

Polare



*Harry Crawford
aka
Eugenia Falleni*

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

**Edition 95
April-June 2013**

THE QUEER 101

THE DOWNLOW ON GENDER, SEX & SEXUALITY*

* A super simple comic guide

Queer is a word I like to use.

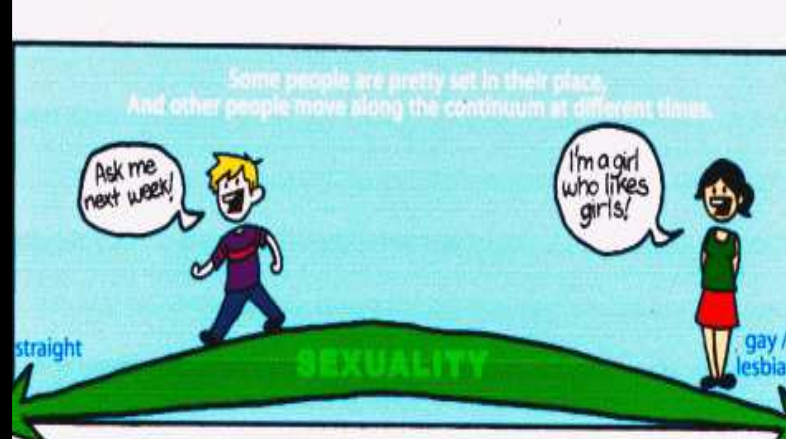
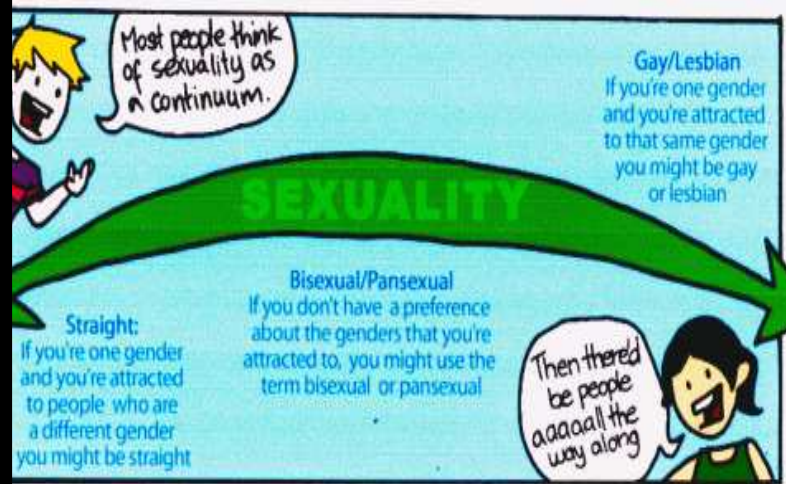
But not everyone does, & that's cool!

omnisexual, pan, trans, gay, lesbian, bisexual, asexual, curious, camp, intersex

It's an umbrella term used to describe sexuality & gender/sex identities.

SEXUALITY: is all about who you're into.

It could be who you feel romantic, sexual, or curious towards... or who you don't!

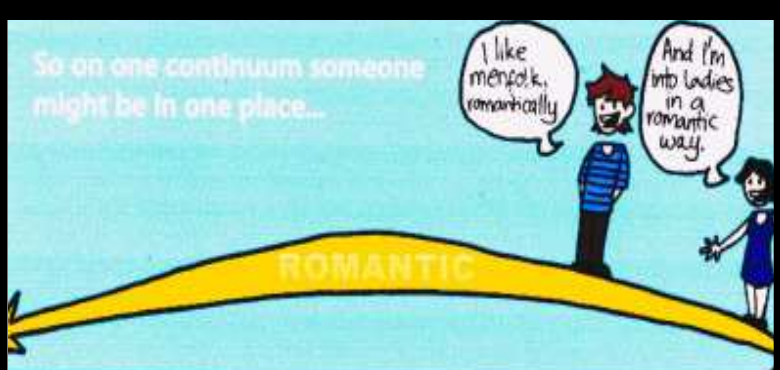


And it's WAY more complex than just that!

...that is one reason why continuums aren't the be all and end all.

We can break down sexuality a little further...

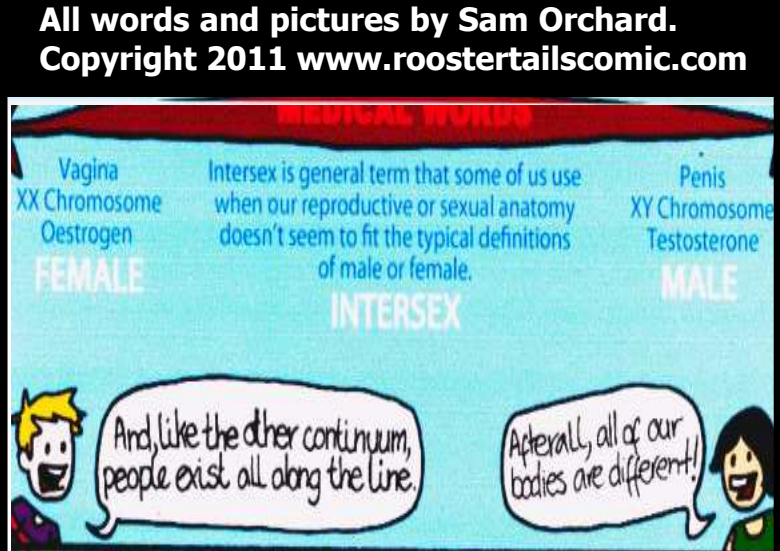
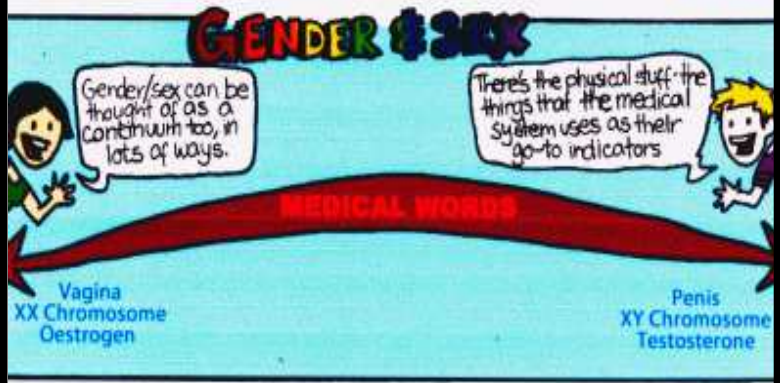
these continuums describe types of attractions within sexuality

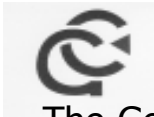


Sexuality words are all about who you like.

gay
straight
bisexual
lesbian
pansexual
omnisexual

These last 2 take into account that there're more than 2 genders. Leading us into





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 human rights and ensures respect and confidentiality.

the Gender Centre

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



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Petersham

NSW 2049

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(9-4.30, M-F)

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reception@gendercentre.org.au

Website:

www.gendercentre.org.au

**The Gender Centre is staffed
9am-4.30pm Monday to Friday**

Our Services

- Support and education
- Social and support groups
- Drug and alcohol counselling
- Quarterly magazine *Polare*
- HIV/AIDS information
- Condoms and lube
- Needle exchange
- Accommodation
- Referrals to specialist counselling, medical, HIV/AIDS, education, training, employment, legal welfare, housing and other community services
- Outreach - street, home, hospital and jail
- Counselling and support groups for partners and family

Residential Service

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

Cover: Harry Crawford, an FTM who lived in his male gender role for more than twenty years in Sydney during the early part of the Twentieth Century. Harry married twice and had sexual relations with a number of women, including his wives, without revealing his assigned gender. This *Polare* contains a review of a recently published book about Harry Crawford (*Eugenia; a true story of adversity, tragedy, crime and courage*, by Mark Tedeschi, QC) and a related essay by Kerry Behrendt.

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 face- to-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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- ◆ Create mutual trust and respect
- ◆ Have a positive role model
- ◆ Develop life skills

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Advocacy Network (WIPAN)

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Mobile: 0415 454 770

Email: mentoring@wipan.net.au

Website: www.wipan.net.au

Having a MENTOR has changed my life
... my FUTURE is BRIGHTER than ever!

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kerrie behrendt, anthony carlino,

REGULAR

- 6** Editorial by Katherine Cummings
- 19** News Items of Interest
- 20** Gender Centre Events, Workshops,
Activities January-December 2013
- 21** Counsellor's Column by Anthony Carlino
- 40** More News Items of Interest
- 43-46** Directory

DEADLINE

for submissions to the next
edition of *Polare* is the
eighth of June 2013

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THE FINE PRINT

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FEATURES

- 9** Living and partly living: the sad life of Harry Crawford (*Eugenia* by Mark Tedeschi reviewed by Katherine Cummings)
- 13** Read This! It's important!
- 14** Speaking Personally by Marika
- 22** We've all been there! Go Beyond Blue!
- 25** A Personal Commentary on Harry Crawford by Kerry Behrendt
- 32** Queer 101: Trying to find who I am ... by Sam Orchard
- 35** FTM Testosterone Injection
- 36** Have Android. Will Travel. *Flight 404* by Simon Petrie, reviewed by Katherine Cummings
- 38** Government Health Care for Intersex, Transsexual, Transgender and Gender Diverse Australians

SERVICES & NOTICES

Inside front cover: Queer 101

- 4** Gay and Lesbian Counselling/ Women in Prison Advocacy Network
 - 8** SAGE (Sex and Gender Education)
 - 17** NSW Seahorse Society
 - 18** Needle Exchange/ Pay-It-Forward Binder Program/ FTM Australia
 - 20** The Carmen Rupe Memorial Trust
 - 24** GLBTIQ Forum 2013 (Marrickville Council)/Transtopia
 - 30** Over 55's Group/RPA Sexual Health Clinic
 - 31** Anti-Discrimination Board of NSW
 - 33** Transgender Anti-Violence Project/ OII
 - 34** Barbecues and Other Events
 - 41** NSW Seahorse Society
 - 42** Central Coast Transgender Support/ Inner City Legal Centre/Queensland Gender Centre
- Inside Back Cover: Queer 101 (cont.)



Some years ago, in the 1980s when I took my first tentative steps into the wonderful world (or unforgiving quagmire, I forget which) of transgender life, I came across a writer and transgender activist named Kate Bornstein. I first found

her by chance on a documentary made about Armistead Maupin, who wrote a series of charming columns for the *San Francisco Chronicle* called *Tales of the City*, a series that morphed into books and a television mini-series. The series included among its characters a number of gays and at least one transgender woman, a landlady named Anna Madrigal (anagram for *a man and a girl*).

The documentary included commentaries by a number of people who had been influenced by Maupin's work, and among these was Kate Bornstein, who had been influenced to the point of moving from the Eastern United States to San Francisco.

I was so impressed by Kate and her views that I contacted her and we had a warm and hilarious email correspondence for some months. I wish I had kept it all, but I remember one occasion where Kate foresaw the two of us rocking on the porch of the Retirement Home for Worn-Out Transgender Activists. I can think of worse endings.

Why am I telling you all this? Two reasons. One is the hope that you will visit your local public library or a bookshop and read the Maupin books and the other is because I love and admire Kate Bornstein and she is in trouble.

Her past has included Scientology, anorexia and Post Traumatic Stress Disorder, all of which she battled to a standstill, and lymphocytic leukemia which is ongoing. Last year she was diagnosed with lung cancer.

The good news is that her cancer is treatable. The bad news is that, American health care being what it is, she needs \$100,000 to pay the medical bills. In addition she will be unable to

work for some months after the treatment and will need money to pay the daily bills. Kate's friend, Laura Vogel, launched an appeal for funds on March 20. Donations from \$5.00 up have been solicited and it is a measure of the respect and love people have for this delightfully mad militant (who calls herself 'a queer and pleasant danger') that the first day the appeal was opened saw \$43,891 raised, and the first four days saw the total rise to \$85,495. If you know Kate, or her books have helped you



Kate Bornstein

think about donating. The url to look at if you'd like to throw in your \$5.00 or your \$10,000 is:

www.gofundme.com/2cxb6w

Kate is a non-stop activist with an open mind and a sense of humour that defies belief. She is quoted online on the topic of the appeal by the *Huffington Post's HuffPost GayVoices* as saying, "I thought, *Okay, I'm sure some people will respond*, but it's been non-stop. I never thought that would happen. I've lived all my life with low self-esteem [*ed. note. It didn't show, Kate*]. It's pretty much evident in everything that I write. It's how I know how to deal with sh*t. Seeing this, I'm having to deal with an emotion that I'm a freak and still have done a good job with my life. That's new for me."

The Gender Centre Library holds one or two of Kate's titles. We had more but there is a regrettable habit among some of our readers to think that books don't matter and that they can be kept or discarded rather than being returned for the next person in line. I have recently ordered Kate's autobiography, which is new, and intend to order *Hello, Cruel World*, which

us; My Gender Workbook, how to become a real man, a real woman, the real you or something else entirely; Hello, Cruel World; 101 alternatives to suicide for teens, freaks and other outlaws; Gender Outlaws, the next generation and A Queer and Pleasant Danger

deals with suicide, the pervasive cloud that so frequently darkens our world.

This issue contains a slightly higher proportion than usual of FTM material. There is my review of Mark Tedeschi's fine book on Harry Crawford, who started life as Eugenia Falleni. The book is called *Eugenia*, as was its 1988 predecessor by Suzanne Falkiner. It is a measure of the extraordinary power of Harry's story that it has prompted two books within such a relatively short time. There is also an essay by Kerry Behrendt that deals with the same theme and the effect Tedeschi's book had on Kerry.

