# Polone

#### **MAGAZINE OF THE NEW SOUTH WALES GENDER CENTRE**



Rose Jackson (1935-2011)

### Edition 89 October-December 2011

### Some the Gender Centre Service Magazine

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

### the Gender Centre

The place to go for confidential, free services for people with gender issues.



Cover: Rose Jackson, one of the first and most distinguished female impersonators on the Sydney scene. She was a lead performer at Capriccios and the Purple Onion, and is said to have designed more than 70,000 stunning stage costumes. Rose lived full-time as a woman from the 1960s and is said to have inspired Tony Sheldon's interpretation of 'Bernadette' in the New York version of "Priscilla, Queen of the Desert". See p.8 for obituary.

### October-December 2011

#### CONTRIBUTORS

katherine cummings, phinn borg, anthony carlino, jake blight, matt kailey, nicola sloane, marika, james waites, greg macdougall, gwendolyn ann smith

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#### Editor: Katherine Cummings THE FINE PRINT

Polare resources@gendercentre.org.au PO Box 266, Petersham NSW 2049 Phone: (02) 9569 2366 Fax: (02) 9569 1176 Email: reception@gendercentre.org.au Website: www.gendercentre.org.au

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#### DEADLINE

for submissions to the next edition of Polare is the eighth of December 2011

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### The Manager's Column

#### **Remembrance 2011**

The Transgender Day of Remembrance for 2011 is approaching. On November 20 each year we remember the transgenders who have died, often as the result of extreme violence and prejudice, in the preceding year, and we also think of those who have died in every year before that, further back than records can show.

Because the 20th this year is a Sunday, there will be a gathering in the NSW Parliament House on November 18 (Friday) to remember our dead and to talk about possible ways to prevent the ongoing sacrifice of people who have not chosen to belong to a group hated by bigots and attacked by those who think they have a right to destroy those whom they consider to be their inferiors, or to be perverted, immoral and iniquitous.

The program for the event has not yet been set, but it will probably consist of views expressed by distinguished guests, some of whom will already have demonstrated their willingness to support transgenders and make their way smooth in society. The past few years have seen a growing level of understanding and support from the Police Force, from the City Council and from many employers and Government Departments. The way for transgenders is still difficult and their are serious shortfalls in emplyment opportunity and access to educationt, but society is a cumbersome machine, and setting a new course for it will not be easy, nor will it be quick.

Because the capacity of the room allocated to us in Parliament House is limited, we would like those who wish to attend to let us know in writing (PO Box 266, Petersham, 2049) or by telephone (9569 2366), so that an invitation can be sent out to you. First come, first served.

I would like part of the proceedings to consist of relevant reminiscences from those gathered; reminiscences of friends who died violently, or memories of the speaker's own close encounters with the threat of death. Again, for lack of time rather than space, these reminiscences will need to be brief. But please come prepared to share your memories with everyone else. There are few of us who have not lost close friends, sometimes to third-party violence or, distressingly often, by their own hand. A survey carried out for the Attorney-General some years ago showed that every respondent to our questionnaire had lost at least one friend to suicide, and some had lost as many as ten.

Let us remember them in November, and always, and work together to bring the numbers of victims down, year by year, through education of the general public, and engagement with those elements of society that are in a position to make a difference.

#### Phinn

#### The Gender Centre Library

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

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

Books may be borrowed for three weeks.

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

#### WOULD YOU LIKE TO HEAR BY EMAIL?

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### Editorial - Katherine Cummings



few days ago I was emailed by a student who had been charged with defending the proposition in debate that transgenders perpetuate stereotypical views of women, the implication being that this is a bad thing and that it should be brought home to

transgenders that they should cease and desist.

The student was asking for arguments to support her case but in truth I could not help her as I consider the proposition to be foolish at best and malicious at worst. The malicious end of the spectrum belongs to Janice Raymond, who put forward the view in her book *The Transsexual Empire, the making of the she-male* that M2F transgenders, or as she clumsily describes them, "male-to-constructed-females" are part of a patriarchal conspiracy to invade female territory and usurp it by occupation.

I advised the student to consult Raymond, since it was her brief to support the Raymond thesis in her debate, and intellectual argument should never be suppressed, but rather tested against facts and logic, no matter how weird the basic premise is thought to be. I also advised her to look at some of the arguments that are to be found on the Internetagainst Raymond's views. The question did, however, set me thinking about stereotypes and whether M2F transgenders who take pleasure in "feminine" items such as high heels, revealing dresses, makeup and jewellery are preventing women from moving towards more rational and practical cultural habits.

The answer, of course, is that they are not. The numbers are too small and transgenders seldom set out to impose their fashion desires on the public at large.

There are two aspects to the adoption of feminine sterotypes by transgenders.

The first is that transgenders have usually been socialised into believing that such fashions are, even if not typical of all women, at least typical of those women who are labelled by society as high achievers, usually in some public milieu such as fashion, high society or the performing arts. In their "dress up" period before transition they are likely to adopt styles which they believe to be emulation of the trend-setters and are therefore striking and sometimes over the top. Think of these emerging transgenders as teenagers, who often go to the extremes of fashion (or right off the rails into fad fashions such as the Goth look). Delighting in exaggerated examples of "femininity" and they often need some time to calm down and adopt a more practical and mature form of dress. This phenomenon is generally known as "teenager in fast forward".

It is, however, ridiculous to suggest that transgenders, newly transitioned and revelling in what may be seen as a slightly bizarre reaction to emancipation, are going to have an effect on the general population of women, first because the general population of women are also likely to be following the fashion trends of the trend-setters and will hardly look to the dress codes of a tiny minority of the population as an endorsement of feminine stereotypes, and a mode to be adopted.

The other factor is that transgenders, of course, are striving (after the first rush of blood to the head) to blend in with society, and therefore tend to be followers rather than leaders in fashion trends.

As I said in a recent column in the *Sydney Star Observer*, if those feminists who eschew pretty frocks, jewellery and makeup and prefer boiler suits and army boots were to prevail in the world of high fashion and have their preferences generally adopted, transgenders would be more likely to be among the first recruits, since the new look would now be what would label them as female, and reversion to the "old femininity" would simply label them as out of date.

Of course there are no stereotypes that can be categorically and permanently linked to one gender or the other. Both genders have worn trousers (or as Sam Johnson defined them "bifurcated nethergarments") and they have worn skirts, both genders have adopted jewellery and cosmetics, wigs and high heels. Western society is going through a phase where

the relatively drab styles and colours for men follow the trend set by Beau Brummel in the nineteenth century, but this will change in time and there have been relatively recent rushes of blood to the head, resulting in some men temporarily adopting platform shoes, long hair, jewellery and psychedelic colours.

It is also interesting to note that the "feminine" aspects of male attire persist in the more ceremonial areas of modern life so that courtiers and court officials still don wigs, stockings, jewels and obsolete weapons, as marks of office or tradition. Are they showing their feminine side or is it just a sign of the progression of change?

Of course the most telling point against Raymond's nonsense is the near-invisibility of transgenders in society. Many strive to be invisible and "go stealth", others are defiant and deliberately adopt parodic versions of femininity, but these can hardly be expected to influence society as a whole, any more than Dame Edna does. Some are visible because they are not practised enough or they are early in transition and have fallen into the "teenager in fast forward" situation.

Raymond, however, as stated above, thinks we are part of a conspiracy created by the patriarchy to take over female space. Give me a break! Most of us spend a considerable amount of our energy trying to fly under the radar of the patriarchy, which has been instrumental in some of the worst excesses of violence and bigotry against transgenders. Think Gwen Araujo. The teenagers who violated and murdered Araujo were not patriarchs, but they had learned their attitudes from their parents, from men in general and from popular fiction and films.

Even if every transgender in the land were known to be transgendered, the numbers would still be minuscule. The highest figure I have seen for transgender prevalence is that of Lynn Conway whose 2007 paper brought the lower boundary to one in 500.\*

With such a low prevalence, and such a general unwillingness to stand out from the crowd, how could Raymond's theory be granted credence for an instant? \* "On the Calculation of the Prevalence of Transsexualism" by Femke Olyslager and Lynn Conway. Paper presented at the WPATH 20th International Symposium, Chicago, Illinois, September 5-8, 2007.

Moving on from the absurd to the sublime (well, maybe not that far, but it's a positive move) a recent press release from Kevin Rudd, the Foreign Minister, and Robert McClelland, the Federal Attorney General, stated that in future Australian transgenders will be given passports in their gender of choice, provided that choice is backed by a medical statement. The gender can be listed as M (male), F (female) or X (indeterminate).

The British are also bringing in a sensible reform. British passports will no longer specify gender. Interestingly, this is a return to an older policy. The last British passport I was issued had no space for gender, although its successor (issued by the European Union) returned to the policy of needing to know my gender. Over the years there has been a gradual diminution in the number of items needed for a passport description. My first passports included spaces for hair and eye colour, height and "distinguishing marks" (birthmarks, tattoos, etc). None of these now appear, and the demand for a statement about gender will not be missed. There are easier ways to decide whether the person standing in front of you matches his/her passport than by delving into the murky and personal area of gender.

Common sense prevails. How good that is!

Britain is also considering the omission of the "Mother" and "Father" spaces in passports. In deference to same sex couples with children they will use "Parent 1" and "Parent 2".

Returning to the negative, the Vatican has issued a confidential document stating that "sexchange" procedures do not change a person's gender in the eyes of the Roman Catholic church.

Originally issued in 2000, the paper was given wider publication in 2002 and came to light following a letter issued to American bishops by Bishop Wilton D. Gregory of Belleville, Illinois in 2011. This stated that parish baptismal records were not to be altered. "The altered condition

Polare page 6 October-December 2011 of a member of the faithful does not change one's canonical condition, which is male or female as determined at birth," he said.

It follows that a priest who has gender reassignment MTF does not necessarily need to relinquish his priesthood and a woman who has gender reasignment FTM cannot become a priest. The Vatican document also states that gender reassignment can be morally acceptable if a medical probability exists that it will cure the patient's internal turmoil. It added that "recent medical evidence suggested that in a majority of cases the procedure increases the likelihood of depression and psychic disturbance."

This flies in the face of all the research I have read. Where there is post-operative depression this usually results from the way in which the reassigned individual is treated by friends, family and society.

The Vatican paper also concludes that those who have been reassigned are unsuitable candidates for priesthood and religious life because of mental instability. Nor should they be allowed to marry, either because they would be marrying someone of the same sex in the eyes of the Church, or because his or her mental state casts doubt on her/his ability to make and uphold his/ her marriage vows.

And to cast doubt is, apparently, the same as to judge and condemn. I believe there are many transgenders who love, honour and cherish their spouses with all their hearts, minds and souls. Prove me wrong.

The level of bigoted ignorance in the Vatican statement is hard to believe. It is, however, matched by the comments made by the general public after the passport announcement by Rudd and McClelland. The most uninformed ran something like this: "There is XX and there is XY. That's all. Live with it!"

I don't despair. But sometimes I come close.



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### Farewell, Rose Jackson by James Waites

hormone therapy.

