Polare

MAGAZINE OF THE NEW SOUTH WALES GENDER CENTRE



Edition 83 April-June 2010



The Gender Centre is committed to developing and providing services and activities which enhance the ability of people with gender issues to make informed choices.

The Gender Centre is also committed to educating the public and service providers about the needs of people with gender issues.

We offer a wide range of services to people with gender issues, their partners, families and organisations, and service providers.

We specifically aim to provide a high quality service which acknowledges human rights and ensures respect and confidentiality.

the Gender Centre

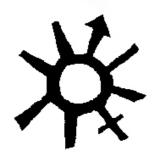
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Our Services

Support and education



Residential Service

groups for partners and family

For all enquiries relating to the residential service, please contact us.

Counselling and support

Cover: Jin Xing was born in 1967, and was assigned male but showed a love of dance from early childhood. She joined the army's dance company and rose to the rank of colonel and received a scholarship to study dance in the United States where she won critical acclaim. In 1993 she returned to China and had gender affirmation surgery in 1996. She now owns a contemporary dance company in Shanghai. See article p.21.

April-June 2010

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THE FINE PRINT

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Unsolicited contributions are welcome, though no guarantee is made by the Editor that they will be published, nor any discussion entered into. The Editor reserves the right to edit such contributions without notification. Any submission which appears in **Polare** may be published on our Internet site.

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Polare A Magazine for people with gender issues for submissions to the next edition of Polare is the

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eighth of June 2010

The Manager's Report

hinn has been more than ordinarily occupied recently, with administrative matters and has asked me to use his usual report space to bring an unusually important and interesting development in the wonderful world of transgender to your attention, in place of his column.

This is the achievement of norrie-mAy-welbie in having her Recognised Details Certificate reissued by Births, Deaths and Marriages with the Gender line marked "Not specified". This happened in February and received world-wide attention. The *SydneyMorning Herald* made it front-page news and many gender-oriented blogs and newsgroups picked it up.

For those who don't know norrie (can there be such a person?) she is a tireless campaigner for all the causes she believes in and not least for those who are disadvantaged in any way by gender issues. She was born in Scotland and raised as male but went through gender affirmation as a female in her twenties. She then realised that she was neither male nor female, ceased hormone therapy and proclaimed her intention to be herself, unspecified as to gender. After obtaining medical support for this contention she was able to persuade the Registry of Births, Deaths and Marriages to issue a certificate with a "not specified" annotation, setting an example for the many people like her around the world.

Spokespeople as wildly disparate as Tracie O'Keefe from SAGE (Sex and Gender Education) and Nicholas Tonti-Filippini, a Catholic ethicist from the John Paul II Institute came out in support of norrie and for a while it looked as if a significant change had been made in the way Australian bureaucrats look at gender.

Alas, it took only a few days for the Attorney-General's Department to intervene and force the Registry to reverse its position and cancel the certificate, stating that 'legal advice' had shown that the "Sex not specified" annotation was illegal because the Registrar "may only issue a recognised details certificate or a new birth certificate following a change of sex in either male or female gender." Leaving aside the solecism of using a phrase like "change of sex" this decision flies in the face of a letter received

by the Gender Centre some time before norrie's fine adventure, asking how to obtain the 'X' gender annotation which has been approved internationally. The answer received was to the effect that a passport could only be annotated 'X' if a birth certificate was presented annotated 'X', and that this would require evidence from doctors that the person in question was of neither male nor female sex.

Isn't that exactly what norrie had done? She consulted doctors who had provided documentation to the effect that norrie is neither male nor female. Admittedly on one hand we are talking of the annotation 'X' as opposed to a spelled-out version 'sex not specified' but I do not see any significant difference. Clearly people with 'X' on their birth certificates and/ or passports are not claiming to be some mysterious third X-sex. X is a conventional representation for something unspecified or unknown and the annotation X has been in use on passports in exactly this context for a number of years.

To quote from the advice given to passport applicants by the Department of Foreign Affairs and Trade:

Passports and the biographical details they contain are regulated by the International Civil Aviation Organisation (ICAO) to ensure a standard approach world-wide. Sex is one of four mandatory personal identifiers contained in the passport and Australia, as a member of ICAO, complies with the ICAO standard that the sex data field on the travel document must be completed with the letter M for male, F for female or X for unspecified.

It appears on these grounds that norrie has fulfilled the requirements for an 'X' or an 'Unspecified' and the bureaucrats are making difficulties that do not exist. Serve them right for seeking legal advice instead of using common sense.

Norrie, of course, is not taking anything lying down. A short telephone interview a few minutes ago revealed that she has not only appealed to the Human Rights Commission but has already received active support from many ALP branches, from Lee Rhiannon, from Clover Moore, from Georgina Beyer (who is lobbying Helen Clarke), from Gordon Moyes and many others. Way to go, norrie!

Kate Cummings

Editorial - Katherine Cummings



Transphobia. Causes, Results and Remedies

Many humans suffer from phobias, or irrational fears. These vary from fear of specific items or animals, e.g. arachnophobia (fear of spiders) to fear of being in a specific situation, e.g.

acrophobia (fear of heights), agoraphobia (fear of open spaces), claustrophobia (fear of confined spaces).

Transphobia, fear of those who are transgendered, is not only irrational, it is not even innate, as other phobias are, but learned from society and passed on intentionally by education and example.

Humans have to deal with generalised xenophobia (fear of strangers), with the 'selfish gene' said to ensure that one's own group is the one that will survive and will provide future generations with the idea of a 'pecking order', where one group of people is assumed to be superior to another.

To deal with the last case first, nobody wants to feel that his or her group is the lowest in the pecking order. Whether we are dealing witgh people classified by race, by religion or by social grouping, there is a tendency for groups to struggle against being 'low man on the totem pole' and to force other groups into accepting the role of social inferiority. As a result we see race riots, religious bigotry and the persecution of minority community groups such as transgenders.

In many cases it is not sufficient for the dominant group merely to assert its superiority. It often becomes necessary to demonstrate this superiority by punishing members of the target group, socially or physically.

Transgendered people have been persecuted in many societies for hundreds of years, sometimes because they are assumed to be a sub-group of the homosexual community, which has also had to cope with prejudice and violence over the centuries. There are passages in the Bible and other Holy books which attack homosexuality, cross-dressing and even masturbation and these passages are used by bigots to justify violence against the transgendered.

In Western society there is an ingrained prejudice against same-sex attraction, based on tribal notions of the need to outbreed possible enemies and rivals. This prejudice translates in modern times to a mindless wish to punish those who are 'different' and may therefore present a threat to existing power structures. This prejudice is often transferred from same-sex-attracted to transgenders because society lacks discrimination (in the good sense, i.e. the ability to differentiate between different groups and assess their qualities) so that homosexuals are all assumed to be pedophiles and transgenders are all assumed to be homosexual.

Transgenders also suffer from forms of social discrimination which to not apply, or do not apply as frequently, to other social sub-groups. There can be siscriminatory health care practices, legal difficulties in areas such as superannuation, documentation, hospital visitation rights and inheritance.

Social problems such as familial rejection, domestic violence and employment difficulties result in a high suicide rate among transgenders, a situation brought about by depression and desperation. Old people who are transgendered may need special care and accommodation, the young may need understanding and guidance, but society at present is not organised to provide the resources and compassion needed to defeat the climate of transphobia which lacks understanding of diversity.

The most important remedies for this situation are recognition that the problem exists and education in the ways in which transgenders can be accepted and assimilated into society so that they become invisible elements rather than a segregated 'ghetto'.

A revision of relevant laws should also be undertaken so that transgenders have the same rights as the non-transgendered segment of society.

On a more practical level it is necessary to deal with the current and very real situation regarding transphobia. If we encounter violent

Issue Eighty-Three

transphobia in real life, what are our rights and our best strategies?

Under the law, transgenders have the same rights to peaceful life in public as other citizens. In practice, these rights are not always enforced and are sometimes actively denied. Because many transgenders are living in stealth, i.e. trying to blend in with society and not be seen as transgendered, there is often a reluctance to 'out' oneself by coming forward with a complaint after the event. It is obvious that if everyone adopts this attitude then those who wish to 'punish' transgenders will have a free go and the situation will never improve.

It is better to stand up and do what one can to improve the general situation than to leave all progress and change to be achieved by a few activists and community-minded people. In unity is strength. If you are attacked, report the crime. The police are supposed to observe confidentiality and in most cases do. The Press is less reliable.

What is the best course of action to adopt if you are attacked? If the attack is verbal and takes place in the course of a civilised encounter (a dinner, for instance) then one may take the path of questioning the logic of the transphobe and correcting his/her errors of belief and misunderstanding of the situation. This will sometimes, though not often, result in the transphobic person rethinking his or her position. If he or she remains intransigent it is best to cut off the argument and ignore any further provocation.

If one is in public and the abuse is verbal, it is best to ignore it. It may be wise, however, to move to an area where there are other people present, rather than remaining in a secluded area without neutral witnesses. Although we live in an age where many people 'do not wish to get involved' there are usually a few fair-minded and pro-active people who will come to one's aid if matters turn violent, or who will act as witnesses in subsequent legal action.

If it looks as if one is about to be assaulted physically, do not hesitate to draw attention to your situation. Scream, shout or call for help. If you can leave the scene quickly and safely, do so. If you can't, be prepared to defend

yourself physically. Try to put your back against a wall or into a corner, so that you are defending yourself against the fewest possible number of attackers. And forget Marquess of Queensberry rules. Do whatever you need to do. Your aim is not to be a good sport, or to act 'properly', but to survive.

It is an unfortunate fact that in cases of physical confrontation the transgendered person is often assumed to be the troublemaker, or at least to have provoked the attack by his/her very existence. In order to avoid false charges and unpleasant outcomes, try and obtain the names and contact details of impartial (or better yet, sympathetic) witnesses, and always have the name and number of your lawyer with you.

Mardi Gras and the Public Image of Transgender (or Colour Me Stuffy)

Although nobody could be more supportive than I of the rights of gays, lesbians, and all the rest of the alphabet soup (GLBTIQ etc.) to live tranquil and productive lives free of prejudice and disadvantage, I have never understood the need for a subset of those communities to frolic in the streets in bizarre costume and make a spectacle of themselves in the Mardi Gras Parade. The general public may be amused by some of the social comment and impressed by the skill, creativity and discipline required to create floats and costumes and perform intricate dance routines but the public are there, I believe, for the spectacle and not as an expression of social support or solidarity with the rights of the oppressed. They are there for the 'freak show', not for the ideology.

I do not go to the Parade, and I seldom watch it on television, and when I do the only groups that stir me emotionally are the families of AIDS victims or the PFLAG members who are there to support their near and dear ones.

Of course there are important issues to be raised and the Parade raises many of them, ranging from same-sex-marriage to improved health care. Yet I find it hard to believe that an evanescent parade of colour and movement, music and theatrical mayhem, is the best way to achieve social reform. The changes which come about in our laws and our social conditions are usually the result of activists

pushing our various causes in back rooms and committees, compiling reports or responding to initiatives of government. As often as not they are the result of dedicated individuals who persist in their attempts to bring about change despite the opposition of public servants, politicians and lawyers, who are comfortable with the status quo and do not want to rock the boat or jeopardise electoral margins by adopting what might be seen as radical reform.