There is a contribution from Michael Munson of FORGE, on the self-injection of testosterone and a delightful graphic take on sex and gender terminology by Sam Orchard, an FTM Kiwi who has a great web page at:

www.roostertailscomic.com

I unreservedly apologise to Sam for having to distort his fine comic (graphic essay?) to fit it into the format of *Polare*, but I very much wanted to include the whole work in such a way that it would appear in colour for both those who get the printed version and those who take the pdf. So I have squashed the work into the two inside covers and although I do not actually advocate the vandalism of *Polare* I would try to be understanding for those who remove the cover



Sam Orchard as the world sees him

carefully in order to place the opened pages of Sam's work on a noticeboard. I know I will have it on the pinboard above my desk. Of course the original version in its proper aspect-ratio can be found on the Internet and printed off by those with the resources to do so. There are other works there by Sam and I recommend his work unreservedly. One of the best things about Sam's take on

terminology is that he is not prescriptive. He recognises the fact that some people will accept his viewpoint and others will have their own opinions. What is important is that we define our terms before we try and justify them.



Sam Orchard as he sees himself

I hope that we will see more of Sam's work in *Polare*. He has a gift for words and a mordant take on life I find extremely engaging, in addition to his sense of humour and his artistic skill.

Sam is a talent to watch and a role model for young FTMs everywhere.

Marika's column in this issue raises a question that seems to raise its very ugly head far too often. She was at a Gender Centre meeting recently where one of those present played the

"I'm better than you are" game to the extreme point of telling an intersex member of the group that intersex does not belong in the Gender Centre.

I know, I have been through this before but apparently some heads (and

hides) are thicker than others.

The Gender Centre does **not** recognise a pecking order among those with gender issues. We stand ready to help in any way we can those who have gender issues whether they are transgenders, intersex, androgynes, transsexuals, transvestites, pre- or post-op, drag queens or simply gender questioning. We do not care if they are eighteen or eighty. We do not care if they are full-time or part-time. We do not care if they refuse invasive surgery. We do not care if they have gone from F to M or from M to F or indeed, as one of my friends in the United States

Excerpt from Gender Centre Mission Statement

We make a difference: we are committed to developing and providing services and activities which enhance the abilities of **people with gender issues** to make informed choices, we are committed to achieving this with fairness and integrity. We aim to provide a high quality service which acknowledges human rights and ensures respect and confidentiality.

We help: we are committed to educating the public and service providers about the needs, concerns and interests of **people with gender issues**.

Issue Ninety-Five

has done, gone from M to F, gone back to M and is now F again. Any combination of the alphabet soup that paradoxically stirs us rather than *vice versa applies*, since they all suggest **gender issues**

We **do**, however, care if any of our clients try to bully or harass other clients who come to us for help.

The Gender Centre has come a long way since it was established as a refuge for homeless transgenders and was later transformed into a halfway house for transgenders coming from jail and/or drug dependence.

We have broadened our views, moved with the times and now recognise a different set of responsibilities and supply many more services to many more segments of our society. Note that we are not the Transgender Centre, and never were. We are the Gender Centre.

Have a look at the Gender Centre's Mission Statement if you need further exposition. I include a segment from that Statement confirming some of what I have been saying.

The emphases in the quoted section are mine. The full Mission Statement can be found in the pamphlet titled *The Gender Centre Inc.* which is available in print form from the Gender Centre and appears on the web page in the Resources section.

There should also be a questionnaire from the Over-55s Group with this issue. If it applies to you, please complete and return it. There will be a version of the same questionnaire on the web page.

The Over-55s Group hopes to attract more members by making itself more relevant and interesting and they can only do so if you help them to do so. This Group is lively and mature and several of the members are outstanding contributors to the efforts of the Gender Centre.

To finish on a note of hope, at last the Federal Government is coming aboard and in this issue you will find a request for submissions concerning the laws that apply to sex and gender.

I urge you to have your say. It is the best way to achieve change and far more effective than marching and chanting in the streets. The

deadline is April 19, so don't take too long thinking about it.

There are excerpts from the Internet document that appeals for submissions in this issue. The complete document is too long for me to print here (eleven pages) but you should get the flavour and the purpose of the initiative from the sections quoted and the full document is easy to find on the Internet. I hope you will respond.

Katherine



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!

Living and Partly Living: the sad life of Harry Crawford.

[Eugenia, a true story of tragedy crime and courage, reviewed by Katherine Cummings]

A biologically female but innately male-gendered child was born into the Falleni family in Italy in 1875. Christened Eugenia, he was brought up in Wellington after his parents emigrated to New Zealand in 1877. Harry showed his innate gender very early and was seen as a tomboy by his family. He would dress as a boy and play the rough games of boys. By the time he was fifteen he had run away from home at least once and at nineteen went through a forced marriage, a marriage that failed almost instantly when the husband was revealed as a bigamist and fraud.

Harry adopted the guise of a young man and took the name Eugene and tried several times to obtain employment as a male, but these attempts invariably foundered when he was recognised by an acquaintance or otherwise had his masquerade exposed. As a result he came in conflict with the law, and his family reached a point where he was no longer welcome as part of the Falleni family.

He finally cut his family ties for ever by running away to sea in male guise at the age of twenty-one. He apparently performed creditably as an ordinary seaman on a merchant sailing vessel. Sadly his biological gender was discovered and the young man trapped in a biologically female body was raped repeatedly and forced ashore in Newcastle, NSW, destitute and pregnant.

These are the basic facts that set up the life of Harry Crawford. First, the knowledge from an early age that he was not female, despite his anatomy and forced socialisation, and second, the fact that he could, given the right circumstances, succeed in living the life he craved as a man. A verbal slip had betrayed him on the barque he had served on, and he would be more cautious in the future.

These are the basic building blocks from which Harry built his life, and the same blocks have been used by Mark Tedeschi, who became fascinated by Eugenia/Harry and has used the elements of Harry's life to create an absorbing

and challenging book that not only tells us much of Harry and his difficult life, but also supplies a clear-eyed view of Sydney and Australia as they were in the first third of the twentieth century.

The social and historical milestones of Harry's life are cleverly underscored by tagging some of the important dates with historical footnotes, such as the invention of wireless (1897), the sinking of the Titanic (1912), the zeppelin bombing of London (1917) and the opening of the Panama Canal (1920) and by providing brief biographical sketches for key characters in Harry's life story.

Perhaps the most fascinating aspect of the book concerns Harry's trial for the murder of his first wife, Annie Birkett. Mark Tedeschi's documented view is that if Harry were being tried today, given the same witness list and the same evidence, he would, in all probability, be acquitted, not because he was necessarily innocent, but because the evidence was inconclusive and certainly not beyond reasonable doubt. Tedeschi knows what he is talking about. He is, after all, Senior Crown Prosecutor for the State of New South Wales.

Returning to Harry's younger days, he appears to have been a typical working-class man in the Sydney of his time. Having little or no formal education (he could neither read nor write) he fell back on skills acquired in his youth, mainly centred around the care and use of horses. He appears to have had considerable skill as a driver of horse-drawn transport and this skill and his willingness to work hard at manual labour meant he could usually rely on finding employment.

His non-working hours, too, seem to have been typical of the time. He drank to the point of drunkenness, he swore, he treated women and children with a degree of violence that



Mark Tedeschi AM QC

was probably normal for a man of his time and social station. He appears to have been popular with women and, thanks to a skilfully crafted strap-on dildo, and his insistence on intercourse in the dark and under rigidly controlled circumstances, he indulged in sexual acts with a number of women, including his wives.

Harry's first wife, the aforementioned Annie Birkett, had a son by a previous marriage, and her son, also named Harry, appears to have accepted Harry as his stepfather without the kind of rebellion that is common among modern teenagers. When Annie disappeared from the scene, young Harry seems to have accepted the story that she had gone off with another man.

It is amazing that Harry Crawford managed to convince virtually everybody that he was male, despite having no support from a peer group and no medical modification of his physical anatomy. We know that he bound his breasts, as many FTMs do in the early stages of their transition, but he had no knowledge of hormone therapy, nor the surgical procedures that might have assisted him in living as a male. To have lived among working men without being able to strip to the waist, to conceal his monthly periods not only from his friends and fellow-workers but also from his wives, to feel the social pressure of constantly needing to be on the *qui vive* against a careless word or reminiscence, and the necessity to ensure that nobody from his past life as Eugenia was going to betray him, must have placed him under tremendous stress. In all probability he spent much of his life, perhaps all of it, believing that he was unique in the history of the world, with a dark secret he could not afford to tell to anyone in the medical profession or any other possible confessor and guide, such as a priest.

It is no wonder that the pressure reached a level where he needed to tell someone about himself, in addition to the woman who had raised his illegitimate daughter, Josephine,

and knew that he was transgendered, although the medical profession at that time preferred to lump homosexuals, cross-dressers and those with physical sexual anomalies as 'inverts', suggesting that they were perversions of normality, rather than a statistical variation within a larger group.

We will never know the full circumstances of the death of Harry's first wife, Annie. We know that she had been told by an interfering neighbour that Harry was not all that he seemed to be, and we know that Harry and Annie went on a picnic to Lane Cove River Park, from which only Harry returned. Annie died in the park, but there is not enough evidence to tell

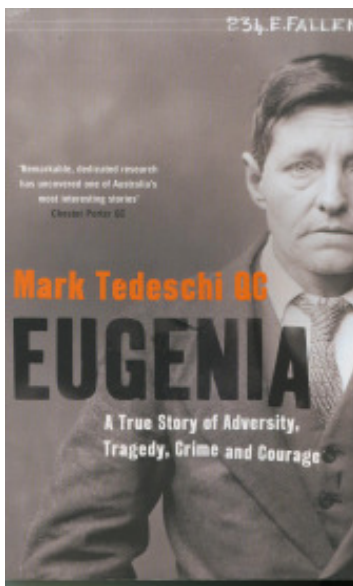
whether she died as a result of premeditated murder; from an act of unplanned violence that resulted in death; or by simple misadventure.

It does seem probable that Harry tried to dispose of the body by burning it, and again we do not know if this was the result of pre-planning or a panicked reaction to a belief that her death would be called murder, and he would be blamed.

When Annie's body was first found she could not be identified, despite police attempts to have

witnesses come forward, and one conclusion was that she might be a homeless and mentally disturbed woman who had been seen in the area and could have stumbled into the fire under the influence of alcohol.

It was not until three years later, when Harry had married Lizzie Allison, an office worker in a hotel where Harry was employed, that the identification of Annie's body was made and the police reopened the case with the almost inevitable result that Harry found himself charged with the murder of his first wife. The evidence was largely circumstantial as to the mode of Annie's death, but the revelation that Harry was anatomically female and that he had been concealing this fact for so long set off a furore in the press, who stirred up the public with lurid stories and images of the



“man-woman” that could only have been prejudicial to Harry’s case.

The papers also published numerous photographs of Harry, so that when the trial was being held and witnesses were claiming to have seen Harry in the Lane Cove River Park three years earlier, their evidence was suspect, to say the least.

Tedeschi handles the account of the trial with consummate skill, as one might expect. The events of the trial are presented in logical order, with informed comment on many aspects of the Crown case and the shortcomings of the defence.

Harry does not seem to have offered much of a defence beyond a denial of having murdered Annie, but one can only guess at the panic and despair that Harry must have been experiencing, as his life came apart and his hope of ever living a ‘normal’ life as Harry became ever more unlikely. Since his arrest he had been forced to present as female, and now this cruel punishment was almost certain to be extended to the end of his days.

Tedeschi makes it clear that Harry saw himself as completely male, despite his anomalous anatomy, and that he loved his wives sincerely



and pleased them as best he could with his home-made dildo. There may have been some concept of masculine power involved in the use of this arcane tool in the consummation of his couplings, but there is no doubt that the women enjoyed the experience, even if they were unaware of its genesis. Lizzie, in fact, was unable to believe

that Harry was “female” when he was arrested, assuring the police that not only had she had normal intercourse with him but that she was pregnant by him at the time of his arrest. This belief had been sparked by her having ceased to menstruate, a consequence, not of pregnancy, but of menopause. When she was finally convinced of the deception she chose to disappear from the scene and played no further part in Harry’s trial.

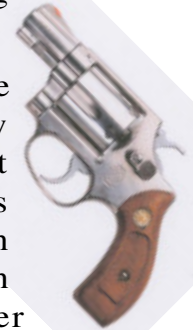
When the jury predictably brought in a verdict of guilty, Harry responded with one of his few contributions to the proceedings of the trial. When asked if he had anything to say before sentence was passed he said, “I am not guilty, your Honour. The jury found me guilty on false evidence. I know nothing about this charge.”

The mandatory death sentence was imposed, commuted a few weeks later to life imprisonment and Harry (who changed his name to Jean during his time in prison) was released on compassionate grounds after thirteen years. Release was conditional on “good behaviour” which clearly meant that he was condemned to life as a woman, as far as society was concerned. He died in 1938.

There are some odd details which deserve retrospective consideration. Harry was in possession of a revolver, which he had ‘liberated’ from an employer who had used Harry as a payroll guard. We are told that he fired it twice to see how it worked and that when it was found by the investigating detectives it still had two rounds in it. This probably means it was a five-shot revolver, similar to the one illustrated. It was sensible, when carrying a gun of this type, not to load the chamber in the firing position under the hammer. The pistol had no safety catch and it was possible if the hammer was jarred while resting on a cartridge, that the pistol would discharge accidentally.

But why did he keep two bullets? Did he foresee a day when he might want to commit murder or suicide or both? If he took Annie to Lane Cove River Park with the intention of murdering her, why did he not take the pistol with him?

Other questions are prompted by episodes that occurred soon after Annie’s death, Tedeschi suggests that Harry was so depressed and distressed that he wanted to kill young Harry Birkett, to save him from a predictable sad and empty life, and then to commit suicide. Harry took young Harry to the Gap, and



Issue Ninety-Five

climbed the safety fence, ostensibly to throw rocks into the surf from the cliffs above. He encouraged young Harry to join him and Tedeschi assumes Harry intended to grab young Harry and jump with him over the cliff. Of course, if one takes the blackest view of Harry Crawford's character one might equally well assume he simply wanted to murder young Harry and then claim the whole incident as a terrible accident. Young Harry sensibly refused to climb the fence.

