

# Polare Edition 20

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## Editorial

by Craig Andrews, Polare Editor

**P**lenty of changes in this edition of *Polare*. Hope you like them. Primarily the changes allow two extra pages and more use of our spot colour we splash out with. Note the ten week calendar on the back page ... send your "events of interest" in - hope you find it a handy resource to the Centre and Community.

Other changes include a new management committee and a very, very quiet annual general meeting at the end of September. Five permanent appointments in staff here at the Gender Centre. Sharon Stolzenberg - Community Worker, Craig Skinner - Administration and Projects Manager, Phinn Borg - H.I.V. Outreach Worker, Sean Taylor - Social & Support Worker and Elizabeth Riley - Education and Resource Worker. Elizabeth's role is a new one - but more of that in *Polare 21*.

It's a busy issue - and a busy place. Most of the changes to *Polare* so far - and any upcoming ones are in response to your comments. (Okay, sure they were back in 1995, but an editor has to start somewhere!) One example is some attempt to include more *graphic* medical information - this time as part of the "Health Report". Also, loads of opportunities to contribute your stories to your community. Not many "Letters to the Editor" this time round. Is that a good sign?

Well, share your copy of *Polare* around - hope there's something for everyone in here. Enjoy ... and if you don't, well pick that pen up and let us know - okay? And if you'd like to see something stay, then let us know as well. Remember, the Gender Centre is here for you (and at least 2000 others). Your resource centre - at the end of the phone, or if you can, a bus ride, bike, car, train and/or a walk away.

## President's Report

by Kym Kovan, Management Committee President

**A**s many of you will be aware, this has been a most challenging year for the Gender Centre. The fact that the Centre is still in operation and still providing quality services to our community is a tribute to those on the management committee, at the Centre, and in the funding bodies whose patience and goodwill have made it possible. Thank you all!

I would also like to thank Roberta Perkins, Sharon Stolzenberg, and Rochelle Evans for their work on the management committee earlier in the year and Jill Hooley and norrie mAy-welby for helping out as relief workers at the Centre. A very special thank you is due to Paula Hartigan who has been invaluable as the Acting Project Manager. The retiring management committee members Kym Kovan and Gabrielle Mateljan have given most freely of their time and

## Feature Articles



**Emotional abuse of children can lead, in adulthood, to addiction, rage, a severely damaged sense of self and an inability to truly bond with others. But - if it happened to you - there is a way out.**

### You Carry the Cure in Your Own Heart

Of all forms of child abuse, emotional abuse may be the cruellest and longest-lasting of all. Emotional abuse is the most pervasive and the least understood form of child maltreatment, yet the pain and torment of those who experience emotional abuse is often trivialized.

### Fitness & Nutrition

Once hormone therapy begins, our bodies start to change shape with fat deposits moving to different areas of our body. In this article, Caroline discusses our expectations in relation to diets, weight loss and body shape and that fitness and exercise go hand in hand.

### Transitioning on the Job

Keith Rogers has successfully coached many transgendered persons in various methods of disclosing their intention to transition to corporate employers and potential employers. This essay aims to assisting the evolving trans person to be comfortable with their approach.

### What Are You?

Recent attempts to deny marriage to all but culturally defined males and females is doomed to failure because a binary system can never encompass the variety of human sexual realities with perhaps millions of XX males and XY females living in the United States today.

### Reassignment Surgery

This extract from Dr. Peter Haertsch's *Patient Information Booklet* includes the outcomes and expectations of this two stage procedure taking into account the amount of available tissue and potential surgical problems with the clitoris, urethra, vagina and labia.

### Some Thoughts on Transition

Leigh relishes every moment of her new life, however, despite

expense and I wish them well for the future.

An indication of the new stability at the Centre is the fact that we have appointed four permanent staff to the following roles:

- » Outreach: Phinn Borg
- » Education & Resource: Elizabeth Riley
- » Social & Support: Sean Taylor
- » Community Worker: Sharon Stolzenberg

These quality appointees will ensure that service excellence is maintained and strengthened in the coming year. As they are permanent staff they will be able to focus on developing their roles and the management committee will provide the necessary resources and management controls to make those roles as effective as possible. The Centre's computer facilities will be upgraded, including internet access and presence, and administration processes streamlined.

The education and resources position is particularly exciting. Elizabeth will provide an advocacy service to employers in both the private and public sectors. She will acquaint them with the practicalities of employing and dealing with members of our community. In order to do this she will utilise her wide contact network and a range of resources in order to deal with those in positions of influence in a professional manner. This is the first time that the employment issue has been approached in such an organised and well supported manner and the benefits to our community promise to be considerable. Elizabeth will cease her dual role as Administrative Worker and the Centre is currently considering applications received for that permanent position.

While we will be reaching out more to the wider community, we will also continue to form links with the queer community. This year we had a very well received float in the Mardi Gras, and thanks to the generosity of the bisexuals, a stall at Fair day. We will do both next year and will grasp opportunities to participate more in the queer community.

The residences continue to go from strength to strength with an 85% occupancy rate for last year. We will develop our most recent house at Petersham to improve those facilities even further. The provision of housing to community members in need is one of our most important services and we will ensure that it is strongly supported.

Regarding the medium-term, we have the results of the "needs assessment" from this year and next year we will have the findings of the C.H.A.S.P. review. The management committee and the Centre staff will work together to construct a "Centre Development Plan" for the next five years. This will provide a longer term blueprint than the usual one year strategic plan and will enable our resources to be allocated on a more rational basis.

Finally, I think that I must mention the ongoing activities of those in our community who think that the Centre is not on the right track and who have published and distributed a variety of leaflets during the last year. The management committee has discussed with one of the people involved the possibility of them working with the committee to address the issues that they have raised. The person refused to cooperate in any way. I find this to be a sad state of mind but the community will continue to read the material with interest and will adopt any suggestions that seem to be both practical and in the best interests of the membership. In the absence of cooperation, we will naturally claim all such ideas as our own!

## News in Brief

from the pages of Polare Number Twenty

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### Police Abuse Transgenders

**Buenos Aires, Argentina:** Argentina's national campaign against discrimination against lesbians, gays, bisexuals, transvestites and transsexuals has targeted the western province of Mendoza for an international letter campaign because of routine police abuse against transgendered people. As reported by Buenos Aires' Alejandra Sarda following a visit to Mendoza, male-to-females are routinely arrested on sight by police on prostitution charges regardless of their actual activity at the time, and may be shot if they attempt to flee. Arrests usually result in about thirty days detention in police stations' airless basement cells, with sub-standard and occasionally poisonous food and no access to medical treatment. Feminine-appearing young males are also frequently arrested of offences against public modesty and usually held for about twelve hours. Both groups are forcibly tested for H.I.V. on every arrest despite a national law against compulsory testing.

### Legal Cover for British Transgenders

**United Kingdom:** Britain's transgenders are hailing what they say is the first court decision ever giving them protection from discrimination under English law, a mid-July employment appeal tribunal ruling that said that in both public and private employment transgenders are covered under the 1975 Sex Discrimination Act. A celebrated 1996 victory in the European Court of Justice applied

her overwhelming feelings of contentment and vastly improved quality of life following sex reassignment surgery, she has a number of constructive criticisms of South Australia's Sexual Reassignment Act.

### Testimonial from a Partner of an F.T.M.

Inspired to share her valuable lessons about love and happiness, this is the story of Kas' F.T.M. journey through his lesbian partner's eyes. Kas told her of his intentions early on, but she still had trouble contemplating a future and wrestled with her own sexuality.

### Physical Sex

Many people assume that the sexes are very physically different. Yet as startling as the physical differences may be, the similarities may be very surprising. norrie explains these differences and similarities and reminds us that we're all the same species after all.

only to job rights for public sector employees. The case at issue was that of the M.T.F. known as "C", an amusement park employee who was first harassed and finally fired after revealing plans to undergo gender reassignment surgery.

### Employer's Insurance not for All Women

**Oregon, United States:** Oregon's Bureau of Labour and Industries has joined with M.T.F. Margaret O'Hartigan in a federal lawsuit against her employer, a Portland law firm. O'Hartigan is claiming discrimination under the federal Americans with Disabilities Act because the employer's insurance covered oestrogen treatments for other women employees but not for her - a matter of only \$251 month. The Bureau believes there's substantial reason to believe it does not refer to all physical impairments resulting from sex-changes. She raised as an example of the possibility of her being denied life-saving surgery for breast cancer. O'Hartigan bears the burden of proving that the emotional effects of untreated hypo-oestrogenism are severe enough to substantially impair her ability to do her work as a secretary.

### Life Without Parole

**Arkansas, United States:** Arkansas Murderer Yitzak "Isaac" Abba Marta, age 21, was sentenced to life in prison without parole earlier this month for the beating and strangulation death of gay cross-dresser Alan Fitzgerald Walker in November in Fayetteville. Marta was with Adam David Blackford when the pair met Walker outside a gay club and went to Walker's home for sex. Blackford had already been convicted in the same crime; his thirty-year sentence is expected to be cut short because he testified against Marta.

### Free Sex Changes

**Brazil:** The Medical Council approved free sex-change operations in public and university hospitals late last month. The council president said the reason was that transsexuality was legal and that medical techniques were sufficiently developed to demonstrate that the surgery is not "mutilation".

