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Editorial

by Katherine Cummings, Polare Editor

The times become more and more interesting, almost daily. On the positive scale we had the double win of Re: Kevin in the Family Court, affirmed by the Full Bench of the Family Court. And now we have the Family Court again breaking ground for Australia with the recognition that Alex, a thirteen-year-old F.T.M., should be allowed to postpone puberty until he can make a legal decision on the questions of irreversible hormonal and surgical intervention. For those of us born in Great Britain there has also been the probable revision of British law to allow post-operative transgenders at least to attain all the legal rights of their reassigned gender.

Of course there is always a down side. The successes we have had have been resisted by the "Forces of Darkness" who would like to hold us in limbo, or worse, mandate that we must be treated through psychotherapy (and who knows what else ... shock treatment, aversion therapy, judicial torture?) until we recant and admit that we have been deluded all our lives and we are really just like everyone else, only madder. Oh, and we will also have to admit that our memories of childhood dreams of transition were invented to give ourselves credibility.

The "Forces of Darkness" have recently gone on the offensive, with disgruntled changelings who have thought better of their transition, and religious ethicists who are pursuing the grand Church traditions encountered by Galileo, Copernicus and Giordano Bruno to wind back, or at least hold in stasis, the forward march of scientific understanding. Which leads me to wonder how Mendel got away with being a priest and advancing the science of genetics. The answer? His major work was not discovered until 34 years after he died. Too late to burn clever old Mendel!

Not only have the decisions of the Family Court been attacked savagely by the Forces of Darkness, who have recruited elements of the press to be their accomplices (the usual suspects), but they are moving to have the Monash Gender Clinic investigated, with a view to having it closed down. Leaders in this movement include a group with a virtually illiterate, as well as bigoted, website called Gender Menders and the lovely Dr Nicholas Tonti-Filippini, the implacable medical ethicist. Even politicians are being recruited and Senator Lyn Allison seems to be blowing hot and cold on the matter, if the letter received by Elizabeth, quoted in her column, is set against one received by Patricia Church. I find this odd, since the Australian Democrats have welcomed sexual and gender variation, and in the 1996 Federal election there were no fewer than three declared transgenders standing for election on behalf of the Australian Democrats.

In the height of the Alex publicity Tonti-Filippini sent one of his usual pieces of ethical ratbagery to *The Australian*, including the following:

"In adults, the evidence concerning hormonal and surgical sexual reassignment is equivocal. It appears that those who have the sexual reassignment still suffer similarly high suicide, low employment and high levels of social dislocation."

[Katherine: Nothing I have read, and none of my first-hand experience, supports this statement. On the contrary, what evidence there is (mostly anecdotal) suggests that suicide rates go down drastically, there is much more likelihood of employment (given amended documentation and legal protection against discrimination), and if there are high levels of social dislocation these are usually the fault of society and

Feature Articles



Dr. Forbes-Sempill went about her change of gender in the quietest possible manner. She applied to the Sheriff of Aberdeen, and acquired a warrant for birth re-registration.

The Case of Ewan Forbes

It appears that Ewan Forbes, who is well-known in the transsexual community as a female-to-male transsexual had his birth certificate corrected in the early-nineteen-fifties. Curiously, though, all records of his case appear to have disappeared.

A Media View of Alex

Polare editor Katherine Cummings responds to print media sensationalism and Australian Catholic ethicist Nicholas Tonti-Filippini's outrageous criticism of an Australian court's decision to grant a thirteen-year-old permission to commence treatment to delay puberty.

The Run of the Tide

The Blue Mountains and West Sydney Support Group is taking shape nicely with Gina's travelling office, (handbag to the onlookers) growing ever more happily laden with the contacts of other transgender people. A social group will also be a desirable addition to the group.

apply to other social, ethnic and religious minority groups.]

"Sex reassignment is not evidence-based medicine. There have been no controlled clinical trials to assess its benefits."

[Katherine: This is gobbledegook. There is ample empirical evidence that hormones and gender reassignment surgery have the desired effect (breasts grow and penises go, or conversely, breasts go and penises grow) and as for benefits, there are numerous, easily found, follow-up studies on post-operative transgenders which show an overwhelming satisfaction rate, usually around 85 percent. And why a person who is fanatically religious concerns himself with the need for empirical evidence is beyond me. Surely faith should be enough!

[Katherine: Tonti-Filipini also attacks the use of gender experts who provided their support for the Family Court decision.

"... it is not unexpected to find experts clubbing together. What is unexpected is that mainstream medical opinion appears not to have been asked to provide more balanced evidence."

[Katherine: Good thinking! Call in the people who are not practising in this area, because the experts are bound to be unbalanced!

Manager's Report

by Elizabeth Riley, Gender Centre Manager

It would be an understatement to say that transgender issues have featured prominently in the news in recent months. There is the ongoing controversy surrounding the Monash Medical Clinic, and its programs, which have been under attack from a variety of sources for some time, followed more recently by the decision of the Family Court to allow a thirteen year-old F.T.M. known as "Alex" to access puberty-delaying hormone treatments. I do not propose to comment on either of these matters directly since I am not privy to the necessary information that would enable me to give an informed response. What does merit examination, however, is the manner in which both these matters have been dealt with in the public arena.

The role of the media in this process is clearly significant. The media has extraordinary power in determining not only how we view events but indeed what we have access to in the first place. The decision as to whether an item is newsworthy is inextricably linked to the question of whether it will sell papers/magazines or attract viewers/listeners. In the case of stories about transsexuals it is the controversial that whets the appetite while the routine passes by unnoticed.

This is not to say that all media coverage is bad. On the contrary there are many fine examples of quality television, radio and print media journalism that have dealt with the subject of transsexualism in a fair and balanced manner. What characterises all these examples is the presentation of factual, informed and non-judgmental reporting. Such reporting leaves it to the viewers/listeners/readers to draw their own conclusions about the issues at hand. Unfortunately some sections of the media, in reporting on the above cases, have adopted a "Jerry Springer" style of reporting which prides itself on being judgmental and inflammatory.

