the planet.

### Transsexualism in Society

Linda Darling reports that Frank Lewins has written a very good publicity brochure for the Monash Medical Centre in Melbourne which does Gender Reassignment Surgery: which is a pity because he set out to write a book called *Transsexualism in Society*.

### Dispelling Some Popular Myths and Misconceptions

The Australian Therapeutic Goods Administration (T.G.A.) has

## from the pages of Polare Number Fourteen

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### European Court Ruling

**Luxembourg:** A college administrator who was sacked for undergoing a sex-change is to claim a six figure sum in compensation from Cornwall County Council after the European Court of Justice in Luxembourg ruled yesterday that her dismissal was unlawful. The male-to-female transsexual named only as "P", was sacked in 1992, part way through sex-change surgery. P took her case to a Truro industrial tribunal which decided she had been dismissed for changing sex but that transsexuals were not covered by the Sex Discrimination Act. The tribunal asked the Luxembourg Court for a ruling on [if] the 1976 European Community directive on equal treatment for men and women at work made it unlawful to sack an employee for changing sex. The court held that the directive did cover transsexuals because the discrimination was based on their sex. The case will go back to the industrial tribunal to determine compensation. P's solicitor Madeleine Rees, said she would be claiming hundreds of thousands of pounds because she had lost not only a well paid job but opportunities for advancement. P said "I'm delighted, both on behalf of myself and everyone in Europe that has this difficult medical condition" After losing a package worth £70,000, she said she had to take a job paying £23,000, but was now earning £30,000 as an academic outside the west country. The ruling paves the way for compensation for Bobbi Elmer, a 49 year-old male-to-female transsexual whose case, at Exeter Industrial Tribunal was adjourned pending the Luxembourg judgement. the tribunal ruled last October that her "gender-identity disorder" was the reason behind decisions by the Home Office to withdraw her right to counsel prisoners at Exeter, and by her employer, Insight Alcohol Services, not to offer her another job. The government is likely to extend the Act to cover transsexuals. In the meantime, Ms Rees said, it would be open to courts and tribunals to re-interpret the Act without legislation. The point will be tested next month when a transsexual ride engineer, sacked by a theme park, takes her former employers to the London South industrial tribunal.

### Transsexual's Fatherhood Fight Backed

**Strasbourg, France:** A refusal of the British authorities to register a female-to-male transsexual as the father of his partner's child conceived through artificial insemination of donated sperm, has been found to be a breach of the European Human Rights Convention. The European Human Rights Commission in Strasbourg voted by thirteen to five that the Registrar-General's decision was a violation of the convention protecting family life. The case has now been referred by the commission to the European Human Rights Court for a ruling on whether the convention has been breached by the government because of the stance taken by the Registrar-General. He decided that only a biological man could be regarded as the father for the purpose of registering a birth. When the couple tried to register the child in their joint names as mother and father nearly three years ago, the name of the father in the register was left blank, but the child was allowed to be given the surname of the female-to-male transsexual.

### Cross-Dressing Music

**United States:** Available from America is an audio cassette called *Go Lite on the Dressin'*. This is a compilation of songs about cross-dressing, composed by Amanda Lynn Richards. It's professionally recorded and packaged and supposedly sung in a "passable female voice", with clever lyrics as well.

### Thailand High Ratio

**Thailand:** Did you know that in Thailand the ratio of F.T.M. transsexuals is higher than reported in other parts of the world.

### Heart Disease

When taking male hormones (generally some form of testosterone), you are changing your hormonal morphology to that of a physiological male, so you adopt all the possible health risks that ordinary males have, i.e. an earlier risk of heart attack, high blood pressure etc. However you do cut your risks of developing women's diseases such as breast cancer, and thrombosis etc. So, just when you thought life was getting better, healthy living is back in fashion. So, cut down on butter and eggs, stop or reduce your smoking, reduce your alcohol intake and take up some exercise.

granted market approval for Roche's Amplicor H.I.V. -1 Monitor Test, the first commercial test to accurately measure the quantity of H.I.V. (H.I.V. -1 R.N.A.) in a person's blood (viral load).

### Experiences as a Transgender Woman

Carolyn has been very fortunate in the fact that she works in a reasonably open-minded industry, the Fitness Industry. She changed all of her certificates over to her female name and then waited for her body to feminize enough before approaching a fitness centre to work at.

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# Theories of Gender

## What is the 'transgender problem'? Who's 'problem' is it?

by Louise Glanfield

Article appeared in Polare magazine: September 1996 Last Update: October 2013 Last Reviewed: September 2015

**T**hose who stand outside mainstream cultural norms are often perceived and portrayed as pathological or as having a specific "problem". However, defining a situation as a problem involves a value judgement [Haralambos 1980:404], in that the problem is only defined in relation to particular individual or cultural norms. The individual being so described may have no sense at all of having a problem, other than experiencing discrimination or marginalisation. Like homosexuality, transgenderism has been pathologised and problematised, and has been largely perceived as an individual rather than a social issue. The major problem that the wider society seems to have in dealing with people with transgender issues is that their existence blurs or confuses the neat little labels and categories that most people, through socialisation, "know" to be "true".

*... the lessons of history demonstrate again and again that the first people to challenge particular social roles and customs have always been vilified and shunned.*

Classifications may lack any kind of objective reality or naturalness, but they make it very easy to deal with people according to a culturally prescribed format. There are ways of dealing with people that are prescribed by culture; by talking to children in a different way than would be used to talk to adults, by using the eyes and voice in different ways depending on whether we are talking to a male or a female and depending on whether a male or a female is doing the talking, by having different ideas of personal space for a woman or a man. When asked to describe a person, most people will make it immediately clear that the person they are talking about is male or female. Transgender people shake up these neat categories and confuse people by blurring their established modes of dealing with people. This causes people to have to think very consciously, rather than being able to act on a formula so well-known that it is virtually unconscious.