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The Gender Centre is committed to developing and providing services and activities, which enhance the ability of people with gender issues to make informed choices. We offer a wide range of services to people with gender issues, their partners, family members and friends in New South Wales. We are an accommodation service and also act as an education, support, training and referral resource centre to other organisations and service providers. The Gender Centre is committed to educating the public and service providers about the needs of people with gender issues. We specifically aim to provide a high quality service, which acknowledges human rights and ensures respect and confidentiality.

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# You Carry the Cure in Your Own Heart

## Childhood Emotional Abuse ... if it Happened to You - There is a Way Out

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When it comes to damage, there is no real difference between physical, sexual and emotional abuse. All that distinguishes one from the other is the abuser's choice of weapons.

**I**'m a lawyer with an unusual specialty. My clients are all children - damaged, hurting children who have been sexually assaulted, physically abused, starved, ignored, abandoned and every other lousy thing one human can do to another. People who know what I do always ask: "What is the worst case you ever handled?" When you're in a business where a baby who dies early may be the luckiest child in the family, there's no easy answer. But I have thought about it - I think about it every day. My answer is that, of all the many forms of child abuse, emotional abuse may be the cruellest and longest-lasting of all.

***Emotional abuse of children can lead, in adulthood, to addiction, rage, a severely damaged sense of self and an inability to truly bond with others.***

Emotional abuse is the systematic diminishment of another. It may be intentional or subconscious (or both), but it is always a course of conduct, not a single event. It is designed to reduce a child's self-concept to the point where the victim considers himself unworthy - unworthy of respect, unworthy of

friendship, unworthy of the natural birthright of all children: love and protection.

Emotional abuse can be as deliberate as a gunshot: "You're fat. You're stupid. You're ugly."

Emotional abuse can be as random as the fallout from a nuclear explosion. In matrimonial battles, for example, the children all too often become the battlefield. I remember a young boy, barely into his teens, absently rubbing the fresh scars on his wrists. "It was the only way to make them all happy," he said. His mother and father were locked in a bitter divorce battle, and each was demanding total loyalty and commitment from the child.

Emotional abuse can be active. Vicious belittling: "You'll never be the success your brother was." Deliberate humiliation: "You're so stupid. I'm ashamed you're my son."

It also can be passive, the emotional equivalent of child neglect - a sin of omission, true, but one no less destructive.

And it may be a combination of the two, which increases the negative effects geometrically.

Emotional abuse can be verbal or behavioural, active or passive, frequent or occasional. Regardless, it is often as painful as physical assault. And, with rare exceptions, the pain lasts much longer. A parent's love is so important to a child that withholding it can cause a "failure to thrive" condition similar to that of children who have been denied adequate nutrition.

Even the natural solace of siblings is denied to those victims of emotional abuse who have been designated as the family's "target child." The other children are quick to imitate their parents. Instead of learning the qualities every child will need as an adult - empathy, nurturing and protectiveness - they learn the viciousness of a pecking order. And so the cycle continues.

But whether as a deliberate target or an innocent bystander, the emotionally abused child inevitably struggles to "explain" the conduct of his abusers - and ends up struggling for survival in a quicksand of self-blame.

Emotional abuse is both the most pervasive and the least understood form of child maltreatment. Its victims are often dismissed simply because their wounds are not visible. In an era in which fresh disclosures of unspeakable child abuse are everyday fare, the pain and torment of those who experience "only" emotional abuse is often trivialized. We understand and accept that victims of physical or sexual abuse need both time and specialized treatment to heal. But when it comes to emotional abuse, we are more likely to believe the victims will "just get over it" when they become adults.

That assumption is dangerously wrong. Emotional abuse scars the heart and damages the soul. Like cancer, it does its most deadly work internally. And, like cancer, it can metastasize if untreated.

When it comes to damage, there is no real difference between physical, sexual and emotional abuse. All that distinguishes one from the other is the abuser's choice of weapons. I remember a woman, a grandmother whose abusers had long since died, telling me that time had not conquered her pain. "It wasn't just the incest," she said quietly. "It was that he didn't love me. If he loved me, he couldn't have done that to me."

But emotional abuse is unique because it is designed to make the victim feel guilty. Emotional abuse is repetitive and eventually cumulative behaviour - very easy to imitate - and some victims later perpetuate the cycle with their own children. Although most victims courageously reject that response, their lives often are marked by a deep, pervasive sadness, a severely damaged self-concept and an inability to truly engage and bond with others.

Emotionally abused children grow up with significantly altered perceptions so that they see behaviours - their own and others' - through a filter of distortion. Many emotionally abused children engage in a lifelong drive for the approval (which they translate as "love") of others. So eager are they for love - and so convinced that they don't deserve it - that they are prime candidates for abuse within intimate relationships.

The emotionally abused child can be heard inside every battered woman who insists: "It was my fault, really. I just seem to provoke him somehow."

And the almost inevitable failure of adult relationships reinforces that sense of unworthiness, compounding the felony, reverberating throughout the victim's life.

Emotional abuse conditions the child to expect abuse in later life. Emotional abuse is a time bomb, but its effects are rarely visible, because the emotionally abused tend to implode, turning the anger against themselves. And when someone is outwardly successful in most areas of life, who looks within to see the hidden wounds?

Members of a therapy group may range widely in age, social class, ethnicity and occupation, but all display some form of self-destructive conduct: obesity, drug addiction, anorexia, bulimia, domestic violence, child abuse, attempted suicide, self-mutilation, depression and fits of rage. What brought them into treatment was their symptoms. But until they address the one thing that they have in common - a childhood of emotional abuse - true recovery is impossible.

One of the goals of any child-protective effort is to "break the cycle" of abuse. We should not delude ourselves that we are winning this battle simply because so few victims of emotional abuse become abusers themselves. Some emotionally abused children are programmed to fail so effectively that a part of their own personality "self-parents" by belittling and humiliating themselves.

The pain does not stop with adulthood. Indeed, for some, it worsens. I remember a young woman, an accomplished professional, charming and friendly, well-liked by all who knew her. She told me she would never have children. "I'd always be afraid I would act like them," she said.

Unlike other forms of child abuse, emotional abuse is rarely denied by those who practise it. In fact, many actively defend their psychological brutality, asserting that a childhood of emotional abuse helped their children to "toughen up." It is not enough for us to renounce the perverted notion that beating children produces good citizens - we must also renounce the lie that emotional abuse is good for children because it prepares them for a hard life in a tough world. I've met some individuals who were prepared for a hard life that way - I met them while they were doing life.

The primary weapons of emotional abusers is the deliberate infliction of guilt. They use guilt the same way a loan shark uses money: They don't want the "debt" paid off, because they live quite happily on the "interest."

When your self-concept has been shredded, when you have been deeply injured and made to feel the injury was all your fault, when you look for approval to those who can not or will not provide it - you play the role assigned to you by your abusers. It's time to stop playing that role.

Because emotional abuse comes in so many forms (and so many disguises), recognition is the key to effective response. For example, when allegations of child sexual abuse surface, it is a particularly hideous form of emotional abuse to pressure the victim to recant, saying he or she is "hurting the family" by telling the truth. And precisely the same holds true when a child is pressured to sustain a lie by a "loving" parent.

Emotional abuse requires no physical conduct whatsoever. In one extraordinary case, a jury in Florida recognised the lethal potential of emotional abuse by finding a mother guilty of child abuse in connection with the suicide of her seventeen-year-old daughter, whom she had forced to work as a nude dancer (and had lived off her earnings).

Another rarely understood form of emotional abuse makes victims responsible for their own abuse by demanding that they "understand" the perpetrator. Telling a twelve-year-old girl that she was an "enabler" of her own incest is emotional abuse at its most repulsive.

A particularly pernicious myth is that "healing requires forgiveness" of the abuser. For the victim of emotional abuse, the most viable form of help is self-help - and a victim handicapped by the need to "forgive" the abuser is a handicapped helper indeed. The most damaging mistake an emotional abuse victim can make is to invest in the "rehabilitation" of the abuser. Too often this becomes still another wish that didn't come true - and emotionally abused children will conclude that they deserve no better result.



**The attorney and author Andrew Vachss has devoted his life to protecting children.**

The costs of emotional abuse cannot be measured by visible scars, but each victim loses some percentage of capacity. And that capacity remains lost so long as the victim is stuck in the cycle of "understanding" and "forgiveness." The abuser has no "right" to forgiveness - such blessings can only be earned. And although the damage was done with words, true forgiveness can only be earned with deeds.

For those with an idealized notion of "family," the task of refusing to accept the blame for their own victimization is even more difficult. For such searchers, the key to freedom is always truth - the real truth, not the distorted, self-serving version served by the abuser.

Emotional abuse threatens to become a national illness. The popularity of nasty, mean-spirited, personal attack cruelty that passes for "entertainment" is but one example. If society is in the midst of moral and spiritual erosion, a "family" bedrocked on the emotional abuse of its children will not hold the line. And the tide shows no immediate signs of turning.

Effective treatment of emotional abusers depends on the motivation for the original conduct, insight into the roots of such conduct and the genuine desire to alter that conduct. For some abusers, seeing what they are doing to their child - or, better yet, feeling what they forced their child to feel - is enough to make them halt. Other abusers need help with strategies to deal with their own stress so that it doesn't overload onto their children.

But for some emotional abusers, rehabilitation is not possible. For such people, manipulation is a way of life. They coldly and deliberately set up a "family" system in which the child can never manage to "earn" the parent's love. In such situations, any emphasis on "healing the whole family" is doomed to failure.

