October-December 2008

CONTRIBUTORS

phinn borg, katherine cummings, gaye stubbs, tracie o'keefe, maggie smith

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THE FINE PRINT

resources@gendercentre.org.au

PO Box 266, Petersham NSW 2049

Phone: (02) 9569 2366 Fax: (02) 9569 1176

Email: reception@gendercentre.org.au Website: www.gendercentre.org.au

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Polare A Magazine for people with gender issues

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Editor: Katherine Cummings

DEADLINE

for submissions to the next edition of Polare is the eighth of December 2008.

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Phinn's Report

The past months at the Gender Centre have been a busy time with the AGM coming up, reports needing to be completed and the daily running of the Centre. In the past months we have held self-defence classes run by Fight Like A Girl. These classes are very popular and continue to be a hit with all who attend. we will endeavour to arrange for more classes to be run at the Centre in the coming months as well as our visiting psychiatrists here on Fridays, when needed, and the Inner City Legal Centre clinic on the fourth Friday of the month, and our First Aid classes that will be running over eight weeks, as well as the usual drop-ins and social, events.

This month we had two visits from the students of Sterling College, twenty in total. The program at Sterling College combines theory with practice and aims to provide students with the skills, knowledge and values required to work in the community services industry.

A reminder to all our drop-in clients that dropin starts at 6.00pm and it would be appreciated if you were to arrive at that time. If you do arrive before 6.00pm please do not loiter outside the building.



NOW AT RPA HOSPITAL

We offer free confidential medical and counselling services:

- Testing and treatment for STIs (sexually transmissible infections)
- HIV testing and counselling
- HIV treatment and management
- Hepatitis vaccinations
- Sexual health check-ups
 Free condoms and lubricant
- Sex worker health checks

For appointments and other information call 9515 3131 or drop in to see our nurses.

Ground Floor, Page Building (Bldg 14) Royal Prince Alfred Hospital 119-143 Missenden Road, Camperdown



"Most people take us for sisters, but actually we're mother and son."





PLEASE NOTE:

The email address for Resources and Polare is now:

resources@gendercentre.org.au

NB Please put the word 'Polare' somwhere in the subject line

Editorial - Katherine Cummings



The Marriage Act, 1961, defines marriage as 'the union of a man and a woman to the exclusion of all others, voluntarily entered into for life. 'Man' and 'woman are not defined in this act although almost every other term is ... judge, magistrate, authorised celebrant, minor, overseas country etc. The fact that around half of these marriage contracts fail to go anywhere

near being 'for life' and that there are legal mechanisms for dissolving marriages, both civilly (often very uncivilly) and religiously, suggests that the concept of marriage as a voluntary lifelong union is flawed and should be reexamined.

To start with, the concept of 'man' and 'woman' as definable terms is muddy, to say the least (transgenders know this better than anyone) as every definition has an exception and there is no satisfactory rule which can be applied universally, in terms of anatomy at the macro or micro level, in terms of appendages nor chromosomes and genes. Nor can we humanely apply tests such as the capacity to have children since many people are incapable of procreation through accidents of birth, physical accidents or through old age, and these are hardly reasons for denying them the loving comfort and social pleasures of married life.

The real problem is that we are muddling along confusing social policy (i.e. laws and customs devised to make life easier and better for people) with religious dicta, which, in turn, are based on tribal notions of the need to outbreed the tribe next door. With overpopulation being the biggest single problem humanity faces (where do you think global warming comes from?) it is amazing that we are clinging to an outmoded concept of marriage, and tinkering around the edges so that people can be serial monogamists.

Nor is the concept of 'one man, one woman' the only model available to us. Throughout history patriarchal societies have allowed polygamy, almost always in favour of men having multiple wives and even in modern times there are religious sects which allow, encourage or even mandate multiple spouses. Islam permits multiple wives and in some Micronesian cultures it was expected that a man would marry his brother's widows and adopt his deceased brother's children, thus guaranteeing a measure of social security in societies with marginal resources. Surely by now we have reached a point where people can self-define in terms of their own social arrangements. It is possible for consenting adults to adopt marital

arrangements outside the narrow confines of the Marriage Act, but they find themselves punished by bureaucracy if they choose to do so. This has been demonstrated in many petty ways through denial of recognition of long term same-sex relationships, through inheritance and superannuation regulations, hospital visiting access, adoption laws and many other failures to recognise the capacity of humans to love and to accept responsibility outside the restrictive norms imposed by those whose only authority rests on numbers and tradition.

The whole marriage question needs to be re-examined. What is wrong with same-sex marriage? What is wrong with polygamy? What is wrong with polyandry? If adults of sound mind decide this is the way they wish to live their lives, and whether or not they intend it to be 'for life' or for a fixed term, by what right does government decide to regulate these views? We know that polygamy and same-sex relationships can work. We have seen them work, time and time again. Those who do not believe in such things are operating on the basis of prejudice and stereotypes, the same stereotypes which saw gays and lesbians for so long as contemptible, the same blinkered view that could not see transgenders at all. And now we have moved forward a little and many gays and lesbians have been able to move into the light. Justice Michael Kirby on the one hand, Michael Mitcham on the other. Still not equal, but not as disadvantaged, ignored or persecuted as they once might have been. Transgenders, of course, are still denied many of their rights, to education, to housing, to employment, to health care ... as well as the right to marry in their true gender role.

Perhaps our best strategy to achieve the right to marriage lies not in perpetuating the 'one man, one woman' pattern and insisting on recognition of our innate genders, but in a larger reform of marriage which will allow adults to define their own social contracts. One-on-one (never mind the gender), bigamy, threesomes, polygamy; what difference does it make as long as consenting adults agree to the terms and nobody is harmed.

But what about the offspring, the children of these unions? Well, polygamous marriage works in other societies and studies of children of gays and lesbians have demonstrated that they are not disadvantaged. Is there a difference between serial monogamy and polygamy? It is an illusion that we live in a Christian society. We don't, as shown by the latest Census, where nearly nineteen per cent of the population claimed to be atheists(leave aside the flippant doubters who called themselves Jedi or Calithumpians). Our current rules are based on Judaeo-Christian ideas (post Old Testament, of course) but we claim to be a multicultural society. Why don't we try being multicultural, for a change?

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ARBIAS Conference Report by Liz Ceissman

t the beginning of September I attended the International Conference on Alcohol and Other Drug Related Brain Injury Australia National Conference held in Melbourne.

Over a period of three days many facets of brain injury were discussed. As a representative of the Gender Centre I was able to advocate on behalf of the transgender community to bring to the notice of an array of service providers the needs of transgender people who suffer from an Acquired Brain Injury.

A few services had never met with transgenders and had no understanding of their needs. They realised that because of this lack of understanding they had made it harder for

transgender people to access their services.

Many of the service providers I spoke with were very open to hearing about

the needs within the community and welcomed the idea of further discussion after we returned to our places of work, in order to provide stronger connections and appropriate support to transgendered people.

I learnt many things during the conference and found that the lack of information to support people is quite significant. One presenter even went so far as to assert that there has never been any work undertaken to provide brain injury information to the gay/lesbian or transgender communities in Australia.

I found this distressing as there are a number of clients who regularly access the Gender Centre and who suffer from brain injuries. In light of this lack of information I thought it valuable that some general information be included in this report.

The information is taken from ARBIAS resources and puts a very complex disability into simple English.

The name given to damage to the brain is Acquired Brain Injury (ABI). It is classed as an acquired disability as it is not something people are born with. It is not the same as developmental/intellectual disability nor is it a psychiatric problem. It can be caused by a number of different things, as set out below:

A head injury, which is often the result of car accident, a fall or an assault/fight

Alcohol and drug abuse, alcohol is toxic to the brain. Also people intoxicated on drugs or alcohol are at risk of head injury due to falling over, accidents, or fighting.

Stroke This results from blood vessels in the brain becoming blocked or bursting.

Infections. Viruses infecting a person can attack the brain, causing damage.

Hypoxia/Anoxia. Lack of oxygen or absence of oxygen to the brain. If either of these situations arises then the brain is damaged.

Not all brain injuries prevent people from continuing their normal lives.

The problems that can occur because of an ABI range from severe impairment, where a person

may need lifetime care, to situations where someone experiences memory problems or physical disability.

For further information relating to this conference or about Brain Injury, contact me at the Gender Centre. While I am not an expert on the area I may be able to connect you with services that can answer your questions based on the learning I experienced in Melbourne.



PhD Research on Australian Indigenous Gay, Lesbian and Transgender/Sistagirl experiences.

Aude Chalon (aud_mmsh@hotmail.com)

is gathering life stories especially among Sistagirls. If anyone can help, please contact him on his email address.

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Needle Exchange

7 Bent Street, Petersham

(02) 9569 2366

10am - 5.30pm

Monday to Friday

A confidential free service for people with gender isues (ask for the Outreach Worker)

Sharp Containers

Pill Filters
Condoms
Spoons
Water
Fit Packs
Swabs
Dams



Syringes 1ml, 2.5ml, 5ml

Needles 21g, 23g, 25g, 26g

or phone the Alcohol and Drug Information 24-hr advice, information and referral service.

Sydney (02) 9331 2111 Country 009.42.2599

You're invited to Dinner!



WEDNESDAY
nights
6 - 8pm
Yummy food - New
friends
- Free Friends/Family
all welcome

FTM Australia Information Sheet 2008

FTM Australia is a membership-based network which offers contact, resources and health information for men identified *female* at birth, their family members (partners, parents, siblings and others), healthcare providers and other professionals, government and policymakers since 2001.

We aim to inform the public of the issues surrounding transsexualism in men (female-to-male transsexuals).

This Australia-wide network is coordinated by Craig Andrews, with the input of members and guided by an Advisory Panel of health and legal specialists.

Membership

Members receive our newsletter *Torque* and access to our e-mail discussion list, *OzGuys*.

Newsletter

Our newsletter – *Torque* is published four times a year for the benefit of members, their families and service providers. *Torque* is posted out to members free of charge throughout Australia and New Zealand.

Discussion List

Our e-mail discussion list is called *OzGuys*. It is open to members of FTM Australia living in Australia and New Zealand.

To find out more please visit our website at www.ftmaustralia.org

More information about membership is available through Our website at www.ftmaustralia.org By email mail@ftmaustralia.org By post PO Box 488, Glebe, NSW 2037

We warmly welcome your interest in the network and hope to hear from you soon!



This network is supported entirely by members

Dear Reader.

A lot has been said of late about the need to do things differently. Familiar ways of seeing and doing things are being questioned. At the same time, as if in preparation for the new and in order to understand what's happened so far, thoughts go back to the past.

Do you remember being told at family dinners, when the food wasn't to you liking, "Think of the starving children in ...(insert the country) (!)?

Embedded in this command or exclamation were a number of messages: a concern for nutrition, sustenance and growth, annoyance at the wasted time and effort put into the preparation of the meal, a lesson in the inequality of the unequal distribution of resources, and from the experience was gained an introduction to both relativism (by observing others at the table hoeing into the meal) and subjectivism (it tasted yuck!). At the same time though, a reminder about the starving was merely words, and at hand was the painful process of either chewing through the unsavoury substance on the unmoving plate (definitely no thought of asking for more) or else staring at it and sitting it out. It couldn't last forever.

Nowadays a different approach is probably taken at meal times, at least in some households: an alternative food might be offered and different messages conveyed. Old ways are discarded, replaced, but not necessarily, or easily, forgotten. Our memories give us the awareness, sometimes painful, of the difference between the *now* and the *then*. In the present, comfort can be gained in knowing that difficulties, more profound than a disliked dinner, were lived through and that other tough times can be endured. It can be helpful to share memories. So, if you feel like doing so, you could write, anonymously if you prefer, about your experience of difficulty and how you got through it -- not to tell others what to do when doing it tough or experiencing unhappiness, but to give voice to your memory, and in validation of human resilience, a part of your part of the human story is shared.

By the way, the unsavoury substance, substances in fact, were, on their allotted nights, brains, stew, and tripe. What do you think,

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Counsellor's Page

maybe not distasteful but tasty? Perhaps your experience of each food type has been different - *brains* or *tripe* prepared with a savoury sauce, or stew presented with a more appetising name or form -- *casserole* maybe, even back then? Regards,

gaye

PLEASE NOTE!

Appointments for counselling should be made directly with Gaye Stubbs, the Gender Centre Counsellor.
Phone 9569 2366 Monday- Thursday.

Are You Young, Transgendered and Literate?

Do You Want To Have Your Say? We Want You To Have Your Say!

The Gender Centre would like to see more material for *Polare* coming from the under twenty-five segment of our community. We are aware that the problems and experiences of transgenders who transition early are different from those of transgenders who transition late. We would also like to have these differences defined so that we can campaign to improve the legal, social and therapeutic conditions of those who transition early. Such people may not have had the advantage of making their way in the world in their assigned gender but may instead have encountered all the disadvantages of early transition. They may lack financial security, established reputation and social acceptance and we would like to hear your suggested strategies to ameliorate such situations.

You are encouraged to contribute material for the January-March 2009 issue of *Polare*. Please send your contribution by 8 December 2008

LEGAL PROBLEMS?

The Inner City Legal Centre will be providing advice sessions for clients of the Gender Centre. There will be a six-month trial at the gender Centre, with a solicitor from the ICLC attending the Gender Centre, 7 Bent Street, Petersham, on the fourth Friday of each month between 2.00pm and 5.00pm

The ICLC can advise in the following areas:

family law | criminal matters | fines | AVOs | victim's compensation | employment | identity documents | police complaints | discrimination | domestic violence | sexual assault | complaints against government | powers of attorney | enduring guardianship | wills | driving offenses | credit and debt | neighbourhood disputes

The dates for the remainder of 2008 are:

24 October 2008

28 November 2008



To make an appointment please contact a staff member of the Gender Centre on 9569 2366. Bookings are essential

Support Services Pages (in most cases see

also the Directory Pages at the back of the magazine for added detail))

problems?

You can write to
The Counsellor
The Gender Centre
PO Box 266
Petersham
NSW 2049

questions?

If you do not wish to be identified, make up a name for yourself or come in and talk confidentially with the Counsellor (by appointment only)

concerns?

9am - 5pm Monday and Tuesday only Email: counsellortgc@bigpond.com.au Gaye 9569 2366



THE SEAHORSE SOCIETY is a self help group based in Sydney open to all crossdressers, their relatives and friends. We offer discretion, private monthly social meetings, social outings, contact with other crossdressers, a telephone information service, postal library service and a monthly newsletter.

