# **Polare Edition 24**

Published: July 1998 Last Update: June 2013 Last Reviewed: September 2015

# **Editorial**

### by Craig Andrews the Polare Editor

irst of all, an upgrade with paper stock and (hopefully) an upgrade in presentation to you. Polare is now prepared on a seventeen inch monitor and a far more powerful computer. In the change over (from my skateboard to this Boeing 747) much of the graphics (pictures) are still being translated. This issue, as you can see, is fairly image-limited and text-rich. We intend to have access to the scanner and other graphics with the next issue.

Perspectives from two different parents I give insight and advice for other parents. "Love Agenda", this time 'round, features a beautiful and sensitively written essay by the daughter of one of our community members.

The client/other services feedback surveys are in, and I have briefly compiled a report on each for you to read. norrie mAy-welby invites your comments in her article "A Quality of Life Issue" while Kelby has some interesting comments to make also.

Elizabeth gives a succinct yet informative report on her efforts on the behalf of the transgender community in a number of different places. Jodie, who found employment with a transgender-friendly employee reports on how things have changed for her.

Finally, for the blokes out there, "Transmen" features a writeup from Nancy Nangeroni on the book *Body Alchemy*.

# **Manager's Report**

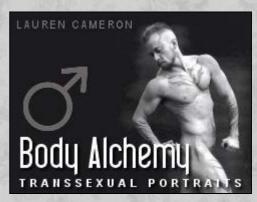
#### by Elizabeth Riley, Gender Centre Manager

n 23rd July, we are running our third and final general meeting for this year prior to the annual general meeting in September. The management committee and staff of the Gender Centre would encourage as many members as possible to attend and provide input on the services we are able to provide to you. This is a good opportunity to come along and have your say and keep abreast of the events that are occurring at the Centre.

Corrective Services: I have been invited to sit on a sub-committee formed to ensure the effective implementation of the Transgender Prisons Policy. Col Eglington is also to be invited and the rest of the committee is made up of representatives from Corrective Services, Corrections Health Service and the Anti-Discrimination Board. We have held two meetings so far and I am impressed with the commitment shown by all committee members. I will provide a more detailed report on this as we progress.

**Department for Women:** Following a several month period of discussion and letter writing to a number of government departments, I recently attended a special meeting with

# **Feature Articles**



On the cover, he is posed in what I took at first to be a "muscle man" pose, but which, on closer inspection, turned out to be a shot of him injecting himself with a syringe in the upper buttock.

### **Body Alchemy**

Just as bodybuilders sculpt their bodies, so too do transsexuals mould their bodies around an ideal. From its striking cover, *Body Alchemy* grabs you and won't let go until you've delved into the mysteries revealed by the beautiful photographs and succinct.

### A Father Writes, A Mother Writes

Pat is the father of a female-to-male adult child, and Lisa is the male-to-female transsexual parent of two young boys. Both have had to deal with challenging issues in their lives and both express a rewarding experience as they deal with their loved ones.

# A Quality of Life Issue

As a community, we have become more empowered and less comfortable with the idea that we are the ones with gender issues. Indeed, many of us are comfortable with our identity and note that any troubles that others have with our identity is a result of their gender issues.

### Rich Man, Poor Man, Transsexual Woman

Christine's parents have registered and christened her as a boy, how are they to know any different? But within three years "he" will know otherwise, and the little girl inside will have learned enough about life to not mention her profound self-knowledge to anyone.

### **How Things Change**

Jodie writes of the concerns of redundancies at her workplace, What was she to do? Her thoughts were all doom and gloom. Let's face it she thought, age was against her, so was having no great education, few qualifications and restricted skills, hell, who employs tranys?

# **Gender Identity Disorder: What to do?**

Nancy Nangeroni investigates the debate in the transgender community over whether Gender Identity Disorder should be de-

representatives from the Department for Women. The aim of the meeting was to set in motion the establishment of a working party to look at the wide range of issues confronting the transgender community. We would hope to set in place strategies to combat the difficulties that face the transgender population at all levels of their daily lives. I will inform you further on this as the momentum gathers but I am optimistic that we will see significant change in wider community attitudes.

Employment Updates: Not a lot to report in the employment field this time around. We are still waiting to hear from the Body Shop and other projects listed above have lessened the time available to continue the pursuit of new employer groups. I would nonetheless remind people that Westpac and Manpower offer ongoing opportunities for those who are interested in applying for work. Staggered mail outs are in progress to a number of major organisations in N.S.W. promoting opportunities for the transgender community.

**Department of School Education:** Exciting developments are taking place with the N.S.W. Department of School Education. I have conducted some training sessions with representatives of the student welfare branches of the department and have been invited to also conduct three separate training sessions with members of the Student Representative Council (S.R.C.). One brief session with student representatives from across N.S.W. produced some of the most meaningful and sensitive questions imaginable from this group of young people. I look forward to further training with great anticipation for future improved awareness and attitudes towards transgenders. We are also looking at the possibility of training at the broader level of gender issues that confront all people. This could be truly groundbreaking and I will again report further as this work takes shape.

pathologised and suggests that the elimination of G.I.D. as a mental illness, would help to further reduce the stigmatization of transgender folk.

### **The Transgender Spectrum**

Why do people want to know whether to give a baby a pink or a blue blanket? Whether to call it pretty or handsome? Whether it will grow up to play with dolls or trucks, be a cheerleader or a football star. Why don't they ask if it has a vagina or a penis?

Why? Why not?

### **Spiritual Trans-Gendering**

Some believe that to change gender, one should be disciplined and think the thoughts appropriate to the opposite sex, meditation helps here. Herbs are also believed by some to assist with gender-crossing, used in tea or food, worn or carried, stones and shells as well.

# **What Being Female Means**

Caitlin has been trying to work out what it is to be male. She has been trying to clarify in her mind which behavioural elements are learnt and which are not. But what is it to be female? She doesn't feel knowledgeable enough to speculate from the female perspective.

## The Biggest Breakthrough of All

Dallas Denny believes that the biggest breakthrough in the field of gender is the unique combination of social, psychological and medical factors that have made it possible for genetic males to live their lives as women, and for genetic females to live their lives as men.

**Goals Group:** We advertised in the last issue of *Polare* inviting interested people to participate in a workshop to set up goals groups for members of the transgender community. Unfortunately response was minimal and we are forced to cancel this particular workshop.

**Workplace Transition:** We have seen a number of successful cases of workplace transition since legislation came into place in 1996. Unfortunately, there has been a recent case that has not proved successful. Ironically, the organisation's management was very keen to assist the individual through their process but their attempts met with some resistance and the individual chose to resign. In this case this is a sad outcome and I am including here a copy of our model policy designed to assist both the transgender individual and the organisation with some sound advice on how to successfully negotiate the process of transition. Anyone anticipating transitioning in the workplace should read the following policy and when the time comes contact the Gender Centre for advice.

# **Survey Results**

### Reported by the Polare Editor

### Finding out about the Gender Centre

You said you found out about the Centre by ... Most people (70%) thought it was difficult to find out if the Service existed. Only 30% of respondents agreed that finding out if this Service existed was easy. One person said they "didn't care" if it existed or not. Most people found out about the Centre through their friends or other people they know. 30% of respondents found out about the Centre through another service or through the media.