When the case of "Alex" first emerged a poll was conducted by one media group that asked the question "Is thirteen too young to undergo a sex-change?" Firstly, "Alex" isn't undergoing a sex-change, but why let the facts get in the way? Secondly, it's a loaded question designed to elicit a predictable response. Thirdly, the decision ultimately handed down by the Family Court was based on a consideration of all available evidence and was certainly not taken lightly so what is to be gained from soliciting a response from ill-informed armchair 'experts'? An e-mail sent to one television morning show on the same subject responded negatively by suggesting that " ... we are perfect as God made us". If this writer's view were held consistently then presumably any medical intervention of any kind would represent interference with God's Work. What absolute nonsense.

The real danger of the media, for whom it is true to say that today's news is tomorrow's fish and chip wrapper, is that they act as a catalyst in drawing the vindictive, vexatious and biased elements of society out of the woodwork. Whenever a story emerges about transsexualism, the Gender Centre is inundated with calls from various media outlets for comment. (The media frenzy is not unlike the shark feeding frenzy and often the wisest course of action is to stay out of the water). Unfortunately the less reputable media will talk to anyone so long as they can get a story out before deadline and this provides a mouth-watering opportunity for anti-transsexual bigots to publicly air their views. And it is the airing of these individuals' views to a generally uninformed public that constitutes the greatest threat to the rights of everyone in the transgender community.

It will come as no surprise to the readers of this magazine that there are elements within the wider community who advocate the abolition of medical interventions in the treatment of transsexualism at every opportunity. They may portray themselves as being experts in the field. They love to portray themselves as caring individuals whose sole motivation is to look after the well-being of these poor unfortunate, misguided, confused and sick people. They will advocate already disproved treatments such as medication, psychotherapy or aversion therapy as viable and preferred alternatives to other medical interventions which have proved successful. They will rarely seek the opinions of transsexual people who have happily undergone a change of sex, and even when they do they will discard those opinions if they do not reflect their own prejudicial stance. By contrast, they will recruit the support of, or actively prey on, the small percentage of "unsuccessful cases", (estimated at two to three percent of the community), to support their agenda. Their true motivation may stem from religious beliefs, ingrained prejudices or the promise of financial gain but these cards will never be laid on the table. More likely they will be disguised under the banner of "ethical considerations".

I recently emailed the Victorian Health Minister, the Hon. Bronwyn Pike M.L.A., in relation the issues facing the Monash Medical Clinic. My email was a simple request that the minister take advice from a broad range of people, both experts and community members, and not just advice from the antagonists mentioned above in any review she may conduct of the practices of the clinic. The minister has a strong history in human rights and I am optimistic that she will take a common sense approach to this matter. I also cc' d that email to Senator Lyn Allison of the Australian Democrats and the response I received from Sarah Benson of Senator Allison's Office was alarming in the extreme.

The following is an abbreviation of some key points in her response along with my comments:

Dear Elisabeth

Thank you for your email ... which Senator Allison has asked me to respond to.

You raise many issues in your email that are currently subject to debate amongst the medical and psychiatric community worldwide. However as I am not an expert in this field I cannot comment further on these issues at the current time.

[Elisabeth: Note that she acknowledges that she is "not an expert"]

What I can do though is to clarify the aims of the Gender Menders Group and the Gender Identity Awareness Association, which you mention in your email.

[Elisabeth: Actually I did not mention them. Indeed I had never heard of Gender Menders until receiving Ms. Benson's email though her familiarity reveals a great deal about the source influencing her response. Indeed, on checking the internet I was dismayed to find their site, which discloses no information about the identity of any members of this group, but which includes a quote from me that is taken out of context and is printed without my authorisation. This falls far below my understanding of ethics. Their website repeatedly refers to transsexualism as an "illness".]

This group wishes to offer support, resources and a voice to those who have either been through the surgery and regretted it, or are currently on the program but unsure as to whether or not to continue.

[Elisabeth: What are their credentials for undertaking this task and why don't they identify themselves?]

Individuals from around the country are contacting us with stories of grief and shame that, personally, I find very sad and rather shocking.

[Elisabeth: The language is emotive and the bias of the writer is emerging.]

High profile tennis player and transgendered person Renee Richards has written a book in which she recommends to anyone who approaches her for advice not to have this surgery. Many stories on the web describe similar sentiments.

[Elisabeth: Being a high profile tennis player is irrelevant. If Renee is unhappy with her surgery then I am sorry for her but her experience belongs to her and not to all of us. As to "many stories", how many? and who? Sweeping statements are meaningless.]

These individuals are in a psychological state so vulnerable and fragile that they hardly dare to speak about their plight. One man thinks his life is in danger from people such as yourself.

[Elisabeth: This is an outrageous comment and a clear reflection of Ms. Benson's ignorance of this subject.]

Our view is that these people could have avoided going through this medical procedure if they had been required to undergo long-term counselling or psychotherapy, or at least encouraged to do so, before being put on the hormone/surgery program.

[Elisabeth: A strong and specific view from someone who has already conceded she is not an expert.]

I hope this clarifies our position on this very serious issue.

[Elisabeth: It certainly does.]

Regards, Sarah Benson

While I have enormous sympathy for individuals who later come to regret their decision to undergo gender reassignment, I have no patience at all with those who assume that this affords them the right to interfere with, and intrude into, the lives and choices of others in this community. Regret is an unavoidable part of life. Mature people use it to build strength of character. Puerile people look for someone to blame. Something like 40 percent of marriages end in divorce. Why don't we ban marriage? It's obviously not working.

The small percentage of individuals in the community who go on to regret undergoing a sex-change are deserving of support and counselling to help rebuild their lives. This is a role that, morally and ethically, must be filled by people who are qualified to undertake the task and who can be held accountable for their actions. Ad hoc groups with hidden agendas have immense potential to do harm to those whom they purport to support. Perhaps the Victorian Health Minister could be encouraged to conduct an investigation of groups like Gender Menders and the Gender Identity Awareness Association, which appear to be the same, to ascertain their legitimacy. I will

forward a copy of this article to the Minister. In the meantime if you feel equally concerned I would encourage you to Bronwyn Pike and address your mail to "Dear Minister".