Not long after, Harry took young Harry on an even more ominous excursion in a rainstorm, carrying a shovel. Arriving at a patch of bush in the Woollahra area, Harry started to dig a hole. Unbelievably, young Harry does not seem to have drawn the obvious conclusion from this bizarre behaviour, and even took his turn at digging. "How big do you want the hole, Dad?", I imagine him asking Harry. "Oh, I don't know, son ... how tall are you?"

This episode petered out when the hole and the shovel were abandoned, and the two men returned to their lodging, dishevelled, wet, and covered in sand.

I should emphasise that Tedeschi's book is what is nowadays rather disagreeably called 'faction', a work based on fact that incorporates assumptions and inventions by the author. An example of this occurs in the description of the hole-digging expedition where we are told that Harry intended to "hit the boy over the head with the shovel, and then, after making sure that he was dead, to bury him in this makeshift grave. After that, he was planning to get a tram to Gap Park where he would throw himself off the cliff." There is no way we could know Harry's thought processes and intentions without Harry having made a confession of some kind, and this is not cited.

Tedeschi is meticulous in observing the facts of the case when they are known, but he also records thoughts, attitudes and beliefs that do not seem to have been recorded anywhere, particularly in light of Harry Crawford's illiteracy, and the fact that much of the evidence arises from interviews held well after the events they record. As long as this supplementation of known fact is recognised

for what it is, it is not a weakness but rather a strength, as it makes the book more interesting and entertaining than if it were a bald statement of the few verifiable facts.

Near the end of the book there is a supplementary list of places associated with Harry's life and his marriages to Annie and Lizzie. Tedeschi has also found the unmarked grave where Harry Crawford was buried at Rookwood and is hoping to raise funds to place a headstone over it, partly from booksales and partly by conducting tours of these places of interest and raising donations. One place that has defied identification is the exact location in Lane Cover River Park where Annie Birkett died but this may yet be found and would then be part of any tour that might eventuate.

There are a few slight and unimportant errors in the book, such as the common mistake that the body of water East of the Gap is the Pacific Ocean whereas it is, according to the Hydrographic Board of Names, the Tasman Sea. There are also minor errors of grammar and some typos but what work do not have these?

The illustrations have been well chosen and are clear and informative. One mystery Mark Tedeschi has not been able to solve definitively for me ... Sir William Cullen, who presided over Harry's trial was admitted to the Bar in 1883 but did not complete his law degree until 1885. I queried this with Tedeschi and he verified the dates, but was unable to explain this apparent discrepancy to my satisfaction.

One final note. Mark Tedeschi came to the Gender Centre to address us on the topic of his book. He mentioned his intention to provide a marker for Harry Crawford's grave and I said, and truly believe, that his book is as fine a memorial as Harry could hope to have and that his story will live on in libraries and be preserved in people's memories in a more human way than visits to a graven stone in a remote cemetery could ever achieve.

Tedeschi, Mark, *Eugenia, a true story of adversity, tragedy, crime and courage*. Simon & Schuster, Cammeray, 2012. ISBN 978-19-220-5229-2

Australian Government Guidelines on the Recognition of Gender

This initiative of the Federal Government will allow those with gender issues to make a submission on the topic if they do so before 19 April, 2013.

There is an eleven-page Consultation Draft that you can read online or print off and this can be found by Googling "Australian Government Guidelines on the Recognition of Gender."

The goal of the guidelines is to:

a. develop a consistent sex and gender classification system for Australian Government records

b. develop a consistent standard of evidence for people to change gender or establish sex on personal records and

c. maintain consistent collection of sex and gender information across Australian Government departments and agencies.

Areas you might wish to comment on include the background for these guidelines, which is based, at least in part on the Australian Human Rights Commission 2009 report *Sex files: the legal recognition of sex in government documents and records*.

This report was considered unsatisfactory by many of those for whom it was devised, not least because of its silly main title. The new report looks as if it will be better informed and constructed.

Another area for comment is the use of sex and gender in Australian Government records. Three options are being put forward for nominating one's gender: M (male), F (female) and X (indeterminate/intersex/unspecified). Note that these nominations may affect one's

right to marry, depending, of course, on future amendments to the Marriage Act.

Another area that will be looked at is the provision of proof of sex and gender. The Guidelines suggest that the following will be sufficient evidence of sex and/or gender:

■ Gender Recognition Certificate from a Registered Medical Practitioner

■ Valid Australian Government travel document (e.g. valid Passport which specifies preferred gender) or

■ An amended State or Territory Birth Certificate specifying gender or a State or Territory Gender Recognition Certificate.

Note: Sex reassignment surgery and/or hormone therapy are *not* pre-requisites for the recognition of a change of gender.

Sex and gender information is only to be collected by departments and agencies when it is necessary.

Information held by government bodies that show the gender history of the person concerned will be held in strict confidence and only accessed where the gender history is relevant to a decision being made. Only one record is to be made for each person regardless of changes in gender or personal identity.

Departments and agencies are to record and monitor complaints or queries made relating to the recording of sex and/or gender information and should use the information recorded to address concerns and amend relevant policies.

Breaches of privacy may be referred to the Office of the Australian Information Commissioner. The Guidelines will come into force on the first of July 2013.

Speaking Personally by Marika

Looking back and remembering how difficult things were during the months following my reassignment in early August 2010, I sometimes have to shake myself to establish whether my present life and circumstances are nothing more than a wonderful dream.

The euphoria then, 'post-op', soon gave way to feelings of loss; the loss of my home and family, the loss of my studio and the end of a potential future at the University of Tasmania, to name but a few. Furthermore, my flat, although comfortable and beautifully situated on the lower slopes of Hobart's Mount Wellington, did little to assuage my feelings of isolation, loneliness and occasional bouts of extreme melancholia.

So.., when a former teaching colleague who'd moved from Tasmania to the NSW Central Coast suggested I should consider doing the same, I took her advice and spent that Christmas with her. With her help I soon found a place that seemed acceptable and, importantly, I could afford to rent.

By mid-January I had moved into my new Woy Woy home to await the arrival of my furniture and other personal effects. At first, the business of establishing a new home in a totally new environment was quite exciting and engaging. Although it didn't take me long to connect with neighbours and the local community in general, it was only a short while before the realisation hit me that what I really needed was access to advice and some basic guidance from someone qualified to help me avoid the occasional social pitfalls that were constant reminders of my past.

For the sake of brevity, suffice it to say that, via my GP and subsequently my counsellor, I made contact with the NSW Gender Centre some time around April/May 2011.

To those of you who've read some of my earlier articles, I realise the above may seem a little familiar. You're right, of course, but in the context of what I'm about to say it's important. So please read on..

During my association with the Centre, for almost two years now, there have been few occasions when I've missed a meeting, of either the Over 55s group or the Women's Group. Initially, my main interest was in learning from the diverse experiences and gender issues as related by

others and how they compared to my own situation.

It didn't take me long to realise how lucky I've been in many respects. The stories of unemployment, homelessness, violence, social and familial rejection, poverty and prostitution for survival soon had me thinking that all of this, interesting and often heart-rending though it may be, was of no real relevance to my personal experience. However, I've kept on attending to this day because, over time, many of the 'regulars' have become good friends. This to the extent that some of us will regularly get together at a home or a venue such as a club, cafe or some kind of public event like a fair or picnic.

In short, my continued attendance at the Centre meetings has been solely based on my friendships within the groups. Nothing at all to



Marika

do with gender issues.

This caused me, at a recent gathering, to make the thoughtless suggestion, instantly regretted, that future meetings should have more of a social focus, rather than an emphasis always on gender issues.

The suggestion was met with stunned silence, followed by an animated reminder, from newer members, that their reason for being there was entirely centred around gender issues and a need to share and discuss them. They were right, of course. I'd lost sight of what the meetings at the Centre are, and should remain to be, about. How foolish of me....

Nevertheless, the reality is that, in terms of social progress, I have moved some way since January 2011. Nowadays, I have as many good 'mainstream' friends as I do friends with a transgendered background and, frankly, in terms of social progress, I learn a lot more from the former, especially the genetic women.

My female friends, many of whom have followed my progress with great interest, are never slow to quietly take me aside for a little advice concerning my deportment or attire, my voice or general demeanour, make-up, hair-style and even 'feminine hygiene'....

I do expect that some of you, especially if you're still struggling with the conflicts associated with 'coming out' to yourselves, your family, friends and colleagues etc., will be aghast at such 'superficial' concerns, but I make no apology for this.

Think about it... Isn't being a party to unabashed 'secret women's business' something of an achievement? Call me deluded if you like, but I happen to think it is. It's this kind of affirmation that's behind my earlier statement that my present life often seems like a wonderful dream compared to what it was only

a couple of years ago.

It was, for a while, tempting to fall for the idea that, in terms of social security out and about, the companionship of 'trans' sisters should be the focus of one's life. Safety in numbers, so to speak. I soon discovered that it's only true if it's understood by all involved that it only takes one inappropriately dressed or loud individual to attract unwelcome attention. I've always strenuously avoided such people.

Purely recreational cross-dressers, I feel, have a place elsewhere. This is not to ignore the fact that, prior to coming out, such a venue may provide a safe environment for many genuinely transgendered people to briefly be themselves.

Unfortunately, I feel, it's this connection that can sometimes lead to unfortunate misunderstandings in the community at large... But, anyway, I digress..

When I was with a small group of mostly women friends recently, conversation turned to the pitfalls to be avoided on the first date with a guy.

This was largely in amused response to someone's recounting of a disastrous encounter through a dating site. Although (after a couple of bottles) it was all very light-hearted, it turned out to be surprisingly enlightening.

I thought I might share some of the collective 'wisdom' with you, albeit in somewhat condensed and less colourful language.... :

First meeting/date with a guy:

- Present with stylishly, un-provocative, femininity. (Unless you're after 'a bit of rough').

Issue Ninety-Five

- ❑ Discreet make-up only. This also applies to perfume.
- ❑ Allow him to hold doors or chairs for you, responding with an appreciative smile.
- ❑ Allow him, initially, to lead the conversation. Be impressed. Smile sweetly. Don't be tempted to counter his stories of success with your own. This is very male behaviour, and a dead giveaway. Give him a taste of your intelligence by your questions or humorous asides only. Laugh at any jokes only if you genuinely find them funny. If you don't, a quizzically raised eyebrow works wonders.
- ❑ Wait for him to demonstrate his genuine interest in you before volunteering anything personal. If he doesn't, things are not looking good in terms of a possible relationship.
- ❑ Avoid giving away too much at first, especially things you sense could be a problem. Concentrate on allowing your personality and sense of humour to shine through.
- ❑ At a restaurant, allow him to suggest wine or menu items, especially if it's a place he knows. Choose modestly and be mindful not to finish your meal before he does. Allow him to pick up the bill if you're comfortable with that.
- ❑ If things go 'pear-shaped' and you can see it's all a bit of a disappointment, don't extend the misery for any longer than necessary. Apologise sweetly and make your excuses. On no account leave your 'phone number.

- ❑ If, on the other hand, all goes well ... , good luck!

As some of you will know, as an ageing 'fem' lesbian, my interest in encounters with men (especially old ones!) is limited, so much of the above is irrelevant to me personally. Should the right 'boy' come into my life one day, however, who knows.....? And by the way, If you're a relatively young person, bear in mind that the above advice comes from women of a 'certain age'. Would you consult your mother before such an encounter? I wonder...

During the early years after coming out to family and concerned friends I was frequently cautioned to 'be careful' when out and about on my own, especially at night. This was often in terms of horror stories they'd read or heard about. It was nice to know they cared but they needn't have worried. I've always been physically quite able to defend myself and, besides, this was at the time when issues of gender variance were increasingly the subject of sensitive treatment in the popular press and visual media. Gender variance was losing its mystery and any kind of stereotyping was regarded as 'politically incorrect'. Consequently, with the passing of time, we are less likely to be regarded as deserving of prurient attention or, worse, ridicule. I'm not ignoring the fact that these things still happen occasionally and caution is always advisable but I think I'm right in observing that in recent years things have improved and continue to do so. It's certainly been so in my experience. But then, maybe I've just been lucky. I still receive warnings from my friends from time to time about my risk-taking ways.

Marika

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PARENTS OF TRANSGENDER
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The Gender Centre hosts 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. A clinical psychologist will co-facilitate these meetings.

A light supper will be available.

Contact Liz or Anthony on 9569 2366



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NSW Seahorse Society



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THE SEAHORSE SOCIETY OF NSW
 INC
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is a used binder service that provides used
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FTM Australia

2013

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
[www.ftmaustralia.org/resources/
torque.html](http://www.ftmaustralia.org/resources/torque.html)

OzGuys Discussion List

Our e-mail discussion list is called OzGuys.

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

Goals of the discussion list include:

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

For more information please visit
<http://groups.yahoo.com/group/ozguys/>

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

News Items of Interest

PRIMARY SCHOOL TEACHER FOUND DEAD AFTER NEWSPAPER ATTACK

Lucy Meadows, formerly known as Nathan Upton, transitioned from male to female with the knowledge and approval of her employers, St Mary Magdalen's School in Accrington, England. Parents had been informed and it appeared that the transition would take place smoothly.

A tabloid journalist wrote an article headlined "He's not only in the wrong body ... he's in the wrong job" and "So who did let Savile loose in the wards?" attacking the decision to allow Ms Meadows to continue her work as a primary school teacher. The reference to Savile clearly demonstrates a link in the journalist's mind between pedophilia and transgender, and his statement that "the school shouldn't be allowed to elevate its commitment to diversity and equality above its duty of care to its pupils and their parents" is misinformed and offensive.

Soon after the story appeared Ms Meadows was found dead, presumably a victim of suicide.

Headteacher Karen Hardman said of Lucy Meadows, "She was a greatly valued member of our staff and we send her family and friends our sympathy and prayers."

[See also the Counsellor's Column in this issue.]

MOVE TO ALLOW PARENTS TO DECIDE ON THEIR CHILDREN'S RIGHT TO GENDER AFFIRMATION PROCEDURES

The parents of male-to-female transgender child ("Jamie") are appealing against a Family Court decision made in 2012 that permitted her to have 'puberty blockers' but refused the prescription of estrogen. The parents claim that such treatments should not be among special medical procedures that require the approval of the Court.