#### Knowing what the Centre does for you

Most people were not aware that the Centre is able to provide information and support, by request to their homes, at jails, in neighbourhood centres, in hospital, at their workplace, and at schools. One admirable suggestion we received through this section was "It would greatly help people with gender issues if your excellent pamphlets and *Polare* and the list of literature, could be found on an open shelf in each and every sexual clinic and gender centre all over the world - and in all the major libraries."

### **Using the Gender Centre**

81% of respondents had used the services of the Centre at some point. They all said that staff at the Centre had informed them about the self-help or support groups or drop-in groups at the Centre and also, all had been given leaflets, pamphlets or videos from the Gender Centre. They all said that the staff here at the Centre had offered follow-up treatment/counselling or referred them somewhere else to get help for their questions. Lastly, they all said the staff had informed them about group activities or talks here at the Centre. Of these respondents all agreed that the staff listened to what they had to say, treated their disclosures with confidentiality, treated them with respect and courtesy and tried to make them feel comfortable.

Some of the comments regarding staff assistance from the Centre were - "Helped me and visited me countless times in gaol.", "Remembered who I am, offered counselling for or with my partner.", "Supplied safe sex equipment (very important)".

### Rights as clients of the Gender Centre.

88% of respondents were not aware of their rights as clients of the Gender Centre. While only 12% of the respondents said they'd been informed of their rights as clients of the Gender Centre.

#### **Complaints**

Only seven of the 26 respondents said they knew how to make a complaint if they were not happy with something at the Centre. The remaining questionnaires indicated that most people did not know of the complaints procedures that are in place at the Gender Centre. Again, most respondents said they did not know they could ask to see their files at the Gender Centre.

### Participation in the Gender Centre.

Most of the respondents said they had not been asked their opinion about the Gender Centre at any time. However a comment from this section that stated "but I feel like I could offer my opinion whenever I wanted" highlights the receptiveness of staff to suggestions or new ideas.

### What you liked most about the Gender Centre.

Most respondents chose "Free", "Staff are friendly" and "I can ask questions here". "Staff explain things" and "Staff listen to me here" were the next most popular.

### Finding out about the Gender Centre.

About half of the respondents from other services had heard about the Gender Centre through friends, word of mouth or work colleagues. The other half had become aware of the Centre through the media, magazines or pamphlets. Of all respondents, only half were aware of the range of places for which the Centre is able to provide information, referrals and support to their clients. The remaining respondents indicated awareness of one or two of the following locations where the Centre may assist their clients - in gaol, hospital, home, in the workplace, at schools or in training, or at neighbourhood centres. Overall, most Services reported that finding out the Centre existed was not an easy task. One comment was that it was easy to find, but only" if they are in the refuge/welfare system."

### Liaison with the Gender Centre.

74% of the services in the questionnaires were aware that their service had liaised with the Gender Centre at some point in the past. 61% of the workers filling out the questionnaire had requested assistance of some form from the Centre. The remaining 39% of the workers responding had not personally accessed the assistance of the Centre at all.

#### Information dissemination

Information about gender issues had been given to services mainly verbally by Gender Centre staff or through pamphlets/brochures from the Centre. Training emerged as a notable manner of information dissemination, with one pleased service-provider commenting that information had been given during a "staff training session given by Elizabeth. She was wonderful." Another notable method was through *Polare*.

Most respondents had received a significant level of information from the Gender Centre. This included receiving leaflets, pamphlets or videos, information about the self-help groups, support or drop-in groups, and information talks at the Centre. Sixteen of the 23 service respondents had either had clients referred to them from the Centre or been assisted with information or extra referrals for their transgender clients.

Two additional comments included "Visited my client in custody" and assisted in research/evaluation work" as action taken by the Centre

#### Staff

All respondents who had interacted with staff agreed that staff were approachable, respectful, courteous and responded with appropriate information within a comfortable and confidential environment.

#### Resources

78% of the respondents agreed that the Centre's resources provided the information they needed to know. Not one of the services felt that the resources were inappropriate. One respondent stated that "*Polare* can possibly go into more detailed accounts."

### **Using the Centre**

Items of most use to other services were the resources (books, magazines and pamphlets) and the fact that their service could liaise with the Gender Centre. Of next most importance were that the staff at the Centre were approachable and that the service was free.

The Outreach service to jails and hospitals was rated highly as was the friendliness of the staff and their readiness to answer questions.

The Gender Centre advise that this edition of Polare is not current and as such certain content, including but not limited to persons, contact details and dates may not apply. Where legal authority or medical related matters are cited, responsibility lies with the reader to obtain the most current relevant legal authority and/or medical publication.

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# **Book Review: Body Alchemy**

#### **Transsexual Portraits**

Reviewed by Nancy Nangeroni

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015



Body Alchemy: Transsexual Portraits (1996) Author: Loren Cameron.

# **Body Alchemy:** Transsexual Portraits

by Loren Cameron Published by Cleis Press (1996) I.S.B.N.-13 978 1573440620 It simply presents for your exploration, another world, one of diversity and love, respect for self and others.

rom it's striking cover, *Body Alchemy* grabs you and won't let go until you've delved into the mysteries revealed by beautiful photographs and succinct text presented in a tastefully artful setting. This is, quite simply, a gorgeous book, on a subject so unconventional it boggles the mind. Caught within its pages, held lovingly and presented honestly, without undue trappings, are the boldest of a new generation of transsexual men. These are people born into 'female' bodies, who are living as men at least some of the time, and changing their bodies to suit their desires. Just as bodybuilders sculpt their bodies to fit their personal aesthetic, so too do transsexuals mould their bodies around an ideal, though for these folks the ideal is not about muscle or fitness, but rather gender.

Photographer Loren Cameron also serves as a subject for about one third of the book. He is obviously a man who works out, and his body as photographed is about as pleasing as I can imagine for that of a man. His animal-like tattoos create an effect like that of a caged beast, virile and potent. On the cover, he is posed in what I took at first to be a 'muscle man'

pose, but which, on closer inspection, turned out to be a shot of him injecting himself with a syringe in the upper buttock. What at first appeared a pose, becomes instead a riveting testimony to both suffering and strength. It also establishes a level of tension that heightens the subject matter.

Loren makes a fascinating subject. In some of the shots he seems fierce, projecting determination and anger. He admits to the anger that rises so easily as a result of the testosterone injections, of more frequent fights, of the struggle to contain the beast within. He writes engagingly of his relationships and feelings, and left me wanting more. He avoids self-indulgence, instead showing the many faces of a whole, healthy person.

A short section in the middle of the books shows transsexual male genitals and chests. The images are frank and informative. If you've ever wondered what the genitals of a transsexual man might look like, there's no better source.

The remainder of the book presents portraits of other transsexual men in their native environment, whether that's the gym or a police cruiser or construction site. Depicted is a diverse cross-section of the men's community, with text that varies from snippet to short essay. If there were any preconceptions or presumptions about what transsexual men must be like, this book should dispel most of those. These men come from all walks of life and inhabit all sizes and shapes, from svelte surfer boy to mountain of muscle body builder, Anglo and Latino and Afro and Asian.

A section of the book is devoted to Loren and his partner Kayt. She writes of also being F.T.M. identified, of a relationship of two likes. We see the two of them, first gentle and loving, then fiercely competitive, then again loving, this time intimately. Finally, the book concludes with an amusing view of the two of them in bed, watching television, underscoring our common humanity.

What I liked best about this book, aside from Loren's engaging narratives, is it's purity of spirit. It makes no statement of needs and demands no action of the reader. It simply presents for your exploration another world, one of diversity and love, respect for self and others. It's message of understanding and compassion is delivered innocuously, inoffensively, shunning entreaty for respect for the reader and their ability to see what is plainly visible.