I urge you all to act. These people are trying to undermine the human rights of all Australian transsexuals.

All for one and one for all,

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

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The Case of Ewan Forbes

Curiously, all records of his case seem to have disappeared

by Zoe Playdon

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It is difficult not to conclude that his distinguished ancestry - the title is the oldest in Scotland and the seat, Craigievar, one of the finest - somehow gave Forbes privileges to which others did not have access.

It has always been assumed that Ormrod's decision in *Corbett v Corbett* (1970) was the first to be made about the legal status of people treated for transsexualism.

However, it now appears to have been pre-dated by another case, that of Ewan Forbes, who is well-known in the transsexual community as a female-to-male transsexual who had his Birth Certificate corrected in the early 1950s. Curiously, though, all records of his case appear to have disappeared.

The obituary of Sir Ewan Forbes of Craigievar, Bt, says: He was born on 6th September 1912 and baptised Elizabeth as the third and youngest daughter of the 18th Lord Sempill, head of the Forbes-Sempill family, a long-established Scottish dynasty holding a 15th century Barony and a Baronetcy of Nova Scotia, created in 1630.

*... it is impossible not to speculate whether the decision in *Corbett v Corbett* might have been different if the full processes and arguments of the Forbes case had been available for use ...*

On the death of her father, the 18th Lord Sempill, in 1934, both the barony and the baronetcy passed to her elder brother, who entrusted the management of his Fintray and Craigievar estates to his sister. In 1945 she took up practice in the Alford district and it was from this point onward that Elizabeth Forbes-Sempill looked and behaved like the man she knew she really was. Dr. Forbes-Sempill went about her change of gender in the quietest possible manner. She applied to the Sheriff of Aberdeen, and acquired a warrant for birth re-registration.

Then, on 12th September 1952, there appeared a notice in the advertisement columns of *The Press and Journal*, Aberdeen, which stated that henceforth Dr. Forbes-Sempill wished to be known as Dr. Ewan Forbes-Sempill. Some three weeks later the doctor announced that he was to wed Isabella ("Pat") Mitchell, his housekeeper.

It was a fairly quiet ceremony. On the death of his brother, the 19th Lord Sempill, in 1965, the barony passed in the female line to the 19th Lord's eldest daughter. It was assumed that the barony would pass to Ewan Forbes-Sempill but his cousin, John Forbes-Sempill (only son of the 18th Lord Sempill's youngest brother, Rear-Admiral Arthur Forbes-Sempill), challenged the succession to the baronetcy.

The case was taken to the Scottish Court of Session. The court ruled in favour of Ewan Forbes-Sempill, but when his cousin continued with his challenge the dispute was taken to the Home Secretary, in whose office the Roll of Baronets is kept by Royal Warrant.

The Lord Advocate was consulted by the Home Secretary, James Callaghan, and eventually, in December 1968, Mr Callaghan directed that the name of Sir Ewan Forbes of Craigievar (he had dropped the name of Sempill) should be entered in the Roll of Baronets. There were no children of Sir Ewan's marriage.

His cousin, John Alexander Cumnock Forbes-Sempill, born 1927, has now succeeded to the baronetcy. ^[1]

The law concerning the correction of Birth Certificates in Scotland for people treated for transsexualism was decided by the case of X in 1965 where "a person correctly registered as a male at birth subsequently changed sex, a petition to correct an error presented under the Registration of Births, Deaths and Marriages (Scotland) Act 1854 (c80) (repealed) was refused". ^[2]

Clearly, Forbes's correction of Birth Certificate and subsequent marriage in 1952 pre-dated the case of X. According to the press of the day, he had carried out a "registration of birth and change of christian name" by obtaining from the Sheriff of Aberdeen "a warrant for birth re-registration". ^[3]

His succession to the baronetcy, however, came after that and although the decision in X was clear that the regulations for correcting birth certificates did not give "any sanction for recording changes which have subsequently occurred" unless "the sex of a child" as

indeterminate at birth and was later discovered when the child developed that an error had been made. [4]

Of course, the current medical viewpoint is that just such an error is made and that people treated or transsexualism are sexually indeterminate at birth. [5]

What then, were the arguments that found favour in the case of Ewan Forbes's succession to the title of Lord Sempill in 1968? The difficulty is that no records of the case appear to be available. There is no record of the hearing in the published volumes of the Court of Session.

Nor is the case recorded in the Court of Session's Minute Book, [6] its Extracted Processes, [7] or its Unextracted Processes kept at the Scottish Records Office. [8] A telephone inquiry to the Court of Lyon in Edinburgh established that, according to their file notes, the decision on the challenge to Forbes's succession was given by Lord Hunter at the Court of Session on 29th December 1967. [9]

However, they have no documentation which is in the public domain. [10] A postal inquiry asking for a copy of the Lord Advocate's decision in the case brought no reply from his Department at the Crown Office in Edinburgh. [11] A telephone inquiry to the Registrar of the Baronetage at the Home Office in London, asking if they could provide a copy of the direction given by the Secretary of State or advise where it might be viewed was similarly unsuccessful. [12]

It is as if the case had been deliberately removed from the public domain. At the time, a similar concern was expressed by legal practitioners of the day. The *Glasgow Herald* reported the "exceptional and disquieting circumstances in which the case was heard": Not only were the proceedings taken before a judge in chambers but his judgement was never issued to the press and court officials were placed under orders of the strictest secrecy.

Inquiries by journalists at the time brought them against a wall of silence. The most that could be learned was that the judge and his clerk heard the case not even in Parliament House but in a solicitor's office and that no papers in connection with the case were filed at the office of the court. In the official register of petitions kept in the office it was recorded that a petition had been lodged in the name of Forbes-Sempill for a hearing under Section 10 of the Administration of Justice (Scotland) Act, 1933 but the columns which would normally contain a record of subsequent stages in the proceedings were left blank.

Section 10 provides for summary trial hearing in which the parties may select their Judge. There is no right of appeal and the Judge may "on cause shown, hear and determine in chambers any dispute or questions submitted for his decisions."

Summary trial is not permitted in cases affecting the status of any person and is usually employed where a quick decision, with no appeal, is required.