A "public authority" has asked to be heard on this matter, as has the Australian Human Rights Commission.

Martine Delaney, of the Australian Coalition for Equality, said she could not understand why the court needed to be involved. "You would have to have a hell of a convoluted, strange

combination of parents, child and doctor to have a situation where the child was being forced to take these steps."

But Terri Kelleher, spokesperson for the Australian Family Association said it was a "fraught area" that should be overseen.

ARIZONA REQUIRES PROOF OF BIRTH-SEX BEFORE USE OF PUBLIC TOILETS

On 27 March 2013 an Arizona House committee approved a bill permitting business owners to demand proof of birth-sex from those wanting to use toilets provided for the public. This was in response to an ordinance passed in Phoenix that gave transgenders the right to enter showers, restrooms and locker rooms appropriate to the gender with which they identify. Transgenders protested at the hearings for the bill, expressing disgust at being forced to use "inappropriate" restrooms and other facilities and expressing fear at the thought of entering a male restroom while dressed female. One said, "What your bill attempts to do is sacrifice my personal safety for somebody else's sense of discomfort."

The original bill made it a crime to enter facilities inappropriate to one's birth sex. This has now been modified to allow businesses the choice of permitting or prohibiting transgender use of their facilities. The bill will proceed to the full house for a vote in the next few weeks.

MAINE ATHLETES CAN NOW PLAY IN THEIR GENDER OF CHOICE

The Maine Principals' Association has a new Transgender Participation Policy allowing transgenders to submit requests to their schools, with documents attesting to their new gender identities.

The school will then hold a confidential hearing and the request will be granted unless "the committee determines that it's not a *bona fide* or legitimate request, or if there is danger of an undue athletic advantage, or the risk of harm or injury to others."

The move is not in response specific requests. Dick Durost, of the MPA, says "It's simply an option for students who are transgender, have an interest in athletics and want to access the policy."

1.30pm		Feb 4, 25 Women's Group		Apr 29 Women's Group	May 27 Women's Group	June 24 Women's Group	July 29 Women's Group	Aug 26 Women's Group	Sep 30 Women's Group	Oct 28 Women's Group	Nov 25 Women's Group		
1.30pm	Jan 10 Over 55s	Feb 14 Over 55s	Mar 14 Over 55s	Apr 11 Over 55s	May 9 Over 55s	June 13 Over 55s	July 11 Over 55s	Aug 8 Over 55s	Sep 12 Over 55s	Oct 10 Over 55s	Nov 14 Over 55s	TBA	
5.00pm		Feb 20 Youth Group	Mar 20 Youth Group	Apr 17 Youth Group	May 15 Youth Group	June 19 Youth Group	July 17 Youth Group	Aug 21 Youth Group	Sep 18 Youth Group	Oct 16 Youth Group	Nov 20 Youth Group		
6.00pm	Jan 4 FTM Connect	Feb 1 FTM Connect	Mar 1 FTM Connect	Apr 5 FTM Connect	May 3 FTM Connect	June 7 FTM Connect	Jul 5 FTM Connect	Aug 2 FTM Connect	Sep 6 FTM Connect	Oct 4 FTM Connect	Nov 1 FTM Connect	Dec 6 FTM Connect	
6.00pm	Jan 14 Parents' Group	Feb 11 Parents' Group	TBA										



The Carmen Rupe Memorial Trust

The Carmen Rupe Memorial Trust (CRMT) is inviting transpeople with a passion for making a difference to join their Advisory Committee.

The CRMT is being established as a registered charity to further Carmen's interest in GLBTI education and social justice through philanthropy and community service. We are looking for talented, motivated people happy to work in a positive team environment to build an organisation capable of achieving great things in Carmen's memory.

The Advisory Committee will provide the Trustees with input on policy and strategy, will lead or coordinate projects initiated by the Trust, and will ensure the CRMT's decision-making processes are informed by the wider community through ongoing consultation. They are especially interested in hearing from members of the transgendered community, the wider GLBTI community and the Maori and Pacific Islander communities.

Former Gender Centre Counsellor, Elizabeth Riley, one of CRMT's foundation trustees, says:

"We're setting out to build a charitable organisation that will educate and empower transgendered people to take greater control of their own lives while helping others, ultimately to educate and engage the wider society in support of all gender-diverse individuals.

For further information please contact Kelly on 0452 454 965

The topic of bullying has been coming up quite a lot recently within the counselling practice at the Gender Centre. Having organised workshops for the both the Transtopia youth group in 2012 and more recently a similar one for the Women's Group, the topic has very much been on my radar.

It was with both despair and anger, then, that I recently read a story about a UK woman named Lucy Meadows. Ms Meadows, a school teacher, was previously known to her pupils as Nathan Upton, before deciding to transition.

The school was supportive and informed parents that Ms Meadows would be returning to work in 2013 as a woman. This was picked up by the media and received considerable media coverage. Much of the coverage was critical of her decision, questioning the impact on her students. One of the more uneducated and hateful pieces of writing was by a journalist, whose article, included the following:

"These are primary school children, for heaven's sake. Most of them still believe in Father Christmas. Let them enjoy their childhood. They will lose their innocence soon enough ... Nathan Upton is entitled to his gender reassignment surgery, but he isn't entitled to project his personal problems on to impressionable young children."

The transphobia and falsehood, in that paragraph alone, astounds. The writer is essentially stating that a transgender person working with children should not transition openly in the workplace lest the children lose their innocence. Innocence is one of those words used by individuals who fear something without understanding it, and loaded with emotion under the guise of 'protecting' children. In this instance the only person doing damage to children is the journalist.

His ignorant comments ignore the fact that children come into the world innocent, sharing none of the prejudices that we pick up along the way. Children are open and interested in different ways of being in the world and the prejudices they learn are learned from adults. The newspaper article supports removal of a woman strong enough to transition in the workplace, because she is transgender, from a job she is

reported to have done very well. This teaches children that there is something wrong with being transgender, and that transitioning should be done behind closed doors.

The article both shames and bullies Lucy Meadows. It also supports distrust for t r a n s g e n d e r s .

Apparently this is the writer's way of protecting a child's innocence.

The greatest tragedy in all of this is that Ms Meadows killed herself in March, 2013, .

Filling children's minds with hate is less the action of someone who has genuine concern for children than the action of using them as a platform for transphobic views. The journalist should explain how the need to discuss suicide and the death of their teacher protects their innocence, compared to the opening up of their minds to the truth of gender diversity in society.

Readers of this column know about transgender. Yet stories like this occur all-too-often and confirm the aggressive and damaging reinforcement of the gender binary in society. Lucy Meadows was a victim of bullying and the journalist was the assailant. In a fairer world that actually knows how to take care of people, he would be called to account.

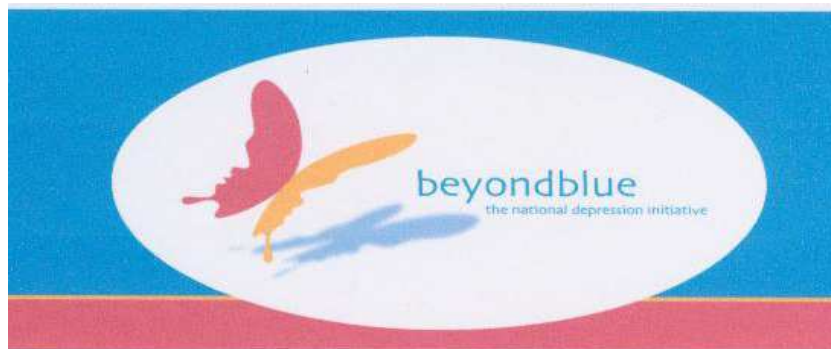
Ms Meadows' story is also a stark reminder of just how serious bullying can be. Many people mistakenly believe that verbal and emotional abuse are somehow less damaging than other forms of assault. Let me be explicit with my response to that belief - it is completely false and a number of suicides that take place due to verbal bullying is evidence of that fact.

Words can pierce like a knife or be a soothing balm to the soul. At the Gender Centre, clients are welcome to use the counselling service to talk about their own experiences of bullying and the possibility of moving past such traumas.



Anthony Carlino

Anthony



This page and the one following are excerpted with kind permission from FACT SHEET 40 of Beyond Blue. For more information on depression and anxiety, see the Beyond Blue web page at www.beyondblue.org.au or email: infoline@beyondblue.org.au

Transgender people

A recent survey of Australian and New Zealand transgender people found that almost 90 per cent had experienced at least one form of stigma or discrimination, including verbal abuse, social exclusion, receiving lesser treatment due to their name or sex on documents, physical threats and violence. Almost two-thirds of participants reported modifying their activities due to fear of stigma or discrimination. People experiencing a greater number of different types of discrimination were more likely to report being currently depressed. In an Australian survey of GLBTI people, around 60 per cent of transgender males and 50 per cent of transgender females reported having depression.

Intersex people

There are few studies of mental health in intersex people. Sources of psychological stress include confusion about sexual identity and gender roles, and treatment issues such as surgery at a young age, surgery without informed consent, and lack of disclosure from parents and health carers. The survey of GLBTI people found that around 60 per cent of intersex people reported having depression, and about 70 per cent of intersex males and eighty-five per cent of intersex females had seen a counsellor or psychiatrist during the previous five years.

WHAT IS DEPRESSION?

Depression is more than just a low mood - it's a serious illness. People with depression find it hard to function every day and may be reluctant to participate in activities they once enjoyed. Depression has serious effects on *physical* and *mental* health.

A person may be experiencing depression if, **for more than two weeks**, they have:

- felt sad, down or miserable most of the time

OR

- lost interest or pleasure in most of their usual activities,

AND experienced a number of these symptoms:

Behaviour

- Stopping going out
- Not getting things done at work
- Withdrawing from close family and friends
- Relying on alcohol and sedatives
- No longer doing things they enjoyed
- Unable to concentrate

Thoughts

- "I'm a failure."
- "It's my fault."
- "Nothing good ever happens to me."
- "I'm worthless."
- "Life's not worth living."

Feelings

- Overwhelmed
- Guilty
- Irritable
- Frustrated
- No confidence
- Unhappy
- Indecisive
- Disappointed
- Miserable
- Sad

Physical

- Tired all the time
- Sick and run down
- Headaches and muscle pains
- Churning gut
- Sleep problems
- Loss or change of appetite
- Significant weight loss or gain

WHAT IS ANXIETY?

Anxiety is a normal part of our lives. Anxiety disorders are different from occasionally feeling anxious or stressed - they are serious conditions that make it hard for the person to cope from day to day. There is a range of anxiety disorders. The six most common disorders are:

Generalised Anxiety Disorder (GAD) - GAD involves the person feeling anxious and worried on most days over six months or more.

Specific Phobia - When a person has a Specific Phobia, he/she feels very fearful about a particular object or situation. As a result, people may go to great lengths to avoid these objects/situations, making it difficult for them to go about their daily life. Examples include fear of having an injection or travelling on a plane.

Obsessive Compulsive Disorder (OCD) - OCD have ongoing unwanted/intrusive thoughts and fears (obsessions) that cause anxiety. These obsessions are relieved by carrying out certain behaviours or rituals (compulsions). For example, a fear of germs and contamination (obsession) can lead to constant washing of hands and clothes (compulsion).

Post-Traumatic Stress Disorder (PTSD) - PTSD may occur any time from one month after a person experiences a traumatic event (e.g. assault, accident, war, natural disaster). The symptoms can include difficulty relaxing, upsetting dreams or flashbacks of the incident, and the avoidance of anything related to the event. Although these symptoms can occur immediately after a traumatic event, PTSD is not diagnosed unless problems continue for more than a month afterwards. It can also have a delayed onset.

Panic Disorder - A person with Panic Disorder experiences recurrent panic attacks, which are intense feelings of anxiety associated with intense fear. These feelings are overwhelming and cannot be brought under control easily. Sometimes people experiencing a panic attack will think they are having a heart attack or are about to die.

Social Phobia - A person with Social Phobia has an intense fear of criticism, being embarrassed or humiliated, even in everyday situations (e.g. eating in public, public speaking, being assertive or making small talk).

COMBATTING HOMOPHOBIA AND TRANSPHOBIA

Depression resulting from widespread discrimination is preventable. Strategies to try to limit the impact include:

- government changes in legislation to ensure greater equality and policies which promote social inclusion for GLBTI people
- policies and programs in schools to address bullying and homophobic/transphobic language
- community education about sex, sexuality and gender diversity
- families, friends and communities supporting individuals during the time they are coming to terms with their sexuality, gender questioning or sex diversity

The *beyondblue* website, www.beyondblue.org.au has checklists that are quick, easy and confidential. They aim to help people reflect on their situation and see if they have symptoms of depression and/or anxiety disorder. Anyone with concerns should consult a doctor or other mental health professional for a full assessment.



GLBTIQ Forum 2013

Marrickville Council is hosting a forum to consult with the gay, lesbian, bisexual, transgender, intersex and questioning (GLBTIQ) communities to assist Council in planning relevant and responsive programs and services over the next twelve months.

- The forum will open with an expo of community groups and services including Twenty10, Headspace and Rainbow Babies.
- Comedian Brett Thorpe will share his story about the changing face of Marrickville.
- A facilitated community consultation will follow to enable sharing of information and ideas, to identify how Council can best support and advocate for the GLBTIQ communities.

You are welcome to attend all or part of the evening's activities.
Finger food will be served.

Date: Wednesday 15 May 2013

Time: 5.00pm - 9.00pm

Where: Alexander the Greta, 160-164 Livingstone Road, Marrickville
clcmi@marrickville.nsw.gov.au

Go to yoursaymarrickville.com.au/glbtqi_2013 to join the online discussion or to have your say if you are unable to attend the forum. For more information contact the GLBTIQ Project Officer, Ettianne Anshin, on (02) 9335 2143 or sop1@marrickville.nsw.gov.au

The Gender Centre & Aurora Foundation present:

Transtopia 2013

gender-questioning?
gender-queer?