NSW Seahorse Society

THE SEAHORSE SOCIETY OF NSW INC PO BOX 2193 BORONIA PARK, NSW 2111

Call on 0423.125.860 and our **website** is:

www.seahorsesoc.org

Email: crossdress@seahorsesoc.org
Membership enquiries, change of details etc. contact
Membership Secretary,

PO Box 6179, West Gosford, NSW, 2250 "crossdress with dignity"

Central Coast Group Forming

A group aimed at networking transgender persons who live/work on the CENTRAL COAST of NSW, AUSTRALIA. Transsexuals, others identifying as transgender, crossdressers and partners who have a connection with the Central Coast are welcome to join. This group is about fostering friendship amongst ts, cd, tg persons and the rest of the trans community. Even if group emails are not your thing please join the contact list (in DATABASE) so that it might act as an email and postcode directory of who's who on the Central Coast. Feel free to email and introduce yourself to the group and any members near your postcode:) Whether you are a crossdresser who prefers their topic to be crossdressing; or a transsexual who prefers to converse on matters of transition please respect and tolerate every member's right to be different. Remember the primary goal is to facilitate contact:)NOT A DATING SITE; SEXUALLY EXPLICIT CONTENT OR CONDUCT WILL NOT BE TOLERATED. [http://au.groups.yahoo.com/group/centralcoastts/]

Gender Affirmation and Liberation (GAAL)

GAAL is committed to providing a service to: People with the condition of Gender Dysphoria and who are in the process of affirming gender identity by hormonal and/or surgical means or have already done so. **GAAL** aims to provide a safe and supportive environment for people in the process of gender affirmation or who have affirmed their true gender to share experiences.

Social Activites. We also have social occasions where we actively encourage the participation of friends, family, partners and other support groups. We hold regular meetings on the third Monday of each month at a venue in South Yarra. GAAL: PO Box 245, Preston, VIC, 3072

Or call our message bank: (03) 9517 1237 and one of our committee members will contact you as soon as possible or you can write to us. If you need to contact us urgently Ph: 0425 785 666

Central Coast Transgender Support

The CCTS was started in the 1990s and is a totally free and unfunded service to all with gender related issues. Its primary function is to offer guidance to all who are contemplating commencement of the Medical and Psychological requirements that are involved in full M to F Transition under the Harry Benjamin Standards of Care.

The Centre also provides access to high quality, subsidised and certified permanent hair removal and offers alternative direction and instruction for the control and management of problem hair or chronic hirsutism within the premises.

The CCTGS operates Monday to Saturday 10am to 10pm

Tel: 0404 054 000

Email: smh101@exemail.com.au

QUEENSLAND GENDER CENTRE

The Queensand Gender Centre is run solely by a transsexual here in Brisbane, Queensland, Australia with the aim of assisting those in need of accommodation and assistance.

It is open to all those who identify as transsexuals and who are mentally stable and drug and alcohol free.

upper north side.

You can stay either up to six months or twelve months and we can house up to six people at a time.

The location of the shelter is kept If you want more information or confidential to protect the tenants. are interested in assisting with The accommodation is in an the project please telephone, upmarket suburb on Brisbane's write or e-mail the Queensland Gender Centre (see p.38 for contact details)

OUTER METROPOLITAN AND COUNTRY TRANSEX-INTERSEX SUPPORT (O.M.A.C.T.S.I.S)

Our service provides support for individuals and their families, affected by the issues of transsexualism and/or intersex conditions

We are able to offer social support and out-of-hours counselling services by telephone.

For further information and social support please phone Gina (0247 511 402) We will soon be in other areas

Down Memory Lane Without A Paddle

ome old photographs of life at the Gender Centre have recently been donated by Paula, who has been here almost from the beginning and has a fascinating store of anecdotes about

The Early Days. Among the photos were a few from 1988, showing the Mardi Gras float (see the cover) which represented the SS Tiresias. The Gender Centre in those days was called Tiresias House. The SS Tiresias carried a bevy of gorgeously gowned transgenders, even if the word was not in common use in those days, and won the main prize for imaginative and well-executed floats. The trophy, a glass artefact, apprently resided in the Gender Centre for many years but has long since been appropriated by someone who fancied it and had a flawed understanding of the concept of property.

By coincidence I was also going through some

of the old videotapes and found one which recorded the same event on video, starting with the two parts of the articulated SS **Tiresias** being assembled at the Haberfield house (still being used accomodation by the Gender Centre), and then showing it setting out for its night of glory, observed by various neighbours in a state of

bemused acceptance (at least there were no pitchforks or axes being waved and it was too early in the day for flaming torches). The rest of the video is a disappointment as it was taken during the parade without the benefit of supplementary lighting so that apart from the odd sparkler casting someone's feathers into high relief, or the occasional spotlight roaming over the good ship Tiresias and her gaudy crew, there is little to be seen, and the sound track imparts little of value, consisting of a babble of background noise but no real commentary.

But the Gender Centre were out there, being visible, and supporting the rest of the GLBTIQ alphabet soup.

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by Katherine Cummings

These days there tend to be too many other things to attend to, too many more important projects to fund, and too many reports to write for the Gender Centre to be involved in projects such as this, so that although the Gender Centre is doing more for many more people than it did twenty years ago, our profile may not be as high with the general public as it was then.

There was also a videotape which recorded the official opening of Tiresias House in a number of snippets taken from news stories and interviews.

Frank Walker, who was Minister for Community Services, had supplied the initial funding, on the initiative of Roberta Perkins, who had been helping transgenders through the services of the

Wayside Chapel. news stories on the video were surprisingly respectful, considering the general attitude to the transgendered at the time, although their research into the name Tiresias was a little shaky.Greek mythology tells us that Tiresias was philosopher who seemed to make a habit of annoying the Gods. There are variant versions of his story, as



Some of the Crew of SS Tiresias

there usually are in mythology, but he is said to have been blinded by Athena because he came upon her bathing, although he was then compensated (?) by being the gift of understanding bird talk. Another version tells of his coming across two snakes, sacred to Hera (the wife of Zeus), copulating, and hitting them with a stick. Hera punished Tiresias for this perfectly understandable reaction by turning him into a woman. Another version has his blindness resulting from his indiscretion in revealing the fact that (having lived life both ways) he could assert that women gain more pleasure from sex than men do. Hera is said to have then blinded him for betraying this 'women's business' secret, but Zeus

compensated him with the ability to foretell the future, and gave him seven lifespans. The press made a dogs' breakfast out of all this, usually referring to Tiresias as a Greek God, although most of them picked up on the relevance of his having lived in two genders.

Some of the early clients of Tiresias House were interviewed following the 'official' opening, which obviously occurred quite some time after the Centre commenced operations. The clients interviewed are matter of fact and straightforward with their viewpoints and contrast with the clientele I encountered on my first visit in mid-1986, when the Centre seemed to be home to a rather flamboyant lot of young sex-workers. As is the case with most institutions, there seem to have been changes in emphasis on the clientele being helped and perhaps this is as it should be. The transgender world has many parts and it would be foolishly, and even cruelly, restrictive for us to concentrate on one segment of our community to the exclusion of others.

There is a lot of our history locked up in untitled photos and unidentified videos to say nothing of the memories of those who lived the early years. Is it time for us to make a record of some of this oral history, which will otherwise be lost as surely as the trophy awarded to the SS Tiresias has disappeared into someone's private collection.

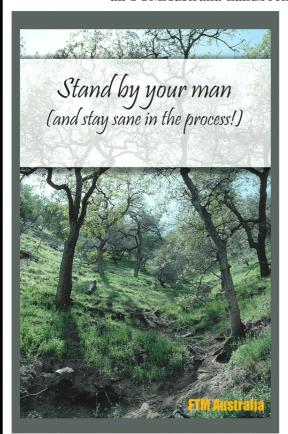
Maybe we should seek a grant from the Historical Society, or seek help from the Oral History Section of the State Library?

Maybe, too, it is time for us to look out more into the wider community and take part in joint functions such as the Mardi Gras and the Fair. We used to organise an annual Ball but last time we tried to organise one it was cancelled for lack of interest. Is the community changing or are times so desperate that few have the necessary disposable income any more?

I understand that the Gender Centre will be at the Fair in 2009, sharing a stall with the Inner City Legal Centre. That's a good start.

Stand by your man (and stay sane in the process!)

an FTMAustralia handbook for partners, family, friends and loved ones



Over 150 pages of personal accounts from partners, family & friends; information (general, contact & support, legal & medical) from people who have "been there".

First published in 2003, this handbook has been republished with new additions for 2007.

Purchase for **AUD\$20.00** from FTM Australia
- incls p/h within Australia
PO Box 488, Glebe NSW 2037
or download an orderform from www.ftmaustralia.org

Publisher: FTMAustralia © 2007 All Rights Reserved. ISBN: 978-0-6464-7753-4 hen I started reading Sex, Knives and Bouillabaisse I was under the impression I was reading a novel written in the first person. I thought it was quick, funny, witty and way over the top, rather like a Thomas Berger novel, full of exaggeration and impossible flights of crazy humour. When it dawned on me that I was reading an autobiography by someone who had lived these mad, over-the-top experiences, my enjoyment increased tenfold.

SK&B tells the story of an apprentice chef who learns his trade in a large hotel amid a crowd of certifiable lunatics who should never have been allowed near sharp knives, let alone cleavers and pointy meat-hooks.

The opening scenes are like a cross between something out of Dickens, where orphan boys

are housed in squalid conditions and forced to work long hours under brutal taskmasters, and a fantasy by Ronald Firbank, where each character prances through a nightmare of scalding broths, red-hot pans and razor-sharp implements.

The central character, Luiz Rodriguez, has a real name, but pretty well everyone else goes by a mad nickname, so that the

chef is known as the Duce, The Man, Boss Hogg or the Fuhrer, and others glory in sobriquets like YG (who was almost called the Sperminator thanks to his success with women), Bumble and Herman.

Herman is said to remind one of a young Goebbels, because of his round glasses and clipped hair, but I think the author means Himmler as I can't find any images of Goebbels in glasses, and his hair was greased down rather than clipped. San fairy Ann. She confuses Jack Hawkins with Jim Hawkins, too, but in return for so much mad hilarity I can easily forgive the odd smidgin of fallibility. Infallibility is over-

rated, if you ask me. What has the Pope written one tenth as entertaining as this?

The writer's best friend and fellow victim from Day One is Billy, a boy from the North of England whose interests revolve around pinball machines and ferrets. The writer himself (this is becoming too complicated ... I had better tell you now that the author, Teri Louise Kelly is One Of Us, a transgender who for the duration of this volume was a young man - with some rather sexy cross-dressing towards the end - and presumably in later volumes will come to realize Her True Nature and liberate the poor bitch locked in a man's body).

Sorry for the strong language, but Teri's book is full of it and one falls into the idiom, or part way into it, making allowances for my general prudery and old-age. The aforementioned Bumble also graduates from stealing ladies'

> underwear to transitioning from male to female (I am giving away a little of the plot here, but the plot is so generous with its madness that a small taste of the content is not going to spoil the meal for you).

We are constantly fascinated/appalled/amused by the crazy antics of individuals and by intertribal pranks and feuds between subsets of the cooking staff, with sideglances at porters, F&Bs

(i.e. food and beverage managers or anyone who wears a suit and tie), chambermaids, cocktail barmen and the implacable laundry women who toil incessantly in the bowels of the hotel, eradicating unspeakable stains from the chefs' impeccable whites.

But there are also really fascinating descriptions, exaggerated I hope, of the life of the apprentice going to Catering School intermittently between coping with the crises and disasters created in serving hundreds of meals a day to the clientele and keeping ones niche in the pecking order. The crises include Christmas meals which run out of vital ingredients like stuffing, the late



Teri Louise Kelly

Polare page 12 October-December 2008 customer who rolls in just closing before demands a complicated eight-course meal, the feuds between staff members, solved sometimes by stealth (the surreptitiously laxativelaced chocolates) or more directly, with kung fu in the kitchen, or street brawling in the lane outside ("I smiled, took a step forward and as he began to make his golden slipper move I kicked him in the gooleys...").

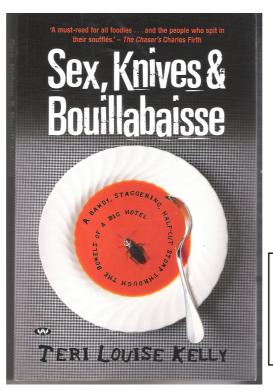
There are vivid descriptions of what happens to food that is returned to

the kitchen as being unsatisfactory (be warned ... don't do it ... or if you do, don't think of eating it when it comes back to you!).

And there is confirmatory evidence (I have heard this from friends of mine who worked briefly in the profession) that one should never venture into the sacred working areas of even the most prestigious and chic establishments if one ever intends to eat out again!

Towards the end of the book Luiz goes on exchange to Paris for three months and learns a different attitude to food and its preparation, and also starts to move in the direction of transition, spending her last night in Paris at the Prostitutes Ball with demi-mondaine friends. I quote: "If ... you have attempted to dance the stomp in a ridiculously tight skirt and dangerously high heels while tanked full of potent liquor, you will immediately understand what the night was like, and if you haven't, then I recommend it."

Having done much of this (without the potent liquor) in my younger years, I heartily endorse and recommend Teri's attitude to life and living and the energy and exhilaration she imparts in her narrative. At the end we see her setting out to conquer the United States and presumably her travels will carry her Down Under in later volumes, as she now lives in South Australia.



In addition to being entertained and educated by SK&B I must record that it is one of those rare books that made me laugh out loud ... more than once. I finished it within a day, regretting when the last page was turned that there would be no more. But wait, as they say on television, there **is** more! Two more volumes promised. Bring them on!

Sex, Knives and Bouillabaise by Teri Louise Kelly. Wakefield Press, Kent Town, 2008. ISBN 978 1 86254 756 8 A\$29.95

Teri Louise Kelly started life as Terence Malcolm 'Luiz' Rodriguez in England. After a stretch in the pen for vandalism Luiz started to train as a chef in 1975 and won Britain's Young Chef of the Year in 1981. He then travelled and worked in France, Bermuda, North America, Australia and New Zealand. In 1999 she started the formal process of becoming Louise and now goes by the name Teri louise Kelly. She lives in South Australia and is married She is a gender warrior, to Melanie. literary critic, author, artist and general trouble-maker. In 2007 she won the Feast **Short Story Competition.**

Teri has asked me to provide her email and MySpace addresses. Her email is atta-girl@hotmail.com and her MySpace address is www.myspace.com/



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Minority groups have frequently been unhappy with how they are portrayed in history, particularly the women's movement because history has generally been written by men. In recent history, over the past hundred years, it has been iconoclastic academics, the medical profession and cheap newspapers that have frequently distorted the lives and histories of sex and gender diverse people.