People who identify as transgender have acknowledged that they feel uncomfortable with, and do not want to live as, the gender they have been arbitrarily ascribed on the basis of the genitals they possess. For this they are often vilified and shunned, and classified as unnatural or pathological. To place this in context, however, the lessons of history demonstrate again and again that the first people to challenge particular social roles and customs have always been vilified and shunned. Yet once the changes have themselves become established the custom that has become replaced becomes ridiculous.

Dissatisfaction with the feminine role and the systemic/societal limitations of being female led to the advent of feminism; feminists were vilified and despised almost everywhere. Yet now young women find it hard to believe that their mothers believed they had to stay home with their babies and young children lest the children become damaged through deprivation of a full-time mother, and simply did not see themselves of having the option of working without damaging the mental health and stability of their children. ("It is important to note that this lack of belief and understanding between generations also serves an important social function").

All of this has much to do with Antonio Gramsci's notion of hegemony. Hegemony means that a large number of people (a society) agree to believe the same things, and that they agree not because they are coerced or tortured into it but because their consent is mobilised. In other words, they come to believe, through socialisation, that their particular system or way of living is natural, right, and the only way to live, and they will defend their cultural way of living to the death. The beliefs of a culture always operate to suit the interests of those who hold power, however, and when one idea no longer serves an economic or social purpose that suits the powerful, the belief changes, as shown in the example above.

Cultural hegemony works very much on a Parson's theory of functionalism and Durkheim's notion of social facts. What this means is that our binary system of gender serves a function - it is an organising and regulating principle that keeps society in order - and that while it may not be a natural law, it has certainly become a social fact. Social facts are beliefs that the majority of people believe to be true. Durkheim introduced the notion that social facts became just as axiomatic as natural laws; that for instance, that gravity kept us anchored to the earth (natural law) and all people are automatically masculine or feminine, depending on their genitalia (social fact). The sky is blue (natural law) and all people will be heterosexual based on the genitals they are born with (social fact). What remained and remains unexplored is the fact that social facts are usually natural fictions and that hegemony is the only thing perpetuating them.

The culture/nature and nature/nurture debates seem quite likely to continue ad infinitum and ad nauseum. It has never been satisfactorily reconciled that our society can say with pride that we have defeated nature (genetic engineering, both human and animal, for instance) and yet condemn other people for being unnatural by defying notions of gender, which, rather than being natural, exists only in the realm of social fact.

## Free will versus biological determinism



Theories of human free will and freedom from the tyranny of instinct and biology have existed for thousands of years. Free will theories state that human beings are far above the level of animals; so far above, in fact, that the constraints of the animal kingdom cannot contain us. We can reproduce or not reproduce, choose between life and death, live among others or in solitude, and choose any sexuality that is available to us. However, theories of free will never seem to have explored the notion of freedom from culture or the right of the individual to practise freedom from culture.

Biological determinism is a theory that also dates back thousands of years, although it has gone through numerous guises and stages. Religion is generally a form of determinism; few religions have given human beings the option of choice, or have offered only a limited choice between behaving only in accordance with the tenets of the religion, or being punished. It is this choice of forced choice masquerading as free will that maintains the rigidity of our current binary system of gender.

To explain biological determinism very simply, this theory states that who you are and what you become is determined by your biology. To provide an example, imagine that a female is born. The female has a uterus and the capacity to reproduce. Because she can reproduce, she will produce children. Because she produces children, the main focus of her life will be motherhood ... and so on and on. Because anatomy is destiny the female has no option but to reproduce. If by some chance this woman believes she has a choice about reproduction, this can be taken as evidence of a disorder. Or, a male is born. He has a penis. The penis is constructed to allow intercourse with a vagina. Therefore the male will be heterosexual and will desire a sexual relationship with a woman. And of course, every cultural force operates to ensure that the individual does not deviate from what s/he is naturally inclined to do.

According to the determinists, to desire that which is not "biologically determined" is evidence of poor adjustment, wilful selfishness, or psychiatric disorder. Biological determinism states that because an individual has certain structures or capacities these must be utilised in a "correct" way. It legitimises the existing status quo by stating that what is expected of us is commensurate with our biology, which predicts our destiny, and is therefore right. Biological determination is the clear opposite of theories of free will.

In terms of gender and theories of gender, free will versus determinism is still a major issue. This may perhaps be the crux of a whole range of issues surrounding gender. Because we are taught from our earliest stages that almost everything we are or can expect to be is determined by our sex, it becomes an integral part of the way we see ourselves and everything around us. Furthermore, because our culture operates on a binary gender system, with almost everything (emotions, professions, hobbies, mannerisms, ways of walking, talking and being) posited as either/or, our own way of choosing becomes very limited. Every possible aspect of behaviour and lifestyle becomes identified with male/female or me/not me.

While tomboyism in little girls is tolerable for a few years, and there may be giggles about a little boy who wants to own a doll or wear his sister's dresses (less likely; a boy is more likely to be sanctioned for this behaviour), any extension of these beyond the years of childhood is treated with suspicion, questioning and dismay. As stated earlier, non-conformity in relation to gender is viewed as evidence of poor adjustment, wilful selfishness, or psychological/psychiatric disorder.

## Sex, gender and sexuality

It is from our notion of sex and gender that our classifications of sexuality flow. Because western culture offers only a binary system of gender composed of complementary and utterly contradictory male/female and masculine/feminine parts and roles, our sexual roles and choices tend to be equally limited. The binary system is translated into the formula that male + female [heterosexual] = good. Not only is heterosexuality "good" but it is the only choice that does not equal perversion, wilfulness, or mental-disorder/illness.