This is probably the most important book on female-to-maleness since *Stone Butch Blues*. In some ways, it parallels Mariette Pathy Allen's *Transformations* of 1990, whose intimate photographs of cross-dressing men and male-to-female transsexuals - unprecedented in honesty and comprehensiveness - helped liberate a community. *Body Alchemy* is of the same mettle, but comes at a time when transgenderism is out of the closet and growing in popularity. It is daring and beautifully presented, and seems destined to capture transgender hearts everywhere.

#### **Loren Cameron**

From Wikipedia: Loren Cameron was born in Pasadena, California U.S.A. in 1959. He moved to rural Arkansas in 1969 after his mother's death, where he lived as a self-described tomboy on his father's farm. By the age of 16, Cameron identified both sexually and socially as a lesbian and encountered homophobic hostility in the small town where he lived. At this time, Cameron quit school and left his home to travel the country seeking work as a construction labourer and other blue collar employment. In 1979, he moved to the San Francisco Bay Area where he identified socially with the lesbian community until he confronted his dissatisfaction with the female body with which he was born.



Cameron's interest in photography coincided with the beginning of his physical changes as he documented his own physiological transition from female to male at this time. Despite his lack of formal training, beginning in 1993 Cameron studied the rudiments of photography and began to compassionately photograph the transsexual community. Since 1994, he has given lectures on his work at universities, educational conferences and art institutes. By 1995, Cameron's photographs had been shown in solo exhibitions in San Francisco, Minneapolis, and Los Angeles.

Loren's photography and writing was first published by Cleis Press in 1996. *Body Alchemy: Transsexual Portraits*, documented his personal experience of transition from female to male, his life as a man, and the everyday lives of transmen he knew. *Body Alchemy* was received with much positive acclaim and became a double 1996 Lambda Literary Award winner. It remains his most well-known work to date, though he has since published other photographic works.



**Body Alchemy: Transsexual Portraits** 

Author: Loren Cameron Publisher: Cleis Press, (1996) I.S.B.N.-13 978 1573440622

From Amazon Books: Body Alchemy: Transsexual Portraits is a unique and extraordinary photographic collection by artist Loren Cameron. Body Alchemy is Loren Cameron's intensely personal photo documentary of female-to-male transsexuals. A transsexual himself, Cameron brings a sensitive, sophisticated insider's eye to his subject matter. Using documentary style, a series of before-and-after photographs documenting the transformation of a number of F.T.M.s in

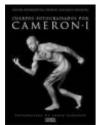
Cameron's transsexual community, his own striking self-portraits, and intimate autobiographical text, Loren invites the viewer to experience this transformational rite of passage. Loren Cameron's work strikes a warm, familiar tone that invites the viewer's participation - even when the subject matter is quite startling.



Man Tool: The Nuts and Bolts of Female-to-Male Surgery

Author: Loren Cameron Publisher: Zero eBooks, (2001)

From Loren's [now obsolete] website: Photographer Loren Cameron's second book — available only on the World Wide Web — addresses urgent and intimate questions about plastic surgery options for the female-to-male transsexual. Over forty photographs of surgical body modifications for the F.T.M. transgender. Phalloplasties, metoidioplasties, chest reconstruction. Now, in an unprecedented eBook you can gain access to the photos, along with first-person stories about the subject's experiences, surgery, and sexual sensation.

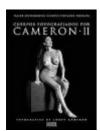


Photographs by Loren Cameron Volume 1

**Author: Loren Cameron** 

Publisher: Taller Experimental Cuerpos Pintados (2003)

From Loren's [now obsolete] website: The photographs that Loren Cameron did for *Cuerpos Pintados* have been published in two complimentary volumes: Cameron 1 and Cameron 2. In the first, we see portraits of transgender people that were born female and became male.



Photographs by Loren Cameron Volume 2

**Author: Loren Cameron** 

Publisher: Taller Experimental Cuerpos Pintados (2003)

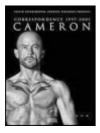
From Loren's [now obsolete] website: The photographs that Loren Cameron did for *Cuerpos Pintados* have been published in two complimentary volumes: Cameron 1 and Cameron 2. In the second, we see portraits of transgender people that were born males that transformed themselves into females.

Cameron Correspondence 1997-2001 Volume 3

**Author: Loren Cameron** 

Publisher: Taller Experimental Cuerpos Pintados (2003)

From Loren's [now obsolete] website: In order to have a better understanding of the process of this metamorphosis of gender, *Cuerpos Pintados* published *Cameron: Correspondence 1997/2001*, a book that contains a striking written chronicle in which Cameron tells a series of stories filled with



emotion and humour, based on experiences with his models. Each of them subtly expresses what it means to be a transgender and reveals the deep humanity found in each of the individuals photographed in the books.

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# A Father Writes, a Mother Writes

### **Two Different Experiences**

by Pat & Lisa Blackwood

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015



Then one day, ten years ago, this beloved child called to tell us (her Mom and I) that she was going to become a man.

### **A Father Writes**

y son transitioned about ten years ago. My older daughter was closer to My son had all of my daughter's best qualities, but none of the old unhappiness. My son was a delightful young man.

me than the younger daughter was. That's because she liked to do many of the things I liked to do. We worked shoulder to shoulder in my workshop. She was an equally skilled opponent for backgammon. We enjoyed intellectual debates. She was, however, a most unhappy child. We didn't know why, nor did she, nor did mental health people we consulted with. She wondered if maybe she was gay, but she didn't feel gay. None of us knew zip about trans-anything. Then my beloved daughter went off to college, got married, got divorced, was still unhappy, but okay. She enjoyed the company of gay people; was comfortable with them, but didn't want to be gay.

Then one day, ten years ago, this beloved child called to tell us (her Mom and I) that she was going to become a man. That made no sense at all. Maybe she was just gay. Surely this would pass and we could all move on as before. Our kid had learned about transeverything, but we had not, yet. Still we loved this child and told her (yeah, the pronouns) that we would always love her, but that it would take some time for us to adjust to whatever the hell was going on. That simple phrase set off a tirade in our child, who equated a lack of instant acceptance with complete rejection. We think, to this day, that massive doses of testosterone were a factor there.

During the next year or so, we could never chat for long without breaking down in tirades, but we never closed the door on our child and he never closed the door on us. For my part, I felt this horrible new son being forced on me was killing or had killed my beloved daughter, who I knew I would never see again.

We did maintain tenuous contact with my 'evil' son and I finally got to know him enough to realise that my beloved daughter had not gone away. My son had all of my daughter's best qualities, but none of the old unhappiness. My son was a delightful young man.

My son is indeed in a gay relationship. His life partner is another F.T.M. They are a delightful couple.

That gets us through the first two years of transition. The next eight have been just kind of normal. I have two wonderful kids again. My son still enjoys doing guy stuff. That works pretty well.

My wife and I benefited from my younger daughter's drug addiction. We were in a couple of support programs for parents of addicts when my son dropped his bomb on us. We had a few good tools for coping. Still, it took a couple of years to get through the bad times. I had to let my son go before we could rebuild a relationship. We did. It's great.

Take care and be well, Pat.

The following is an article submitted by Lisa Blackwood and describes the relationship between a male-to-female pre-op transsexual and her children. An effort has been made through this article to help others understand the issues a transsexual parent sometimes goes through.