Susan Stryker, as an American academic historian, however, breaks the mould in that she describes herself as transgender and has the ability to view trans history from the inside out as well as the outside in. She earned her PhD in history at Berkeley and was Executive Director of the GBLT Historical Society in San Francisco from 1999-2003. Apart from having many writing credits to her name she is the co-editor of the Lambda Award winning Transgender Studies Reader, and presently teaches gender studies at Harvard. Added to this is the fact that she is an extraordinarily good researcher, has held teaching posts at other universities and is responsible for the film that put the Compton Street riot in San Francisco into perspective as

Dr Susan Stryker

happening before Stonewall.

The time frame for this book is the 20th century which, particularly in America, saw the emergence of trans people in society and the advent of certain activists who spoke out about the need to treat trans people with respect. Why

this history is so important is because American culture of the last hundred years has had a huge influence over the rest of the world and the development of world views.

Much of the great thinking around trans liberation has indeed emerged from the American struggle and social chaos around trans issues. Within American society there are many diametrically opposed cultures that sometimes have prejudicial and hateful views about trans

people, but there are also cultures such as those of California and New York that by the very nature of their queer culture are constantly challenging and proposing new doctrine around social libertarianism and equality.

This is a very digestible volume of 160 pages that can be a



DrTracie O'Keefe

pocket-sized read of American trans history for those who are not academics because it reads so easily. It could also be an academic reference because it is well referenced. It does not deal with Native American trans history and I take issue with using the word transgender to lump all sex and gender diverse people together but apart from that it is a very important piece of work in the history of trans people writing their own history. Oh, and if you ever get the chance to see Stryker's film *Screaming Queens: The Riot at Compton's Cafeteria* (2005), sell your grandmother for a ticket, it is well worth it.

Transgender History by Susan Stryker Published by Seal Studies California 2008

ISBN 13: 978-1-58005-224-5



NOTE!

The Christmas Barbecue (14 December Noon-4pm) will NOT be held at the Gender Centre. Another venue is being found.

Phone the Gender Centre (95692366) for details

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TRAINING!

Training courses have been offered throughout 2007-08 including Makeup; Hotel Worker; Workplace Hygiene Certificate and Senior First Aid Certificate.

Little interest has been shown and these courses have been poorly attended.

What courses **would** you like to see offered?

Please contact Liz on 9569 2366 or email

casemanagement@gendercentre.org.au

Gender Centre Library

To borrow books you will need to become a member of the Library. You will need to supply personal details (phone number, address etc.) You can make an appointment to join and see the Library by phoning 9569 2366 on Monday or Wednesday. Ask for the Resource Worker.

Video tapes are not for loan but can be viewed, by appointment, in the Gender Centre.

The Library is now housed in the Reception Area of the Gender Centre.

Books may be borrowed for 3 weeks

If you are isolated for any reason and would like to have material mailed to you, please let the Resource Worker know. Don't forget to include your mailing address!

ng list?

Mail to:

Polare - The Editor The Gender Centre Inc PO Box 266 Petersham NSW 2049

different Gender'?	
different Address?	
different Name?	
no more <i>Polares</i> thanks	?

All my OLD details	All my NEW details

Young and Transgender? 20-35 years?

Whether you're a verified gender outlaw or just gender questioning and want to find some like-minded travellers ... why not come along, trade questions, answers, thoughts and support.....

A discussion group will be forming soon, but we need people to sign up in advance so that the programme can be properly planned. For more information call Dash on 9569 2366.

Issue Seventy-seven Sexually Transmitted Infections

his article will give a brief overview of the main bacterial Sexually Transmitted Infections, (STIs), occurring in Australia, some of the symptoms of having an STI and the tets for detecting them. There are many infections it is possible to get from sexual contact. In this article I will only discuss the common bacterial infections. In following issues I will go on to discuss different viruses and parasites. If you have any concerns regarding possible signs or

symptoms of an STI or feel you may have been exposed to an STI please contact your doctor or your nearest sexual health clinic. This article is to be used as a reference only.

A sexually transmitted infection, (STI), is any infection that is acquired through sexual contact.

It can be caused by bacteria, a virus or a parasite. The sexual contact can be penetrative, (vaginal or anal), oral sex, masturbation, touching someone's genitals or skin to skin contact, depending on the type of STI involved. The term "signs and symptoms" means physical things a person may notice if they have an STI, such as a discharge from their genitals, pain or discomfort. It is very important to remember most STIs can be present in a person without any signs or symptoms, therefore a person may not know they have an infection without having a test.

STIs affect all genders and sexualities. The infections a person could be exposed to depend on what genitals a person has and the type of sex that person has. STIs do not discriminate. They are bacteria, viruses and parasites that can be passed on during sexual contact.

They affect men and women, gay, straight bisexual or however a person identifies. They affect all races, religions, cultures, socioeconomic groups and education levels. People having any sort of sexual contact can be exposed to and infected by an STI.

If a person has had reassignment surgery he or she is less likely to contract these bacterial infections in their genitals, due to the nature of many STIs targeting mucous membrane tissue. by Maggie Smith
After reassignment surgery the tissue of the
genitals may not be the same mucous membrane
type tissue as was originally there, decreasing

the risk to that part of the body. However as many STIs can be transmitted via oral or anal contact the bacteria can infect a person in these sites.

Chlamydia and Gonorrhoea

What are they? Signs and symptoms: These are both bacterial infections. Chlamydia and or gonorrhoea can be transmitted, (passed from

one person to another), through penetrative sex, using toys and possibly on fingers. (These infections could be passed on from finger contact in a situation where someone has an infection and touches their own genitals and then someone else's). Gonorrhoea can be transmitted

from oral sex, be it fellatio, cunnilingus or rimming.

Possible signs or symptoms of these infections include discharge, (coloured or clear), from a penis or unusual discharge from a vagina, burning, stinging or difficulty urinating.

For a person with a vagina being penetrated there could be pain during sex or bleeding after sex or between periods, if a person still has periods. If a person has anal sex, signs of an infection can be discharge from their bottom, unusual pain during a bowel movement, or pain or discomfort in their rectum at other times.

It is always important to remember these infections can be present without any signs and without a person knowing. These infections are easily passed from one person to another. The presence of one STI increases the chances of passing on or contracting HIV, (human immunodeficiency virus).

What tests are used to identify them?

Both of these infections are easily tested. The tests performed depend on the type of sex a person has. Chlamydia can be tested for with a urine test.

The first part of the urine passed, (not a midstream urine), is collected. For chlamydia and gonorrhoea swabs may also be collected from the vagina, cervix and/or rectum depending on what sexual contact a person has had. The swabs used resemble a cotton bud, only slightly larger. Having a swab collected is not painful but can be a little uncomfortable for some people. Some clinicians may allow a person to collect their own swabs while others prefer to do it themselves. For gonorrhoea a throat swab may also be collected.

If a person has symptoms of either of these infections the clinician may collect a few other swabs for testing. If a person presents with a discharge from his or her genitals the clinician may look at a sample of this discharge under a microscope. This will depend on where a person goes for testing.

Treatment.

Both of these infections are normally easily treated with a one-off dose of antibiotics. For chlamydia, two tablets of an antibiotic called *azithromycin* taken at the same time are given. For gonorrhoea the treatment is a one of injection of an antibiotic called *ceftriaxone*. If there are complications from an infection more antibiotics may be prescribed. The treatment may also differ if a person has an allergy to certain antibiotics.

Syphilis

Syphilis as another bacterial infection. Syphilis can be passed on through vaginal, anal, oral sex and from a mother to her unborn child during pregnancy. The rates of syphilis have been steadily increasing in Australia for a number of years now.

Syphilis is quite a complicated infection to explain. The most common symptoms in an early syphilis infection are an ulcer or ulcers on the genitals, in the anus or in the mouth. The ulcer is not painful. Another sign of syphilis is a rash on a person's chest or back, or the palms of their hands or soles of their feet.

As with most STIs a person may not know they have syphilis. If the ulcer is in a part of a person's body they cannot see and it is not painful, it is quite easy for them not to know they have it. A person may not develop a rash or be aware of any symptoms. The only way to really know is

to have a test. Syphilis in the early stages of an infection is very easily passed on. The infectious stage can last for up to 2 years. After 2 years a person is not usually infectious to others but if not treated the infection can go on to cause serious health problems later in life. This bacterium can affect a person's heart, brain and nervous system. The effects of untreated syphilis on an unborn baby are very serious and can lead to birth abnormalities or death.

How is it diagnosed?

Syphilis is tested for with a blood test. If a person presents to a doctor or clinic with an ulcer a swab may be taken as well.

Treatment.

Syphilis is treated with penicillin injections, usually given in the buttocks. The number of injections needed is determined by how long a person has had the infection for. If a person is allergic to penicillin another antibiotic may be used. If there are already complications from having untreated syphilis for a long time a person may need further tests and different treatment.

If a person is diagnosed with an STI it is also

important to contact current and past sexual contacts to notify them they may have been exposed to an STI. If a person is uncomfortable with doing this the clinician can assist. It is very important that sexual contacts are notified to allow them to be tested and treated and avoid possible problems or complications from the infection. It is also important to know that being treated for these bacterial infections does not give a person immunity to getting it again. Therefore if a person has sex with an untreated partner again, or if they put themselves at risk again, they can be reinfected.

The best way to prevent transmission of STIs is using condoms for penetrative sex, condoms or dental dams for oral sex and gloves for fingering. When using condoms, the condom needs to be on before there is any contact with the other person's genitals. This means not just for the actual penetration but before there is any touching or rubbing of another person's genitals.

CZECH REPUBLIC TO USE SYRINGE VENDING MACHINES

Prague, the capital of the Czech Republic, has recently installed syringe vending machines to help prevent the spread of hepC, HIV and other blood-borne diseases through the use of shared needles.

If the project shows good results in Prague it will be expanded to other parts of the country.

The aim is to provide twentyfour-hour access to clean needles, circumventing the problem of pharmacies being closed.

CALIFORNIA PRISON INMATES SUE FOR HEALTH CARE

Prisoners in Californian jails who have hep C claim they are not receiving proper health care and are suing the State. It is estimated that approximately forty per cent of the State's inmates have hep C.

Some 30,000 claim their health care is inadequate and have taken a class action, according to their attorney, Shawn Khorrami.

Overcrowding is one issue which is said to violate inmates' rights and leads to poor health care.

The lead plaintiff, Kevin Jackson, says that despite being diagnosed with an advanced stage of hep C in 2007 he has been repeatedly refused treatment.

The lawsuit estimates California prison population to be approximately 190,000 inmates.

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Hep C News Items of Interest

EXPERIMENTAL DRUG R1626 SHOWS GOOD RESULTS

Roche's new experimental drug to treat hep C, R1626, is showing good results when given in combination with older drugs. It also shows good results as a barrier against the virus developing resistance to drugs in use.

R1626 was developed by Roche and belongs to a group of anti-virals called polymerase inhibitors.

Dr David Nelson, Director of Hepatology and Liver Transplantation at the University of Florida said "These results demonstrate that R1626 holds significant promise to potentially increase the number of hepC patients who can be successfully treated."

EDUCATORS SUPPORT SITE LAUNCHED ONLINE

Hepatitis Australia has now formally launched its Hepatitis education site to be found at: www.heped.org.au.

This will provide an online resource for people who educate others about viral hepatitis.

There are various categories of educator in this area, ranging from those whose calling it is to teach this materials as their primary role to those for whom it is a small component in a larger curriculum, secondary school teachers, for instance, discussing bloodborne viruses with students.

The website was developed with funding from the Australian Department of

Health and Ageing

CUBA CLOSE TO ERADICATION OF HEPB

Cuba, using a highly effective vaccine produced in that country, seems close to eliminating hepatisis B. In 2007 only seven cases were reported, and so far in 2008 there have been only four.

Cuba began its immunisation campaign in 1997 when over 2,100 cases were reported. Today all Cubans under twenty-six and many of the rest of the population, have been immunised and the infection rate is down by 99.2 per cent.

The vaccine is now marketed in more than forty countries.

NSW GOVERNMENT WITHDRAWS DRUG PAMPHLET FOR YOUNG

The NSW Government has ordered that drug material for young people be reviewed after withdrawing a pamphlet which gave advice on ways to minimise the risk involved in taking illegal drugs such as ecstasy and cannabis.

The pamphlet in question was called "Choosing to use but wanna keep your head together?" and advised teenagers on what to do if they choose to indulge in substance abuse. It was distributed at schools and community facilities and contained practical advice, including a suggestion that they wait until they turn eighteen before experimenting with drugs, and then "use only small amounts and not too often". State Health Minister Reba Meagher said that the government would not tolerate any message to the young which suggested it was "okay to experiment with drugs."

Material on this page has been extracted from the *Hep C Review*

Surgery: A guide for FTMs

Issue Seventy-seven

Sex reassignment surgery (SRS) refers to surgical techniques used to change trans people's bodies. SRS is simetimes called "gender reassignment surgery" (GRS) or "genbder confirming surgery".

Not all trans people have SRS. Among those who do, there are various reasons for having SRS. Some people have it to reduce physical dysphoria - strong discomfort with the mismatch between identity and body. Others feel OK about their bodies, but are very uncomfrotable with how other people see them (social dysphoria), and want to change their physical appearance to be able to live in a way that better matches their identity.

For any kind of health issue, choosing surgery is a big decision and SRS is no exception. This piece aims to:

describe options for FTM ¹ SRS
explain possible risks and complications of FTM SRS
describe what to expect before and after FTM SRS
explore issues to consider in making the decision to have SRS

This piece is written specifically for people in the FTM spectrum who are considering SRS. It may also be a useful resource for partners, families and friends who are wondering what is involved in SRS.

Surgical options for FTMs

For FTMs, the goals of SRS are to reduce "female" characteristics and make body more "masculine" or androgynous (depending on how you identify). FTM SRS can include some or all of the surgeries listed later.

Each of these surgeries has risks, but they are also proven to help FTMs with physical and/or social dysphoria to live more comfortably. The details of top surgery and lower surgery are discussed.

