## **Polare Edition 58**

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## **Editorial**

#### by Katherine Cummings, Polare Editor

s I write this I am hoping that the July-August issue of *Polare* will come out at the beginning of July rather than halfway through it. All too often hold-ups along the chain of production have created hiccups, longeurs and postponements, creating the annoyance of seeing functions advertised after they have occurred, or too close to the set date to be useful. This time will be different. Now check your calendars and see if I have jinxed myself with that statement!

There is another of Laura Seabrook's graphical essays (oh, all right, comic strips) putting her views on the ins and outs of passing in public and there is a call to action on pages 26-27 which concerns us all. Please act on it!

We also have an extremely interesting talking point from Zhan in this issue, as he looks at racial stereotyping and transgender. The Health Report deals with a topic very often encountered in our community ... depression, which, all too frequently leads to self-harm and even suicide.

And we have yet another talented photographer concerning herself with the world of the transgendered. Mariette Pathy Allen's new book, *The Gender Frontier*, is reviewed on pages 33-34.

# Manager's Report

by Elizabeth Riley, Gender Centre Manager

#### Anyone for tennis?

The big, big news on the sporting front is the recent decision by the International Olympic Committee (I.O.C.) to permit transsexual athletes to compete in the Olympic Games. In order to qualify a transsexual person must meet the usual range of criteria. They must be post-operative, have been on hormone therapy continuously for at least two years and have satisfied the requirements of the real life test. That of course is the easy bit. The hard bit is the additional requirement that you also have to be an extraordinarily good athlete and you have to compete in high heels. (I'm just kidding. High heels are optional). Given the lack of access to sport for most transsexuals in the past this last requirement, (not the high heels bit), will probably result in transsexual participation in the Athens Olympics being conspicuous only by its absence. Nonetheless the I.O.C. is to be commended for its decision which in the long-term will secure equity for transsexuals in sports participation.

The most important outcome from this decision is the likely filtering down effect that it will have on the vast array of smaller sporting bodies. Given that the I.O.C. has influence over almost all sports and represents the pinnacle of excellence in sporting achievement it will become increasingly difficult for lesser sporting bodies, both at a

## **Feature Articles**



It's less a matter of what you think, but rather, why do you think it?

## **Racial Stereotyping & Transgender**

Zhan thought he was square with his issues on race and ethnicity until he started transitioning in Sydney. Along with transitioning came overt and subtle messages, comments and expectations about what it is to be male and how male one can be, and what those markers are.

#### I Am Not a God

Gail visits Thailand for the second surgical time, this time for a hair transplant. It's not an easy surgical process, and it takes a long time, but she is very pleased with the wonderful results. For Gail, having the hair transplant was as important as having S.R.S.

### **Emerging Pangendered**

Jenny is biologically male and happy to be, and to live her male-gendered life. She is also, and no less, a woman by gender. Admitting that she cannot live as an androgyne, she is a true chameleon. This is the way she is, the way she has always longed to be, pangendered.

#### A Response from the Australian Democrats

Australian Democrat spokesman for Sexuality and Gender Issues, Brian Greig states that while they endorse support for transgender people who later regret their decision for surgery, they do not believe this should be grounds upon which to discredit the Monash Clinic.

#### Only a Cross Dresser

Riki Wilchins explains that because cross-dressing is more socially-despised, the more despised and oppressed group, the more conservative their rhetoric and politics, that when groups are disempowered they have no choice but to take an assimilationist conservative stance.

## **Depression & Transgender**

Depression is the leading mental health issue faced all people, transgender or not. With this knowledge it must be understood that it doesn't mean having a transgender-identity or fulfilling

national and international level, to maintain policies of exclusion in relation to transsexual competitors. To date the only sporting organisations that we are aware of in our region that have adopted progressive policies to allow for transsexual/transgender participation are Women's Golf Australia and the Sydney Women's A.F.L. and I applaud both of these organisations for the stance they have taken. Other sporting bodies have remained silent on the issue with some notable exceptions in the area of Lawn Bowls. As ludicrous as it may seem, since there cannot possibly be any gender bias in rolling a bowling ball, I have encountered some strong resistance from a couple of these clubs to transsexual participation.

cross-dressing needs is pathological, mentally disordered or medically diseased.

#### The Gender Frontier

The Gender Frontier is a book by photographer, Mariette Pathy Allen who brings to her art a desire to show truth allied to a desire to reform society. Many of the images concern themselves with activism associated with the struggle for transgender rights and freedoms.

Ultimately what the I.O.C.'s decision will bring into effect is what we have been campaigning for ever since sport was exempted from coverage under the transgender provisions of the N.S.W. Anti-Discrimination Act back in the mid-nineteen-nineties. That is the opportunity for transsexual people to participate in sporting activities at the local level where the benefits will include improved fitness, social inclusion and enjoyment of one's chosen sport/s. Importantly, it will also bring about the gradual breaking down of those barriers, generated by prejudice and ignorance, that have effectively contributed to the marginalisation of our community both in the sporting context and beyond.

#### "And the winner is ..." "There's Something About ..."

I was again surprised by the level of television interest directed towards trans stories in the week that *There's Something About Miriam* first hit the screen. In chronological order the week began with good old boy Jerry Springer's screening of "Bi-sexuals who Cheat" or some such nonsense of a title. Despite the irrelevance of the title Jerry just couldn't help himself and had to include a transsexual in the fray. The usual abominable shouting from abominable guests and abominable audience members on an abominable show with an abominable compere.

That was Monday.

On Tuesday we were treated to some "light entertainment"

(Channel 10's description) with the screening of the first riveting episode of *There's Something About Miriam*. Yet another excursion into the wholesome ghettoes of reality television with six strapping young British lads vying for a cash prize of £10,000 and the affections of Miriam, a gorgeous Mexican model who, unbeknownst to the lads, comes complete with a fully intact, though adeptly concealed, set of male genitalia. This we are told is the fun bit of the show. The strapping young British lads were so taken with the joke that they sued the producers and won an undisclosed out of court settlement. Unfortunately the experience must have so diminished their wits that they failed to include in their deeds of release a ban on further screenings of the show. Pity.

The really offensive aspect of this show is the premise on which it is based. I wonder whether Brandon Teena, or Gwen Araujo, or Tyra Hunter, or the hundreds of other transsexuals who have met a grisly end when their true status was revealed, would see the joke. I doubt it.

I could have been forgiven, after these two efforts from the Ten Network, if I had elected to self-impose a ban on television for the rest of the week. But on Wednesday a phone call from a client alerted me to the Oprah Winfrey Show and with all the willpower I could muster I persevered. She was interviewing Jenny Boylan, author of *She's Not There*.