If you are a victim of emotional abuse, there can be no self-help until you learn to self-reference. That means developing your own standards, deciding for yourself what "goodness" really is. Adopting the abuser's calculated labels - "You're crazy. You're ungrateful. It didn't happen the way you say" - only continues the cycle.


Adult survivors of emotional child abuse have only two life choices: learn to self-reference or remain a victim. When your self-concept has been shredded, when you have been deeply injured and made to feel the injury was all your fault, when you look for approval to those who can not or will not provide it - you play the role assigned to you by your abusers.

It's time to stop playing that role, time to write your own script. Victims of emotional abuse carry the cure in their own hearts and souls. Salvation means learning self-respect, earning the respect of others and making that respect the absolutely irreducible minimum requirement for all intimate relationships. For the emotionally abused child, healing does come down to "forgiveness" - forgiveness of yourself.

How you forgive yourself is as individual as you are. But knowing you deserve to be loved and respected and empowering yourself with a commitment to try is more than half the battle. Much more.

And it is never too soon, or too late, to start.

## Andrew Vachss

**Edited from Wikipedia:**  Born in 1942, Andrew Vachss is an American crime fiction author, child protection consultant, and attorney exclusively representing children and youths. He is also a founder and national advisory board member of Protect: The National Association to Protect Children. Before becoming a lawyer, he held many front-line positions in child protection. He was a federal investigator in sexually transmitted diseases, and a New York City social services caseworker. Vachss studied community organizing in 1970 and worked as a labour organizer and ran a self-help centre for urban migrants in Chicago. He then managed a re-entry program for ex-convicts in Massachusetts, and finally directed a maximum-security prison for violent juvenile offenders. As an attorney, in addition to his private practice, he serves as a law guardian in New York state. In every child abuse or neglect case, state law requires the appointment of a law guardian, a lawyer who represents the child's interests during the legal proceedings.



Andrew Vachss is the author of twenty-five novels and two collections of short stories, as well as poetry, plays, song lyrics, graphic novels. He has also written non-fiction, including numerous articles and essays on child protection and a book on juvenile criminology. His books have been translated into twenty languages.

More about Andrew Vachss at [his website](#). 

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The Gender Centre is committed to developing and providing services and activities, which enhance the ability of people with gender issues to make informed choices. We offer a wide range of services to people with gender issues, their partners, family members and friends in New South Wales. We are an accommodation service and also act as an education, support, training and referral resource centre to other organisations and service providers. The Gender Centre is committed to educating the public and service providers about the needs of people with gender issues. We specifically aim to provide a high quality service, which acknowledges human rights and ensures respect and confidentiality.



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## Fitness and Nutrition

### For the Transgendered Individual

by Caroline Layt

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Remember, with a good exercise program and a sensible diet you should be able to see some steady improvement over time.

Once we have started hormone therapy our bodies obviously start to change shape. With this change of shape though there is a downside.

Biological females carry a higher percentage of body fat to that of biological males mainly due to reproductive reasons. For example, a tranny girl who is quite slim in her former state has a possibility of not remaining so, after being on hormones for a while, especially if she lives a sedentary lifestyle. The one plus I have found is that weight appears to be distributed to the areas that I have wanted it to be i.e. the hips, gluteals and my bust. The obvious reason for this is that I am going through my second puberty.

From my personal point of view, my body fat seems to fit in all the right places for me now, whereas if I was overweight at any time when I was pre-hormone, it

would appear other places, i.e. my stomach and the 'love handles' on the lower back. Physiologically, weight distributes to all areas of the body, but does appear to show in certain areas.

Female-to-males are glad to get rid of their female shape. When they start putting on weight in the desired areas, it obviously makes them very happy. Males are usually physically bulkier than females, so obviously female-to-males are going to bulk up to some degree after starting hormone treatment.

Unfortunately, many people don't know how to lose weight in a correct and sensible manner, so quite often you will find they will go on a 'crash' diet. This form of losing weight is quite unhealthy.

What happens is once you begin eating normally again, you will put on more weight than you did before. The reason behind this is that a 'crash' diet will slow down your metabolic rate (the rate at which the body 'burns up' or changes food into 'fuel' or energy that the body uses). Once the metabolic rate is slower, your body also compensates for receiving less food by eating into your fat stores at a slower rate as well. This is a survival mechanism triggered by your body, so that your fat stores will last longer. We need a certain amount of fat stores in order to survive.

The correct way to diet is to eat sensible and healthy meals without eating too much fat. Many sports people eat more meals a day, but in smaller portions in order to keep their metabolism skipping along at a faster rate. In between meals, they will quite often have a piece of fruit or something similar to reduce the risk of bringing on something unhealthy. Also, you will find that by just reducing your intake of fats into your diet, will help you lose weight. If you cut down on fried food and food with a high sucrose (sugar) level, you will find that can help you lose weight also.

For example, I have a naturally slow metabolism and being a person who loves food, I found myself ballooning out to 84kg recently. What I decided to do was to cut out the fats in my diet and at the moment I can proudly say I am now down to 77kg. I feel and look a lot better, but I have also made sure that I have had a sensible and safe diet that has allowed me to lose weight slowly and correctly. I still love junk food occasionally, so I treat myself about once a week. I find that if I don't treat myself like this, I will binge badly. It should be okay to treat yourself once in a while as a reward.

Another aspect of weight control is that we want to look like a certain person or achieve a certain body image, when unfortunately our genetic make-up doesn't allow us to look the way we would like to. For example, I am a solid girl. My mother in particular was very good at sport and passed these genes onto me. I have a lot of 'fast twitch' fibre (fibre that allows for quick muscle development, strength and speed), so this allowed me to be good at power sports and also allowed for good muscle development. As I played a lot of power sports before changing over, I built up my body. If I tried to look like Kate Moss, it would be impossible. Whereas, it is possible for me to have a body like Lisa Curry-Kenny because I have a similar genetic make-up to her. So what I am trying to say is that no matter how hard I try to reduce my body size by aerobic activity and degree by going through puberty in my younger years, so I know my bone structure will always be a little bit different to the average girl. We sometimes have physical limitations, but there is no reason why we can't all have good strong, healthy bodies. I also believe that the media has definitely a lot to answer for in regards to women wanting to be too



slim.

I like the fact that I have an athletic body. I think we should all learn to like our bodies for what they are, because through exercising and a correct diet there is no reason why we all can't look good in our own way. Some people have 'slow twitch' fibre (good for endurance activities and they are more slightly built people). Someone like marathon runner Steve Moneghetti would have trouble looking like Arnold Schwarzenegger as they have totally different body types. Some of this is due to their chosen sports but a lot of it would also be due to genetics. Arnold's father was a stocky man whereas Steve Moneghetti's father would probably be of a more slight build.

For biological men, especially in ethnic cultures, there is too much of an accent on being big and strong. This is where the culture of taking steroids to build the body can be dangerous, especially if he doesn't know what he's doing. It would be nice if the accent was on a nice fit and healthy body for everyone.

What most people want is a quick fix. Unfortunately there is no quick fix. Exercise and diet go hand in hand. They ask "will my stomach become smaller if I do abdominal curls". The answer is no. The stomach muscles may become stronger, but the same amount of body fat remains there. You can't spot reduce by working a certain area.

You can increase muscle size by doing weights, but there will still be the same amount of body fat there, as this type of body fat isn't working your heart and lung capacity. To reduce the amount of body fat you have to do aerobic activity as well as a sensible and healthy diet. The reason for this is when you do aerobic activity, during the first fifteen minutes you are burning into your glycogen stores (or the food from your last meal beforehand). After this period you begin burning into your fat stores. So it is probably advisable to do at least thirty minutes of aerobic activity at least three times a week. If you are a beginner starting out, three times a week is plenty, with a rest day in between, otherwise you may burn yourself out. Pacing yourself is vital.

Aerobic activities include aerobics, swimming, running, power walking, cycling etc. Once you get past this beginner stage you may like to increase the tempo. If you have no background with exercise I'd suggest you see a qualified personal trainer who can design a program to suit your specific requirements. A word of advice though, you probably should check their qualifications before you start as there are some shonky trainers in the fitness industry. They should at least be 'Fitness Leader One' accredited with the Australian Fitness Accreditation Council. If you can't afford a personal trainer you could head to a fitness centre and ask for a tailored program to suit your needs. Fitness centres these days usually employ qualified fitness professionals to help you and your needs. If you are worried about being discriminated against, there are plenty of centres that are tranny friendly in the inner city locality at least.

Remember, with a good exercise program and a sensible diet you should be able to see some steady improvement over time. It won't happen straight away, but it will happen if you're consistent with your diet and exercise program. One other thing is that you should have a thorough medical check-up with your doctor and a chat with your endocrinologist before you start.

Finally, what I have written in this article are some basic tips that you can follow and I hope that they can be of some use to you and your training. Good luck! If I can be of any assistance to you with either personal training or mapping out a program, I can be contacted through the Gender Centre.

I am a 'Level Two Fitness Leader' registered with the Australian Fitness Accreditation Council. I am presently teaching aerobics at Broadway Gym and The Fitness Exchange (Pride Centre) so if you want to come along and do a class, you are most welcome to do so.