Options for FTM Sex Reassignment Surgery

Top surgery	Medical term	Explanation
	Reduction mammaplasty	Removing some breast tissue to make the chest smaller
	Chest reconstruction	Removing breast tissue and and excess skin and altering the nipple and dark area around it (areola)
Lower surgery	Hysterectomy Salpingo-oopherectomy	Removing the uterus Removing the fallopian tubes and ovaries
	Colpecto, or vaginectomy Colpocleisis Metaidoioplasty (also spelled "mataidioplasty" or "metoidioplasty")	Removing the vagina Closing the vagina Making the cklitoris appear larger to form a small penis
	Phalloplasty	Making a penis using tissue from another part of the body
	Urethroplasty	Lengthening the tube that carries urine from the bladder to exit

¹We use FTM as shorthand for a spectrum that includes not just transsexuyals, but anyone who was assigned female at birth and who identifies as male, masculine, or a man some or all of the time. Some non-transsexuals in the FTM sprctrum (androgynous people, butches, drag kings, bi-gender and multi-gender people etc.) may also want some of the surgeries described and may not identify or live as men. For this reason we use the term FTM ionstead of "trans men".

²The binary terms "male", "female", "feminie", "feminine", "masculinizing", "feminizing" don't accurately reflect the diversity of trans people's bodies or identities. But in understanding SRS it is helpful to understand "typical" (non-intersex, non-trans) men's bodies, and "typical" women's bodies. We keep these terms in quotes to emphasize that they are artificial and imperfect concepts.

Other Liposuction Removing fat from the hips, thighs and buttocks.

possible

surgeries Implants Inserting material into the calf, jaw, chin or chest to

make these areas look more muscular

FTM Chest Surgery

Testosterone tends to bulk up muscles and reduce fat, and this can slightly change the shape of your chest, but testosterone doesn't make brest tissue go away. Only surgery can remove breast tissue.

What about binding?

Binding refers to the process of flattening your breast tissue to create a smaller and less noticeable chest. Some FTMs bind all the time, others only do it when they go out in public or in specific circumstances. For some FTMs binding is a viable alternative to chest surgery. For others it's only partially successful and is a short-term, stop-gap measure unti surgery. The type of materials used depends on the size of the chest, your overall build and what you can afford. There are websites which explain binding [see below].

Binding can have health consequences. Many of the synthetic materials used for binding don't allow your skin to breathe (promoting rashes and fungal infections), and when binding is done too tightly it can cause pain and restrict your breathing. Tight binding is epecially dangerous for young FTMs whose bodies are still growing, as it can affect rib and lung development. To reduce the potential risks of binding:

- Loosen your binder if it hurts, cuts your skin, makes it difficult to move, or makes it difficult to take a deep breath.
- Give your skin a chance to breathe. Take breaks from binding.
- Wear a thin undershirt under your binder to help absorb sweat and prevent skin irritation.

Binding over a long period makes your skin less elastic, which can affect your surgical options and results. If you are planning to have chest urgery, talk with your surgeon for recommendations on binding.

For more information on binding see:

- ♦ http://web.mit.edu/hudson/www/binding.html
- ♦ http://www.thetransitionalmale.com/Binders

Types of FTM Chest Surgery

Breast Reduction (Reduction mammaplasty)

If you want a smaller chest but not a :male"-looking chest you might want to consider reduction instead of reconstruction. Getting a reduction affects your options for reconstruction, so it is not recommended that have a reduction first if you are planning on getting reconstruction later.

The techniques used for reduction in FTMs ar the same as reduction for women. The Canadian Society of Plastic Surgeons has a website explaining breat reduction at http://plasticsurgery.ca/breastreduc.htm

Chest reconstruction

In FTM chest reconstruction the goal is to create a:make"-looking chest. This can include;

- Removing most of the breast tissue
- Removing excess skin
- Removal of the crease where the brest meets the chest wall (inframammary fold)
- Resizing and repositioning the nipple and the dark area around it (areola)

FTM chest reconstruction also includes preserving as much sensation as possible and trying to minimize scarring.

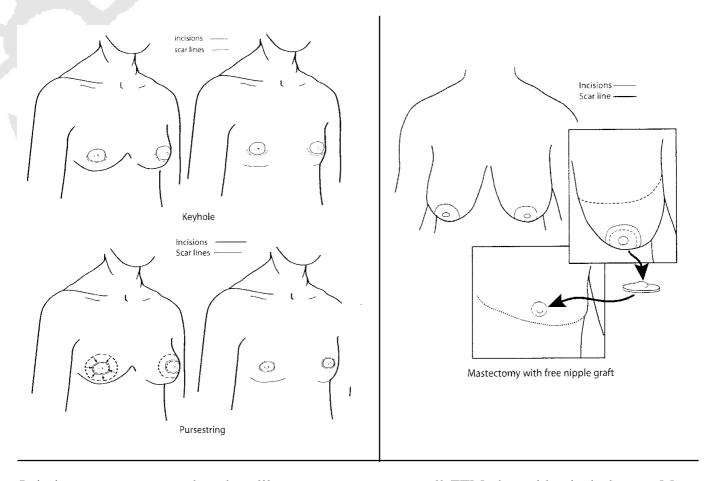
Polare page 20 October-December 2008 There are three possible techniques that can be used, depending on the size of your chest, the elasticity of your skin and your preferences:

	Keyhole	Drawstring/Purstring	Mastectomy with free nipple grafts (double incision)
Used for	Small breasts (A or small B cup) with good skin elasticity	Moderate sized breasts (Bor C cup) with good skin elasticity	Large or saggy breasts or inelastic skin
Incision/ scar	Along bottom edge of areola	Circle around the edge of the areola	Horizontal or U-shaped cuts across each breast, the nipple. The aim is to place the incisions just under the line of the pectoral muscles so it is not highly visible.
How it's done	Breast tissue is removed via a small incision under or across the areola	Breast tissue is removed via an incision around the edge of the areola. A ring of skin is then removed in a wider circle around the areolar incision and the skin is pulled toward the centre of the opening and stitched to the edge of the areola. This creates an effect similar to pulling a drawstring bag closed.	The skin is peeled back and the breast tissue and excess fatty tissue are removed. The excess chest skin is then trimmed and the incisions closed.
Nipples	Not resized or repositioned	Areola may be trimmed to reduce its size. It may be possible to slightly reposition the nipple.	Removed, trimmed to smaller sizes and grafted onto the chest to approximate positioning of the "male" nipple. Some surgeons leave the nipple attached via a stalk (pedicle) of tissue and move the entire stalk to preserve sensation

As part of considering which technique to have it's important to consider your goals in terms of balance between nipple appearance and sensation. The more the size and position of the nipple is changed, the less sensation you'll have. If nipple sensation is not important to you but nipple appearance is very important to you, talk with the surgeon about techniques to reposition the nipple without removing it.

What will my chest look like afterwards?

Looking at pictures of FTMs who have had chest surgery can help you get a sense of what to expect. The Transter website (http://www.transster.com) includes pictures of FTM surgery results by various surgeons. You can also ask surgeons to show you before/after photos of their patients. If you look at a number of photos you'll see that the results vary greatly. Some FTMs have chests that look exactly like non-trans men's chests, but for most FTMs, getting to that point takes at least one (and sometimes more than one) revision surgery. The final results depend on what your chest was like to start with (chest-size, quality of skin, etc.)



It is important to remember that, like non-trans men, not all FTMs have identical chests. Many surgeons' websites have photos of FTMs who are young and relatively thin. But most non-trans men do not have buff, rippling torsos with perky nipples and its unrealistic to expect this for yourself if this doesn't match your body. In looking at surgical pictures, look at FTMs who are close to your build and age to get a sense of what a realistic result might be for your body.

Because FTNs have had less exposure to testosterone than non-trans men, FTMs tend tohave less developed muscles. A balanced exercise program that includes weight training to build the pectoral muscles (front chest wall) before and after chest surgery can help to give a more "masculine" contour.

Timing of chest surgery

Cgest surgery can be done at any stage - as a first (or only) step, or after you've already gone through other body changes (e.g. testosterone). FTM surgery is usually done as a single surgery, but in SRS programs where there is a team of surgeons working together, it can be done at the same time as hysterectomy/oopherectomy to reduce the number of times you have to go through general anaesthetic.

What to expect before and after FTM chest surgery

At the hospital

You will most likely be admitted to the hospital the same day as your surgery. You may be asked to come to the hospital the day before your surgery to go ove information about the surgery and to have a last-minute physical checkup. You will be told not to eator drink after midnight the night before you have surgery.

After your surgery, you will be monitored by hospital staff as you come out of the anaesthetic. Chest surgery is a relatively simple procedure and you will probably be sent home the same day as surgery, with medication to help control pain and antibiotics to help reduce the risk of infection as your wounds are healing. FTMs who are having mastectomy may be kept in hospital overnight.

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You will need someone to drive you from hospital or you will need to take a taxi, as it's not safe to drive after chest surgery.

After chest surgery

Gauze dressing will be placed over the incisions, with a tensor bandage wrapped around your chest for protection and support. After reduction a special surgical bra is worn until the swelling and bruising have gone down. After reconstruction, a compression vest is often recommended for one month to prevent fluid buildup and to help the skin tighten. Depending on the amount of tisue removed, you may have drainage tubes in the incisions or drains at the side of your chest to help drain excess fluid.

For the first three days after surgery, a home care nurse should visit you once a day to check your dressings and monitor and empty your Three days after surgery the gauze pads over your incisions will be taken off and you will be able to take a shower. There will be adhesive tapes along the incision line; leave these on and be careful not to soak them in the shower, (it's OK if they get splashed with a bit of water, but don't run water directly over them). After showering, gently pat the strips dry. They will fall off on their own in seven to ten days. You can use fresh gauze pads as needed to protect the incisions. If you have drains they will be removed by the surgeon or another doctor three to seven days after surgery (your surgeon will give you instructions). Antibiotics continue until the drains are removed.

It is normal for the incisions to be red, but the redness shouldn't go beyond the incision for more than one or two centimetres (if this happens, see a doctor right away as it can be a sign of infection). It is also normal to see or feel the knot in the stitches at the end of the incision. The stitch know is not a problem. It will either dissolve on its own or come to the surface of your skin in which case a doctor or nurse can clip it free.

If you had nipple grafts, your nipples will be covered with a special cushion and gauze. These will be taken off by the surgeon five days after surgery to check healing.

A medium level of bruisng and swelling is normal. Your chest will probably feel sore and swollen for at least a month after surgery; if you have a large amount of swelling, see a doctor. Feelings of sharp shooting pain, burning pain or general discomfort passes one to two days after surgery. Your chest skin and nipples may be partially or totally numb at first; sensation usualyy returns within a year of surgery, but may not fully return.

You can go back to your usual routine when you feel well enough to do so (i.e. normal movements don't cause pain). This is typically one to two weeks but can take longer in some cases. You should avoid any activity that is vigorous enough to raise your heart rate for three to four weeks, and should not do anything that involves lifting, pulling or pushing for at least six weeks to help the scars to heal.

Risks and posible complications of FTM chest surgery

All surgeries (not just SRS) involve possible risk of infection, bleeding, pain and scarring. Antibiotics are usually given at the hospital to reduce the risk of infection, and the home care nurse will check your dressings in the first couple of days after surgery will also be looking for infection. It is normal for your chest to be sore after the surgery and for the incision line to be red. If the redness goes more than one or two centimetres beyond the end of the incision, the skin is very tender or warm and don't feel well, see a doctor to check whether you have an infection.

All surgery that involves general anaesthetic is a serious medical procedure. With any surgery there is a risk of blood clots (which can be fatal) or a negative reaction to the anaesthetic. Surgeons, anaethetists and surgical nurses are experienced in prevening problems and responding to any emergencies that happen during surgery. After you're discharged from the hospital, to prevent blood clots, move around as much as feels comfortable, and drink plenty of water. Get emergency medical help (call 000) if you have sudden shortness of breath, chest pain, dizziness or tender, warm and swollen legs - these can be igns of a blood clot and you may need emergency help.

Your GP or nurse can handle minor infection or rupture of a small number of stitches after you've been discharged from hospital. You will be referred back to the surgeon if you rupture so many stitches that the wound keeps opening more and more, or if fluid/blood builds up in your chest. If you notice anincreasing amount of blood in your drains, contact your surgeon immediately,

Possible complications specific to FTM surgery include:

- problems with the contouring/skin: puckering, chest sunken or puffy in places, lopsided (one side looks different from the other), :dog ears" (excess skin at the end of the incisions), sagging skin that fails to tighten up after surgery
- lopsided repositioning or resizing of the nipple (one side looks higher/larger than the other)
- change in sensation to nipples/breast kin: less sensation or more intense sensation
- nipple grafts may die and need to be removed
- thick red rope-like scars

You will probably need further surgery if:

- you have contour problems or your nipples are lopsided: the surgeon will wait eight to twelve weeks after surgery to see what your chest looks like after the post-surgical swelling fades
- your nipple grafts die: another graft, nipple construction, or tattooing can be done at a later time
- you have severe scarring

Can I still get breast cancer after chest surgery

Studies of non-trans women who had breast reduction found reduced risk of breast cancer. Removing your breast tissue decreases the number of cells that can become cancerous. But even a complete mastectomy can't remove all breast tissue cells (there will always be microscopic amounts). This means you still have a risk of breast cancer. Cases of breast cancer in FTMs after chest surgery have been reported.

Breast cancer is believed to be heavily influenced by exposure to the hormones estrogen and progestin. There is no clear evidence that FTMs who take testosterone are at increased or decreased breast cancer risk.

The remainder of this excellent booklet produced by the Vancouver Health, Transcend Transgender Support and Education Society and the Canadian Rainbow Health Coalition will appear in later issues of *Polare*.

WYONG SHIRE COUNCIL

launches its GLBT

(Gay, Lesbian, Bisexual and Transgender) collection at Terrigal Library

on

23 October, 2008

at

11.30am

All Welcome

The launch will include a display of the collection and talks by three local GLBT community identities,

Dr Jean Harkins (University of Newcastle)

David Kelly (author, Fantastic Street)

Katherine Cummings (author, *Katherine's Diary*)

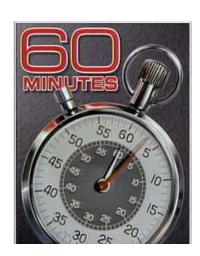
The collection has over 900 items, including 140 DVDs and a wide range of materials suitable for all ages

WANT TO BE ON NATIONAL TV?

The Nine Network's flagship current affairs program

'60 Minutes' is looking for transgender people

and their families to appear on an upcoming story.