The fact that the new baronet had to be enrolled in a public register ensured that the case could not be kept secret and tends to confirm the anxiety felt by some legal practitioners, who knew about the Court of Session proceedings at the time, about whether official measures to hush up the case went too far.

The terms of Section 10 are certainly extremely wide, and it has been suggested that Parliament never intended they should be used for this type of case.

If so, there may be good reason to amend the provision so as to meet the need of the public interest that justice shall be seen to be done. The simple answer, provided by a leading lawyer in Edinburgh, was that this was a clear case for reference to the Scottish Law Commission. The 1933 act would have to be amended, he said, to prevent its future misuse for secret hearings in cases which the Act was never intended to cover. [13] The issue of the need for justice to be done in the case of people treated for transsexualism has been raised powerfully in the case of *P v S* and Cornwall County Council, where reporting restrictions were imposed on the case so that the woman concerned might bring it without finding that her personal safety was threatened. [14]

Their secrecy concerned only one item - the current name of the applicant - and all other circumstances were fully reported by the court and the press. The same full reportage has accompanied all other similar cases, both before and after that of Ewan Forbes: his alone remains the exception. It is difficult not to conclude that his distinguished ancestry - the title is the oldest in Scotland and the seat, Craigevar, one of the finest - somehow gave Forbes privileges to which others did not have access.

Similarly, it is impossible not to speculate whether the decision in *Corbett v Corbett* might have been different if the full processes and arguments of the Forbes case had been available for use, or whether the cases to restore equal civil status to people treated for transsexualism, which have been brought before the High Court and the European Courts since then, would have been necessary. Certainly, one set of processes - the High Court case for birth certificate correction [15] and the Private Member's Bill brought by Alex Carlile *M.P.* [16] with the same end in mind - would seem to be redundant in the face of the birth certificate issued for Ewan Forbes.


The document, easily available from the General Register Office in Edinburgh, gives his name as "Ewan Forbes-Sempill", his sex as "M" for male and the small print at the bottom states "The above particulars incorporate any subsequent corrections or amendments to the original entry made with the authority of the Registrar General". [17]

Even if the circumstances of his case are to be kept secret, for whatever reason, there is apparently no reason why the benefits its precedent provides - a corrected birth certificate and equal civil status - should not be enjoyed by everyone else in the U.K. who, like him, has been born with the condition of transsexualism.

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- [2] The Laws of Scotland, vol. 19 (Edinburgh: Law Society of Scotland & Butterworths, 1990), paragraph 1424
- [3] The Press and Journal, 12th September 1952, p. 1
- [4] Sheriff Court of Perth and Angus at Perth, X - Petitioner, Sheriff Court Reports, Scots Law Times News (Edinburgh: Green, 1957), p. 62.
- [5] D de Cegli, J Dalrymple, L Gooren, R Green, J Money, Z.J. Playdon & R. Reid Transsexualism: The Current Medical Viewpoint (Manchester: Press For Change, 1996)
- [6] Scottish Records Office, Court of Session: Minute Book (CS17//18718812)
- [7] Scottish Records Office, Court of Session: Index of Extracted Processes
- [8] Scottish Records Office, Court of Session: Index of Unextracted Processes
- [9] Telephone conversations with Mrs Rhodes, Clerk to the Lord Lyon, 29th February 1996, 5th March 1996.
- [10] Telephone conversation with Mrs Rhodes, Clerk to the Lord Lyon, 11th March 1996.
- [11] Letter from Dr Z.J. Playdon to the Lord Advocate's Department, 6th March 1996.
- [12] Telephone conversation with Mrs Bright, Registrar of the Baronetage, 6th March 1966.
- [13] "Disquiet over Forbes-Sempill secrecy case", The Glasgow Herald, 6th December 1968, p. 23
- [14] P v S and Cornwall County Council, Interim Decision of the Industrial Tribunal (Truro: 16th-17th November 1993)
- [15] R v Registrar General for England and Wales Ex parte P & G, *ibid.*
- [16] "The Gender Identity (Registration and Civil Status) bill", Hansard, 2nd February 1996, vol. 270, no. 42, cols. 1282-1290.
- [17] "Extract of an entry in a Register of Births", Registration of Births, Deaths and Marriages (Scotland) Act 1965 (Edinburgh: General Register Office).

Ewan Forbes

Edited from Wikipedia:  Born in 1912, Sir Ewan Forbes of Craigievar was the 11th Baronet of Craigievar from 1968 until his death in 1991, as well as a general practitioner and farmer. At birth, he was christened Elizabeth Forbes-Sempill, and officially registered as the youngest daughter of Lord Sempill. After an uncomfortable upbringing, he began living as a man at the start of his medical career in 1945. He formally re-registered his birth as male in 1952, adopting the name of Ewan Forbes-Sempill, and was married a month later.



In 1965 he stood to inherit his elder brother's baronetcy, a title that passed through the male line, together with a large estate. This inheritance was challenged by his cousin, who argued that the re-registration was invalid; under this interpretation, Forbes would legally be considered a woman, and thus unable to inherit. The legal position was unclear, and it took three years before a ruling by the Court of Session was finally upheld by the Home Secretary, granting him the title. The case was held in great secrecy, with the effect that it was unable to be considered in other judgments on the legal recognition of gender variance, but has become more widely known since his death in 1991.

The Forbes' was a well-established Aberdeenshire family, holders of both a baronetcy and a peerage. The baronetcy had been bestowed in 1630, and passed down the male line of the family; in 1884. William Forbes, the eighth baronet, inherited his cousin Maria's title as Lord Sempill, and took the surname of Forbes-Sempill. On William's death in 1905, the titles passed jointly to his eldest son John. John Forbes-Sempill, newly 18th Lord Sempill and 9th Baronet, was a landowner and soldier, who had served with the Lovat Scouts and then the Black Watch in the South African War ... [visit the Wikipedia page for more](#) .

