

Polare Edition 39

Published: April 2001 Last Update: June 2013 Last Reviewed: September 2015

Manager's Report

by Elizabeth Riley, Gender Centre Manager

N.S.W. Police Service Transgender Policy

This document is nearing completion and provides comprehensive policy on police dealings with transgender persons as employees, as victims and as perpetrators. Full details of the policy will either be printed in *Polare* or distributed with *Polare* when finalised.

There have been a range of difficulties associated with the development of this policy, particularly in relation to ensuring transgender people are treated appropriately while equally ensuring that the integrity of police records is not compromised. I believe that we are close to resolving these issues and the policy will soon be implemented. The policy will ensure that transgender people, like all members of the community, will be treated with respect and dignity in any dealings they have with the police.

Department for Women Working Party

Rewrites of the public sector *Employees Handbook* are nearing their final stages. The *Employees Handbook* is the public sector policy document on all human relations matters. The rewrite included sizeable sections dealing with the employment of transgender people and is a positive step forward in recognizing our equal rights to employment in the N.S.W. public sector.

Any transgender person seeking employment with the public sector should file their application in the usual way. The handbook will go some way towards ensuring that you will not be discriminated against even if it is known that you are a transgender person.

Gay Games

A submission has been sent to the organisers of the Gay Games to seek full inclusion of transgenders in all sports as competitors in their chosen identity. The submission suggests that if there are disputes over world record times, F.T.M. hormone/steroid treatments or over the gender of the winning athlete these should be decided by the relevant international bodies.

This would allow the Gay Games to be inclusive as their mission statement professes. At the date of writing this report we have not received an official response from the Gay Games organisers. We will keep you posted on this one.

Attorney General's Crime Prevention Unit

We are currently involved with a committee working towards strategies to prevent violence against L.G.B.T. communities. We will be applying for a small grant to in the near future to conduct a literature search on the violence issues confronting the transgender community, both here and overseas.

Feature Articles



Structured interviews were conducted with various key informants including activists within the transgender community

Reporting Transgender Violence

Assessment of research into trans people who have experienced violence, the low reportage of this violence to police, and a suggestion that police attitudes serve to inhibit the compilation of statistics that might assist trans people to gain access to services and resources.

Suicide, a Painful Reality

The suicide rate among the transgender community is unacceptably high and reflects the many difficulties that we face. Sarah has lived with the idea of suicide since she was eight and suggests that she can understand some of the problems and reasons for its cause.

Transgender Warriors

Leslie Feinberg analyses some of the well-known, and lesser-known people who transgress gender expression, revealing hidden histories and exposing unique strengths that are put to good use in fighting continued oppression of transgender people in western cultures.

Era of the Gender-Crosser

Once upon a time two people fell in love, broke up, got back together, joined their names and had a baby. A conventional love story, except that when Patrick and Matt Califia-Rice met, they were both women. Women who felt, from the time they were small, that they should be men.

Brazil's Unconventional AIDS Fight

Jacqueline Rocha Cortes turned heads, but she isn't the latest Brazilian fashion model to conquer the catwalks. Ms. Rocha Cortes, is a transsexual who is infected with H.I.V. and has emerged as a leader in one of the most widely heralded anti-AIDS programs.

Anyone with the necessary skills to conduct a literature search and compile a report might like to contact me if they would be interested in participating in the project.

Anti-Discrimination Board

We await responses to some disappointing developments raised at the recent transgender group consultation regarding the granting of exemptions with the Anti-Discrimination Board. It appears that an agency dealing with homelessness has been granted an exemption allowing it to refuse appropriate gender accommodation to non-recognised transgender people.

At the time of writing this report we have had no response from the A.D.B. regarding this issue but we will endeavour to have the decision overturned. Since flaws in the legislation already allow services to discriminate against non-recognised transgender people, the granting of such an exemption seems superfluous and contradictory to the A.D.B.'s stance that they are seeking reforms to remove the distinction between recognised and other transgenders from the legislation. Again we will keep you informed.

Transman

The "Transman" exhibition and the "Boys will be Girls" exhibition held at the Stills Gallery in Paddington between 10th February and 10th March was a fabulous success and did a great deal to raise community awareness of the transgender community. I hope members of the community managed to see the exhibitions.

Counselling

Elizabeth Anne is changing hours to Mondays, Tuesdays and Thursdays to allow her to attend study for a masters degree in counselling on Wednesdays. All current and future clients should take note of her changed times.

She can be contacted at the Centre on Mondays, Tuesdays and Thursdays for anyone wishing to arrange an appointment or seek telephone counselling.

Organisational Week - 5th-9th February

A significant amount was achieved during the week with all computers finally functioning as they should and filing systems fully overhauled. We have installed two new vertical display stands to make it easier for visitors to access booklets, brochures and other informational resources. The library now also has effective borrowing and tracking mechanisms in place. We hope that the changes will enhance our service delivery and we look forward to your feedback.

The Gender Centre Website

Craig has been patiently creating, recreating and modifying our website. The site is looking really good and provides a wide range of information and items of interest as well as important links to transgender community groups around the world.

Hits to the site have been increasing dramatically with over 800 hits in the week of 7th March 2001.

Tasmanian Birth Certificates

We have received brief details concerning new rights for intersexed people born in Tasmania to change their birth certificates. Apparently decisions are made on the basis of chromosomal tests and D.N.A.. Anyone who might want to take advantage of this should contact Births, Deaths and Marriages in Tasmania for clarification.

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Polare Magazine is published quarterly in Australia by The Gender Centre Inc., which is funded by the Department of Family & Community Services under the S.A.A.P. program and supported by the N.S.W. Health Department through the AIDS and Infectious Diseases Branch. Polare provides a forum for discussion and debate on gender issues. Unsolicited contributions are welcome, the editor reserves the right to edit such contributions without notification. Any submission which appears in Polare may be published on our internet site. Opinions expressed in this publication do not necessarily reflect those of the Editor, The Gender Centre Inc., the Department of Family & Community Services or the N.S.W. Department of Health.

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Reporting Transgender Violence

Encounters with the Police

by Elizabeth Riley ^[1]

Article appeared in Polare magazine: April 2001 Last Update: October 2013 Last Reviewed: September 2015



A key feature of negative police experiences appears to be the trauma of revealing transgender-identity within the police station.

This article arises out of research conducted in Sydney between May and July 2000 into experiences of violence of transgender persons.

^[2] The data was

generated using two methods, structured interviews and focus groups. A series of structured interviews were conducted with various key informants; activists within the transgender community working in various agencies (the Sydney Gender Centre and the Sex Workers Outreach Project (S.W.O.P.), an officer from the N.S.W. Attorney-General's Department with responsibility for developing policy and liaison around lesbian, gay and transgender issues, a senior policy officer in the Department of Women and three representatives from the N.S.W. Police Service. ^[3]

The most common reason given for non-reporting was "I wouldn't because there's no point, they don't take you seriously".

The focus group methodology enabled a less structured approach that more readily allowed for an "appreciative" stance to be adopted toward the experiences of participants. Two focus group interviews were held in July at the Sydney Gender Centre in which eight transgender persons participated. Participants in the focus groups were ultimately recruited through contacts generated by way of the Gender Centre. ^[4]

Participation in the management and the provision of Gender Centre services turned out to be a link between all members of the focus groups. This gave the focus groups a specific community (and one might add stakeholder) focus. At the same time the focus group had a diverse composition. Of the transgender participants, two were female-to-male (F.T.M.) (Kirk and Steven) and six male-to-female (M.T.F.) (Clare, Mary, Pauline, Sarah, Karen and Laura). ^[5]

The group was racially and ethnically mixed. One M.T.F. was of Polynesian origin (Pauline) and another an Aboriginal Sistergirl (Karen). The remaining six participants had Anglo/Celtic and Mediterranean backgrounds. They also represented a diverse range of ages (between 30 and late 60s) and sex/gender experiences and practices. The data basis of this article is the transcripts of the key informant interviews and focus group meetings.

It is not our purpose to make any claims about the nature and extent of violence or the appropriateness of particular safety strategies. Moreover, we recognise that it would not be possible to do so given the size of our sample and the number of interviews conducted. Rather, our aim in undertaking this study is to explore the insights that the interviews provide in order to challenge accepted modes of thinking around the transgender/violence relation and to pose questions which might inform further research in this area. In this article we will consider transgender/police relations in the context of reportage of incidents of violence. Here we will contend that low reportage is linked importantly to police attitudes toward transgender persons. In this regard, police attitudes serve to inhibit the compilation of statistical records that might, given the current logic of knowledge production, assist transgender persons in gaining access to State services and resources. In conclusion, and drawing on our data, we will suggest a number of changes that might improve transgender/police relations.

Policing and Reporting Violence

It is interesting to compare and contrast police explanations and suggestions as to why transgender persons might not report violence with the reasons offered by members of our transgender focus group. The point of departure for the police was that there is no specific police data on violence against transgender persons and more particularly no police data to suggest that it takes specific forms or is higher than violence against other groups of people. While our police interviewees offered a range of reasons why such violence might not be reported they concluded that a lack of police data made it difficult to say if transgender persons experienced more or less violence when compared with other groups or whether they exhibited a reluctance to report violent incidents to the police. ^[6]

Our police interviewees offered various explanations for possible under-reporting. One reason put forward was that much violence against transgender persons takes place in the workplace and near the home by colleagues and neighbours respectively. Reports of

this type of violence it was suggested might be channelled through the Anti-Discrimination Board or Housing Authorities and thereby never become known to the police. Another suggestion was presented in the context of an analogy with theft from a car: *"what puts a lot of people off reporting crime is that I don't want to be in the police station for the next three hours. And I think that has a huge role to play. I mean I've had my car windows smashed twice out here. I haven't reported it once to the police because I don't want to be bothered, you know, going to the police station. You've already ... you're out. You want to go home."*^[7]

Other reasons offered for possible under-reporting included victim perception that s/he will not be believed; perceptions as to the likelihood of an arrest flowing from a complaint; the trauma of reporting; the knowledge that a consequence of reporting will involve the need to reveal something that is intimate and personal, including disclosure of a victim's sexual and/or gender-identity; and the fact of victim involvement in the incident. Our police interviewees suggested a number of factors that make reporting more likely. These include, the need for verification in the context of insurance claims; access to health care; and the ability to identify offenders through prior knowledge. Proximity of the incident to the victim's home was also presented as an important factor in the decision to report. Here the view that "if it's near your home you're more likely to be inclined to [report]"^[8] appeared to be premised on the assumption of increased vulnerability.