Jewel Box, where not only were there drag

performances but some of the boys were taking

By the late 1960s, Barry was living fully as a

woman in Paddington. Making costumes for

One of the Sydney gay scene's most loved theatre artists died peacefully early on Thursday morning (July 21, 2011) at St Vincent's Hospice.

Perhaps best known as the star performer at Capriccios, the first gay club to open in Oxford

St in the early 1970s, Rose's career as both costumier and a entertainer boasted many highlights.

Born Barry Jackson on September 11 1935 at Paddington Women's Hospital, Rose said she knew "from the minute she was born" that a male body was not right for her.

An athletic young man, Barry loved to swim and for a short period was even a Bondi lifesaver. But it was 'too butch'. Soon, men were gay introducing Barry to a secret Sydney world of parties, fine dining and fashion; and he began going out in

Rose Jackson, actress, performer, designer and classy lady

Sydney's leading theatre company, the Old Tote, by day, he performed at the Purple Onion club at night. It is the Purple Onion — on the site of the current Kens at Kensington ---- that can claim to have pushed Rose's costume design skills to the fore, as well as introducing regular her to performing. Rose and the other cast members lived above the premises what in she described as "a drag kibbutz".

In 1969. Dawn O'Donnell opened Capriccios, to offer drinks, a dancefloor,

public as a woman. He took the name Rose, after Marilyn Monroe's character in Niagara, Rose Loomis.

By the age of 18, Barry was working as a window dresser at David Jones. His design talent was noticed and he soon accepted a position as display manager for Curzons, where he coordinated around 300 fashion parades as well as designing and supervising the seasonal window displays. At twenty-four, Barry went to Europe and, after time in London and Paris, worked as a display manager for a leading chain of department stores in Sweden.

By the time Barry returned to Sydney five years later, in 1964, his home city had changed. Walking home one night to his apartment in Kings Cross, he discovered a club called the and a fully costumed drag show. It wasn't long before Rose was the undisputed star, with a persona that highlighted an elegant femininity.

In 1983 David Mitchell and David Penfold created a show for Rose based on her life and career called Rose's Turn. It played at Kinselas and was a huge success. She then opened her own club, Rose's, on Goulburn St.

There Rose performed with stars including Judi Connelli and Tony Sheldon. Sheldon has said his interpretation of Bernadette in Priscilla, Queen of the Desert, currently playing in New York, is based on Rose Jackson.

Obituary by James Waites, originally printed in the Sydney Morning Herald, reprinted with kind permission

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### Gay and Lesbian Counselling

### **Telephone Counselling:**

□ General line daily 5.30pm to 9.30pm Sydney Metro 8594 9596 Other areas of NSW 1800 184 527

#### Lesbian line Monday 5.30pm to 9.30pm Sydney Metro 8594 9595

Other areas of NSW 1800 144 527

### GLCS also offers faceto-face support groups including:

- Talking it out Men's Discussion Group
- Women's Coming Out Group
- SMART Recovery Program
- And other groups to be announced soon.

#### For further information please contact GLCS Administration on:

(02) 8594 9500
Or via the website:
Website: *www.glcsnsw.org.au*Or by mail:
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#### Hi, Everyone,

I am a transgender, and a grad. student in experimental psychology at Towson University (Maryland, USA). I am conducting research on thoughts about gender identity for my Master's thesis and am recruiting people for an online survey. To participate you must be over 18 and identify as transgender.

The survey takes 15-20 minutes to complete and asks you to rate how you think about certain things. Please go to the link below and feel free to pass this information along to any friends who may be interested. The study has been approved by Towson University's Institution Review Baord for the protection of human participants.

www.surveymonkey.com/s/ GenderIdentity Survey

### Issue Eighty-Nine Transgender Inmates by Jake Blight

**P**eople who cross the traditional boundaries of sex and gender pose a challenge for correctional systems. Transgender persons are those for whom sex (physical characteristics) and gender (self- and social-identity) are not always congruent. While there are currently only a small number of transgender inmates in the Australian prison system, these particular inmates are at substantially high risk of assault and/or self-harm. For this reason, it is important that there are appropriate policies and procedures in place for the management of transgender inmates.

Adam Graycar, Director, Australian Institute of Criminology

#### **Defining Transgender**

The *New South Wales Anti-Discrimination Act* defines a transgender person as someone who:

• identifies as a member of the opposite sex by living, or seeking to live, as a member of the opposite sex; or

• has identified as a member of the opposite sex by living as a member of that sex; or

• being of indeterminate sex, identifies as a member of a particular sex by living as a member of that sex, and includes a person being thought of as a transgender person, whether the person is, or was, in fact a transgender person.

Transgender people may be male to female (MtF) or female to male (FtM). The definition in the anti-discrimination legislation also covers inter-sexed people; that is, those people who may have both male and female characteristics from birth.

A similar definition to that outlined above appears in the Australian Capital Territory, Northern Territory, and South Australia antidiscrimination legislation, as well as the Commonwealth Sexuality Discrimination Bill. Note that these definitions are largely based on self-identification, not medical inter-vention. A trans-gender person falls within this defini-tion whether or not they have had any "reassignment surgery".

In some jurisdictions, birth certificate legislation provides for a new birth certificate to be issued to a transgender person after "reassignment surgery". Statutory definitions of "reassignment surgery" are, however, not currently consistent. In some jurisdictions, any surgical procedure that involves the reproductive organs, that has been carried out

Polare page 10 October-December 2011 for the purpose of assisting the person to be considered a member of the opposite sex, is c o n s i d e r e d "reassignment surgery".

Hysterectomy or castration could be enough to satisfy this test. The South Australian Act considers reassign-



**Jake Blight** 

ment procedure to involve "genitals and other sexual characteristics". Where a birth certificate is amended, a person is to be treated as a member of the reassigned sex for the purposes of the law of that State/Territory, and others with similar legislation.

Any definition of transgender for the purpose of correctional policy needs to be broad enough to cover individuals protected by the antidiscrimination legislation, as well as those who have had their birth certificates amended.

#### **Occurrence of Transgender Persons**

It is notoriously difficult to ascertain the number of transgender people in the population.

Overseas studies have estimated a broad range of figures. Bodlund (1996) cites studies indicating 1 for every 12,000– 37,000 people for MtF, and 1 for every 30,000–150,000 for FtM. Bourke (1994) cites the figures as 1 for every 40,000 MtF and 1 for every 100,000 FtM. These ratios may vary between countries. However, Beemer (1996) estimates the incidence of MtF and FtM to be approximately equal.

It appears that far fewer FtM individuals come to the attention of medical and legal professionals, making estimates of this group extremely unreliable. This is believed by some to be because FtM individuals are able to "pass" more easily in a social context as men, which leads to fewer social and psychological difficulties (Hage 1995). Perkins' (1994) study on transgender lifestyles and HIV/ AIDS risk suggested that there was a total of about 5,000 transgender people in Australia, with up to half living in New South Wales.

#### **Identified Issues for Corrective Services**

It has been suggested that social stigmatisation associated with transgender status often leads to an inability to hold regular employment. Social stigma is also associated with low selfesteem and drug use.

These factors combined with the need to selffund expensive hormones and surgery contribute to the relatively high involvement in crime, particularly prostitution, of transgender people (Perkins 1994).

It is already known that transgender people are at higher than average risk for self-harm and sexual assault in the general population (McGovern 1995; Koranyi 1983).

This information, combined with the literature available on transgender inmates, suggests that such persons are at an extremely high risk for self-harm and sexual assault while in custody (Irving 1998). There has been at least one recent case of a death in custody involving a transgender person.

There are several inter-related issues that need to be addressed in correctional policy with regard to transgender inmates.

**1. Choice of Institution**. How to determine where particular transgender inmates will be housed within the correctional system, specifically regarding relevant laws and safety concerns during induction and transport. This varies from State to State.

**2. Self-Harm and/or Sexual Assault**. How measures developed to reduce the risk of self-harm and assault to other inmates at identified risk could be applied to transgender inmates.

**3. Hormonal and Surgical Intervention.** On what basis hormonal and/or surgical intervention is, or should be, available to inmates.

**4. Need For Statistics, Further Research and Consistent Policy Development**. Lack of data collection in this area, how to identify and record the number of transgender inmates, and the need for further research and policy development.

#### **Choice of Institution**

In determining whether to "classify" a transgender prisoner as male or female, there are several issues which require consideration.

It is clear that a transgender inmate, whether MtF or FtM, who is placed with biologically male prisoners is likely to be at a much greater risk of harm, particularly sexual *a*ssault, than those placed within a female institution. Several State and Territory correctional departments currently have policies about where transgender inmates should be housed. These policies are not consistent across Australia and, in some cases, are not consistent with a jurisdiction's own legislation.

There are two basic approaches used by correctional managers to classify transgender persons. The first, which is based on the same principles as the current anti-discrimination legislation, places emphasis upon the social aspects of identity; that is, how a person selfidentifies.

The second approach, which is more akin to the current birth certificate legislation, considers whether surgical intervention has been undertaken. Neither approach gives completely satisfactory results within the correctional context.

The social-based approach is open to criticism that it is too subjective and that individuals may try to "rort the system". The surgery-based approach is also problematic because there is no single agreed standard of surgery amongst the Australian jurisdictions. Furthermore, as anti-discrimination legislation does not require surgery, any correctional policies relying on the surgery-based approach may in fact be in breach of that legislation.

The Northern Territory correctional services policy on transgender inmates demonstrates the difficulty of balancing the two approaches and the inconsistency of a surgery-based approach. Under that policy, those who have not undergone "surgical reassignment" are placed according to the gender assigned at birth. Discretion also exists for the superintendent on medical advice to approve alternative placement. The existence of such broad

discretion begins to undermine the supposed "certainty" of a surgically-based approach. The policy then goes on to consider placement of those who have had surgical intervention:

#### **Gender Reassigned**

Any such prisoners are to be placed in a location that corresponds with their reassigned sex; ie, they are to be treated as they would be in the community. This rating would also cater for those persons who have had partial surgery reassignment (breast implants etc) and who would require single cell accommodation.

The concept of how such an individual would be treated in the community overlaps with a socially-based approach. However, the continuing insistence on some form of surgery produces curious results. The following examples highlight the difficulties.

An MtF who has been taking female hormones for a reasonable length of time will have some natural breast enlargement

(Kirk 1996). These breasts may be enough for the community to consider them as such, but the above policy will only recognise the silicone variety. Similarly, an FtM who had undergone a hysterectomy would seemingly be regarded as male for this policy. Yet,

whether or not he had a uterus would not be obvious to the general community.

The Australian Capital Territory Department of Corrective Services records detainees as one of four classifications: male, female, other, or unknown. Classification is based on "physical appearance during strip search". No indication is given on what criteria are required in making up the physical appearance of "male" or "female"—let alone "other" or "unknown". Though the Australian Capital Territory is small in terms of detainee population, this policy is indicative of how "sex" is taken for granted with no real consideration being given to transgender individuals.

Such an attitude is likely to prevail in states with no formal policy on transgender inmates.