#### **A Mother Writes**

H

oney, You've got to tell the kids.

Frequently, I'm asked the question, "how have your children adjusted to your transsexuality?" Or, "I don't know how to tell my children."

Along with a conversation verbatim between myself and my eight-year-old son Tom, I have a few suggestions that may be useful to transsexual parents when faced with integrating their family into their new lives.

Principally, don't leave telling your children until another day. You may fear the worst but that isn't necessarily the case.

I hope the following conversation with Tom might help you open up to your children.

Conversation between Lisa (forty-one-year-old M.T.F. transsexual, Tom (eight-year-old son), and Elliott (six-year-old son)

Lisa: What age were you when I told you I wanted to be a woman?

Tom: When I was six and Elliott was four.

Lisa: How did I tell you?

Tom: You said, "I like to dress as a woman and if I live the rest of my life like that, is that okay with you?"

Lisa: What did you say?

**Tom:** I was a bit shocked, but not worried.

Lisa: What's the best way a parent should tell their kids?

**Tom:** Say, "I'd like to live the rest of my life as a woman, and would that be okay?"

Lisa: What is the best age to tell your kids? Younger or older?

**Tom:** Around four to six, I would feel cheated if I was told when I was older.

Lisa: Do you think parents should keep it a secret, or tell their kids as soon as possible?

Tom: Tell as soon as possible.

Lisa: Are you afraid your friends will find out?

Tom: No.

Lisa: How have you adjusted to my new name, as Lisa?

Tom: Good. Well, I'll get used to it.

Lisa: Do I treat you the same now I live as a woman as I did before?

Tom: The same.

Tom states the obvious.

Tell the kids, and tell them young.

They will benefit and so will you. Your life will go through tremendous mental and physical changes. The last thing you need is to lose your offspring.

The general public don't seem to realise that for a M.T.F. transsexual, to lose her children in a marriage separation or any other circumstances is devastating. A true transsexual has all the natural bonding and emotional feelings as does a natural female mother. Your children are your most precious possessions, and should only be let go if every attempt has been made to secure them.

Tell your children young, before society has stamped a cultural imprint in their minds about the norms and values of society.

Your children trust you more than anyone else in the whole world. They love you and you love them. A simple change of gender won't impede on that bond. Like everyone, the children will adjust to their environment, and their dad becoming their mom won't seem out of place to them, as it might for others.

As you adapt to your change and the 'big day' of when you tell them, introduce little talks or discussions, like "I can't believe how cheap women's clothes are on that ad". Or, "gosh, if I wore women's clothes, we would have more money to buy toys". And "who says women are allowed to wear jeans? They're boy's clothes, aren't they?" "How come some women drive trucks and some men stay home and look after the children?"

Gender blending is a good way to introduce the subject.

Tell them you've always wanted to be a girl, and so have lots of others you have talked to. Tell them how much this means to you. Strike a deal with your kids. Say, "if I live as a woman, I'll just look different, that's all".

The things kids fear the most, is the loss of their parent.

Their consistency, support and love is paramount. If you change into someone they can't identify with then you're going to have trouble.

But looking different these days is nothing new to a kid. Finally, all this takes time and understanding. Be prepared when the kids call you 'Dad' in the video shop or the supermarket queue.

They will still want you to kick the footy with them - they are boys. All these tasks are still necessary when you get that big cuddle at the end of the day.

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# A Quality of Life Issue

### We Are Not the Ones with Gender Issues!

by norrie mAy-welby

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015

few years ago, a few social workers declared the Gender Centre's target population to be 'people with gender issues'. This was done without consultation with the transgender community, as many things were in those days. But it was thought necessary because the Centre's services were for a broader group than just 'transsexuals' and the term 'transgender' was not commonly understood or legally defined.

Times change however, and 'transgender' is now a legally defined term and in popular use around the world as a term descriptive of the broad trans community that includes transsexual (pre-operative, post-operative or non-operative), intersexual, intergender, transvestite and other transfolk.

Indeed, many of us see ourselves as quite comfortable with our identity and note that any 'troubles' others have with our identity are a result of their 'gender issues'.

As a community, we have also become much more empowered and less comfortable with the idea that as transfolk, we are the ones with gender problem's or 'gender issues'. Indeed, many of us see ourselves as quite comfortable with our identity and note that any 'troubles' others have with our identity are a result of *their* 'gender issues'.

It should also be noted that to those outside the transgender community 'gender issues' is a term that refers to such things as equal pay and sexual harassment.

How then, should we address our 'target population'? 'Transgender' has been legally defined, yes, but that fact alone limits its application.

A transgender person in N.S.W. law only applies to someone who lives as a member of one sex or the other, and thus excludes people who identify in intergender ways. It also excludes people who may just be thinking of changing their gender, a group as needing of the Gender Centre's resources as any. Perhaps a term that includes 'transgender', but is obviously broader than the legal concept, and a term that does not see us as being always the ones with 'problems' or 'issues'.

### People with transgender qualities.

'Transgender' is the adjective, a descriptive rather than a defining (limiting) term.

'Transgender qualities' is interpreted liberally to include all those things we once meant by 'gender issues'. For example, it is a transgender quality to be questioning your gender identity, or have a partner or family member who is transgender, or to have changed your anatomical sexual topography.

A 'quality' can of course be positive or negative or neutral. (For example, freezing is a quality of water.) And indeed, some people, particularly when they first approach the Gender Centre, may see their transgender quality (for example, uncertainty of gender) as a negative thing. Using the term 'quality' does not negate their experience, but does (thanks to our positive cultural associations) suggest the possibility of transgender qualities being a good thing. 'Qualities' invite more positive outcomes than the pathological diagnoses of 'issues', which seem to invite a lot of wallowing and not a lot of movement.

Because I was sick of being told that as a transgender person I had 'gender issues', I proposed the term 'people with transgender qualities' to this year's Health in Difference conference, which had a high proportion of transgender people from all over Australia actively concerned about our community's health, welfare and wellbeing.

This conference overwhelmingly voted to adopt the new community-coined term in favour of the old social worker coined phrase.

We also discussed this issue at the Gender Centre's general meeting in April. The Gender Centre Coordinator suggested that if we adopt the new term, it would be useful to put ' with gender issues' in parentheses, in case other social workers are using the old terminology. I think this is a good idea, for it is useful for our community to use terms social workers understand.

However, I think the time has come for us to use for ourselves, as a term that describes ourselves, a term that considers that our 'transgendered-ness' may be an asset, or at best, not necessarily an 'issue' that we poor things need help with.

As I said, 'people with gender issues' was foisted on us without any broad community consultation. I'd like to see us as a community consider the terms we want to be used to describe us. I am obviously in favour of 'people with transgender qualities', for the reasons outlined above, but more importantly, I'd like us as a community to think about this and reach a decision.

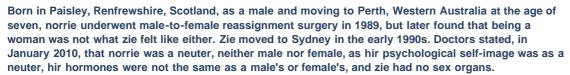
That's why I raised the issue at the Health In Difference conference, and at the general meeting, and in this article, and why I'll be formally proposing an adoption of the term at the Annual General Meeting in September.

And while I'm at it, how about renaming the Gender Centre, the 'Transgender Community Resources'?

This makes it clear that the Gender Centre is not the centre of authority in our community, but a set of resources for us as a community to make use of as best we collectively and individual decide to.

### norrie mAy-welby

From Wikipedia Morrie 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.