We'd love to chat with a married couple, who have stayed together despite one person making the change.

Ideally the couple would have children and live in 'the suburbs'. The story is simply about your personal transgender journey. I sincerely believe this is a great platform to educate a national audience.

If you're interested or want to know more please contact Producer, Phil Goyen -

pgoyen@nine.com.au

University Staff Show Prejudice Against Transgender Professor

Joay Ladin, Formerly Jay Ladin, who is a tenured professor of literature at Yeshiva University, is being given a hard time by some of her colleagues. After a two year absence from the university, Ms Ladin turned up in her new gender role but there is strong resistance from the faculty and administration of the university to her presence on the staff. She is still technically pre-operative which seems to be a problem for some of her colleagues who use charming phrases such as "He's not a woman. He's a male with enlraged breasts." This from a senior dean at Yeshiva's rabbinical school. "He's a person who represents a kind of amorality which runs counter to everything Yeshiva University stands for. There is just no leeway in Jewish law for a transsexual."

Many of Joy Ladin's students are supportive and many letters of support have appeared on the Internet after the story by Rebecca Rosenberg came out in the *New York Post*. The executive director of the National Center for Transgender Equality, Mara Keisling, said "I think it's fabulous and wonderful. I don't know any other religiously conservative university that employs someone trans."

Ladin's wife has filed for divorce and custody of their three children.



Joy Ladin

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Sex and Gender Education (SAGE) Needs You!

SAGE is a grassroots organisation that educates, campaigns and lobbies for the rights of **all sex and gender diverse people in Australia:** transsexual, transgender, intersex, androgynous, without sex and gender identity etc.

Membership is FREE!

SAGE no longer sends out printed newsletters - instead we send out occasional news and updates via email, and also post news items, articles and documents on the SAGE website.

To join SAGE, and receive occasional news updates, go to

http://lists.cat.org.au/mailman/lisinfo/sage

and sign up to our low-volume mailing list For more information visit our website

www.sageaustralia.org

SAGE - campaigning for your rights!

STOP PRESS!

Diane Schroer Wins Anti-Discrimination Case Against Library of Congress

A Federal judge has ruled that Diane Schroer, who had been promised employment with the Library of Congress and then had the offer withdrawn when she revealeed that she was planning transition from male to female, has been discriminated against on the grounds that sex discrimination is illegal and gender identity is an aspect of sex.

Schroer, a former Special Forces officer, had been offered a job with the library as a security specialist. When the job offer was withdrawn she commenced an action for discrimination with the support of the American Civil Liberties Union (ACLU). The suit was filed in June 2005. Judge James Robinson, a Clinton appointee, will decide penalties at a later date. The Justice Department is reviewing the ruling.

Please save the Editor's time by submitting material for *Polare* by email or on disc or memory stick.

DO YOU HAVE HEPATITIS C? ARE YOU CURRENTLY EMPLOYED?

OR ON LEAVE FOR HEALTH-RELATED REASONS?

If you live in the Sydney Region of New South Wales, we would like you to help us with a research project exploring the employment experiences of people living with chronic hepatitis C.

The research project is being run through the University of New South Wales.

It will involve a confidential review lasting about an hour at a place and time convenient to you.

If you are interested in taking part in this project and would like to know more, please contact Nadine Krejci:

ph/sms 0431 979 039 email: nadine.krejci@student.unsw.edu.au

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Diverse Sexualities Access Project

Improving access by gay, lesbian, bisexual and transgendered young people to community and generalist services in the Nepean area

This new four-year project aims to improve access to community and generalist services by gay, lesbian, bisexual and transgendered young people in the Penrith, Blue Mountains and Hawkesbury Local Government Areas. It will work with a wide range of peak, funding and policy-making bodies, service-providers and other stakeholders in order to build community partnerships, provide information, advocate best practices relating to service provision and promote the needs and views of local young, gay, lesbian, bisexual and transgendered people.

An integral part of my role as Project Worker will be active consultation with gay, lesbian, bisexual and transgendered young people. I am very interested to hear about your experiences in accessing community and generalist services in your area.

Have you ever:

Had a hard time finding a service that you needed? Been discriminated against or treated with disrespect by a service? Had your needs ignored by a service? Used a service that treated you really well? If you would like to let me know about your experiences, offer suggestions, or get more information about the project feel free to get in touch with me using the contacts below.

Robert Reynolds

Diverse Sexualities Access Project Worker

Diverse Sexualities Access Project

PO Box 627

Penrith, NSW, 2751

Phone:(02) 4721 5024

Mobile: 0439 481 008 Fax: (02) 4721 5922

Email: outsidein@pnc.com.au

Gay and Lesbian Counselling Service

Telephone Counselling	ng:
☐ Gener	ral line daily 5.30pm to 10.30pm
	Sydney Metro 8594 9596
	Other areas of NSW 1800 184 527
☐ Lesbia	an line Monday 6.30pm to 10.30pm
	Sydney Metro 8594 9595
	Other areas of NSW 1800 144 527
Face to Face Counse	elling:
	In partnership with Jansen Newman Institute (JNI)
	Counselling session times by arrangement
	Call JNI (02) 9436 3055 or GLCS (02) 8594 9500
Smart Recovery Pro	gram - group support
0	In partnership with the SMART Recovery program and Alcohol and Drug Information Service(ADIS)
	Every Monday at 6.00pm
	Call ADIS on 9361 8000 or GLCS 8594 9500

For further information on our services please contact Chris Wilson, Training and Volunteer Co-ordinator, (02) 8594 9500

Website: www.glcsnsw.org.au

News Items of Interest

BEYER MAY MOVE TO **AUSTRALIA**

Georgina Beyer, author, show business personalioty and the first openly transgendered Member of Parliament in the world, is thinking of moving to Australia.

Beyer has been unable to find appropriate employment since leaving



politics. She Georgina Beyer says she is disillusioned with her life after politics and criticises the treatment she has received by former Labour Party colleagues.

She has been turned down for a position on the Human Rights Commission, a position for which her life experience and political performance are ideally suited. The former chairwoman of the New Zealand parliament's Social Service Committee has been forced to live on the unemployment benefit for some time and has even sold her home "so that I didn't have to be on the dole".

Beyer's position contrasts strongly with those of a number of Labour MPs who have been appointed to prestigious and well remunerated government boards and private enterprise positions.

"It seems that I am not valued for my experience in either local or central government, so I guess I wasted fourteen years of my life in publicly elected service and ended up as unemployable," she said.

There is a film, entitled "Girl", being made of Beyer's life but she has declined to play a part in it.



REV. FRED NILE **DEFENDS POLICE** WHO VIOLATED PRIVACY OF **TRANSGENDER**

Fred Nile, MLC, has put out a press release defending two police officers whose actions resulted in the severe beating of a transgendered woman. The details, in brief, relate to the arrest of Garrick Jacobson who, when police officers checked his computer records, was shown to be co-habiting with a post -operative transgender, Brigitte Fell. The police mocked the Jacobson, asking "Do you know you're rooting a bloke?"

Jacobson returned home and assaulted Fell, who was severely injured. Action was initiated against the police officers in question for revealing confidential information improperly, but the Rev. Fred Nile, leader of the



Fred Nile

Christian Democratic Party, stated that the police have a civic and moral duty protect the

public from crime.

Nile apparently interprets Section 61 of the Crimes Act which says that persons who have sexual relations with one

another should do so under con-ditions of 'informed consent' as meaning that transgendered women should reveal their transgendered status before entering into a relationships. This was the 'crime' according to Fred Nile. Informed consent in such cases



Brigitte Fell

relates to matters such as revealing the presence of STIs, age of consent etc. rather than a transgendered person's personal past medical history. The Rev. Nile apparently does not believe in innate gender affirmation and uses any opportunity to attack the sex variant and gender diverse.

WIGS INTERNATIONAL TO CLOSE SHOP

Wigs International, who have long been a friend to the transgender community and one of Polare's regular advertisers, has advised that the shop will be closing for business at the end of November 2008. All wigs in stock will be sold for half-price from October 1st. Hurry in! Don't be the last to pick up some new hair! Wigs Interntional is located at 12 King Street, Newtown.

And More News Items

KOGARAH SETS A GOOD EXAMPLE

Kogarah Council has moved to recognise same-sex marriages and unions in deciding benefits for residents and employees.

Despite the resistance of the Rudd Government to same-sex marriage, and the fact that Kogarah falls within the seat of the Federal Attorney-General, Robert McClelland, Labor Councillor John Mikelsons maintains that Kogarah is already a diverse community in many ways and thepeople of Kogarah deserve to be respected and have their relationships respected.

"Kogarah is not exactly the most progressive area in

Sydney - it certainly isn't like Marrickville or the City of Sydney ... but we are happy to show a bit of leader-



John Mikelsons

ship and remove discrimination against our residents and employees where we can," he said.

After the new Council is elected on 13 September all current policies would be reviewed within twelve months and discrimination on marital status, sexual orientation or gender identity removed.

[Marrickville and Sydney Councils have policies banning discrimination against same-sex partners of employees or residents but have not specifically resolved to recognise gay marriages carried out overseas.]

QUEENSLAND DRAG KING LIL'ROMEO MURDERED,MOURNED

Popular drag king Lil' Romeo has had more than a hundred mourners pay their respects at a special memorial performance hosted by Romeo's fellow performers from the troup GangStars on August 17. Nearly 400 people attended her funeral on the Gold Coast two days later.

A spokesperson for GangStars, Dita Brooke, said "She was a truly amazing, unforgettable presence in our lives."

A memorial float is being planned for next year's Mardi Gras parade.

Lil' Romeo (aka Krissy Pye) was twenty-five years old when she was murdered, suffering multiple stab wounds during an armed holdup at the Everything Adult store in Browns Plains. Romeo had only been working the store for a week when the holdup occurred. Tara Gilbert, 21, will face trial for the murder.



Lil' Romeo RIP

TRANSGENDER WOMAN IN TOP MODEL CAST

A pre-op transgender woman who calls herself Isis is among the semifinalists in the eleventh season of Top Model in the United States.

The creator and lead judge, Tyra Banks asked Isis when she first knew she was a girl.

"As long as I can remember," said Isis. "It's not something I chose. This is who was always there."

The cast of Top Model has been drawn exclusively from non-transgender women until now.



Isis

NEW WA SENATOR COMMITTED TO LGBT RIGHTS

Louise Pratt, whose partner is FTM, made her inaugural speech on 27 August, asserting her commitment to the removal at the Federal level of discrimination on the grounds of gender identity and sexuality. Martine Delaney, of the Australian Coalition for equality sent her congratulations and offered support.

Trans People In Love edited by Tracie o'Keefe and

Issue Seventy-seven

Katrina Fox: reviewed by Katherine Cummings

his is a remarkable book and Katrina Fox and Tracie O'Keefe deserve high praise for having planned it and then ensured its publication. I should, perhaps, not be surprised, since the same team gave us the challenging *Finding The Real Me* and the excellent *Sex*, *Gender and Sexuality*. We are told that *Trans People In Love* was a seven-year project, starting with a pilot qualitative study of trans people and their partners. The final result reflects the care with which Katrina and Tracie chose their subjects and the creativity with which they collected their material.



Tracie O'Keefe

As in Finding The Real Me there is a spectrum of sex and gender diversity (or a rainbow if you want a less scientific term for the same phenomenon), with M2F, F2M, S&M, leathermen, performance artists, writers, musicians, academics, polyamorists, bisexuals and academics showing that love can be as

multifaceted as the finest cut diamond, and may be as brittle as the aforesaid diamond or asresilient as Toledo steel.

Nor have the editors restricted themselves geographically. The first-person love stories range from the United States to South Africa, from Scotland to Australia, from Spain to Scandinavia and from Taiwan to Latvia.

I will get my negative criticisms out of the way early so that I can leave you with the true, delicious, flavour of the main text. There seems to have been some meddlesome sub-editing so that contributors who are not American are saddled with American usages and spelling such as the abominable "different than" and the use of "practice" as a verb. The common errors of "miniscule" for "minuscule" and the use of "cohort" to mean "colleague" also occur (a cohort is, strictly speaking, 600 Roman soldiers, one tenth of a legion). There is also a general scattering of the use of the nominative "I" where the correct form would be the accusative "me" so that solecisms such as "look at Brandon and I", "Alan still had not let David and I be alone"

and "between Parker and I" abound. All right, I'm a pedant. But that happens to be a banner I will march under any day.

In my opinion the best writing, for style, clarity and grace, comes from the pens of two contributors whose first language was not English. Vidal Rousso is Latvian but his writing is strong,



Katrina Fox

creative and highly evocative. Vidal is an F2M. His images are wild, challenging but always exactly right. They go off in the cerebral cortex of the reader like a string of Tom Thumb crackers, and they are the evocation of his explosive love for his Christa. Vidal is one of those truly strong transgenders who sees no need for surgical intervention. He knows who he is and is happy to be himself, describing himself variously as a "trashy Caribbean grunge with sexual overtones" or a "promiscuous Malecon drag queen". I'd love to meet him if he talks as well as he writes.

The other outstanding writer in this collection is Erica Zander, a Swedish M2F whom I had the good fortune to meet when she and her wife T. came to lunch at my home during Erica's three months in Australia. I know that Erica talks well, but her writing is a delight. It is not full of pyrotechnics, like Vidal's, but she lays out her life story in clear, declarative English as she tells us of her progress from androgyne to transgendered woman, the stresses on her wife and marriage and the give and take which has allowed their marriage to continue with the loving support of their children and the extended family.

Some of the contributors to this anthology live on the wilder fringes of society.

For instance, Lee "Bridgett" Harrington performs erotic enter-

Diane and Jacob Anderson-Minshall

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tainments involving bondage and S&M, yet his own buttons are pushed by the Bear. He claims to see auras and spirits and is into flagellation, piercing and cutting. He writes of the Sydney Hellfire Club, although his webpage (www.PassionAndSoul.com) seems to based in the USA. He says, inter alia, "As a maleidentified, female-bodied individual, it's sometimes hard to draw the line between feeling sexy as a biologically gifted drag queen and a tormented man screaming to get away from the longing looks from Kinsey six lesbians and open-ended offers from heterosexual male swingers hoping to hook up for the night.". Not a problem I'm ever likely to experience, but it certainly makes for interesting reading.

Carmen, New Zealand-born but long domiciled in Australia, is also a performer's performer. She was one of the earliest artistes in the



Carmen

impersonator world and she's seen it all, kiddo, theatre, sex work, entrepeunerial business, and generous provision of support for charities.