Transtopia is a monthly group to be held over ten months in 2013 for transgender youth between the ages of fourteen and nineteen...

It aims to provide a safe, fun space for young people to connect with others, enjoy safe activities and talk about the issues affecting the trans youth of Australia.

For information call Anthony at the Gender Centre (02) 9569 2366

This book critique was sent to the members of my book group a week or so before we talked about 'Eugenia'. There were a few who already knew I am FTM and I discussed it with them first. We have a few older and rather conservative members and I was not sure about their reaction. But all went well. In fact, the one person I was most worried about was most supportive and asked many questions which are also attached. I made some slight modifications to the original to preserve some anonymity. KB

Eugenia By Mark Tedeschi

This book affects me personally and I was not sure at all what my comments would or could be to our group and I have agonised about this.

So here goes: I am, like Eugenia, a transsexual, although I do not like this term since it has connotations that might be considered unsavoury. Being trans has nothing to do with sleazy sex or sexual orientation.

Sexual orientation means being attracted either to the opposite or same sex partner and affects trans people just as it affects any other part of the population. But it can also complicate relationships immensely, as Eugenia's situation proved.

As to the sleazy bit, many people still associate transpeople with the red light district, drag shows and prostitution. And it has to be admitted that a number of transpeople can be found in this milieu. But this is not because they are specifically attracted to this. It is often caused by desperation; by drug taking to alleviate suffering and by problems of finding another source of income and leading a normal life.

It appears that female to male transpeople, like Eugenia and myself, tend to be less visible. Having been brought up and socialised as females and with the female hormones in our body to start off with, rather than being testosterone driven, we tend to 'pass' much more easily than male-to-female transsexuals. To pass means to become invisible as a transperson and lead a seemingly 'normal' life as Eugenia did for 22 years. That does not mean that female-to-male transpeople don't suffer just as much as their male-to-female counterparts; but they suffer in different ways, because of the way society functions.

The suicide rate among transpeople is still much above the average and I for one do not know

any transperson who hasn't thought about ending it all more than once and many have tried. I do know about transpeople here in Australia who did commit suicide, but I did not know them personally.

Matters have much improved since Eugenia's day. I feel confident enough to tell you about myself without fearing ostracism or being burned at the stake.

Let me make this very clear: this condition is not a life choice, one is born with it. I knew from about age three that I was somehow different.

I had immense problems with my mother about what a good little girl should be, I hated frilly pink outfits, hated dolls and basically was a tomboy. When I finished high school my mother did her utmost to marry me off, even without consulting me. It was one of the major factors that caused me to end up here in Australia [I am a migrant], to get away from her interference with my life. And yet, I do know that she actually meant well, that she tried to do the best for her wayward and strange daughter. Neither she nor I knew then what was affecting me. For many years I thought I was some unique freak, because I was not like other females. I did not want to get married and have children. I was not interested in good housekeeping, Princess Di and the latest summer fashions. I despised everything that *Women's Weekly* stood for, or at the least I found it boring.

And yet, as all of you in the book group know I married and still am married. This was because there was one big difference between Eugenia and myself and that is to do with sexual orientation.

I was not attracted to females, but to males. On the surface this meant I was 'normal' in the eyes of society, involved in a hetero relationship, but

For transpeople there usually comes a time when they cannot go on pretending to be what they are not, because it is a pretence, a role-play, makebelieve.

Issue Ninety-Five

this was only on the surface. I had problems with my female role. In particular when it came to the physical side of marriage, I hated to play the female part, it just felt wrong. But of course I did not have the body to do otherwise. And more importantly I thought that in order to have a loving and meaningful relationship with another human being this was the price I had to pay.

As it says in the Introduction to Eugenia: “she sought what almost all of us seek: love, acceptance, security, respect and connection with other human beings.”

Nowadays Eugenia might well have drifted into the lesbian community, as many female-to-male transpeople do in the first instance. But because I was not attracted to females, it took much longer for me to find my solution. I never stopped looking for an explanation of my strange feelings and eventually started to realise what my situation was around the mid to late 90s, when internet searching became available. But in my case it took until 2006 and much agonising before I made the decision to at least partially transition (testosterone and chest reconstruction).

What forced the issue was that I had severe menopausal problems including deep vein thrombosis from oestrogen. This eventually led to a hysterectomy which had nothing to do with my being trans. But it is hard to convey how I despised my female body during this time. And yes, I was depressed and suicidal. I was extremely lucky to find a very sympathetic social worker/counsellor who helped me through this.

Of course, it was an ordeal to have to tell my husband who did not take kindly to the situation. But we sorted it out and we both decided that we are far better off together than apart. We are very close friends and companions and it is the closest relationship both of us have with anybody. A relationship that lasts through transition is rare, many couples (including

lesbians) split up and the break is often acrimonious. The partner of a transperson usually feels betrayed. It is hard for them to understand that their companion is still the same person; the only difference being that now their true *gendered* self is openly expressed rather than being suppressed.

For transpeople there usually comes a time when they cannot go on pretending to be what they are not, because it is pretence, a role-play, makebelieve. There was always a part of me that hated it and I also hated myself for doing it, for going along with it. But I felt I had no choice, the alternatives were worse, in particular the fear of being an outcast, unloved and friendless, rejected by society.

For the sake of my husband's family and his parents in particular, I can't transition completely (grow a moustache, for example). It is not easy. I feel that I have to live with a split personality, a split identity. But it is much preferable to what I had to endure before.

This is also the real reason why I changed

my name. Kerry is unisex and it was the best I could do with my original given name for my new birth certificate in my country of origin. I told them I wanted to 'anglicise' my name. Transitioning is a mind-numbing fight with bureaucracy even now. He or she? Mr, Mrs, Ms. In my case none of the above (not yet). This is when I started to realise fully how gender restrictive our society still is, and how gender biased.

And lastly, all of this is the reason why I have problems finding a job, although I have tried TAFE, volunteering and university.

To end on a positive note: Ever since I made a start with transition I have felt so much more at ease with myself. All my friends and relations both here and in my home country who know about me have been very supportive about it and I am very grateful for this. I truly feared rejection



Harry Crawford (aka Eugenia Falleni) aged 53. Jail photo.

so very much, but society is getting better. There is more information available and prejudice and discrimination are receding and transpeople are not invariably seen as an aberration, unnatural and monsters as was the case in poor Eugenia's day.

If you have any questions for me, please don't hesitate to ask. The more people know and understand what it is like to live as a transperson, the easier it will be for us.

Following the book group meeting the questions below were sent to me by one of the group members, but others asked me similar questions. I provide these questions and answers as an example of what the non-trans community think about us when they are confronted with the real thing. My answers are in *italics*.

Gender identity:

In my head it took me a while to break the habit of automatically thinking of you as [my original first name] to thinking of you as Kerry. Would you now like us to think of you as a male? I hope you don't find this question offensive. I'm posing the question because I would like to do whatever makes you most comfortable.

This is very difficult for me to answer at this point, because I feel neither female nor male, but in limbo or transition, as we say. Because I started transition so late in my life it is very hard to change lifetime habits, even if they were mainly pretence.

I assume you would agree it is always easier to go with the flow rather than swim against the stream.

Of course I have a reputation for swimming against the stream anyway, which started in my childhood and involved school and work, not only the relationship with my mother.

I guess I had the mind of a male and was certainly more assertive than most women. Certainly men felt challenged by it. It is also extremely stressful to be 'different' and even I can handle only so much, so at times I choose to go with the flow.

Probably the best answer to your question is start thinking of me as male because this is the

direction I want to take. As I explained, my husband's family and my parents-in-law hold me back. My husband is also more comfortable that way. He has accepted me but he still does not want to talk about the whole trans business if it can be avoided. He is still somewhat uncomfortable with it and I don't want to push it.

As you said in your excellent exposition there are more males that move to become female.

*Not quite. I said that the female-to-male transpeople, like me, are **less visible**. This does not mean there are fewer of them. Yes, there are still some gender experts who think that FTM (female-to-male) are fewer in number, but the figures have been steadily converging towards parity. It makes sense.*

Think about the impact and visibility of men in society versus women (particularly in historical times). Obviously that does not mean that there are, or ever were, far fewer women in the world. And do not forget that all this involves the questions of power and status in society.

An army man wanted to resign recently because he was having a gender reassignment. His commanding officer refused to accept his resignation and was happy for him to change from Malcolm to Michelle. As Michelle, she was interviewed by Geraldine Doogue who previously knew this person as Malcolm. Geraldine didn't hide the fact that she was gob-smacked but made it clear that she was very accepting of the change.

Yes, it is hard to accept that some men deliberately give up their manhood and all the status privileges that come with it...but it also proves that the decision to assert one's true gender identity is not a lifestyle choice or a whim, but a heart breaking struggle. Nobody in their right mind would do this if not driven by something beyond their control. By the way, to be accepted for any kind of transition process (hormones, operation), you have to see a psychiatrist to verify that you are genuine and not deluded or mentally ill.

At [my husband's] golf club a male green-keeper is undergoing a gender reassignment. No one in this conservative environment seems concerned.

Issue Ninety-Five

Great to hear that, that's real progress...

My husband tells me he still thinks of this person as male - out of habit.

This is what I indicated above... Advertisers of any brand of rotary clothes line have trouble shifting people from the habit of thinking of all rotary clothes lines as Hill Hoists (which was the first one on the market). The same goes for Victa, the first rotary lawn mower. What you first know something (or someone) as tends to stick!!!

I had never thought about it before but I guess the person involved has to signal when they want to be 'addressed or thought of' as her or him.

yes and no. For me, see above. And what you say applies definitely to one's family and friends, workplaces and even book groups. In other words, one should signal this to all the people who have known one as somebody else. For the general public, however, a transpeople do their best to fit in, to assimilate, to 'pass', as we call it. You basically try to be accepted as the man or woman you really are. I have been called Sir and Madam on the same day...that's my problem. If I could cultivate my facial hair, for example, that should do the trick.

Transgender as a definition:

Tell me if I'm wrong but before transgender was first used as a term in 1949 I think the term that was used was invert?

Yes. I am not sure about 1949, but Sigmund Freud, for example, used the term 'inversion' and so did his contemporaries.

'Transgender' is a kind of umbrella term and could include gender-queer, queer and transsexual. Anybody, in fact, who is gender identity questioning. It is not the same as transsexual. Terminology is still a problem and very much under discussion.

Polare page 28

April-June 2013

If people associate the term transgender with sleaze it's only because they don't know enough about it (or can't cope/or be bothered with thinking about it).

Yes.

I disagree that you and Eugenia are both trans. The term transgender simply denotes someone who has undergone a sex change. Our poor Eugenia didn't have that option. Despite all her efforts at passing as a male there is no doubt that Eugenia remained female.

Well, I explained about the term transgender above. As for Eugenia and me, we are both transsexuals. Just because one does not have an operation or take hormones does not mean one is not transsexual.

It is what you feel, your gender identity, a belief that one is born in the wrong body. It is also not a sex change.

It is just aligning the innate gender identity with the outside body. Sometimes this

is called gender affirmation, as it is really the process of affirming your true gender.

Psychiatrists and psychologists have tried time and again to make people change their belief in their innate gender and all failed. There were some really cruel aversion therapy experiments, including electric shocks (all very similar to mental patients). There are some very rare cases where somebody asserts they have 'changed' (their inner conviction) but I for one believe it was not genuine, but heavily enforced by drugs and treatment. Or that these people were not genuine transsexuals in the first place.

Emerging Identity

When I read the very sad story of Eugenia I thought she realised she wanted to be a male person at too young an age.

As I said, I was about three when I realised I was somehow different. There was a particular incident, but I did not interpret it for what it was



for many years. From what I have read, most transsexuals know something is different from a very young age, although in other cases it does not surface recognisably until puberty and, rarely, even later.

And I should also emphasise that just because a girl is a tomboy for a while or a boy wants to play with girls' toys does not mean they are necessarily transsexual. Most children outgrow this phase.

An issue that Tedeschi doesn't raise is that perhaps Eugenia was born with ambiguous genitalia and was incorrectly assigned. Ambiguous genitalia rates are 1 in 4,500 births. The majority are brought up as girls. Gender identity complications can occur about later in life.

Yes, the intersexed, formerly known as hermaphrodites. Yes, the birth incidence is fairly high but in many cases the symptoms are so light that people are not even aware of it. There are many reasons for being intersexed and therefore symptoms are also varied.

As for being brought up as girls that is mostly correct until fairly recently: simply because it is easier to cut something off (a micro-penis for example) than add something on. And a baby obviously can't tell you if it wants to be a boy rather than a girl. This has now been brought forward as a human rights issue. That is, to perform this kind of surgery on an infant violates his or her rights..

Then there are the parents, the family. Can you imagine them replying 'we are not sure...' when asked boy or girl? There are some indications that transsexual is just a kind of ultimate version of intersex. Neurological differences have been found between the male and female brains. A male-to-female trans brain was found to have female attributes and vice versa. The sample is very small, however, since this can only be checked on dead people and there are not many transpeople who donate their brains to science.

Perhaps gender reassignment will remain a middle-class privilege as I can't imagine a poor person could afford to undertake the procedure.

This depends on the operation and also the country you live in. In some countries the public

health system supports gender reassignment. Not all operations are available in all countries. For example the lower genital operation for transpeople like me is not available in Australia.

My chest reconstruction was supported by Medicare to a certain extent. It depends on the surgeon. There are not many medical people who do this kind of operation. There are some generous medicos who bulk bill for some of their services or charge very little, because they know that many of us usually lose our jobs and are struggling financially and socially.

The support in Sydney and other major cities is okay, but is not as satisfactory in remote or rural areas (and there is sometimes more discrimination and prejudice). Nor is it immutable. Like most social phenomena, it fluctuates.

Employment Issues and Identity

Gosh! Of course when you apply for anything you have to tick a male/female box on a form. Do you feel you have been discriminated against?

Yes. Most of us feel that way. It is still one of the major problems for transpeople.

Theoretically, gender should not be an issue. But theory and practice are far apart aren't they?

Yes, very much so.

Your mum...