This was much better stuff and it was encouraging to see the subject of transsexualism being dealt with in a much more sensitive manner. Indeed Oprah was so taken with the topic that her next episode was dedicated to an extension of the same theme.

Tuning in again on Thursday I found Jenny again on the show along with three other transsexuals two M.T.F.s and one F.T.M.. The show continued in the same vein with Oprah and audience alike genuinely trying to grasp the concept of transsexualism. What was important with these shows was the obvious interest and respect that was being afforded to the guests from both Oprah and the audience.

And that, I thought, would be the end of it.

To my surprise, however, I tuned into Burke's Backyard on Friday evening. Since I never watch this show I can only assume my remote control was guided by divine providence for lo and behold yet another transgender story. This time it involved a woman called Roslyn and her partner who have one of the largest model train sets imaginable. They are also steam train enthusiasts and are members of a steam train restoration society. This was an engrossing enough story in itself but it also turned out that Roslyn is transgender and before long the topic turned to this.

To the credit of the show the matter was dealt with in reasoned and matter of fact kind of way without any attempt to sensationalise and the focus on the train stuff was left to dominate. So that was the week that was and overall it was a three to two victory for good quality coverage.

And finally ...

I was privileged to be invited to a round table meeting with a group of Federal Labor Party M.P.'s and Senators chaired by Tanya

Plibersek M.P. for Sydney. The group, all female, sit on the committee for the Status of Women. The aim of the meeting was to establish a dialogue between the committee and representatives from the L.G.B.T. communities over issues of equity for same sex couples.

While the Labor Party are not prepared to support same-sex marriage they are committed to ensuring that same-sex partners enjoy all the same rights as their heterosexual counterparts in areas such as tax law, superannuation and legal recognition.

The meeting also provided an opportunity to air some of the other issues confronting the transgender community and these were taken on board. Importantly the meeting was recognised as a starting point for ongoing dialogue rather that a one off affair so we can look forward to some progress occurring at the federal level over the course of time.

And the final finally ...

Since my report in the last edition of *Polare* I have received a reassuring letter of reply from the Victorian Health Minister, the <u>Hon.</u> Bronwyn Pike <u>M.L.A.</u> and I have every confidence in her commitment to approaching the Monash Medical Centre issue in a fair, sensible and balanced manner.

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

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# Racial Stereotyping and Transgender

### **Embedded Cultural Ideas of Masculinity and Femininity Based on Race**

by Zhan

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his is a sensitive subject but one that I've been confronted with for a while, so I thought I'd write this piece and see the response.

My inherently "feminine" race prevents me from ever transitioning "fully" into an ideal of white masculinity

I've been thinking a lot about how racial stereotyping and ideas about race, colour (ha-ha) our ideas about gender, transitioning and becoming.

I thought I was square with my issues with race and ethnicity until I started transitioning in Sydney. Along with transitioning came overt and subtle messages, comments and expectations about what it is to be a male and how male one can be, and what those markers are. After a while it clicked with me

that there is, very much alive and well, a gradation of racial groups that equates with a gradation of masculinity and femininity.

Effectively, it is the old idea of Orient v. Occident. The East is feminine and the West is masculine. (East) Asian M.T.F.s are the most "successful" transgender people because they have fine skin, little body hair and small build.

The number of times you would have heard of tourists returning from Thailand, for example, commenting on how convincing the drag queens and M.T.F. transgender people were on the stage and on the street.

It is still less jarring to see a white man with an Asian woman than an Asian man with a white woman.

I believe this all relates to an underlying scale of races, where Asian races are inherently feminine when compared with Caucasians.

I was also disturbed when watching "Japanese Story" with Toni Collette, where she becomes the lover of a Japanese "salaryman". Their sexual interactions involve his taking a passive role while she "wears the pants" in the relationship. Indeed the first time they have sex we see Toni's character taking off a pair of pants while the Japanese man lies modestly in bed under the covers, waiting for her!

Keep going in that mode and there is the comparison to African/black races as hyper masculine (measured again, of course, against white masculinity): you have stereotypes of black studs, the big black dick, the sexualisation of black women as being hyper aggressive/sexual, etc.

I have a feeling if there were a comparison for the sales figures of black dildos in sex shops as compared to "skin" coloured (i.e. pinky peachy) dildos, black dildos would come out tops.

Similarly, Hispanic/Southern European masculinity as compared to Northern European/Anglo-Saxon masculinity. The Latin Lover, the fiery Italian temptress, etc.

So how does this impact on F.T.M.s? Well, I would say it impacts a lot. For myself, as an East (well Southeast) Asian F.T.M., I get the converse of what Asian M.T.F.s would receive in terms of transition. My inherently "feminine" race prevents me from ever transitioning "fully" into an ideal of white masculinity. And since Australian culture is still overtly white and Anglo and Christian, the expectations of transition, the visuals of transition, still accord with those same white and Anglo ideals. When a "successful transition is measured in terms of a beard, drastic change in skin texture, body odour and body hair, for example, I fall short.

I have come to realise that my own expectations of transitioning had these markers in place long before I even had my first dose of testosterone. I realised how dangerous it was for my self-esteem to have a white ideal of masculinity in my head and not to know it.

Anyhow, I guess I'm interested to know whether there are any other Asian/non-Anglo/non-Australian F.T.M.s and guys out there with similar experiences, as well as knowing what white Australian F.T.M.s and guys think about these issues.

I'm not saying "you are racist!" but racist ideas are embedded in cultures and some racist ideas are embedded here. So it's less a matter of what you think, but rather, why do you think it?

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## I am not a God!

### Gail's Hair Transplant with Dr. Pichet in Thailand

by Gail Bennett

... miracles can never be

call my own.

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Article appeared in Polare magazine: July 2004 Last Update: October 2013 Last Reviewed: September 2015



Dr. Pichet Rodchareon

his is my second visit to
Thailand for a surgical
process. The original visit
occurred in June 1998 when I flew to
Phuket for sex reassignment
surgery.

I have enormous respect for the calibre of Thai plastic surgeons, and for the

graciousness of Thai people. In 2004 I stayed in Bangkok, with a dual purpose for the visit. One to have a rest and take a vacation, and the other being to have a hair transplant.

In 2003 when I was living in Brisbane I consulted a doctor who undertook hair transplants and was told I needed 600 grafts. In Bangkok I was told I required 2500. I am pleased I chose Bangkok because the results, following the transplant are wonderful. For me, having the hair transplant has been as important as having S.R.S. many moons ago. It is not an easy surgical process, and it took longer than S.R.S.