There is also the question of public perception of the GLBTIQ image. Of course a parade of business-suited men and women with briefcases, or teenagers in their jeans and t-shirts makes a less interesting spectacle than young men in ballet dresses or dykes in full leather. They are, nonetheless, probably more typical of the gay, lesbian, transgender and intersex communities than the fancy-dress charivari we see on the street during Mardi Gras. This year the parade was led by a transsexual woman, Amanda Lepore. She may be a fine person with all the qualities one might wish for in an entertainer, but she is also atypical of almost all transgenders. Wearing little but a few crystals and a surgically-enhanced smile, she must have reinforced the maddest misconceptions in the public mind of what it means to be transgendered. Of course Ms Lepore has the right to do anything not currently forbidden by law, but that should not include the right to represent the tg community as a whole. As far as I know representatives of the tg community were not consulted, but merely informed after the event, as almost always happens.

Another oddity from the Mardi Gras involved a friend of mine, a Koori woman who attended the Parade in traditional Koori costume, including generous application of ochre to her bare breasts. Despite the spectacle of Ms Lepore's and many other rampant boobs on display, my friend was instructed by a policeman to cover her breasts. What was **that** all about?

A few days later thousands of breasts and genitalia were exposed on the Opera House steps without a hint of police action. One law for the weird, another for the queer....







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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

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and sign up to our low-volume mailing list For more information visit our website **www.sageaustralia.org**

SAGE - campaigning for your rights!

Polare page 7 April-June 2010

The Transgendered Child by Stephanie Brill

and Rachel Pepper, reviewed by Elizabeth Anne Riley

In *The Transgender Child: A Handbook for Families and Professionals*, Stephanie Brill and Rachel Pepper have successfully created a guidebook for any family with a gender-variant child and basic information for professionals who find themselves working with gender-variant children and/or their families.

In helping parents comprehend the territory that is 'having or raising a transgender child', Brill and Pepper communicate, at the very least, how to handle the 'coalface' issues that families have to deal with, while demonstrating understanding, respect and compassion for all involved.

The book starts with a brief background and explanation of gender, societal assumptions and diversity, challenging the status quo and affirminh parents' views and queries about having to manage a situation for which they have no precedent or preparation.

Brill and Pepper have successfully conveyed the flexibility and individual approach required of professionals in supporting each family uniquely, given differing circumstances, beliefs, dynamics and community.

The book answers parents' questions about clothes, behaviour, toys, going out, bathrooms, religion and more, not necessarily in depth, but with enough information for parents to be confident that they are acting in the best interests of their children.

The next stage describes how to navigate the proces of transition, dealing with disclosure and family reactions. The authors provide arguments for and against who to disclose to and whether or not to let the child determine the limitations of exposure. They offer clear guidelines in dealing with adversarial situations, talking to friends and handling strangers as well as providing information on the realities of choosing friends who will provide a healthy environment so that the child can develop and thrive.

Although the book is US-based, the information about educating the transgendered child and finding the right school provides parents with some ideas about school policies, bullying and practices that have proved beneficial for parents and their children. Practical advice regarding training at the schools and appropriate target audiences for that training are also provided. The vital neccesity teaching teachers the and school system to cope with diversity rather than simply focussing on



Elizabeth Anne Riley

the individual child is stressed, in order to protect the privacy of individuals.

Finally, the book offers guidance on medical issues, how to deal with events which lead to the Emergency Department, and practical information on issues around delaying puberty and the use of hormone blockers.

When I managed to buy a copy of this book, shortly after its release in 2008, I admit I was initially disappointed, as the book contains virtually no references for extended reading. Nonetheless, Brill and Pepper have provioded a long-awaited book that has been invaluable in providing parents with support, if only by supplying another voice, apart from the counsellor's, and providing a handy reference guide for consultation day by day.

In Defence of Repetition and Differing Points of View

Those who read *Polare* attentively and, better still, remember what they read, will have noted that this book was reviewed by Tracie O'Keefe in *Polare* a year ago (issue 79). It had slipped my mind, and my only excuse is my advanced age [dribble, cough, wheeze]. When I looked at both reviews, however, I realised that they are written from different points of view, Elizabeth's from the viewpoint of a counsellor and Tracie's from that of a clinician. I think it is valuable to have both points of view presented by two wise women (neither of them in any way blind) exploring different aspects of the elephant-in-the-room we call transgendered youth.

FTM the boy within by Hazel Edwards and Ryan Issue Eighty-Three

Kennedy, reviewed by Katherine Cummings

the needs of the young transgendered, we have will let that pass. been lucky enough to receive a review copy of a There are complications in Finn's relationships his friends and family.

Hazel Edwards is a well-known author, and she forerunner to Finn in the family FTM stakes. has collaborated brilliantly with a transgendered All in all, Finn's progress from F to M is steady the character of the protagonist, Finn.

some people." [emphasis mine].

The book starts with the teen rite of passage, passing the driver's licence test. nearly lost my approval again.

But despite being a brand of teenager of which I am (happily) ignorant, the kind which is against everything and glories in piercings, ragged clothes and strange makeup (strange, who says it's strange? get a grip, Kate, just because you're old...) Finn soon charmed me into feeling for his Like Julie Peters' Luna, Edwards and Kennedy's distress as his coming-out to his friends is seen new songs, celebrating his FTM status, light from the shadows of prejudice and confronting.

Luckily for Finn, he is eighteen, and many of the problems which confront transgenders who have not achieved the age of majority do not apply. Finn is able to make medical appointments for himself, without parental intervention, and through the Internet is able to make contact with FTM forums who provide suitable first contacts in the medical profession. There is a puzzling flashback statement which suggests that in whatever country Finn is growing up in, thirteen

Serendipitously, as we pursue our emphasis on is the age at which people become adult but I

new teen novel which deals with the progress of with his immediate family as his mother pushes a male to female teenager coping with growing him to be more feminine and a mysterious greatself-awareness and the pressure to come out to uncle Al emerges from photo albums and gradually is limned ever more firmly as a

friend of many years, Ryan Kennedy, who lives and relatively unfraught (would it were always in New Zealand. Ryan transitioned FTM at the so) and her family eventually support her in age of twenty-seven and his insights as an FTM, practical ways (providing funding) as well as a musician and an environmentalist strengthen emotional (big brother supportively offering to 'do up' Finn's ancient vehicle).

We are made aware of Finn's need to be male I have only one cavil from what is otherwise an very early in the book, where he is searching for entertaining and informative book for teenagers, information on the Internet, in order to satisfy whether they are themselves transgendered or his inner knowledge that he is not Skye, as he simply questioning. My cavil lies in not knowing was christened, and not female. He won my heart where Finn and his family live. At the outset I with the statement on page 2 that "FTM stands thought it might be Australia or New Zealand, for female-to-male. It's a subset of transgender, but then it was suggested that if Finn was which is different to transsexual, but only to prepared to wait he could have his surgery paid for by the State, which sounded like Britain. Certainly it is not the United States.

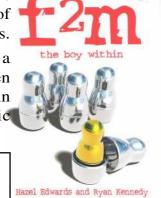
He is soon It doesn't really matter. Hazel and Ryan have blogging his friends with the good news that he not set out to write a manual on "How to ..." but is "now licensed to hoon" at which point he have included some valuable information and even more valuable attitudes. Finn and his best friend, the fiercely activist feminist lesbian Marla are easy to like and demonstrate strength, honesty and dedication to a goal, all admirable qualities in young people striving to be themselves in the face of ignorance and prejudice.

book will help many gender questioning young as a betrayal of feminism, and his formerly all- people to recognise and pursue the possibility girl punk band, the Chronic Cramps, find his that they can be themselves and emerge into the

> confusion which have messed with their sense of self for most of their lives.

> FTM the boy within is a valuable addition to teen literature and should be in every school and public library.

FTM the boy within, by Hazel Edwards and Ryan Kennedy. Ford St Publishing, Melbourne, 2010. ISBN 978187642901 \$21.95



Support Services Pages

(and some ads)

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?

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Central Coast Transgender Support

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This get-together is intended to help build a community, for us to get to know each other and find common ground. To keep it easy we are meeting at the Courthouse Hotel, Newtown. Come and have some food, a drink and a chat.

Friday, 11th june 6.30pm-8.30ish.More info email Xavier:

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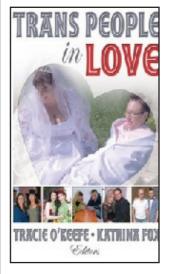
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- Jamision Green

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- Professor A.W. Steinbeck

An anthology of real-life stories by trans people of their experiences of being in love

Contributors include Sydney legend 'Carmen' and a foreword by Kate Bornstein & Barbara Carrellas

Published by Routledge, 2008 (In stock at The Bookshop and the Feminist Bookshop in Sydney, and at Hares & Hyenas in Melbourne).

Still available: Finding the Real Me: True Tales of Sex & Gender Diversity, eds: Tracie O'Keefe & Katrina Fox

TRAINING!

Training courses have been offered throughout 2007-09 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 in 2010?

Please contact Liz on 9569 2366 or email

casemanagement@gendercentre.org.au

*Barbecues*2010

Winter: 14 June

Spring: 26 September

Christmas: 12 December

All barbecues will be held at the Joseph Sergeant

Community Centre,

60 Prospect Street,

Erskineville

All commence at noon and finish at 4.00pm



Change of mailing list?

Mail to:

Polare - The Editor The Gender Centre Inc PO Box 266 Petersham NSW 2049 different **Gender**? different **Address**? different **Name**?

no more Polares 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.

News Items of Interest

THAILAND TO PLACE LIMITS ON GENDER AFFIRMATION SURGERY

New rules governing gender affirmationsurgery are being imposed in Thailand. There will be a requirement that candidates for reassignment must have lived in the target role for at least a year as medical authorities fear some patients are rushing into surgery without a full understanding of repercussions. All applicants must be over eighteen and must undergo mental evaluation with a psychiatrist.

Dr Sampandh Komrit, of the Thai Medical Council said he understood the motivation for reassignment but felt that the procedure needed stricter monitoring than it has received in the past.

CARDINAL SAYS THERE WILL BE NO ADMITTANCE TO HEAVEN FOR GAYS AND TRANSGENDERS

Cardinal Javier Lozano Barragan, who recently retired from the Vatican's Council for Pastoral Assistance to Health Care Workers but still holds influential positions on Catholic Church committees, has stated that homosexuality and transgender are against God's will and that homosexuals and transgenders will never enter the kingdom of heaven.

Father Federico Lombardo, a spokesperson for the Vatican, has, however rebuked Barragan, saying that the website on which the announcement was made should not be considered authoritative os uch delicate issues. He went on to saythat hoimosexuality is a disorder and that people with innate tendencies should be treated with respect.

An Italian gay rights group has commented "It's true we won't get into your heaven, which is a murky and unjust place.