Read Justice Michael Kirby's book (Law, Love & Life, Viking, Australia, 2012) and you will see how parents struggle to 'cure' a child's sexual orientation to what they regard as normal.

Identity

Going back to filling in forms - when we come to the box which asks occupation my husband happily fills in 'Retired'. I don't identify with retired and struggle with what to fill in. I loved it when I was at Uni and could proudly write student in the 'occupation' box.

I know that feeling...

I'm telling you this trivia to exemplify that, even with small issues; some of us struggle with our identity. I just can't imagine how difficult the identity issue has been for you - having to face

Issue Ninety-Five

it every day. You must feel very proud of yourself for having survived this struggle.

Yes, identity is not only gender based. Think about migrants for example, or religion or any group activities (sports fans) ... or politics! In my studies identity was often associated with belonging. But other factors include status, money, power, education etc.

Something else has just struck me. Who have you found have most trouble with your new identity, females or males?

Males, probably. I am a challenge to their 'manhood' and there is also the homophobic element for those who associate with homosexuality.

Please feel free to ignore my questions if you feel I have overstepped the mark. I will not be offended at all. I'm simply interested in understanding. I'm sure you must get sick of talking about it!!!!

No problem. The more people know, the greater their understanding, I hope. ☐☐☐

OVER 55s GROUP

A Mature Person's Group

Programme April - June 2013

In this quarter, rather than having a set topic, there will be an Open Forum. This means that those present can have a discussion about anything and/or use the time for social interaction.

Thursday 11th April 1.30pm to 3.30pm

Open Forum led by Phia

Thursday 9th May 1.30pm to 3.30pm

Open Forum led by Joanne

Thursday 13th June 1.30pm to 3.30pm

Open Forum led by Jessica

This group provides opportunities for the sharing of experiences and talking about our future goals as individuals.

Come and enjoy your participation in this interesting Group.

RPA SEXUAL HEALTH CLINIC

**24 Marsden Street, Camperdown,
NSW, 2050**

PHONE: (02) 9515 1200

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 check-ups
- 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
- 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 1200 for an appointment.*

(Interpreters available)

Sex, Gender & Sexuality Clinic

Director: Dr Tracie O'Keefe DCH, ND



Doctor of Clinical Hypnotherapy
Psychotherapist
Counsellor
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different visions."*
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informative and
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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

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

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Queer 101: Trying to find who I am...

by Sam Orchard

My life is rarely reflected within the media that I consume. As a kid I searched for myself in books, television, film, in music, and in art.

And I couldn't find myself anywhere.

I felt lost, alone, and confused.

I knew what I wasn't; but it's hard to define yourself to others using only negatives:

I am not a girl.

I am not a boy.

I am not straight.

I am not gay.

I am not...



So I started drawing comics to help me explore who I was.

I still haven't quite figured out who I am yet, and I'm not convinced that I ever will. But, I have found some words that I can claim as mine:

I am trans.

I am queer.

I am in movement.

The complexities within human experiences of our genders, sexes and sexualities can never be fully articulated. We live beyond words, beyond spectrums, and our lives can never be wrapped up neatly into short comic form.

Queer 101 is meant to be the start of a conversation; it is a flawed, simplified, fun introduction to how gender, sex and sexuality can be explored. It's not by any means complete, fully-realised, or all-encompassing.

But it's a start...

Transgender Anti-Violence Project (TAVP)

The mission of the Transgender Anti-Violence Project is to provide education, support, referrals and advocacy in relation to violence and oppression based on gender identity.

The Project addresses all forms of violence that impact on the transgender, gender diverse and gender-questioning community, including (but not limited to) domestic violence, sexual violence, anti-transgender harassment and hate crimes.

Transphobic crimes affect many gender-diverse people in Australia each year.

The Transgender Anti-Violence Project provides a range of free, confidential services and has already helped a number of people who have experienced incidents that include verbal abuse, physical attacks, bullying, harassment and discrimination.

The TAVP needs to know about your experiences to be able to help you personally and to document the event in order to stop it from happening to others.

What can I report?

You can report anything to the TAVP. Some examples follow:



- Physical assaults
- Verbal abuse and threats
- Sexual assaults
- Stalking
- Domestic violence
- Family violence

When you make a report to the TAVP you will be assigned a support worker, to assess the nature and level of support you may require. The Project will then provide you with ongoing assistance and referral services, including support when reporting to police, counselling, legal support, court support and medical support and follow-up support.

To make a report, call the Transgender Anti-Violence Project on 9569 2366

Do You Believe You Are Intersexed?

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

OII Australia [Organisation Intersexe Internationale]

at PO Box 1553, Auburn, NSW, 1835 or at:

oiaustralia@bigpond.com

or visit our website at www.oiaustralia.com

Are You Embarrassed by Ugly and Unwanted Facial or Body Hair?

You are not alone, and there is a permanent solution. Everywhere people are raving about the results of this amazing method!

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PERMANENCE

The permanent hair removal specialists



Barbecues and other events 2013



Watch the Gender Centre Website, Twitter and Facebook for details

WOULD YOU LIKE TO HEAR BY EMAIL?

The Gender Centre is compiling a list of email addresses of those clients and friends who would like to be notified of social, support, educational and other functions and events of interest.

Just email us

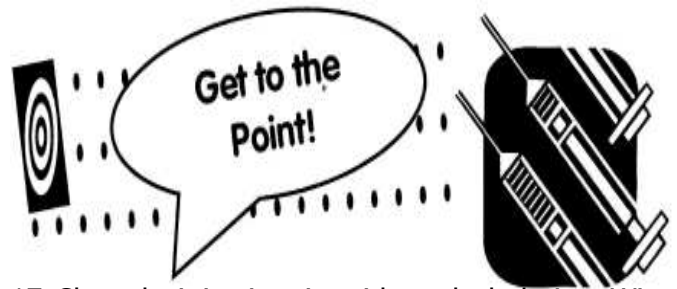
reception@gendercentre.org.au

Put "Email list" in the subject line and give us your first name and Email address.

FTM Testosterone Injection:

A reference guide to self-injection in 25 easy steps.

1. Wash your hands (with a disinfectant/anti-bacterial soap).
2. Lay out your vial of testosterone, needle(s) and/or syringe, alcohol wipes, and tissue on a clean surface (e.g. a clean towel, paper towel etc.)
3. Sit down and get comfy.
4. Secure the lure-lock on the fit of the syringe.
5. Unseat/loosen the cap from the needle - leave the cap on loosely until ready to draw the testosterone. Remember to never touch the needle.
6. Wipe off the 'nipple' on the top of the vial with an alcohol wipe.
7. Remove the cap of the needle without touching the needle or the needle touching anything. Draw 1cc of air into the syringe by pulling back on the plunger.
8. Up-end the testosterone vial.
9. Insert the needle through the centre of the neoprene nipple.
10. With the needle tip immersed **in** the fluid, slowly depress the plunger, pushing all the air into the oil (you'll see the bubbles).
11. After all the air is out of the syringe, slowly pull back on the plunger until the proper amount of testosterone is drawn into the syringe. (Not everyone's dosage is the same. Check your prescription or consult with your physician or pharmacist for the correct amount. Some will inject more than 1cc, some less.)
12. You may need to "pump" the plunger to get a complete fill. As long as you don't remove the needle you can let the fluid go in and out as much as needed.
13. When you have the correct amount in the syringe, gently pull the needle out of the vial.
14. Draw a small amount of air into the syringe - one very small bubble.
15. Slip the needle back into the cap if you want to take a break before injecting. (It's really important not to touch the needle itself at any point.)
16. Pick an injection site on your thigh or buttocks. You'll want to alternate sites, so remember which site you last injected. For your thigh, target the spot by placing one hand just about/at your knee and the other at your hip - the area in between is pretty much fair game. The best area is the outer part of the quad, so stay to the outside of the midline of your thigh, but not too far to the outside/underside. The buttocks are slightly trickier - both to reach and to isolate the exact spot. Talk to your physician or nurse about the exact location.



17. Clean the injection site with an alcohol wipe. Wipe in a circular motion, to a circumference of about two inches surrounding the injection site. Allow the skin to dry to prevent the alcohol from being introduced into the muscle as the needle is inserted, causing pain or a burning sensation. Remember not to touch the area just cleansed with the alcohol wipe.
18. Uncap the needle - remember not to touch the needle or the swabbed area on your thigh. The air bubble should be near the end of the syringe.
19. Go to it and stick it in! Fast, slow, it doesn't matter. Pierce the skin at a 90 degree angle. It must go through the subcutaneous tissue/fatty tissue and deep into the muscle.
20. If using a 25mm needle, stop about 3mm from the base. (This is true for average size bodies. Talk with your physician about the right needle length for you.)
21. After the needle has been inserted, aspirate by holding the barrel of the syringe steady with your nondominant hand and by pulling back on the plunger with your dominant hand. You'll see some bubbles in the testosterone. If there's just air/clear fluid -no blood- then it's okay to proceed. If there's blood either push the needle in or pull back a little and pull back on the plunger again, or pull the needle out and start over.
22. Holding the syringe steady, inject the testosterone steadily and **slowly** by depressing the plunger until all of the testosterone is injected. The air bubble in the syringe should follow the testosterone and will "pack" the testosterone down into your muscle. There will be a slight "pop" as the bubble leaves the syringe.
23. Pull the needle out, again, fast or slow depending on your preference. Sometimes the injection will bleed a little when you withdraw the needle, but be prepared to apply gentle pressure with some clean tissue(s).
24. Slide the needle back into the cap (Do not reseat the cap by pressing the tip of the cap to the needle's point).
25. Dispose of your needle properly in a sharps container.

These instructions on self-injection are reprinted from the Internet with permission from Michael Munson, CEO of FORGE.

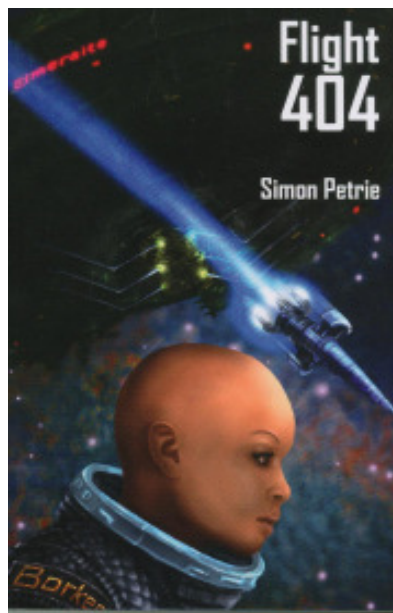
tgwarrior@forge-forward.org
www.forge-forward.org

Flight 404 by Simon Petrie. Reviewed by Katherine Cummings

I read *Flight 404* twice before I settled down to review it. The first time, before Christmas 2012, I was disappointed. The book had been recommended to me because “it is about a transgender”. It is about a transgender but this fact is irrelevant to the main plot. The protagonist, Charmain, is a pilot on a mission, a mission that changes as the result of a navigational quirk from being a simple delivery job to being a search and rescue attempt in consort with several other space vessels of various kinds, ranging from mil (military) to salvage vessels and mining scows.

Petrie has a habit of using truncated and warped words, presumably to indicate that language has morphed during the passage of time between now and the whenever of *Flight 404* and between the world we know now and the otherness of the universe we find ourselves traversing with Charmain and her interlocutor android, K@trine.

As noted above, I was disappointed the first time around because the book seemed slow, dividing itself between the search, salvage and rescue operation on one hand, and dialogues between Charmain and K@trine (who assumes different personae) on the other. The main plot, the search and rescue, incorporates a sub-plot involving a pushy *former* (emphasis not mine) pilot who is in pursuit of Charmain and her ex-mil decommissioned corvette. There is a naval saying, “a stern chase is a long chase” which means just what it says. Since the only factor that will allow the chaser to reach the chatee is the difference between their speeds, which may be quite insignificant, stern chases tend to be boring, tedious affairs likely to be disrupted by wind and weather, so that the chase may never reach a conclusion. This tends to be true of most of the stern chase in *Flight 404*, although there is a smidgeon of action when a rear-end collision seems imminent.



What then, of the conversations with K@trine, the wooden android?

In most of them, K@trine seems to be speaking on behalf of relatives and friends from Charmain’s past, and the burden of the conversation is usually Charmain’s gender affirmation, which seems to have taken everyone by surprise and generated some resentment. So what else is new? This attitude from those who feel they should have had prior information, or maybe a vote, is not unusual now and probably won’t be in the whenever of *Flight 404*.

I might have hoped for a more accepting and even co-operative social structure in the future, but humans will be humans and it’s Petrie’s universe.

To diverge for a moment, some of you may know the work of Terry Dowling, who is the best Australian writer of science fiction I know. I have said, when reviewing his books, that he has the gift of making us think we know more about his fictional milieux than we really do, that the images and clues he throws off about the worlds in his mind

are so well-crafted that one feels that if one could only bear to stop reading for a moment one would remember all the details that Terry has assumed we know. The truth is out there, but it’s just out of sight around a nearby corner.

I feel that Petrie may have been trying for this sort of relationship with his readers but I, for one, found myself baulking at his neologisms and the abbreviations that I did not comprehend and could not apprehend. There are simple abbreviations I mentioned earlier, like ‘mil’ for military and ‘decel’ for deceleration but there are also words like ‘pricips’ that would have remained meaningless to me if it had not been for the context, “...you shouldn’t use any tech you can’t follow from first pricips...”. Of course it may be a typo for ‘princips’ which would be marginally less opaque.

There are convoluted technical terms, ‘altspace’ and ‘urspace’ and ‘ekranoplaners’ as well as awkward phrases like, “...the buttressed, enamel-walled, muralled corridors...”. As the Austrian Emperor might have said to Mozart, if Mozart had been writing science fiction, or indeed, any kind of fiction, “too many adjectives”.

The names of the starships are amusing, reminding me of one of my favourites, Larry Niven’s or maybe Petrie is echoing the weird phrases from the Bible that seventeenth-century Puritans would sometimes use to name their children . He gives us ships called *Victory Through Prudence*, *Small But Mighty*, *Succour In Adversity* and *Now Just Cut That Out* (I don’t think that’s Biblical), among others.