An obvious part of the problem is that the language needed to describe diverse sexualities just don't exist. Names have been assigned to male/male and female/female sexuality in the last 150 years, but these were originally created as the names of disorders (lesbianism, homosexuality). It is only in the last twenty years that these terms have been removed from the lists of psychiatrically classifiable disorders, and hence these have not been considered positive terms. However, the reclamation of such words as gay and lesbian since the 1970s has been nothing short of amazing.

The sexuality of transgendered people has never been assigned a name or set of names of its own. According to mainstream society a man and a woman in a sexual relationship are heterosexual. However, a transgender female who is biologically male having sex with a man may also classify herself as heterosexual. One of the greatest crimes that social groups tend to be charged with is that they make everything that society takes for granted difficult, and requires them to be explained - which certainly presents problems when they cannot be explained except in terms of themselves.

A further problem is that the invention of new words to describe differences means that the words can be latched onto, and misrepresented or sent-up. Language is one of the most powerful enforcers of cultural constriction. "Oh, excuse me, I forgot. We Can't call 'em girls anymore, they're women now". This was perhaps the catch cry of the paternalists who resented the changes in the status of women, making it abundantly clear that to alter language is to alter reality. Girl as a term is in no way equal to man while woman comes much closer (but, in our culture, remains unequal). It is harder to be patronising to a woman than it is to a girl. If someone is thought of as a "girl" the perception of them is likely to be different to someone who is thought of as a "woman".

## Queer Theory

Gender theorists and queer theorists are now exploring the notion of using the word sexual without any necessity for defining prefixes or using existing definitions on a purely personal basis. (self-identification). There are theoretical positions for and against these notions however, some protest that language of difference must be fully reclaimed. (i.e. not seen as in any way derogatory) before it can be discarded; others believe that to use mainstream classifications at all is to remain within the constraints of mainstream culture. Much of the controversy comes from notions of identity, self-identity and definition.

Queer theory is still very new and is being constantly explored, particularly with the added facility of the Internet, by which means the

debate has quickly extended worldwide. Like post-structuralism and post-modernism, the limits of what queer theory actually encompasses has yet to be concretely defined.

There are many other theoretical issues that can be included in queer theory, and there is a great deal of exploration still to be undertaken. Queer theory, like all theoretical sets, contains its own problems and inconsistencies that will need to be recognised and worked with if it is to become a truly representative theory.

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## Transsexuals in Italy

### And the Work of Non-Profit Association Movimento Identita Transessuale

by Unknown Author

Article appeared in Polare magazine: September 1996 Last Update: October 2013 Last Reviewed: September 2015



**Movimento Identita Transessuale: A non-profit association which defends and advocates for the rights of transsexuals, transvestite and transgender people in Italy.**

**A**pril 14, 1982 was a triumphant day for Pina Bonanno, formerly Giuseppe Bonanno of Catania. On this day, the ground breaking law number 164, for which she and others had fought so hard, was passed, giving Italy's transsexuals the right to officially change their sex.

***Financial burdens aside, most transsexuals, according to M.I.T., return to prostitution after a sex change operation because they simply can't fit into society.***

While cases of psychosexual inversion (when a person feels, wants, acts and considers themselves to be of the opposite sex) date back to the classical era, twenty years ago, the issue of transsexualism in Italy was, for the most part, simply not brought up. Then suddenly in the late 1970s and early '80s, transsexuals burst onto the scene with newspapers and magazine articles abounding on every aspect of their lives, often confusingly and erroneously grouping them with gays, transvestites and hermaphrodites. Italy had become fascinated with transsexuals.

In 1980, transsexuals got political - Pina Bonanno, who had a sex-change operation in London in 1977, and the late Paola Astuni, operated on in Lausanne in 1967, founded the *Movimento Italiano Transessuali* (M.I.T.). The movement aimed to help transsexuals "come-out" but most of all to fight for legal rights, while attempting to minimise official and public discrimination.

### The Link to Prostitution

At about this time, prostitution in Italy began to undergo a subtle change. A representative for the committee of civil rights for prostitutes recalls that until 1982 there were transvestite prostitutes but relatively few transsexuals. Then Italian transsexuals appeared on the streets after which Brazilian transvestites and transsexuals, or *viados* arrived, profoundly marking the character of Italian prostitution. Headlines in *La Repubblica* began reading "The Viados' over-crowded nights" and "Transvestites and transsexuals; the streets are now theirs" and by 1989, police headquarters in various cities estimated 70 to 80 percent of prostitutes in urban areas were "viados".

The massive influx of viados, most living in Italy illegally, became a threat to Italian transsexual prostitutes and the two groups soon came to a head on collision. M.I.T. leaders claimed the viados were undercutting prices. Worse, they said, viados were giving transsexuals a bad name by parading the streets next to naked and were not taking sufficient precautionary measures against AIDS. Italian transsexuals supported neighbourhood uprisings against the viados and demanded more police checks for prostitutes working illegally. This bitter in-fighting was a source of amusement to many but it also brought to light how inextricably transsexuals' lives are linked to prostitution. Prostitution is a means of existence for the majority who face discrimination in everyday life. It is also one of the only ways to earn enough money for a sex-change operation.