Absence of policy, or policy with unfettered discretion, leaves transgender inmates in a vulnerable position and the particular correctional department open to criticism under anti-discrimination legislation.

An example of the social-based approach is the policy in Western Australia, where it takes into account the following factors when assessing the management of transgender inmates.

• Family background.

• Developmental history including development of sexual identity.

• Recent lifestyle.

• Medical history with particular reference to hormonal and/or interventions.

• Gender identity preference.

According to the policy, postoperative MtF "transsexuals" are to be treated in all respects (other than formal legal status) as female



prisoners. Pre-operative MtFs are to be placed at a women's prison with certain measures to be taken regarding sleeping accommodation and showering.

This position seemingly provides for placement of transgender inmates,

which would be consistent with antidiscrimination legislation. However, this did not exist in Western Australia when the policy was

formulated. The Western Australian policy, like most others, says very little about FtM transgender prisoners leaving their placement entirely at the discretion of the prison administrators without any policy-based guidance.

A different approach is taken by South Australia, whose policy opens with the statement:

"In general at common law, a convicted prisoner retains all civil rights which are not taken away expressly or by implication by statute."

The policy was drafted in response to amendments to the Equal Opportunity Act 1984

Polare page 12 October-December 2011 (South Australia) to include pre-and postoperative "transsexuals".

When addressing the initial placement of transgender inmates, the South Australian policy illustrates the tension between the social-based and the surgery-based approaches. Initial placement is dependent on "operative status"; there is provision for placement to be reviewed within two weeks.

However, as identified within the wider correctional literature, those first two weeks can represent the highest risk period for new inmates. This was recently exemplified by the sexual assault and death in custody of a transgender prisoner within the first three days of her incarceration.

New South Wales goes one step further by creating a presumption that inmates will be placed in an institution of their "gender identification" as a right, unless if it is determined on a "case management" basis that they should be placed elsewhere. During the initial induction of self-identified transgender inmates, they are to be kept separate from other prisoners.

The New South Wales policy is the most recent and most comprehensive, and covers areas such as transport and clothing, which are not discussed in other policies.

According to the New South Wales approach, MtF transgender inmates will be placed in female

institutions except where there are over-riding security concerns, presumably to other female inmates. This suggests a lingering concern that "men" will try to get moved to a female institution by "pretending" that they are transgender. This argument does not apply to people who were living as female in the community prior to their incarceration.

According to the New South Wales policy, most FtM transgender inmates will also be placed in female institutions. This is because there are identified safety concerns for such individuals if placed in a male institution. The small number of known FtM inmates have been placed in female institutions. There has been no suggestion that FtM inmates pose any particular risk to the females they are housed with. By contrast, if FtM inmates were placed with male prisoners, the risk of assault, particularly sexual assault, to the transgender inmate would be extremely high. Few FtMs have genital surgery and such surgery is considered experimental and its results imperfect (Beemer 1996). Thus, it would seem that for FtM transgender inmates, the safest option continues to be placement within a female institution unless special circumstances exist to prove otherwise.

The New South Wales policy treats a transgender person who has had his or her birth certificate amended conclusively as the new sex, and stipulates that they must be housed as such. For MtF individuals, this would have the effect of placing them in a female institution, the same result as a case management approach would probably have.

However, FtM individuals who have altered their birth certificate would be placed in a male institution. To alter a birth certificate, an FtM does not necessarily have to have any genital surgery. Placing such an inmate in a male institution would place them at great danger, and is contrary to the general intention of the policy. New South Wales and other state birth certificate legislation is likely to be binding on corrections authorities as to the "legal sex" of the individual. However, corrective services agencies have the ultimate responsibility for the placement of individual inmates, including the selection of the most appropriate institution for any individual, irrespective of sex.

#### Self-Harm and Sexual Assault

Considerable research has been undertaken to reduce the risk of harm to other groups of inmates that have been identified as "at risk", particularly Indigenous inmates. Similar principles could be applied to transgender inmates.

It should, however, be noted that the recent death in custody of a transgender inmate occurred while she was in "strict protection". This suggests that merely placing transgender inmates "in protection" may not be sufficient.

The New South Wales policy specifies that transgender inmates are to be provided with separate toilet facilities and allowed to shower separately. The policy also identifies some

management issues that could be related to helping maintain transgender inmates' selfidentity and self-esteem. These include ensuring that staff refer to transgender inmates by their chosen name and gender, and that transgender inmates are allowed to wear gender appropriate clothing. South Australian and Western Australian policies also refer to the importance of addressing transgender inmates in gender neutral or chosen pronouns. For these policies to be effective, appropriate staff training is required.

#### Hormonal and Surgical Intervention

"Treatment" for "transsexuality" is conventionally described as helping that person to live in their psychological gender by means of hormonal, and sometimes surgical intervention (Bodlund 1996). Whether or not surgical intervention is appropriate in a prison context is controversial.

Some reports tend against it on the basis that part of the process for "approval" for surgery is a "real life test" (Petersen et al. 1996). For those already approved for surgery prior to incarceration or serving long sentences, the situation may be different (Perkins 1991).

Regarding hormonal treatment, it is generally agreed that transgender inmates who are already on a hormone program prior to incarceration should continue on that program generally for medical/health reasons. The sudden cessation of hormone therapy can have serious medical consequences.

Prison policies on surgical and hormonal therapies are not consistent across Australia. Hormonal therapies commenced prior to incarceration will generally be continued at the discretion of prison medical services, but **Polare page** 14

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commencement of hormones or surgery is not necessarily permitted.

In South Australia, hormone therapy may be initiated at the direction of prison medical officers. In New South Wales, inmates may have hormones or "elective" surgery, provided they bear the cost. Note that it is not clear whether all transgender surgeries are considered elective (Koranyi 1983). Where there is no formal policy, it may be presumed that medical treatment of any kind would be in accordance with the general prison policy at the direction of visiting medical officers. Assessment by prison physicians is unlikely to be adequate, as

> the medical management of transgender people is regarded as a h i g h l y specialised field (Hage 1995).

Finally, as transsexuality is recognised a medical disorder, failure by correctional departments to address these issues and to provide adequate treatment could be argued to be a breach of basic rights human standards.

L

#### twice during daylight hours. The attacks were so vicious that two other prisoners took the

After an appearance in a Local Court, bail was

refused and Ms M. was remanded in custody.

Late on 22 December she was transported to a

remand and reception centre where that night

and into the morning of December 23 she

underwent induction assessment. She was

identified as transgender by the welfare officer and it was determined she should go into a

"protection" wing. Having spent December 24

in court Ms M. spent December 25 and 26 in

During this time she was brutally raped at least

"strict protection".

vicious that two other prisoners took the unusual step of reporting the incidents and giving sworn evidence. On December 27 Ms M. was found dead in her cell hanging by a shoelace.1

[Inquiry into a death, Coroner J Abernethy, Wednesday 21 July 1999. Ref: W308]

#### Need for Statistics, Further Research and Consistent Policy Development

It is clear from the definition of transgender adopted in antidiscrimination legislation that self-identification is the key indicator of transgender status. Consequently, there needs to be opportunity for inmates to self-identify as transgender, and for this status to be recorded and respected.

Recent changes to the New South Wales Offender Management System will allow for the collection of data on the number of transgender inmates in the New South Wales correctional system. Similar changes in other jurisdictions would also allow for a more accurate measurement of the incidence of transgender persons in the Australian correctional system.

There exists an opportunity for all states and territories to review current policies, or to create policies on the management of transgender inmates. The New South Wales policy, with some additional consideration of FtMs, provides a good model with which to start as it addresses a broad range of management issues.

There is also a need for further research on the management of transgender inmates. Ideally, such research would be conducted in conjunction with correctional service agencies, community gender organisations, and medical and legal professionals.

#### Conclusion

As can be seen from the brief outline of issues above, there is an identified need to have appropriate policies in place for the management of transgender inmates. Transgender inmates present a unique set of issues that, if not appropriately dealt with, could lead to a greatly increased incidence of assault and self-harm in that population. Failure to implement appropriate policies may also amount to a breach of anti-discrimination legislation and/or human rights obligations. Issues that need to be addressed as a priority in correctional policy include choice of institution, classification procedures, measures to reduce risk of assault and self-harm, the provision (or otherwise) of hormonal and/or surgical intervention, as well as the need for a mechanism to identify and record the incidence of transgender persons in the prison population.

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The views contained in this paper are not necessarily the views of the Attorney-General's Department.

Dr Adam Graycar, Director,

Australian Institute of Criminology and General Editor, *Trends and Issues* in *Crime* and *Criminal Justice* series: GPO Box 2944

Canberra ACT 2601 Australia

Note: Trends and Issues in Crime and

Criminal Justice are refereed papers.

**Jake Blight** is a Legal Officer in the Commonwealth Attorney-General's Department.

This paper is a summary of a longer report on the issue of transgender persons and the Australian legal system (which is available on request). The longer report covers the following issues in more detail and explores the role of the common law, international obligations, and legal definitions of sex and gender.



**The Women's Group** meets for discussion and mutual support, and the sharing of experiences and opinions.

The meetings are normally held on the last Monday of each month at the Gender Centre from 3.00pm to 4.00 pm. The next meeting will be held on 30 October, starting at 3.00pm.

Suggestions for guest speakers for future meetings will be welcomed.

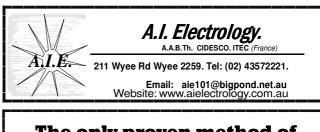
Katherine Cummings, Convenor

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 have encountered many disadvantages of early transition. They may lack financial security, established reputation and social acceptance. We would like to hear your suggested strategies to help in such situations.

You are encouraged to contribute material for the January-March issue of *Polare*. Please send your contribution to: The Editor, *Polare*, PO Box 266, Petersham, NSW, 2049 by 8 December 2011



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### **Sex and Gender Education**

### (SAGE) Needs You!

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

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

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

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

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

SAGE - campaigning for your rights!

### The Counsellor's Column by Anthony Carlino

#### The veil of Narcissism within families.

Many clients of mine have found themselves experiencing uncertainty as to the cause of the problems they encounter in life. Looking back, there was no overt abuse in the family, no history of drug addiction or alcoholism and everyone was fed, went to school and got jobs - the family unit functioned and appeared healthy even to those who took a close look. The conclusion they sometimes reach is that they themselves must be at fault. "I must be deficient or defective as it appears clear there is no reason for my problems in life".

When we start to scratch the surface, it can become clear that all was not well at home. A common theme is either a current or past resistance to disclosing one's true sense of gender to parents. The question which pops into my head when I hear this is that if a family provided for someone so well, what causes this resistance? As we explore this further, a theme often emerges which can come in a variety of responses:

"They would not have accepted me wanting to transition." "Oh that would have upset my parents."

"Mum and Dad would have freaked out and tried to changemymind!"