I am confused by the dialogues between Charmain and K@trine. Is the android deriving its share of these exchanges from its knowledge of Charmain’s history and former friends, relatives and enemies? It seems to be providing some creative input as it asks more than once, with an insecurity seldom found in machines, “Did I get that right? Did I sound like him?” Or is K@trine hooked up to some archive on Charmain’s home planet that provides access to the conscious or subconscious thoughts/feelings of these antagonists to Charmain’s protagonist in real time? Or are the information and attitudes expressed coming out of Charmain’s subconscious? Is K@trine a clockwork psychotherapist, sorting through the junkthink of a renovated transgender? Charmain certainly evinces a feistiness verging on aggression in her exchanges with her little wooden android. Too much remains unresolved.

Do not expect any showdown on a starswept sandy beach in the Pleiades, nor any admirably complicated denouement (“You may wonder why I have called you all here...”). There is no reason why every protagonist should be a hero, but I expect some form of exceptional quality in them if I am to enjoy watching them at work.

Charmain is, frankly, a bit wishy-washy and seems prepared to accept her fate without much of a struggle if things turn sour (and they do). There is a bit of Kafka’s ‘K’ in her where I would have preferred a dash of Nikita. She is a logical thinker and that is good, but, as I say, I

expected more. I am an unreconstructed romantic (or maybe a reconstructed romantic).

Maybe I expected too much. Or maybe there is more to expect. Perhaps Charmain will re-emerge to establish a more positive character in some future work.

On a different note, I believe strongly that books should be much more than their written content. Thought and taste should go into book design and typography, and this book has neither. The volume in which *Flight 404* appears is a Peggy Bright publication but there is no attribution for the choice of typeface, nor for the book-design in general.

The covers are by Lewis Morley and are fine. Incidentally, the book has two front covers as there are two novellas, printed back to back and head to foot, like official documents in Canada, where neither French nor English is allowed to come ‘first’.

The typography is awful. The body text is a version of Palatino Linotype which has some nasty features including apostrophes that look like acute accents. I might have become accustomed to this if it were not for Charmain’s home planet being called Ash□ so that when the possessive of Ash□ (□□□□□□) crops up it seems to have far too many apostrophes. The headers on the text pages are in a sub-sized sans-serif lodged so high on the page they look as if they might fall off the edge unless the book is held with care.

From time to time printers’ flowers (or dinkuses, if you prefer) are dropped into the text to separate sections of the work. I think they may be meant to be pansies but, if so, the significance escapes me.

Oh, for the days when every book had a colophon and we knew who had designed the book and chosen the type and the paper and where the paper had been milled, and who had bound the finished work and with what!

Book-design really does matter, even if typography should be invisible.

Petrie, Simon, *Flight 404*. edited by Edwina Harvey, cover art by Lewis Morley. Peggy Bright Books, Maroubra, 2012 [bound with Petrie, Simon. *The Hunt for Red Leicester*]

Government Health Care for Intersex, Transsexual, Transgender and Gender Diverse Australians

The Australian Government is committed to improving the health of all Australians, including sex and/or gender diverse people.

The *National Male Health Policy* and the *National Women's Health Policy 2010* (the Policies) released in 2010 seek to improve the health and wellbeing of all Australians through addressing particular health issues, focusing on the social determinants of health inequalities and encouraging the health system to be more responsive to priority groups. Lesbian, gay, bisexual, transgender and intersex (LGBTI) communities are identified in the Policies as priority groups for targeted action in regard to their health and wellbeing.

The Australian Government is aware that transgender and intersex Australians have particular health needs. To help meet these needs, the Australian Government funds the **National LGBTI Health Alliance** (\$661,321.00 GST inclusive over three years commencing in 2012-13) to ensure the needs of the LGBTI community are appropriately represented in the development of health policy, to strengthen the evidence base for LGBTI health and wellbeing, to improve the capacity of the LGBTI community to deliver targeted health promotion activities and health-related services, and to enhance the capacity of health-related services to be inclusive of LGBTI consumers and their needs.

The Australian Government has also provided additional funding to the Alliance of \$1.1 million over two and a half years to June 2013, under the **Taking Action to Tackle Suicide - Community prevention for High Risk Groups** measure, for the MindOUT national mental health and suicide prevention project. This project will establish networks and links between the LGBTI sector, mainstream mental health services and other significant suicide prevention and mental health projects, programs and research.

Under this project the Alliance will be seeking opportunities to increase representation in policy advisory and consumer forums and aims to

improve understanding of the varying issues faced by sub-groups of this population, to break down barriers to help-seeking, and promote inclusive service provision to better support LGBTI people in need.

There are a number of procedures under the **Medicare Benefits Schedule**, which is funded by the Australian Government, which may be performed as part of a gender reassignment operation if determined by the medical practitioner to be clinically relevant. In addition, Medicare covers a range of specialist consultations including with plastic and reconstructive surgery, and psychiatric and family group therapy which may be relevant in the context of gender reassignment surgery.



The Australian Government is also increasing funding for public hospital services. Under the **National Health Reform Agreement**, from 2014-15 the Commonwealth will fund 45% of efficient growth in public hospital services, increasing to 50% in 2017-18. This will provide states and territories with at least \$16.4 billion in additional funding over the remainder of the decade. This is in addition to Australian Government funding of up to \$3.4 billion for hospital projects and beds under the National Partnership on Improving Public Hospital Services.

In addition to these health initiatives, and in response to the **Australian Human Rights Commission's Sex Files** report, the Australian Government has committed to ensuring that all people are able to participate in society and receive the protection of the law, regardless of their sex or gender. This commitment is currently being implemented as follows:

The Government has committed to including protections against discrimination on the basis of a person's gender identity or sexual orientation as part of its project to consolidate federal anti-discrimination laws into a single Act. In November 2012, the Government released the exposure draft of the **Human Rights and Anti-Discrimination Bill 2012**

for public consultation. This bill includes new protections against discrimination on the basis of sexual orientation and gender identity and extends the protection against relationship discrimination to same sex couples in any area of public life.

This bill is currently being considered by the Senate Legal and Constitutional Affairs Legislation Committee. Further information about the project is available on the [Attorney General's Department website](#).

Under **Australia's National Human Rights Action Plan**, the Government is currently developing Guidelines to standardise the gender classification system and evidence required to change gender on personal records for Australian Government departments.

In September 2011, the former Minister for Foreign Affairs and the former Attorney-General launched a new passport policy for sex and gender diverse applicants.

Under the new guidelines, sex reassignment surgery is no longer a prerequisite to issue a passport in a person's preferred gender. Instead, sex and/or gender diverse people now have the option of presenting a statement from a medical practitioner supporting their preferred gender.

More information about Australia's passport policy can be found on the [Australian Passport Office website](#).



In addition to these Australian Government policies, many members of the sex and/or gender diverse community have significant concerns about the process for legally changing sex.

This is largely an issue for the states and territories, given their responsibility for their respective Registries of Births, Deaths and Marriages. However, the Australian Government has a strong interest in developing a nationally consistent approach to change of sex. The Attorney-General's Department will work with relevant federal, state and territory agencies to consider this issue.

Further support is being provided by the Government aimed specifically at older LGBTI people.

In April 2012, the Government released the *Living Longer Living Better* aged care reform package. The package includes \$2.5 million to implement a national roll-out of **LGBTI Aged Care Awareness Training**. The training will raise awareness across the aged care sector of LGBTI people and their ageing related issues, and provide the knowledge and skills for organisations to work to become more LGBTI inclusive.

Funding is also available through the **Aged Care Service Improvement** and **Healthy Ageing Grants Fund** to improve the skill and knowledge of aged care providers to meet the care needs of diverse populations.

This will include staff training, information sharing and access to expert assistance.

Furthermore, the Minister for Mental Health and Ageing, the Hon Mark Butler MP, released the **National LGBTI Ageing and Aged Care Strategy** on 20 December 2012. The Strategy will be used to inform the way government responds to the needs of older LGBTI people and better support the aged care sector to deliver care that is sensitive to their needs.

The strategy contains goals for implementation from 2012 to 2017. The Department of Health and Ageing will report progress against these goals annually.

A formal review of the Strategy will feed into the broader review in 2017 of the implementation of **Living Longer Living Better** aged care reforms.

These measures build on the aged care reform amendment to the Allocation Principles under the *Aged Care Act 1997*, which recognised LGBTI people as 'people with special needs' to help focus on the care of LGBTI people. This amendment became effective on 1 July 2012.

BOLLYWOOD WITH A SOCIAL CONSCIENCE

Indian film director Vishal Gaikwad is making a movie called “Runh” about eunuchs (*hijra*), starring Rajeshwari Sachdev and Manoj Joshi. Neither of them has played a part like this before and, like many Bollywood epics, it will have extensive music and dance scenes.



Rajeshwari Sachdev

Gaikwad says that he has realised his dream of making a movie that “sheds light on the neglected third gender”.

When asked what his motivation had been to make such a movie he claimed to have come across a “shocking incident regarding a eunuch”. He hopes the movie will help the “third sex” to achieve a stable place in Indian society.

The film is currently in production. Gaikwad says the music directors and choreographer have done a “fabulous job” and that it is the story itself that attracted experienced and highly regarded actors to take part in such an unusual and important movie.

PAKISTANI EUNUCHS BID FOR POLITICAL POWER

A group of eunuchs in Pakistan is following the example of Indian *hijra* by putting themselves up for election in the local polls. Using the slogan “Don’t try the tested ones, shake hands with eunuchs.” they are hoping to gain the balance of power and have been in touch with other political parties to further their aims.

“We will only make alliances with parties that agree to cover protection of eunuchs’ rights,” they say.



Pakistan eunuchs at a rally

OBAMA DRAGS HIS FEET ON SIGNING EXECUTIVE ORDER ON LGBT

Despite having campaigned on promises of inclusion and equality for LGBT as one of his core beliefs, President Obama has failed to sign an executive order prohibiting discrimination against LGBT employees of federal contractors.

His excuse for failing to sign the order is that he is pushing for passage of ENDA (Employment Non-Discrimination Act) in Congress. ENDA has very little chance of passing in a Congress where the House of Representatives has a Republican majority and is spending millions of dollars on private attorneys to defend the Defense of Marriage Act that resists same-sex marriage.

AUSSIE SHORT FILM TAKES MULTIPLE AWARDS

“Silver Stiletto”, a short Australian film about an ex-special services soldier who becomes a vigilante drag queen, has taken out the Jury Award at the 2013 Melbourne International Film Festival.

The film has now taken out four awards, including the audience award at Queer Screen, the film festival that was associated with the Sydney Gay and Lesbian Mardi Gras.

“Silver Stiletto” will be shown next at the Brisbane Queer Film Festival on 12 April.



LITHUANIA AGREES TO EUROPEAN COURT OF HUMAN RIGHTS RULING ON SEX CHANGE LAWS

Lithuania has agreed to implement requirements imposed by the European Court of Human Rights, including the adoption of a law allowing sex change. The government will also remove the need for all partnerships to be registered.

The amendments will state that “an unmarried adult person has the right to change his [sic] sex medically.”

The amendments will now go to parliamentary committees.

Are You Embarrassed by Ugly and Unwanted Facial or Body Hair?

You are not alone, and there is a permanent solution. Everywhere people are raving about the results of this amazing method!

It is medically and scientifically proven safe over 130 years of use to permanently remove your unwanted hair so that it NEVER grows back. We are so confident in our results we put our 100% money back Guarantee behind our work! *So phone NOW.* The first 27 people to call and mention this ad will receive our special introductory offer - **you pay only \$99** for \$168 of

- **Consultation Valued at \$60**
- **30 Minute Treatment Valued at \$75**
- **Mefol Aftercare cream Valued at \$30**

City

*Dymocks Building,
Level 3, 428 George St, Sydney
9221 8594*

Drummoyne

*170 Victoria Road,
Drummoyne
9719 1391*



www.permanence.com.au

PERMANENCE

NSW 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

The ACON Lesbian and Gay Anti-Violence Project can be contacted on (02) 9206 2116 or Freecall 1800 063 or avp@acon.org.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. PO Box 386, Chermside South, QLD, 4032. Tel:(07) 3357 6361

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

Ph:0404 054 000

Email:smh101@exemail.com.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 2013 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

NOTE

For after-hours counselling contact Lifeline on 131 114 or Gay and Lesbian Counselling Service 5.30pm-10.30pm seven days on (02) 8594 9596 or 1800 105 527 www.glcsnsw.org.au

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!



Directory Assistance

A.C.T.

AGENDERAGENDA

works with the sex and gender diverse community. This includes transsexuals, transgender people, intersex people, cross-dressers and other non-gender conforming people. We acknowledge the important role that partners, family members and allies play and these people are specifically welcomed as part of our community.

PO Box 4010, Ainslie, ACT, 2602
Ph: (02) 6162 1924
Fax: (02) 6247 0597
E m a i l : support@genderrights.org.au
Website: www.genderrights.org.au

AIDSACTION 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

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: aacswoop@aidSACTION.org.au

NEW SOUTH WALES

NSW 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 Information 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 9569 2366

Residential service

Provides semi-supported share accommodation for up to eleven residents who are sixteen years of age or over. Residents can stay for up to twelve months and are supported as they move towards independent living. A weekly fee is charged to cover household expenses.

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

For partners, families and friends

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

For service providers, employers and others

Advice, support and workshops are also available to employers, service providers, students and other people interested in gender issues. For more information contact the Manager, Gender Centre, 7 Bent Street or PO Box 266, Petersham NSW 2049
Tel: (02) 9569.2366
Fax: (02) 9569.1176
manager@gendercentre.org.au
http://www.gendercentre.org.au

2010 - TWENTY10/GLBT YOUTHSUPPORT

Twenty10 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 as well as information and referrals for young GLBT people and their families. We run community education programs throughout NSW.