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A Media View of Alex

... and Katherine Responds to Their Outrageous Criticism

Katherine Cummings responds to the article by Patrick Goodenough, [Catholic News Service](#) , Pacific Rim Bureau Chief
Article appeared in Polare magazine: May 2004 Last Update: October 2013 Last Reviewed: September 2015

Polare editor Katherine Cummings responds to print media sensationalism and Australian Catholic ethicist Nicholas Tonti-Filippini's outrageous criticism of an Australian court's decision to grant a thirteen-year-old permission to commence treatment to delay puberty.



Nicholas Tonti-Filippini is outspoken and biased against gender reassignment but according to the Internet he works for a Roman Catholic organisation and his attitudes appear to be affected by his religious affiliation.

An Australian court has given the go-ahead for a thirteen-year-old girl who wants to be a boy to begin a 'sex change' process, prompting strong criticism and calls for government intervention.

The statement would be laughable if it were not so obviously biased and insulting. Nor is it true.

Polare Editor: The Court *has not* given permission for a 'sex change'. It has given permission for a procedure to delay the onset of puberty.

A psychiatrist who works in the field expressed concern that gullible youngsters were being misinformed about exactly what could be achieved by medical intervention, while ethicists argued that the child's condition was mental, not biological

Polare Editor: What psychiatrist? What ethicists? Without names and qualifications, these statements are meaningless. What gullible youngsters are being misinformed? By whom? Where? When? If ethicists argue that "the child's condition was mental not biological" I hope that a) they have interviewed the individual concerned over a reasonable period of time and b) that they have some evidence for the aetiology of transgender conditions. If they have this evidence, maybe they would like to share it with the rest of the scientific community since there is widespread disagreement. *Not*, of course, that ethics are scientific,

The girl, known only as "Alex," will be allowed to begin taking hormones - initially oestrogen and progesterone to suppress menstruation and then feminisation of her young body ...

Polare Editor: Do you like "her young body"? Hear the violins and heavenly choir in the background? More might have been achieved with "her fair, young, innocent, virgin body", but you can't have everything.

... and, at the age of around sixteen, testosterone to begin the masculinisation process. The testosterone will "have certain irreversible effects such as the deepening of Alex's voice, the promotion of facial and body hair, muscular development and enlargement of the clitoris," according to the summary ruling of Family Court judge Alistair Nicholson.

Polare Editor: Well, yes, and that's the aim of the exercise, isn't it? By the time he is sixteen, Alex will have reached the age of consent for Australia and could legally have sexual intercourse, with the potential of creating new life. If Alex is old enough to make that decision, isn't he old enough to decide on a course of testosterone?

Once she turns eighteen she will be able to have surgery to make changes to her sexual and reproductive organs.

Polare Editor: In terms of legality, so can anyone who turns eighteen. The fact that some surgeons decline to carry out gender reassignment surgery until the transgender turns twenty-one is a matter for the surgeon.

Nicholson, who referred to the girl in his judgement as "he"

Polare Editor: A reasonable courtesy for people in transition.

... heard testimony that painted a picture of a girl who regarded herself as a boy from a young age, preferring activities usually enjoyed by boys. Alex lives with an aunt, and a government welfare department is her guardian, which brought the case on her behalf.

Polare Editor: Which suggests to me that the bureaucrats in question would be very careful to act in the best interests of the child,

knowing the sort of criticism that would be levelled at them for taking responsibilities normally reserved to parents.

The court heard that her father, with whom she was very close and who treated her as if she was a boy, died when she was five.

The court was unable to contact her estranged mother, whose whereabouts is unknown. With onset of puberty, Alex began to develop suicidal tendencies, which the judge said was "due to his body not matching his male gender identity."

Nicholson said he was satisfied Alex was aware of the physical consequences of the treatment and possible side-effects.

Polare Editor: A thirteen-year-old may not be intellectually mature but is perfectly capable of knowing which gender role is innate and can surely comprehend the consequences of medication, including side-effects.

"The social implications of the proposed treatment are that Alex will face challenges in his chosen identity in respect of peer relationships, possible bullying and ostracism, but I am satisfied that impressive steps have been taken to anticipate such risks."

Nicholson said if the treatment was not allowed, there was concern that Alex would "revert to unhappiness, behavioural difficulties at home and self-harming behaviour."

Polare Editor: Which is what those who would deny Alex the opportunity to defer puberty are indirectly advocating. There is no body of evidence that suggests that psychotherapy would succeed in changing Alex's lifelong desire to be accepted as male.

He also ruled that Alex could change her name on her birth certificate to a boy's name now, and would not have to wait until having surgery to do so - a requirement in some Australian States.

Polare Editor: There are some countries which will not allow legal males to adopt female names and legal females to adopt male names, but Australia is not one of them. As long as there is no intent to defraud a person can adopt any name he or she wishes, by deed poll or by reputation.

The court ruling has caused a stir. While transgender campaign groups and some medical bodies approved, leading Australian ethicist Nicholas Tonti-Filippini called the decision "irresponsible" and said medical treatment was being used to treat a mental condition.

Polare Editor: Nicholas Tonti-Filippini is outspoken and biased against gender reassignment but according to the Internet he works for a Roman Catholic organisation and his attitudes appear to be affected by his religious affiliation. He can in no way be considered impartial. Of course it's not just transgender people he objects to. He has no time for stem-cell research, I.V.F. or any form of medical advance not sanctioned by the Vatican.

He called on the Attorney-General to review the case and take it to a higher court.

Polare Editor: See what I mean?

Christian ethical action group Salt Shakers called for a federal government inquiry into "gender reassignment" procedures. The group argued that there was no way to turn a woman into a man or vice versa successfully.

Polare Editor: A few definitions are necessary before a statement like this can be made. There are social, medical and legal definitions of 'man' and 'woman' and nobody owns a word, not even a Christian ethicist (sic) group ...

"Alex will never have a fully functioning penis, never produce sperm or be able to father a child, and if Alex changes her mind again they will never be able to turn her back into the woman she really is", it said.

Polare Editor: Never is a long time. Medical advances in the techniques of gender reassignment have been amazing over the fifty-two years since Christine Jorgensen's case was publicised in 1952. Endocrinological and surgical techniques as well as legal and human rights revisions have made it possible for transgendered people to live happy, fulfilling lives in society. To suggest otherwise is to fly in the face of the experience of thousands of people worldwide who have affirmed their innate gender and taken their preferred place in society.