Our focus group participants offered a range of insights by way of their experiences of interaction with the police that gave some of these factors a more problematic edge. While several of the factors cited by the police as important in the decision to report were echoed by our participants the latter introduced another critical factor, namely, an almost universal reluctance to report violence to the police due to perceptions and prior experiences of negative police attitudes. Moreover, some of the earlier mentioned factors that our group participants felt important in the decision to report appear to be inflected through this attitudinal factor. The most common reason given for non-reporting was "I wouldn't because there's no point, they don't take you seriously".^[9] Members of the group went on to give more detail about their negative experiences with the police that led to this state of affairs. In the wake of an arson attack on his home one of the group, Kirk, went to the police:

The police were ... classic. I had to go down to the police station to make a statement and I said to the guy that I was transgender. He said, "oh you want to be a girl do you?" and I said, "No, I've been there, done that, didn't like it, you know, changed sex". I tried to make light of it because you know, you take the power away from them and give it to yourself if you can laugh at yourself. They don't laugh at you because it'll not achieve anything. I just said to him, "look I've got to go to the toilet. Can I go?" He said "which one would you use?" I just looked at him and I said "you've got to be kidding haven't ya?" - I had a beard you know. He said "oh the ladies are around there". I said "you might use the ladies sweetheart but I'll go here. From that moment on, because I called him a sweetheart, he was an absolute pig. I had to go to a kind of inquiry for the fire because people were involved. He told me that I didn't need a solicitor. When I got there the coroner said "oh I can't let you speak because you don't have a solicitor". I said "but the coppers said I don't need [one]. He [the copper] made it so hard for me."^[10]

Furthermore, the police failed to make any arrests:

I knew who it was. Everyone knew who it was but the coppers couldn't find him. They could never find him and when he'd boasted about murdering someone already I, I actually took what he said very, very seriously because even if he's only ... does half of what he says he's gonna do that's enough. That's too much uhm, but no, coppers don't listen to you."^[11]

The (lack of) confidence Kirk expressed about the police also proved to be informed by earlier pre-transition experiences. Thus he described an experience of an encounter with the police when living as a woman in the following terms:

I got raped when I was eighteen because they wanted to send me straight. I went to the police and the police said to me, "he who lays with dogs should expect to get fleas", that's what I got. So from that moment on I knew the police were never gonna help me."^[12]

A key feature of negative police experiences appears to be the trauma of revealing transgender-identity within the police station. This concern was expressed most fully by our two female-to-male participants in the context of rape. Thus while rape was the act most feared both stated that they would not go to the police station if raped. Steven explained that "there's no way I would walk into that station and say I've been raped as a man, as a transgender man".^[13] The reasoning behind this received further elaboration:

Number one, why should I have to walk in there and educate them? I've just been raped or bashed or stabbed. Why should I have to, as a tranny boy, walk in there and say and educate the policeman or whoever, the police woman that I am transgender when I'm suffering all these, all these other pains? So no I wouldn't even step into the police station. There's no way ... because, you know, especially if you've been raped then you've gotta go and get checked ... So being transgender and walking in there with a beard ... they'd just think I was a freak. I mean, look at this guy he's got a vagina you know. He's got a fucking vagina, he's got a fucking ... Why would I want to face that, uhm, suffering the pain that I'd be suffering at the time so that's my answer on that ... it's the revealing, it's saying I'm a man with a vagina. You know it's

like it's saying, uhm, it's like it's none of their fucking business whether I've got a vagina or a penis anyway
[14]

Kirk: Rape's rape isn't it. [15]

Steven's explanation draws attention to a particular experience of the trauma of revelation that will be necessitated by a complaint to the police. However, it would be mistaken to conclude that this is a trauma that can be reduced to being "outed" as a trans man with a vagina. Of particular importance here is the effects of the perceived/expected police response which is itself one of trauma and humiliation. "Rape's rape isn't it" suggests that the expectation is that police inability to deal with the gender of the victim will result in failure to take violence seriously. It would also be mistaken to think that only factors of gender and sex are at play in decisions not to report. Thus, by way of example, Karen, our Aboriginal Sistergirl participant, expressed the view:

I mean generally the police doesn't have a good rapport with the Aboriginal/Torres Strait Islander people. So why would Aboriginal/Torres Strait Islander people want to go to a police station. They were used in the first place as military to try and get rid of us. [16]

And speaking of a past, though post-transition, negative police experience:

I was locked up ... and it was a long weekend ... [until] the following Tuesday. They didn't let me make a phone call to my family. They called me every name under the sun. "Aids carrying boong" you know "coon". All those names. Basically they tried to degrade me by, you know, by their words. [17]

Our data suggests a complex range of factors influencing the decision by our transgender participants not to report violence. Many factors seem to have some connection with gender status, both pre and post transition, and police reaction to that status. Some, such as the anxiety and trauma of being subjected to the requirements of revelation, are perhaps similar to those experienced and addressed in other contexts such as the problems of getting people to report violence against lesbians and gay men. [18] However, while the trauma associated with the fear of disclosure for transgender people may be similar to the fear of "outing" by those involved in same-sex practices it is also important to recognise differences.

In addition some of the observations made by the police that relate to the issue of disclosure suggest that the relationship between gender performance, identity and crime may be more problematic. We will explore this by way of two observations taken from the interview with police officials. The first example comes from an incident that was recited to us by one of our police interviewees relating to a transgender person:

Cheryl Clarke: There was a case just recently where the Gender Centre contacted me about a transgender person who had been assaulted. They thought it was a transgender related bashing. I contacted the commander just to assist in the development of policy. I wanted to find out more about what was happening out there. I rang the commander and had a good chat to him. He looked into it and found that it actually had nothing to do with the person being a transgender. The person was a drug supplier and their had been ...

Sergeant Adrian Gover: Deal gone wrong ...

Sue Thompson: Dispute ...

Cheryl Clarke: Thank you. That's the word that I was looking for. Then when I relayed that information back and they went out to see the person to keep in contact and make sure that that persons okay they actually did come across the person dealing in drugs and thought okay this is what we're looking at here. So it's really, it's really tricky. [19]

Various aspects of the police reaction to this incident are of interest. In the first instance this is a case of self-disclosure by a transgender person, which might suggest the relative absence of trauma associated with self-disclosure, albeit that disclosure was mediated by the Gender Centre. The individual who was "bashed" and the Gender Centre both appear to have defined the incident in the context of transgender. However, in the final analysis transgender is erased in the explanation offered by the police. Of particular interest is the assumption of the mutual exclusivity of violence associated with drug dealing and violence against transgender people. The either/or logic erases transgender.

The second example appears in the context of an imagined exchange between the victim of violence and the police:

"Did they take your wallet?" no "well why do you think they assaulted you?" "Well they probably thought I was gay", "they probably thought I was lesbian", they probably thought I was transgender". That's a big ask ... It makes people feel very vulnerable. So people will often avoid that as well. It's another factor in why not to report. It might be the straw that breaks the camel's back. [20]

Of particular significance here is the context in which gender and sexuality are brought into the frame. That is to say, they become relevant through attempts to ascertain the motive for/behind the violence. Having dismissed money as the explanation for the violence

identity becomes the other mode of explanation. At one extreme, while motive might be relevant in some contexts, for example where it relates to consent, in general it would appear to have little significance in the context of attempts to ascertain whether a criminal act of violence was committed.

As such the police practice is directly implicated in precipitating the possibility of the trauma of self-disclosure. On the other hand, and perhaps of even more concern, it might be argued that a focus on the context of the act of violence implicates the police in the establishment of possible defences that the accused might raise. [21]

The disclosure of identity might also have significance in the context of intelligence led policing, which might have significance in the contexts of successful investigation, prosecution and crime prevention. This points to institutional needs that might create a demand for identity disclosures.

Conclusion

Our study suggests that while non-reporting of incidents of violence against transgender persons cannot be reduced to the perception/experience of negative police attitudes, this is a crucial factor and one which has the effect of further marginalising and isolating transgender persons from mainstream society. In seeking to address the problem of violence against transgender persons it is important to deal with the issue of low reportage and police implication in this state of affairs. Moreover, strategies that improve reporting would thereby contribute to a statistical record and therefore a knowledge base that would register with the police given the current logic of knowledge production.

One solution would be to adopt a multi-agency approach to reporting and recording violence. This was hinted at by one of our group members, Pauline, who suggested that the Sydney Gender Centre, rather than the police station, might be the place where a report of violence would be made. [22] Indeed, the Gender Centre appears to have effectively operated in this way in relation to the assault victim whose transgender status was trumped, in the eyes of the police, by her "drug supplier" status. In addition to providing reporting sites that are remote from sites of institutional discrimination this might bring reporting together with other sources of support and access to the wider range of support services. At the same time participant experiences with the Housing Commission and in the provision of health services suggest that the experience of discrimination in the context of reporting violence is not police specific.