Sound familiar? What becomes clear in these responses is that within this family unit, the needs of the parents came before the needs of the child. Instead of feeling safe and supported to express who we really are, we are taught it is far more important to make sure we do not make our parents feel a particular way. What these people then learned to do as a child (and continue as adults) is to mask their true feelings, avoid experiencing them and pretend to feel what they don't feel. If we are not encouraged and praised for processing feelings, they **do** leak out in other unhealthy ways and this carries on into adulthood. This pattern of emotional repression is often observed in narcissistic families.

There are a number of other patterns that can often be seen in narcissistic families and which get passed on.

#### Negative Messages

These messages can be verbally communicated or not spoken at all and more often than not include messages of not being good enough or deficient in some way. Children will internalise this message and carry it into their relationships in adulthood.

#### What Other People Think is a Priority.

In the narcissistic family, parents make it clear to children to make sure the outside world thinks things are going well in the family. What other people think is not only important, it is a priority. "What would they think?" or "Make sure nobody knows about this!" are two of the many ways parents communicate that the opinion of others is crucial indetermining how you decide to behave and what you choose to say. The problem associated with this is that in adulthood the child will often get their sense of



**Anthony Carlino** 

themselves not from within their core-self but from the worldaround them, resulting in a heightened and sometimes paralysing sensitivity to what others think of them.

#### Lack of Boundaries

Generally speaking, boundaries are not often respected in the narcisstic family. Going through a child's things, opening their mail, not respecting emotional boundaries are common. The child is left feeling violated and not entitled to have his or her own sense of self.

These are only two of the patterns seen in narcissistic families. What is clear is the impact it has on a child's development into adulthood:

"The typical adult from a narcissistic family is filled with unacknowledged anger, feels like a hollow person, feels inadequate and defective, suffers from periodic anxiety and depression, and has no clue how he or she got that way." [*The Narcissistic Family*, Pressman and Pressman].

Our sense of gender is part of our core-self and is inherent in being human. When we feel supported by parents who welcome our gender and its expression, an important foundation for self-esteem and identity has been provided. The child from a narcisstic family is unlikely to have received this type of support.

The good news is that with support and growing awareness of how a person's developmental needs were not met, a person can learn and take on the messages which were missed.

You are worthy of love and how you feel matters.

Anthony

Counselling at the Gender Centre is a free service and can be arranged by calling the Centre on 9569 2366 to make an appointment with the Receptionist.

#### Issue Eighty-Nine

### Issue Eighty-Nine I am what I am... by Gwendolyn Ann Smith

recently violated one of the golden rules of the Internet – I read the reader comments under a news article.

The piece itself was a follow-up on the assault on Chrissy Polis in a Rosedale, Maryland McDonald's. A pair of women at the restaurant had assaulted Polis, a 22-year-old post-operative transsexual. They beat and kicked Polis until she suffered a seizure. Why was she attacked?

Polis used the women's restroom.

The older of the two women who beat Polis, Teonna Monae Brown was offered a plea agreement. In exchange for Brown pleading guilty to assault and committing a hate crime, prosecutors will seek a five-year prison term at the sentencing hearing next month.

Those who have spent any time on the Internet know that comments after articles are typically not worth reading. They're littered with trolls, and even well-intentioned commenters can leave shaking their head. Indeed, the old axiom, "better to keep your mouth closed and be thought a fool than to open it and remove all doubt" seems tailor made for the comment sections under articles.

Nevertheless, as I scanned over the plea agreement story, my eyes fell to the comments below, where one poster argued against the hate crime element to the case by writing that "any man could put on a wig and lipstick and go into the ladies room and be protected," saying that if Polis "wants to be a girl he still has to use a men's room if he is a man."

Others, too, pointed out that the fight started in the restroom, and that maybe "he" should not have been in there in the first place.

What we see here is something I first referred to some time ago as "the bathroom meme." This is the argument used by foes of transgender rights. They claim that extending rights to transgender people – particularly those involving public accommodations – will allow nontransgender rapists and pedophiles to be shielded by the law when they prey on others in an opposite sex restroom.

It's akin to the old "gays recruit" meme born in the 1970s or so, equally ludicrous yet equally effective. For the record, no transgender rights bill, including those that cover public accommodations, will protect rapists and pedophiles who attempt to harm your spouse, family members, or children. Rape, molestation, and any other such illegal activity remains illegal.



Gwendolyn Ann Smith

Meanwhile, such laws would allow for a host of rights beyond restrooms by providing equal access to goods and services at public establishments. You know, the ability to order a meal in a restaurant, or go to an emergency room, or do any number of things you might otherwise take for granted.

Yet the notion of potential attackers in the restroom remains the hot button issue – or more succinctly, male attackers in the ladies' room. No one tends to address women wreaking havoc in men's rooms, because this doesn't provide those opposed to extending rights the correct sort of ammo. They couldn't draw parallels between transgender people being treated fairly with images of male perverts sexually assaulting your daughter in the playground restroom by actually addressing the issues, now could they?

Consider Polis, a slight of build, young transwoman. She's about as far from the image that most people conjure up around the words "rapist" as you get. Her attackers were, by and large, bigger than her, and clearly had the upper hand as they kicked her around the restaurant.

For that matter, she is a post-operative transsexual. This is not someone who should step one foot into a men's room. I don't think I'd be in the wrong to suggest that her going into a men's room would be far more likely to cause a sexual assault on a woman than allowing for public accommodation rights for transgender people.

Back to this random, anonymous comment left under the article. I find myself gravitating to that last sentence. "So what if this guy wants to

Polare page 18 October-December 2011 be [is] a girl," the commenter says, "he still has to use a men's room if he is a man."

Yet Polis is not a man. She never has been, even if she may have been declared one at birth. Yes, she may have had the sexual characteristics of a male at one point in her life – but she never seems to have been a man.

Regardless of the shape of her genitalia at birth, she sure isn't a man now. Polis is not a "guy who wants to be a girl." Polis is a woman. Ergo, she uses the women's room. This should not be hard to comprehend.

Here's the crux of it all, to me. Here is the one thing that most transgender people understand, yet is so often lost on others. While transgender people do have a history and background that may well set them apart from others in their preferred gender, they are nevertheless the gender they present as. If a transman presents as male there's likely a good reason for it.

Ditto for a transwoman presenting as female. There are even those who might be opting for a space beyond simply man or woman.

Those who oppose transgender equality feel the need to believe that transgender people, in

expressing their gender as they see fit, are being deceptive. Moreover, they need to equate this perceived deception with the actions of violent and criminal predators. Never mind that no one has been able to find a shred of evidence to support their suppositions.

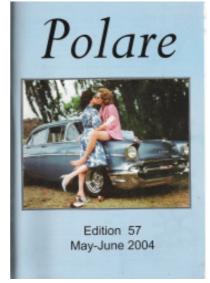
Ultimately, we're not out to defraud, we're out to live our lives honestly, and shed whatever lie we may have been living previously. We are exactly what we say we are.

# Do You have Spare Copies of These *Polares*?

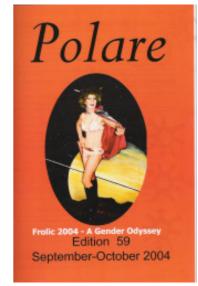
We have been putting together a set of *Polare* for the Australian Lesbian and Gay Archive and have not been able to find spare copies of three issues, namely 53, 57 and 59 (see illustrations below). If you have copies of any of these and they are surplus to your needs, we would be glad to receive them and send them on to the ALGA. Thanks! KC



Polare 53



Polare 57



Polare 59

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### Samuel Lurie Comes To Town

S amuel Lurie, an American transgender awareness educator and advocate for transgender equality, arrived in Sydney on 17th August, en route for the Northern Territory, where he will conduct information and education programs for the Northern

Territory, where he will conand education programs for Territory AIDS and Hepatitis Council. He visited the Gender Centre and we had an exchange of information and

expressions of goodwill over a light lunch.

Samuel was born in New York City and went to school there, but studied at the University of California, Santa Cruz for a degree in Women's Studies. He moved to Vermont in 1992 and



Back, l to r: Phinn Borg, Samuel Lurie, Liz Ceissman. Front, l to r: Anthony Carlino, Kate Cummings, Rusty Nannup

became the Training and Technical Assistance Coordinator for the Vermont Department of Health AIDS Program.

In 2001 he founded Transgender Training and Advocacy, committing to full-time training of clinicians and service providers to transgender people. He travels widely, training prof-

#### LETTERTOTHEEDITOR

#### Dear Editor,

This year I moved from Tasmania to the NSW Central Coast to start a new life. For the first six months I was preoccupied with establishing my nest but it wasn't long before the loneliness and depressing sense of isolation, that I hoped I had left behind, returned. I knew that unless I sought help I would be returning to that dark place where I would be a danger to myself.

My GP advised me to contact the Holden Street Clinic in Gosford for counselling. My counsellor has been wonderful and she advised me to contact the Gender Centre in order to break my awful sense of isolation. She informed me that the Centre held regular 'Drop-In' evenings where transgendered clients could freely socialise, discuss issues and form friendships in a pleasant and unthreatening environment. I immediately contacted the Centre but was devastated to be told that 'Drop-In' nights had been discontinued. To be fair, I was offered the opportunity to participate in discussion-group sessions and I have done essionals in human services, health care and higher education so that they can more effectively integrate transgender issues into their work.

Samuel has delivered training to more than

22,000 people in the United States in the past ten years. He also consults with colleges and universities to train administrators and student-affairs staff on emerging issues such as HIV/ AIDS and transgender. He offers a "Training of Trainers" course.

He can be contacted on *slurie@gmavt.net*. His web page is to be found at *www.tgtrain.org*.

KC

Note that similar training is obtainable through the NSW Gender Centre (www.gendercentre.org.au) or by contacting the Senior Case Manager, Liz Ceissman, on her email (casemanagement@gendercentre.org.au).

so. Yet I cannot understand how anyone could be oblivious to the importance of having a social refuge for highly vulnerable individuals to whom a sentence of extended social isolation can be so dangerous. My fervent hope is that someone in a position to correct this situation will find it in their hearts to do so.

I realise that being a client of the Gender Centre does not include the right to challenge decisions made by the Centre's management. I do, however, believe that clients are entitled to respect. Prior consultation with those most likely to have been affected would have demonstrated sensitivity to the needs of those to whom feelings of low self-esteem are often a major issue.

This letter expresses my personal views. I would, however, like to think that I'm not alone in my thoughts and would welcome discussion. Marika

Note: The Drop-Ins have not been discontinued permanently. They are being assessed in the light of their social value and cost-effectiveness. Ed.

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#### PARENTS OF TRANSGENDER CHILDREN

The Gender Centre will be hosting an information and support group for parents who have children (any age) who are transgender or gender diverse).

Meetings will be held on the second Monday of each month from 6.00pm to 8.00pm.