I arrived in Bangkok on a balmy Friday night and was driven to my hotel in a Mercedes Benz. The limousine and the hotel had been arranged by the surgeon, Dr. Pichet. It was about midnight when I arrived at the hotel, and I just wanted to get to bed. The hotel suite

was gorgeous and the bed was a delight to sleep in. Next morning I went the hospital where Dr. Pichet performs most of his surgical procedures, and where I knew an Australian girl was recovering from <u>S.R.S.</u> Shortly after arriving there, Dr. Pichet arrived and we were introduced to each other.

A short time later I went to the hospital's admission area to undertake some medical formalities, prior to my hair transplant the following day. Unless otherwise requested, Dr. Pichet's Western patients are accommodated in a private room at the hospital. The standard of service by the nursing staff at the hospital is pleasing, but during much of Dr. Pichet's surgery, he is accompanied by his own personal nursing staff, who must be applauded for their talent and dedication.

I arrived at the hospital on the Sunday morning about 9:00am. About 9:30am the procedure started, with the first of many anaesthetic injections. Initially the concentration for the injections is in the donor area. Dr. Pichet removed a portion of hair at the rear of the head, which is not vulnerable to the evils of testosterone. It took Dr. Pichet about ninety minutes to remove the donor area and to complete the sutures. For the entire ninety minutes I was lying on my stomach, which is not the most comfortable of positions. About 11:10am I was advised I could lie on my back. What a relief, I thought! Many hours of having a sore backside were, however, about to besiege me!

Periodically I asked for a pause in the procedure so I could stand or take a toilet break. About 1:30pm we took a break for lunch. At 4:30pm I realised I could not endure the procedure much further, and I saw Dr. Pichet and told him I wanted to stop and he agreed. Dr. Pichet undertakes the surgical process with the donor area, but after the sutures are in place it is his nursing staff that completes the process. Dr. Pichet however continually appears to inspect the outcome. By 4:40pm I had received 2400 grafts and despite the horrible appearance of my scalp, I was most impressed with what I saw.

I left the hospital with my head in a bandage, and headed back to my hotel room. That night I was expecting to endure a high element of pain but I was surprised that there was none.

Dr. Pichet's staff provided sufficient painkillers and antibiotics for my entire recovery period. At the time of writing this article, it is a week after the procedure and if I have lost any of the new grafts, the loss has been minimal, and the result is wonderful. Every morning Dr. Pichet sends a driver to take all of his patients residing at the hotel to his practice for a check-up.

After the check-up, sometimes his staff are available to accompany you on shopping excursions or on tourist jaunts. The level of service provided by Dr. Pichet and his staff is superb. In my case, they even helped me negotiate a cheaper cost for a new digital video camera.

It is disappointing to hear some patients of Dr. Pichet complain about the Thai food. Heavens above, what did they expect? Meat pies and tomato sauce?

As a devotee of hot and spicy Thai food I am in my element. I often wonder how many people come to the surgeons of Thailand expecting a miracle transformation in their lives.

In the case of <u>S.R.S.</u> candidates, they may realise that <u>S.R.S.</u> was not really the miracle they had expected, but as Dr. Pichet says, "I am not a God".

No matter the procedure, miracles can never be guaranteed, but I am more than happy, and in the months to come I look forward to a new head of hair that I can truly call my own.

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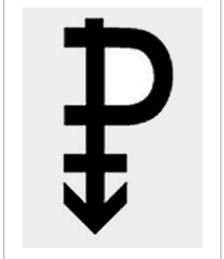
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# **Emerging Pangendered**

## A Journey Repeated Over and Over

by Jenny Lovelace

Article appeared in Polare magazine: July 2004 Last Update: October 2013 Last Reviewed: September 2015



am pangendered. I am biologically male and happy to be and to live my malegendered life. However, I am also, and no less, a woman by gender. I love to live for extended periods, an evening out, a weekend and (planned) for weeks on end, as a woman. I cannot live as an

The physical changes you can see are nothing to the inner changes we must endure before we achieve the happy, fulfilling balance that is who we truly are.

androgyne, that is presenting as both at the same time, with work boots and tight short shorts at one end and a pretty pink bow holding back my long hair at the other. I wonder if you can guess why.

Coming-out to the wider world beyond the gender diverse community and a very few others who understand is not an option for me. I am not a football coach, but the work I do (and love) no less prohibits me from disclosing who I fully am. People just would not understand. It is a challenge!

I am no longer sixteen. In fact many people of my age are retired. It is possible that my ambition to pass as a teenage Audrey Hepburn may be a bit beyond me. I know I cannot pass well in public. I have no interest in taking hormones. I will never undergo surgery. My make up skills need a lot of practice. There is so much I need to do to improve, to become as feminine as I am able. These include such things as voice and speech work, posture and movement and the right kind of shape enhancing underwear. Fortunately I have been an actor, singer and dancer so I know I can develop heartfelt skills given time to immerse and practise.

I have courage. It takes real courage to go out in the daytime, away from the dim lights of gay friendly nightclubs and to have to talk to people whenever one needs to buy something or to ask for directions. No longer when dressed can I look for even a fraction of a second at a pretty girl and give away my admiration. And I certainly cannot look at any man that way, especially at my age! No longer when dressed can I catch anyone's eyes unless I am communicating with them. Peripheral Vision!

Dr. Anne Vitale (*Emergence*, July 2002) tells us about biological emergence, when an aquatic insect rises and journeys from relative safety at the bottom of a body of water to the surface where it must break through the surface tension to be, now transformed, a creature with wings. She compares this to people who journey from presenting as their birth genders, through a stage of presenting as both, to the time when they at last present as the gender of their choice – forever. The agony and the ecstasy of it all!

Full transition requires only one, albeit rugged, journey. For the pangendered person the journey is repeated over and over - forever. The aim is not to lose one gender and to replace it with another but to create a life that enables one to journey between the extremes so smoothly that each change of presentation flows from one to the other without any friction. We, the pangendered, emerge from being trapped in one gender role into a world within which we present now one way then the other as grasses swaying back and forth with the breeze that flows from deep within our hearts.

This will be difficult for many people to understand, both some gender diverse and, no doubt, many 'gender comfortable' people. What they may find hard to understand is that we who are pangendered are both genders and all places between. We experience ourselves as the one whole person and the outward presentations we choose and love to adopt are merely the external presentations of the one deep and self-searching inner soul. We are the true chameleons. This is the way we are. The way we have always longed to be.

The physical changes you can see are nothing to the inner changes we must endure before we achieve the happy, fulfilling balance that is who we truly are. "It takes a psychological shift far beyond just wishing it so," says Anne Vitale. She is talking about the one-way journey. The dance of the pangendered is a constant movement in all directions. It is the mindset of the truly pangendered that must be essentially found if the dance is to harmonise with the music of life-fulfilling meaning. There is no one-fits-all formula for either one way or all encompassing journeys. Uniqueness is a uniquely human characteristic!