In response to questions about whether group members felt that gay and lesbian liaison officers were appropriate persons for them to approach about incidents of violence the response was typically negative. [23] The point was put by Kirk:

"You need a transgender person to liaison ... because how could they [gay and lesbian liaison officers], they, they couldn't, they could probably have empathy for you, but they wouldn't they'd understand but they wouldn't have, they wouldn't know what we go through you know. Or how, how could they uhm, counsel someone on something [24]

And Karen:

"I think because they're called gay and lesbian liaison officers it doesn't mean that they know anything about transgender. Sometimes they don't even know much about gay and lesbian issues. So how are they going to deal with the transgender issues. I myself wouldn't go to them not unless I knew they were transgender. It's like sending an Aboriginal person to someone who's an indigenous liaison officer and he's not even indigenous. I mean why would I want to go to someone who's white and talk about my issues. [25]

However Steven expressed an alternative view:

"if they were educated I'd feel safe. I don't care what their gender is, what they've got between their legs, what their sexuality is as a police officer or medical staff but if they were educated and, and empathetic around transgender issues, then I could [report incidents of violence to gay and lesbian liaison officers]". [26]

While there was universal support amongst group members for the creation of transgender liaison officers within the New South Wales Police Service our police interviewees offered a range of reasons why such a development was unlikely. Thus it was suggested that there was insufficient work to support a dedicated officer, [27] a factor which draws our attention to the importance of size in decisions about resource allocation. However, the main reason offered was tied to the claim that the formal police position is now focused on force wide policy development, education, and training. In the words of Cheryl Clarke: "so what we're trying to do is skill our officers to actually understand these issues and be able to deal with them appropriately as they come across them". [28]

In the absence of transgender liaison officers this police strategy might meet with some success. Thus Steven, while the only group member to do so, suggested that there might be circumstances in which he would report an incident of violence to the police irrespective of liaison officer status:

"

If I'm in Newtown because I know there's some Newtown police who are transgender friendly, If I'm in Surry Hills or even Marrickville I'd feel safe because I know certain coppers ... If I was in a country town anywhere out of Sydney forget about it. [29]

This suggests that, despite the negative experiences of the police recounted by group members, changes made to ensure that the police are "transgender friendly" might meet with some success. Indeed, nearly all of our group members singled out, and placed particular emphasis on, police education as a strategy to promote such a state of affairs.

Footnotes:

- [1] Authored by Andrew N Sharpe, Department of Law, Macquarie University and Dr Leslie J. Moran, Department of Law, Birkbeck College, University of London.
- [2] Transcript of interview with Cheryl Clarke, Sue Thompson and Sergeant Adrian Gover of the N.S.W. Police Service, 11th May 2000, per Thompson.
- [3] The key informant interviewees were Jackie Braw, Gay and Lesbian Liaison Officer with the Attorney-General's Department; Carole Rothschild, Senior Policy Officer in the Department of Women; Elizabeth Riley, Coordinator of the Sydney Gender Centre; norrie mAy-welby, Information and Support Worker for the Sex Workers Outreach Project (S.W.O.P.); and three members of the New South Wales Police Service, Sergeant Adrian Gover, Shift Supervisor at Kings Cross Station; Cheryl Clarke, Senior Programs Officer, Community Safety and Crime Prevention, Operational Programs Branch; and Sue Thompson, Police Gay and Lesbian Client Consultant.
- [4] An advertisement was placed in the transgender magazine, *Polare*, seeking participants for the study but due to little response we had to rely on Elizabeth Riley, Coordinator of the Sydney Gender Centre, who gathered the group together through informal means.
- [5] In order to maintain the privacy of group participants the names used are not their real names.
- [6] There appears to be little generally in the way of statistics about levels of reporting of violence against transgender persons. Thus no mention of reporting levels is made in the major U.S. and Australian studies (see "The First National Survey of Transgender Violence" GenderPAC 1997; R. Perkins et. al. (1994) "Transgender Lifestyles and H.I.V. / AIDS Risk: National Transgender H.I.V. / AIDS Needs Assessment Project").
- [7] Transcript of interview with Cheryl Clarke, Sue Thompson and Sergeant Adrian Gover of the N.S.W. Police Service, 11th May 2000, per Thompson.
- [8] *ibid.*
- [9] Focus Group Two (F.G.2) transcript, 19th July 2000 per Pauline.
- [10] Focus Group One (F.G.1) transcript 12th July 2000.
- [11] *ibid.*
- [12] *ibid.*
- [13] F.G.2 transcript above note 8.
- [14] *ibid.*
- [15] *ibid.*
- [16] *ibid.*
- [17] *ibid.*
- [18] B. Stanko and P. Curry (1997) *Homophobic Violence and the 'Self' at Risk: Interrogating the Boundaries* Social and Legal Studies 6(4):513-532.
- [19] Transcript of interview with the police above note 6.
- [20] Transcript of interview with the police above note 6 per Thompson.
- [21] For example, this might raise questions about homosexual advance defence.
- [22] F.G.2 transcript above note 8.
- [23] *ibid.* There are presently 134 Gay and Lesbian Liaison Officers (G.L.O.W.s) within the N.S.W. Police Service. There are, as yet, no transgender liaison officers.
- [24] *ibid.*
- [25] *ibid.*
- [26] *ibid.*
- [27] Transcript of interview with the police above note 6, per Clarke.
- [28] *ibid.* One concern that appeared to inform this policy is the past, as well as the existing, practice of non-specialist officers referring work to specialists where there is only a tenuous link to the area of specialisation thereby overloading the specialist officers and diverting them from their primary work.
- [29] F.G.2 transcript above note 8.
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Suicide

A Painful Reality

by Sarah J. Rutherford

Article appeared in Polare magazine: April 2001 Last Update: October 2013 Last Reviewed: September 2015



Suicide is a reality for many of us, so why the hell can't we find a way to make it no longer an option?

Suicide, It's not a nice thing, but it is a reality for many people in the transsexual community, as proven by the many who have tried and failed, and those who sadly, succeeded.

Take the churches for instance, in many cases ... the lack of knowledge of transsexual problems and difficulties, is almost on the ridiculous level, their ignorance of us borders on the stupid

The truth is, the suicide rate among our community is unacceptably high and reflects the many difficulties most of us face as we try not only to transition, but go on to rebuild our lives. It naturally follows that we also would like to live them happily as our real selves, not the facile apparition that society forced upon because of what is between our legs, instead of what is between our ears. Crude, but succinct, society expects too much, and people suffer because of such absurdity.

As one who has lived with the idea of suicide since she was eight, I can understand some of the problems and reasons for its cause. Many suicides are not premeditated, but spontaneous, perhaps because of an event, illness, or chronic pain from injuries, family break-up, or a multitude of other reasons.

Often the suicide happens while the person is not completely rational, but more often from frustration, anger, a feeling that whatever the future brings, the desired outcome will never be reachable. If suicidal thoughts are a partner to being transsexual, then one must also make allowances also for depression, which in itself can exacerbate all problems and make everything seem totally beyond control or reach.

Depression is an illness, not just an odd sensation between the ears, or for that matter, a human failing and weakness. Depression is a killer, and many people have it and are unaware of the fact. The fact that society views depression in a negative way, as a failing of people in some cases, does not help people who suffer from it. Being transsexual and deeply depressed is a recipe for trouble and danger, danger which people should always be aware of.

It is hard not to be negative when we live with so much negativity in our lives. For some it's a problematic or abusive childhood, for other it's a lack of tolerance from the public at large, including former peers, old friends, family, work or other involvement in the community. However there are other areas which sadly, need better educating.

Take the churches for instance, in many cases, especially those of a more fundamental nature, the lack of knowledge of transsexual problems and difficulties, is almost on the ridiculous level, their ignorance of us borders on the stupid. For them we are evil, possessed of the devil, or any other form of nonsense. Get baptized they claim, and be saved and cured all at the same time. Oh, by the way, many claim God didn't make us, we're a product of our own lack of faith, etc.

Justice Kirby, in a recent documentary on S.B.S., regarding Gay hate, stated clearly that church leaders especially, should not preach such rubbish and untruths from the pulpit. In doing so they instil a sense of righteousness in some of their parishioners, and that can, and sometimes does, lead to acts of minor abuse, right up to violence and complete intolerance.

The reality is they flout the laws of discrimination by, putting it bluntly, preaching a form of hatred and vilification, which like the bible, some of their flock take literally without forethought or discussion. It comes from the leaders, therefore how can it be wrong.

What Justice Kirby made quite clear, was the fact that change is happening, like it or not, and it was time for a lot of organisations and people to make an effort to get into the twenty-first century, instead of hiding in the inadequate mentality of the first. Tolerance, truth and understanding do not come from people espousing lies or misrepresentations based on nothing more than convenient misinterpretation, intolerance, ignorance or blatant bigotry.

There are other pressures upon us however. Parental, dislocation from family and friends in order for us to be as we should be. Isolation and ostracisation, can have devastating effects on people who have until their transition starting, led often fairly safe, if not perfect lives. Stability is a firm casualty of being transsexual, and going through the transition. How can anyone be expected to re-build

their life, when all around, the world they knew is crumbling, as rejection after rejection pushes them into greater isolation.

Job loss, family loss, environment loss, social losses, i.e., clubs, watering holes, coaching or playing sports or martial arts, even rejection from their own faith, general community involvement at all levels. It's worth noting for those who use religious argument against us, that Jesus Christ went out into the wilderness voluntarily, we get tossed into the human wilderness, not just for days, but usually years, maybe even half our lives, because we tell the truth about ourselves.

Our honesty is not respected, but punished, but while we lied or hid the truth about being transsexual, society praised us. Is it any wonder then that some find it all too much and take what some would say, is the easy way out. Take it from someone who has been there and done that, suicide is not always easy, otherwise we would never have failures!

To add to this list of minor problems we transsexual folk suffer, there is also the spectre of those who had bad childhoods. Being raised in children's homes, or other institutions, often abused, scarred for life because the system that supposedly protected them, failed miserably, and probably hasn't changed a great deal in recent years. On the other hand some grew up in sound homes, with God fearing parents, who didn't understand what the hell was the problem, except their son/daughter suddenly went weird and wanted to change sex!

So much for outside concerns, but what of the inner struggle, the screaming need to change and be free, instead of being locked up in a body that makes no sense. As a kid my transsexual feelings emerged when I was four, by eight I understood all too well what the problem was, and the struggle was ... well, use your imagination.

How are the young expected to cope with the need to change to their real selves. I am forty-nine, and I still struggle in many ways with myself, though thankfully the difficulties are not generally with the gender circumstance. Persistent public disapproval, at all levels is painful, but so is finding the money I need to find to fulfil my dream and give me a real chance to start life as the complete me.