IRS BACKS DOWN ON GRS

An American transwoman, Rhiannon O'Donnabhain, has sued the US Internal Revenue Service after the IRS rejected a deduction claim for US\$5,000 for medical expenses associated with gender reassignment amounting to around US\$25,000. The IRS had found the procedure was not medically necessary and rejected it as being cosmetic, not

therapeutic. On February 2, 2010 the U.S. Tax Court ruled that O'Donnabhain should be allowed to deduct the costs of treatment for her condition, including gender reassignment surgery and hormone therapy.

The legal group, Gay and Lesbian Advocates and Defenders, says the decision could potentially affect thousands of people in the United States.

The Tax Court voted 11-5 to support the deuction. The Gay and Lesbian Advocates and Defenders stated that between 1,600 and 2,000 people a year seek gender reassignment surgery in the United States.

OPERA SINGER ACCEPTED BY PRESTIGIOUS SCHOOL SECOND TIME AROUND

Emily de Salvo has been accepted by Bari's Tito Schipa Conservatory after changing his voice. Emily was originally named Stefano de Salvo, and was rejected on her first application because the conservatory board could not decide whether to place the singer among their male or female singers. Emily claims to be able to sing on both sides of the gender spectrum, from baritone to soprano.

"My voice is perfect for opera buffa like Donizetti or Rossini," she said and thanked her coach, Felle, for supporting her, and a well-known local transgendered pianist who accompanied her on the piano as she went through her second audition. The transgendered pianist, Luana Ricci, made national headlines when she was sacked as Bari Cathedral organist in 2009.

MADDISON HALL FREED BY PAROLE BOARD

Maddison Hall, originally Noel Crompton Hall, was jailed for life after murdering a hitchhiker in 1987. The sentence was reviewed and reduced to twenty-two years with a sixteen years and six months non-parole period.

In 2003 Hall underwent self-funded reassignment surgery in jail. She is to be released on parole from April 15, 2010 under strict conditions including surveillance through the use of an electronic bracelet

Transition and the Gender Order by Raewyn Connell

ne of the most dramatic proofs of the social character of gender is the fact that different societies recognise different gender categories. There are not only women and men; there may also be third genders, or variations on two that seem to multiply the gender categories in which people can live.

This question has intrigued anthropologists, and there is a large ethnographic literature about such groups as the *berdache*, the 'two-souled' people of indigenous cultures in south-western North America, and the *travesti* of Argentina and Brazil. These groups are all different from each other, and whether the idea of a 'third gender' makes sense for any of them is debated. Certainly all are vulnerable to change.

In contemporary Indonesia, for instance, 'banci' communities are distinct from a new sexual category, 'gay' men, who have emerged in more af?uent social contexts with stronger links to North American gay culture.

Dennis Altman, in an important survey of contemporary sexuality, *Global Sex*, points out that such changes are not necessarily a matter of substituting a 'Western' sexuality for a 'traditional' sexuality. Globalization involves an enormously complex interaction between sexual customs and gender regimes that are in any case diverse and divided. The result is a spectrum of sexual practices and categories, formed in contexts of cultural disruption and economic inequality.

The gender order of the global metropole, originating in western Europe, serves nowadays mainly as a model of gender dichotomy. The two genders are mostly assumed to be heterosexual, though the gender dichotomy is also maintained in the way Western culture deals with male-to-male or female-to-female sex.

But this gender order does have complications. According to the cultural historian Thomas Laqueur, before the eighteenth century, European culture did not have a dichotomous model of male and female bodies as natural opposites; rather, the female was seen as a kind of imperfect male. Even within a dichotomous gender symbolism, there are many opportunities

for violating the boundaries.

A well-known study Marjorie Garber, Vested *Interests*, finds an astonishing range of crossdressing practices, in theatre, the sex industry, film, religion, detective stories, music, and television... ranging



Raewyn Connell

from Marlene Dietrich's top hat to Boy George's dresses.

The carnival end of this spectrum can be understood as entertainment and relief. It is the serious end of the spectrum that concerns us more. People who somehow *live* across gender boundaries, who don't just dip in and out, have interested gender theorists as much as 'third gender' categories have interested anthropologists.

From the earliest days of scientific research on sexuality and gender, such people have appeared in the literature as a kind of intriguing monster. Richard von Krafft-Ebing, whose disdainful *Psychopathia Sexualis* was both a founding text of medico-legal sexology and a considerable under-the-counter best-seller, collected lurid cases of 'mental hermaphroditism'.

The genial Havelock Ellis devoted over a hundred pages of his *Studies in the Psychology* of *Sex* to 'Eonism', his name for thoroughgoing gender inversion (after a French aristocrat, the Chevalier d'Eon, who had at different times presented as a man and as a woman).

Even the great Sigmund Freud did it; his discussion of the case of Dr Schreber examines gender-change beliefs as part of an analysis of psychosis.

Transsexuals', as such people came to be called in the 1950s, still appeared to psychiatrists and sociologists as a kind of natural experiment exposing the mechanisms of the gender system. One American transsexual woman, known as Agnes, became the subject of a small academic industry in her own right.

The story of the creation of 'transsexualism' as a medical syndrome, the ambiguous role of doctors, and the controversy within the medical profession, is now well understood. Interested readers can find many of the key documents in Susan Stryker and Stephen Whittle's admirable *Transgender Studies Reader*. Here I will focus on three issues that have to do with the gender order.

The first is whether transsexual lives really are the natural experiment many researchers have taken them to be. Are West and Zimmerman, authors of a classic paper called 'Doing Gender', correct when they say: 'Agnes' case makes visible what culture has made invisible - the accomplishment of gender'?

The answer is yes, in the sense that Agnes did study the gender practices of the women around her, and put them into operation. Of course you don't have to be transsexual to make such a study; anthropologists and teenagers do it all the time. To the extent that one's gender position is a matter of how one is recognized in everyday interaction, transsexual lives do dramatize the process - since that recognition is likely to be problematic, needing to be worked at.

But the answer is no, in the stronger sense that West and Zimmerman mean 'accomplishment'. In their analysis, gender is made performatively, in the 'doing' that allows other people to assign one to a gender category. The whole point of Agnes' dilemma was that she was *already* a woman. She was a young woman with some serious problems, including the fact that she had a penis, and that was why she went to the doctors and asked for surgery. It was intolerable contradiction that had driven her to start making a bodily transition. (Which she did, famously, by finding an illicit source of oestrogen while still going through puberty.)

This leads immediately to the second question: how 'fluid' is gender? With the rise of performative theories of gender since the 1990s, there has been great interest in shifts, transitions, variations in gender and violations of norms. If normative gender is brought into being

performatively, i.e. by 'doing', then by changing the performative actions, we should be able to create non-normative gender.

Hence the many displays of transgender positions, attempts to tangle the masculine and the feminine, or even to explode right out of the gender system.

Hence the fascination in modern cultural studies with body modifications of various kinds. Are not transsexual women and men, reversing their original gender assignment, undertaking severe body changes, the most striking possible demonstration of the fluidity of gender?

Again, the answer is yes in one sense and no in another. Transsexual lives, and the professional and public debates that have swirled around them, are indeed a site of complexity in the gender order. The medical researchers spent a lot of time trying to classify transvestites, pseudotranssexuals, true transsexuals, homosexuals, effeminate men, masculine women, and subcategories of each; and none of these efforts ever produced a stable classification.

A well-informed (though anti-transition) psychiatrist, Colette Chiland, has commented that in this field there is not even a spectrum of gender positions. There is a 'magma', a molten mass like the core of a volcano.

But in another sense, the transsexual 'cases' that Chiland herself talks about are a dramatic proof of the *lack* of fluidity, the stability, indeed the *intransigence* of gender.

One of the most striking features of the autobiographies that transsexual women and men have written, and the life-history interviews they have given, is the repeated declaration that in a strong sense, they have always been like this. This is abundantly clear in the best social-scientific study of gender transition, Henry Rubin's *Self Made Men*.

The gender project, to use a theoretical term, is consistent over a lifetime - however 'wrong' in terms of conventional social embodiment it may be. Transsexual women too have struggled to find language adequate to explain the experience of contradictory embodiment, 'the female part of me locked up in a prison of flesh and blood', as Katherine Cummings put it in *Katherine's*

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Diary - and to express the 'radical need' to which this contradiction gives rise.

What does change, in the turns and twists in transsexual lives, is how one deals with this intractable problem, this impossible embodiment. Women and men undertaking gender transitions, if they are very lucky will find great support, but if they are not lucky will face ostracism, loss of jobs, and family hostility, as well as major dif?culties in sexual relations.

Many younger transsexual women have to support themselves by sex work. There is a certain clientele of straight men who are excited by transitioning bodies. But this does not mean they respect them. Roberta Perkins's book *Drag Scene King's Cross*, one of the great pioneering works of social science in this field, presents the voices of transsexual women in Sydney. Her interviewees include Naomi, a stripper who remarked:

I think men have a definite dislike for women in general, that's why women are raped and bashed, and strippers are up there to provide an outlet for this dislike by the yelling of profanities at them. Transsexuals are lower down than women according to men, and look how many men sexually abuse transsexuals.

This brings me to the third issue: politics. There have been in the past sharp differences over the significance of transsexual experience for gender politics, some commentators seeing gender conservatism and some seeing gender revolution. Both positions have been argued for the last forty years.

In a very strange development, 'transsexuals' have recently been re-defined as a de-gendered identity group whose human rights need to be claimed. Transsexual men and women are blended into one 'T' in an amazing new acronym LGBTTIQ, which lists 'sexual minorities' in need of rights protection (lesbian, gay, bisexual, transgender, transsexual, intersex, queer). Units about these groups have been added to gender studies programs in universities, and declarations about them are made in policy statements about discrimination.

In the United States especially, the term 'transgender community' came into use in the

1990s, as if a stable group had been formed which could follow the familiar American model of identity politics. Alternatively it could be regarded as the site of queerness, specifically of gender refusal. It was almost as if an attempt were being made to create a third-gender or a vanguard non-gender category in the heart of the city. I hope the people involved in this brave project do find, or make, a liveable space. It may be helpful to keep the term 'transgender' for this project, and the group that forms around it.

But that is rather different from the process of transition for which the term 'transsexual' was coined. The Canadian activist Viviane Namaste in *Invisible Lives* questions transgender discourse. She urges attention to the real-life experiences, subjectivities and struggles of transsexual men and women that are 'erased' by queer theory as well as by government agencies. Simply accessing health care and social services, as Namaste's research in Canada shows, can be very difficult for people making transitions.

Gender transition does have a deep connection with the revolutionary potential for change in human life. Therefore being a transsexual woman and a committed feminist is perfectly consistent. In the discussion above I use the term transsexual only as an adjective, not as a noun (except when quoting other views). The basic idea is a *process*, not a social group or a type of person.

But gender transition only happens through severe contradictions in personal life. These can be unbearable (there is a high rate of suicide among people in this situation). The contradictions are so strong that it commonly absorbs a great deal of energy simply to hold one's life together, at times of transition. The situation can be made even harder, as Namaste says, by denial of recognition from institutions or movements. Somewhere there are links between the potential and the reality; but we don't yet have them. The politics of transsexual lives are still an open issue.

Raewyn Connell is a sociologist who works at the University of Sydney. This is an edited extract from her recently released book *Gender: In World Perspective* (Polity Press, 2009).