She is flamboyant, larger than life, in her seventies but still prepared to give her all for the sake of those less fortunate than

herself. As she says, "I was never a great smoker, drug-taker, or fall-down drunk, but I loved to put on a show and have a party so people could have a good time."

She also calls herself a "trans woman of great passion". Her lovemaking seems to have been of the scatter-gun variety but it has always been true to its truth, and it is based in the warmth and love her extended family always showed her.

One of the most interesting pieces is written by "Tiny Belly", a Taiwanese F2M who underlines one of the most prevalent problems of the trans person in love. How does one achieve acceptance from the object of desire who may have all kinds of preconceived ideas about transpeople? Does one come out with the truth at the outset, risking disaster on the jagged reefs of uninformed prejudice, or does one conceal



Erica Zander undermining it.

one's secret until the love relationship is established, only to risk losing it all on the grounds of deceit and fraud. Tiny Belly is one of the lucky ones who finds a love partner with an open mind so that revelation adds to previously accepted information rather than

Interestingly there is not as much expression of 'body-hatred' as one might expect. The phrase is used only once in the book although it is axiomatic that there is dissatisfaction with anatomical facts in most of the cases, and an ongoing need to remodel the fabric of the body to conform with conventional lovemaking requirements. Trans people often make do with techno substitutes for anatomy, or with surgical intervention for additions or subtractions.

It is always interesting to look behind the scenes at the clockwork of trans people ... the mechanisms which make them tick. Tracie refers to the "cuckoo-clock" character of her study, designed to show you the inner workings of a relationship, without disturbing the fine balance of its parts. I think she must be a fine therapist if she achieves for her clients what she and Katrina have achieved for us in this book. And the individuals are to be praised for their openness and generosity in sharing themselves.

It is difficult to say all one would like to say in the narrow compass of a review. I can only enjoin you to read the book. Read the passion and delight of stone butch Isaac Lindstrom, lover and poet, the triumphant transition of Jacob Anderson-Minshall, the tragedy redeemed of Martine Delaney, who tragically lost her soul mate but devotes her life and energy in campaigns on behalf of all of us, the victory over prejudice of Gypsey Teague ... and listen to the undertones of triumph, sadness and limitless joy in all the voices of this collection.

Trans People in Love ed. Tracie O'Keefe and Katrina Fox. Routledge, NY, 275pp pbk ISBN 0789035723 A\$42.95. An image of the cover appears on the back of this issue of *Polare*

AUBURN SEX WORKER PROJECT

If you are involved in the sex industry and live or work in the Auburn area, why not drop in for a cuppa and chat to us about the services you want in the area. This service provides free condoms, lube, dental dams, needle exchange, information and referrals. Please call (02) 9646 2233 or 0408 445 753 for a confidential and anonymous chat or drop in at the Community **Health Centre**

at 9 Northumberland Road, Auburn (next to

RSL)

This project is run by the HIV/HEP C Prevention Service to increase the services available to sex industry workers who either work or live in the Auburn Local Government Area.

PLEASE READ THIS!

If you are moving, please tell us your new address. Undeliverable issues of *Polare* waste money that could be used for other services.

Queer Out West 89.3 FM 2GLF

Community Radio

EVERY MONDAY NIGHT FROM 10.00PM UNTIL MIDNIGHT

Proudly broadcasting to the gay, lesbian, bisexual and transgender communities in Sydney's West and all those friendly to the issues

THE GOAL OF "Queer Out West" is to provide a forum for groups and individuals to let the community know about social events, fundraisers and other community activities in the western suburbs, as well as playing some great music and having a bit of fun along the way!!



So join Joe, Paul, Beverly, Suze, Matt and Kathy every Monday night from 10.00pm until midnight.

Do you want to contact us? There are a number of ways...

For social events, fund-raiser and out n' about contact
Miss Beverly Buttercup via:
email:

beverlybuttercup@hotmail.com Fax: (02) 9605.3252

or write to:

PO Box 3357 Liverpool, NSW 2170
For general enquiries, community
news, contact Joe or Paul via:
email: queeroutwest@hotmail.com
phone: (02) 9822 8893 (10pmmidnight only)

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Goods and Services



A Touch of Glamout 359 Parramatta Rd, Leichhardt

59 Parramatta Rd, Leichhardt **(02) 9550 9654**

Tue-Fri 9.30am to 5.30pm Sat 10.00am to 4.00pm

Sizes 10 - 26
Corsets, cinchers, bras, gaffs, padded girdles, breast forms, wigs, shoes etc. www.glamourcorsets.com

Online Counselling N.S.W

GLBT Friendly Qualified Counsellor. Free public Self-Help Forums. Contact: Alex Gibson. Email: alexg75@pnc.com.au

www.onlinecounsellingnsw.com

breast forms, wigs, shoes etc. www.glamourcorsets.com

May I Have Your Attention Please!

An ad. this size costs \$11 an issue, including GST.

FREE HOME TUTORING in reading and writing for adults (nights preferred) Call Margot 9335 2536 or Mim 9335 2350

@ Petersham TAFE

Goods and services advertisements are the responsibility of the Advertiser under the Trade Practices Act. The Gender Centre does not imply an endorsement of the goods, services or advertiser. The Gender Centre recommends that consumers exercise common sense and draw their own conclusions on the goods and services advertised in *Polare*. The Gender Centre will not be held responsible for any misfortune nor will it indemnify readers against any harm incurred. The distribution of *Polare* is targeted and is not intended for general distribution.

To Place an Advertisement for Goods and Services in *Polare*: Please contact the Editor of *Polare*:

resources@gendercentre.org.au or by faxing details to 9569.1176 attention to *Polare* Editor. Advertisements are included in *Polare* based on the space available in the magazine. Advertisements in this section should not contain images or logos and should bear some specific relation to the transgender community. Services and goods provided by and for transgender people are preferred.

Directory Assistance

New South Wales

THE GENDER CENTRE

Counselling

Provides counselling to residents and clients living in the community. For more information or an appointment contact the Counsellor on Monday, Tuesday, Wednesday or Thursday 10am - 5.00pm.

Outreach service

Available to clients in the inner city area on Tuesday nights from 6.00pm to 2.00 a.m. and on Thursdays from 10am - 5.30pm by appointment only. Monday and Wednesday afternoons and Friday 10am - 5.30pm. Also available to clients confined at home, in hospital or gaol - by appointment only. For an appointment contact Outreach Worker - 0407 929 915.

Social and support service

Provides social and support groups and outings, workshops, forums and drop-ins. For more information contact the Social and Support worker. 9569 2366

Resource development service Produces a range of print resources on HIV/AIDS, medical and other information relevant to people

with gender issues and their service providers. We provide printed information including a quarterly magazine *Polare* and a regularly updated website at:

www.gendercentre.org.au .

For more information contact the Resource Development worker on Monday or Wednesday 9569 2366

Drug and alcohol service

Provides education, support and referral to a broad range of services - By appointment only. For an appointment contact the Outreach or Social and Support worker 95692366

Residential service

Provides semi-supported share accommodation for up to eleven residents who are sixteen or over. Residents can stay for up to twelve months and are supported as they move towards independent living. They are also encouraged to consider a range of options available to meet their needs. A weekly fee is charged to cover household expenses.

Assessments for residency are by appointment only and can be arranged by contacting the Counsellor, Outreach worker or Social and Support worker 9569 2366.

$\begin{tabular}{ll} For partners, families and friends \end{tabular}$

Support, education and referral to a wide range of specialist counselling, health, legal, welfare and other community services are available for partners, families and friends of people with gender issues. For more information contact the Social and Support worker 9569 2366.

For service providers, employers and others

Advice, support and workshops are also available to employers, service providers, students and other people interested in gender issues. For more information contact the

Gender Centre Co-ordinator, 7 Bent Street

or PO Box 266

Petersham NSW 2049

Tel: (02) 9569.2366 Fax: (02) 9569.1176 coordinator@gendercentre.org.au

http://www.gendercentre.org.au For after hours counselling contact **Lifeline** on 131 114 or

the Gay and Lesbian Counselling Service

4pm-midnight seven days on (02) 9207.2800 1800 805 379

http://www.glcsnsw.org.au/

2010 - TWENTY10/GLBT YOUTH SUPPORT

Twenty10 is a NSW-wide organisation that provides support to young transgender, lesbian, gay and bisexual people who are having trouble at home or are homeless. We provide accommodation support, counselling, case management and social support. We also provide information and referrals for young GLBT people and their families and do community education programs throughout NSW.

PO Box 553, Newtown, NSW, 2042 **Youth callers needing help:** Sydney local: (02) 8594 9555

Rural NSW : 1800.65.2010

All other callers:

(02) 8594 9550 Fax: (02) 8594 9559 Email: info@2010.org.au Web page: www.twenty10.org.au

ACON-AIDS COUNCIL OF NSW

Information and education about HIV/AIDS, caring, support for people living with HIV/AIDS. 9 Commonwealth St,Surry Hills, NSW 2010

PO Box 350 Darlinghurst NSW 1300

Tel: (02) 9206.2000 Fax: (02) 9206.2069 tty: (02) 9283 2088

ACON-HUNTER

129 Maitland Road PO Box 220 Islington 2296

Tel: (02) 4927 6808 Fax: (02) 4927 6485 hunter@acon.org.au http://www.acon.org.au

ACON - MID-NORTH COAST

4 Hayward Street Port Macquarie NSW 2444 Tel: (02) 6584 0943

Fax: (02) 6583 3810

ACON - NORTHERN RIVERS

27 Uralba Street Lismore NSW 2480 PO Box 6063

South Lismore NSW 2480
Tel: (02) 6622.1555
or 1 800 633 637
Fax: (02) 6622 1520
northernrivers@acon.org.au

ACON-WESTERNSYDNEY

6 Darcy Road,

Wentworthville, 2145

Tel: (02) 9204 2400 Fax: (02) 9891 2088 aconwest@acon.org.au

AFAO (AUSTRALIAN FEDERATION OF AIDS ORGANISATIONS)

National AIDS lobby and safe sex promotion organisation. PO Box 51

Newtown 2042

Tel: (02) 9557 9399 Fax: (02) 9557 9867

ALBION STREET CENTRE

HIV testing, clinical management, counselling and support, treatment and trials for HIV/AIDS.

Tel: (02) 9332.1090 Fax: (02) 9332.4219

ANKALI

Volunteer project offering emotional support for People Living with HIV/AIDS, their partners, friends and carers. One on one grief and bereavement service.

Tel: (02) 9332.1090 Fax: (02) 9332.4219

ASTRA (ASSOCIATION OF SEXY TRANSVESTITES)

An erotic social club for the bold and the beautiful! All ages, shapes and sizes. Discreet meetings, weekly parties.

PO Box 502, Glebe NSW 2037

BOBBY GOLDSMITH FOUNDATION (BGF)

Provides direct financial assistance, financial counselling, employment support and supported housing to people in NSW disadvantaged as a result of HIV/AIDS.

Tel: (02) 9283 8666 free call 1800 651 011 web www.bgf.org.au; email bgf@bgf.org.au

BREASTSCREEN

Phone 132050

CENTRAL TABLELANDS TRANSGENDER INFORMATION SERVICE

Provides information and directions for anyone seeking medical or psychological assistance in changing gender. Provides information on gender friendly services available in the Bathurst, NSW Area. Brings together transgenders, their families and friends and provides support and understanding in a non-counselling atmosphere.

Operates 9 am - 8pm Mon - Fri Tel: 0412 700 924

(CSN) COMMUNITY SUPPORT NETWORK

Transport and practical home based care for PLWHA. Volunteers welcome. Training provided.

Sydney Mon-Fri 8.00am-6.00pm 9 Commonwealth St, Surry Hills

Tel: (02) 9206.2031 Fax: (02) 9206.2092

csn@acon.org.au

PO Box 350 Darlinghurst NSW 1300

Western Sydney and Blue Mountains

Mon-Fri 9.00am-5.00pm

Tel: 9204 2400 Fax: 9891 2088

csn-westsyd@acon.org.au 6 Darcy Rd, Wentworthville, 2145 PO Box 284, Westmead, 2145

Hunter

Mon-Fri 9.00am-5.00pm Tel: 4927 6808\Fax 4927 6485 hunter@acon.org.au

129 Maitland Road, Islington, 2296

PO Box 220, Islington, 2296

MacKillop Centre - Hunter

Training and development opportunities for PLWHA Tel: 4968 8788

Illawarra

Mon-Fri 9.00am-5.00pm

Tel: 4226 1163 Fax: 4226 9838 illawarra@acon.org.au 47 Kenny St, Wollongong, 2500 POB 1073, Wollongong 2500

Mid North Coast
Outreach project: by appointment
Tel: 6584 0943

Fax: 6583 3810 mnc@acon.org.au

4 Hayward St, Port Macquarie, 2444

POB 1329, Port Macquarie, 2444

FTMAustralia

Resources and health information for all men (identified *female* at birth), their partners, family and service providers.

Contact FTMAustralia for more information.

PO Box 488, Glebe, NSW, 2037 www.ftmaustralia.org mail@ftmaustralia.org

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Directory Assistance

HIV AWARENESS AND SUPPORT

For HIV positive IDUs and their friends. Meets on Wednesdays. Contact Sandra or Tony at NUAA. Tel: (02) 9369.3455
Toll Free: 1800.644.413

INNER CITY LEGAL CENTRE

Available to discuss any legal matter that concerns you.

Tel: (02) 9332.1966

INTERSECTION

Coalition group of lesbian, gay, transgender and other sexual minority groups and individuals working for access and equity within local community services and their agencies.

Christine Bird (02) 9525.3790

KIRKETONROADCENTRE

Needle exchange and other services Clinic Hours:

Monday to Friday, 10am - 6pm Saturday to Sunday, 2pm - 6pm Outreach Bus - Every Night 100 Darlinghurst Road (Entrance above the Kings Cross Fire Station - on Victoria Street) PO Box 22, Kings Cross, NSW, 2011

Tel: (02) 9360.2766 Fax: (02) 9360.5154

LES GIRLS CROSSDRESSERS GROUP

An independent peer support group for transgender people. Free tuition, job assistance, friendship and socials, general information. Bimonthly meetings.

Coordinator,

PO Box 504 Burwood NSW 2134

(MCC) METROPOLITAN COMMUNITY CHURCH

MCC Sydney is linked with other MCC churches in Australia as part of an international fellowship of Christian churches, with a special concern for any who feel excluded by established religious groups. MCC deplores all forms of prejudice, discrimination and oppression - and seeks to share God's uncomditional love and acceptance of all people, regardless of sexual orientation, race or gender.