Money is always a problem with many transsexual people, the high cost of surgery and drugs, and other needs, is always difficult, more so for those who find getting work almost impossible. How many people get through the transition to the point of surgery, but then simply never complete the journey, because they cannot earn, borrow or raise the money? Perhaps Governments should consider a little more about our needs.

Indeed some suicides could be prevented if more funds were available, such as low interest loans to approved applicants, whose means exclude them from the usual sources of money. For every transsexual person who goes through surgery, how many don't, simply for lack of funds? How many take their lives because it seems that option is all they have left?

Okay, so much for the reasons and probable causes of suicide, how do we change things for the better? How do we give people who are at risk of suicide, a better chance to survive, to cope, to make their journey through transition a successful one?

Do we need better counselling, more counsellors, more places where such services can be reached, and easily? Telephone lines, agony aunts, or even the net, what is to stop someone opening a help line for transsexual people with problems? It might sound crazy, but when it comes to saving lives, anything is worth a try.

Perhaps we should attempt to raise the public understanding, with more exposure of transsexual issues, and better facts about the real problems we face, the losses we suffer, and the pain we go through. The truth would be a welcome break from the usual claptrap and media beat-ups that usually cater more for sensational viewer pleasure.

Should there be more publications available dealing with the human side of being transsexual, not just the medical jargon and material that seems to just about fill the internet. Is there room for educational intervention at some stage during a person's school life? Surely by the time a person reaches fifteen or sixteen, they all too well know what differences there are in the community, but by then their ideas may well be ill-informed, fixed and immutable.

Perhaps education of the differences at all levels of human life, including gays and transsexual people, would make life for people like us a damn sight more tolerable. There again if we educated the negative aspect out of being different, everyone who is different would benefit.

Is there room for more medical exposure of the condition? It is a recognised medical condition. Perhaps doctors in the know should be more extrovert and forthright about their understanding, especially to colleagues still ignorant or indifferent to the fact. Would national conferencing be out of the question? Bringing together not just the professionals, but transsexual people, their kin and anyone else in the community with an interest to create change or understand the real side of being transsexual. To discuss all manner of issues, and to try to find answers or solutions, options or compromises.

If the suicide rate is high, it is because services don't exist where they should, are grossly inadequate or mental health service people have little or no understanding of us.

Internally we could have better communication between transsexual organisations, groups, support networks, etc. Not only for talking, but sharing information, building a national database that could possibly cover every problem or difficulty with being transsexual. Why we could eventually create a transsexual guide, everything you wanted to know about being transsexual, and were too bloody scared to ask, or didn't know who to ask or where to go. Let's be honest, the more open the exposure, the more information that is made available, surely the better it will eventually be, if not for us now, but everyone in our future. Isn't that a target worth aiming at?

Enough said, I have probably exasperated the point to exhaustion, but with good intention.

Suicide is a reality for many of us, so why the hell can't we find a way to make it no longer an option? If change is going to happen, we

must keep abreast of the difficulties it will inevitably bring, and we must be prepared to work together not only for our own benefit, but all those yet to follow our path.

It is one thing to have a wealth of knowledge, it is another not to share it, or make it clear to all with eyes to read. Whether by the net, books, leaflets, posters, films, television, radio, newspapers, magazines, whatever, there are channels out there we could use to our advantage, so what is to stop us, aside from a little prejudice and intolerance, a little ignorance and fear, or even a culture of misunderstanding and fabrications.

If you don't talk, you cannot tell, if you don't write, how can others read, and if you don't share, how can anyone be expected to understand?

We have the means, we have the desire, we have a great need, all we have to do is have the determination to get out and do everything we can in the future to make our lives that little bit easier.

Too many have died, be that one or a thousand, it is too many, and also bear this in mind, for everyone who makes it to the start of transition, how many never do, or are too fearful to try? How many of those commit suicide and no one knows why? I don't want to even try and calculate what numbers might be involved, because the only number I want to see in the future, where it asks for the statistic on transsexual related suicides, is zero, no greater.

Let's encourage and support life and success, not have to bury our friends who failed, because society failed to be tolerant, caring, or understanding of what it is like, to be different.

Polare Magazine is published quarterly in Australia by The Gender Centre Inc., which is funded by the Department of Family & Community Services under the S.A.A.P. program and supported by the N.S.W. Health Department through the AIDS and Infectious Diseases Branch. Polare provides a forum for discussion and debate on gender issues. Unsolicited contributions are welcome, the editor reserves the right to edit such contributions without notification. Any submission which appears in Polare may be published on our internet site. Opinions expressed in this publication do not necessarily reflect those of the Editor, The Gender Centre Inc., the Department of Family & Community Services or the N.S.W. Department of Health.

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(The Gender Centre advise that this article may not be 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.)

Book Review: Transgender Warriors

Making History from Joan of Arc to Dennis Rodman

Reviewed by Bent Bastard

Article appeared in Polare magazine: April 2001 Last Update: October 2013 Last Reviewed: September 2015



Transgender Warriors, by Leslie Feinberg.

Transgender Warriors: Making History from Joan of Arc to Dennis Rodman

by Leslie Feinberg
Published by Beacon Press, 30th
June 1997
I.S.B.N.-13 978 0807079416

Feinberg not only exposes the transphobia of modern western culture, he also witnesses the ease with which our culture condones the oppression of people's differences.

Leslie Feinberg is a female-to-male transgender warrior. As part of the (not-so-new) transgender liberation movement, like many in *Transgender Warriors Making of History from Joan of Arc to Dennis Rodman*, Feinberg seeks the liberation of oppression for all who transgress gender. Many in the transgender liberation movement are not wanting merely to settle into the "traditional" lifestyle of the person of their chosen sex, but activating themselves, exposing the strengths that transgender people possess collectively to fight the continued oppression of transgender people in western cultures.

Feinberg presents in *Transgender Warriors* an analysis of the state of being of people who transgress gender expression in human societies, this is more than an expression of pride in the existence of transgenderism and transgender people (although it is that too),

Transgender Warriors wishes to expose the hidden histories of people who transgress gender in western history. Namely the fact that western development through the past few millennia has not only seen the transition from communal living to the nation state, but the increasingly ominous development of social oppression, especially in regards to transgender expression.

According to the history Feinberg reveals transgender expression has had a strong place within western cultures: reverence in Pagan rituals, Joan Of Arc's leadership, and rebels against feudal overlords dressed in "women's" clothing to fight against road tolls to name just a few examples retold herein. We thus witness that indeed such expression has not always been stigmatised or illegitimate, but indeed celebrated, mostly (though not solely) among the "masses". From this perspective Feinberg follows the historical climb of capitalism, and in doing so challenges the infrastructure of capitalism and its relationship with the "masses" (i.e. the working classes).

If transgression of gender was once ritualised, spiritualised and admired in communal living western cultures, how has the "development" of economics over the millennia had such a fatal affect on the transgender population of western cultures? Feinberg suggests that the orchestrated effort of capitalists to turn working class peoples against one another was to prevent the working class from organising together against capitalism. By creating "oppression", "suspicion" and xenophobic, homophobic, and associated misanthropic feelings, capitalists ensured the survival of a system that maintained the status quo. If as Marx suggested religion is the opium of the masses, then this style of social oppression is how the capitalists' maintain their hold over the "masses".

Feinberg by no means paints us a picture whereby people who transgress gender were hapless souls lost in the tide of capitalism. People who transgress gender have persisted to exist against this plight, as too all "oppressed" peoples. Transgender people have maintained a strong and very much a rebellious presence in history. Transgender warriors challenged the oppressive forces in many important epochs of the last few millennia, these individuals risked death instead of denying themselves an expression of a gender they chose for themselves.

As a Communist in the 1970s, Leslie Feinberg "came-out" to Communist colleagues about being a transgendered female-to-male person. It is from this background that Feinberg analysed capitalism, its oppression of the working classes, while simultaneously discovering that a very long, proud and revered transgender history had been hidden from us, further, Feinberg analysed the part that economic reformations over the past three millennium has played in the omission and oppression of transgender expression in modern western societies.

By exploring the hidden histories of transgressions of gender in western culture over the last few millennia Feinberg not only exposes the transphobia of modern western culture, Feinberg also witnesses the ease with which our culture condones the oppression of people's differences, and denies a history that makes us feel uncomfortable today. This distortion of historical truth not only deflects true representations of western history (conveniently), it contributes to the way that people who transgress gender today feel about themselves.

Feinberg personalises this oppression: if only young trans people could hear these stories their self-esteem could be greatly improved. And it is here that *Transgender Warriors* gets its power, from the realisation that the oppression of people who transgress gender in western cultures is socially dependent and is not universal or natural. More significantly *Transgender Warriors* is potentially inspirational for many young, and not so young, transgender people for whom there has been no mention of like-minded people, let alone a full history of transgender expression. *Transgender Warriors* can only add to the quality of people's lived experiences and to the self-esteem of many.


Transgender Warriors is a call to arms, almost literally, it is a reclamation of a long lost past, a past denied, hidden. Feinberg not only draws attention to the ways in which the machinations of capitalism oppress the working class.

Feinberg doesn't just provide a "motive" for the oppression that working class people inflict upon one another, Feinberg articulates that transgression of gender has always existed, and still exists in forms, in all human societies, despite the oppression, despite the fear of death, people want to choose for themselves where on the gender expression continuum they wish to exist. By reflecting on the "truth" as presented here, we not only reclaim a past, but we offer a more positive future for those of us who presently transgress gender and suffer, fear or die at the hands of a gender rigid society.

The transgender liberation movement takes its power not from the anger of individuals, not from the fear of death, but from the hope of a better future within western cultures. *Transgender Warriors* has lent itself to this hope, and revealed that life in western cultures has not always been this way. Societies are fluid. Societies change. western cultures are no exemption, ironically much like those individuals it presently oppresses.