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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# Rich Man, Poor Man, Transsexual Woman

## Seeking to Bury Her Terrifying Self-Knowledge Deep Within Herself

by Christine Burns, Press For Change, U.K.

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015



**Christine Burns** 

child giggles whilst drinking the bath water from an egg cup. It is 1955 and not long since the national press have reported the story of a Spitfire pilot and racing driver who has "become" a woman through what we now call Gender Reassignment Treatment.

In years to come she will learn that people who seek the treatment to release them from this silent hell are labelled freaks.

The child's parents have registered and christened her as a boy. How is anyone to know any different? Within three years "he" will know otherwise though, and the little girl inside will have learned enough about life already not to mention her profound self-knowledge to anyone.

In years to come she will learn that people who seek the treatment to release them from this silent hell are labelled freaks and get hounded by the press. They are shunned by their families and friends. They are treated with less respect than murderers and rapists. Anything they receive from medical specialists or authority is to be regarded as a grudging and contemptuous concession which they don't really deserve. Not surprisingly, she will seek to bury her terrifying self-knowledge deep within herself.

As enlightenment gradually dawns on society, sometime in her thirties, she will wince when she sees women like her described as having been "born a man".

A man? Look again at the photograph. You could no more call the child "a man", than you could label them a "Computer Consultant", "Conservative" or "Rights Campaigner". Yet all of these labels are a part of her development potential, just as her innate femininity means she will not rest until she finds her true self-expression within society.

So, eventually, she will come to the agonising choice which confronts all transsexual people in the end ... made worse for having deferred it until mid life. She will have to decide how to deal with the partner and family she acquired whilst trying to be what everyone expected of her. She will have to put her career on the line. She will lose her home and tens of thousands of pounds through divorce. She will lose some of her friends. For a while she will wonder if she deserves to keep her self-respect. Yet the choice is between that and suicide. For a life which is a perpetual lie ... a life which gets more painful with every passing day of the soul's denial ... is no life at all.

Make believe? No.

Increasing evidence indicates that everything which transsexual people have ever reported about their mysterious juxtaposition of psychological gender and physical sex is true. The more science is inclined to look, the more it finds to substantiate the discovery that some children really do have the brain of the opposite sex.

Nobody can be blamed for assuming that a little girl was a boy. If we have to have a basis for distinguishing how we're going to differentiate the type of upbringing we're to give our children then the appearance of their genitals is no more and no less arbitrary then the colour of their skin or the country they were born in. What matters, however, is how we respond when the child is old enough to turn round and say that we got it wrong in their case.

It helps, of course, to be sophisticated enough to be able to accept such an assertion with the respect it deserves. If society attaches such importance to gender then it's hardly a trivial thing when you know you've been dragooned into the wrong one. Transsexuals need help, not hindrance, if they are to manage a transition which affects every single way in which they relate to the world around them.

More than that, however, a compassionate and sensible society will recognise that once such a change has occurred then there is absolutely no benefit to anyone in making it anything less than a 100 percent change. Society only has two social genders to choose from. Man and Woman. To cripple a man with a legal status which regards him as a woman, or to say that a woman cannot marry a man because of her long since removed birth deformity is to erect a deliberate barrier to the otherwise successful functioning of that individual. It is, in short, like breaking a man's leg because you don't want to accept that he can walk.

And that is all that we in Press for Change seek from British society. The right to walk. To stand on our own two feet after being forced to crawl for almost thirty years. It's not a lot, is it?

#### **Christine Burns**

Edited from Wikipedia: Born in 1954, Christine Burns, M.B.E. is a British political activist best known for her work with Press for Change and, more recently, as an internationally recognised health advisor.

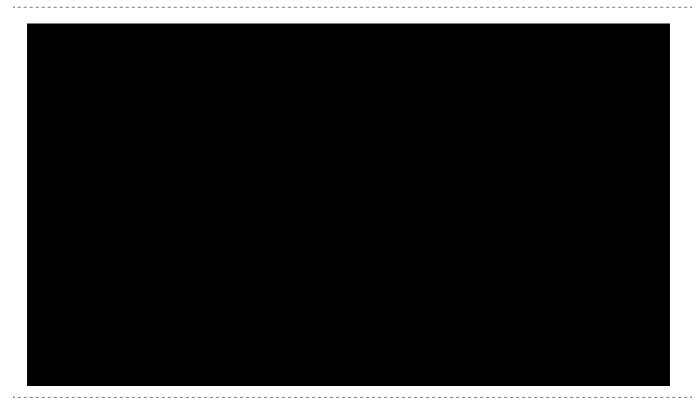
Burns was born in the London Borough of Redbridge and attended the University of Manchester, earning first-class honours in computer science in 1975 and a master's degree in 1977. During her time as a city I.T. consultant and a Tory activist, she chose not to reveal her trans history to colleagues.

In 1992, Press for Change (P.F.C.) was formed, and has become a key lobbying and legal support organisation for trans people in the U.K. Christine joined Press for Change in 1993, but only made her transsexual background public in 1995. She has become a leading figure in obtaining legal recognition for trans people. Representing P.F.C., Burns joined the Parliamentary Forum on Transsexualism shortly after it was set up in early 1995. She was also elected to sit on the policy governing council of the Human Rights N.G.O., Liberty.

Read more about Christine Burns at the following websites:

Christine's Blog: Just Plain Sense ☑ Christine's Blog: Just Plain Daft ☑ Christine Burns on: Wikipedia ☑

Christine's Profile on Press For Change Courtesy Internet Archive



Video courtesy of the Proud2Be Project A and You Tube.

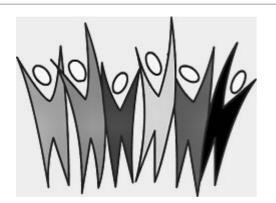
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# **How Things Change**

### **Toward a More Positive Outlook**

by Jodie

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015



Attitudes appear to be slowly changing, thanks to the efforts of dedicated people such as those of the Gender Centre

n July '97, there began whispers of redundancies at my workplace, which nobody took too seriously. It soon became a reality that they were to happen in September. This was

I am being treated as a person and as an equal, with no hint of discrimination or prejudice; certainly unlike some past experiences.

postponed until "early in the New Year", a lovely prospect of "Merry Christmas, don't bother coming back next year." Some positions did go at this time, but had little impact except to make people more nervous. The date was again put off until March, only this time on the 'hit list' were staff with more than ten years service. I had eleven years; nine as male and two as female (this transition was interesting in itself).

February saw the reality hit home! What was I to do if my number comes up? My thoughts were doom and gloom. Let's face it, age was against me for starters (forty-five and some), being in one job for eleven years, having no

profession, no great education, few qualifications and restricted skills, hell, I didn't have much of an idea what a résumé was, let alone have one. To top it all off, who employs trannys?

About this time, Polare 22 was delivered and low and behold, some employment opportunities were advertised. I phoned a very close friend to see if she had applied. I was convinced to apply as well. And just in case I was made redundant, the interview experience would be helpful if nothing else. Another good friend assisted in preparing a résumé at very short notice.

Several weeks and an interview later I found myself on the short list of a 'bank job', so to speak. I was also informed, that myself and thirty-six others were to be made redundant on 14th April. The day I was told this, was the day after I'd come out of hospital following an operation. Feelings soon picked up somewhat a week later, when I was informed my job application was successful and could start on 20th April.

At the time of writing this, it is four weeks into my new job and all is going extremely well. I am being treated as a person and as an equal, with no hint of discrimination or prejudice; certainly unlike some past experiences. How things have changed.