96 Crystal Street, Petersham 2049 Phone: (02) 9569.5122 Fax: (02) 9569.5144 Worship Times: Sundays 10.00 am & 7.30 pm mcc@eagles.bbs.net.au http://www.mccsydney.org.au/

MOUNTDRUITTLUXFORD ROAD CLINIC

Provides free, confidential and respectful sexual health information, assessment, treatment and counselling.
Ph: (02) 9881 1733
Mon 1.00pm-4.00pm
Wed 9.00am-12.30pm
Fri 9.00am-12.30pm
Every second Thursday 9.00am-12.30pm

NEON

is a support and social group for transgender people of all ages. It's a chance to get together and discuss experiences, gain support and make friends. We meet at the ACON Hunter office on the lastWednesday of every month from 7pm-9pm and on the second Wednesday from 7pm-8pm
Tel: (02) 4927 6808 (ask for Cath)

NEWCASTLE SWOP

SWOP at Newcastle has a Mobile Sexual Health Team 0249 276 808

NORTHAIDS

A community based organisation providing step down and respite care for PLWHA on the Northern Beaches.

Tel: (02) 9982 2310

NUAA - NSW USERS AND AIDS ASSOCIATION

A peer-based community organisation providing education on safe injecting, safe using and safe sex. Information on services for injecting drug users. Free needles, swabs, water, spoons, condoms, dams, gloves and lube. Free newsletter and material on HIV and AIDS and other topics of interest or concern to people using drugs illicitly.

345 Crown St., Surry hills, 2010 PO Box 278, Darlinghurst, NSW, 1300

Tel: (02) 8354 7300 Tollfree: 1800 644 413 Fax: (02) 8354 7350 admin@nuaa.org.au

PARRAMATTA SEXUAL HEALTHCLINIC

provides free, confidential and respectful sexual health information, assessment, treatment and counselling.

Level 2, Parramatta Health Service,

158 Marsden (cnr. George St)

Service, 158 Marsden (cnr. George St) Parramatta 2150 Ph: (02) 9843 3124 Mon, Wed, Fri 9.00am-4.00pm Tue 10.00am-4.00pm Thu 4.00pm-7.30pm

PLWHA (PEOPLE LIVING WITH HIV/AIDS)

PO Box 831, Darlinghurst NSW 2010

Tel: (02) 9361.6011 Fax: (02) 9360.3504 http://www.plwha.org.au/

Katoomba: P.O. Box 187 Katoomba NSW 2780

Tel: (02) 4782.2119 http://www.hermes.net.au/plwha/ plwha@hermes.net.au

POSITIVE WOMEN

Can offer one-on-one support for HIV positive transgender women. Contact Women and AIDS Project Officer or Women's HIV Support Officer at ACON.

Tel: (02) 9206.2000 http://www.acon.org.au/education/ womens/campaigns.htm

REPIDU

Resource and Education Program for Injecting Drug Users Mon - Fri, 9am - 5pm Sat & Sun, 1 - 5 Deliveries Tue, Fri 6 - 9 151 Pitt St, Redfern, NSW, 2016 Tel: (02) 9699.6188

RPASEXUALHEALTHCLINIC

provides a free and confidential range of health, counselling and support services

SAGE FOUNDATION (Sex and Gender Education Foundation)

A voluntary lobbying organisation made up of gender variant people to lobby the government to ensure equal treatment in all respects of life. Sage is non-profit. All welcome.

Ph: 0421 479 285

Email:

SAGE_Foundation@yahoogroups.com

SEAHORSE SOCIETY OF NSW

The Seahorse Society is a non-profit self-help group funded by members' contributions. Open to all crossdressers, their relatives and friends. We offer discretion, private monthly social meetings, outings, contact with other crossdressers, a telephone information service, postal library service and a newsletter.

PO Box 168,Westgate,NSW 2048 or Tel: 0423125 860 www.seahorsesoc.org crossdress@seahorsesoc.org

SOUTH COAST of NSW from

Ulladulla to the VIC Border. We are a group of like-minded people trying to establish a social and support group. Jen Somers, Sexual

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Health Counsellor, Narooma Community Health Centre, Marine Drive

Narooma, NSW 2546 Tel: (02) 4476.1372 Mob: 0407 214.526 Fax: (02) 4476 1731 jenni.somers@sahs.nsw.gov.au

(SWOP) SEX WORKERS OUTREACH TRANSGENDER SUPPORT PROJECT

Provides confidential services for trannies in sex work within NSW. 69 Abercrombie Street Chippendale NSW PO Box 1354 Strawberry Hills NSW 2012

Tel: (02) 9319.4866 Fax: (02) 9310.4262 info@swop.org.au http://www.swop.org.au/ 0249 276 808

SYDNEY BISEXUAL NETWORK

Provides an opportunity for bisexual and bisexual-friendly people to get together in comfortable, safe and friendly spaces. Pub social in Newtown on 3rd Sunday of every month followed by a meal. All welcome. PO Box 281 Broadway NSW 2007 Tel: (02) 9565.4281 (info line) sbn-admin@yahoogroups.com http://sbn.bi.org

SYDNEY BISEXUAL PAGANS

Supporting, socialising and liberating bisexual pagans living in the Sydney region.

PO Box 121, Strawberry Hills NSW 2012

SYDNEY MEN'S NETWORK

Welcomes FTM Men. PO Box 2064, Boronia

PO Box 2064, Boronia Park, 2111 Tel: 9879.4979 (Paul Whyte)

paulwhyte@gelworks.com.au

SYDNEY SEXUAL HEALTH CENTRE

Provides free, confidential health services, including sexuality, sexual function, counselling and testing and treatment of STDs including HIV..

Level 3, Nightingale Wing, Sydney Hospital, Macquarie St, Sydney, NSW, 2000.

Tel: (02) 9382 7440 or freecall from outside Sydney 1800 451 624 (8.30am-5.00pm) Fax:(02) 9832 7475

sshc@sesahs.nsw.gov.au

TOWN & COUNTRY CENTRE

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Drop In Centre - Weekly Coffee Nights - 24 hour ph line - regular social activities - youth services information, advice and referral safer sex packs and more! - for bisexual, transgender folks and men who have sex with men 80 Benerembah Street, Griffith PO Box 2485, Griffith, NSW 2680

Tel: (02) 6964.5524 Fax: (02) 6964.6052 glsg@stealth.com.au

WESTERN SYDNEY HIV/ HEP C PREVENTION SERVICE

Needle and syringe program 158 Marsden St, Parramatta NSW 2150

Ph: (02) 9843 3124 Fax: (02) 9893 7103

WOLLONGONG - TRAN

Transgender Resource and Advocacy Network.

A service for people who identify as a gender other than their birth gender. Providing a safe and confidential place to visit, phone or talk about gender issues.

Thursday AND Friday 9am - 5pm Tel: (02) 4226.1163

WOMENS & GIRLS DROP IN CENTRE

is a safe, friendly drop-in Centre in inner Sydney for women with or without children. Shower, relax, read the paper, get information, referral and advice.

Monday to Friday - 9.30 - 4.30pm 177 Albion Street, Surry Hills NSW 2010

Tel: (02) 9360.5388

YOUTHBLOCK HEALTH & RESOURCE SERVICE

Free, safe and holistic health service for young people aged between 12-24 years in the inner-West and Canterbury areas of Sydney. Medical, dental and counselling services and music, visual arts, Aboriginal cultural and health promotion programs available. SPACE program for young people questioning their gender or sexuality.

142 Carrilon Ave, Camperdown Ph: 9516 2233

A.C.T.

AGENDER AGENDA is a non-profit group committed to providing support, education, information and relief to people living with any tupe of sex or gender related condition (whether symptoms are physical or mental and are attributable to genetic or other origin). PO Box 4010, Ainslie, ACT, 2602 Ph: 0412 882 855 Fax: (02) 6247 0597

Fax: (02) 6247 0597 Email: polar@homemail.com.au

AIDSACTION COUNCILOF

The AIDS Action Council of the ACT provides information and education about HIV/AIDS, caring, support services for people living with HIV/AIDS Westlund House, Acton, ACT 2601 GPO Box 229, Canberra, ACT 2601

Tel: (02) 6257.2855 Fax: (02) 6257.4838 info@aidsaction.org.au

PLWHA (PEOPLE LIVING WITH HIV/AIDS)

People living with HIV/AIDS ACT provides peer based support, advice and advocacy for people with HIV/AIDS in a relaxed friendly environment.

Westlund House, Acton ACT 2601 GPO Box 229, Canberra ACT 2601

Tel: (02) 6257.4985 Fax: (02) 6257.4838 plwhaact@hotmail.com.au

SWOP ACT (SEX WORKER OUTREACH PROJECT)

Provides services for people working in the sex industry in the ACT.

29 Lonsdale Street, Braddon, ACT, 2601 PO Box 67, Braddon, ACT, 2601

Tel: (02) 6247 3443 Fax: (02) 6247 3446

E-mail: actswop@webone.com.au

Directory Assistance

Northern Territory

NORTHERN TERRITORY AIDS&HEPATITISCOUNCIL

(incorporating People Living With HIV/AIDS and/or HEPC, the Needle Syringe Program, the Sex Worker Outreach Project and Community Education)

GPO Box 2826, Darwin, NT, 0801 46 Woods Street, Darwin

Tel: (08) 8941 1711 Freecall: 1800 880 899

Mensline: 1800 181 888 information and referral for gay, bisexual, MSM and men who are curious about their sexuality

Email: infor@ntahc.org.au

Queensland

(ATSAQ)AUSTRALIAN TRANSGENDERIST SUPPORTASSOC.OFQLD.

A non-profit organisation providing counselling, support, referral and information, crisis counselling, drug and alcohol for transgender people, their families and friends.

Ph: (07) 3843 5024 Email: trans.atsa@pacific.net.au

BRISBANE GENDER CLINIC

Doctors from private practices with an understanding of the transgender community ARE available for consultation by appointment each Wednesday afternoon from 1.30pm to 5.30pm.

Phone (07) 3837 5645 Fax: (07) 3837 5640 Level 1, 270 Roma Street, Brisbane 4000

CAIRNS SEXUAL HEALTH SERVICE

A public health clinic with an interest in and experiece of transgender medicine. Doctors, nurses and psychologist with referral to other services as required.

The Dolls House, Cairns Base Hospital, The Esplanade, Cairns Ph: (07) 4050 6205

GOLD COAST SEXUAL HEALTH CLINIC

A public sexual health clinic with an interest in and experience of transgender medicine. Medical staff, nursing staff, dietician, psychologist. Referral to speech pathology, endocrinologists, psychiatrists, surgeons available. Consultations free, by appointment.
2019 Gold Coast Highway
PO Bopx 44, Miami, Qld, 4220
Ph: (07) 5576 9033
fax(07) 5576 9030

QUEENSLAND GENDER CENTRE

Transsexual semi-supported accommodation available to those who identify as Transgender and who are drug and alcohol free. Accommodation available for six or twelve months.

PO Box 386, Chermside South, QLD 4032 Ph: (07) 3357 6361 www.queenslandgendercentre.org

SEAHORSE SOCIETY OF OLD

We provide a safe environment for members and other persons in their lives to meet and socialise and offer counselling where possible. We are wholly self-funded And open to both sexes no matter what their sexuality PO Box 574 Annerley QLD 4102 www. geocities. com/ WestHollywood/8009/ seahorse@powerup.com.au

(SQWISI)SELFHEALTH FORQUEENSLAND WORKERSINTHESEX INDUSTRY

Provides a confidential service for trannies working in the sex industry in Queensland. Offices in Brisbane, Gold Coast and Cairns. Also has an exit and retraining house for sex workers wanting to leave the sex industry.

PO Box 5649, West End Qld 4101 Tel: 1800 118 021

Fax: (07) 3846 4629 Email: sqwisib@sqwisi.org.au

Andrejic Arcade, Suite 32,

55 Lake Street, PO Box 6041, Cairns, Qld, 4870

Tel: (07) 4031 3522 Fax: (07) 4031 0996 Email: sqwisic@sqwisi.org.au

Level 1 Trust House

3070 Gold Coast Highway, Surfers Paradise, Qld, 4217 PO Box 578, Surfers Paradise, Qld 4217

Tel: 1800 118 021 Fax: (07) 5531 6671 Email: sqwisigc@sqwisi.org.au

Level 3 Post Office Arcade

Flinders Street, Townsville, Qld, 4871

PO Box 2410, Townsville, Qld, 4810

Ph: 1800 118 021 Fax: (07) 4721 5188 Email: sqwisit@sqwisi.org.au

Directory Assistance

TRANSPRIDGE

A support group for transgenders in the Townsville area. We have connections with sexual health, mental health, AIDS counselling and others by association.

Transbridge Support, PO Box 3572, Hermit Park, QLD 4812

If we can help you at any time we have a mobile phone for twenty-four hour support at:

0406 916 788

email: transbridge@mail.com

South Australia

CARROUSEL CLUB

A non-profit, social group that operates as a support group for persons with gender issues, and provides social outlets. Produces a Club Newsletter every two months.

PO Box 721, Marleston SA 5033 Tel: (08) 8411.0874 ccsai@hotmail.com www.geocities.com/carrousel_2000

CHAMELEONS

Counselling, information and support aimed at minimising the isolation of transgender people in South Australia.

PO Box 2603 Kent Town SA 5071 Tel: (08) 8293 3700 Fax: (08) 8293 3900 AH: (08) 8346 2516

DARLING HOUSE COMMUNITY LIBRARY

A non-profit, community based resource that operates as a joint project of the AIDS Council of SA and the Gay and Lesbian Counselling Service of SA Inc.

64 Fullarton Rd Norwood PO Box 907 Kent Town South Australia 5071

Tel: (08) 8334 1606 Fax: (08) 363.1046 Freecall: 1800 888 559

SHINE-SEXUAL HEALTH

Networking and Education South Australia Inc. (formerly Family Planning South Australia) provides sexual and reproductive health services for the South Australian community.

17 Phillips Street, Kensington, SA. 5068 Tel: (08) 8431 5177 Fax: (08) 8364 2389

(SATS) SOUTH AUSTRALIAN TRANSSEXUAL SUPPORT GROUP

A support group for transsexuals who have changed or are about to change their gender role and for their partners. Also provides information on transsexualism for the community and people with gender identity difficulties.