People who transgress gender have not always been oppressed, ridiculed and killed. They were once revered as spiritual entities, and honoured from birth. However liberation is not won overnight, transgender liberation will be long journey, a long battle to reclaim the history of the transgender warriors that have proceeded us, to inspire the transgender warriors that will follow us, and to release the transgender warriors within each and every one of us.

Leslie Feinberg

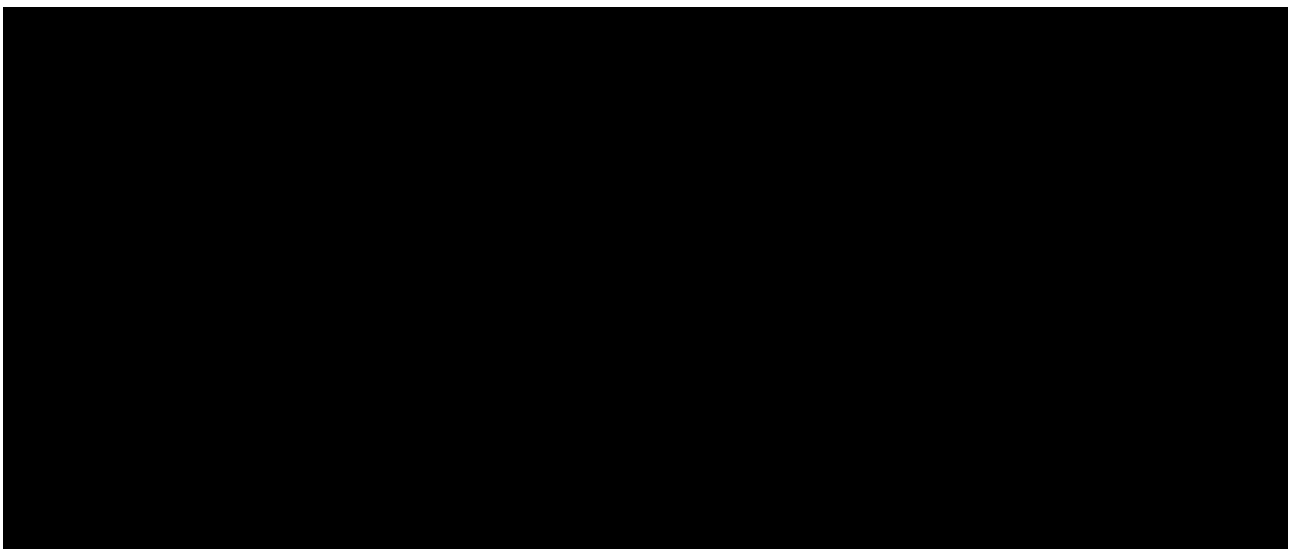
From Wikipedia:  Leslie Feinberg was an American transgender, butch lesbian activist and author. Feinberg's first novel, *Stone Butch Blues*, won the Lambda Literary Award and the 1994 American Library Association Gay & Lesbian Book Award. While there are parallels to Feinberg's experiences as a working-class dyke, the work is not an autobiography. Feinberg authored two non-fiction books, *Trans Liberation: Beyond Pink or Blue* and *Transgender Warriors: Making History*; the novel *Drag King Dreams*; and *Rainbow Solidarity in Defense of Cuba* - a compilation of 25 journalistic articles.



Feinberg was a member of the Workers World Party and a managing editor of Workers World newspaper. Feinberg's writings on history, *Lavender & Red*, frequently appeared in the Workers World newspaper. Feinberg was awarded an honorary doctorate from Starr King School for the Ministry for transgender and social justice work. In the mid and late 1990s Feinberg was involved in Camp Trans.

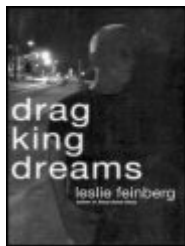
Feinberg described herself as "an anti-racist white, working-class, secular Jewish, transgender, lesbian, female, revolutionary communist". Feinberg stated in a 2006 interview that her preferred pronouns varied depending on context. "For me, pronouns are always placed within context. I am female-bodied, I am a butch lesbian, a transgender lesbian - referring to me as 'she/her' is appropriate, particularly in a non-trans setting in which referring to me as 'he' would appear to resolve the social contradiction between my birth sex and gender expression and render my transgender expression invisible. I like the gender neutral pronoun 'ze/hir' because it makes it impossible to hold on to gender/sex/sexuality assumptions about a person you're about to meet or you've just met. And in an all trans setting, referring to me as 'he/him' honors my gender expression in the same way that referring to my sister drag queens as 'she/her' does."

Feinberg died on November 15, 2014, of complications due to tick-borne infections, including chronic Lyme disease, which she suffered from since the 1970s.



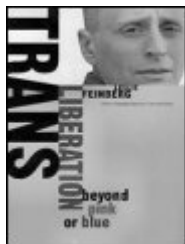
"Beyond Pink or Blue: The Transgender Movement, Yesterday, Today and the Future is courtesy of You Tube.

The Centre for Culture, Gender, and Sexuality is pleased to announce that world-renowned social activist and author Leslie Feinberg will be visiting Sonoma State University. Feinberg's first novel, *Stone Butch Blues* (1993), has received a wildly popular response in the United States and has been translated into Chinese, German, Italian, Dutch, Turkish, Slovenian and Hebrew. Feinberg's historical work, *Transgender Warriors: Making History from Joan of Arc to RuPaul* is the first analysis of the historical roots of transgender oppression and *Trans Liberation: Beyond Pink or Blue* (Beacon) contains a compilation of speeches by the author with written portraits by other trans activists. *Drag King Dreams*, Feinberg's second published novel, was released in March 2006. Feinberg has toured the country, speaking at Pride rallies and protest marches, and at scores of colleges and universities.



Drag King Dreams
Author: Leslie Feinberg
Publisher: Seal Press (2006)
I.S.B.N.-13 978 0786717637

[From Amazon Books](#) From award-winning and best-selling author, Leslie Feinberg, comes *Drag King Dreams*, the story of Max Rabinowitz, a butch lesbian bartender at an East Village club where drag kings, dykes dressed as men, perform. A veteran of the women's and gay movement of the past thirty years, Max's mid-life crisis hits in the midst of the post 9/11 world. Max is lonely and uncertain about her future — fearful, in fact, of America's future with its War on Terror and War in Iraq — with only a core group of friends to turn to for reassurance. Max is shaken from her crisis, however, by the news that her friend Vickie, a transvestite, has been found murdered on her way home late one night. As the community of cross-dressers, drag queens, lesbian and gay men, and "genderqueers" of all kinds stand up together in the face of this tragedy, Max taps into the activist spirit she thought had long disappeared and for the first time in years discovers hope for her future.



Trans Liberation: Beyond Pink or Blue
Author: Leslie Feinberg
Publisher: Beacon Press (1999)
I.S.B.N.-13 978 0807079515

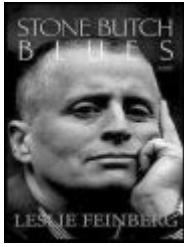
[From Amazon Books](#) Although readers familiar with Feinberg's earlier books will not find much new material here, this collection of hir speeches, presented with a few essays by other transgendered writers, serves as a good introduction to Feinberg's ideas about the complexities of gender expression and to hir vision for a future "beyond pink or blue". As someone who faces oppression, incomprehension, and violence every day on the basis of hir appearance and the refusal to adhere to a rigid gender designation (Feinberg was once denied emergency medical treatment for endocarditis by a doctor who dismissed hir angrily as "a very troubled person"), Feinberg is in an excellent position to refute the shallow assumptions of the medical establishment and the mainstream media, as well as the more extreme views of the political and religious right. Most compelling are hir arguments on the importance of a broad-based multi-issue coalition among gay, lesbian, bisexual, and transgendered people, an alliance that could easily extend to other progressive groups. "Everyone who is under the gun of reaction and economic violence", Feinberg contends, "is a potential ally".




Transgender Warriors : Making History from Joan of Arc to Dennis Rodman
Author: Leslie Feinberg
Publisher: Beacon Press (1997)
I.S.B.N.-13 978 0807079416

[From Amazon Books](#) Activist Feinberg (*Stone Butch Blues*, *Firebrand*, 1993) here presents a sweeping history that many others have glossed over or denied: zie traces transgender lives, identities, and expression from communal societies to the present day. Furthermore, zie provides theoretical insight while always remaining accessible to the general reader. Feinberg argues that the current devaluation and oppression of trans peoples is inextricably linked to the emergence of hierarchical class-based societal forms and to shifts from matrilineal to patriarchal social organization. Hir book really comes alive, however, through hir infusion of personal narrative into the historical material? The book ultimately is Feinberg's personal journey to find some representative place in a history that usually has denied or denigrated trans existence. Illustrated throughout, hir book is finally a "portrait gallery" of photographs accompanied by statements from and biographies of people representing parts of the transgender spectrum. Appendixes include lists of organizations and publications. A valuable resource for researchers and an important personal and historical account of an under examined social group, this is recommended for both public and academic libraries.

Stone Butch Blues
Author: Leslie Feinberg



Publisher: Firebrand Books (1993)
I.S.B.N.-13 978 1563410303

From Amazon Books  Published in 1993, this brave, original novel is considered to be the finest account ever written of the complexities of a transgendered existence. Woman or man? That's the question that rages like a storm around Jess Goldberg, clouding her life and her identity. Growing up differently gendered in a blue-collar town in the 1950s, coming out as a butch in the bars and factories of the prefeminist '60s, deciding to pass as a man in order to survive when she is left without work or a community in the early '70s. This powerful, provocative and deeply moving novel sees Jess coming full circle, she learns to accept the complexities of being a transgendered person in a world demanding simple explanations: a he-she emerging whole, weathering the turbulence.

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Era of the Gender-Crosser

Buoyed by the Success of Gay Liberation and Freed by Medical Advances, The Transgender Community Has Found a Voice

by Mary McNamara, [Los Angeles Times](#) 

Article appeared in Polare magazine: April 2001 Last Update: October 2013 Last Reviewed: September 2015



Patrick and Matt's son was born into a family of two male parents and a world that ten years ago did not even exist.