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## Transitioning on the Job

### Assisting the Evolving Trans Person to be Comfortable with Their Approach

by Keith Rogers, Chrysalis Volume 2 No. 4

Article Appeared in Polare Magazine: October 1997 Last Update: October 2013 Last Reviewed: September 2015

You've shown what you can do for them before you ask what they can do for you.

**A good friend of mine near the top of the food chain at a major insurance company recently transitioned on the job from Larry to Lisa. She had campaigned quietly and effectively in her headquarters office and had visited among her colleagues and subordinates in the field offices. Her growing value to the organisation over twenty years had been confirmed by top management with her complete and heartfelt endorsement of her decision, communicated to more than 6000 employees in twenty-one district offices where she had supervisory responsibilities. Now came the hard part: real acceptance. Could she make others comfortable with her by showing she was comfortable with herself?**

Came time for the company's annual golf tournament, always a serious war between Northern and Southern divisions of the organisation. If you can believe that (believe it), the most serious question about her transition was whether she would hit from the ladies' tees or the men's tees. In the eyes of the Tournament Committee, hitting from the ladies' tees would be a decided advantage for her side. She discussed her situation with me and we came up with a solution.

At the first hole, Lisa went first to the men's tee. She took out her driver and went through the ritual motions. Then she looked around with a smile, moved down to the ladies' tee, and did the same routine. Then she turned around and paced off the exact distance between the two tees, teed up halfway between them, and smacked that sucker out of the park, (to mix my metaphors). The President of the company high-fived her, and all were watching brethren applauded. The word then went forth over the company's "cafeteria telegraph" that she was cool - in other words, she passed with flying colours, pun intended.

Obviously, you are free to confront, challenge, and legally pursue all your rights to your job and to try and keep it via the adversarial route, if you wish. But, harkening to the heroic whistle blowers in the Challenger disaster and the Tail-hook scandal and many, many other classic cases, you can be quietly and not-so-gently harassed and hounded right out into the street, regardless of your legal, ethical and logical rights. From what I've seen, keeping one's job is mostly a matter of being accepted by corporate cultures.

Cynthia R. was one of the first male employees in a now established and prestigious Texas computer company. She has always had the longest hair in the company bar none, male or female, and she has leaned toward declaring herself pre-op and dressing in the female mode for a long time. But until recently, she never did anything about it. Even with her seniority and the feeling that many co-workers were tacitly aware of her feelings, she was fearful of the repercussions.

Then she attended a presentation I made at the Texas "T" Party on transitioning on the job. We talked afterwards. She has just written that she has selectively taken the first serious step to coming-out in the office. "I received the information you sent and set right to work". Translated, that means she took a good sample of a transitioning letter I sent her for reference, piggybacked her own letter on this, and sent it to some selected friends. She has begun to

find active sympathy and support for what she wants to accomplish, and incidentally in the process has discovered a gay friend and another transgendered person in her firm, neither of whom she knew about before.

There may be some differences in style, but professionals deal in the same context of cultures as corporate employees. In the case of a very successful male lawyer in the tradition-bound deep south, some clients and a partner dropped away when he decided to transition. In order to successfully become she, she developed an aggressive individual plan. She was already living full-time as a woman when she decided she needed to go face-to-face with her clients, prospective clients and the important judges in her community. She gum shoed door-to-door with her key contacts, one at a time, one-on-one, with the salesman's understanding that you need to look at and listen to what people don't say to get a real feel for their feelings. Some transgendered persons send their colleagues a letter or letters of explanation. She achieved the same result person-to-person.

No one is indispensable, but try and come as close as you can.

A guiding principle with any employer and associates or clients in any organisation is "no surprises", especially if you're going to eventually evolve in a radical different form. Don't jolt, embarrass, or blindside people. Give them time to digest the new evolving you. We all like to appear cool and rationally responsive; this is especially true of people who may be a little shaky in their own sexual identification.

At any rate, as a result of intelligent spade work, the former Mike's professional debut as Andrea was boffo; in program print with complete biography as Andrea and on stage as faculty in a legal learning program in front of several hundred colleagues, most of whom had met only Mike, she "broke a leg" - meaning, she too passed with flying colours, pun intended again. And most importantly, she did it the way nature does it, with no sudden surprises.

In all of this it goes without saying (but I'll say it anyway), that you have already proven that you're a good and valued employee. You've shown what you can do for them before you ask what they can do for you. No one is indispensable, but try and come as close as you can.

One of the rockiest parts on the road to transition is getting to the top decision makers through the chain of command. If you can help it, the last thing you want to do is to leapfrog over your immediate superior's head. And before you make your pitch to the ultimate boss, nothing will help so much as practicing your approach, or role playing. It gives you the idea of having been there before. In other words, be comfortable with your approach.

I have coached several transgendered persons in this method and it has worked most of the time. The system is simple. Meet with a knowledgeable friend as if he or she were your boss. You can have others witness and critique, if you like. Make your pitch. As your boss, your friend should ask you some hard questions. He or she can also try some tricks like incidentally tipping a glass of water on you to see if you fall apart or offering you a cigarette without an ashtray to see if you will react calmly and ask for an ashtray. Simple things, but, trust me, they've been used on me and I've used some of them over the years. Again, the advantage of this procedure is *deja vu*. You will have practised before you go in to see the key leader.

The chain of command applies to the self-employed also. Andrea heads her own law firm, nevertheless, she had an organised framework to deal with in the form of her local legal community. To deal with opinion leaders, she felt she couldn't start dealing with them directly herself. She used "mentors" to pitch and push for her. It's a matter of judgement, of course, as to whether or not others can do more for you initially than you can do for yourself. Everybody has a chain of command - it's just a matter of how you reach the top.

In another case, a pre-op executive in Chicago felt she had heard an unsatisfactory dress rehearsal of the pitch her advocate was to make to the boss before she saw him herself. So she bent the reporting relationship rules and went in herself. She rolled the dice and she won.

In contrast, Jennifer A. relied on her good friend and influential superior to make her case with the C.E.O., and she lost. The lead scientist in the consortium of energy companies, Jennifer was well-nigh indispensable, but her friend apparently couldn't translate her core beliefs to the ultimate decision makers. Her position was eliminated. She was flimflammed out of her job. It also goes without saying that you deserve a personal shot at saving yourself. But following proper corporate and professional protocol will often pave the way to a more positive personal audience with the top person.

And, psychologically it is harder for someone to fire you if they've gotten to know you up close and personal. You know that, but so does the decision maker, who may resist seeing you for that very reason.

Try, try as much as humanly possible to get as much of your righteous anger and frustration out of your system before you go in to persuade your boss that you are stable, sincere and worthy. The boss doesn't need to see the side of you that is mad as hell and isn't going to take it anymore. Studies presented at the International Conference on Transgender Law and Employment Policy have shown that most employers are much more interested in your stability and your work productivity than your gender goals.

Once you have properly conditioned your employer through emissaries, a coming-out letter and/or other literature (all with the help of your employee assistance program, if possible), and have by personal contact shown them that the business person they can expect in the office everyday is going to be proper and normal, you can achieve your end results. So take that anger to a support group, friends and/or a good therapist. Deal with it with the right people in the right place.

Again, Andrea sets a good example. She sees a therapist and has an empathetic support group. Recently, she used the support group to work through her anger at an "insensitive friend" who kept calling her by the male pronoun in public places. She didn't spray her frustration all over her business relationships. She brought the problem to the group.

Work, work on the right approach and process for keeping your job. As an incentive, paraphrase the old Ben Franklin proverb: the prospect of being hung focuses the mind wonderfully.

Enough serious thoughts and sage for a bit. One of the best tools to use in a successful relationship is humour. Yes, we're still talking about serious issues; your livelihood and maybe your whole future, your vestments, your pensions. But try to kid yourself lightly and politely through this in the presence of all and sundry in your organisations and business framework. Reason? Your ultimate grace under this ultimate pressure will impress and persuade people more than any ringing declaration of personal freedom. Trust me. Then go find your support group and scream your head off.

An example; Laura S. was a very successful counsel and C.E.O. of an Oil Company. Well before her transition, she had prepared her department with her own gentle but self-deprecating sense of humour. When she returned from surgery, her troops had shopped at a maternity store and had a big "It's a Girl" banner over her door. We kid people we are comfortable with and care about. Enough said. Laura's supervisors had to accept her after that.

Other transitioning executives I worked with have been on target: when one said something dumb in a business meeting, she recovered nicely. She said with wry good humour, "that's what happens when you're going through a sex-change - it sucks out your brains". Another time, discussing the dire predictions for people who break chain letters, another executive said, "Yes, I broke the chain once, and look what happened to me." Opportunities abound to put people at ease with humour. And humour can be used to put people in their place too.

Once I silenced a room full of religious fundamentalists with a one liner. Some declared that the transgendered woman I was escorting to and through a difficult social situation was actually a man. I replied, "Nobody's perfect". You could hear the proverbial pin drop before the wondrous, bemused and mostly sympathetic laughter started in the back of the hall. Granted, my "snapper" was straight from Hollywood's *Some like it Hot*, but it worked to diffuse the immediate discomfort abounding.

How do you handle the sexual harassment you may be subjected to while you're in transition? Again, humour helps, and you can always vent your frustration in the confines of your support group. But you still have to go into the office/arena and face the lions.

Most of the gossip, suspicion, scorn and ridicule which can develop around your transition is born of ignorance. When you're able to go one on one with opinion leaders in your business community and otherwise spread the true word through close and sympathetic colleagues, the situation usually improves. The truth may not set you completely free, but it can make the work environment a lot more comfortable.