If you are 'gender comfortable', please try to understand us, especially if you love us. Our being is no threat to you and we love you no less. We are still the same person you always knew. If you are fully transgendered please do not regard yourself as in any way superior to those of us who have no desire to change our gender presentation completely. Perhaps we are able to feel your longings no less

than you, whether you are female-to-male or male-to-female. Surely we can love each other simply for the people we are.

As a counsellor I do hope these thoughts will be of use to you, professionally or as a friend, when you are with pangendered people like me. We do not all call ourselves 'pangendered' but there are quite a few of us and at some time we all need help and understanding. As counsellors, our own sex, sexual orientation and gender self-identification is of absolutely no importance – if, and only if, we are only, totally, concerned to see and care for the emerging souls that need our help to find and to be their own true selves.

"Success" Anne Vitale so wisely says, "is a matter of accepting what you have done, demanding space to exist and then relaxing into the situation." It is absolutely vital for our wellbeing that we all, we the gender diverse, we who love and care for the gender diverse and we who presume to offer help be there for each other. The rest of the world is going take time to shed its fears and wise up so it is up to us to create the strong, protective and loving world we need if we are to survive – joyfully.

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# A Response from the Australian Democrats

... to Comments Regarding their Position on a Range of Transgender Issues.

by Brian Greig

Article appeared in Polare magazine: July 2004 Last Update: October 2013 Last Reviewed: September 2015



Brian Greig, Australian Democrats Spokesperson for Sexuality and Gender

write in response to comments and letters in the last issue of *Polare* (Edition 57) regarding the Australian Democrats' position on a range of issues for transgender

The Democrats policy in this area is unambiguous. We support full equality in all areas of law for sexuality and gender minorities ...

people. Let me begin by assuring your readers that the comments attributed to Democrats' staff member Sarah Benson, are not an accurate reflection of Democrats' policy, and do not properly reflect the official action undertaken by us in relation to the current review of the Monash Gender Clinic.

There have been several approaches to Senator Lyn Allison by a number of groups seeking a review of Monash procedures, especially in relation to follow-up care. As a consequence of initial concerns raised by GenderMenders/G.I.A.A., Senator Allison gave cautious support for a review of

Monash late last year.

In the time since, there have been many more voices contributing to debate on this issue, particularly after the recent Family Court ruling in the case of Alex.

I have publicly stated the Democrats' view that many of these voices are fronts for the Catholic Church and other conservative organisations, and that their allegiances must be declared. As is often the risk, those with little information and highly questionable motives have attempted to take the debate from those with a legitimate claim to it.

As the Democrats' spokesperson for Sexuality and Gender Issues, let me state categorically that while we endorse support for transgender people who later regret their decision for surgery, we do not believe the few cases in which this has occurred should be grounds upon which to discredit the Monash Clinic.

We acknowledge the enormity of the struggle for many people with gender identity issues, both in coming to terms with that identity, and then for those who choose it, in going through the various stages of operative and non-operative therapies that will assist to bring congruence between identity and daily experience.

We recognise, too, that these choices often come at enormous personal, emotional, psychological and financial cost.

The Democrats policy in this area is unambiguous. We support full equality in all areas of law for sexuality and gender minorities, funding of support services, access to information, full gender affirmation, availability of treatments under Medicare, and removal of gender categories on all official documents.

You may be aware I sought additional information from Victorian Health Minister, Bronwyn Pike, in March/April regarding the nature, conduct and time-frame of the Monash review, and whether its result would be made available for public comment.

Minister Pike responded this week by saying that the review would be privately conducted by a small team of senior mental health clinicians later this month, with particular focus on referral, assessment and decision making processes.

The Minister has also advised the Clinic will be evaluated against "generally accepted contemporary practice for this area of clinical speciality", and that the review is occurring in line with the recommendations of the Victorian L.G.B.T.I. Health and Wellbeing Action Plan, developed through ongoing community consultation.

Finally, Minister Pike advises that while the final report will be confidential, general findings may be released at the discretion of the Chief Psychiatrist and Director of Mental Health.

The Australian Democrats recognise the level of concern that exists in relation to this review, particularly given much of the sensational media accompanying the Alex case, and we continue to monitor the development of the issue.

We are committed to our proud history of supporting L.G.B.T.I. communities well beyond that of any other party, and in ensuring the rights of all Australians, regardless of sexuality or gender identity.

### **Brian Greig**

From Wikipedia: Representing the state of Western Australia, Brian Greig O.A.M. was an Australian Democrats Senator, elected in 1998 and serving between 1999 and 2005. While in university he helped reestablish the National Union of Students and began to get involved in gay rights activism, helping to establish the now defunct Australian Council for Lesbian and Gay Rights. He declared his homosexuality in his maiden parliamentary speech, being the first Federal parliamentarian to do so. In the Senate, Greig was responsible for introducing three pieces of legislation including a bill to outlaw genocide in Australia and a bill to eliminate discrimination against gay, lesbian, bisexual, transgender and intersex people. All three were unsuccessful, as they were blocked by the Liberal-National government.



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# Only a Cross-Dresser

### Awaiting the Rise of the Truly Revolutionary Force

by Riki Wilchins

Article appeared in Polare magazine: July 2004 Last Update: October 2013 Last Reviewed: September 2015



Riki Wilchins

wish I could count the times
I've heard the phrase "... only a
cross-dresser." And not just
from transsexuals, but also from
cross-dressing-identified people
themselves. The reasoning seems to
be that changing your very body,
making a commitment to one sex or
another, is somehow more sincere,
more consequential, more (dare I
say) radical than ... well, just

Once cross-dressers ... really come-out, and begin to enunciate the politics of the direct, head-on challenge their very existence poses to gender regimes, I think we will have a truly revolutionary force on our hands, a potent force!

dressing up. I freely admit to subscribing to this belief myself for a number of years. Until one morning ... I awoke, and with horror found myself trapped, absolutely trapped, in a bias cut, pleated silk, backless Halston evening gown not of my own design.

No, wait a minute. That's not right. Where was I? Oh, yeah, I think it's arguably the case that cross-dressing is the more radical identity, although I ought to state up front that I don't believe in either the identity of "transsexual" or "cross-dresser". This is not to say that I don't acknowledge and defend anyone's right to identify as either, for I do. But I regard both as

political accomplishments, invented to contain various kinds of disreputable gender-queers and transgressors, rather than names which recognise any naturally-occurring identity.

In short, for me, just categories are inevitably not about truth, but about power: who has it and who doesn't; who gets to decide what's "normal" and what's "perversion"; whose ox gets gored and whose frock gets stored.