Need a new bra? Can't afford one? Too shy to shop for one?

Liz has organised a closed-shop session for Gender Centre clientele at

Bras n' things but she needs at least twenty takers for it to be possible. The staff at Bras n'things (a seconds outlet but Liz says their quality is excellent and their prices extremely low e.g. \$40 items for \$5) are very sympathetic and will help you get a proper fitting.



If you are interested, let Liz know as soon as possible on 9569 2366 or email (casemanagement@gendercentre.org.au).

Given the numbers, Liz will organise transport from the GC to *Bras n' Things* who will open early just for you.

Please help the Editor by typing, keyboarding or emailing your *Polare* contributions. KC

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

Aude Chalon

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

aud mmsh@hotmail.com

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

PLEASE NOTE!

Appointments for counselling should be made directly with Gaye Stubbs, the Gender Centre Counsellor.

Phone 9569 2366 Monday- Thursday.

Do You Believe You Are Intersexed?

If so and you would like to know more and meet others like yourself then contact:

OII Australia [Organisation Intersexe Internationale] at PO Box 1553, Auburn, NSW, 1835 or at:

oiiaustralia@bigpond.com or visit our website at www.oiiaustralia.com



"Fellas, you remember Harvey? Harvey's got a new spin on gender..."

Syphilis, history, recognition and treatment

ou may have noticed a lot of advertising and education material around currently dealing with syphilis. That "it's back" and rates are "on the increase". The number of syphilis infections is certainly on the rise in Australia. Syphilis is a complex and fascinating infection that has been with humans for a very long time.

A brief history of syphilis

Syphilis was one of the world's first identified sexually transmitted infections. It is documented as far back as the 1400s. A variation of the treponema bacterium (the causative organism of syphilis) may have been around since prehistoric times. There are a number of theories as to where syphilis originated and how it was spread.

One of the most popular theories is that syphilis was brought back to Europe by Columbus' expeditions to the Americas. Syphilis existed in the Americas before European contact. It may have been a less contagious or virulent form but it was a disease to which the European had had no previous exposure and against which it had no immunity.

The first well-documented European outbreak of syphilis occurred in 1494 amongst the French troops at war in Naples. The French soldiers were infected by the Spanish mercenaries serving King Charles. Then, as war raged across Europe, syphilis travelled with the armies and their followers. The syphilis outbreak in Europe in the late 1400s was a true epidemic and many countries were affected.

When the signs or symptoms of syphilis were first recorded in 1495 it was described as pustules that often covered the body from head to knees. These would cause the flesh to rot and fall from people's faces. Death usually occurred within months of infection. By the mid-1500s the symptoms and progression of the infection was similar to the way it present today.

The name 'syphilis' was coined by the Italian physician and poet Girolamo Fracastoro in his poem, "Syphilis sive morbus gallicus" (Latin for "Syphilis or the French Disease").

Prior to this syphilis was known by many names. The Italians called it the 'French disease' and in the eighteenth century the Tahitians called it the 'British disease'. These names came about due to the disease being spread by sailors and soldiers in foreign countries spreading the infection to local sex

by Maggie Smith, R.N.

workers through unprotected sex. The local name for syphilis usually indicated which country these sailors or soldiers were from.

At first there was no cure or treatment for syphilis. Many types of treatments have existed over the centuries. A common treatment was the use of mercury, which continued in use until the 20th century. Mercury was administered in many ways (orally, by injection or vapourised and inhaled). Another treatment was arsenic. Unfortunately these treatments did not fully treat the syphilis and as we now know they could cause their own health problems through poisoning. It was not until the discovery of penicillin that syphilis could be treated fully and effectively. Penicillin is still the effective treatment for syphilis today.

Some famous people linked to syphilis

- Charles VIII of France, Adolf Hitler, Benito Mussolini, Friedrich Nietzsche, Vladimir Lenin and Henry VIII are all alleged to have suffered from syphilis.
- Al Capone contracted syphilis as a young man and was suffering confusion and disorientation from neurological syphilis by the time he was in Alcatraz.
- Artists Paul Gauguin and Eduardo Manet suffered from syphilis as did Russian author Leo Tolstoy.

The Tuskegee experiment

A disturbing piece of medical research took place from 1932 to 1972 in Tuskegee, Alabama. A group of around 400 poor, largely illiterate African American men with syphilis were knowingly and deliberately not treated so that researchers could observe the natural progression of untreated syphilis. The end results were obviously horrific and devastating for these men, along with the lifetime of illnesses and problems that occurred because of their syphilis infections.

Syphilis infection today

In Australia the number of diagnosed syphilis infections has been on the increase since the early 2000s. Certainly in the last five years there has been a sharp increase in the number of reported infections. The majority of syphilis infections occur in men who have sex with men. This may be attributed to a number of factors such as decreased use of condoms for sexual contact. Also syphilis can be transmitted through oral sex and not many people use condoms for oral sex.

What is syphilis?

Syphilis is an infection caused by a microscopic bacterium called Treponema Pallidum. Syphilis can be passed on through vaginal, anal and oral sex and from a mother to her child during pregnancy.

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 the hands or soles of the feet.

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

Syphilis in the early stages of infection is very



Syphilis bacterium

easily passed on. The infectious stage may last for up to two years. After two years a person is usually not 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.

What are the tests for syphilis?

Syphilis is tested with a blood test. If a person presents to a doctor or clinic with an ulcer they may take a swab as well. Swabs are now available in some centres that test for syphilis. As with any genital ulceration it is always a good idea for the clinician to exclude herpes infection, which is also tested for with a swab.

Rapid testing for syphilis.

Many countries use "rapid testing" for syphilis. Normally test results can take up to a week for the test to be available, whereas rapid testing results can be available within the hour. Rapid testing for syphilis has not been approved for clinical use in Australia. There is currently a process of having this test validated for use in Australia. This test was recently used at the Mardi Gras Fair Day and may be at a number

of sexual health clinics in Sydney. This is part of checking the accuracy and appropriateness of the test. It is foreseeable that rapid testing will become available in Australia.

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. If a person is allergic to penicillin another antibiotic may be used. If there are already complications from having untreted syphilis for a long time a person may need further tests and different treatment.

If a person is diagnosed with a syphilis it is also important to contact current and past sexual contacts to notify them they may have been exposed. If a person is uncomfortable with doing this the clinician can assist. It is very important 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 syphilis does not give a person immunity from 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 rubbing of another persons genitals.

If you have been diagnosed with syphilis you should not have sex until after treatment has been shown to be successful. It is important to tell any sexual partner(s) you had during the three to six months before you were diagnosed so they can be tested and treated, and so they do not reinfect you or infect anyone else.

If you have any concerns or questions about syphilis, please contact your doctor or local sexual health clinic.

For future articles on sexual health topics, please contact *Polare*. I am happy to address any sexual health topics.

The information in this article does not represent the views of Polare or the Gender Centre. This article is intended as advice only. Any question should be directed to your health care worker or sexual health clinic.

Q&A by KC

From time to time I receive questions about transgender rights by mail, email or telephone, which I answer, usually after consulting the authorities, since matters tend to be fluid these days and rules and regulations change as administrations come and go. Because some of the questions may be of interest to the community at large I have decided to start a Question and Answer column. The original questioner will not be identified but I hope the answers will be useful. The column may not be in every issue. This will depend on how many questions I receive, but if you have a question, do not hesitate to ask it, or if you have special knowledge of one of the topics, please feel free to comment.

Q. I a married transwoman in my thirties and my husband and I would like to adopt a child. Is this legal?

A. The chief legal officer of the Adoption Authority says that if you are legally married there is no impediment to adoption. Parents giving up their children for adoption have the right to specify certain restrictions on the adopting parents (they may specify that their child goes to a home practising a given religion, for instance) and they would be allowed access to your personal details for this reason. There are very few children available for adoption in NSW and you might want to consider going overseas to adopt or you might want to think about long-term fostering, which usually means until the child is eighteen. Long-term fostering usually involves children removed from parents for drug or violence issues.

Q. I understand new Australian passports will have a computer chip embedded in them with information about the passport holder. What information will be coded into the chip? Will it have information about criminal records, for instance?

A. The Passport Office says that the only information being coded into the passport chip at present is the information which appears on the page carrying your photograph, i.e Type of passport, Issuing State, Document number, Name of holder, Nationality, Date of birth, Sex, Place of birth, Date of issue, Date of expiry,

Authority (i.e. place of issue) and Signature of the holder.

Note, however, that this is the information to be coded into the chip "at present". It is possible that this may change in the future.

Q. How do I have an 'X' placed on my passport in place of the 'F' or 'M' in the Sex field?

A. The Passport Office replied as follows:

"The International Civil Aviation Organisation (ICAO) allows 'X' (unspecified) as an alternative to showing 'M' of 'F' in a passport. Autralia bases its passport on the ICAO standards so that the Australian passport is consistent with other ICAO member passports. The APO can accept 'X' in the sex field if an applicant's cardinal document (Australian birth certificate) shows an 'X'. The policy is that the personal particulars (name, sex, date and place of birth) recorded against an Australian's birth (or citizenship) records must be the same as those shown in a passport."

The reply goes on to say that the APO acknowledges that not all applicants can amend their birth certificates (or citizenship records). The APO has developed exception policies for those sex and gender diverse applicants who cannot have their birth certificate amended because of serious health issues or because of State law.

It seems, therefore, that if one can obtain an amended birth certificate or Recognised Details Certificate from the Registry of Births, Deaths and Marriages, showing an 'X' in the Sex field, after submitting medical advice that the person concerned is of indeterminate sex, then the Australian Passport Office will supply a passport with an 'X' in the Sex field and has already "issued a very limited number of passports" of this type.

It does appear that an amended birth certificate may be difficult to obtain in NSW, judging by the recent experience of norrie-mAy-welby. Perhaps norrie's appeal to the Australian Human Rights Commission will sort matters out and, if so, the clarification will be recorded in Polare. In the meantime I would suggest commencing medical procedures to obtain written support for your 'not specified' status.

QUEENSLAND GENDER CENTRE

The Queensland Gender Centre is run solely by a transsexual 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.

The location of the shelter is kept confidential to protect the tenants. The accommodation is in an upmarket suburb on Brisbane;s 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.

If you want more information or are interested in assisting with the project, please telephone, write or email the Queensland Gender Centre (see p.40 for contact details).

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.

•••••••••

The Gender Centre has joined Twitter!!!

For those who don't know, Twitter is an Internet text-based social networking system a bit like SMS. Messages are restricted to 140 characters but if you want to keep up to date daily (or more frequently) with what is going on at the Gender Centre, you can do so on Twitter.

Go to the Internet, and type in www.twitter.com/thegendercentre to see the latest Twitter news. Note that this is one-way information. You can't respond or ask questions on Twitter. If you need further information you will need to phone (02) 9569 2366

or email reception@gendercentre.org.au or resources@gendercentre.org.au.

LEGAL PROBLEMS?

The Inner City Legal Centre will be providing advice sessions for clients of the Gender Centre.

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

Dates for 2010 have not been set but sessions will be held monthly. You can phone or email and ask to be given an appointment as early as possible. See below...