(10 October, 14 November, 12 December)

## A light supper will be available.

Contact Liz or Anthony on 9569 2366

# Barbecues and other events 2011

Christmas Barbecue Saturday 17 December (Noon to 4.00pm)

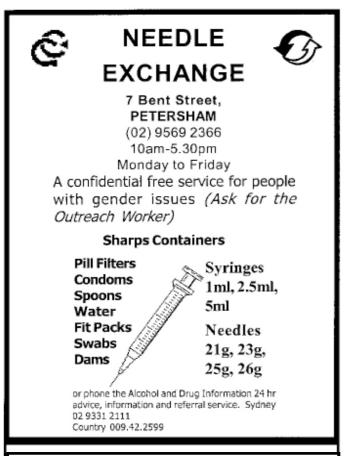


*Location to be advised Watch the Gender Centre Website, Twitter and Facebook* 

**Avant Cards** is sponsoring the Transgender Anti-Violence Project by printing and distributing 10,000 postcards during the two weeks following 23 November 2011. The Gender Centre thanks Avant Cards for their generosity. [www.avantcards.com.au]

Change of mailing	; list?	different <b>Ge</b> different <b>Ad</b> different <b>Na</b> no more <i>Polares</i> tha	ldress? ime?
Mailto: Polare - The Editor The Gender Centre Inc PO Box 266 Petersham NSW 2049	All m	y OLD details	All my <b>NEW</b> details

Polare page 21 October-December 2011



### Pay-It-Forward Binder Program

is a used binder serice that provides used donated binders to:

\*\*\* guys in the Australian and New Zealand region who need a chest binder and are struggling financially or cannot obtain a binder through regular channels e.g.: Centrelink recipients, students, individuals who do not have an income, or do not have the support of their families to access binders.

The aim is to alleviate some of the dysphoria experienced by FTMs and to improve their quality of life.

The Pay-It-Forward program accepts donated binders, which are cleaned, sized and passed on to those in need.

The service is based on honesty and should not be accessed by those who are just looking to save money.

Our website is:

http://binderprogram.ftmaustralia.org or you can email: binderprogram@ftmaustralia.org

# 🛉 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.

#### 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 <u>www.ftmaustralia.org/resources/</u> <u>torque.html</u>

**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 <u>http://groups.yahoo.com/group/ozguys/</u>

To find out more or read our resources please visit our website at *www.ftmaustralia.org* 

#### Women in Dresses: Reinforcing Sexual Stereotypes? Issue Eighty-Nine by Matt Kailey

t many conferences I've been to, the Saturday night banquet is the highlight of the conference, and the culmination of all the hard work on the part of the planners and all the fun on the part of the attendees, so many choose to get completely decked out for the event.

For some of the women this means high heels, high hemlines and low-cut necklines — and I don't think there's anything wrong with this.

I've always thought if you've got it, you should flaunt it, whatever that is — brains, talent, a sense of humour, muscles, great legs, a special skill. Whatever it is that makes you feel good about yourself or that you know is special, let the world know. If you don't put it out there, nobody else will, that's for sure. You're all you've go, baby.

But I think transwomen get the raw end of the deal when it comes to complaints about either reinforcing gender stereotypes, reinforcing the sexual stereotypes that some people have about transpeople, or both. So let's break it down.

#### **Reinforcing gender stereotypes:**

Almost all of the women who attended my most recent banquet (and most conference banquets I've been to) wore a dress or gown of some type. Dresses and gowns, in our culture, considered to be "women's wear" and they are also considered to be appropriate for a formal banquet. Most of the women fixed their hair, wore their makeup, and turned the evening into a special occasion where they could get dressed up.

So my question is this: Is it reinforcing a gender stereotype to wear a dress or gown or to wear special makeup or a special hairstyle for an evening out? Or is it simply being yourself? If you've waited thirty, forty or fifty years to be yourself, and yourself is a person who likes to put on a dress, heels and makeup, should you be denied that pleasure and that right — the pleasure and the right to express your gender as you choose — because it reinforces traditional gender stereotypes?

Freedom of gender expression means freedom for everyone, not just for a select group that wants to defy gender stereotypes. And although my hope is that transpeople can be a force in relaxing or eliminating traditional gender stereotypes, we are in no way required to do so.

The few guys who were at the banquet wore a suit, a shirt and tie, or in my case, just a shirt and jeans. I gave

up ties a long time ago — not because they were a gender stereotype, but because they made me look like a turtle with no neck.

Traditionally masculine transmen sometimes take heat for being excessively "macho", and I've met a few who might earn the slightly outdated label of "male chauvinist pig", but transmen rarely take as much flak for putting on a suit and tie — traditional "men's attire" — as tranwomen do for putting on a dress, heels and makeup.

Why? Because of the whole "sex and sexuality" thing that surrounds women in general and transwomen in particular. Let's look into the situation more closely:



Okay, why does this photo of transman Lucas Silveira appear on a post about women and reinforcing sexual stereotypes? Because the lead singer of the Cliks was recently named Canada's sexiest man in the 15th Year End Readers' Poll by Canadian music magazine *Chart Attack*.

I think it's great and a lot of people will probably think it's great, that a transman was voted sexiest man. And although Silveira doesn't always conform to traditional Western gender stereotypes, he is often photographed, as he is here, in a suit and tie (although a much more stylish ensemble than most stuffy businessmen would own). He is reinforcing a

"traditional" male gender stereotype, and it's sexy. But transwomen often take more heat than transmen do when they conform to stereotypes.

#### Reinforcing gender and sexual stereotypes

If a transwoman in a low-cut, form-fitting dress were to win a "sexiest woman" poll, she might take some flak, for two reasons — reinforcing the stereotypes surrounding women as sex objects, and reinforcing the stereotypes surrounding *transwomen* as sex objects.

No one likes to be objectified. But the reality is that human beings are sexual beings (whether we're getting any or not), and human beings are going to look at other human beings and be sexually attracted to them, for a variety of reasons.

Different people are going to have different reasons, but there is a certain type of Western female sexual ideal — a "sex symbol" ideal — that involves cleavage, short skirts, high heels, makeup, and other accoutrments, and those who want to adopt this image, even for a special night out, are sometimes frowned upon for reinforcing the concept of women as sex objects.

Transwomen often take particular grief for this because some people (usually men) objectify a particular body type that they *think* transwomen have.

I have always felt that it was unfair to restrict women's clothing choices because of the significance that *other* people might ascribe to them.

It has always made me angry that women aren't free to wear what they want to wear, or be who they want to be because *men* might get the wrong idea, or *men* might not take them seriously, or *men* might fail to recognise the intelligence, skill, or ability behind the makeup or short skirt (or because other women might judge them in the same way).

By the same token, I think it is unfair to restrict *transwomen's* clothing choices for the same reasons, while adding the additional burden of being responsible for some men's sexualised idea of who and what transwomen are.

I have been on testosterone for over twelve years. Testosterone makes you think about sex. Testosterone makes you look at other people in a sexualised way - not always, but often. But that's *my* problem. And for straight men, that's *their* problem. Women should not have to bear the responsibility for what some men (or some other women) might think. Women — trans and non-trans — should not have to constantly monitor their clothing, appearance, mannerisms and actions to avoid reinforcing sexual stereotypes — and to avoid looking "sexy".

Look at Canada's sexiest woman, Avril Lavigne. Even though she presents it in a very modern

way, she stays close to "feminine" tradition she even has her own fragrance. And she certainly meets many of the traditional expectations of her gender with regard to being "sexy".

I've not heard any criticism so far about Silveira's "sexy" male gender presentation. I don't know if Lavigne is criticised for her



Avril Lavigne

"feminine" or "sexy" gender presentation.

But in my opinion it's okay for everyone to be sexy — Lucas Silveira in a suit and tie, Avril Lavigne in a strapless, low-cut gown, a guy in a muscle shirt, a woman in jeans and a t-shirt, or a woman in a low-cut dress.

People should be allowed to be sexual, and people should be allowed to be sexy, and the burden should not fall on women to control what someone else is thinking. They can't anyway.

When we rejoice in who we are, whoever and whatever that is, and we rejoice in who other people are, without judgement, we might not be able to eliminate gender or sexual stereotypes but they might not matter so much to us any more.

We might realise that people have the right to present their gender - and their acceptance of the fact that they are sexual beings - in whatever way is the most comfortable for them.

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### About Matt Kailey:

Matt Kailey, the author of the preceding article on stereotypes is a transsexual man and an award-winning author, blogger, and community leader, as well as a nationally recognised speaker and trainer on transgender issues.



He is the author of Just Add Hormones: An

*Insider's Guide to the Transsexual Experience* (Beacon Press), a Lambda Literary Award finalist and Rocky Mountain News local bestseller, and his work has appeared in numerous publications, from anthologies to professional journals.

Matt began his transition from female to male in 1997 after forty-two years of living as a straight female (as for his age, you can do the math, but he is a proud, card-carrying member of AARP)\*. His blog (and much more) can be found at *tranifesto.com*.

The article above is quoted with permission and encouragement to visit his blog. The photograph of Lucas Silveira was taken by David Howe.

[\* For our Australian readership: AARP is the American Association of Retired Persons.]

### Online Dating Tips by Nicola Sloane

#### Guard your identity

Whether you're off on your first blind date, set up by a friend or you found your love interest online, your personal safety should always be your number one priority. The following guidelines will help ensure your safety.

Guard your identity. Don't share your real name, personal phone numbers, email address, home address, place of work or any other identifying information while instant messaging or emailing until you have established a reasonable level of trust with the other party. Do not post personal contact information in your profile or username.

**Tip:** Never post personal contact information in your profile. Don't risk having this information fall into the wrong hands.

#### **Remain anonymous**

It is vital to remain anonymous until you feel comfortable. Take advantage of the memberto-member technology utilised on most online dating sites that protects your identity until **you** choose to reveal it. This technology works on all email and instant messaging.

**Tip:** If a person provides his or her phone number early in the email exchange, that doesn't obligate you to use it.

#### Use an anonymous or third party email

Protect your online access information. Use caution when accessing your account from a public or shared computer so that others are not able to view or record your password or other personal information.

**Tip:** If you share your computer with others, consider disabling your auto-sign in feature if you have linked an auto log-in program.

Protect your financial information / Do not let love rob you blind

Do **not** give out any financial information, advice or charitable contributions. Beware of someone who mentions how broke he or she is. Also be cautious if they claim they "just got laid off from work," or that their financial adviser "scammed them out of all their money." Beware, too, if someone who offers to send you money.

**Tip:** Once given your financial information it is easy for someone to gather further personal information about you, including your real name, address, phone numbers etc. They can also "rob you blind".

#### Be careful when using sexy or inviting names

There are some sites that advise you to use a sexy name but please bear this information in mind when choosing a name for yourself. While using sexual connotations in your email address or user name might get you noticed, it probably won't attract the sort of person you'd like to share a relationship with - or even a conversation, for that matter.

**Tip:** Do not include your real name or city of residence in your profile or in your user name.

#### Trust your "gut"

Immediately stop corresponding if you feel unsure or threatened. "If it sounds too good to be true, it probably is." Your parents were right on target with this bit of advice.

**Tip:** Remember that, when it comes to your personal safety, it's not only OK to snoop, it's your duty so make inquiries.

#### Keep a record of all conversations

Remember to save your emails for future reference. Some online dating websites do not retain copies of your correspondence and if there should ever be a need for referencing in the future it is important that you have evidence of the communication between yourself and the other party.