Once upon a time in San Francisco, two people fell in love, broke up, got back together, joined their names and had a baby. A conventional love story, except for one detail: When Patrick and Matt Califia-Rice met ten years ago, they were women.

Women who had felt, from the time they were small, that they should be men.

Matt was the first to exchange desire for reality. On the day the two broke up, he began taking testosterone. He grew a beard, had his breasts removed.

They got back together five years later, and though they could not legally marry, they took each other's names. Patrick, who was still living as a woman, began thinking that he too would become a man.

Then things got complicated.

The couple decided they wanted to have a child. With their unusual history, adoption would be difficult if not impossible, and Patrick had undergone a hysterectomy for medical reasons years before.

The only option, they felt, was for Matt to conceive. Plagued by hormone induced migraines, he had already stopped taking testosterone and had begun to menstruate again; his doctor had advised a hysterectomy.

Instead, they found several sperm donors, and the handsome, bearded thirty-seven-year-old computer network analyst entered the world of morning sickness and water retention. During Matt's third trimester, Patrick began taking testosterone and contemplating chest surgery.

A year ago, their son was born, into a family of two male parents and a world that ten years ago did not even exist.

Since the story of Christine Jorgenson hit the New York tabloids in 1952, transsexuals have hovered on the edge of public imagination, stock characters in a myth that went something like this: Due to a mistake in nature or biology, a woman is born trapped in a man's body. After years of denial and mental torture, he has a sex change operation and goes on to live life as a traditional heterosexual woman, revealing her past only as the result of a medical emergency or as a guest on 'Jerry Springer'.

But in 2001, that scenario is outdated, if not obsolete.

Gender identity disorder, as defined in medical manuals, is characterised by a 'persistent discomfort about one's assigned sex'. It has no known cause. Numbers are hard to come by in a still mostly closeted population, but those who are 'out' make up an exceedingly diverse group. There are as many female-to-male transsexuals as male-to-female, and they come from every race, religion and cultural background.

Some transsexuals are straight, some are gay and some are bisexual. Some have children before they make the change, some have children after.

Many have sexual reassignment surgery, many do not; many take hormones to change their secondary sex characteristics, some do not; many dress and live as close to the traditional definition of male and female as possible; others are androgynous.

In fact, transsexual, with its historical implications of surgery, is being replaced by the broader term 'transgender', which includes cross-dressers, people who identify themselves as stone butch lesbians or flaming queens and anyone who feels or acts outside the traditional gender norms. Within the transgender community, the word 'transition' has become a verb to describe what used to be called a 'sex change'.

... brought together by the Internet, the transgender community has emerged in the last five years as a new voice in social activism.

Buoyed by the success of the gay and lesbian liberation movement, freed from enforced isolation by changes in the medical and psychiatric establishment, and brought together by the Internet, the transgender community has emerged in the last five years as a new voice in social activism.

This voice suggests that, although gender is an identity we are born with, an identity that no amount of social influence can sway, it is too great and varied a force to shoehorn into those ubiquitous boxes marked 'F' and 'M'. While human desires for love, passion, work, respect, friends, family remain constant, the way those desires are felt and expressed cannot always be categorized at the moment of birth. Anatomy, as feminists have long argued, is not destiny.

"This is the last phase of the sexual identity movement," says Vern Bullough, a [U.S.C.](#) adjunct professor of nursing who has written extensively on sexuality in America. "The community is much more organised than it was five years ago. It's learning to live with its own differences, and becoming more mainstream. The long-term effect will be interesting. Certainly, it will blur gender lines even further."

It seems a natural extension of arguments made by feminists, gays and lesbians and transgender people have found solace, aid and allies in both those communities. But they have also encountered rejection and hostility. Change is difficult, even for revolutionaries.

"Many mixed-race people are saying that race, as a means of categorizing people, no longer works," says Robert Dawidoff, a history professor at Claremont Graduate University. "Transgender people are showing us that gender, as a similar construct, has no meaning either. Which is, of course, very frightening to many people."

A Difficult Pregnancy for Matt and Patrick

For Matt and Patrick, that was clear right away. It was a difficult pregnancy, physically and emotionally. Tasks most couples take for granted, finding a doctor and a birthing class, telling family and friends became dramatic events.

To strangers, Matt looked like a man trying to hide a beer belly with bigger and bigger overalls.

His appearance at a birthing class caused a stir. "We had found an instructor whose partner was transgender," says Patrick, a psychotherapist and the author of several books, including *Sex Changes: The Politics of Transgenderism* (Cleis Press, 1997), "so that was no problem. But the class was pretty frosty."

"Matt was very clearly a man when he walked in," says midwife Kim Touevs, whose classes are geared toward lesbian families. "And he was also very clearly pregnant. Everyone was very respectful, but they were waiting to hear what Pat and Matt had to say in the introduction circle."

The two were very open, says Touevs, who has since had two other transgender parents in her class, and by the end of the session, everyone seemed comfortable, or as comfortable as a room full of expectant couples can be.

"We had to buy a lot of chocolate," Patrick says. "I have always found that it's kind of hard for people to say nasty things after you've fed them."

A man, however, cannot have a baby without someone taking umbrage, and to the couple's dismay, the most hurtful criticism came from some of their friends.

In San Francisco, they were part of one of the largest and most visible transgender communities in the world. But within that world, they were a scandal.

"A lot of female-to-male transsexuals are very invested in seeing themselves as 'real men', says Patrick. "And they said 'real men' don't have babies. But Matt said 'real men' don't have hysterectomies either. He refused to be shamed."


"One of my girlfriends said during an argument, 'I can't believe you were ever a woman' says James Green."

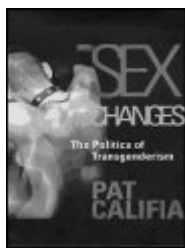
And I said, "I wasn't. That's the whole point. I was something else."

How does he think of himself now?

"I am a man," he says, "with an unusual history."

Patrick Califia

From Wikipedia:  Patrick Califia, born in 1954 in Texas [U.S.A.](#), is a writer of non-fiction essays about sexuality and erotic fiction and poetry. Assigned female at birth, he grew up in a Mormon family and came-out as lesbian in 1971 while living in Salt Lake City, Utah. In 1973 he moved to San Francisco, California, and worked on the San Francisco Sex Information switchboard. With the founding of Samois, a lesbian-feminist [B.D.S.M.](#) organization, he shifted focus from having articles published in lesbian, gay and feminist magazines, to the lesbian experience of [B.D.S.M.](#) and made a major contribution to the diversification of the leather subculture. Califia founded the leatherwomen's quarterly *Venus Infers* in 1992, and in 1996 was co-editor of *The Second Coming: A Leatherdyke Reader*. During this period Califia was both writing about queer studies and gender identity and coming to terms with these issues on a personal level. During the mid-1990s, Califia decided to transition, adopting the name of Patrick. Since the 1990s, Califia has had fibromyalgia which has reduced his ability to type or write. He is currently in private practice as a therapist (he is a licensed marriage therapist and family therapist in the state of California). He continues to publish his work and attend leather community events.




Sex Changes: The Politics of Transgenderism

Author: Pat Califia

Publisher: Cleis Press (1997)

I.S.B.N.-13 978-1573440721

From Amazon Books:  *Sex Changes: The Politics of Transgenderism* is Califia's meticulously researched book based on an astute reading of the available literature and in-depth interviews with gender transgressors who "opened their lives, minds, hearts, and bedrooms to the gaze of strangers". Writing about both male-to-female and female-to-male transsexuals, Califia examines the lives of early transgender pioneers like Christine Jorgenson, Jan Morris, Renee Richards and

Mark Rees, contemporary transgender activists like Leslie Feinberg and Kate Bornstein, and partners of transgendered people like Minnie Bruce Pratt. Califia scrutinizes feminist resistance to transsexuals occupying women's space, the Christian Right's backlash against transsexuals, and the appropriation of the berdache and other differently-gendered by gay historians to prove the universal existence of homosexuality. Finally, *Sex Changes* explores the future of gender.



Advocate Adviser

Author: Pat Califia

Publisher: Alyson Books (June 1991)

I.S.B.N.-13 978-1555831699

From Amazon Books:  Lesbians and gay men have often felt ignored by traditional advice columnists like "Dear Abby", "Ann Landers" or "Miss Manners". Fortunately the national gay/lesbian weekly *The Advocate* offered an advice column, "The Advocate Adviser", for them ten years ago.

This book collects and groups some of the columns into categories like "Meeting People" or "Coming Out" or "Sexual Problems" with an excellent "Resources" section at the end. Califia's responses artfully combine practical advice with a supportive, often humorous delivery. Given that many of the queries reflect consenting adult sexual behaviour, he is truthful and refreshingly non-judgmental. Califia plainly calls it as he sees it, and while some of the language is raw, it is not offensive. Recommended for all public libraries. - Richard Drezen, Merrill Lynch Capital Markets Library, New York. Copyright 1991 Reed Business Information, Inc.

Polare Magazine is published quarterly in Australia by The Gender Centre Inc., which is funded by the Department of Family & Community Services under the S.A.A.P. program and supported by the N.S.W. Health Department through the AIDS and Infectious Diseases Branch. Polare provides a forum for discussion and debate on gender issues. Unsolicited contributions are welcome, the editor reserves the right to edit such contributions without notification. Any submission which appears in Polare may be published on our internet site. Opinions expressed in this publication do not necessarily reflect those of the Editor, The Gender Centre Inc., the Department of Family & Community Services or the N.S.W. Department of Health.

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Brazil's Unconventional AIDS Fight

An H.I.V.-Infected Transsexual is among unlikely Leaders of the Hailed Program

by Miriam Jordan, Wall Street Journal, U.S.A.

Article appeared in Polare magazine: April 2001 Last Update: October 2013 Last Reviewed: September 2015



Jacqueline Rocha, extremely committed and serious about care and prevention.