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



NEEDLE EXCHANGE



7 Bent Street, PETERSHAM

(02) 9569 2366 10am-5.30pm Monday to Friday A confidential free service for people with gender issues (Ask for the

Sharps Containers

Pill Filters Condoms Spoons Water Fit Packs Swabs Dams

Outreach Worker)

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
5.30 - 8pm
Yummy food - New
friends
- Free -

Friends and Family are welcome

7 Bent Street, Petersham

⊀ FTM Australia

2010

FTM Australia is a membership-based network which has offered 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.

This Australia-wide network is coordinated by Craig Andrews, with the input of members and guided by an ad-hoc Advisory Panel of health and legal specialists. We aim to inform the public of the issues surrounding transsexualism in men (female-to-male).

Newsletter

Our newsletter - Torque is published four times a year for the benefit of members, their families and service providers. Torque is available as a pdf document which is emailed to you or available on our website. All the information about Torque is on the website at www.ftmaustralia.org/resources/torque.html

OzGuys Discussion List

Our e-mail discussion list is called OzGuys.

OzGuys - is open to FTM Australia members living in Australia and New Zealand.

Goals of the discussion list include:

- To encourage friendships and information sharing amongst members
- To empower members and their families in understanding transsexualism
- To encourage members to adopt positive images of being men in society and achieve anything and everything they dream of.

For more information please visit http://groups.yahoo.com/group/ozguys/
To find out more or read our resources please visit our website at www.ftmaustralia.org

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

Jin Xing, Role Model for Millions by Katherine Cummings

In Xing is one of the most remarkable and admirable women living today. Born physically male in 1967 she showed an early love of dance and a determination to make it her life, going on a hunger strike at the age of nine in order to be allowed to attend dance school. After much conflict with her family she was allowed to join the People's Liberation Army Dance Company where she soon distinguished herself.

She suffered for her art in the army, often failing the rigorous martial exercises and being forced to write 'confessions' of failure. She now says "I became a master of the art of writing the selfcritique." After completing basic training her

Jin Xing

soon came to official notice and at the age of seventeen Jin Xing won her first national dance award.

talent as a dancer

Showing a talent for her adopted profession, Jin Xing rose to the rank of colonel in the PLR and left China to study dance in the United States, where she

discovered a new love in modern dance.

She earned a standing ovation at her first major performance in new York. She studied in New York for four years, then moved to Europe and taught dance in Rome from 1991 to 1993.

She returned to China at the age of twnety-six and at last admitted to herself that she was transgendered, undergoing gender affirmation surgery in 1996. She may have been the first officially sanctioned male-to-female gender affirmation in China. Certainly she was one of the first. She suffered a paralysed leg following surgery but recovered and moved to Shanghai to train dance students. She married a German and at the age of thirty-three adopted her first son. She now lives in Shanghai with her husband and three adopted children.

Since 2000 she has owned her own modern dance company in Shanghai and she is outspoken in her views of the Chinese authorities.

In 2010 Jin Xing's dance company took part in the Adelaide Festival, performing "Shanghai Beauty, described as a "ground-breaking dance performance. The



Jin Xing in "Carmina Burana"

Australian Broadcasting Commission said that the ensemble she leads possesses "tightly fluid choreography [that] displays the hybrid possibilities of marrying cool western forms with elements of traditional Chinese elegance."

Jin Xing is recognised as the most significant choreographer in China and in 1996 set up the Beijing Modern Dance Ensemble and in 2006 organised the first independent dance festival in China, the Shanghai Dance Festival.

It is a further tribute to this amazing woman that she has been so open about her transgender status, creating a model for those about her and allowing her life and her work to be discussed calmly by interviewers and lovers of the dance, without avoiding any of the inevitable questions concerning her life journey.

China has now adopted a reformed policy towards transgender, allowing those approved for gender affirmation to have medical treatment and full revision of their documentation and

gender status. According to the Encyclopedia of Modern China approximately 1,000 gender surgeries had been performed up to 2006, with about 400,000 on the waiting list.

The Gender Centre is proud to present Jin Xing's image on the cover of this issue, and expresses admiration for her courage, her outspoken dedication to freedom and her amazing artistic achievements.



by Katherine Cummings

he English language is an amazing phenomenon. It has an immense vocabulary which is still growing and the subtleties and nuances with which it can be used convey shades of meaning difficult, if not impossible, to replicate in most other tongues.

English is also, like a great ocean liner, difficult to divert from its course, and many attempts to change it or reform it have failed.

New words are constantly created in English, as in most languages, but few of these become permanently embedded. Occasionally an individual can claim to have added a word to our vocabulary, but only Spike Milligan's "lurgy" and Gloria Steinem's "Ms" spring to mind. Oh yes, and Virginia Prince's "transgenderism".

For those of you who have not come across Virginia, she was a strong-minded, combative woman who was born a man, created a North American sorority (of men) called FPE (for Full Personality Expression) and had a considerable influence on other national cross-dressing organisations such as the Australian Seahorse Society. "Cross-dressing?" I hear you murmur. Yes, FPE was set up for heterosexual transvestites and anyone who a) admitted to being gay or b) suggested that he might one day want to live fully as female, was immediately excommunicated.

When Virginia coined the word "transgenderism" she was living full-time as a woman but had no intention of ever allowing anyone near her male parts with surgical instruments. Although she gave up the reins of FPE (which is now Tri-S, or Society for the Second Self) she was still living as a woman well into her nineties without having her body physically altered by surgery or drugs. She died in May 2009.

I know a lot of this because I was a member of FPE when I was studying in Canada (1962-63) and when I later worked in the United States (1968-1973). I was a member of Seahorse when I returned to Australia. Does this mean I was a transvestite rather than a transgender (or, if you prefer, a transsexual).

No it doesn't. I always had the dream of being female, fully and forever, but like a lot of us I tried to put this away, because there were people in my family I could not deliberately hurt, even though this meant I had to sublimate my feelings and put off my transition until circumstances

made suicide the only other viable course of action.

The point I am making is that to people observing my actions for more than twenty years the only sensible conclusion they could have reached would have been that I was



Katherine Cummings

probably a "heterosexual transvestite". But note that when I found FPE I had nobody else I could talk to, nobody who might begin to understand my secret needs. And I wasn't the only transgender in this situation, accepting any port in a storm. I had, maybe, ten or twelve close friends in FPE when I was living in the United States. Of that group no fewer than five (including me) went forward to gender affirmation surgery. This group included my flat-mate from my time in Canada, an athletic young man who was quite vehement in asserting the 'fact' that he only cross-dressed for fun and would never think of transition. I can on;y assume there were a lot of transgenders hiding in the transvestite community.

Human beings are almost infinitely complex. To try and build boxes to put them in, or design a cookie cutter which they are intended to fit, are futile exercises resulting from an anal desire for order which the universe perversely refuses to accommodate. Even if you find a box which fits a person today, we grow and change (and sometimes shrink and change) and yesterday's box is tomorrow's kindling.

So how can we define ourselves and others? The short answer is that we can't. The marginally longer answer is that we shouldn't even try.

The idea that we must build barriers to protect those who are "transsexed" from every other form of sex/gender/variance is unreasonable at best and discriminatory at worst.

Nobody owns a word, not even me, so I can't stop people from saying that transsexuals are limited to those who can transition and accept gender affirmation. I can't stop people from saying that transgender is an umbrella term for anyone and everyone who has any kind of gender issue, from cross-dressing to pangender (no hierarchy implied or intended) and that as a

result transgenders muddy the waters for 'real' transsexuals and might result in the 'real transgenders' being denied their right to transition and to receive free medical assistance. But let us leave the question of word ownership for a moment and look at what words mean and what words do.

Ideally words should provide some clue to their meaning by their form and their application. The word sex is one of the most evocative of words in our, or any, language. The act of mating is basic to all species, even if it takes many variant forms, and Richard Dawkins suggested in his book *The Selfish Gene* that the most basic urge in all species is to ensure the continuation of their kind even if this involves the sacrifice of the individual. Thanks to Freud and his pseudo-science most people think sex is the most important aspect of our personalities, and every other important aspect of our lives is in some way linked to the ability, desire or need to have sexual relations of one kind or another.

I differ, but I recognise that I am in a minority (rather like the people who refused to believe that the Sun revolved around the Earth).

To most people sex is a central aspect of life and other aspects are peripheral. But the truth is that when a 'transsexual' commences the affirmation process, the first sacrifice made to the altar of conformity is the ability to procreate, which is the key aspect of sex, even if this key aspect has been subordinated to various forms of pleasure in which orgasm is the goal and procreation is secondary and often preferably avoided.

What does this mean for the trans world? First and foremost it means that when people think of 'transsexuality' they relate it to other 'sexualities' and they concentrate on the presence, absence or modification of external and internal sex organs to the exclusion of all other aspects of sex. And they think of 'the sex act'.

But sex involves a lot more than 'sex'. Sex permeates every cell in our bodies. Our chromosomes and genes are sex markers. Our brains, according to many researchers, are sexed. Our sex is pervasive and not limited to a set of physical qualities which can be quickly and easily identified by removing the subject's clothing or taking a chromosomal smear.

[Note: I am aware of mosaics, chimerae and other variations on the standard binary XX, XY

model and the view that there are many variations on the binary system but I do not have the space here to deal with more than the simple male/female dichotomy. Sorry. Maybe another time.]

In addition to sex there is the question of gender and here we are on firmer ground. Gender is a social construct, some would say a grammatical one, but it has only male, female and neuter to define the gender parameters. Is neuter a gender? Grammatically it is, as it attracts its own pronoun, 'it'. Or we could say that neuter is a gender in the same sense that black is a colour. The absence of something is also a significant quality (the "strange behaviour of the dog in the night").

Complications arise in that gender is a set of sometimes variable characteristics which decide whether a being is he, she or it. And gender itself has a number of varieties. There is assigned gender, which is how a newly born is classified by others, usually on the basis of external genitalia.

There is social gender, which is what one is perceived as being from one's looks, behaviour, clothing and social niche. There is innate gender, which is the gender one knows oneself to be, whether or not this knowledge conforms to one's assigned gender or social gender. And there is affirmed gender, which is the gender one asserts and lives by, and which conforms to innate rather than assigned gender and which becomes, in best-case scenarios, one's social gender.

How does gender differ from sex? In the majority of the population it doesn't. Infants are assigned a sex at birth. If it turns out to be congruent with their innate gender they live happily or unhappily ever after.

But in those cases where assigned gender and innate gender are incongruent, there is a clear and compassionate need for adjustment. Some members of the medical professions have attempted to change a person's mind to suit her/his body, using everything from the modern-day barbarisms of aversion therapy and convulsive shock treatment, to psychotherapy. Success has been minimal, usually breaking the subject rather than fixing it.

As a consequence it seems only reasonable (than which there is no higher accolade) to change the body to suit the mind. But changing the body may mean destroying healthy tissue

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through surgery and rearranging other aspects through hormone therapy. Surely that cannot be ethical? Dr Nicholas Tonti-Filippini, an apologist for the Vatican who claims to be an independent ethical consultant, says that destroying healthy tissue is wrong.