"She would have to have breast implants and be given an 'artificial' vagina."

Polare Editor: Assuming that Alex changed his mind after full transition and wanted to live as a woman, he could have plastic surgery to achieve that desire and he could live in society in his preferred role.

"She will never be able to produce a child or feel a complete woman."

Polare Editor: There are many women who cannot bear a child and as for feeling a complete woman ... could we have a definition please? I hope it is not suggested that a woman who cannot bear children is not a complete woman?

Second thoughts

Last year, an Australian named Alan Finch was the subject of a television documentary that drew widespread attention.

Finch underwent what is known as gender reassignment surgery (G.R.S.) to 'become' a woman, but was unhappy with the results and nine years later reverted to living as a man, taking male hormones and considering surgery to restore his male organs.

Polare Editor: "What is known as..."? It is also known as sex reassignment surgery and, more recently, gender affirmation surgery.

Humans are complex creatures and, as I frequently say, "if there is something a human being can do, some human being will do it". Naturally, therefore, if it is possible to move backwards and forwards between gender roles (not sexes), someone will eventually do it. I sometimes say I will go back one day from female-to-male gender role just for the adventure and the satisfaction I experienced going from male-to-female, but then I have a sense of humour and I do take responsibility for my own actions.

Finch's story called into question the assessments carried out before G.R.S. He described how he had failed a psychiatric assessment as his answers were too "masculine." He was allowed a second attempt and, having learned to fake the responses, passed and was approved for surgery. He also recalled having second thoughts in the operating theatre, but being reassured by a surgeon who said he was just having "pre-operation nerves."

Polare Editor: So he falsified his assessment tests and then failed to act on his "second thoughts" before surgery. So why is he blaming everyone else for his current status?

Finch, who now runs a group called the Gender Identity Awareness Association, said he believed Alex was "much, much too young" to be making the decision.

Polare Editor: What right has Finch to make decisions on behalf of Alex when he was incapable of making decisions for himself? What is being glossed over time and time again by special pleaders is the fact that if action is not taken before Alex reaches puberty there will not only be the despair, depression, misery and probable self-mutilation brought about by puberty's metamorphosis (development of breasts, commencement of menstruation, redistribution of subcutaneous body fat) but there will be unnecessary surgical and social remedial processes needed to undo changes which need never take place. If, on the other hand, Alex decides to revert to femininity before he is sixteen, the medication postponing puberty can be withdrawn and all that will happen is that Alex will go through a late puberty. Despite the poorly researched works of populist and discredited 'experts' like J. Michael Bailey, most transgender people know that their minds and bodies are incongruent very early in life, usually before they are six years old. Why then, cannot this conviction be respected and given some weight in the education and development of the child so that the kind of desperation and despair so common among teenage transgender people can be ameliorated through treatment and compassionate understanding?

Finch questioned whether the girl had been given adequate psychotherapy to explore the issues of her family background that may contribute to her "gender confusion."

Polare Editor: Guess what! There are those among us who have little respect for psychotherapy and even less for psychotherapy which assumes we are wrong in our innate convictions and that we make up our memories. And then they try to reshape us into 'cookie cutter' clones (there's something else Tonti-Filippini doesn't like) of the majority.

Finch also mulled the potential problems the judge's ruling could lead to, for instance when Alex becomes romantically involved with another girl at school.

Polare Editor: Courtesy suggests the phrase should be "... with a girl at school.", not "... with *another* girl ...". It is bigoted and biased to suggest that Alex is a girl simply because he lives in a girl's body.

"Initially, her girlfriend would have no idea that she is anything other than a young boy. She will be presenting as a boy. Her teachers and parents will say that she is a boy. The girlfriend's parents would also have no idea that their daughter is becoming romantically involved with another girl. Is such a situation morally and ethically acceptable?"

Polare Editor: Well, since you ask the question, yes, it is. If the girl discovers that Alex is not built like other boys she has a number of options ranging from complete acceptance to outright rejection, with compromises in between. If she decides on rejection, it will not be the worst thing to have ever happened to either of them (remember we are talking here of teenagers, who are no strangers to frustrated romance). If she decides to overlook Alex's differences she will, at the very least, demonstrate a willingness to accept variations in human complexity and may have a more interesting experience than many of her peer group. There are many variations in human sex, gender and sexuality which a young person can encounter and Alex's situation is merely one of these. And, just to keep you on track ... Alex has no parents. He is a ward of the State.

When the girlfriend eventually finds out that her "boyfriend" is actually another girl, this could have implications for her own social/sexual development, he argued.

Polare Editor: Yes. Are these implications necessarily negative? Where is your sense of adventure? And what do you mean "actually another girl?"

"Simply changing the sex recorded on the girl's birth certificate and enrolling her into school as a boy cannot begin to address the major issues facing this thirteen-year-old and those with whom she becomes involved."

Polare Editor: It seems like a pretty good start to me. Of course it can begin to address the issues. And of course there will be many more issues addressed before a final outcome and closure are achieved.

"Changing sex, gender not possible"

An Australian psychiatrist who works with patients who struggle with gender identity agreed that the government should investigate the G.R.S. issue.

Polare Editor: Indeed yes. Then transgender people might be more uniformly and fairly treated by the law, might be allowed completely revised identification documentation and might be accorded medical and social assistance to achieve gender affirmation, the

lack of which drives many transgender people to self-mutilation or suicide.

Speaking on condition of anonymity, he said the case raised serious issues. "At the age of thirteen, a child's very much half-formed. There has to be the greatest concern about thirteen year olds determining that much of their destiny," the psychiatrist said.

Polare Editor: Nobody has suggested there should not be professional help from counsellors, therapists and experts, some of which, at least, should be drawn from the transgender community.

"If someone believed they were only meant to have one arm, there's no way you'd sanction the surgical removal of the other," he added.

Polare Editor: An almost unbelievably stupid analogy. If a majority of humanity were born with one arm, and other people were convinced that this expressed their true innate identity, then, yes, they should be assisted to join the group with whom they identify.