Sao Paulo, Brazil: Jacqueline Rocha turns heads. But she isn't the latest Brazilian fashion model to conquer the catwalks. Ms. Rocha, nee Jacques Rocha Cortes, is a transsexual who is infected with H.I.V., the virus that causes AIDS.

Among other things, Ms. Rocha has taken Brasilia to task over a shortage of medicine for AIDS-related infections.

Petite with shoulder-length streaked brown hair, Ms. Rocha has emerged as a leader in one of the developing world's most widely heralded anti-AIDS programs. The former English teacher is frequently consulted by Brazil's government and has been invited to speak on the epidemic in countries from the U.S.A. to South Africa.

Few nations would embrace a transsexual for any cause, let alone an issue like AIDS, which has to struggle to gain the attention of mainstream society. But there was Ms. Rocha last November, sitting beside Brazilian Health Minister Jose Serra at an international AIDS conference in Rio de Janeiro. "It is absolutely natural for us to see her share the stage with our health minister," says Paulo Teixeira, chief of Brazil's AIDS program. "Jacqueline is a superb activist."

Brazil's acclaimed AIDS program involves more than just the free distribution of local knock-offs of patented drugs for people with H.I.V.. Latin America's biggest country also serves up an unconventional but potent mix of activists, including the forty-one-year-old Ms. Rocha, Roman Catholic priests and government officials.

Even a military-police officer has joined the campaign, volunteering to run Brazil's first halfway house for people afflicted with AIDS after the program's transvestite founder died. "I felt a desire to contribute in some way," says Lt. Clecio Tadeu. "The sexual habits of the needy are beside the point."

This broad coalition impresses international health officials, who are used to antagonism between governments and advocacy organisations in developing countries.

"Brazil has the ability to involve diverse groups in the fight against AIDS," says Fernando Zacarias, the AIDS coordinator at the Pan-American Health Organisation in Washington, D.C. "It reflects an openness about the realities of life that most countries lack."

Ms. Rocha serves on the National AIDS Commission, a body that discusses prevention, care and control of the disease.

Also on the commission, along with Brazilian bureaucrats and scientists, are prostitutes and drug users. "Not a single ad campaign airs without consulting all members," says Health Ministry spokesman Flavio Guilherme de Souza.

"It makes absolutely no difference that Ms. Rocha is a transsexual," notes Pedro Chequer, a former head of Brazil's AIDS program who is now the regional chief for UNAIDS, a United Nations program. He came to know Ms. Rocha through her e-mail messages, hundreds of them.

"She was always critiquing, demanding, bringing facts to our attention about the epidemic," he says. "She is extremely committed and serious about care and prevention."

Among other things, Ms. Rocha has taken Brasilia to task over a shortage of medicine for AIDS-related infections. She has pressed the government for assurances that locally produced AIDS drugs will meet the same standards as those made in more developed countries.

She has alerted officials to rights violations, such as discrimination against H.I.V.-positive Brazilians in the workplace.

"Our goal is to attain a better quality of life for those with AIDS," says Ms. Rocha.

"The way to achieve that is by talking to the government at all levels, local, state and federal."

Ms. Rocha was one of three sons in a family in Niteroi, across the bay from Rio de Janeiro. More like her two sisters than her brawny and hirsute brothers, Ms. Rocha was feminine, though endowed with a pronounced square jaw. She is now receiving hormone treatment and is hoping to undergo surgery to complete her sex change later this year. Ms. Rocha contracted H.I.V. in 1994 from a male partner.

At the time, Brazil wasn't yet passing out a cocktail of anti-AIDS drugs. Ms. Rocha participated in a pilot program of drug distribution in 1995, and has been on medication ever since.

"Without the cocktail, I wouldn't be on the planet today," she says, though her first combination of drugs raised her cholesterol and contributed to a heart attack in 1999. Her doctor changed one drug, and now "I am free to exercise, swim and dance," she says.

As the drugs helped thousands of afflicted Brazilians regain their strength, Ms. Rocha and others felt the need for H.I.V.-positive people to "reinsert ourselves in society," she says. "We were tired of being victimised."

In 1996, she joined the recently formed Brazilian National Network of People Living With H.I.V./ AIDS, where she quickly stood out for her oratory and leadership skills. Today she is co-leader of the network in Brazil.

Last year, Ms. Rocha was a key organiser of Forum 2000, the AIDS conference where she appeared with Brazil's health minister. Ms. Rocha recently received government funds for her proposed program to train H.I.V.-positive Brazilians to create community support networks in smaller cities, where the epidemic is spreading fastest.

"We need to develop a young leadership to fight misinformation, prejudice and isolation," says Ms. Rocha. Her project has also received funding from such U.S. groups as the Red Hot Organisation and the National Minority AIDS Council, evidence that Ms. Rocha's efforts are gaining international recognition.

During her first jaunts abroad, she recalls, "People stared at me." She knew they were not used to seeing a transsexual as a public figure. But eventually, she says, they realised that "intellectually, I'm not different from anyone else."

One recent morning, dressed in a sheer silk blouse and snug jeans and sporting pink lipstick and violet eye shadow, she showed off photographs from her trip to Atlanta last October.

She was one of eight foreigners invited to the biggest annual American AIDS conference.

"I was audacious and daring," she says. In a speech, she called on U.S. pharmaceutical makers to cut the cost of drugs to "improve our chances of living."

Ms. Rocha was also lucky to be there. The U.S. had turned down two previous visa applications. But this time she had high-powered recommendations: The Global Health Council, a Washington, D.C., advocacy group, stated that Ms. Rocha's participation was crucial, and the deputy coordinator of Brazil's AIDS program attested to Ms. Rocha's status as a transsexual activist whose legal documents carry the name Jacques Rocha Cortes. Ms. Rocha got a ten-year multiple-entry visa.

Brazil, the country with the world's largest Roman Catholic population, is also the only place where the Catholic Church has its own AIDS commission.

Despite the Pope's denunciation of condoms, many Catholic groups are working to contain the disease endorse their use.

"Condoms are not about religion; they are about public health," says Rubens Oliveira Duda, a theology student and AIDS activist in Sao Paulo.

Sometimes that partnership triggers controversy. One priest, Valeriano Paitoni, a long time AIDS activist, caused a stir last year when he produced an AIDS informational videotape for clergy members that said it wasn't a sin to encourage the use of condoms.

Subsequently, the archbishop of Sao Paulo, Claudio Humes, published a statement in a leading Sao Paulo newspaper condemning the use of condoms and reprimanding Father Paitoni. The Health Ministry, which helps fund Father Paitoni's programs, repudiated the archbishop's statement. Going one step further, the ministry has released religion-laden condom ads ahead of this week's annual pre-Lenten Carnival celebration. The ads show an angel and a devil, and read: "No matter which side you are on, wear a condom."

Ms. Rocha, too, is stepping up her campaigning. Last year, she was elected co-leader of the Latin American Network of People Living With H.I.V./AIDS, which represents sixteen countries. She has left teaching to do advocacy work full-time.

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STIGMA AND HEALTH AN OVERVIEW

Stigma can lead to people experiencing chronic stress giving rise to resistant approaches to coping, like withdrawal and isolation. In certain contexts, the impact of the meaning of a disease or condition may create more problems for an individual than the disease itself.

QUEER SEX, STRAIGHT TALK WE ALL DESERVE ACCESS TO APPROPRIATE HEALTHCARE AND H.I.V. PREVENTION

Transphobia from within and without the queer community has been shown to dramatically increase H.I.V. risks. It serves to alienate, isolate, and stigmatize, and may lead to an increase in other social pressures, including poverty, substance abuse, and unemployment.

WAKE UP TO THE FACTS ABOUT H.I.V. AND AIDS

Whether you have anal sex, neo-vaginal sex, vaginal sex, oral sex - any sex. Whether you are the insertive or receptive partner, active, passive or both. The most reliable way to reduce the risk of coming into contact with the H.I.V. / AIDS virus is to have safe!



The Gender Centre Video Collection!

The Gender Centre has created an assortment of videos with the aim of assisting the community to learn about gender issues.

Videos range from those dealing with workplace relations to broader topics such as "What is Gender".

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The Gender Centre Inc. is funded by the N.S.W. Government Department of Human Services, Community Services under the S.A.A.P. program and supported by the N.S.W. Health, Sydney Local Health District through the AIDS and Infectious Diseases Branch.

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Stigma and Health

An Overview

Paper presented by Dr. Max Hopwood at N.C.H.S.R. Consortium Workshop 19, 30th May 2007, Cockle Bay, Sydney

Article appeared in Polare magazine: October 2007 Last Update: October 2013 Last Reviewed: September 2015



Dr. Max Hopwood

Stigma can lead to people experiencing chronic stress which gives rise to maladaptive approaches to coping such as withdrawal and isolation.

The term "stigma" comes from ancient Greek and was used to describe the signs which were cut or burnt into a human body to mark a person as someone of unusual or bad moral status. The bearers of these stigma-signs were slaves, criminals and traitors; people to be avoided particularly in public places (Goffman, 1968). Two and a half thousand years later the term stigma has come to describe the disgrace or social disqualification which arises from possession of an attribute, visible or unseen, that is considered deeply discrediting. Sociologist Erving Goffman, since publication of his 1963 treatise, *Stigma: Notes on the Management of Spoiled Identity* is considered the founder of modern stigma theory. By the early 1960 sociology was deeply concerned with the notions of conformity and deviance and Goffman used this framework to study interactions between individuals that led to stigma. He noted that it is the social meanings which are ascribed to particular attributes in a given context, rather than an attribute per se, that stigmatise an individual or a group.

Take an attribute such as the love of reading; many people would feel no compunction in being seen walking into a library, on the other hand, a professional criminal would probably not feel comfortable being seen by his peers entering a library (Goffman, 1968). Goffman redefined a stigmatized individual as someone who possesses an undesired characteristic and who is therefore "disqualified from full social acceptance".