In the 1980s, M.I.T.'s immediate focus had been to obtain the right for Italy's 50,000 or so transsexuals to change their gender on official documents. Law number 164 gives transsexuals this right, but only after they have had a sex-change operation. A further amendment stipulates that the national health care system will pay for the operation. Although the Italian law is one of the most progressive in Europe along with Germany's and Sweden's, applying it is a long and drawn out process which can last anywhere from two to five years. Many transsexuals, often intensely uncomfortable living with the genitalia they were born with, find it impossible to wait the necessary year or two before being admitted to one of the few hospitals which collaborates with the public health service and end up covering the costs themselves for a private doctor in Italy or abroad, paying up to 30m Lira. Prior to the operation, a transsexual must get approval from a court of justice which examines medical and psychiatric evaluations, adding to the costs. Thus, the link to prostitution. Dolly De Luca, currently president of M.I.T. (now called Movimento Internazionale Transessuali) was operated on last year by a private doctor in Padua and says she is still working as a prostitute because she spent so much money.

### A Place in Society

Financial burdens aside, most transsexuals, according to M.I.T., return to prostitution after a sex change operation because they simply

can't fit into society. Marcella De Foco, president of [M.I.T.](#) in the Emilia Romagna region remarked last year: "Society shuts us out ... the problems of transsexuals now are tied almost exclusively to social mores".

"Our law is decidedly progressive", says Doctor Renato Marten Perolino, head of the urology department at Turin's Mauriziano Hospital. "What is not progressive is the fact that Catholicism is rooted in people's conscience and the church remains completely divided on the issue of transsexuals. Doctor Perolino performs 15 - 20 sex change operations a year and says that many of his patients return to prostitution. "If I were to operate on a dog and then throw him back into a crowd of other dogs, they would probably leave him alone. But human beings aren't like that. Society is terribly cruel".

However, Pina Bonanno was married in church by an open-minded Turinese priest ten years ago. The fifty-one-year-old woman who has been described as the pillar of the transsexual movement returned to Catania a short time ago to become a housewife. "I get a little bored sometimes" she giggles, but having published two books, opened and closed a cabaret in Milan called "My Way", and fought many battles, Bonanno considers herself to be exceptionally lucky. She is one of the few who have avoided a return to prostitution after she changed her sex. She says it is essential to work on ways to help transsexuals integrate into everyday life and regular jobs. "What is the use of becoming a woman if you have to keep on living the same life after the operation?" she asks? Making matters even more complicated, the operation itself, which most doctors say is only the final phase in a long series of psychological changes, is the subject of much discussion among specialists as well as transsexuals. It is a "complete leap in the dark", says Doctor Perolino. Transsexuals undergo several years of therapy prior to the operation but psychiatrists, sexologists and doctors are concerned that even so, patients may not be fully aware of the implications of this irreversible operation. A sex change does not mean that a transsexual will no longer suffer discrimination or be immediately accepted into society. Doctor Perolino worries that transsexuals are not absolutely sure about what they're doing when they come in for the operation, "but after they've gone through two or three years of analysis, I can't feel responsible - it's the psychiatrists responsibility". Suicide is not infrequent among operated transsexuals, and Doctor Perolino says one out of ten of his patients attempt it after the operation "because they realise they have made a mistake and that they've fallen pray to a sort of mystification which surrounds transsexuals".

## The Future


At recent conferences held by [M.I.T.](#), transsexuals expressed the wish to be able to change their gender officially without necessarily having a sex change operation. "What's important is having your documents up to date, whether you're operated on or not," was the general consensus. Sexologists support this view feeling that it would give transsexuals the time to calmly asses their lives before rushing into an operation. But Doctor Paolo Martini of Siena's school of legal medicine and co-author of a book on the medical and legal aspects and problems of transsexualism is doubtful that the law will change. "It's an incredibly complicated subject and the law in Italy as it is, is one of the most progressive."

Should transsexuals decide to try to change the current law, they might find it difficult to recapture the militant momentum the group had in the early 1980s. [M.I.T.](#) has been running out of steam due to divergences between the old guard and the new generation. "Transsexuals should be more serious", says Dolly De Luca. "They are too frivolous". Pina Bonanno elaborates: "There's no collaboration between transsexuals and there's too much exhibitionism. The young think only of brand-name clothing, make-up and plastic surgery."

Nevertheless, Italian transsexuals have more political clout than in most countries, points out Dolly De Luca. The Radical Party, the Greens and Communists have often supported [M.I.T.](#)'s cause and invariably send one of their representatives to [M.I.T.](#) rallies. And in a surprisingly short amount of time, this minority group has inserted itself into the Italian consciousness, even though much ignorance and confusion about the subject still exists. Last September, 2000 people attended a "Miss Transsex" beauty contest held in Lucca and transsexuals such as Maurizia Paradiso and Eva Robin's have become television personalities.

The combative Dolly De Luca intends to keep [M.I.T.](#) as politically active as it was when law number 164 was passed. Speaking at an [M.I.T.](#) conference in Treviso, De Luca stated: "Transsexuals must now gain a position in society that is not only reserved for the night, but also for the day, and be able to have a "normal" rapport with people. The violence that we are subjected to every day is not so much physical as moral".

## Movimento Identita Transessuale

From [Movimento Identita Transessuale website](#) ,  translated from Italian to English with Google Translate: [M.I.T.](#), founded in 1982, is an [M.I.T.](#) that defends and advocates for the rights of transsexuals, transvestites and transgender. Since 1994, the [M.I.T.](#), in accordance with the health care system and the Emilia Romagna region, has set up the first clinic for the health of transsexual and transgender people. Today [M.I.T.](#) provides assistance and support to transgender people qualified in the path of transition and change of sex. [M.I.T.](#) is committed to the national and European fight against discrimination related to gender identity and to this end shall, in coordination with other associations and institutions, and law enforcement strategies, combat inequalities. [M.I.T.](#) also provides specific services to transsexual and transgender people facing social exclusion and discrimination, promoting also important cultural activities.

Visit the [Movimento Identita Transessuale website](#) for more information . 



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Health.