I am only one case and it's still early days, but it gives the hope that this understanding and tolerance will continue. Attitudes appear to be slowly changing, thanks to the efforts of dedicated people such as those of the Gender Centre and companies and business that make the time and effort to help change those attitudes. I for one am most grateful.

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# **Gender Identity Disorder: What to Do?**

Some Considerations and a Possible Solution.

by Nancy Nangeroni, Gendertalk Radio 🚰 Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015



Nancy Nangeroni

he debate in the transgender community over whether or not Gender Identity Disorder (G.I.D.) should be depathologised has raged

It is becoming increasingly clear that the problem is ... other people's treatment of transgender folk.

for some time. However, recent activity from within the larger queer community adds a new dimension to the debate, and even threatens to overwhelm those transgender people who favour continuation of G.I.D. as a bona fide psychiatric diagnosis. For the sake of furthering reasonable discourse, and in hopes of promoting a solution that disadvantages none of us, I will try to present clearly here some of the considerations, and one possible solution.

The most vocal supporters of continuing G.I.D. as a recognised pathological condition seem to be transsexuals who seek insurance payment for their S.R.S. expense. Insurance companies generally require requests for any medical expense reimbursement to include the D.S.M.-coded diagnosis for which treatment was provided. Those who reimburse for S.R.S. specifically require this D.S.M.-compliant diagnosis of G.I.D. The removal of G.I.D. from the D.S.M. threatens these transsexuals with loss of insurance repayment for their surgery expense. Those transsexual folk I've spoken with who advocate for continuation of G.I.D. believe that insurance coverage is the only way to cover the cost of their surgery.

There's a claim that G.I.D. may be useful for averting employment discrimination, but I haven't seen a successful case of it's application in this way. It may, I suppose, benefit the cross-dresser who seeks to end his distress over the practice through psychiatric help. I'll ignore those who find ways to use it to their financial advantage, like service providers who try to 'cure' people of gender nonconformance.

On the other side, some cross-dressers, transsexuals and transgender people would like to see G.I.D. eliminated as a mental illness, in order to further reduce the stigmatization of transgender folk. This is the logical continuation of the movement towards greater individual freedom of expression which has previously de-pathologised homosexuality and transvestism. Many activists believe that this is a necessary step towards acquisition of full rights and respect for transgender folk.

The ongoing debate on this issue has recently taken a new tack, as gay and lesbian activists joined the call for an end to G.I.D. because of its use as a basis for incarceration and abuse of gender variant, 'potentially homosexual' youth. The book *Gender Shock* by Phyllis Burke is probably the leading vehicle for this interest. It successfully dramatises the plight of gender variant youth, providing a disturbing collection of case histories of boys and girls mistreated in the name of normalcy. Many of them are incarcerated in mental institutions and 'treated' with what are clearly abusive regimens, ranging from gross psychological manipulation to routine application of drugs and electroshock - often without supporting psychotherapy or counselling. Ms. Burke also relates interviews with contemporary practitioners of such 'therapies' who continue to this day to prescribe abusive and ineffective treatment for transgenderism most often, apparently, in futile effort to ward off future homosexuality. The call by Gender Shock for an end to G.I.D. diagnoses is compelling. To this transgender reader, the book is extremely disturbing, and highlights the needed reform of both our psychiatric services and our children's upbringing and very rights. It remains to be seen just how great will be the reach of this work, but it will surely advance the cause of those who argue for the abolition of G.I.D.

Most transgender folk I've spoken with agree that the greatest damage is done to us when we are young, at the mercy of parents, teachers, and peers. Without that abuse and repression, we would surely reach our middle years in much better shape than we do currently, and be much less in need of reparative services. Indeed, I suspect that the demand for S.R.S. might decrease if genitals ceased to be a reason for social discrimination, but that is pure speculation on my part.

There is no doubt that the acceptance and even encouragement of young people's gender variation would yield much happier transgender (and non-transgender) adults. An obvious component of that change in attitude is a change in the assignment of pathology in cases of gender transgression. Clearly, it is the parents whose own guilt and fear for their gender appropriateness causes them to ignore the hurt they cause their children in blaming them for the pathology. It is their insecurity as parents and their mistaken beliefs which cause them to hurt their children in the name of 'normalcy' and 'good parenting'. Likewise, it is the doctor's homo- and genderphobia that makes them accomplices in the evil acts performed in the 'child's best interests'.

As more transgender people become visible, we are presented with more examples of transgender people whose lives are not ruined by their transgenderism. We are accumulating evidence that transgenderism itself is not a problem. It is becoming increasingly clear that the problem is other people's treatment of transgender folk. In response to this clarity, we need to relocate the pathology from the gender-transgressive individual to the person upset by that transgression. To fail to do so would be to continue the insane practice of blaming the victim for failing to satisfy the bully's demands.

At the same time, what about the person young or old who will clearly benefit from surgical intervention, but who cannot by themselves muster the resources needed to accomplish the feat? Currently, surgery on intersexed young people to make them 'more normal' is a mostly unquestioned insurance reimbursement. While this practice deserves, like <u>G.I.D.</u> 'therapy', to be exposed for the butchery it most often is, it shows the willingness of insurers to pay for 'gender corrective' measures. Clearly, insurance companies are willing to pay for surgery which is beneficial to a person's welfare, even when the problem to be corrected is not life threatening.

At the same time, they draw the line at cosmetic surgery: No matter how ugly you are, they will not pay for a nose job or face lift performed for strictly cosmetic reasons. Here, then, we have found an inconsistency in policy. Because a nose job or face lift or liposuction or whatever can in some cases demonstrably improve the quality of one's life. This is the same goal as that of G.I.D. and intersexual surgery. Why is intersexual surgery reimbursed when cosmetic surgery is not? Because it's been medically established as a bona fide need, while the need for a nose job has not been. Part of that established need occurs because intersexuality is mysterious and involves unmentionables, while a nose job is as plain as what's between your eyes. The mystery and fear allow the doctors greater latitude in diagnosing a disorder and performing a procedure for which they will get paid.

S.R.S., on the other hand, got a bad name a few years back, thanks mostly to some doctors at Johns Hopkins. They conducted a study that showed that transsexuals were no happier after surgery than before. Of course, they were just as closeted - by the advice of their doctors - as before. As we are now learning, out is generally (if not always) happier than not, so it's no surprise that closeted post-ops (at increased personal risk/paranoia) weren't a lot happier than pre-ops. But the researchers conducting the study overlooked that detail (and others, no doubt). The insurance companies followed their lead, and S.R.S. has become mostly regarded as 'elective', 'experimental' and 'of questionable benefit' and thus non-reimbursable. However, the new transgender activism has reversed the direction of the pendulum on this one.

So the current situation is, insurance companies won't pay for cosmetic surgery, but they will pay for quality of life intervention for a diagnosed condition, such as surgery on intersexed genitals. If we want them to pay for S.R.S., we need to give them a diagnosis.

In fact, transsexuality is not a gender disorder, it's a physiological sexual disorder. It's a need for a physical intervention, a surgery. To insist on the retention of G.I.D. as a means of obtaining coverage of S.R.S. is like insisting that my neighbour not cut down his apple tree even though the apples are killing his dog which is allergic to them, because some of the apples fall in my yard and I enjoy them. Instead, if I want apples, I should grow a tree of my own.