Now it's one thing to change one's body, as I have, to travel from one sex to another within the socially anointed binary. But in doing so, especially with the doctor's blessing ("You know, inside, your daughter Riki is really a woman, Ms Wilchins"), I fear I struck a Faustian bargain, I legitimated myself, but I accomplished this feat through an axial proposition that looks something like this - "I am really a woman inside / I am willing to change my body to be female / I am willing to commit my whole life to this / I don't do this because it is erotic but because it's my identity / therefore I should be a socially legitimate and respectable subject".

Unfortunately in the zero-sum game of gender politics, this logic succeeds to the extent that it delegitimises its converse. "You are not a woman "inside" / you are not willing to change your body, just your clothes / you are not even willing to commit your life to it / you are aroused by it (you pervert, you!) / you are such a social dipstick" Granted this equation raises me up, but at a price paid by those who cannot make similar claims. They, of course, go down. And those are ... you guessed it: your friendly, neighbourhood cross-dressers.

So it seems to me that cross-dressing is some kind of ultimate act of gender politics. It does not have a single thing going for it: not the doctors, not the binary, not a full-time commitment, not even a pledge that they're not doing it because it turns them on. Because of this, cross-dressing identified men confront conventional requirements for heterosexual male masculinity head-on. They stand on its head all that we're supposed to know about big, hairy guys being, well, guy-like. This brings on endless trouble with their jobs, wives, children, courts, military and so on. Frankly, despite all the times I heard someone say "I only do this to relax," it never sounded like a very relaxing thing to me at all. Every one of them put their life on the line when they walk out the door, perhaps down the wrong street, past the wrong patrol car, or into the wrong bar on the wrong night.

I sometimes amuse myself with the differing social legitimation of transsexuality and cross-dressing at work when people ask me, "So when did you have your surgery?" I respond, "Surgery, shmurgery. Hey, I just love wearing ladies' clothes." Gawd, you should see their faces fall ... at about three feet per second. All that compassionate understanding evaporates. Suddenly, instead of visions of a "woman trapped in man's body" they're seeing a weirdo pervert in lacy panties.

Now that I mention it, I remember years ago getting busted by the cops for using the women's changing room in a clothing store. They were distinctly unfriendly, looking me up and down like I was something they'd discovered after six months in the back of the freezer. That is, until I showed them my doctor's "carry letter" explaining that I was just a patient with a genuine diagnosis of "gender identity disorder". Then, of course, they both became amused, condescending, and at last middling friendly. They let me off with a lot of snickered warnings.

Now, granted I'm trying to focus on the politics of things here, because you can't focus on what the cross-dressing community is actually saying about itself publicly. Because the unfortunate fact is, most of the rhetoric coming-out of the cross-dressing community is banal to the point of tears. It's often along the lines of, "I dress but my wife won't accept me", "I dress, and my wife does accept me", "I dress, and I'm okay", "I dress, does that mean I'm queer?", I dress, does that make my wife a lesbian?", and my personal favourite, "I dress and it gives me an erection but I'm still a regular guy relaxing, here, have a Bud six-pack, let's watch the Packers and kick some butts after the game". I mean, really!

A lot of this is because cross-dressing is the more socially-despised identity. And the more despised and oppressed a group, the more assimilationist and conservative their rhetoric and politics. For when groups are radically disempowered they have no choice but to take an assimilationist conservative stance.

In other words, the experience of being a cross-dresser is still sufficiently dislocating, both socially and psychologically, that much of the community is still completely engaged in merely coping, rather than analysing, organising and confronting the systematic oppression which maintains and even mandates such dislocations.

But as they find their voice, the stridency, the demands, the political awareness and the organisation to contest that oppression will emerge. It's going to happen, just give it time. Once cross-dressers ever really come-out, and begin to enunciate the politics of the direct, head-on challenge their very existence poses to gender regimes, I think we will have a truly revolutionary force on our hands, a potent force. The only question is, how long will they think of themselves, and allow so many of us to think of them, as "... only cross-dressers?".

#### **Riki Anne Wilchins**

From Wikipedia and Amazon Books: Born in 1952, Riki Anne Wilchins is an activist whose work has focused on the impact of gender norms. While she started out as a transgender leader — founding the first national transgender advocacy group (GenderPAC) - her analysis and work broadened over time to include discrimination and violence regardless of individuals' identity. While this perspective has been widely accepted, its breadth has provoked criticism by some in the transgender community. Wilchins' work and writing has often focused on youth, whom she not only sees as uniquely vulnerable to the gender system's pressures and harm, but whom she sees as capable of "looking with fresh eyes".



Wilchins' work has been instrumental in bringing transgender rights into the mainstream L.G.B.T. movement, and has helped bring awareness of the impact of gender norms to a wider audience. In 2001, Wilchins' work resulted in her being selected one of just six community activists named by *Time* Magazine among its "100 Civic Innovators for the Twenty-First Century". A founding member of Camp Trans, since the mid 1990s Wilchins has been highly active in founding a number of organizations and events focused on gender issues, including:

- The Transsexual Menace the first large direct action group for transgender rights, which was modelled along the lines of Queer Nation and which at one point boasted representatives in over forty cities (co-founder Denise Norris).
- Hermaphrodites With Attitude the first direct action group for the intersex (co-founder Cheryl Chase, Executive Director of the Intersex Society of North America).
- >> New York City Gay Community Centre Gender Identity Project (co-founder Dr. Barbara Warren, Director of Social Services)
- >> New York City Gay Community Centre Transgender Health Empowerment Conference, an annual event (cofounder Dr. Barbara Warren, Director of Social Services).
- >> Camp Trans, an annual educational event outside the Michigan Womyn's Music Festival that contests the exclusion of anyone who is not deemed a "womyn-born womyn" (co-founders Janice Walworth, Nancy Jean Burkholder).
- » National Coalition for Sexual Freedom (co-founder Susan Wright, its first Executive Director).
- Mational Gender Lobby Day, an annual event on Capitol Hill (co-founder Phyllis Frye).

READ STAN

Read My Lips: Sexual Subversion and the End of Gender

Author: Riki Anne Wilchins

Publisher: Firebrand Books (1997)1563410907

I.S.B.N.-13 978 1563410907

From Amazon Books: Over the course of the past decade transgender politics has become the cutting edge of sexual liberation. While sexual and political freedom of homosexuals has yet to be fully secured, questions of who is sleeping with whom pale in the face of the battle by transgender activists to dismantle the idea of what it means to be a man or a woman. Riki Anne Wilchins' Read My Lips is a passionate and extraordinarily intelligent look at how society not only creates men and

women - ignoring the fluidity of maleness and femaleness in most people, but also explains how those categories generate crisis for most individuals. It is impossible to read Wilchins's ideas and not be provoked in fundamental and mysterious ways.