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# Watching Out for Discrimination

## Medicare Ignores the Needs of Trans People

by Julia Cabassi, Inner City Legal Centre

Article appeared in Polare magazine: September 1996 Last Update: October 2013 Last Reviewed: September 2015



### Hormone Drugs & Rebates Under the Pharmaceutical Benefits Scheme

**R**ecently, the Inner City Legal Centre acted for a person who was refused rebate on the

cost of the hormone therapy. The particular hormone treatment was on an authority prescription scheme. The authority prescription scheme is part of the pharmaceutical benefits scheme and usually requires special authorisation for a rebate on rare or expensive drugs.

*When his doctor inquired, it seems because his birth certificate said female and these were male hormones, he was not entitled to a rebate because the rebate was not available for females.*

When his doctor inquired, it seems because his birth certificate said female and these were male hormones, he was not entitled to a rebate because the rebate was not available for females. The circumstances of the refusal of the rebate remain unclear. However, the outcome is that Ian again has access to the rebate. The problem was resolved without the need to pursue a legal remedy. The negotiations gave us some important information for anyone who regularly uses hormone treatments. The outcome is good news for post-operative transgenders, but leaves the situation for pre-operative/non-operative transgenders unclear.

### Ian's Story

Ian was born female and has undergone gender reassignment surgery about three years ago. He needs to continue to receive hormone therapy in the form of an injection every three weeks or so at a cost of about \$50 per injection.

The hormone treatment he is receiving was on an authority prescription scheme which requires that each prescription is authorised. Ian's doctor telephoned for an authorisation for a new prescription for Sustanon under the previously allowable category of "male hypogonadism" (males with low testosterone). The authority prescription was refused.

The doctor was advised that because Ian was registered with Medicare as a female, he was not eligible to obtain the drug on authority prescription and would therefore have to pay full price for the treatment. It seemed that a decision regarding access to male hormones for women had been made somewhere along the line.

This seemed very strange as Ian had been accessing Sustanon under the authority prescription scheme for at least two years prior to this refusal.

Ian is in receipt of a disability support pension as his sole source of income and he could not afford the cost of the hormone treatment which he receives every three weeks at a cost of \$50.00 on each occasion and it will be necessary for him to continue to receive hormone treatment for the rest of his life. This decision would cause Ian and many others in similar situations considerable financial hardship.

### What Could We Do?

The options depended on the basis of the decision for denying Ian the rebate. If the rebate was being denied to Ian, oddly enough, as a woman, we could tackle the problem as a discrimination complaint. As the decision making responsibilities on access to pharmaceutical benefits lies with the Commonwealth Government, Ian could make the complaint under the Sex Discrimination Act and lodge his complaint with the Human Rights and Equal opportunity Commission. Precisely because the decision maker was the Commonwealth Government, we could not lodge a complaint under the N.S.W. Anti-Discrimination Act. So even though there have been recent changes to enable complaints of transgender discrimination under the Anti-Discrimination Act (N.S.W.) this would not have assisted in this case.

### The Investigation - What We Found Out:

The decision seemed strange and inconsistent with previous practice in Ian's case. What had changed in the interim? The first step was tackling the "Great Commonwealth Health Bureaucracy" to find out who was responsible for the decision.

We wrote to the Pharmaceutical Benefits Advisory Committee (P.B.A.C.). Part of P.B.A.C.'s responsibilities is to advise the Commonwealth Government on which drugs ought to receive a subsidy under the scheme. We were advised that there had been no recent decisions made by P.B.A.C. that would have resulted in the refusal of the rebate in the client's case. We were advised to contact the Health Insurance Commission (H.I.C.) which is responsible for administering the pharmaceutical benefits scheme.

So we spoke to H.I.C. In response to our letter, the H.I.C. wrote that they had been acting on the basis of advice that the "birth" sex of a person is their sex regardless of any gender reassignment. However, after receiving our complaint the H.I.C. sought new legal advice from the Attorney-General's Department which now provides that a person who has undergone gender reassignment surgery will be treated as a person of their assigned sex for the purposes of accessing gender specific drugs under the pharmaceutical benefits scheme. The H.I.C. has sent this new advice to all H.I.C. processing centres.

Obviously this was a good outcome in Ian's case and he now accesses his prescriptions under the authority prescription scheme and obtains a rebate. This does raise some concerns that pre-operative/non-operative transgenders may be refused access to a rebate for hormone treatment. It will depend on the circumstances in each case whether it is possible to lodge a discrimination complaint against such a decision. The best thing to do is get legal advice on your situation. If you are refused a rebate, it is important to get as much information as possible. Here's a quick checklist of questions.

You need to ask:

- » Is the drug available under the Pharmaceutical Benefits Scheme?
- » Is this drug on the authority prescription scheme?
- » Why were you refused access to a rebate?

You need to get advice. Whether you can rely upon the H.I.C.'s new advice will depend on your situation.

**Ian is not our client's real name and some of the details have been changed to preserve our client's confidentiality.**

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# Pesticides Cause Gender Change

## ... and the Worldwide Decline in Frog Populations

by N.M. Lee

Article appeared in Polare magazine: September 1996 Last Update: October 2013 Last Reviewed: September 2015



Male alligators were born with abnormally small genitals.

**T**here is now growing evidence that a range of pesticides, industrial compounds, and at least one food additive are causing sex hormone changes in a range of animals from fish to turtles. Some scientists

have argued that the effects of these hormone-mimicking chemicals threaten the future of the planet. Whilst governments around the world are preoccupied with the toxic and cancer causing effect of industrial chemicals, they seem to have overlooked the effects of these compounds on the environment at minute concentrations.