**Tip:** It is important to keep copies of communication records for any harassment and

or assault cases, this will provide you with stronger evidence if you ever wanted to press criminal cases or take out an AVO (Apprehended violence order).

#### **Block** abusers

Block abusive users. Block any member who behaves or treats you in an abusive way and report the behavior to the website administration immediately. Stop communicating immediately with anyone who pressures you for personal or financial information. You can block and report concerns or terms of use violations from any profile page, from your email or instant messaging window.

Tip: Your involvement will help keep the community safe, fun and enjoyable. Keep this in mind when doubting whether you should report someone.

Always meet in public spaces

Always arrange to rendezvous in a populated, public place. **Never** meet in a private home (or in a hotel room) or in a remote location. Please keep in mind that the only information you know about this person is what they have chosen to tell you. When meeting in a location that is not a public space you can be placing yourself in extreme danger.

**Tip:** First meetings are exciting, however, always take precautions and use the following guidelines.

#### Always tell a friend or family member where you will be and with whom

**Always** tell someone who you are meeting, where you are going, and when you plan to return.

**Tip:** Let your date know that your whereabouts are not a secret to your friends and family. Contact your friend or family member before and after the date or ask your friend to contact you at a predetermined time.

#### Always remain sober

Stay sober. Do not drink, smoke or take anything that would impair your judgment and cause you to make a decision you could regret. If you do decide to drink, refrain from drinking excessively, as any impairment to your decision-making can put you at risk.

**Tip:** Stick to non-alcoholic drinks when meeting someone for the first time. Regardless of the content of your drink keep it with you at **all** times so that it cannot be tampered with.

#### Always carry your mobile phone

If you own a mobile phone, make sure you have it with you and that it is fully charged. If necessary, mobile phones can be used to call your local emergency or police.

**Tip:** Do make sure to be in area where emergency service is available and know the emergency number to call.

#### Do not get the person to pick you up

Drive yourself to and from the first meeting. Just in case things don't work out, you need to be in control of your own ride – even if you take a taxi.

**Tip:** Don't leave personal items unattended. You don't want to risk having personal information stolen.

#### Do not give into temptation

Stay in a public place. It is best not to go back to your date's home or bring them back to yours on the first date. If your date pressures you, end the date and leave at once.

**Tip:** If you believe you are being followed to where you parked your car, stop and hail a cab or go into another public place to use a phone and call a friend.

You can come back later with your friend to get your car.

#### **Proceed** with caution

If someone admits their undying love for you after meeting only a few times, please "proceed with caution". Lust at first sight is alive and well, but love is, generally, an acquired feeling and this does not tend to happen in a short space of time. Love is a feeling that is earned and built over time and with trust.

#### Do some investigating

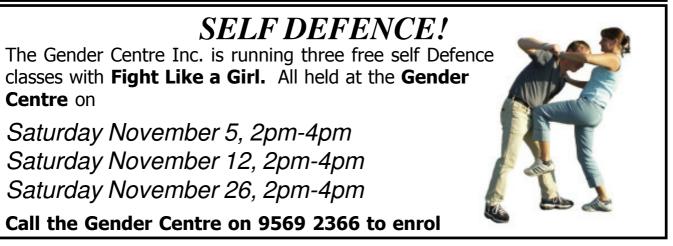
Get to know the other person online before meeting them offline. Use the tools available through online dating sites that protect your anonymity to get to know someone before meeting them in person. If you would like more information about someone, we recommend using the internet and government resources available to everyone.

**Tip:** If the other person can only meet or talk to you at odd hours, he or she may be keeping a secret. If this person cannot be honest with you from the start, you cannot count on him or her to be honest in the future.

#### Be wary of vagueness

Some people talk in circles and answer questions with questions. There are some people who are very private, but if you're about to take your relationship to the next level, this isn't the time for reservation. There could be genuine reasons behind a person's vagueness, but you should recognise that they could be hiding things from you.

**Tip:** If you talk on the phone and the person you are speaking to talks in hushed tones or "has to go" suddenly, they may not be as single they claim to be.



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### RPA SEXUAL HEALTH CLINIC

25 Lucas Street, Camperdown, NSW, 2050

#### WHAT DOES THE SEXUAL HEALTH CLINIC DO?

- Testing, treatment and counselling for sexually transmissible infections, including HIV
- Gay men's sexual health check-ups
- □ Sex worker health checks
- Men's and women's sexual health checkups
- □ Advice on contraception
- □ Pregnancy testing and counselling
- □ Free condoms and lubricant
- □ Needle and syringe program and sexual health check-ups for people who inject drugs
- □ Hepatitis testing and vaccination
- D Post-exposure Prophylaxis (PEP) for HIV

#### WHAT HAPPENS WHEN YOU VISIT THE

#### **CLINIC FOR THE FIRST TIME?**

You will be asked to fill out a registration form.

The information you give us will remain confidential and will be put in a numbered file. Keep this number and quote it for any test results and when making future appointments.

A nurse will determine whether you need to see a doctor or nurse for a medical issue or a counsellor to discuss information on sexual health, safer sex or relationship issues.

#### SOME COMMONLY ASKED QUESTIONS

Do I need an appointment? Yes, appointment is preferable.

Do I need a Medicare card? *No, you don't need a Medicare card.* 

Do I need to pay? *No, all services are free.* Do I need a referral from a doctor? *No, simply call 9515 3131 for an appointment.* 

(Interpreters available)

### Conor Wins!

Sydney FTM Conor Montgomery has won his battle for a birth certificate affirming his gender as male after Births, Deaths and Marriages had refused the amendment on the grounds that he had not had any kind of genital surgery.

The question of how much surgery is enough to satisfy the law so that gender may be changed in legal documents has been a long-running dispute.

Recently two FTMs from Western Australia have won a similar dispute in the High Court which should settle the matter. These cases and Conor's dispute with the NSW authorities highlight the vagueness of legislation which fails to define the medical procedures that are necessary and sufficient for revision of documentation. If the aim is achieve a visual similarity to a specific gender, then FTMs are disadvantaged by the expense, difficulty and risk involved in creation of a neo-penis compared with the cost of creating a neo-vagina. If the aim is simply to ensure that transgenders are rendered sterile, then castration should authorise MTFs for new documentation. If both sterilisation and a plastic-surgery simulation of the target gender are required, then this should be spelled out in the legislation.

In the meantime, congratulations, Conor!

KC

#### Central Coast Transgender Support

The CCTS is a totally free and unfunded service to all with gender issues. It offers guidance to all who are contemplating commencement of the medical and psychological requirements that are involved in full MTF transition under the Harry Benjamin Standards of Care.

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

CCTGS operates Monday to Saturday 10am-10pm

0404 054 000 Email:smh101@exemail.com.au

#### News Items of Interest **F2M PAIGE ELLIOT PHOENIX** SCORES HIGHLY IN AUSTRALIA'S **X-FACTOR**

Paige Elliott Phoenix was impressive in his



rendition of INXS an classic "Never Tear Us Apart" on Australia's X-Factor early in Sep-tember, 2011. The judges unanimously voted him on

to the boot camp segment of the show, where he will receive mentoring by international stars.

#### **AUSTRALIAN SUPER HERO** IN DRAG

A drag queen who fights crime is the subject of a new Australian film "The Silver Stiletto". Craig Rossiter, who came up with the idea thought the concept of a high-heeled hero was a natural. "If you look at the mythology of

comic book heroes, with their alter egos and hiding their true identity ... well that could be a drag queen," he said. "Underbelly" star Guy Edmonds will play the lead. It is expected that the film will screen before the end of 2011.

#### **GLENN CLOSE IN CROSS-DRESSING** ROLE

Glenn Close presents as male in the film "Albert Dobbs", which had its premiere at the Telluride Film Festival. Close plays an Irish woman who has been abused and assumes a male role as a

waiter in order to overcome gender bias and classism in 19th Century Dublin. Close also played the role on stage in 1982. She co-wrote and produced the screen version, which received very favourable reviews from critics



**Glenn Close as Albert** Nobbs

and audiences alike. In the film the central character begins to fantasise about settling down in his male persona and even marrying an attractive maid, played by Mia Wasikowska.

The film is expected to have a limited commercial release in December, in order to qualify for consideration for various awards.

#### **CASTER SEMENYA TAKES SILVER IN SOUTH KOREA**

Caster Semenya returned to international competition in track and field at the World Athletics Championships in Daegu, South



Korea. She won her way through to the finals but lost her favoured event, the 800 metre race, to

**Caster Semenya** 

Russian Mariya Savinova. with Kenyan Janeth Jepkosgei taking the bronze.

Semenya was cleared to compete in July 2010 by the IAAF. After winning the silver medal she said "Looking back two years, it wasn't easy for me. Now I would like to be a professional, be strong and positive. I achieved what I wanted, getting back to the podium. I'm still young and I need to focus on the future, so I don't want them to talk about the past. I prefer to leave it like that."

#### **SWEDEN LIBERALISES GENDER CHANGE LAWS**

Sweden currently (like Australia) demands that transgenders be sterilised and single before they can have their gender change officially This may be about to change as recognised. the governing Moderates are setting a course for revision of the legislation. If the reform goes through married transgenders need not be divorced and the sterilisation requirement will also be dropped.

The Christian Democrats and the far-right Sweden Democrats are still opposed to the reform.

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### The Lesbian and Gay Anti-Violence Project can be contacted on (02) 92062116 or

1800 063 060

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

### Community Contacts Cancelled

The Gender Centre regrets that following misuse of the service Community Contacts will no longer be provided. Unfortunately growing reports of predatory actions by some 'contacts' forced us to take this action.

Advertisements of a service nature (e.g. "For Sale", "Accommodation Wanted" or "Accommodation Available") will continue to be published.

### Melbourne Gender Blender

On the first Saturday of every month from 9.00pm to 4.00am there will be an event for the Sex and Gender Diverse Community of Melbourne and their friends. The aim is to provide a safe and comfortable space for the SGD community in a enjoyable and inviting atmosphere. There will be Performances throughout the evening as well as DJs and dancing. Door prizes and raffles, with proceeds to go to a different community organisation each month or to an individual in need of funding to help with costs for health insurance or surgery.

The events will take place at the Glass House Hotel, 51 Gipps Street, Collingwood, close to Collinwood Station and trams. Plenty of taxis about .. we encourage people to drink responsibly and not to drink and drive See our website *www.genderblender.net* or email *info@genderbledner.net* or phone 0406 777 501

### Don't put up with it — Don't let them get away with it **STOP DISCRIMINATION** Contact the Anti-Discrimination Board of NSW

#### **Get free confidential advice**

Phone (02) 9268 5544 or 1800 670 812 for people outside Sydney. If you need an interpreter call 131 450 first. TTY 9268 5522. Email adbcontact@agd.nsw.gov.au

#### Make a complaint

Visit our website at: www.lawlink.nsw.gov.au/adb to download a complaint form. Email complaintsadb@agd.nsw.gov.au

#### 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. Contact details on the Directory pages.

PLEASE READ THIS! If you are moving, or changing your email address, please tell us. Undeliverable copies 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 2011 have not been set but sessions will be held monthly. To make an appointment please contact a Gender Centre Staff member on 9569 2366 or email *reception@gendercentre.org.au*. Bookings are essential

# Sex, Gender & Sexuality Clinic

#### Director: Dr Tracie O'Keefe DCH, ND



Doctor of Clinical HypnotherapyPACFA<br/>ASSERT<br/>ASOCHAPsychotherapistASOCHACounsellorSex Therapist

All Sex, Gender and Sexuality Diverse People Welcome: Transsexual, Transgender, Transvestite, Intersex etc.