Inject information about yourself and transgenderism into your organisation's "cafeteria telegraph" (i.e. the people at all levels in the lunchroom and the executive dining room who seem to know who's sleeping with whom and everything else confidential, including salaries, and sexual orientations). And be available to answer questions.

Remember, in many cases you are dealing with colleagues who are not that secure in their own sexual and gender identities. Another important point: I strongly suggest that you not waste your energy trying to find out exactly who said exactly what about you and your situation in the rumour mill. In most organisations, this is like punching feathers.

As you make plans to transition, and before you get started, try to cultivate some close female friends (or male friends if you're F.T.M.). They can be surprisingly sympathetic and protective, among your strongest up-front as well as back channel advocates.

Even before she went into her full transition mode, Laura S. did some quiet volunteer legal work for some feminist groups. When she came-out, the old girl network in the Denver legal community helped her maintain her standing in the profession without skipping a beat.

Office politics is not unlike any other kind of politics - there are people who just aren't going to share your point of view, no matter how persuasive you are. They just aren't going to vote for you and your transition. What you need is a working majority of supporters to help you keep your job. Don't waste your time or your ego trying to convince everyone to be on your side. We're talking here about progress, not perfection.

A classic case involving many of the successful steps and techniques we've been discussing involved a sales executive for a national furniture chain. She was still in an androgynous stage when she first broached her transitioning plans to her local manager. He was an unsophisticated fundamentalist: to say the least, he was confused and very conservative in his reaction. So she used her considerable native intelligence and survival skills. She called across the country to the corporation's human resource department and told them what she wanted to do. It was a first for them, too. But since she wisely connected with the employee assistance program pros early on, she was officially approved and supported.

Meanwhile, back on the home front, she began applying cosmetics in slow degrees, taking seven months before she was fully made up. Her conservative store manager got used to a little lipstick one week, three weeks later a little mascara. She was already looking at offers in another field for reasons other than transition problems, but had she opted to stay, her strategies were solid. Her best asset was her winning sales way, and her hole card was her wry sense of humour and her honesty. Thus, some of her strongest advocates turned out to be her customers. The manager's wife was also one of her more sympathetic supporters. If our heroine has opted to have a long lunch with this lady to explain her husband's passive aggressive attitude, she would probably have relieved some of the pressure.

Dress is one of the supposedly "small" things which people watch closely. Add the fact that you will be under double scrutiny in a glass bowl, and it's clear that dress is something to which you should pay close attention.

Try to walk the line where clothes are concerned. In other words, don't over, or under dress. This is of course subjective. But do some research, look around you at what your co-workers are wearing and consult with friends.

Consider Lisa and her successful transition. Not unlike the big decision as to which set of tees she should play from, the office pool was betting on what she would wear on her first day at the job as a female. I kid you not. Some, in their ignorance, weren't so sure what to expect. She dressed in a conservative, attractive women's business suit.

Most transgendered women want to be fashionable and make their own statement, but they realise they need to blend in. In their coming-out letters, some transgendered persons mention how they will dress and subtly negotiate this condition with management.

Be prepared to answer co-worker's questions simply, specifically and as completely as possible. Remember that most are coming from nowhere in their understanding of your situation. You will have to go back to Gender Identity 101 and explain transsexualism. What you tell them, depends on how much you think they ought to know. Many people are satisfied with a superficial explanation: it's as much as they can digest.

If you're conditioning your company to accept your transition and you're being treated seriously, start gathering your facts and friends right now. Be ready to persuade and propose. Whatever the timing of your official meeting with your boss, he can move it up or delay it at his discretion - he's the boss. Be ready whenever he is.

A case in point: A pre-op friend had reached the point at which it was necessary to either transition to a full feminine mode or leave the company. She had left the decision in the hands of the C.E.O. She called excitedly to say a "go" or "no-go" meeting had been set in three weeks. I advised her to be prepared for the meeting as soon as possible, to expect the unexpected. Sure enough, four days later, the C.E.O. had a change of plans, looked at his watch, and told her immediate supervisor to "get her in here, now". She was ready. She won the day, and more importantly, a future with the company. Be prepared. And also be prepared at any point with physician's certifications and other official papers you have attesting to bureaucracy's approval of your transition decision.

Where your company and/or your professional colleagues are concerned, it helps if they can see somebody else's letterhead approving of your plans. Official endorsement may not be necessary so far as your feelings are concerned, but third-person approval always helps with others.

In addition to the known obstacles in your organisation, be aware of hidden or subtle opposition. Be realistic. Any organisation is a pyramid - there is less and less room the further you go. Even if you work for the most benevolent, benign and accepting corporation in the whole world, when you transition, you are handing extra ammunition to your logical and natural competitors for higher positions. And in the wonderful world of business, many people will use any ammunition they can get against any opposition.

It's wise to also be ready to handle religious "ranters". I'm not talking about the abstract and larger philosophical questions posed by official religious organisations. I'm talking about the in-your-face types who declare that if "Gawd" had intended you to be an etc., he would have made you an etc."

In other words, in the "ranters" best tunnel vision way, they feel you have a moral problem rather than a medical one. Ask them whether if they had a hare lip, they wouldn't try to correct it cosmetically. Tell them that two thirds of your being, your intellect and your emotions, is in the wrong physical frame. Ask them what's wrong with becoming congruent. If you're inclined to answer in kind, tell them that God is not finished with you - yet.

Where possible, have legitimate and knowledgeable supporters with you when you meet with management to propose that you transition on the job. This is not just to protect your legal rights, it will give you a psychological lift.

If you've ever made a public speech or stood up to make a point in a public meeting, you know it helps to make eye contact with those who will react actively and positively to what you say. Do that, if possible.

Remember, it takes time to build towards your goal. It is a process to success, not a fact accomplished from the word go. As a long time member of a twelve step program, I can tell you I didn't get sober all at once. Keep working.

Most successful transgendered persons I have met are bright, energetic, focused and brave. You have to be in order to overcome the ignorance and prejudice of the general population. Some day, perhaps fifty years from now, there will be a respectable, accepted transgender associate, with an office in every city and town. There will be an annual T.A. charity ball and the junior league ladies will vie to be on the Board of Directors of the Association - but not yet. Now to mix my metaphors, again, tee up that ball and smack that sucker out of the park.

Keith Rogers is a journalist who retired as a corporate vice-president in a Fortune 500 company. In more than thirty years on various organisational ladders, he has been both a subordinate and a supervisor. He is a spiritual and financial supporter of A.E.G.I.S., I.F.G.E., I.C.T.L.E.P. and the Texas "T" Party.

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# What Are You?

## The Variety Human Sexual Reality

by William O. Beeman, Baltimore Morning Sun, March 1996

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[Intersex] infants are surgically altered and given hormonal treatments so that they will fit into one of the two cultural categories, male or female.

**M**ale, Merm, Herm, Ferm or Female? Are the categories "man" and "woman" so obviously clear that they need no further explanation? Legislators throughout the nation trying to prevent the recognition of "gay marriage" contracted in other states obviously think so. They have introduced legislation that would grant official recognition only to marriages between "a man and a woman." Legislation embodying this language has already passed in South Dakota and Utah and may become law in seventeen other states, including Maryland, in the next few months.

***Most intersex Americans are unaware of their true biological gender because under current medical practice, physicians reassign the gender of intersex infants at birth ...***

Maryland's bill, introduced by Del. Emmett C. Burns Jr., the founding pastor of Rising Sun Baptist Church in Woodlawn, says same-sex marriages are "against the public policy of this State." If enacted, "only a marriage between a man and

a woman" would be valid in Maryland and same-sex marriages that take place in other states or foreign countries would not be recognised.

Perhaps Mr. Burns and the other legislators who are pushing these bills don't realise it, but their passage would unwittingly nullify or prevent millions of supposedly heterosexual marriages.

Why? Because many of the marriage partners will not meet the medical definition of being "a man and a woman." To make matters worse, most of these couples will not know that they are illegally married.

Between three million and ten million Americans are neither male nor female at birth. Additionally, as adults they may be genetically of the opposite gender from that which they and their parents believe them to be.

The medical term for persons of ambiguous gender is "intersex." Estimates of the numbers of persons who may be born intersex ranges from one percent to four percent of all children born today, according to Dr. Anne Fausto-Sterling of the Division of Biology and Medicine at Brown University.

The difficulty in determining clear-cut specification of gender arises because there are at least three ways to define it. Two are biological and one is cultural.

The first biological definition defines gender in terms of chromosomes. Males have an X and a Y chromosome. Females have two X chromosomes. The second biological definition assigns gender in terms of male and female genitalia.

In the third, "cultural" definition, males are people who look and act "male" and females are people who look and act "female." Americans generally want everyone to fit the third, cultural definition, even when people have biological characteristics that are not strictly in accord with a two-gender system.

One cause of intersexuality seems to be the possession of an abnormal number of chromosomes only one or more than two. A second cause stems from the fact that all humans, no matter what their chromosomal make-up, have the biological capacity to develop either male or female genitalia and secondary sexual characteristics while in the womb. Developmentally, some babies are born with male or female chromosomal make-up and with both male and female genitalia, or with some of the genitalia of the opposite chromosomal sex.