***It has been assumed that embryonic development is controlled by genes, but hormones are the essential chemical messages around the body: in effect switching genes on and off.***

Researchers around the world have discovered that wildlife exposed, even briefly, to these chemicals even at critical stages during embryonic development have undergone sex-hormone changes and physical disorders. The result of chemical contamination has meant that there are rivers that only produce female fish; male alligators were born with abnormally small genitals, turtle and bird populations have developed weird reproductive problems, and frog populations around the world have diminished or vanished.

It has been assumed that embryonic development is controlled by genes, but hormones are the essential chemical messages around the body: in effect switching genes on and off. Interruptions of these hormonal messages can have a devastating effect. An embryo has the potential to develop wither male or female characteristics but exposure to hormone-mimicking chemicals may interrupt or alter the development of normal sex organs.

It has been known for some time that sexual orientation/gender is determined during the development of an organism, in higher animals (and humans) this occurs during embryonic development but in other, such as rats, this occurs shortly after birth. Researchers can change the sexual orientation of rats by injecting female hormones into male rats resulting in the rats behaving as if they were female and vice versa. In the 1950s researchers at Syracuse University (New York, U.S.A.) showed that genetically male chickens exposed to D.D.T. grew up and acted like hens.

There has been little research on the effects of chemicals on humans and extrapolating field studies on wildlife and laboratory experiments to humans is controversial. Given that the hormones controlling development have stayed constant throughout vertebrate evolution, the hormones controlling development of tadpoles into frogs are the same as which control human sexual development. Theo Colborn, a researcher at University of Wisconsin, has raised the question that if these chemicals are causing a worldwide decline in frog populations what effects are they having on humans? There has apparently been an increase in human diseases and congenital abnormalities that could be linked to hormonal disruption.

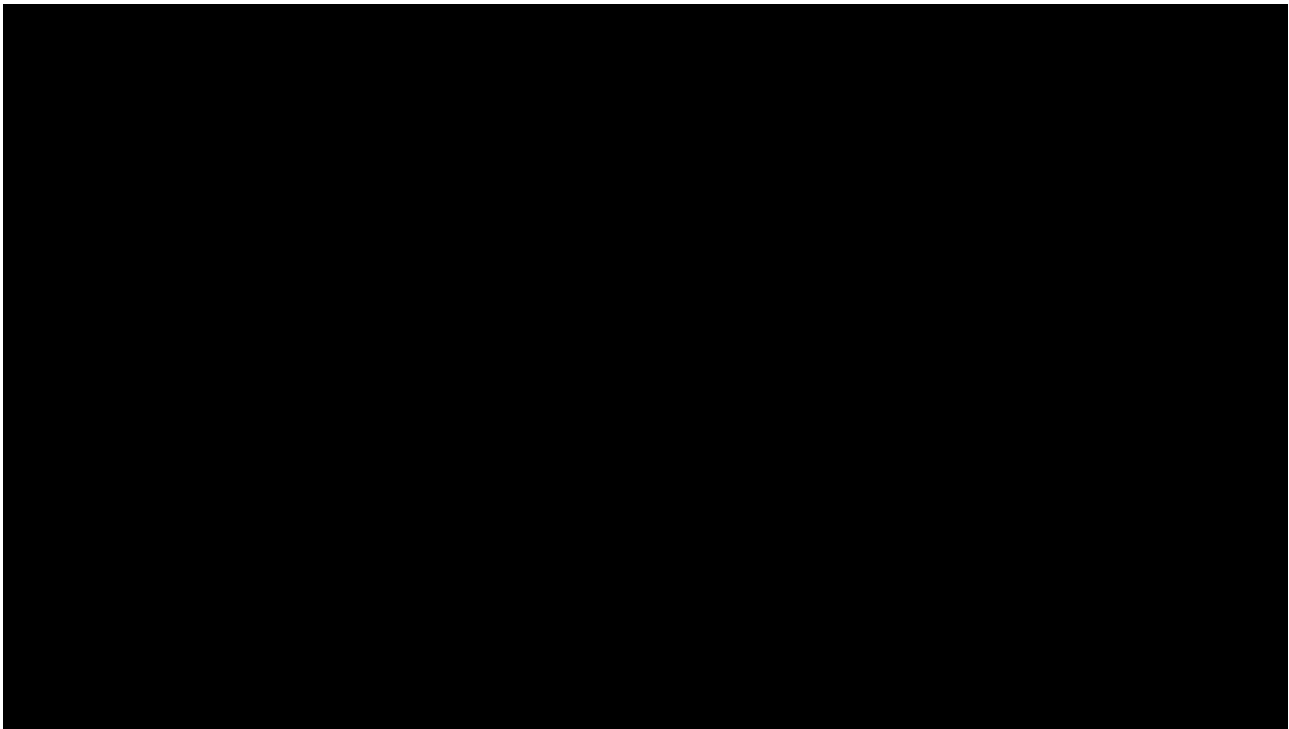
What does this mean for the transgender community? The jury is still out as far as a direct cause and effect, but there is some anecdotal evidence.

Theo Colborn, John Peterson Meyers and Dianne Dumanoski have written a book on their research titled *Our Stolen Future*

### Our Stolen Future

*Our Stolen Future* is a scientific detective story that explores the emerging science of endocrine disruption: how some synthetic chemicals interfere with the ways that hormones work in humans and wildlife. The [Our Stolen Future](#) is the web home for the authors of *Our Stolen Future*, where they provide regular updates about the cutting edge of science related to endocrine disruption. They also post information about ongoing policy debates, as well as new suggestions about what you can do as a consumer and citizen to minimize risks related to hormonally-disruptive contaminants.

Read more at the [Our Stolen Future](#) website.