GenderQueer: Voices From Beyond the Sexual Binary Author: Riki Anne Wilchins, Joan Nestle and Clare Howell

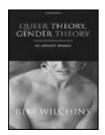
Publisher: Alyson Books (2002) I.S.B.N.-13 978 1555837301

From Amazon Books: A Perhaps more than any other issue, gender identity has galvanized the queer community in recent years. The questions go beyond the nature of male/female to a yet-to-be-



traversed region that lies somewhere between and beyond biologically determined gender. In this ground breaking anthology, three experts in gender studies and politics navigate around rigid, societally imposed concepts of two genders to discover and illuminate the limitless possibilities of

identity. Thirty first-person accounts of gender construction, exploration, and questioning provide a groundwork for cultural discussion, political action, and even greater possibilities of autonomous gender choices. Noted scholar Joan Nestle is joined by internationally prominent gender warrior Riki Anne Wilchins and historian Clare Howell to provide a societal, cultural, and political exploration of gender identity.



Queer Theory, Gender Theory: An Instant Primer

Author: Riki Anne Wilchins Publisher: Alyson Books (2004) I.S.B.N.-13 978 1555837980

From Amazon Books: A one-stop, no-nonsense introduction to the core of post-modern theory, particularly its impact on queer and gender studies. Nationally known gender activist Riki Wilchins combines straightforward prose with concrete examples from L.G.B.T. and feminist politics, as well as her own life, to guide the reader through the ideas that have forever altered our understanding of bodies, sex and desire. This is that rare post-modern theory book that combines accessibility,

passion, personal experience and applied politics, noting at every turn why these ideas matter and how they can affect your daily life.



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.

# **Depression and Transgender**

## **Tackling One of the Best Understood Mental Illnesses**

by Gianna E. Israel

Article appeared in Polare magazine: July 2004 Last Update: October 2013 Last Reviewed: September 2015



epression is the leading mental health issue faced by transgender persons. However, unless a client or reader's depression has progressed to crisis proportions it is the subject I am least likely

... when transgender persons are depressed, it does not mean that having a transgender identity or fulfilling one's crossdressing needs is pathological, mentally disordered or medically diseased.

to receive questions about. Depression is also the leading mental health issue faced by those who do not have a transgender identity. With this knowledge it should be clearly understood that when transgender persons are depressed, it does not mean that having a transgender identity or fulfilling one's cross-dressing needs is pathological, mentally disordered

#### or medically diseased.

Both transgender and non-transgender populations are equally unlikely to receive treatment for depression. This is tragic, because depression is one of the best understood mental illnesses, with recognizable symptoms and effective interventions. People do not seek treatment for a variety of reasons. Some individuals allow themselves to suffer tremendous pain, believing that obtaining help is shameful or a sign of weakness. Typically these persons have bought into the notion that mental health issues are stigmatizing or less important than medical conditions. In other words, people are more likely to seek treatment after contracting a painful, sexually transmitted disease than get help for depression. It does not seem to matter how much emotional turmoil the person is suffering.

Within both populations, there also exist numerous persons who recognise that they are moderately to severely depressed. Some of these individuals do not seek treatment because they believe it will be ineffective or they are suspicious of the medical and mental health professions. Because transgender persons continue to be discounted, misdiagnosed or characterised as pathological, particularly by professionals unfamiliar with gender identity issues, it is understandable that some will feel hesitant in seeking support for depression. This concern is an important dynamic in supporting transgender persons. I will address it after providing basic information about depression itself and how it is identified.

Depression is a mood disorder characterised by extended feelings of sadness, loss, restlessness, discouragement, hopelessness, self-doubt and guilt. These feelings are often accompanied by noticeable changes in a depressed individual's regular sleeping, eating and sexual habits. They are also likely to have changes in self-perception, think negative thoughts on an on-going basis, have difficulty making decisions, and sometimes, contemplate self-destructive acts. Their emotions typically swing sharply between feeling angry, sad, melancholic or moody.

Depression is not about having one or several isolated bad or low-energy days; its about feeling badly and having an emotionally poor quality of life, day after day, with no hope of relief in sight. The preceding description reflects the state of mind that characterises depression and lends understanding to why people do not seek treatment.

The more severe the depression the more limited an individual's ability to think realistically or recognise options which might improve their quality of life. Simply stated, most depressed persons routinely discount treatment options until everything else has failed. This type of 'clouded' judgement also frequently slows the resolution of gender issues. Depressed transgender persons frequently feel compelled to move ahead in their transition without seeking adequate support. Also, in order to gain acceptance and reduce emotional turmoil, they may disclose their transgender issues without having taken into account potential consequences or its effect upon others.

It is well documented within professional literature that depression can be caused by either one or a combination of medical, psychological or circumstantial factors. As a result there are a variety of treatment approaches which are designed to address this disorder. Therefore, while it is a positive step for people to acknowledge they are depressed, deciding ones' own course of treatment or self-medicating is irresponsible and dangerous. A professional familiar with the treatment of depression should be consulted. In some circumstances anti-depressant medications may be useful, particularly when an individual is in crisis or experiencing debilitating emotional pain.

Most anti-depressants are designed to take the edge off of the extreme lows or sharp mood swings which accompany severe

depression. They provide temporary emotional relief allowing the individual an opportunity to build coping skills. Anti-depressants vary in their recommended length of use and several also address depression related anxiety or manic-depression.

Education within individual psychotherapy also plays an important treatment role and may be coupled with medication. In learning about depression, people frequently feel that the tremendous pain they are suffering will never end. Being reassured that despondent feelings do resolve and that positive change is possible is an important part of treatment. It is also helpful for people to find out that they are not alone, and that there are numerous instances of successful treatment.

Because depression exacerbates social isolation, peer support or group therapy can provide individuals with positive social contacts and an opportunity to hear how others combat depression.

It should be noted that in providing depression treatment to transgender persons, there exist several dynamics which frequently prevent persons from seeking help. As previously mentioned, transgender persons routinely have been characterised as mentally disordered because their cross-dressing and gender identity issues seem unusual to non-transgender persons. Regrettably such attitudes still exist today within the medical and mental health professions, particularly in locations that do not have access to up-to-date professional literature on gender identity issues. Both care providers and transgender persons should understand that having a transgender identity or individual cross-dressing needs does not cause depression; rather they are caused by experiencing seemingly unresolvable social and circumstantial pressures. Learning effective coping skills which concurrently resolve these pressures while preserving a person's gender identification is the correct approach in these situations.

Transgender persons also avoid treatment for depression because it is widely believed that in order for treatment to be effective, both gender identity and depression issues must be addressed at the same time. This is not always the case. In some situations it is possible to provide symptom relief without having to immediately deal with gender identity issues.