He described three differing types of stigma as: that associated with abominations of the body like physical deformities and including diseases such as leprosy; stigma associated with blemishes of individual character (e.g.,

weak-will, dishonesty, mental disorders and addictions); and stigma associated with "tribal" identity such as ethnicity and religion.

In the past forty-five years, social scientists have refined Goffman's theory, particularly by highlighting the social processes which underpin interactions between individuals.

Today stigma is increasingly understood as both a social process perpetrated by non-marginalised groups to achieve goals of exclusion and conformity, and a psychosocial process that marginalised groups must navigate and contend with (Ahem et al., 2007). Indeed, powerful social groups stigmatise individuals or groups of people who display difference from social norms and who identify with or enact unsanctioned behaviours. Stigmatisation is a means by which societies defend themselves against overt or perceived threats to cultural values, and stigma is manifested through rules and sanctions directed towards "offenders" (Malcolm et al. 1998). For example, most gay men, lesbians, bisexuals and transgender people are familiar with stigma; non-heterosexual people challenge previously cherished notions of the "naturalness of heterosexual gender roles. Same-sex attracted people are perceived by powerful social structures, like the military, as undermining the authority of patriarchy. Similar is the concern of religion - testament to the power of heterosexual men to define and control what is moral, ethical and acceptable in life - which has historically and persistently opposed recognition of gay rights. Indeed, God's love is not boundless, there are limits and theological exclusion of gay, lesbian, bisexual and transgender people help to define "acceptable" morality.

Here, the stigmatising trait or value is one that conflicts with an important cultural value upheld by the majority (Malcolm et al. 1998; Gilmore et al. 1994); that is, compulsory heterosexuality where straight men rule! Ultimately, stigmatisation and its corollary, discrimination, are means by which societies deter unwanted behaviours (Ahern et al., 2007). The kind of behaviours that come to be stigmatised, however, can vary widely between cultures and can change over time (Fulton 1999; Pittam 2000).

Over recent decades, stigma has entered popular discourse thanks largely to Goffman's work and the concept is becoming increasingly common and important within health discourses today. However, in the context of health research and policy, Goffman's formulation of stigma has limited application as today the language of abominations, blemishes and tribal identities is antiquated.

The concept he developed is so broad that it fails to address health-related interests of social and health policy, and the central notion in his thesis of "normality" and "deviance" has less currency in a multi-cultural context like modern Australia where what is considered normal in one culture might be stigmatised in another. The core concern here is that while Goffman effectively focused on shifting the discourse of stigma from symbols to social processes by studying social interactions, he did not spend much time discussing the social structures and discourses, like gender and class that inform all personal interactions.

Although he alluded to social structure often, he failed to elaborate on the impact of how power differences, for example based on income, were played out during interpersonal interactions. It is for these reasons that a revised adaptation of stigma theory is necessary for health research, disease control and community action. A revision needs to identify and highlight the structural and organisational factors which underpin health-related stigma.

Health related stigma

Research into health-related stigma has increased over recent years as the impacts of stigma on health have become more evident.

Stigma is increasingly seen as an added burden on the health of affected individuals who are often already dealing with stigma associated with poverty, and/or minority-group status. Stigma influences the health-seeking behaviour of many health consumers; it can delay appropriate help-seeking, interfere with access to treatment for treatable problems, and impede the effectiveness of case finding and treatment, which are key interests of public health.

Stigma can lead to people experiencing chronic stress which gives rise to maladaptive approaches to coping such as withdrawal and isolation. In certain contexts, the impact of the meaning of a disease or condition may create more problems for an individual than the symptoms of the disease itself.

H.I.V./AIDS related stigma

The two major global viral epidemics of recent decades - H.I.V. / AIDS and Hepatitis C have both been accompanied by epidemics of stigma and discrimination.

The quote below from the United States Advisory Committee on H.I.V. / AIDS highlights how infectious diseases, such as viral hepatitis and H.I.V./AIDS, have a history of eliciting stigma and affected people are often labelled and excluded from a range of social contexts.

"The panic and uncertainty that accompany epidemic disease may lead to a desperate search for explanations ... Stigmatisation seems to provide a partial (although spurious) answer ... the convenience of having an already despised or suspect group in the vicinity allows for quick attribution of causality and blame." (Turner et al. 1989, page 391)

H.I.V./AIDS has become one of the most stigmatised diseases of recent times and is often perceived as a threat to the self or one's community. Social disqualification that is, stigmatisation - is viewed as a method of preserving the physical and moral health of the community against the problems represented by the disease (Gilmore et al. 1994). Often, a disease comes to represent all the "suffering and evil" in society and people with the disease are positioned as an out-group representing "societal shortcomings, inadequacies, unmet needs or unrealised expectations" (Gilmore et al. 1994 page 1346).

The burden of stigma often weighs heaviest on the poorest and most marginalised people in our community and this point reveals the political dimension of stigma, that is, powerful groups can enforce rules onto less powerful groups (Fulton 1999). The early days of the H.I.V. epidemic saw calls from both individuals and social institutions for people living with H.I.V. / AIDS to be quarantined, to be excluded from participating in the workforce and other social contexts, and to be identified as carriers of death and disease (Sontag 1989; Crimp 1987). While gay community political mobilisation helped prevent the worst of these actions from occurring, AIDS-related stigma cost many lives, and still survives. In 2007 Australia's immigration laws preclude most H.I.V. positive applicants from obtaining permanent residency in Australia (Komer, 2007). Stigmatisation aims to simultaneously identify and disempower those affected by H.I.V./ AIDS in order to define the "model citizen", and to protect and preserve social values.

Hepatitis C related stigma

The stigma and discrimination familiar to many people living with H.I.V. / AIDS is, in some ways, being replayed, this time in the context of Hepatitis C where the villains are injecting drug users. Stigmatisation of illicit drug users has been a central tenet of global drug prohibition for almost a century (Levine, 2003). The stigma of illicit drug use taints all people affected by Hepatitis C.

Because of the way our society views - and criminalises - specific types of drug use, people are socialised into holding certain beliefs about illicit drug users - and by association people with hepatitis C - and many come to question their value as members of society (Fulton 1999). People with Hepatitis C are stereotyped as lacking social worth and as a danger to the community because they are likely to spread their negative characteristics to others.

Understanding of social phenomena are reflected in government policy. It has been observed by author Gary Hulse that in Australia Hepatitis C policy was slow to develop (Hulse 1997). One reason for this is the view that the virus is largely confined within injecting drug user populations and it was regarded as unlikely that hepatitis C would cross over into mainstream Australian society. Hulse argues that injecting drug users were perceived by the health bureaucracy as disorganised and that they did not constitute a "community" in the same sense as the gay community which had facilitated a rapid and efficient response during the early years of the H.I.V. epidemic. Hulse points out that power for making and informing public health policy concerning Hepatitis C shifted back to senior health bureaucrats and away from giving a role to affected communities (Hulse 1997). Since Hulse wrote his analysis in the mid 1990s, several things have changed; the national and state-based Hepatitis councils and drug user organisations have worked hard to reclaim the right of affected communities to represent their interests and to combat structural stigmatisation which endangers the development of relevant policy sensitive to the needs of a diverse population. As well, state government funding of initiatives has increased. Nonetheless, bureaucratic apathy concerning this epidemic remains at the federal level and this has contributed indirectly to Hepatitis C related stigma (Hulse 1997). A history of denial by Federal governments of the existence of this epidemic and those most affected by it has contributed to increasing isolation and stigmatisation, and blame.

Health has become more important than freedom

Increasingly, wealthy societies are making a distinction between "guilty" and "innocent" victims of some diseases and epidemics (Herek & Glunt 1988). Graham Scambler (2006), a British sociologist suggests that a series of well documented changes which has occurred since the early 1970s have had significant impact on how health-related stigma is seen and how notions of blame for personal health problems have been increasing. Scambler describes the significant changes imposed by globalisation of the world economies and the rise of a "new" regime of capital accumulation and its class relations; changes which profoundly altered nation - states:

... abilities to regulate their economies. These changes have delivered a culture ideology of consumerism, and neo-liberal policies of privatisation have been pursued by governments of both the left and the right during this period, particularly in the domain of health. State responsibility for the health and welfare of its citizens is being divested to the individual and it is not uncommon to hear health ministers today adopt discourses which emphasise the virtue and significance of personal responsibility in the maintenance of health. A consumer movement of healthism has emerged in the West during this period whereby individuals are implored to be personally responsible for their health, for example by exercising, attending to diet and ceasing smoking - (Crawford, 1980).

The upshot of these changes is that blame is attached to the shame which defines health-related stigma. Individuals or groups of people whose lifestyle practices are perceived as constituting a personal or community health risk are at best understood as a drain on resources and at worst a threat to civilisation, and often both. If a condition is understood to be the result of an individual's own actions, then those affected are likely to be viewed adversely and discriminated against (Jones et al. 1984). Because injecting and unprotected sex are seen as voluntary behaviours, the community often positions people with Hepatitis C and H.I.V. as responsible for their own illness, justifying their exclusion from society's concerns.

Conclusion

To conclude this brief overview, stigma is an important factor in consideration of social and health policy and for clinical practice. To address the impacts of stigma on health, research, policy and practice need to take account of both the disease and the culture-specific aspects of stigma, that is, whose interest's does stigma serve?

Stigmatisation is a socially adaptive process whereby certain groups can assert power by reinforcing specific cultural norms and values. Therefore, efforts to reduce stigma need to be cognizant of the power effects of - shaming and blaming - and work within this understanding in order to secure improvements in the health and quality of life of affected people.

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Polare Magazine is published quarterly in Australia by The Gender Centre Inc. which is funded by the Department of Family & Community Services under the S.A.A.P. program and supported by the N.S.W. Health Department through the AIDS and Infectious Diseases Branch. Polare provides a forum for discussion and debate on gender issues. Unsolicited contributions are welcome, the editor reserves the right to edit such contributions without notification. Any submission which appears in Polare may be published on our internet site. Opinions expressed in this publication do not necessarily reflect those of the Editor, The Gender Centre Inc., the Department of Family & Community Services or the N.S.W. Department of Health.

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.