The psychiatrist argued that authentic sex changes were not possible, and accused many clinics involved in the practice of "coercion, promotion and persuasion."

Polare Editor: Here again, I agree with the anonymous psychiatrist. Sex is a matter of chromosomes and genes and cannot be changed (yet). But innate gender role can be incongruent with assigned sex and if the innate gender role can be more easily affirmed through surgical and hormonal intervention then it is clearly justified. If the psychiatrist knows of "many clinics involved in the practice of coercion, promotion and persuasion" he should be reporting the coercion. As for promotion and persuasion, my understanding is that Australian clinics can't keep up with demand and numbers of Australian transgender people go overseas, to the U.S.A., Britain, Canada, New Zealand or Thailand.

"People are being injured by misinformation," he said. Some of his patients said they had been told by staff at clinics "that they can actually be made male or female, that they'll have normal sexual functioning" after G.R.S.

Polare Editor: What is "normal sexual functioning"? If he means intercourse and orgasm, then yes, a well-performed G.R.S. provides both the capacity for intercourse and the ecstasy of orgasm. If he means procreation then, no, not yet. But transgender people who go through gender affirmation surgery without having read everything they can, and talked to experts and to post-operative transgender people, are not taking responsibility for their own welfare ... a deplorably immature attitude. If one goes through a medical intervention as socially and sexually defining as gender affirmation without understanding the consequences and then complains afterwards that the results are not as expected then one is being, to say the least, captious.

"No one ever becomes the opposite sex. You might become a facsimile of that, and it might be cosmetically relieving and more convenient for swimming and so on, but that's a very different thing from being a biological male or female."

Polare Editor: I don't know how one would measure such a difference. Incidentally, isn't my brain part of my biology? It's my brain that tells me who I am.

He recalled that one patient who had male-to-female surgery observed that any sexual pleasure he experienced afterwards was "a highly male pleasure."

Polare Editor: Individual cases should not be used to make a general assertion. People are individuals. Assuming the psych's informant meant his orgasm was explosive rather than cumulative, and therefore 'male' rather than 'female', I can only assert that his experience does not parallel mine, nor that of several other post-operatives of my acquaintance.

"Any sexual pleasure experienced after such an operation is a painful reminder that the operation didn't do anything to authentically change a person's sex," the psychiatrist said.

Polare Editor: Wrong. See above. In any event, who said gender affirmation was about sexual intercourse. It's not. It's about affirming innate gender. If the psychiatrist doesn't understand that, he had better start over in the kindergarten section of the gender class. Gender affirmation is about living as the person one knows one is, rather than as the person others have decided one should be.

"People do become somewhat feminised by hormone treatment, but not completely. You don't become a woman. You don't have those kind of emotions," he said.

Polare Editor: "Those kind of emotions"? Apart from the grammatical solecism, what kinds of emotions? And how would you know? Emotional responses of post-operative transgender people (and even pre-operative transgender people on hormones) are often very different from the emotions expressed in pre-operative or pre-hormonal situations.

Not only does G.R.S. not offer a true sex change, neither does it fully alter gender, he said. (He differentiated between the two by saying sex is physical and biological, while gender has to do with a social role and has a psychological component).

Polare Editor: I think I pointed this out earlier. I agree one doesn't get a sex change, but that is relatively unimportant. As for gender being to do with a social role and having a psychological component I would aver that it is very much a social role and has a mental component. So what? If one can live happily in the gender role congruent with one's innate gender as opposed to the gender assigned at birth, how can the statement be defended that gender has not been fully altered? What more is there to alter? Nobody lives a life which is totally within one gender role or the other. Women without men need to (or may want to) carry out activities thought of as 'masculine' and men without women often carry out tasks a psychologist might label as 'feminine'. People do what they need to do day by day and only on balance can it be decided that a person is living according to one gender role or the other.

There may be a biological proclivity towards the other sex, as seen in "tomboys and effeminate males," but gender is something that's "entirely learnt."

Polare Editor: This is arguable, but not worth arguing. If the psychiatrist is saying here that "tomboys" and "effeminate males" are biologically determined then surely he is saying that their gender behaviour is at least partly innate. The expression of this innate gender is observed in social, i.e. learnt, behaviour. So why not allow gender affirmation to bring this biological inclination (if it is strong enough) into congruence with outward sex markers (primary and secondary sex characteristics) through surgery and hormonal intervention?

One of his patients is a fifteen-year-old girl who was heading down "the perilous path" towards gender reassignment to male. The girl's mother bought her a kitten, and "suddenly all the tenderness and love and mothering qualities came to the fore." The mother's "stroke of genius" had effectively cured her daughter, he said.

Polare Editor: Oh, dear. Both pathetic and bathetic. Bring on the kittens and widdle wabbits on the one hand and the guns and toy soldiers on the other and we'll soon cure these would-be deviates!

"You can have a tendency towards pursuits or activities which are more male ... but nobody actually becomes the opposite sex." The psychiatrist also said that a girl's hopes that she would be fully accepted as a male were unlikely to be realised.

Polare Editor: This psychiatrist doesn't get around much. I know lots of F.T.M.s and M.T.F.s who are fully accepted in their affirmed gender roles. Usually the ones (the majority) who melt into society and simply live their chosen lives.

"At best, she could end up being a tenth-rate male, looked at sideways by all other males ... what a terrible life she'd choose for herself."

Polare Editor: I think he needs to read more as well as getting out more. There have been many F.T.M.s who have performed and are performing in society as first rate males, and plenty of M.T.F.s who have been (and are) exemplary women. Academics, professionals of all kinds, scientists, writers, sportspeople, entertainers and musicians, among others.

He said not enough honest investigation had been done into these issues, because most research that had been carried out was done by proponents of G.R.S., or by transsexuals themselves.