In order to provide insurance coverage of <u>S.R.S.</u> for transsexuals, it would seem reasonable for us to create a <u>D.S.M.</u> diagnosis of 'transsexuality'. It could support the various surgeries that transsexuals want or need. This would allow the elimination of <u>G.I.D.</u> without hurting those transsexuals who need our help. A specific diagnosis of transsexuality could provide a basis for specific body altering procedures such as mastectomy and phalloplasty and vaginoplasty and orchidectomy and such.

Is the elimination of <u>G.I.D.</u> and establishment of diagnosable transsexuality achievable? If we seek out and work with sympathetic medical authorities, if we go about it reasonably and with open minds, if we do our share of the legwork, if we persist until we succeed ... it becomes not just possible, but inevitable.

### **Nancy Nangeroni**

From Gendertalk: Nancy Nangeroni has served as Chair of the Massachusetts Transgender Political Coalition since 2008, during which time the organization led the successful passage of the state-wide Transgender Equal Rights Act. A long-time transgender activist, writer, speaker, and media producer on issues of gender, Nancy produced and co-hosted GenderTalk, the award-winning weekly radio talk show about gender and transgender issues, for over eleven years. She previously served as executive director of the International Foundation for Gender Education and has been repeatedly honoured for her contributions to, and pioneering work on behalf of, the transgender community.



In her first co-creation with partner Gordene MacKenzie, she co-produced the music video *In Memory of Rita* in remembrance of the candlelight vigil for murdered transwoman Rita Hester, an event that inspired the International Transgender Day of Remembrance. From 2006 to 2008, Nancy and Gordene co-produced and co-hosted "GenderVision", a cable television program aimed at educational use. They continue to co-produce video pieces, most recently *Rally for Transgender Rights*, a short film that played in the 2011 Boston Museum of Fine Arts L.G.B.T. Film Festival.

In 1995 Nancy began producing and hosting "GenderTalk", a radio talk show about gender, transgender issues and progressive politics airing weekly on WMBR-FM in Cambridge, MA., U.S.A. and worldwide on the Gendertalk website. She was joined in this effort by her partner Gordene MacKenzie in 1999, and in April 2000 GenderTalk received the G.L.A.A.D. award for "Outstanding L.G.B.T. Radio". GenderTalk's website provides easy access to an archive of over 400 programs. While the production of GenderTalk ended in late 2006, the website continues to serve tens of thousands of visitors monthly.

Nancy served as executive director of the International Foundation for Gender Education, a leading transgender education and outreach organization, in 1997-98, in order to rescue the organization from impending insolvency and improve the quality of its flagship publication, *Transgender Tapestry* magazine. She is a respected writer and editor on transgender issues and has published many articles and essays in a variety of publications, including chapters in several books and pieces in *Bay Windows*; *The Boston Phoenix*; *Transgender Tapestry* magazine; *Sojourner*, the *Women's Forum*; *The National Queer* 

Progressive Quarterly, and more. She is currently working on a book-length memoir.

Nancy has made pivotal presentations on gender issues to the American Psychological Association, the Human Rights Campaign, Gay & Lesbian Advocates & Defenders, Lucent and Bell Atlantic Corporations, M.I.T. and Harvard University, University of New Mexico and more. She has spoken on legal and political, as well as health and medical, issues relating to transgender people. She has appeared on local and national commercial prime-time radio and television broadcasts to discuss issues of gender and transsexualism. She was profiled in a ground-breaking A&E Investigative Reports piece, "The Transgender Revolution", which first aired in 1998. She has been interviewed countless times.

Nancy founded the Boston chapter of The Transsexual Menace, a "disorganization" of transgender activists, and co-initiated, starting in 1995, a nationwide campaign to put a stop to violence against transgender people by direct action. Over the next few years, she was a lead organizer and participant in demonstrations in Kansas City, Falls City Nebraska, Colorado Springs, Washington D.C., Chicago, Burlington Vermont and Boston. At the same time she led Boston's Transgender Pride contingent, and authored the amendment to the Cambridge Human Rights Ordinance which passed unanimously and broke new legislative ground in providing broad protection for freedom of gender expression and identity. She co-edited and published *In Your Face*, the journal of political activism against gender oppression, the first periodical to chronicle hate crimes committed against transgender persons. She conducted early trans diversity trainings for the Human Rights Campaign national board of directors and governors, as well as local chapters of G.L.A.D., Planned Parenthood, Lucent Technologies, Verizon, Bell Atlantic and more. She led the candlelight vigil for murdered transsexual Rita Hester in 1998, which inspired the International Transgender Day of Remembrance. She continues to lead the committee that organizes annual Boston T.D.O.R. observance.

From Nancy's You Tube page: 🖾



# Videos Produced by Nancy Nangeroni and Gordene MacKenzie

Sex and Gender, Being Transgender, Trans Partner, Pride, Trans-Friendly Public Policy, Transgender Health Care, Gender, Race and 2008 Presidential Politics, Feminism, Sex & Gender, Transgender at work, Politics of Drag, Same-Sex Marriage.

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# The Transgender Spectrum

### All I ask is that you accept what I am

by Lisa J. Lees

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed: September 2015



I have not changed gender. I have always known that I was a woman.

ex and Gender –
At birth a quick
look between
your legs determines
whether an "F" or an "M"
appears on your birth
certificate. What they see

Based on your answer to, "Is it a girl or a boy", people have preconceptions about the entire life of this little person.

between your legs is your "sex", what they put on your birth certificate is your "gender". (This is an over-simplification, of course).

The first question anyone asks about a baby is, "Is it a girl or a boy?" They don't ask if it has a vagina or a penis. No one is going to care about that for maybe two decades. They want to know whether to give it a pink or a blue blanket, whether to call it pretty or handsome, whether it will play with dolls or trucks, be a cheerleader or a football star. They want to know the baby's gender, not its

Based on your answer to, "Is it a girl or a boy", people have preconceptions about the entire life of this little person. If it conforms to those expectations, the ones predicated on being a girl or a boy, fine. Otherwise, it is transgendered, and it is in for some rough times.

Many people are transgendered to some extent. Some girls are tomboys and some boys are sissies. (You'll notice that at all ages females are given much more leeway with gender expression.) Women in professions traditionally dominated by men are pressured to act like men. Men in jobs (women don't have profession) traditionally dominated by women are assumed to have some feminine streak or be gay (which is considered an effeminate trait by most of those who aren't gay).

At the extreme are the classic transsexuals who totally disagree with their initial gender label and seek to change their public presentation of gender and even their sex or match what they believe their true gender to be. (If our culture did not claim such a rigid correlation between sex and gender, and such rigid definitions of gender, would there be any transsexuals? Excellent question, I don't know.)

There seems to be a whole range between being totally happy with your initial gender label and being a Classic Transsexual. Sorting that out looks to me to be an impossible task. Why bother?

If your assigned gender and your felt gender conflict to the point that you are having trouble living a happy, functional life, then you must do something about it. What you must and can do varies, and is at least partially determined by how accepting our culture is of gender variation.

It's sad to think of all the permutations and combinations of talent and ability that have been lost because their expression hasn't conformed to one of the two standard genders. It's worse than sad to think of all the people who have had their hopes and dreams crushed because "boys don't do that" or "girls don't do this". Many of us have been beaten, raped, tortured, or murdered because we are not just exactly like some ideal to which almost no one in truth conforms.