In 1952, however, Pope Pius XII delivered the following statement:

"[The patient] is bound by the immanent purposes fixed by nature....Because he is the beneficiary, and not the proprietor, he does not possess unlimited power to allow acts of destruction or of mutilation of anatomic or functional character. But in virtue of the principle of totality, of his right to employ the services of the organism as a whole, he can give individual parts to destruction or mutilation when and to the extent that it is necessary for the good of his being as a whole, to assure its existence or to avoid, and naturally to repair, grave and lasting damage which could otherwise neither be avoided nor repaired.¹

That sounds as if the Pope recommends whatever it takes, hormonally or surgically, to

affirm innate gender, doesn't it? Sadly, but predictably, he was speaking in favour of lobotomy, not gender affirmation. But surely the principle is the same? Note, incidentally, that I have no respect for the opinion of any Pope by virtue of his office, but Dr Tonti-Filippini should.

" ... sex is too much entangled in the public mind with sexual intercourse..."

I am not so naive as to imagine that apologists for His Holiness would not be able to find justification for a policy that says you can damage a person's brain but you mustn't touch his/her genitalia. Having gone through an annulment I am aware from first-hand experience that if you lower your eyes to kick a field goal the Holy See will have moved the goalposts before your foot even touches the ball.

Getting back to the use of language ... should we, or should we not, call the surgical and chemical procedures related to transition "sexchange"? Rachael thinks we should, I think we shouldn't.

Have you read Rachael's article in issue 82 ("Young people with transsexualism; the contemporary Australian experience")? If you haven't, you should stop reading mine and go and read hers. It is an excellent, thoughtful, informative piece and it doesn't matter if Rachael and I differ on some points. You should always consider as many points of view as possible (even those of Tonti-Filippini and his ilk) before you make up your mind about these

complex and vital matters. Never accept a statement as truth without testing it to the best of your ability.

I don't think we should call it a 'sex change', or a 'sex affirmation', because 'sex' is too much entangled in the public mind with sexual intercourse, as noted above. And reinforcing the madness of psychiatry there is the prurient use in advertising of suggestively 'sexy' materials in irrelevant contexts (the bikini girl lounging on a new model car, for instance) so that sex becomes a mjor marketing strategy.

Let me provide a simple example. On page 15 of this issue there is a cartoon showing three little boys and a little girl. The caption reads "Hey, fellas, remember Harvey? Harvey's got a new spin on gender...". If the caption had read

"Harvey's got a new spin on sex..." I believe the reader's mindset and assumptions about the "new spin" would be very different.

If we call it a 'sex change' we imply that sex attributes are being converted from those of

one sex to those of the other (don't distract me by telling there are thirty-two sexes and nineteen genders, because I won't listen. Two (or three if you count neuter) genders are plenty for me at this point). The truth is that one of the first stages of gender affirmation is the neutering of sex by the removal of sex organs, internal and external.

I do not deny that this may change in the future. Already there is research underway to permit full sexual function (including procreation) for people who transit from one sex/gender to the other. But it's not here now and it won't be here tomorrow. The processes will require years of research and persuasion (or defiant circumvention) of medical ethicists before the first humans are allowed into the program. Look at the glacial speed with which the medical profession has proceeded in the use of stem cells. As the Wikipedia entry says,

"there still exists a great deal of social and scientific uncertainty surrounding stem cell research, which could possibly be overcome through public debate and future research, and further education of the public."

And this minimal progress has taken more than forty years from the first identification of stem cells in the 1960s. When true sex-change happens and becomes the norm for those who

^{1.} Allocution to the First International Congress of Histopathology, September 13, 1952, in The Human Body, n.359.

need it, I will be the first to hail the breakthrough and change my vocabulary, but for the time being I can only reiterate my view that what we are changing is gender, and transition means transitioning from an assigned gender role to an affirmed one that was formerly innate. The surgical changes we make are cosmetic (nothing wrong with that), and enable the transitioned transgender to live a fuller and more appropriate life.

Rachael is a pragmatist and a lawyer. She is concerned with what can be achieved now, preferably with financial and medical assistance given as a right to people who are "experiencing transsexualism". As she points out, if young transgenders who want medical intervention, hormonal and surgical, are lumped in with the whole 'transgender' (i.e. anyone with gender issues) community, then public servants and politicians are going to look at those in the community who claim they have no need for medical intervention, those who are prepared to cross-dress without any intention of transition and those who claim to be multigendered, non-gendered, pangendered, androgyne or whatever, and decide it is all too hard, or that those children who claim to need surgical intervention should be persuaded to postpone the decision and/or fund it themselves.

As a result Rachael believes there will be no clear, assisted path for the young transgender, who knows at an early age that she or he is transgendered and needs expedited treatment before puberty destroys or damages much of his/her potential to be that person.

And, from a pragmatic point of view, Rachael is right.

From my ideological perspective, however, it seems wrong to leave anyone behind. As I have mentioned before, humans are infinitely variable and can have a multitude of reasons for not having declared themselves transgender as children.

These reasons include ignorance of the possibilities, social pressure, timidity, religion, unwillingness to hurt loved ones or any of a multitude of other factors, or indeed a combination of several factors at once.

But having delayed their self definition as a result of any of these reasons in no way invalidates their right to declare themselves in adulthood, and be accepted in their true gender role.. People who grow up in these circumstance are no less entitled to whatever social, financial, legal and medical help they can get in order to fit into the societal niche they want and need than those who are fortunate enough to declare themselves early and find themselves in a sympathetic environment.

The cruel, inaccurate and feeble-minded view that there are 'primary' and 'secondary' transsexuals should be struck from the books along with, for the time being at least, the misleading and confusing word 'transsexual'.

To suggest that transgenders who have longed for transition from earliest memory but have failed to act on their needs are less committed than those who do so in childhood is facile but false. To believe that a person can not be 'tipped over the edge' from being a cross-dresser or androgyne into needing full gender transition flies in the face of experience.

Nobody should find him/herself denied a basic need simply because the circumstances of his/her life journey have forced him/her to use different way-stations and detours. I agree that this will make it harder for bureaucrats and politicians to understand that within one community there can be many variations demanding different solutions, but difficulty should never be an excuse for inaction. And there is a solution.

The solution? Education.

We need to educate the public, the medical profession, the lawyers, the politicians and the bureaucrats, so that they begin to understand that we have different needs but identical rights, and these rights include the right to selfappropriate determination. to medical assistance and to live our lives in the gender we know is ours. This education should be both formal, starting at pre-school level and continuing through to university, and informal, through articles, television documentaries and fiction series, talk-back radio, plays, films and every other medium we can employ to disseminate the truth and to challenge the lies, stereotypes, generalisations and half-truths which are used to ridicule us, deny us employment, and assign us to the most demeaning levels of society.

Much has already been achieved by our activists and our supporters, here and overseas, but much remains to be done and can only be done if we attain a certain degree of unanimity in our aims ... and our terminology.

Issue Eighty-Three Your Online Life Could Leave You Stuck Forever by Paige Breen

Tips to ensure your online life doesn't keep you from earning the living you need.

Work is a central part of life. It provides us with an identity, a sense of worth, and the ability to participate in the world. Work also provides a much-needed income and, I don't know if you are aware of this, transition is frighteningly expensive with little support from the public sector.

In this article I aim to provide some insight into the subtle mechanics of transgender discrimination, how physical and social. transition have to be combined with careful management of your online persona, and some tips on how to reduce your difficulties and maximise the odds of finding or maintaining a successful career as a trangendered person.

Introduction

Being transgendered is challenging enough but in our increasingly connected world many transgenders engage in behaviour with will ultimately limit their future success in relationships, social connections and career. Being transgendered without an income, a defined place in society and needing to rely on social welfare or resort to illegal activities is incredibly disempowering and should be avoided if possible.

If you are (or think you may ultimately be) in the process of transitioning I hope to provide some insight on how to manage your online presence (and history) in a positive way, and hopefully prevent you being blindsided at a later date.

Why am I qualified to write on this? I transitioned six years ago and have been involved in the Web and online world since the early '80s. I can speak from both experience and observation. I do have to be discreet in writing this because, for the most part, I have achieved an acceptable degree of 'stealth' in my professional life, and wish to preserve this hardwon anonymity. I am, however, heavily involved in the digital media, social networking, and employment screening insustries and believe I have helpful insights into these areas.

In spite of my knowledge I made a lot of mistakes going through my second puberty, some of which have caused me enormous harm, harm I would like to prevent for others in future, epecially as 'online' becomes almost as important as 'real life'.

The 'safety' of the online world.

The Internet and the rise of online social networks offers a two-edged sword. Online provides a 'safe' way to interact with the world while transition proceeds and one's sense of self reforms and consolidates, but it can alo leave tracks and history that could trip you up once transition is complete and you are trying to build a new life in your affirmed gender. It is important to remember that little is ever truly 'deleted' from the Internet and youthful exuberance (regardless of your calendar years) can create unwelcome challenges.

While society has come a long way in becoming more tolerant and understanding, many early-stage transitioners suffer appalling rejection, leaving them isolated and vulnerable. I know this was my situation and I wish someone with more experience had taken me aside advised me. Instead, despite my education and experience, I made a series of mistakes while reaching out from which I still fear repercussions as I forge a new life.

In the early days of transition many people report a sense of euphoria, where the incredibly tough decision to move forward has been made and the oppressions of a lifetime of denial are lifted. In spite of this euphoria there is also (usually) a high degree of loneliness which results from negative reactions from family, friends, colleagues etc. Loneliness and fear are powerful feelings. When faced with these feelings, which provoke a visceral and primitive response, there are two reactions commonly expressed.

Withdrawal and isolation (Flight) - I can't handle this right now so I will retreat and live an isolated life, or

Participation and insinuation (Fight) - I am free at last so let's grab the flight of life with both hands and see where we land.

It isn't unusual for people to go through various phases in how they deal with the world, and there can be wild oscillations until an acceptable level of equilibrium with life is achieved. The Flight response is borne of fear and, while it can be incredibly lonely, it is actually quite safe from a public perspective. The Fight reponse, driven by euphoria, is energising and liberating - with great potential for good but carries the danger that in the euphoric response caution witll be thrown to the wind and you will create online footprints that are fossilised on the Internet, footprints that could be discovered at a later date and used against you.

Who do you want to be?

There is a psychological term known as 'Cognitive Dissonance' which is defined as:

The feeling of uncomfortable tension which comes from holding two conflicting thoughts in the mind at the same time.

Dissonance increases with:

- The importance of the subject to us
- How strongly the dissonant thoughts conflict
- Our inability to rationalise and explain away conflict.

Gender and gender roles are extremely important to most people, after all, what is the first question asked when a baby is born?

Our journey is one of affirming our identity, who we know we really are, despite evidence of external biology and the weight of expectations. Transition is the physical and social process of completing the journey from biological imperative to a psychological imperative. Who we are in our heads is more important than who we have always been assumed to be. Completing transition, with its schedule of chemical, surgical and social adaptations, is a process of resolving internal cognitive dissonance and making best efforts to reduce the feelings of cognitive dissonance in those with whom we interact.