**Our Stolen Future: Are We Threatening Our Fertility, Intelligence, and Survival? A Scientific Detective Story**

**Author: Theo Colborn, John Peterson Meyers and Dianne Dumanoski**

**Publisher: Plume (1997)**

**I.S.B.N.-13 978-0452274143**

**From Our Stolen Future website:**  A book about the health and environmental threats created by man-made chemical contaminants that interfere with hormones in humans and wildlife. Endocrine disrupting chemicals alter development of the foetus in the womb by interfering with the natural hormonal signals directing foetal growth. Their impacts, sometimes not detectable until years or

decades after exposure, include reduced disease resistance, diminished fertility and compromised intelligence and behaviour. *Our Stolen Future* tells the story of how endocrine disruption was discovered, how it works what it means, and how families can protect themselves and their communities, all in clear, simple language intended for a general audience.

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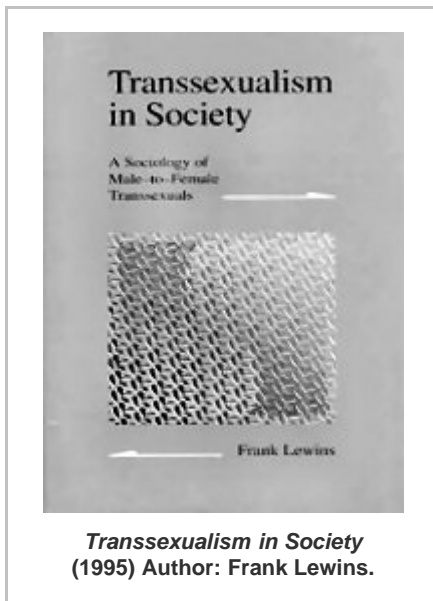
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# Book Review: Transsexualism in Society

## A Sociology of Male-to-Female Transsexuals

Reviewed by Linda Darling

Article appeared in Polare magazine: September 1996 Last Update: October 2013 Last Reviewed: September 2015



### Transsexualism in Society: A Sociology of Male-to-Female Transsexuals

by Frank Lewins  
Published by Palgrave MacMillan  
(1995)  
I.S.B.N.-13 978 0732930448

*The idea that he has shamelessly made his material fit preconceived theories never seems to have occurred to him ...*

**F**rank Lewins has written a very good P.R. brochure for the Monash Medical Centre in Melbourne which does Gender Reassignment Surgery: which is a pity because he set out to write a book called *Transsexualism in Society*.

What does the author understand by "transsexualism"? He says on page 4: "I am using an operational definition of transsexual. In other words, I am defining transsexual in terms of it's concrete manifestations, that is, anyone who has made or appears to have made, the transition to living permanently in the gender other than the one originally assigned to them".

And who might these people be? On page 5 he mentions fifty people whom he interviewed and comprised the basis of his study: "Almost all interviews were with transsexuals

associated with the Gender Dysphoria Clinic at the Monash Medical Centre in Melbourne. Six transsexuals were interviewed in Canberra and Sydney".

Yet on page 90 for example, he says: "I received several letters and phone calls, ... from people who told me of their frustrated, long-term desire to live as women. Most of these people were transsexuals, now living as women. Two were not. They were living as men but had always wanted to be women and live as women".

This is just one example of where his "operational definition" of transsexualism" given at the beginning of the book runs into problems of definition, appropriateness and clarity. He seems oblivious to the problem and says on page 4: "throughout this book I use transsexual as a term of convenience to identify those people who have made this study possible".

The problem is, that when he departs from the medical model of transsexualism which is what he has at Monash, and brings in other people later in the book that are not comparable in terms of the medical model, but are still confusingly subsumed under the label transsexual. Also, but focusing on the "official" Monash, self-selected, institutionally formed group, Lewins is practically saying "look - the study I'm making is what transsexuality is and transsexuality is what I'm studying." This lack of appropriate language (queer language?) and concepts is to dog him all the way through. He says on page 137: "transsexuals are a manifestations of a range of psychological identities"

But are all these identities medical model transsexuals? And if they are not, then is the medical model and the name transsexual, and the process of becoming a woman that he describes appropriate to them?

The other main problem with this work is that it's attempt to impose a particular form of inductive sociological method on it's subjects it creates the object of it's own study. On page one he says the book: "focuses on patterns of thinking and behaviour among transsexuals rather than on any individuals characteristics, hence the use of transsexualism rather than transsexual".

This leads to abstraction, nice neat models of behaviour and diagrams to illustrate Lewins' "radical" idea that "becoming a woman (what's that Frank?) is a process rather than a decision". Well fancy that!

For example, on page 71 he says: "Figure 4.1 is not trying to convey the nature of any individual's experience but rather the patterned nature of transsexual's experiences as a whole". Which Lewins knows of course. On page 70 he says: "The six stages in the process of becoming a woman are:

- » abiding anxiety;
- » discovery;
- »

- purging and delay;
- » acceptance;
- » surgical reassignment; and
- » invisibility."

In this type of writing the abstract models and diagrams are real "heroes". The author has triumphed over the individual subject and seen the "truth" of a wider process. Individual case studies serve to validate the theory. The idea that he has shamelessly made his material fit preconceived theories never seems to have occurred to him - not even when he notes those people at Monash who cannot become "invisible" and cannot "do" gender sufficiently well to be given the go ahead for surgery and are therefore left in stage one of abiding anxiety through no fault of their own in a system that held out the hope of removing their anxiety.

In Lewins' world, the process of becoming a woman that he talks of carries the individual along a necessary and inevitable path. Problems of identity, breakdowns, drug abuse, alcoholism, rape, second thoughts, surgical mistakes, these are not part of the process, although interestingly enough, poverty is. This is due to the fact that if a person doesn't have the money then they do not advance so fast through the Monash surgical procedure.