Hormonal & Surgical Referrals When Applicable.

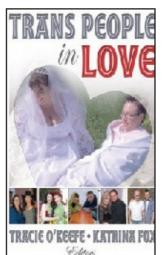
Member of World Professional Association for Transgender Health (WPATH).

Also Available: Naturopathy, Herbal Medicine Dietitian, IPL Laser Hair Removal, Microdermabrasion, Non-Surgical Facelift

### 02 9571 4333

#### www.tracieokeefe.com

#### www.healtheducationcentre.com



"Compelling in freshness."

- Del LaGrace Volcano

"The genius of the editors is in capturing these different visions." - Christine Burns, VP of Press for Change, UK

"A rich and varied array of informative and provocative stories of relationships."

- Jamision Green

"Do not neglect this book." - 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

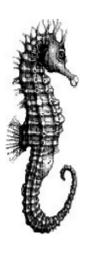
Published by Routledge, 2008 (In stock at The Bookshop and the Feminist Bookshop in Sydney, and at Hares & Hyenas in Melbourne).

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

"**Parents who are transgender**" working group meets on the first Saturday of each month. 10am to noon.

2 July, 6 August, 3 September

A light luncheon will be provided. Contact Liz or Anthony on 9569 2366



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



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

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

#### www.seahorsesoc.org

Email: *crossdress@seahorsesoc.org* Membership enquiries, change of details etc. contact Membership Secretary, PO Box 6179, West Gosford, NSW, 2250

"crossdress with dignity"

### Shifting patterns of gender relations: Interview

with Masculinities author Raewyn Connell by Greg Macdougall

Raewyn Connell, an Australian academic who specialises in social constructions of masculinity, brought her wealth of knowledge to Canada to talk about the state of gender equity.

As one of four speakers on the "Breaking Barriers" plenary at last month's Women's Worlds 2011 conference in Ottawa, Connell said the session covered a wide range: "things like gender education, personal stories, what's happening in the world, what's the position of Muslim women for instance in relation to feminism, how the Arab Spring is changing people's perceptions of what can happen in the world and women's role in that was one of the highlights, questions of violence... It's a somewhat scary experience [laughs] you're sitting up there on a brightly lit stage, with a thousand or more people in the room." See plenary video here.

Connell, who holds a University Chair at the University of Sydney, described her work the following day in an interview.

She made it clear this work goes beyond individual efforts: "I'm part of research teams, out of which this has come... It's to a large extent about the debates that go on in the field, the research techniques that are available, and the rethinking that I might have done of these, that inform my research."

On a personal level, however, she has a long involvement with gender equity issues, alongside her work with gay men on community education around HIV/AIDS and, having "grappled with gender issues in my personal life as a transsexual woman," it drove an interest in the field and "maybe a little bit has helped me to become aware of the contradictions and complexity in gender, which is good for research of course."

She describes masculinities (plural) as "not only individual behaviours, but — I think this is very important — social practices, organized social practices by groups and interactions too" as part of what constructs the powerful meanings of masculinities.

"When you're looking at masculinities, you're not only looking at an individual personality or character, you're also looking at football teams, corporations, armies, governments, and so forth, all of which are involved in constructing gender," she said.

"One of the crucial findings when this research field developed, about 20 years ago, is that there's no one thing that you can call masculinity. There are multiple



Professor Raewyn Connell [Photo by Dianne Leggett]

masculinities, there are different patterns of social practise, different patterns of social behaviour, and very typically — for instance if you go and do research in a school you'll find a number of different patterns of masculinity the boys are learning or practising, and which have often sort of hierarchical relations between them. So there might be one version of masculinity which is more honoured in the school, and others ... [may be] looked down or frowned on."

#### Advertising

She talked about how strong this influence is.

"That's often where you get the relationship with sexuality, because very often — it's not universal, but very often — the hegemonic, the most honoured, the powerful version of masculinity is heterosexual, whereas disavowed / rejected forms of masculinity are often associated, rightly or wrongly, with being gay."

She noted that often young boys learn to apply terms such as "fag" or "poofter" in a derogatory way long before they actually learn the sexual meaning of the words.

"So you get social and cultural hierarchies of masculinity, and that's quite an important fact about the way the gender system, and the gender order as a whole, works."

In the context of talking about historical and shifting patterns of masculinities, she observed that "a violent and dominating form of masculinity [can] become dominant in the society and that can be very damaging and dangerous for other people."

Connell said some girls and women learn and engage in patterns of masculinity, but that it is mainly boys and men who do so. She also talks about femininities, noting that there is not as much research done overall on their

constructions (although a fair bit is done on models of femininity in the mass media) — adding "you don't find the same patterns of femininity as you do of masculinity, because the overall position of men and women in the gender order is different, that's what feminism is about, because of the massive economic and political inequalities."

This, she said, invited greater flexibility and coping strategies on the part of women.

"I think there are different strategies women adopt in a situation where men have predominant power... then there will be different strategies that different groups of women adopt in response to that: some more combative, some more accepting or compromising."

She talks about the different ways ("interventions") being used to change patterns of masculinity to sustain more equal, less violent relationships with women.

"There's a lot of work that goes on about this, it doesn't attract much public attention usually, but there's work in the schools, there's work in development agencies, there are community programs around such things as violence prevention, that's one of the major areas of action, that are trying to change entrenched patterns, for instance domestic violence."

And she also credited the feminist community.

"Of course, a lot of feminist activity is trying to change patterns of interactions between men and women with the implied consequence that this may also change patterns of masculinity among men, as men and boys come to learn more democratic and respectful and equal ways of behaving towards women."

I asked her what actually works in changing these patterns. "That's very situational. What might work in a white suburb in Canada might not work in one of the cities of violence against women in Mexico, and what works or doesn't work there may or may not work in India. So I'm reluctant to say there's a one size fits all solution."

But there were commonalities, Connell said.

"Broadly, involving men in developing their own strategies for change is really important," and not only telling or ordering them to change. "Men themselves have to be engaged, boys have to be engaged in the process of changing gender relations. Often men will find it very interesting to do this, boys in schools want to learn about gender — it matters to them, it's important in their lives — so that kind of community education process I have a

Polare page 34 October-December 2011 reasonable amount of faith in."

She also noted the need to work with and about institutions, specifically those like the military, police and prison system, where a lot of gender-based violence comes from — or in cases of post-conflict/ rebuilding societies, to actually be designing the institutions from the ground up — to be gender inclusive, peaceable and respectful.

In terms of the required motivation or interest to engage in changing patterns, Connell called it an incremental process.

"We're dealing with a system of privilege and exclusion, and the people who benefit from that system are extremely unlikely to engage immediately in a large program of change... Even in fairly hierarchical and violent institutions, some people can see that the long-term survival or welfare of the system depends on something changing. To give another example, parents often want good gender education in the schools, because they know that the world their kids will be living in is different than the world they grew up in, and they want the best for their kid, not necessarily a reproduction of what they got from their parents."

There are different patterns of masculinity, Connell said, "And that tells you from the start that there will be different responses to any proposals for change."

In terms of where we are now, she believed many countries have experienced an intergenerational shift in the last generation towards attitudes that favour more equality between men and women.

"But there are also situations in the world where things have gone very badly wrong for women," she said, citing the new patriarchy being constructed in Russia, and horrendous amount of gender-based violence in parts of Mexico near the U.S. border.

"Things can go wrong as well as things can go right, so that's what makes the politics of gender both difficult and urgent."

Greg Macdougall is an educator, organiser and writer based in Ottawa. More of his writings and other good stuff can be found here.

This article was originally published at rabble.ca. A video of this interview is up on Youtube. Search for the title "Masculinities - Raewyn Connell interview at Women's Worlds 2011" (or linkhttp://www.youtube.com watch?v=1U03DIXQfo8)

### 12th Social Research Conference on HIV, Hepatitis C and Related Diseases

### 12-13 April 2012

Silence & Articulation

What can and can't be said about HIV, hepatitis C, drug use and sexual practices?

What is emphasised and what is muted?

What is seen as acceptable and unacceptable?

What do such silences and articulations achieve and why?

Keynote speakers:

John Della Bosca, Former NSW Special Minister of State, 199-2006, National Campaign Director, National Disability Insurance Scheme Professor Jane Ussher, Director, Psyhealth: Gender, Culture and Health Research Unit, School of Psychology, University of Western Sydney

Associate Professor Alison Ritter, Director, Drug Policy Modelling Program, Faculty of Medicine, University of NSW.

John Godwin, HIV, law and development Consultant Member, Legal Working Group, Ministerial Advisory Committee on Blood-borne Viruses and STIs

**Abstracts** can be submitted for oral presentations only. There will be no poster presentations or workshops. Please contact the conference organisers if you wish to propose a conference symposium. All abstracts are to be submitted online. Please see the conference website: http://nchsrconference2012.arts.unsw.edu.au for specific instructions on abstract submission.

Fees: Early-bird (before 13 Feb. 2012): \$350.00 / Student: \$275.00 / Day pass: \$225 / Full fee: \$425

**Information:** Conference Organising Committee, NCHSR, Faculty of Arts and Social Sciences, University of NSW, NSW, 2052. **Email:** nchsr@unsw.edu.au. **Tel.:**+61 (0)2 9385 6776 **Website:** http://nchsrconference2012.arts.unsw.edu.au **Venue:** Kensington Campus, University of NSW, Sydney, Australia.