As society and technology develop, our online peronalities will be almost as important as how we present physically. With Australia becoming increasingly a knowledge and service-based economy it is vitally important, in order to maintain your ability to remain a valid and contributing member of society, that you ensure you have not manufactured unbeatable dissonances in your online persona.

Google yourself?

Have you ever typed your name into Google? Try it some time ... you might be surprised at what appears.

Google is a very powerful company, with technology that has indexed a significant percentage of all the pages that are available on the 'open web'. Google has an indexing tool (or 'bot' or 'spider') that looks for information, hyperlinks and websites and creates an index to the data it finds. When you do a Google search you don't search the Internet directly, you search the index that Google has built. This indes is immensely powerful but it can also be a trap and expose online footprints you would prefer to have remained hidden.

Google also maintains search rankings that give greater weight to pages that have a lot of external pages referring to them in the form of hyperlinks and url links. In other words, the busier you are online, the more times your information appears, the more indexed hits you will have on Google and the higher you will appear on search rankings.

Online social profile sites, pre-Facebook.

If you look at a site such as URNOTALONE (an example only of a contact site for transgenders, there are many others) a lot of that site has been indexed by Google. You may have joined the site before transition, using your female name (assuming you are mtf). If you then transition and the online pseudonym you adopted becomes your everyday name you will have left a fottprint that will probably have been indexed and archived by Google. In the early days of transition you may have been a lot more open about your status and perhaps been exploring your identity in what you thought of as a safe forum, making comments or creating a profile that you might later consider less than professional.

You are now through transition and looking for work. You see a job that really appeals and send in your application. During the application review stage someone Googles your name (trust me, this is happening a lot now) only for them

to stumble on your URNOTALONE profile on what is clearly a transgender-related site. Google has 'outed' you! This means your application may now be assessed on terms other than your skills and experience, potentially denying you a job you would excel at. Discrimination is harder to maintain on a formal basis (such as at an interview) especially in the light of anti-discrimination laws, but if you are rejected at the shortlisting stage (where it is only your resume that is being assessed) you will be ignorant of the reason for rejection and will simply receive a polite; thanks but no thanks' email.

There are a multitude of sites that are indexed. They can include chat forums, newsgroups, social media sites and a range of sites that you would automatically assume might remain 'private'. The more times you appear online and the more active you are online, the greater risk you face of being electronically outed, to the detriment of your working life and possibly other important social/professional connections.

Ad-serving technology and the Symantic Web

Currently there are moves to create the next evolution of online search through the creation of the Symantic Web. This next step in online searching will create indexes that don't just rank by volume and relevance of search terms but will also use sophisticated inferential search techniques that rank by meaning and context. This will make targeted searching much more comprehensive and will make it harder to hide anything online.

The Internet runs on advertising revenue and advertising only works effectively if marketing messages are delivered efficiently to the identified target market. Thi means that the sophistication of the tools being employed to develop browser profiles (that's a picture of you as a consumer of online resources) is continually evolving. In spite of having the best possible anti-virus, anti-phishing, anti-spyware software on your computer, every time you visit a site something, somewhere, is making a note of your IP address, what site you came from, how long you spent on the site, and what site you went to after your visit. Without all the security tools in

place your online life is open to examination at the most complex levels. With this information you can appreciate how important it is to be careful when you are online.

Facebook and modern social media sites

With the rise and rise of social media sites you run a much greater risk of exposure and what I term "discrimination by mental association", in spite of your best efforts to disappear into the woodwork. Without wanting to get all metaphysical, there is a truth to the heomopathic maxim of 'like attracts like' and people make assumptions about you not only by how your present yourself, but also by the company you keep. This means that you can unintentionally expose yourself because people make assumptions about the volume amd nature of the people you have chosen to associate with online.

If you have a Facebook page you probably have it in your own name (I am assuming you have completed transition). Facebook's terms of use have specific rules concerning spoofing identity, or the use of pseudonyms, which means that you will most likely have your Facebook identity helping you march up the Google page rankings. With Facebook you may be extremely discreet about the information you post, and you may well have tweaked the privacy settings to their most secure settings. You may have been discreet but are all your friends as careful as you are?

If you have ever looked closely at the ads that appear on Facebook you may have noticed that they appear to be quite relevant to you. There is no magic at play here, the ad-serving technology at work on Facebook (for example) targets the ads you see based on the information on your profile, and on the information contained in the profiles of those you have chosen as friends.

There is a highly sophisticated mesh of contectual assumptions being woven and any of these could stimulate enough doubt (or bigotry) in the mind of an interested searcher for them to eliminate you from consideration, or make things difficult for you, purely on the basis if this "discrimination by mental association."

I had the experience that I had a number of friends who listed themselves as lesbians, or had links to lesbian groups, and suddenly I started seeing a lot of ads asking if I wanted to meet up with 'hot lesbians in Sydney'. This wasn't because my personal preferences were set for this but the ad-serving mesh determined that in the context of my network of contacts this type of ad might be appropriate to my personal situation. In this case it was simply software making an assumption but suppose I was in the job market and a bigoted employer Googled me, found my Facebook page and made an assumption based on the company I keep online?

Linked-in and professional networking sites

Linked-in (other similar sites such as Plaxo, Link-me and even online job boards such as Seek, MyCareer, Career One) can be very powerful resources and provide profitable access to a range of professional networks. Speaking specifically of Linked-in I for one have found it amost impossible to have the old profiles deleted.

This is usually because Linked-in requires you to use the email address you nominated when you created the profile as your username. If you have changed employers, but used your work email to create the account, or even if you remain at your current employer post-transition but your email address has changed, you have effectively fossilised your old profile online forever. Linked-in is highly automated and even contacting their administrators (if you can handle the thought of potentially outing yourself to some faceless call-centre operator) will most likely fail to result in a successful purge.

Creating your Linked-in profile may create complication for you as your career history now provides future employers with a way to identify and contact potential referees that you have not formally submitted. This sort of practice is not entirely ethical but it does occur and some companies even employ overseas agents to conduct deep background checks to bypass local legislation. Old referees may not know you by your present name and you run the risk of either exposing your history or being seen to have lied on your resume if your former employers do not know you in your revised persona.

Summary and five tips for online safety

I realise this may all sound massively paranoid. I make no apology for this. Online it is always wise to assume that people are watching. The technology (and money) involved in ensuring ads are delivered in a cost-effective manner will mean that a level of paranoia is abolutely essential in keeping aspects of your life confidential. Google, Facebook and the Internet in general may be 'free' but it far from being safe or private.

I could speak about specific sites or search engines but this article would become a book and would probably send you to sleep. What I will do is make suggestions that you can use to assist you in maintaining your safety online.

- 1. If you are indulging yourself online (fantasy, role-play or fetish) make sure you do so under a suitably anonymised pseudonym.
- 2. Never provide information online unless you are able to satisfy yourself that the recipient's privacy policy and online security policy are adequate to protect yor information.
- 3. Make best efforts to limit any online situations where your former identity and current identity are co-located (this increases the likelihood of symantic exposure).
- 4. I would encourage you to maintain two social media profiles, one under your realname and one using a pseudonym. If you have friends who wish to connect to you online, make sure that any who could provide enough information to 'out' you in context are only accepted as friends with your pseudonym. While this may seem cold, or paranoid, true friends will understand.
- 5. Protect your online profile by making sure you check your presence on Google regularly. This way you won't be blindsided and may have the opportunity to apply to have the compromising information changed. This will not, however, remove archived or cached searches, so prevention is better than cure.

If you truly care about your online reputation I would encourage your to be paranoid, make extensive use of unlinked pseudonyms and always be very careful.. It is not just those who are transgendered. There are actually companies being established that employ 'online

reputation managers'. These are specialists who can manage the hygiene and profile of your online footsteps. This sort of business is only created when there is a need. As the world becomes smaller and more interconnected these businesses are likely to boom.

Farewell, Paige, You Will Be Missed

Paige Breen, the author of the preceding article, was larger than life, literally and in every other good way. Standing well over six feet tall, she radiated self-confidence. She was a woman of varied life experiences; businesswoman, rally driver and unarmed combat instructor, to name only three.

Although some of her family refused to accept her, she was much liked and admired by work colleagues and by friends, both within and without the trans-community.

I counted Paige as a close friend although we met only occasionally, due partly to her business commitments and partly to the fact that I live 50k outside Sydney. But we found time to meet from time to time for a meal or a relaxed day together. The last time I saw her we had lunched in Glebe on the day of the Gay and Lesbian Fair in Victoria Park. Over lunch she regaled me with her latest triumphs and disasters, explaining how she lost half a million dollars in the World Financial Downturn, only to make it up, and more, in the latter half of 2009. Then she drove me to Central Station in her brand new Mini convertible.

There are many Paige stories and I would welcome some for the next issue of *Polare*. I remember her telling me how one night she was attacked by two men in the street. "I did the girlie thing and panicked," she said, laughing. "Then something went 'click' in my head and I reverted to my former self as a military unarmed combat instructor." Both attackers finished up in the gutter, one with a broken arm.

She had called off lunch at my home a few weeks ago and I was trying to contact her to reschedule the visit. I sent emails. I left voice mail. Then I heard from one of her business colleagues that Paige had passed on from an overdose of sleeping pills on the night of Sunday, April 4. Sleep well, Paige, you will be missed.

Katherine Cummings

1st International Sex and/ or Gender Diversity Day Still Fierce

No-labels picnic or tea party in your city or town

A celebration of sex and gender diverse folks! A space to build and create networks! An open and supportive space!

Monday April 26

For people who are intersex, transexed, transsexual, transgendered, trans, cross-dressers, androgynous, genderqueer, without sex and gender identity, sex and gender fluid, neuter etc, and their families, friends, and supporters. Gather with others and get folks to join in...

Supported by Still Fierce: Sydney Sex & Gender Diverse Collective, Sex and Gender Education (SAGE), Gender Centre, Community Action Against Homophobia (CAAH), Australian Health and Education Centre, Organisation Intersex International (Australia).

Sydney event: No-labels picnic, 11am-4pm, Camperdown Park, Church St, Newtown.

There will be music, workshops, activity spaces and plenty of people to talk to and hang out with. Bring whatever you feel like contributing such as food, drink, musical instruments or just yourself!

More info and updates on the Event page on Facebook at:

http://www.facebook.com/home.php?#!/event.php?eid=109764959051393&ref=ts

More News Items Of Interest

WA FTMS CAN RETAIN FEMALE SEX ORGANS

In a landmark ruling the Western Australia Court of Appeal will define the extent of medical intervention required for females to have their gender reassigned to male. This followed the oveturning by the State Administrative Tribunal of a ruling by the Gender Reassignment Board of WA.

It was stated by lawyer Steven Penglis, representing the two men, that it is not necessary for internal reproductive organs to be removed as the men in question had been rendered infertile by their gender affirmation treatment. The men had undergone double mastectomies and testosterone therapy which reulted in clitoral enlargement.

Lawyer George Tannin, for the State, argued that the men should not be legally recognised as males while "retaining the capacity to have children". He said that neither could be considered permanently infertile.

One of the FTM subjects of the case said outside the court that "The significance of this case is to get clarity about exactly how the law should be applied.