Individuals may seek support for their depression, stressing that they are not interested in discussing gender identity issues until they feel safe doing so, if it should it become necessary. Those who feel that disclosing their gender issues may prove compromising or be met with negativity, may choose not to. Rather, they can utilize the break from emotional anguish which is available through traditional depressive-symptom relief to seek gender specialized resources for their cross-dressing or gender identity issues.

Having two care providers, one who dispenses depression treatment and the other who offers gender specialized support is useful in many circumstances. This is particularly so when a transgender person does not yet have a sufficient level of communication skills and knowledge about gender identity issues to disclose to a helping professional unfamiliar with gender identity issues.

The interpersonal difficulties and social hostilities which transgender persons experience can play a large role in causing or aggravating depression. This is particularly true for individuals who are coming to terms with gender issues without the assistance or awareness of gender specialized resources. 'Coming-out', disclosure concerns, balancing transition costs, social isolation, family rejection, and being single or unable to find acceptance from a significant other, are some of the recognizable sources of depression in transgender persons. Less frequently acknowledged contributors to depression include; unresolved gender identity conflicts in pre- and post-operative persons, pre- and post-surgical emotional adjustment, poor body image and low self-esteem.

Transgender hormone administration also may play a causal role in depression. Because hormones are powerful chemicals, an increase or decrease in dosage can bring on changes in mood. Transgender persons and their physicians need to recognise that routine laboratory testing of blood-based hormone levels helps ensure that dosages are effective, yet not so high as to create debilitating mood swings or dangerous medical complications. Gradual changes in hormone dosages are a sensible precaution that provide an opportunity for physical and emotional adjustment. Also, individuals who are initiating hormone administration frequently are poorly prepared for the emotional changes that go with it.

These persons are encouraged to adjust their thinking and seek support for their needs much as women do during menopause. This is particularly so for transgender women who choose to cycle their hormones so as to mimic the biological rhythms genetic women experience.

Lastly, care providers need to be aware that a lack of access to hormones also produces high rates of depression, emotional mood swings, and occasionally suicidal feelings. This is particularly so when public institutions, and medical or mental health providers deny transgender persons access to hormones because it is against policy or care provider staff are unfamiliar with gender identity issues. Transgender persons should not be denied access to hormones or cut off from pre-existing prescriptions solely because a care provider is uninterested in or unfamiliar with supporting transgender persons.

Transgender hormone administration is a routine medical procedure and transgender persons are no less entitled to informed medical care than other patients. Transgender persons can suffer depression caused by situations or disorders that are in no way related to gender issues. Transgender persons need to recognise this, and research treatment options before things reach a crisis. It is senseless for individuals to suffer from depression when successful treatment options exist. In many circumstances severe and long-term depression can be halted with early intervention.

If you are a person suffering from depression, start searching for help now and do not give up until you find it. Most gender specializing care providers are familiar with treatment and available resources. If you do not have a gender specialist in your area, traditional mental health counselling and psychiatric resources are listed in your local telephone directory. Lastly, if you would like to read more about combating depression, most bookstores and libraries have numerous professional and self-help titles available.

One I recommend is The Depression Workbook, by Mary Copeland, (New Harbinger Press).

From Susan's Place: Gianna E. Israel was a therapist and author of many online articles regarding transsexuals and gender transition as well as the 1997 book *Transgender Care: Recommended Guidelines, Practical Information, and Personal Accounts.* 

She also published numerous articles on transgender issues, including a regular column in the magazine, *Transgender Tapestry*, and a series of gender articles which are published on Usenet and in C.D.S. Publication's TG Forum. Her writings on gender issues had a significant impact on the field and had an enormous impact on many people's lives. She spent nearly 20 years providing gender-specialized counselling, evaluations, medical recommendations, and mental health services across the United States. She even offered appointments by telephone for individuals without local support or who found office visits difficult. She was a member of H.B.I.G.D.A. and worked with thousands of transpersons in all stages of transition. She passed away on 21 February 2006 after a long illness and is a sorely missed supporter of the trans community.

A full list of her essays on the "Differently Gendered" M website



Transgender Care: Recommended Guidelines, Practical Information, and Personal Accounts Author: Gianna E. Israel, Donald E. Tarver and Diane Shaffer Publisher: Temple University Press (1998) I.S.B.N.-13 978-1566398527.

From Amazon Books: By empowering clients to be well-informed medical consumers and by delivering care providers from the straitjacket of inadequate diagnostic standards and stereotypes, this book sets out to transform the nature of transgender care. In an accessible style, the authors discuss the key mental health issues, with much attention to the vexed relationship between professionals and clients. They propose a new professional role; that of "Gender Specialist".

Chapters 3, 4, and 5 provide definitive information (in the context of consulting health professionals) on hormone administration, aesthetic surgery, and genital reassignment surgery. Chapter 6 takes up the little-examined issue of H.I.V. and AIDS among transgender people. There is also a chapter devoted to issues of transgender people of colour, as well as a chapter on transgender adolescents. The book contains a wealth of practical information and accounts of people's experiences about coming-out to one's employer or to one's friends or spouse. Several essays spell out the legal rights of transgender people with regard to insurance, work, marriage, and the use of rest rooms. The second part of the book consists of thirteen essays on a range of controversial topics.

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## **Book Review: The Gender Frontier**

### A Desire to Show Truth Allied to a Desire to Reform Society

**Reviewed by Katherine Cummings** 

... this book will be of interest to

not least because it ignores the

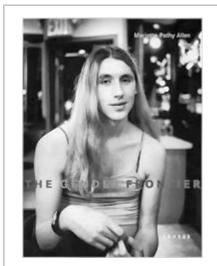
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glitz and glamour typical of those transgender books which

Ken dolls of our community.

Article appeared in Polare magazine: July 2004 Last Update: October 2013 Last Reviewed: September 2015



The Gender Frontier, by **Mariette Pathy Allen** 

#### The Gender Frontier

by Mariette Pathy Allen Published by Kehrer Verlag (2003) I.S.B.N.-13 978 3936636048

here is a long line of talented photographers who have made a serious commitment to recording images which

empathise with their subjects and educate the onlooker to a truth they might otherwise ignore through their conditioning or simply through a selfish desire to pass by on the other side, like the Pharisee in the story of the Good Samaritan.

Sometimes the photographer's motivation has been less easy to fathom than at other times. Matthew Brady's images of the dead and wounded in the American Civil War; Arthur Fellig's scenes of crime, bloodshed and desperation, Diane Arbus' images of freaks and mysteries, culminating, perhaps, in photographs she is reputed to have made of her own suicide, challenge us to understand the degradation and injustice which many suffer through no fault of their own. There is no overt suggestion in the work of these artists that they are doing anything other than depicting the way things are, nor that they are pressing for social change.