Dr. Fausto-Sterling points out that there is a smooth continuum between 100 percent biologically male and 100 percent biologically female with many possibilities in between. She calls those with both testes and ovaries "herms". Those with testes and some female genitalia but no ovaries are "merms". Those with ovaries and some male genitalia but no testes are "ferms". This gives the possibility of five rough biological groupings: male, merm, herm, ferm and female.

Most intersex Americans are unaware of their true biological gender because under current medical practice, physicians reassign the



gender of intersex infants at birth. Such infants are surgically altered and given hormonal treatments so that they will fit into one of the two "cultural" categories male or female. The test is usually not chromosomal, but rather based on the "viability" of the genitalia to eventually appear normal.

Often the parents are not fully informed about what is happening to their children.

Dr. Fausto-Sterling calls this medical reassignment a "surgical shoehorn" designed to force intersex infants into rigid cultural categories that have little to do with biological reality.

As a result, there are perhaps millions of XX males and XY females living in the United States today. These are cultural males with male genitalia who are genetically female, and cultural females with female genitalia who are genetically male. In recent years a number of phenotypically female Olympic athletes who underwent genetic testing have been found, unbeknown to themselves, that they are genetically male. At least one well known film star also shares this condition.

The current legislative issue in South Dakota, California, and Utah and other states has arisen because a current court test of marriage laws in Hawai'i seems likely to result in recognition of same-sex marriage sometime in the future. Because marriages in one state are generally held to be legal in others, the Hawai'i action would effectively legalize same-sex marriage throughout the nation.

The legislators have obviously not consulted with scientists in their zeal to eliminate "gay marriage". Legislation preventing recognition of any marriage except between a "man" and a "woman" will clearly have some surprising unintended consequences. In states with such laws, it may be necessary to have a "genetic" test such as is currently performed on Olympic athletes before a marriage license can be issued. Even so, what does an XX male or an XY female do about marriage? This legislation might effectively prevent such people from ever being legally married in their state of residence.

Some legislators have also tried to preclude post-operative transsexuals from marrying by requiring that marriage partners be "potentially fertile". This, of course, would exclude not only the transsexuals, but also all intersex individuals. It would also exclude women who have undergone hysterectomies or gone through menopause, and men who became infertile as a result of disease, such as having contracted mumps as adults.

This attempt to deny marriage to all but culturally defined males and females through legislating science is eventually doomed to failure because a two-category male/female system can never encompass the variety of human gender construction. A large number of destructive and expensive court cases will arise if such restrictive and ill-conceived marriage laws are passed. It would seem far more reasonable to allow any two persons wishing to ratify a personal relationship to do so without having to satisfy a standard that has little relationship to reality.

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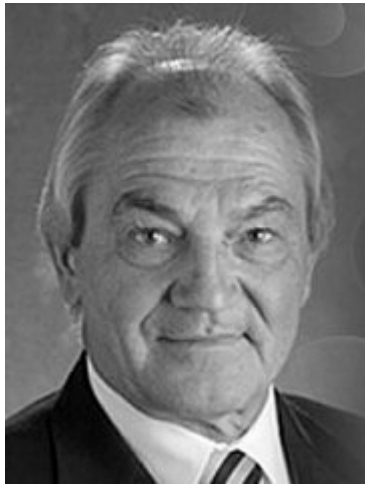
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# Reassignment Surgery

## Extract from Dr. Peter Haertsch's Patient Information Booklet

by Dr. Peter Haertsch

Article Appeared in Polare Magazine: October 1997 Last Update: October 2013 Last Reviewed: September 2015



Dr. Peter Haertsch

### Outcomes and Expectations

**T**he object of the exercise in male-to-female reassignment surgery is to give you the external genitalia which have the appearance of being female and to give you a functioning vagina. Because of the differing amounts of tissue available to reconstruct the external genitalia, there will be a spectrum of appearances ranging from being similar to biological genitalia and quite convincing, to being obviously a surgical result. This appearance will be related not only to the availability of skin tissue, but also healing without complication. The two stage procedure which will be discussed with you, is able to achieve a more pleasing appearance. You will be shown a series of photographs depicting the varying appearances. Labia minora (the inner lips above the entrance to the vagina) are the most difficult to reconstruct and no guarantee can be given as to the final result.

The aim of vaginal reconstruction is to give you a functioning vagina which is somewhere in the vicinity of 13cms in depth and in circumference. Again, the given anatomy of the individual who has a narrow pelvis, will compromise the ability to construct a vagina with the above circumference and in those who have a lower pelvic floor, achieving adequate length will be difficult. Both these problems will not really be apparent until the time of surgery and there is no investigation, radiological or otherwise, which can be carried out to determine

this. Given the physical constraints, i.e. the availability of suitable tissue and suitable quantity of tissue, the end result also depends on the healing process. As with any reconstructive process, healing is directly affected by blood supply which can be compromised and result in the death of some of the body's tissues around the surgical site. As a direct consequence of this there will be delayed healing, more scarring and possibly an inferior result.

### Potential Surgical Problems

#### The clitoris

This is made from a small portion of the glans penis which during surgery is isolated only on its blood supply and nerves. This portion of the head of the penis is orientated in an anterior/posterior position and buried to some extent to simulate a female clitoris in appearance. It will never be exactly the same as a female clitoris. According to whether or not there are problems with the blood supply, the clitoris may in fact die altogether, or end up hyposensitive. This is a rare occurrence. If there is to be a problem with sensitivity, it is most likely that the clitoris will be hypersensitive initially but this, in our experience, usually settles down over a period of several months. Manual stimulation of the clitoris or surrounding area normally will allow you to achieve orgasm and in doing so, there will be some ejaculate emanate from the urethra. The ability to climax is a complex process and no guarantee can be given in this respect. For more information on this please see the section in this booklet titled "Sexual Function".

#### The urethra

During surgery the purpose of repositioning the urethra is to allow for a straight stream and allow you to sit down to pass urine as a female would normally do. This result is sometimes not achieved because of various problems. The first problem is a caruncle, which is a small fleshy projection developing somewhere on the urethral opening. This is easily treated by surgical excision. Because the urethral opening is circular, occasionally there can be some stenosis, or narrowing of the opening when the scar matures. This can result in some difficulties passing urine. It will mean that you will have to strain to some extent to empty your bladder and you may feel that you are not emptying your bladder completely. This situation will lead to the development of urinary infection. The most common way of dealing with this problem, is to dilate the urethral opening and the most practical way to do this is to use a shortened golf tee. Secondary surgery for urethral stenosis is a rare event and stenosis effectively treated by dilation with a golf tee usually settles down as the scar totally matures. (This procedure should not be attempted without first receiving instruction and direction from the surgeon). Because the urethra goes through the urethral bulb which is erectile tissue (the tissue in a penis that swells during erection), it is not always possible to remove sufficient erectile tissue without destroying the blood supply to the urethra. Loss of blood supply to the urethra would result in the death of this tissue, therefore erectile tissue cannot be completely removed. This remaining erectile tissue can, in some instances when you are stimulated, become quite turgid and form an uncomfortable ball in the anterior vaginal wall. Secondary surgery can reduce this at a later date. The risk of this problem occurring is less than 10%. When a two stage procedure is

used, there is no urethral scar. Problems with urinary retention after surgery because of swelling and later scar contracture are vastly reduced.

## The vagina

The preferred method of lining the vagina is inverted penile skin and there is usually sufficient skin if you have not been circumcised. The vaginal introitus (entrance) has to be between the urethra and the anus and if the inverted penile skin flap cannot be repositioned sufficiently, then to avoid an introitus that is too far anterior, a small posterior mostly hair bearing flap from the front of the anus will have to be used. This will allow the vaginal introitus to be situated where it should normally be. This flap gives a rather squarish appearance to the introitus and is occasionally bulky, however at secondary surgery the flap can be debulked without risk of interfering with its blood supply. If you don't have enough penile skin to adequately line the neo vagina, then the surgeon will have to resort to either a skin graft which can be split thickness graft or a full thickness graft, or else a colovaginoplasty. With split skin grafts there are problems associated with a painful donor site on the back of the thigh which may even become hypertrophic, that is raised and red, but this is a low risk, especially if your heritage is Caucasian. Skin tissue that is grafted can never be guaranteed to always take whether it is a full thickness or a split skin graft. The complication rate for grafts used during this surgery is approximately 30%. Of this about a third require re-operation to form another vagina because of vaginal shrinking related to graft failure or the inability to dilate. For this reason, Dr. Haertsch will not perform this surgery unless it is specifically demanded by the patient. Full thickness grafts are obtained by doing an abdominoplasty at the same operation and using the skin of the lower abdomen. The removal of skin for a full thickness graft will leave an extensive permanent scar and there is a risk that it may keloid. There can sometimes be concerns as to the exact repositioning of the umbilicus or navel. Because these grafts are extremely thick and are therefore associated with poor take, Dr. Haertsch will not perform this operation unless specifically requested. A full thickness graft using scrotal skin appears to be the desired method of skin grafting the neo vagina. It can only be used if there is sufficient laxity of the scrotal skin and, quite often, because it is hairy, patients will be asked to have the area depilated by way of electrolysis or laser prior to surgery. Any remaining hair follicles may be removed at the time of surgery by diathermy, however there can be no guarantee that there will be no remaining hair follicles and therefore some hair growth. Colovaginoplasty is also available if insufficient penile skin tissue is available to create the vagina. This involves using the right side of the colon (large bowel) with an associated appendectomy if not already done. Colovaginoplasty has no problems in direct relation to the depth of the vagina, however because of the nature of the surgery and the precarious blood supply of the colon, the risk of necrosis (death of some bodily tissue) is there, albeit not high. Associated with a colovaginoplasty is the fact that you will have an abdominal scar, which will vary in its length depending on your physical condition. Any abdominal operation carries with it the risk of further problems later on, in relation to adhesions. The right side of the colon is used because there are less problems after full healing has occurred with discharge when dilating or after having intercourse, than if other parts of the bowel are used. However there may still be some problems associated with discharge and hygiene pads are recommended as the appropriate way to manage this problem should it occur. Remember whilst the aim of this surgery is to give you a functioning vagina, there can be no guarantees and at worst you could end up with a non-functioning vagina.