FAMILY COURT ALLOWS 14-YEAR OLD TO COMMENCE PUBERTY BLOCKERS

The Family Court has allowed a fourteen-year-old MTF, "Bernadette", to access hormpnal puberty blockers. "Bernadette" showed evidence of female behaviour when she was three and her application for pubert-blocking drugs is supported by her parents. The original permission was given in 2007 but the results were not published until March 2010 although permission to commence treatment was given from January 2008. The judge accepted that a person's sexual identity was determined by 'brain sex', not their genitalia. A consulting psychiatrist said that "Bernadette" might self-harm if not given the treatment she needed.

Another judge of the Family Court ruled early in March that cases such as "Bernadette's" will need to be approved through the Family Court rather than being within the responsibility of medical authorities and the child's parents or legal guardians. This goes against the recommendations of the Australian Human Rights Commission, which recommends that parents should be allowed to decide on gender drug treatments in conjunction with advice from psychiatric professionals.

Justice David Collier said "Medical knowledge has not improved enough for the court to consider the condition normal, and a parent;s responsibility."

"Until there is a clear-cut line of authority within the medical profession, it would be difficult for parents to reach an informed conclusion in every case."

"I am unable to say that the medical evidence presented to me has demonstrated conclusively the cause of transsexualism so as to enable me to find that it is a normally occurring factor of human development."

It was stated in relation to the judge's comments that parents had to spend up to \$20,000 in the courts to seek permission for treatment which could prevent suicide and make future treatment less invasive, expensive, embarrassing and physically painful.

LIL' ROMEO'S MURDERER JAILED FOR LIFE

Tara Gilbert pleaded guilty to the murder of drag king Kristin Dale Pye, known by the stage-name Lil' Romeo.



Pye was attacked in the Everything Adult store in Brisbane in August 2008. Gilbert used a hunting knife to stab Pye multiple times, but Pye fought back bravely, overpowered him and took his knife. He produced a second knife and killed Pye with blows to the neck, chest and face.

Gilbert is said to have been raised by a cult known as the Family and Children of God. He handed himself in after confessing his crime to a woman he met at a Brisbane brothel.

Lil' Romeo was very popular with the drag king and entertainment community.



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.



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 call on 0423.125.860 and our website is: 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

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"

READ THIS ... IT'S IMPORTANT!!!

Medicare provides rebates on medical procedures using schedules which provide item numbers for all medical procedures. Most of these are presumably gender neutral ... a broken leg is a broken leg, whether it is part of a woman or a man. But some item numbers are gender related and a man cannot claim on an item number reserved for women and vice versa.

Of course this disadvantages transgendered people because a person defined as a man when he starts affirmation surgery cannot claim for a neo-vagina because that is reserved for the women's schedule. Similarly a person defined by Medicare as a woman cannot claim on male related items. This usually means that transgenders have been able in the past to claim only for the first part of their affirmation surgery, the part that removes the parts of their anatomy related to their assigned gender, leaving them to pay for all the procedures which relate to creating new parts appropriate to their innate gender.

A recent enquiry to Medicare has given new hope for those who would like to claim more fully on their surgical procedures of gender affirmation. We were told, by the Medicare authorities that transgenders should claim for the first batch of procedures and then

have their birth certificates amended by the Registry at Births, Deaths and Marriages, after which they can claim on the second batch of procedures, on the basis of their newly recognised sex. It should also be noted that if you have private health insurance, this cuts out when Medicare cuts out. In other words, if you are denied a rebate on a procedure because your Medicare records show you as belonging to the 'wrong' sex, then your private health cover will cut out at the same point. But if you have your birth certificate amended and claim the remainder of your rebate through the Medicare Tribunal, you should also be able to claim the ret of your private health insurance component.

This development applies mainly to those who are about to have surgery in Australia, but if you have recently had surgery and have had your birth certificate amended, you may still be able to go to the Medicare Tribunal and make your claim.

If any of you do approach the Tribunal for this purpose, please let us know the outcome. It almost seems to be too good to be true!

Katherine Cummings

Goods and Services:



May I Have Your Attention Please!

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

359 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

FREE HOME TUTORING in reading and writing for adults (nights preferred)

(nights preferred) Call Margot 9335 2536 or Mim 9335 2350

@ Petersham TAFE

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.

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.

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 - 9569 2366.

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.

For partners, families and friends

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

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

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

Counselling Service

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-ILLAWARRA

47 Kenny Street, Wollongong PO Box 1073, Wollongong, NSW, 2500

Tel: (02) 4226.1163 Fax: (02) 4226.9838 www.acon.org.au

4 Hayward Street

ACON - MID-NORTH COAST

Port Macquarie NSW 2444 Tel: (02) 6584 0943 Fax: (02) 6583 3810

mnc@acon.org.au POB 1329, Port Macquarie, 2444

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 011web www.bgf.org.au; email bgf@bgf.org.au

BREASTSCREEN

Phone 132050

CATHOLIC CARE

PO Box 3127, Bankstown Square, Bankstown, NSW, 2200

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

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

Directory Assistance

Mid North Coast

Outreach project: by appointment

Tel: 6584.0943 Fax: 6583.3810

4 Hayward Street, 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. For information contact FTMAustralia .PO Box 488, Glebe, NSW, 2037 www.ftmaustralia.org

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

mail@ftmaustralia.org

INNER CITYLEGAL 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 and 6.30 pm office@mccsydney.org http://www.mccsydney.org.au/

MOUNT DRUITT SEXUAL HEALTH CLINIC

Provides free, confidential and respectful sexual health information, assessment, treatment and counselling.
Ph: (02) 9881 1206
Mon 9.00am-4.00pm
Wed 9.00am-1.00pm
Fri 9.00am-1.00pm

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 AIDSASSOCIATION

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 HEALTH CLINIC

provides free, confidential and respectful sexual health information, assessment,

treatment and counselling. Level 1, 162 Marsden (cnr. George St)

Parramatta 2150 Ph: (02) 9843 3124

Mon, Wed, Fri 9.00am-4.00pm

Tue 9.00am-1.00pm Fri 9.00pm-1.00pm

PLWHA (PEOPLE LIVING WITH HIV/AIDS)

PO Box 831, Darlinghurst NSW

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

www.seanorsesoc.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 Health Counsellor, Narooma Community Health Centre, Marine Drive

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

Narooma, NSW 2546

(SWOP) SEX WORKERS OUTREACH TRANSGENDER SUPPORT PROJECT

Provides confidential services for people working in the NSW sex industry

69 Abercrombie Street Chippendale NSW PO Box 1354

Strawberry Hills NSW 2012 Tel: (02) 9319.4866 Fax: (02) 9310.4262 infoswop@acon.org.au www.swop.org.au/

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 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

SYDNEY WEST HIV/HEP C PREVENTION SERVICE

Needle and syringe program 162 Marsden St, Parramatta, NSW 2150

Ph: (02) 9843 3229 Fax: (02) 9893 7103

TOWN & COUNTRY CENTRE

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 **TRANS MASH**

For younger Trans people (25 and under). Newcastle area.Contact Judi Butler j.butler@acon.org.au

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 - 4.30pm177 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
Email: polar@homemail.com.au

AIDSACTION COUNCILOF ACT

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 plwha.act@aidsaction.org.au

SWOP ACT (SEX WORKER OUTREACH PROJECT)

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

Westlund House, 16 Gordon Street, Acton,, ACT, 2601 GPO Box 229, Canberra, ACT, 2601

Tel: (02) 6247 3443 Fax: (02) 6257 2855

E-mail:

aacswop@aidsaction.org.au

Directory Assistance

Northern Territory

NORTHERN TERRITORY AIDS&HEPATITISCOUNCIL

Incorporating Services and Support For HIV Positive and Hepatitis Positive people.

- Needle Syringe Program
- Sex Worker Outreach
 Project
- Peer Project GLBTI Community Education, Social & Emotional Support
- ATSI Project Indigenous Gay Men & Sister Girls
- Community Education
 Tel: (08) 8941 1711
 Freecall: 1800 880 899
 www.ntahc.org.au
 info@ntahc.org.au

Queensland

(ATSAQ)AUSTRALIAN TRANSGENDERIST SUPPORTASSOC. OF QLD.

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 8am-6pm Email: trans.atsa@bigpond.com www.atsaq.com

PO Box 212, New Farm, Qld, 4005

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 QLD

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 Old

Flinders Street, Townsville, Qld, 4871

PO Box 2410, Townsville, Qld, 4810 Ph: 1800 118 021

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

Directory Assistance

TRANSBRIDGE

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-SEXUALHEALTH

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

93 Brisbane Street, Northbridge, Perth, WA 6000

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 are 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-O

Meets at the Freedom Centre (93 Brisbane Street,, Northbridge Perth 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 FOUNDATIONFOR ANDROGYNOUSSTUDIES (IFAS)

See International listings on p.39

MAGENTA

Magenta offers support, education and information to transgender, 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 YOUTHSERVICE (PICYS)

PO Box 1062, West Leederville, WA, 6901

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Ph: (08) 9338 2792
Fax: (08) 9388 2793
Email: picys@westnet.com.au
PICYS provide medium to longterm 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

TRANSCOMMUNITY WA

professionals.

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

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

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 services sector and community members about the impact of homophobia and heterosexism on these young people, their families and friends.

WELLBEING CENTRE OF

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 BISEXUAL NETWORK

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.

AIS SUPPORT 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 www.vicnet.net.au/~aissg

AUSTRALIAN WOMAN NETWORK

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 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

TRUE COLOURS DIVERSITY

True Colours represents young people who experience transsexualism and a network of their parents, families and supporters throughout Australia. Whether you are a parent, a family member, a carer, a friend or a young person experiencing the diversity in sexual formation called transsexualism -you have come to a friendly place. True Colours offers mutual support and advocacy for young people with transsexualism and their families. We also offer a parents/ caregivers email discussion group.

Web: <u>www.truecolours.org.au</u>
Email: <u>mail@truecolours.org.au</u>

Directory Assistance

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) 0800 AGENDER president@agender.org.nz www.agender.org.nz

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.

FTMINTERNATIONAL

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 68236, Newton, 1145, New Zealand Phone: (64) (09) 0800 TGHELP (0800.84.4357) (24 hrs) www.genderbridge.org

GENDER TRUST (THE)

info@genderbridge.org

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

IKHLAS

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

ITANZ INTERSEXTRUST AOTEAROA OF NEW ZEALAND

Fax: 6.03.2425.59

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 ZEAL AND

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

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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

The Gender Centre runs a Youth Support Group(16-25 years old)

The next group will start when we have eight people interested in participating and will run for eight weeks

> Call the Gender Centre 9569 2366

All gender questioning trans and gender queer young people are welcome to participate

Are You Young and Transgendered? Do You Write Creatively? Interestingly?

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

The Gender Centre Administration 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 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 October-December 2009 issue of *Polare*. Please send your contribution to: The Editor, *Polare*, PO Box 266, Petersham, NSW, 2049 by 8 March 2010

This One's For The Boys

Once a month the Gender Centre will host a "boys only" drop-in on a FRIDAY night.

The next will be on Friday 1 May 2010.

Come along, have a meal, meet new friends and listen to our guest speakers. Watch Twitter for updates.