SATS C/O PO Box 907

Kent Town SA 5071

or the Gay and Lesbian Counselling Service (Gayline) on: (08) 8422 8400 or country on 1800 182 223 or Sarah on 0409 091 663 or www.tgfolk.net/sites/satsg/ hrt.html

email: satsgroup@yahoo.com.au

Tasmania

WORKING IT OUT

Tasmania's sexuality and gender support and education service providing counelling and support, mentoring for lesbian, transgender and intersex (LGBTI) Tasmanians and education and training programmes to schools, workplaces, government and nongovernment organisations Office hours vary from office to office. Hobart, 39 Burnett St, North Hobart (03) 6231 1200 or 0429 346 122

Launceston, 45 Canning St, Launceston

Burnie, 11 Jones St, Burnie (03) 6432 3643

www.workingitout.org.au Email: coord@workingitout.org.au

Victoria

CHAMELEON SOCIETY OF VICTORIA Inc.

While the group does not meet on a regular basis it is there to provide support and information to those requiring assistance with all matters.

PO Box 79

Altona, VIC.3018

Telephone message bank service (03) 9517 9416

email:

chameleonvicgirls@hotmail.com robr@vicnet.net.au

FTMPHALLOPLASTY CONTACT

Michael is F2M who has had GRS and is willing to be contacted for information and support around Gender Reassignment Surgery for F2Ms in particular <u>phalloplasty</u> as performed by the Monash Medical Centre Gender Team.

Michael Mitchell. Tel: 0405 102 142 Tel: (03) 5975 8916 messagebank pathwaysau@yahoo.com.au

GENDERAFFIRMATION AND LIBERATION

is a caring self-help group for transexed people. It meet monthly to support people who are in the process of gender/sex affirmation (transitioning or transitioned).

PO Box 245, Preston, VIC, 3072 Tel: (03) 9517 1237 http://groups.yahoo.com/groups/

PROSTITUTES COLLECTIVE OF VICTORIA

RhED in the sex industry

Are you interested in contributing to **RED**, the magazine produced by the RhED Program? If you are, please contact RhED on (03) 9534 8166 Mon-Fri 10am to 5pm

SEAHORSE CLUB OF VICTORIA Inc.

A fully contituted self-help group financed by members subscriptions. Full or postal membership is open to transpersons who understand and respect the purpose of the club. Partners are also considered to be members. We have private monthly social meetings with speakers from relevant professions. Besides a monthly magazine and a library, we offer a contact mail service.

GPO Box 86, St Kilda, VIC, 3182 Tel: (03) 9513 8222

http://home.vicnet.net.au/~seahorse seahorsevic@mbox.com.au

(TGV) TRANSGENDER VICTORIA

Transgender Victoria is dedicated to achieving justice and equity for people experiencing gender identity issues, their partner, families and friends. We provide support on a range of issues including education, health, accommodation and facilitating assistance with workplace issues for those identifying as transgender, transsexual or cross-dresser.

PO Box 762, South Melbourne, VIC, 3205

Tel: (03) 9517 6613 (leave a message) transgendervictoria@yahoo.com.au www.vicnet.net.au/~victrans

Western Australia

CHAMELEON SOCIETY

Provides support to crossdressers, their relatives and friends.
PO Box 367,
Victoria Park WA 6979
Tel: 0418 908839 (8pm-10pm)
Email: chameleonswa@email.com
www.chameleonswa.com

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FREEDOM CENTRE

1/471 William St,

Northbridge,WA 6003

Ph: (08) 9228 0354 (opening

hours

(08) 9482 0000(admin) Fax: (08) 9482 0001

Email: info@freedom.org.au

Web: www.freedom.org.au Provides peer support, information, referrals and a safe social space for young people (under 26) who afre gay, lesbian, bisexual, transgender, transsexual, queer and questioning. We have a monthly drop-in specifically for Trans- and/or gender diverse young people called Gender Q (see below) on the first Thursday of every month from 5-8pm.

GAY AND LESBIAN COMMUNITY SERVICES

2 Delhi St, West Perth, WA, 6005

Ph: (08) 9486 9855

Counselling line (08) 9420 7201

Counselling line country areas 1800 184 527

Email: admin@glcs.org.au Web: www.glcs.org.au

Gay and Lesbian Community Services provides telephone counselling and other support services for people with diverse sexuality and gender. They have an excellent referral list for trans* friendly doctors, psychs etc.

GENDER-Q

Meets at the Freedom Centre (1/471 William St, Northbridge WA) on the first Saturday of every month from 1pm-4pm. It is a free peer-based support session for young people (aged 25 and under) with diverse gender expression. Significant others welcome.

Freedom Centre, PO Box 1510, West Perth 6872, WA

Tel: 9228 0354 www.freedom.org.au

email: info@freedom.org.au

INTERNATIONAL FOUNDATION FOR ANDROGYNOUS STUDIES (IFAS)

See International listings on p.39

MAGENTA

Magenta offers support, education and information to transgender,

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Directory Assistance

male and female workers in the sex industry: PO Box 8054 PBC Northbridge, WA 6849 Tel: 08. 9328 1387 Fax: 08. 9227 9606

PERTH INNER CITY YOUTH SERVICE (PICYS)

PO Box 1062, West Leederville, WA, 6901

Ph: (08) 9338 2792 Fax: (08) 9388 2793

Email: picys@westnet.com.au PICYS provide medium to long-term support and accommodation for young people aged 16 to 25 who would otherwise be homeless. PICYS staff are well informed about TTI issues and are trained to provide young people with specialised support. TTI-specific resources and referrals to medical professionals.

TRANSCOMMUNITY WA

We provide peer support for, information resources about, and advocacy on behalf of, people who are transitioning, are planning to transition, or have transitioned. We also organise discreet social events at which significant others and supporters of our membership are welcome. Contact Lisa on 0427 973 496, email lisasonau@yahoo.com.au

TRANSWEST: THE TRANSGENDER ASSOCIATION OF WESTERNAUSTRALIA (INC)

Support, information, advocacy and social events for all kinds of transgender and transsexual people. Established 1997
PO Box 1944,
Subiaco, WA, 6904
Mob: 0407 194 282
hmpperth@cygnus.uwa.edu.au
www.geocities.com/transwest_wa

TRUE COLOURS PROGRAM

1st floor, Trinity Buildings, 72 St Georges Terrace. PERTH, WA, 6000 Ph: (08) 9483 1333

Fax: (08) 9322 3177

Email:

jaye.edwards@unitingcarewest.org.au

Web

www.unitingcarewest.org.au
The True Colours program aims to promote safe and inclusive rural and regional communities where young people with a diverse sexuality and gender, their families and friends are supported and affirmed. This program offers support to young people who are coming out as well as educating the community

Polare page 38 October-December 2008 families and friends.

WELLBEING CENTRE OF

services sector and community

members about the impact of

on these young people, their

homophobia and heterosexism

WELLBEING CENTRE OF WA

Service for people with bloodborne diseases such as Hep C and HIV/AIDS. This service is for people with issues such as health problems, relationships, medication and alternative therapies.

162 Aberdeen Street, Northbridge

Tel: (08) 9228 2605

www.free2be.org,au is a WA based website for DSG youth that has a section on gender too (www.free2be.org.au/gender.html

Directory Assistance

National

(ABN)AUSTRALIAN BISEXUALNETWORK

ABN is the national network of bisexual women, men and partners and bi- and bi-friendly groups and services. ABN produces a national news magazine, houses a resource library and is a member of the International Lesbian and Gay Association (ILGA).

PO Box 490, Lutwyche QLD 4030 Tel: (07) 3857 2500

1800 653 223 ausbinet@rainbow.net.au www.rainbow.net.au/~ausbinet IRCL (oz.org network) A.B.N.

AISSUPPORT GROUP (AUSTRALIA)

Support group for Intersex people and their families. We have representatives in all Australian States. PO Box 1089
Altona Meadows, VIC, 3028
Tel: (03) 9315 8809
aissg@iprimus.com.au

AUSTRALIAN WOMAN NETWORK

www.vicnet.net.au/~aissg

Australian WOMAN Network is primarily a lobby and health support group for people who experience the condition of transsexualism, their families, friends and supporters. There are email discussion lists for members as well as a bulletin board providing places for both public and memberonly access. There is also a large archive of related material available for education and research purposes.

www.w-o-m-a-n.net

CHANGELINGASPECTS

A caring national support organisation for Transsexual people, their partners and families. For information, please write or call. email:knoble@iinet.net.au

email:knoble@iinet.net.au www.changelingaspects.com

FTMAustralia

Resources and health information for all men (identified *female* at birth), their partners, family and service providers. Contact FTM Australia for more information. PO Box 488, Glebe, NSW, 2037 www.ftmaustralia.org mail@ftmaustralia.org

International

AGENDER NEW ZEALAND

A caring national support organisation for Cross/Transgender people, their partners and family. For a detailed information pack, please write or call.

PO Box 27-560 Wellington New Zealand Tel: (64) 025.575.094 janet@paradise.net.nz http://homepages.paradise.net. nz/janet/

BEAUMONT SOCIETY

Non-profit organisation for crossdressers throughout Great Britain. Social functions, counselling and a contact system for members. Provides a magazine - Beaumont magazine BM Box 3084
London WCIN 3XX
England
www.beaumontsociety.org.uk/

BEAUMONT TRUST

The Trust is a registered charity, the aim of which is the support of transvestites, transsexuals, their friends and families. It fosters research into both psychological and social aspects of transvestism and transsexualism and can provide speakers to address other organisations. It produces literature and arranges workshops, develops befriending facilities and assists with conferences.

The Beaumont Trust, BM Charity, London WC1N 3XX.

http://www3.mistral.co.uk/gentrust/bt.htm

CROSS-TALK

The transgender community news & information monthly. PO Box 944, Woodland Hills CA 91365U.S.A.

FTM INTERNATIONAL

A group for female to male transgender people. Provides a quarterly newsletter - FTM.

160 14th St
San Francisco, CA, 94103
http://www.ftmi.org/
info@ftmi.org

FTMNETWORK UK

A support group for female to male trans people. Provides a newsletter - *Boys' Own*FTM Network, BM Network, London, WC1N 3XX, England. www.ftm.org.uk

GENDERBRIDGE Inc.

Support and Social Society for people with gender identity issues, their families, partners and professionals involved in care, treatment and counselling. PO Box 70060, Auckland, 1230, New Zealand Phone: (64) (09) 0800 TGHELP (0800.84.4357) (24 hrs) www.genderbridge.org info@genderbridge.org

GENDER TRUST (THE)

A help group for those who consider themselves transsexual, gender dysphoric or transgendered. Provides trained counsellors, psychologists and psychotherapists and a there is a referral procedure to a choice of other therapists.

The Gender Trust PO Box 3192, Brighton BN1 3WR, ENGLAND http://www3.mistral.co.uk/ gentrust/home.htm gentrust@mistral.co.uk

INTERNATIONAL FOUNDATION FOR ANDROGYNOUS STUDIES (IFAS)

Support, information, advocacy and social events. An incorporated body established to advance the health, well-being, basic rights, social equality and self-determination of persons of any age or cultural background who are transgender, transsexual, transvestite or intersex, or who are otherwise physically or psychologically androgynous as well as gay, lesbian and bisexual people.

PO Box 1066 Nedlands, WA, 6909, Australia Mobile ph: 0427 853 083 http://www.ecel.uwa.edu.au/gse/ staffweb/fhaynes IFAS_Homepage.html www.IFAS.org.au

IFGE INTERNATIONAL FOUNDATION FOR GENDER EDUCATION

Educational and service organisation designed to serve as an effective communications medium, outreach device, and networking facility for the entire TV/TS Community and those affected by the Community. Publisher of materials relevant to the TV/TS theme. Produces TV/TS journal -*Tapestry*. PO Box 229, Waltham, MA 02254-0229 U.S.A. http://www.ifge.org/

info@ifge.org

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IKHLAS

ZEALAND

IKHLAS drop in centre is a community program by Pink Triangle Malaysia. Provides an outreach project, HIV/AIDS information, counselling, medication, workshop and skill building for transgender people in Kuala Lumpur Malaysia.
PO Box 11859, 50760
Kuala Lumpur Malaysia
Tel: 6.03.2425.593
Fax: 6.03.2425.59

ITANZ INTERSEX TRUST AOTEAROA OF NEW

Registered non-profit charitable trust to provide a number of educational, advocacy and liaison services to intersexuals, their parents, caregivers, family, friends and partners within the Community and those affected by the Community.

PO Box 9196, Marion Square Wellington, New Zealand Tel: (04) 4727 386 (machine only) Fax: (04) 4727 387

PROSTITUTES COLLECTIVE OF AUCKLAND - NEW ZEALAND

PO Box 68 509, Newton, Auckland, New Zealand

PROSTITUTES COLLECTIVE OF CHRISTCHURCH-NEW ZEALAND

Provides a confidential service for trannies working in the sex industry.

PO Box 13 561

Christchurch,

New Zealand

PROSTITUTES COLLECTIVE OF WELLINGTON - NEW ZEALAND

Provides a confidential service for trannies working in the sex industry.

PO Box 11/412, Manner St Wellington New Zealand Tel: (64) 482-8791 Fax: (64) 801-5690

Every effort has been made to include accurate and up-to-date information in this directory. To amend your listing fax (02) 9569 1176 or email the Editor on resources@gendercentre.org.au

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The Lesbian and Gay Anti-Violence Project can be contacted on (02) 9206 2116 or 1800 063 060

PLEASE NOTE!

Apart from the Wednesday night dropins, you should make an appointment before coming to the Gender Centre. This helps us to plan and saves you disappointment.

We didn't use a condom and now I'm worried about HIV

THERE'S A TREATMENT CALLED PEP THAT MIGHT STOP YOU GETTING INFECTED'
Within a few hours and no later than 3 days.

CALL THE PEP 24 HOUR HOTLINE 1800 737 669 1800 PEP NOW

For more information and your nearest location an information brochure about pep is available at venues, sexual health centres, acon, nuaa and swop or visit www.acon.org.au

FTM RESEARCH ARTICLE

I'm a post-graduate journalism student researching an article about the experiences of FTM transgendered individuals. Iwould like to interview an FTM male about his life and how the experience of transitioning has impacted on personal and sexual relationships, and how he feels transgendered people are viewed by the lesbian community. The overall tone of the article will be positive.

If you are interested, please email me at *luke.malone@gmail.com*. I look forward to hearing from you. Luke Malone

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