National Centre in HIV Social Research



#### 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.

**October-December 2011** 

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#### 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 (02) 9569.2366 Tel: (02) 9569.1176 Fax: coordinator@gendercentre.org.au http://www.gendercentre.org.au For after hours counselling contact Lifeline on 131 114 or the Gay and Lesbian Counselling Service 5.30pm-10.30pm seven days on

(02) 8594 9596 1800 105 527

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

#### 2010 - TWENTY10/GLBT YOUTH SUPPORT

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

PO Box 553, Newtown, NSW, 2042 Youth callers needing help: Sydney local: (02) 8594 9555 Rural NSW : 1800.65.2010 All other callers: (02) 8594 9550 Fax: (02) 8594 9559 Email: info@2010.org.au Web page: www.twenty10.org.au

#### ACON - AIDS COUNCIL OF NSW

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

2010 PO Box 350 Darlinghurst NSW 1300

A CON	
tty:	(02) 9283 2088
Fax:	(02) 9206.2069
Tel:	(02) 9206.2000
1500	

#### 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

### **Directory Assistance**

#### ACON -MID-NORTH COAST

 Shop 3, 146 Gordon St

 Port Macquarie NSW 2444

 Tel:
 (02) 6584 1163

 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

#### 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)9332.1090Fax:(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

#### CENTRAL TABLELANDS TRANSGENDER INFORMATION SER-VICE

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

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

(CSN) COMMUNITY SUPPORT NETWORK

Transport and practical home based care for PLWHA. Volunteers welcome. Training provided. Sydney Mon-Fri 8.00am-6.00pm 9 Commonwealth St, Surry Hills Tel: (02) 9206.2031 (02) 9206.2092 Fax: csn@acon.org.au PO Box 350 Darlinghurst NSW 1300 Western Sydney and Blue Mountains Mon-Fri 9.00am-5.00pm Tel: 9204 2400 Fax: 9891 2088 csn-westsyd@acon.org.au 6 Darcy Rd, Wentworthville, 2145 PO Box 284, Westmead, 2145 Hunter Mon-Fri 9.00am-5.00pm Tel: 4927 6808\Fax 4927 6485 hunter@acon.org.au 129 Maitland Road, Islington, 2296 PO Box 220, Islington, 2296 MacKillop Centre - Hunter Training and development opportunities for PLWHA Tel: 4968 8788 Illawarra Mon-Fri 9.00am-5.00pm Tel: 4226 1163:Fax: 4226 9838 illawarra@acon.org.au 47 Kenny St, Wollongong, 2500 POB 1073, Wollongong, 2500 **Mid North Coast** Outreach project: by appointment Tel: 6584.0943 Fax: 6583.3810 4 Hayward Street, Port Macquarie, 2444 POB 1329, Port Macquarie, 2444 **HIVAWARENESSAND HIV** 

#### AWARENESS AND SUP-PORT

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

### **Directory Assistance**

#### 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 mail@ftmaustralia.org

#### GAYAND LESBIAN COUNSELLINGSERVICE OF NSW (GLCS)

A volunteer-based community service providing anonymous and confidential telephone counselling, support, information and referral services for lesbians, gay men, bisexual and transgender persons (LGBT) and people in related communities.

Counselling line open daily from 5.30pm-10.30pm daily (02) 8594 9596 (Sydney Metro Area - cost of local call, highe for mobiles) 1800 184 527 (free call for regional NSW caler only) Admin enquiries: (02) 8594 9500 or admin@glcsnsw.org.au website: www.glcsnsw.org.au

#### HOLDEN STREET CLINIC

Sexual Health Clinic is staffed by doctors, sexual health nurses, a clinical psychologist and an administration officer. Mon, Tue, Wed. 9.00am-5.00pm (closed 12.15pm-1.00pm forlunch) Men's Clinic Thursday evenings 5.00pm-8.00pm Appointments preferred (02) 4320 2114 Ground Floor 69 Holden St, Gosford 2250 Tel:(02) 4320 2114 Fax: (02)4320 2020

#### INNER CITY LEGAL CENTRE

Available to discuss any legal matter that concerns you. Ph: (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

### KIRKETON ROAD CENTRE

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)Sundays PO Box 22, Kings Cross, NSW, 2011 Tel: (02) 9360 2766

Fax: (02) 9360.5154

#### LES GIRLS CROSS-DRESSERS 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

MCC Sydney is linked with MCC churches in Australia as part of an international fellowship of Christian churches with a secial concern for any who feel excluded by established religious groups. MCC deplores all forms of discrimination and oppression and seeks to share God' unconditional love and acceptance of all people, regardless of sexual orientation, race or gender. 96 Crystal St, Petersham, 2049 Phone (02) 9569 5122 Fax: (02) 9569 5144 Worship times: 10.00 am and 6.30 pm office@mccsydney.org

MOUNT DRUITT SEXUAL HEALTH CLINIC

http://www.mccsydney.org.au/

Provides free, confidential and respectful sexual health information, assessment, treatment and counselling. Tel: (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 USERSAIDS ASSOCIATION

A peer-based community organisation providing education on safe injecting, safe using and safe sex. Information on services for injecting drug users. Free needles, swabs, water, spoons, condoms, 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 Street, Surry Hills, 2010

PO Box 278, Darlinghurst, NSW, 1800 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 LIV-ING WITH HIV/AIDS)

PO Box 831, Darlinghurst NSW 2010 Tel: (02) 9361.6011 Fax: (02) 9360.3504 http://www.plwha.org.au/ Katoomba: P.O. Box 187 Katoomba NSW 2780 Tel: (02) 4782.2119 http://www.hermes.net.au/plwha/ plwha@hermes.net.au

#### **POSITIVE WOMEN**

Can offer one-on-one support for HIV positive transgender women. Contact Women and AIDS Project Officer or Women's HIV Support Officer at ACON. Tel: (02) 9206 2000 http://www.acon.org.au/education/ womens/campaigns.htm

#### REPIDU

Resource and Education Program for Injecting Drug Users Mon - Fri, 9am - 5pm Sat & Sun, 1 - 5 Deliveries Tue, Fri 6 - 9 103/5 Redfern Street, Redfern, NSW, 2016 (Redfern Community Health Centre, enter via Turner Street) Tel: (02) 9395 0400 Fax: (02) 9393 0411

#### RPASEXUALHEALTHCLINIC

provides a free and confidential range of health, counselling and support services. Ph: 9515 3131 [See p. 26]

#### SAGE FOUNDATION (Sex and Gender Education Foundation)

A voluntary lobbying organisation made up of gender variant people to lobby the government to ensure equal treatment in all respects of life. Sage is non-profit. All welcome. Ph: 0421 479 285

Email:

SAGE\_Foundation@yahoogroups.com SEAHORSE SOCIETY OF NSW

The Seahorse Society is a non-profit self-help group funded by members' contributions. Open to all crossdressers, their relatives and friends. We offer discretion, private monthly social meetings, outings, contact with other crossdressers, a telephone information service, postal library service and a newsletter. PO Box 168,Westgate,NSW 2048 or Tel: 0423125 860 www.seahorsesoc.org crossdress@seahorsesoc.org

#### SOUTH COAST of NSW from

Ulladulla to the VIC Border. We are a group of like-minded people trying to establish a social and support group. Jen Somers, Sexual Health Counsellor, Narooma Community Health Centre, Marine Drive Narooma, NSW 2546 Tel: (02) 4476.1372 Mob: 0407 214 526 Fax: (02) 4476 1731 jenni.somers@sahs.nsw.gov.au

#### (SWOP) SEX WORKERS OUTREACH TRANSGENDER SUPPORT PROJECT

Provides confidential services for 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

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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)

#### SMDNEYSEXUAL 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



AGENDER AGENDA is a nonprofit 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

### AIDS ACTION COUNCIL OF 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
 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**

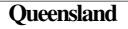
Northern Territory

#### NORTHERNTERRITORY AIDS & HEPATITIS COUNCIL

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



#### (ATSAQ) AUSTRALIAN TRANSGENDERIST SUPPORTASSOC. OF OLD.

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

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) SELF HEALTH FOR QUEENSLAND WORKERS IN THE SEX INDUSTRY

Provides a confidential service for trannies working in the sex industry in Queensland. Offices in Brisbane, Gold Coast and Cairns. Also has an exit and retraining house for sex workers wanting to leave the sex industry. PO Box 5649, West End Qld 4101 Tel: 1800 118 021 Fax: (07) 3846 4629 Email: sqwisib@sqwisi.org.au

#### Andrejic Arcade, Suite 32,

55 Lake Street, PO Box 6041, Cairns, Qld, 4870 Tel: (07) 4031 3522 Fax: (07) 4031 0996 Email: sqwisic@sqwisi.org.au Level 1 Trust House 3070 Gold Coast Highway, Surfers Paradise, Qld, 4217 PO Box 578, Surfers Paradise, Qld 4217 Tel: 1800 118 021 Fax: (07) 5531 6671 Email: sqwisigc@sqwisi.org.au Level 3 Post Office Arcade Flinders Street, Townsville, Qld, 4871 PO Box 2410, Townsville, Qld, 4810 Ph: 1800 118 021 Fax: (07) 4721 5188 Email: sqwisit@sqwisi.org.au

### **Directory Assistance**

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

#### SHINE-SEXUAL HEALTH

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

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

#### (SATS) SOUTH AUSTRALIAN TRANSSEXUAL SUPPORT GROUP

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

SATS C/o PO Box 907 Kent Town SA 5071 or the Gay and Lesbian Counselling Service (Gayline) on: (08) 8422 8400 or country on 1800 182 223 or Sarah on 0409 091 663 or www.tgfolk.net/sites/satsg/hrt.html email: satsgroup@yahoo.com.au

#### Tasmania

#### WORKING IT OUT

Tasmania's sexuality and gender support and education service providing counelling and support, mentoring for lesbian, transgender and intersex (LGBTI) Tasmanians and education and training programmes to schools, workplaces, government and non-government 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

#### **FTM PHALLOPLASTY** 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 phalloplasty as performed by the Monash Medical Centre Gender Team.

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

#### **GENDER AFFIRMATION 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/gaal1

#### 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



#### 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

#### **Issue Eighty-Nine**

#### **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** FOUNDATION FOR ANDROGYNOUS STUDIES (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 08. 9227 9606 Fax:

#### **PYCIS**

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 professionals.

#### TRANSCOMMUNITY WA

We provide peer support for, information resources about, and advocacy on behalf of, people who are transitioning, are planning to transition, or have transitioned. We also organise discreet social events at which significant others and supporters of our membership are welcome.

Contact Lisa on 0427 973 496, email lisasonau@yahoo.com.au

#### TRANSWEST: THE TRANSGENDER ASSOCIATION OF WESTERN AUSTRALIA (INC)

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

#### TRUE COLOURS PROGRAM

1st floor, Trinity Buildings, 72 St Georges Terrace. PERTH, WA, 6000 Ph: (08) 9483 1333 Fax: (08) 9322 3177 Email: *jaye.edwards@unitingcarewest.org.au* Web: *www.unitingcarewest.org.au* The True Colours program aims to promote safe and inclusive rural and regional communities where

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 WA

Service for people with blood-borne diseases such as Hep C and HIV/ AIDS. This service is for people with issues such as health problems, relationships, medica-tion 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 member-only access. There is also a large archive of related material available for education and research purposes.

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

#### **CHANGELING ASPECTS**

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 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: www.trucolours.org.au Email: Mail@truecolours.org.au

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#### City

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170 Victoria Road, Drummoyne 9719 1391



www.permanence.com.au

PERMANENCE

The permanent hair removal specialists Polare page 41 **October-December 2011** 

# The Permanent Solution...

For those who are embarking on the transition from male to female, the permanent removal of hair is vital. However, with so many clinics and procedures to choose from, it's crucial that your chosen solution is reliable, safe and <u>permanent</u>.

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Galvanic electrolysis is a scientifically proven technique that is effective no matter what type of hair you have, and no matter what colour skin. It works perfectly, even if you have blonde or grey hair. However if you have dark hair this can be treated by laser or IPL, or in many cases a combination to achieve a true permanent result.

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Polare page +2 October-December 2011



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