Polare Editor: And is it obvious that research carried out by proponents of G.R.S. or by transsexuals is inevitably and inherently dishonest? The statement would be laughable if it were not so obviously biased and insulting. Nor is it true. Much of the research carried out in the area of transgender is carried out by scientists who are dedicated to this area of research because so much remains to be explored. There is much to do and there are many unrecognised transgender people who need to be brought into the light of understanding and helped to fulfil their potential. Those in the psychiatric profession would be better employed talking to those who live in the shadowy half-light of current medical, legal and social treatment of transgender people rather than trying to justify preconceived notions of what a transgender is, or can be.

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.)

The Run of the Tide

Something is on the Move, in the Tide of Public Opinion

by Gina Dumas

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Something is on the move, in the tide of public opinion that sweeps the sands of our unusual lives. There is a subtle but definite relaxing of the tension between our community and that most public animal "opinion". I suppose that we have a unique vantage point from which to view the stew of society as it twists and turns, and finds that it must always change, in response to the heat under the pot.

The wilfully ignorant in our society have had their high tide and I sense that the ebb tide will be ours.

The heat under society's pot is the relentless march of knowledge. The wilfully ignorant in our society have had their high tide and I sense that the ebb tide will be ours.

Rachael Wallbank was correct in surmising the imminent rise of people in the "T" community who would be proud to be in public ownership of their trans-sexed realities, and to give a clear voice to the socio-biological tragedy that is occurring right under society's nose.

People respect courage and the increasing visibility of articulate members of our community is creating a more compassionate curiosity towards us, and more spaces in which we may be heard. I have always found curiosity to be a very handy tool, if it is taken advantage of in a sensible way. It is of no use provoking curiosity unless you are willing to answer the questions that inevitably flow from such deliberate self-exposure.

I thought that the recent television coverage of golfer Mianne Bagger and her sensible invitation to her fellow golfers to ask her questions was a perfect example of how to go about this "public ownership of her trans-sex realities".

I joined Rachael's predicted rise of "T" proud people, more or less by falling into an available hole.

Starting a support service was something that I had always intended to do when my own life settled down a bit but it happened sooner than that. I had had this little gremlin sitting on my shoulder all of my life (well at least from my teen years) and the conviction that no-one should have to make that journey alone.

The Blue Mountains and West Sydney support group was ignited by the loneliness of one young girl, one of ours.

Much of the work has turned out to be in suicide counselling but it's not always like that, many good friends and many opportunities to be involved in the broader community have come into my life. My travelling office, (handbag to the onlookers) grows ever more happily laden with the contacts of other "T" people, many of whom are catching the "out there and at it bug". Among the many things to be attended to is a name for the group. I think that "47 T-West" is a likely candidate, combining as it does the telephone area code with direction and purpose. A social group will be a desirable addition to the group, and I am able to see only one way of bringing this into being.

What is envisaged to serve the group's purpose is a structure like an old fashioned wagon wheel, with friends connected along the rim, and with each of those persons connected by a spoke to the centre, where help may be accessed as need arises. The social activities will develop along the rim as friendships develop.

Much of our call work has occurred out of hours, and I suppose this is logical, as people in trouble often fall into the pit as day gives way to night, and time to brood. We have deliberately restricted our contact mode to the telephone, the computer is too impersonal and one gets little opportunity to gauge the temperature of a situation without voice contact.

Our network of contacts already stretches across the State. We offer a service that serves the persistent requests "I need a long talk to a post-op person, why don't they talk to us?" "Why don't they turn around and help us?" "Could I ask you some personal questions?" Well, the answer is "Yes" on all counts" provided that the answer will not identify or locate another person without their express permission.

Our little service is reaching out, and being offered public speaking engagements in return. To date we have spoken at the Catholic Church's Humanita Conference, P.F.L.A.G. meetings and recently at a Centrelink conference.

The idea was put to Centrelink that they might consider forming support teams from some of their disabilities clients, not all of ours would relish the role, but the possibilities for those that would could be extensive.

A senior Centrelink speaker acknowledged that the eyes of those involved in attempting to counter Australia's youth suicide problem need to be turned towards the loneliness and isolation of young people with sex, gender, and sexuality problems. We need to develop this shifting awareness of Centrelink's potential.

Whenever we speak to the personnel of any organisation we try to send them home with something to talk about. This is not hard to do. If you are able to reach straight into the comfort zone, of each of your audience, and shatter it, that gets the, questions flowing. It has been the experience of those involved in this support group, that the more open we have been, the greater the ease with which our local community has been able to listen, watch and accept our realities.

You will notice the shift to the personal here, for the core of the group has been a married couple, Barbara and myself.

We know of five other couples whose marriages have survived the full journey, where one or other of the spouses is transsexed.

We welcome contact with other couples who may be in need of support to keep their family together.

The St Vincent de Paul Society has offered our support group valuable help along the way, and made possible much of the work we do. Our photocopying costs for mail outs to families and individuals was becoming prohibitive, they took this over for us among other things. We were delighted when Barbara and I were invited to rejoin the society and participate in all the activities that members of the society undertake.

Who would have dreamt ten years ago, that a couple such as we are, could resume a life that includes all of our pre-change involvement in the community, that shopkeepers would come out of their shops and say "Hey, we saw that show on telly last night, do you think you might answer a question for us" but this is what our town is like. From a population of 15,000, we could count on fewer than the fingers of one hand the number of people who have been negative towards us.

In many ways it has been our town that has showed us how quickly the tide is turning.

We are currently seeking a sponsor for a printing job, we need just under \$4,000 to complete a reprint of that excellent little book *Mom I Need To Be A Girl* (we have the author's permission).

The managing director of the printing firm came out of his office to deal directly with us, he had read the proof copy when we first had a reprint. His comment, "that is a thoroughly interesting little book". The comment from one bleary eyed leader of a Catholic teaching order who had sat up all night reading it "I am stunned, I had no idea".

We have plans for this little book.

Our support efforts are centred naturally enough in the interests of the Transsexed-Intersexed communities, for it is here that our experience is best able to be shared, but we take you as you are and do our best.

It would be easy to just blend into the community, and pretend that I have no debts to those who showed me the way out into the sunshine of my own life. But then, I have that gremlin on my shoulder, that refuses to be dusted off "do you remember yesterday, when you were a teenager" it whispers "don't just leave them to it" "don't waste what you have learned" "sail with the tide girl".

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