## Labia minora

There is never in any patient, sufficient quantities of thin skin to form the inner lips of the vagina, which are the mirror image of those of a biological female. The labia minora of a reassigned patient are always thicker and shorter. The main problem with the labia minora is healing at the attachment to the entrance to the vagina and this will leave ulceration on one or either side of the opening. This will slowly heal and the end result will not be really any better or worse than if this complication had not occurred. Scrupulous hygiene is necessary to ensure healing, should this problem occur and daily salt baths must continue. The most satisfactory and convincing labia minora can be constructed by way of a second procedure involving extra cost, separated from the first by a period of three months. You will be shown photographs which will demonstrate a range of appearances that can be achieved.

## Labia majora

These are the outer lips of the vagina and are mostly responsible for the external appearance of the genitalia. After the primary surgery most patients have external genitalia that looks for all intents and purposes female. Occasionally because of the cleft produced by pulling the inverted penile skin backwards, secondary surgery is required on the labia majora, to reduce the cleft and make it more feminine. This can simply be done under a local anaesthetic in the rooms at Epping and is by no means major surgery. Less than 5% of patients have required this revisional procedure.

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# Some Thoughts on Transition

## And the Unnecessary Gatekeeping Imposed by the Sexual Reassignment Act 1988 (S.A.)

by Leigh

Article Appeared in Polare Magazine: October 1997 Last Update: October 2013 Last Reviewed: September 2015



**A great weight was lifted from my shoulders and at the time came emotional completeness, the anger vanished ...**

**T**his is a brief account of my experiences involving the medical procedures concerning sexual reassignment and my thoughts about the *Sexual Reassignment Act 1988 (S.A.)*

***... it wasn't until I faced and accepted my gender-identity that I started to find true happiness and peace within myself.***

Having come to terms with the fact that I was a woman trapped in a male body, I approached my doctor at the beginning of 1996, with a view to begin the process of altering my body to suit the person living inside it. I knew that the treatment would consist of three main elements namely hormone therapy, counselling and finally surgery.

The surgical procedure I required was simply the removal of the testicles and excision of the scrotum. My sexual practices made the creation of a vagina

unnecessary. Why go to the expense of getting something that would never be used? The surgery I required would have three main benefits. Medical: I would not need to take large doses of hormones over a prolonged period. Psychological: I would be rid of the boy bits! Cosmetic: I would look anatomically correct when wearing jeans or tights. There would be no male bulges and this would give me a wider range of dress options.

With all these factors discussed with my doctor and wishing to make the transition in a proper manner, an appointment was made to see an endocrinologist. This occurred in March 1996 and was an absolute disaster! The endocrinologist was rude, told me he couldn't help me and if I wanted hormones, my doctor could prescribe them! I was devastated, went back to my doctor who was also shocked at my treatment, however my doctor filled out a prescription on the spot. From then on the medical treatment proceeded without any other problems. I consulted a psychiatrist in May 1996 with visits every four weeks until surgery, which took place in April 1997. The surgeon agreed to operate after I had been on hormone therapy for one year, provided that my psychiatric assessment was favourable. It was, and I am now an extremely happy woman enjoying a productive lifestyle in a way I had not thought possible. Words cannot adequately describe the improvement in my quality of life.

Now to the Sexual Reassignment Act, under this act only those medical practitioners duly authorised can carry out procedures in relation to Gender Reassignment. In my opinion this is discriminatory, since it means that a person with Gender Dysphoria is unable to choose the medical practitioner of choice. This is the only medical condition where this applies. I was forced to go outside the system because I was rebuffed by an authorised practitioner. Thanks to my medical people I was successful in getting treatment, but there are many people in a situation similar to myself who have been forced to see backyard treatment or go without. These are major health issues at stake, lives are at risk in some cases, i.e. suicide or the other side-effects of incorrect doses of medication (thrombosis). I believe that the act should be more inclusive and what constitutes reassignment procedures be clearly spelled out with people being able to have a choice of doctors etc.

### Free at Last!

At last, after fifty years of unhappiness and self-loathing, I can look into the mirror and like what I see. I am now a complete person both psychologically and physically, a very happy woman who is relishing every moment of her new life. This happiness has not come without great cost however, two marriages, two families, several jobs, low self-esteem and years of searching for answers are just part of the price I have paid.

I am Transsexual, for years I was searching for answers as to why I felt so different. When I did discover who and what I was, I became so terrified I went into denial, doing absolutely ridiculous "blokey" things in the vain hope that it would all go away. Of course it didn't, the hiding behind beards, riding motorcycles, playing with guns and all the dangerous "macho" activities made not the slightest difference.

I explored sexuality, discovered that I am bisexual, but this was not the answer, and it wasn't until I faced and accepted my gender identity that I started to find true happiness and peace within myself. A great weight was lifted from my shoulders and at the time came

emotional completeness, the anger vanished, people came to me as friends, medical practitioners were supportive and as a result surgery took place on the 7th of April 1997, just sixteen months after the first consultation with my doctor.

This brief account is written in the hope that the parents and families of transsexuals can gain some insight into the emotional turmoil we go through on the journey of self-discovery. I have been asked if it was all worth it, the fear of ridicule, of appearing in public "dressed", the expense of medical treatment, the rejection of some people and refusal of others to acknowledge my identity. The answer to these questions is YES!

Finding oneself after wandering lost in the wilderness for so long more than compensates for the trauma.

I would urge all parents and families of transsexuals to study the subject of Gender Dysphoria before passing judgement. Remember, we did not choose to be transsexual, we were born that way. I have been a woman since birth, the only problem is that I was born with a male body, therefore the only solution was to alter that body to suit the person living in it. Some people find themselves early in life and make the transition when young, others such as myself agonise for years, but regardless of age, when the process of transition is done a better person emerges. So parents and friends, if you can understand that concept, I can guarantee that the positives will far outweigh the negatives.

If this article can assist in preserving and/or improving family relationship then I will be delighted!

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# Testimonial from the Partner of an F.T.M.

## Valuable Lessons of Love and Happiness

Name Withheld

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I've learned some valuable lessons about what love is, who I am and what makes me happy.

I've been inspired by the determination of my F.T.M. partner Kas, (or Cameron when he's in trouble), to submit this piece to *Polare*. It's the story of his journey through my eyes, and I suppose it's a bit of a love story too.

*The possibility of sharing my life with a man was an unexpected turn of events, which caused me to wrestle with my own sexuality ...*

Okay, I was desperate, I placed a personals ad in a lesbian magazine. Turns out, it was the best thing I ever did. At the ripe old age of thirty, after three weeks of phone chat and with the worst case of nerves in the history of blind dates, I've met the person I've now chosen to spend the rest of my life with.

Given the circumstances, I was expecting to meet a girl. The person on my doorstep then had a girl's name, but that was where the similarity ended. What I didn't know at the time, as I took in the sparkly eyed smile and proffered bunch

of red flowers, was that this thoughtful, generous, open and friendly tomboy had already begun the transition from female-to-male through hormone treatment.

Kas was very "masculine". I hate resorting to gender stereotypes but bear with me! Kas had always (from the age of three or four) resembled a boy, physically and mentally. With heavy heart, with neither apology nor faltering resolve, Kas told me of his transgender status early on. I'm ashamed to admit (it seems outrageous now) that I had trouble contemplating a future with him. The possibility of sharing my life with a man was an unexpected turn of events, which caused me to wrestle with my own sexuality and experience a sense of loss. And I don't think I held any prejudice towards transgendered people, but to share my life with one? Visions of tabloid cover stories sprang to mind - was this the life I wanted for myself? For my children? What would my family say?

Mum guessed before we told her. Matter-of-factly she asked if Kas would prefer to be male - so the whole story poured forth. She was full of curiosity, we gave her some literature on the subject, and now she's quite the transgender spokesperson! It was Mum who christened Cameron - she phoned at some ungodly hour: "I've thought of a new name for Kassie"! It was a very exciting time for Cameron receiving a new driver's license and other identification, not to mention the first time that properly addressed mail arrived.

With much biting of nails, a letter was dispatched to my father who invited us to visit. Telstra and Australia Post have been doing very well out of us since, with another holiday planned for the end of the year. It did my heart a world of good to see Kas and my father bonding over a bottle of beer. And Kas' totally cool and groovy grandmother has spread the word around his side of the family. Nan is understanding and supportive of Kas in his transition. She often recalls how he behaved as a young child, which corresponds to his early memories of feeling trapped in the wrong body (the oh-so-true cliché).

It's now obvious to me that the most important aspects of our relationship (mutual respect and support, communication, shared goals, fun etc.) have nothing to do with gender. Since meeting Kas and getting to know him I've learned some valuable lessons about what love is, who I am and what makes me happy. I've learned that a person is more than the sum of their body parts. I've never been happier, I'm so in love, and the gender issue is no longer of any relevance.