The complexity of individual lives - the behaviour and thinking that they create - cannot easily be quantified and fitted into neat categories. This leads to a situation familiar to students of sociology, where it is possible to make conclusions, expressed as statements, based on information, and yet these statements while in some sense "true" have little value in the real world. For example "in the future it will rain" so what? It is only when I say "it will rain on Friday morning" that a predictive statement can be tested by experience and it's truth determined by observation. Similarly, general statements or categories that have no predictive or explanatory power belong not to the realm of science but to that of opinion or ideology and they should be clearly marked as such. Simply qualifying statements all the time is not a way round this.

In the "how amazing!" category I'd put the following on page 92: "... not only among the people I interviewed but also based on the files of post-operative transsexuals, their reason for contacting the clinic was for surgical reassignment. There was no evidence of anyone presenting with inexplicable anxiety, that is, asking the question "Doctor, why am I feeling this way and what can you do?"

Who gave permission for him to look at confidential medical files and why? What sampling methods did he use?

He continues by referring to "their general level of self-understanding and what they expected from the clinic". Confused people? Not on Lewins watch. And guess what - on page 106 "... after living a minimum of two years as women, transsexuals generally have no second thoughts about the finality of surgery."

The process and model is all. On what basis did he reach this conclusion?

The authors desire to know the truth of his subjects in the patterns he ascribes to them and his power to select, edit, group, abstract and simplify complex material and even more complex issues, creates a form that allows the "expert" to stride above them, know their truth. As an example of sociology and method it seems to leave a great deal to be desired. It should be re-titled *Transsexualism in Monash Medical Centre* with some opinions and anecdotes added. Any conclusions cannot be extrapolated from such a small self-selecting group to the wider society especially when the existence and definition of transsexualism is in contention outside the sociology department.

I'm left with the feeling that this is lazy arrogant sociology. Too accepting of official views, too willing to take people at their word, too willing to turn the obvious into a diagram. By the end of the book he has practically appointed himself cultural arbiter for what "society" will accept (what society? where, when, why, how, the groups and dynamics at work?) Facts, statistics, geographical spread, or even evidence that he got out much into the target community are conspicuous by their absence. The idea that health workers would use this book as a resource, as suggested on the back of the book, seems highly unlikely and if it was, it should be a cause for concern. Frank Lewins' previous publications are all on the subject of migrant policy and settlement with one (alarmingly!) on Bioethics for Health Professionals.

Lewins' book does serve to point the way beyond the opinion/rhetoric/ideology problem if it is recognised that what is required is a well funded, wide ranging, in depth, large number of respondents survey done with the intention of gathering information about a largely unknown community or communities - those who self-identify with the tranny community. The survey would cover aspects of health, lifestyle and sexuality asked of respondents where there are no major factors (such as being denied access to surgery) to inhibit their responses. The questions would be set by many individuals and interested agencies and the final results would be released in their raw form for individuals and organisations to use and incorporate in their own research. The fact that this hasn't happened by 1996 is an academic disgrace.

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# Experiences as a Transgender Woman

## Caroline Seeks Employment in the Fitness Industry

by Caroline Layt

Article appeared in Polare magazine: September 1996 Last Update: October 2013 Last Reviewed: September 2015



I know teaching [fitness] has given me a lot of confidence and I do it not only because it is a job but because I love it.

**F**irstly I have been very fortunate in the fact that I work in a reasonably open-minded industry which is the Fitness Industry. I changed all my certificates over to my female name and this was done without a problem. Then I waited for my body to feminize enough before I approached a fitness centre to work at.

*... and over the phone their Aerobics Coordinator told me she had never come across my 'kind' before*

The first centre I approached was Newtown Gym and they rostered me on for classes immediately. I have been teaching there for about two months now and I have become quite a popular instructor. The curiosity factor that I am transgender certainly helped to bring people along to my classes but the bottom line is that if I couldn't teach then I would be out the door. I am very indebted to Newtown Gym for giving me the opportunity to teach again. Another centre that I have approached is Fitness Network and their coordinator is going to give me

and audition in the next couple of weeks, so things are happening.

I have my Level 2 Certificate, have been teaching for nine years and have taught in many of Sydney's leading fitness centres when I was male. But this counts for nothing when teaching with my new identity. I have to work that much harder now to get work because male instructors are in more demand.

I have one case of discrimination since teaching as a woman. I approached Pace Fitness Centre at Bondi Junction for work. I rang them and over the phone their Aerobics Coordinator told me she had never come across my 'kind' before. Then she told me I didn't sound very female over the phone. I said that if she met me in person then she would realise that I didn't look, and wasn't very male anymore. What annoys me is that how does she know that the girl that served her in the shoe shop isn't transgender or the guy who services her car isn't a tranny guy. What they don't realise is that we are everywhere and in time we blend into society.

Beside that one isolated incident, people in the fitness industry have been fantastic and when I visit my old centres where I taught as a male, everyone is great and tells me how fantastic I look. A couple of centres didn't even realise who I was until I told them.

I was a solid boy and now as a female I look like a gladiator woman when I teach but I do love the look of my body and how I have feminized. Every week I see my body get better and better.

I know we are often vilified in society and a lot of tranny girls think that all they can do is sex work but we all have individual talents and tranny girls and guys you are not useless, use these talents and remember above all you are people and you deserve a fair go in society. The anti-discrimination bill will definitely make things better for us.

I know teaching has given me a lot of confidence and I do it not only because it is a job but because I love it.

My next project? I would like to compete in the National Teams Aerobics Championships. It is teams of three competing against each other and because men compete against women in this competition we would not be discriminated against because of our transgenderism. So if any tranny girls or guys with a dance or gymnastics background are interested in forming a team with me you can contact me through the Gender Centre.

Remember tranny girls and guys follow your dreams and you can do anything and conquer adversity if you put your mind to it.

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