Yet photographers like Tina Fiveash, on the Australian scene, and Mariette Pathy Allen in America, bring to their art a desire to show truth allied to a desire to reform society. Fiveash's images of transgenders, gays and lesbians defiantly show us truth and challenge preconceived ideas, and Mariette Pathy Allen's work underlines the similarities and differences in Australian and North American society.

Allen's new book, The Gender Frontier, was published in Germany in 2003 and the text is presented in both English and German.

Many of the image concern themselves with activism associated with the struggle for transgender rights, and there are significant essays by some of America's leading transgender activists. Among these are Grady T. Turner, Riki Wilchins and Jamison Green. There is also a short piece by Milton Diamond, and an introduction by Allen herself.

It was interesting for me to browse through the book, identifying the people I have met in my travels through the United States ... Riki Wilchins, Nancy Nangeroni, Jake Hale (it was I who gave him the nickname "Kodiak Jake" soon after we met in San Diego although I think he has probably shaken it off by now) and Virginia Prince, whom I met in 1962 when I was doing post-grad work in Toronto and she was busy forming the Full Personality Expression (F.P.E.) Sorority for Cross-Dressers. Virginia claims to be the coiner of the term "transgenderist" for someone who wishes to live in her/his non-assigned gender role but has no interest in surgical intervention.

There are a number of extended photo-essays of individuals, with a cluster of photographs for each subject, and these are followed later in the book by text essays. It seems a pity the text could not have been more closely associated with the photos but I am well aware of the problems associated with laying out books which contain colour and monochrome illustration as well as text, all of which may demand different types of paper and therefore impose restrictions on the arrangement of the books contents.

One of the photo/text essays deals with Robert Eads and his partner Lola Cola and I realised as I looked through that section that one of the most famous of the many photos of that remarkable couple came from the camera of Allen. Sylvia Rivera and Leslie Feinberg appear in full activist mode and there is even an F.T.M. sheriff from Florida. His was the only image which made me uneasy (as I said to Allen in an email) as he is depicted levelling a handgun at the camera and, by extension, the reader. I do not like having guns pointed at me under any circumstances, and am surprised that anyone who handles guns professionally would do such a thing. (Shows how strong the discipline was in my pistol club, I guess, and how often I was roared at by weapons trainers when I was in the Navy).

I digress. Technically, Allen's book is just about as good as you can get. The monochrome images (black and white if you like) are printed by the duotone process, which runs pages through the press twice, with the result that the blacks are deep and lustrous and the shadings velvety and smooth. The colour printing is as good as one expects German printing to be, which is very good indeed, and the book is physically well-made.

I have, however, a couple of minor complaints relating to the way the book has been designed. Information conventionally contained on the back of the title page (such as the I.S.B.N. and the date of publication) turn up on the last page of text, like a mediaeval colophon. The sub-editors have been careless at least once, transposing page identification of images so that Jamison Green is said to be on page 76 and Yvonne Cook-Riley on page 77 whereas the reverse is true. This is rather more important in a gender-role-related book than in most, since in some cases the accepted gender association with a given name can be at odds with that person's image. I am sure that neither Green nor Cook-Riley would wish to be identified as the other.

Many of the images chosen by Allen for her book are striking. Some are even daunting, such as the operating theatre view of the surgical donor site for the creation of a neo-phallus. Personally I find photographs of transgenders demonstrating for their rights more inspiring than that of a plump M.T.F. sheriff lying naked in the Florida sun showing off his huge, flaccid penis, but each to his or her own.

I hope I have made it clear that this book will be of interest to the transgender community, not least because it ignores the glitz and glamour typical of those transgender books which concentrate on the Barbie and Ken dolls of our community. It will, however, be of even more value in bringing the general public to an understanding of the need for political, human, legal and medical rights for transgenders. The stress in this book is on the hard-working activists and role models to whom we owe so much. It is a book which is desirable for libraries with gender collections but it should also be in public and educational libraries of even moderate size.

### **Mariette Pathy Allen**

From Mariette Pathy-Allen's website: Mariette Pathy Allen has been photographing the transgender community for over thirty years. Through her artistic practice, she has been a pioneering force in gender consciousness, contributing to numerous cultural and academic publications about gender variance and lecturing throughout the globe. Her first book *Transformations: Cross-dressers and Those Who Love Them* was groundbreaking in its investigation of a misunderstood community. Her second book *The Gender Frontier* is a collection of photographs, interviews, and essays covering political activism, youth, and the range of people that identify as transgender in mainland U.S.A. and won the 2004 Lambda Literary Award in the Transgender/Genderqueer category. She has also been a valuable consultant to several films



about gender and sexuality. Her life's work is currently being archived by Duke University's Rare Book and Manuscripts Library, and the Sallie Bingham Centre for Women's Studies. She is currently working on an in-depth study of transgender women in Cuba, and another project about transgender veterans in the U.S.. In addition to her work with gender, Mariette's background as a painter frequently leads her to photographic investigations of colour, space, and cultural juxtapositions such as east/west, old/new, handmade/manufactured. Mariette lives in New York City with a rotating cast of friends and loved ones. For more please visit Mariette Pathy-Allen's website ...



This video is courtesy Camera Club New York and You Tube

The Gender Frontier Author: Mariette Pathy Allen Publisher: Kehrer Verlag (2003) I.S.B.N.-13 978 3936636048

From Amazon Books: Mariette Pathy Allen documents the lives of extraordinary individuals, their



partners, families and friends. Through photographs and short texts, the reader is offered an intimate connection to the book's subjects and insight into how their own lives are affected by gender. As Allen says: "Transgendered people offer the rest of us a potentially exhilarating vision of fluidity, freed from traditional roles or definitions. They make vivid the questions: What is the

essence of humanness beyond masculinity or femininity?" Framed by the emerging transgender political movement, *The Gender Frontier* is one of the first book to include both female-to-males and male-to-females, as well as queer youth. One of her subjects, Robert Eads, a female-to-male who died of ovarian cancer, was also prominently featured in the award-winning film *Southern Comfort*.



Transformations: Cross-dressers and Those Who Love Them

Author: Mariette Pathy Allen Publisher: Dutton Adult (1990) I.S.B.N.-13 978 0525248200

From Mariette Pathy-Allen's website This is a pioneering book of photographs and interviews with cross-dressers and their loved ones: wives, children, and other family members. The focus is on presenting cross-dressers in daily life, in positive settings and relationships. The photographs sensitive, sometimes beautiful, and the text offers insight into the differences between sexual orientation and gender presentation. *Transformations* is suitable for schools and libraries.

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