Last Anzac Day, Kas asked if I would marry him. Apparently I took a while to answer, but I was just enjoying the moment! There's no way I could ever change my mind and not marry him - Mum lost her son, and in some way they fill a bit of that gap for each other. Kas calls her "Mum" (or gorgeous one - "G'day handsome" she replies).

Kas has transitioned at work, surprisingly with few hitches, his colleagues making an effort to get the pronouns (he, him, his) correct. He's had to replace a whole wardrobe of work clothes and is the proud owner of eight ties! It's still not safe to send him shopping on his own though, as he'd head straight for Best & Less! Men!

In retrospect a lot of things seem like a breeze, but the journey has been very, very daunting at times. For me the hardest times have been knowing the pain and frustration of my partner and seeing the hurt in his eyes at times when rejected. The worst trepidation I felt was the morning Kas left for work to face his planned "coming-out" day - but within hours (after the deed was done) my pride in him was exhilarating. I would attribute our transition "success story" to these factors:

- » Our fabulous family and friends, and some key individuals at Kas' workplace.
  - » Anti-discrimination legislation (and those who have worked towards it).
  - » The support of the Gender Centre, particularly Elizabeth and Sean and other transgendered people who have bravely paved the way.
  - » Communication and honesty always, with each other and those around us; and
  - » Kas' unwavering vision and positive mental attitude.
- 

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## Physical Sex

As startling as the physical differences may be, the similarities may be very surprising

norrie mAy-welby

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The sex organs are undifferentiated for a time in the human embryo.

**H**umans - All the same with slight variations! Many people assume that the sexes are very obviously physically different. Yet so many people go to so much effort to manufacture physical gender differences. Many men and women adopt hairstyles and clothes designed to differentiate their gender. There are gender codes dictating the wearing of make-up and perfume/aftershave. There are gender codes dictating body language, movement, posture and "appropriate" behaviour. Many women remove underarm, leg and body hair so as to appear "female". If the sexes are as naturally different as some would have us believe, why would we have to go to so much effort to manufacture those differences?

*The sex gonads are equally proto-ovaries or proto-testes, and the phallic organ is equally a proto-clitoris or a proto-penis.*

Lets leave aside for the moment intersexed humans and others born with other than the two standard sex chromosome combinations. Lets look just at the humans who are born with XY chromosomes and with what at puberty will be fertile male (sperm producing) genitalia, and the humans born with XX chromosomes with what at puberty will be fertile female (ova producing) genitals.

As startling as the physical differences may be, the similarities may be very surprising. Not

so surprising, perhaps, if we remember that male and female humans are not different species, but members of the same species with slight variations.

### In the beginning ...

Those variations do not become at all obvious until the human embryo has been growing for five months. The sex organs are undifferentiated for a time in the human embryo. That is, The sex gonads are equally proto-ovaries or proto-testes, and the phallic organ is equally a proto-clitoris or a proto-penis.

Then a reaction from the Y chromosomes in what will be male children causes those parts to develop differently. Until then, the foetal shape is basically female, complete with vaginal opening and labia.

If the reaction follows from the presence of Y chromosomes, the proto-ovaries/testes become testes and drop into the proto-vaginal lips which have sealed and become the scrotum. The seam where the proto-vaginal lips fused together can still be seen on the male human perineum and scrotum.

A female-to-male tranny who takes male hormones finds that their clitoris not only enlarges but develops in shape to become a perfect miniature penis. The small proto-penis possess all the nerve endings and pleasurable sensations that an adult male penis possess.

There are several other corresponding organs that may at first appear dissimilar between the sexes. Nipples are perhaps the most obvious example. Male to female trannys who take female hormones will have breast development much like any other female. Even without hormone therapy, many men find that their nipples are as capable of erotic pleasure as women's nipples are.

There's also the G spot, which you may be surprised to learn is common to both sexes. The glands that develop in biological females behind the clitoris into the Cowper's glands, producing lubricating fluid, are the same glands that develop in biological males into the prostate gland, producing the fluid of semen. Just as the origin and fluids produced by the glands are similar, so are the orgasmic sensations they produce when stimulated.

In short, both men and women have two sets of very orgasmic organs: the penis/clitoris, and the prostate/G-spot.

In my opinion, making love to a man without touching his prostate is as rude as making love to a woman without touching her clitoris.

The female G-spot may be found by inserting a finger in the vagina and pressing the underside of the clitoris. The skin texture will feel different, like the inside of the facial cheeks, and is about the circumference of a five cent piece unaroused and a 20 cent piece when




aroused.

Many men discover their prostate glands through being anally entered, but the male "G-spot" can be accessed without this entry. Follow the erectile tissues from the penis down past the scrotum, where they curve back into the body. Press in here, on the perineum, just before the anus. This is where the prostate can be pleasurably stimulated.

Of course, human erotic responses vary enormously between individuals, and even in the same individual in different circumstances.

My point is that our physical, structural and erotic similarities are more important than our superficial differences.


## **norrie mAy-welby**

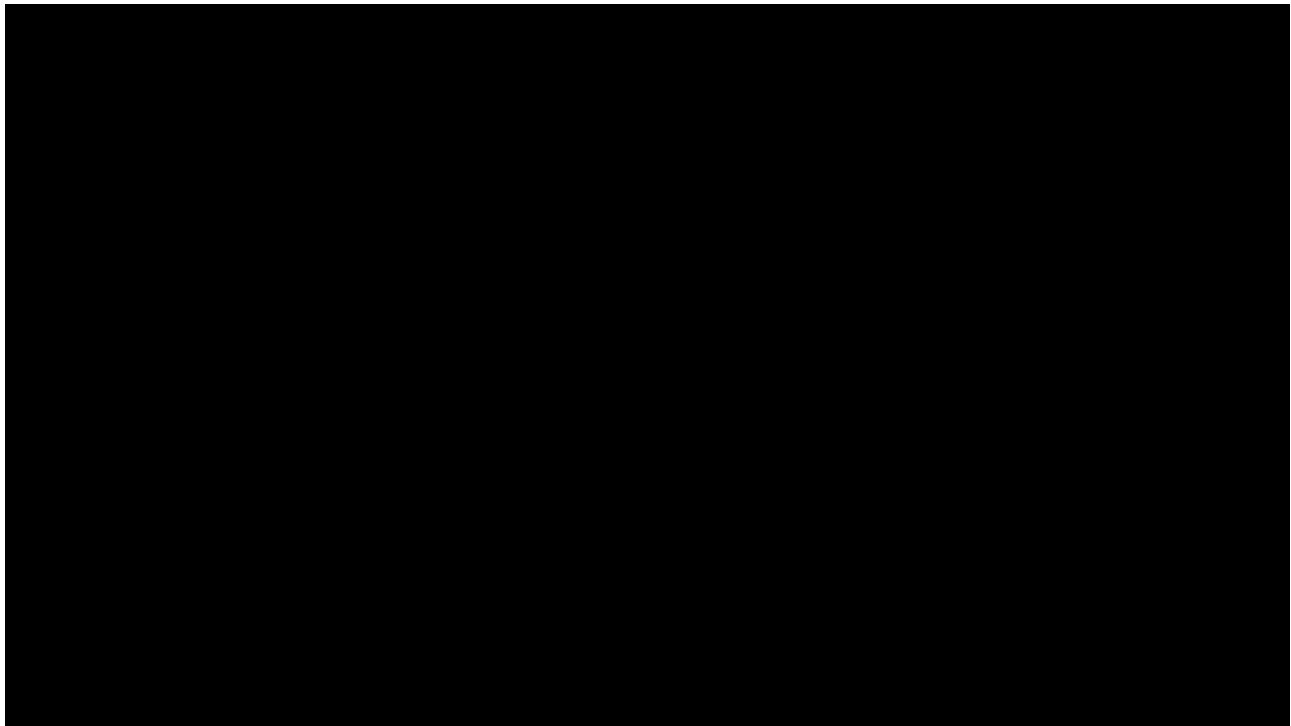
From [Wikipedia](#)  **norrie mAy-welby became the first person in the world to be officially declared to be neither a man nor a woman, making Australia the first country in the world to recognise a "non-specified" gender.**



**Born in Paisley, Renfrewshire, Scotland, as a male and moving to Perth, Western Australia at the age of seven, norrie underwent male-to-female reassignment surgery in 1989, but later found that being a woman was not what zie felt like either. Zie moved to Sydney in the early 1990s. Doctors stated, in January 2010, that norrie was a neuter, neither male nor female, as hir psychological self-image was as a neuter, hir hormones were not the same as a male's or female's, and zie had no sex organs.**

**One of hir worries about being labelled male or female is that zie now looks like neither and is physically neither as well. Because of this, if hir passport states gender as being one or the other, it is possible that zie might be detained for not fitting what the gender field says zie should look like. This was one of norrie's reasons for seeking recognition as gender neutral. Of hir own sexuality, norrie has stated: "I'd be the perfect androgyne if I was completely omnisexual, but I'm only monosexual. Just think of me as a big queen girl."**

**norrie has been an integral part of the Gender Centre in many ways since moving from Western Australia many years ago. [Visit hir website for more about norrie](#)  Meanwhile, this excellent video has appeared on You Tube, an interview with norrie in which zie explains her views on many topics**



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