I think one of the things about me that most upsets people is that I am living proof of just how tenuous is the distinction between female and male. I can tell that some people (men, generally) are really upset knowing that a little purple pill can do this to a supposedly male body. It shakes their foundations. It catches their eyes looking at the usual places men look, I can almost see their minds churning, wrestling with their reaction to me. I suspect that the inability to cope with these feelings is behind some of the hatred of transsexuals.

What's it feel like inside to "change sex"? As I've said in other places, this does not seem like much of a change to me. I have not changed gender. I have always known that I was a woman. What I'm doing is a little more dramatic than losing weight, but it's kind of the same thing. I look in a mirror and think, "I look pretty nice." But I still see me, I see the transsexual woman I've always been.

What is very much different is that now I am happy. I no longer hold back from social events and activity. I no longer sit or stand silently in a group, hoping no one will notice me. I'm learning to use personal pronouns and first names again, now that I have ones that fit me. It is easier for me to live as a known transsexual woman than it ever was when people assumed I was a man.

So what does it mean to be transgendered? I guess bottom line it means to be different. If you really, truly support diversity and

individuality, you are supporting transgendered people. You don't have to label us. We'll do that ourselves if we feel it is needed. You don't have to understand us. I don't know that we understand ourselves. You certainly don't have to approve of us. I never did or will ask anyone if it okay for me to be a transsexual woman. I am.

That's a given. I accept it. All I ask is that you, also, accept what I am.

Once you accept me, then you can move on to decide where and if I fit into your life. Just like anyone else. And who knows, maybe I have something unique and important to contribute to our culture and our future, something that I would never have been able to do if I had spent my energy and my life pretending to be something I never was.

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# What Being Female Means?

## A Bunch of Thoughts

by Caitlin

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I can allow people to love me. I can allow them to touch me, both physically and emotionally.

hat being female means. What is it to be? I must admit that I have spent more time over the past few months trying to work out "what it is to be

I can cry now. I can admit weakness and the acceptance of some lacking skills that previously were integral to the social acceptance of "Him"

male". I have found this necessary to clarify in my own mind, which elements of my behaviour are learnt and which are me! I don't feel that I am knowledgeable enough to speculate from the female perspective, as I have only been viewing it in an ever clearing fashion for the past twelve to eighteen months.

But it's interesting which elements of my behaviour have changed to conform to a social standards and which elements have changed due to the release from other social standards.

I can cry now. I can admit weakness and the acceptance of some lacking skills that previously were integral to the social acceptance of "Him" (especially sexual conquests where it was always assumed I was a poof because I didn't try to bed woman in the first fifteen seconds!) I can touch people, especially other women, in ways to express empathy, affection, understanding without the assumption that I am trying to pick them up!

I listen to my heart, my intuition if you will, and no longer feel reliant on logic as the primary, if only form of sense. I don't always blame myself for problems or failures. This may just have been an indication of the dislike I had for myself.

I feel much less self-centred, although I feel very centred in myself! i.e. I perceive other perspectives more easily and find myself thinking about myself less. (Mind you, transition is not the time to not think about ourselves!). So now, I think more about myself than of myself.

I can allow people to love me. I can allow them to touch me, both physically and emotionally.

A bunch of thoughts.

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# The Biggest Breakthrough of All

The Struggle to Change One's Gender is Now Possible, Thanks to Hormonal and Surgical Techniques

by Dallas Denny September 2015

Article appeared in Polare magazine: July 1998 Last Update: October 2013 Last Reviewed:



**Dallas Denny** 

hen I think about
breakthroughs in the field of gender, many ideas come to mind. I think about John Money's work with intersexed (hermaphroditic) people at Johns Hopkins
University, which led, in

... the unique combination of social and psychological and medical factors which has for the first time in history made it realistic for genetic males to live their lives as women, and for genetic females to live their lives as men.

1955, to his making a distinction between gender and sex (previously they had been considered to be the same).

I think about recent genetic research in pursuit of a gene which "switches on" masculinise development. I think about the publication, in 1979, of the

Standards of Care of the Harry Benjamin International Gender Dysphoria Association Inc., which standardised the treatment of transsexual people. I think about the recent realization by researchers that transsexualism is not a single clinical entity, but a behavioural manifestation common to an unknown number of syndromes with underlying causes which might be biological, psychological, sociologic, or familial in nature. I think about recent progress in hormonal treatment (the use of anti-androgens, replacement of oral administration with sub-dermal and trans-dermal routes). I think about the advent, in the 1980s, of the use of the radial forearm flap, which revolutionized female-to-male reassignment surgery. I think about the blossoming of the [trans]gender community, which has been called "mythical" in these pages, but is real enough when one is in desperate need of information and assistance.

I think about all these, and more, only to reject them in favour of the biggest breakthrough of all - the unique combination of social and psychological and medical factors which has for the first time in history made it realistic for genetic males to live their lives as women, and for genetic females to live their lives as men.

There have always been transsexual people, and there will always be. In the future, sex reassignment may or may not be available. Certainly it has not been in the past. But during the past two decades, reassignment has become a realistic goal for those willing to work long enough and hard enough to achieve gender congruity.

Consider: if you had been born at any time in history except the second half of the twentieth century, you would have, unless you were one of the fortunate few who happened to look sufficiently like the opposite sex, been stuck in the gender normally associated with your biological sex. Electrolysis was not available. Sex hormones had not been artificially synthesized. Sex reassignment surgery was not performed.

Before 1949, the word transsexual had not even been coined. In the scientific literature, transsexual people were called transvestites, and sometimes Eonists. People who were confused about their gender did not even consider that something could be done about it.

It was in 1952, with the breaking of the "G.I. Becomes Blonde Bombshell" headlines about Christine Jorgensen, that things began to change. Transsexual people began to go to other countries to seek S.R.S. The 1960s saw the founding of the first gender clinic in the United States, and in the 1970s, S.R.S. became widely available. The 1980s brought increased media coverage of transsexualism, and the formation of a national [in the U.S.A.] umbrella organisation for transgendered people.

And where does this leave us? Well, in a difficult position, to be sure. The struggle to change one's gender is probably the most significant event in his or her lifetime - but it is now, thanks to hormonal and surgical techniques and the social acceptance of transsexualism, possible for every man (and every woman).

And that is a breakthrough.

From Wikipedia: Dallas Denny is a writer, educator, and mental health professional and is renowned for her work in advocacy, policy issues, and health practices involving transsexual and transgendered people. She has served as an advisor to the World Professional Association of Transgender Health, The University of Michigan, the Centres for Disease Control, the City of Atlanta, journalists, and filmmakers. For nearly twenty years she has taught a class on transgender issues at Emory University. She has made hundreds of presentations at universities, businesses, professional organisations, and conferences.



She has published three books and written or co-written more than twenty chapters in textbooks, hundreds of articles, editorials, and columns for magazines and journals, and assorted booklets and pamphlets. She is former Editor-in-Chief of the journals *Chrysalis* and *Transgender Tapestry* and founding executive director of the American Educational Gender Information Service, Inc. which is now known as Gender Education & Advocacy, Inc.

#### Dallas Denny's Website 🖾



Identity Management in Transsexualism: A Practical Guide to Managing Identity on Paper.

Author: Dallas Denny

Publisher: Creative Design Services (1994)

I.S.B.N.-13 978 1880715079

From Amazon Books: This is the only comprehensive guide to managing an identity change for the transsexual person. Denny shares her personal experience in tracking down the paper trail we all leave behind us. She gives solid advice and explicit directions where possible. An extra bonus is the Transgender Identity card. Just add your photo and personal data.

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