PO Box 553 Newtown, NSW, 2042
Youth callers needing help:
Sydney local: (02) 8594 9555
Rural NSW: 1800 652 010
All other callers:
(02) 8594 9550
Fax: (02) 8594 9559
Email: infor@2010.org.au
www.twenty10.org.au

ACONHEALTHLTD

Information and education about HIV/AIDS, caring, support for living living with HIV/AIDS.
41 Elizabeth St, Surry Hills, NSW 2011 or POBox 350 Darlinghurst, NSW 1300
Ph: (02) 9206 2000
Fax: (02) 9206 2069
tty: (02) 9283 2088

ACON-HUNTER

129 Maitland Road or PO Box 220, Islington, 2296
Ph: (02) 4927 6808
Fax: (02) 4927 6845
hunter@acon.org.au
www.acon.org.au

ACON-MID-NORTH COAST

Shop 3, 146 Gordon St
Port Macquarie NSW 2444
Tel: (02) 6584 0943
Fax: (02) 6583 3810
mnc@acon.org.au
POB 1329, Port Macquarie, 2444

ACON - NORTHERN RIVERS

27 Uralba Street
Lismore NSW 2480
PO Box 6063
South Lismore NSW 2480
Tel: (02) 6622.1555
or 1 800 633 637
Fax: (02) 6622 1520
northernrivers@acon.org.au

AFAO (AUSTRALIAN FEDERATION OF AIDS ORGANISATIONS)

National AIDS lobby and safe sex promotion organisation.
PO Box 51
Newtown 2042
Tel: (02) 9557 9399
Fax: (02) 9557 9867

ALBION STREET CENTRE

HIV testing, clinical management, counselling and support, treatment and trials for HIV/AIDS.
Tel: (02) 9332.1090
Fax: (02) 9332.4219

ANKALI

Volunteer project offering emotional support for People Living with HIV/AIDS, their partners, friends and carers. One on one grief and bereavement service.
Tel: (02) 9332.1090
Fax: (02) 9332.4219

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
Ph: (02) 9283 8666
free call 1800 651 011
www.bgf.org.au
bgf@bgf.org.au

BREASTSCREEN

Phone 132050

CENTRAL TABLELANDS TRANSGENDER INFORMATION SERVICE

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

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

(CSN) COMMUNITY SUPPORT NETWORK

Transport and practical home based care for PLWHA. Volunteers welcome. Training provided.
Sydney Mon-Fri 8.00am-6.00pm
9 Commonwealth St, Surry Hills
Tel: (02) 9206.2031
Fax: (02) 9206.2092
csn@acon.org.au

PO Box 350 Darlinghurst NSW 1300

Western Sydney and Blue Mountains

Mon-Fri 9.00am-5.00pm
Tel: 9204 2400
Fax: 9891 2088
csn-westsyd@acon.org.au

6 Darcy Rd, Wentworthville, 2145
PO Box 284, Westmead, 2145

Hunter

Mon-Fri 9.00am-5.00pm
Tel: 4927 6808\Fax 4927 6485
hunter@acon.org.au
129 Maitland Road, Islington, 2296
PO Box 220, Islington, 2296

MacKillop Centre - Hunter

Training and development opportunities for PLWHA
Tel: 4968 8788

Illawarra

Mon-Fri 9.00am-5.00pm
Tel: 4226 1163\Fax: 4226 9838
illawarra@acon.org.au
47 Kenny St, Wollongong, 2500
POB 1073, Wollongong, 2500

Mid North Coast

Outreach project: by appointment
Tel: 6584.0943
Fax: 6583.3810
4 Hayward Street, Port Macquarie, 2444
POB 1329, Port Macquarie, 2444

FTMAustralia

Resources and health information for all men (identified *female* at birth), their partners, families and service providers. For information contact
FTMAustralia, PO Box 488, Glebe, NSW, 2037.
www.ftmaustralia.org
mail@ftmaustralia.org

GAY AND LESBIAN COUNSELLING SERVICE 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, higher for mobiles)
1800 184 527 (free call for regional NSW callers only)
Admin enquiries: (02) 8594 9500
or admin@glsnsw.org.au
website: www.glsnsw.org.au

HIV AWARENESS AND HIV AWARENESS AND SUPPORT

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

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 for lunch)
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 Victoria Street, Sundays)
345 Crown Street, Surry Hills, 2010
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. Bi-monthly 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 social concern for any who feel excluded by established religious groups. MCC deplores all forms of discrimination and oppression and seeks to share God's 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
http://www.mccsydney.org.au/

MOUNT DRUITT SEXUAL HEALTH CLINIC

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

NEWCASTLE SWOP

SWOP at Newcastle has a Mobile Sexual Health Team
4927 6808

NORTHAIDS

A community based organisation providing step down and respite care for PLWHA on the Northern Beaches.
Tel: (02) 9982 2310

PARRAMATTA SEXUAL HEALTH CLINIC

provides free, confidential and respectful sexual health information, assessment, treatment and counselling.
Level 1, 162 Marsden (cnr. eorge St) Parramatta, 2150
Ph: (02) 9843 3124
Mon, Wed, Fri, 9.00am-4.00pm
Tue 9.00am-1.00pm
Fri 9.00am-4.00pm

PLWHA (PEOPLE LIVING WITH HIV/AIDS)

PO Box 831, Darlinghurst, NSW, 2010
Ph: (02) 9361 6011
Fax: (02) 9360 3504
www.plwha.org.au
Katoomba
PO Box 187,
Katoomba, NSW, 2780
Ph: (02) 4782 2119
www.hermes.net.au/plwha/
plwha@hermes.net.au

POSITIVE WOMEN

Can offer one-on-one support for HIV positive transgender women.

Directory Assistance

Issue Ninety-Five

Contact Women and AIDS
Project Officer or Women's HIV
Support officer at ACON.
Ph: (02) 9206 2000
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

RPA SEXUAL HEALTH

CLINIC provides a free and
confidential range of health,
counselling and support services. Ph:
9515 3131

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@yahoo.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 infor-
mation service, postal library
service and a newsletter.
PO Box 2193 Boronia
Park, NSW, 2111 or Ph:
0423 125

(SWOP) SEX WORKERS OUTREACH TRANSGENDER SUPPORT PROJECT

Provides confidential services for
people working in the NSW sex
industry.
PO Box 1354
Strawberry Hills NSW 2012
Tel: (02) 9206 2166
Fax: (02) 9206 2133
Toll free 1800 622 902
info@swop@acon.org.au
www.swop.org.au

SYDNEY BISEXUAL NETWORK

Provides an opportunity for bi-
sexual and bisexual-friendly people
to get together in comfortable,
safe and friendly spaces.

SYDNEY MEN'S NETWORK
Sunday of every month followed
by a drop-in at Belconnen Park, 2111
PO Box 2044, Belconnen, NSW, 2007
Tel: (02) 9351 4261
http://www.sbn.bi.org

SYDNEY BISEXUAL PAGANS

Supporting, socialising and liber-
ating bisexual pagans living in the
Sydney region.
PO Box 121, Strawberry Hills
NSW 2012

SYDNEY SEXUAL HEALTH CENTRE

Provides free, confidential health
services, including sexual func-
tion, counselling and testing and
treatment of STDs, including HIV.
Level 3, Nightingale Wing,
Sydney Hospital, Macquarie
Street, Sydney, NSW, 2000
Ph: (02)9382 7440 or freecall
from outside Sydney 1800 451
624.
(8.30am-5.00pm)
Fax: (02) 9832 7475
sshc@sasahs.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

WOLLONGONG TRAN

Transgender Resource and Advoca-
cacy 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 AND GIRLS DROP IN CENTRE

is a safe, friendly drop-in Centre
in inner Sydney for women with
or without children. Shower,

relax, read the paper, get
information, referral and advice.
Monday to Friday - 9.30 -
4.30pm 177 Albion Street, Surry
Hills, NSW 2010
Tel: (02) 9360.5388

National

(ABN) AUSTRALIAN BISEXUAL NETWORK

National network of bisexual
women and men, partners and bi-
and bi-friendly groups. ABN
produces a national 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

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
for both public and member-only
access.

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

CHANGELING ASPECTS

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

Polare page 45
April-June 2013

for young people with transsexualism and their families. We also offer a parents/caregivers email discussion group.
Web: www.truecolours.org.au
Email: Mail@truecolours.org.au

International

AGENDER NEW ZEALAND
A caring national support organisation for Cross/Transgender people, their partners and families. For a detailed information pack, please write or call:
PO Box 27-560,
Wellington, New Zealand
Tel: (64) 0800 AGENDER
Email: president@agender.org.nz
www.agender.org.nz

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

BEAUMONT TRUST
The Trust is a registered charity, the aim of which is the support of transvestites, transsexuals, their friends and families. It fosters research into both psychological and social aspects of transvestism and transsexualism and can provide speakers to address other organisations. It produces literature and arranges workshops, develops befriending facilities and assists with conferences. The Beaumont Trust, BM Charity, London WCIN 3XX. <http://www3.mistral.co.uk/gentrust/bt.htm>

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

FTM INTERNATIONAL
A group for female to male transgender people. Provides a quarterly newsletter - FTM. 160 14th St San Francisco, CA, 94103
<http://www.ftmi.org/info@ftmi.org>

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

GENDERBRIDGE Inc.
Support and Social Society for people with gender identity issues, their families, partners and professionals involved in care, treatment and counselling.
PO Box 68236, Newton, 1145, New Zealand
Phone: (64) (09) 0800 TGHELP (0800.84.4357) (24 hrs)
www.genderbridge.org
info@genderbridge.org

GENDER TRUST (THE)
A help group for those who consider themselves transsexual, gender dysphoric or transgendered. Provides trained counsellors, psychologists and psychotherapists and there is a referral procedure to a choice of other therapists.
The Gender Trust
PO Box 3192, Brighton BN1 3WR, ENGLAND
<http://www3.mistral.co.uk/gentrust/home.htm>
gentrust@mistral.co.uk

INTERNATIONAL FOUNDATION FOR ANDROGYNOUS STUDIES (IFAS)
Support, information, advocacy and social events. An incorporated body established to advance the health, well-being, basic rights, social equality and self-determination of persons of any age or cultural background who are transgender, transsexual, transvestite or intersex, or who are otherwise physically or psychologically androgynous as well as gay, lesbian and bisexual people.
PO Box 1066
Nedlands, WA, 6909, Australia
Mobile ph: 0427 853 083
<http://www.ecel.uwa.edu.au/gse/staffweb/fhaynes>
[IFAS_Homepage.html](http://www.IFAS.org.au)
www.IFAS.org.au

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

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

ITANZ INTERSEX TRUST AOTEAROA OF NEW ZEALAND
Registered non-profit charitable trust to provide a number of educational, advocacy and liaison services to intersexuals, their parents, caregivers, family, friends and partners within the Community and those affected by the Community.
PO Box 9196, Marion Square Wellington, New Zealand
Tel: (04) 4727 386 (machine only) Fax: (04) 4727 387

PROSTITUTES COLLECTIVE OF AUCKLAND-NEW ZEALAND
PO Box 68 509,
Newton, Auckland,
New Zealand

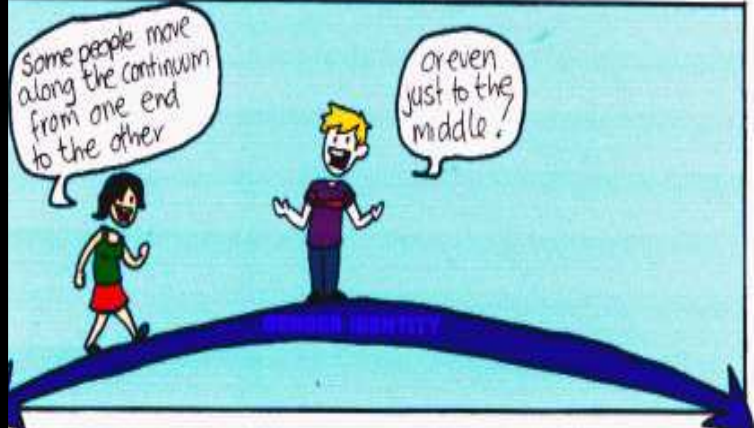
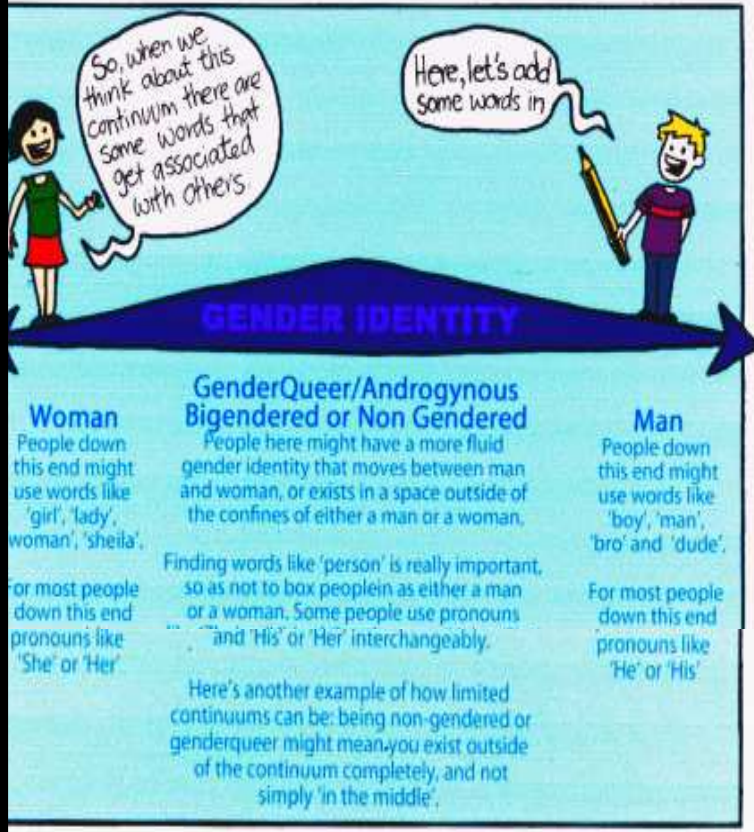
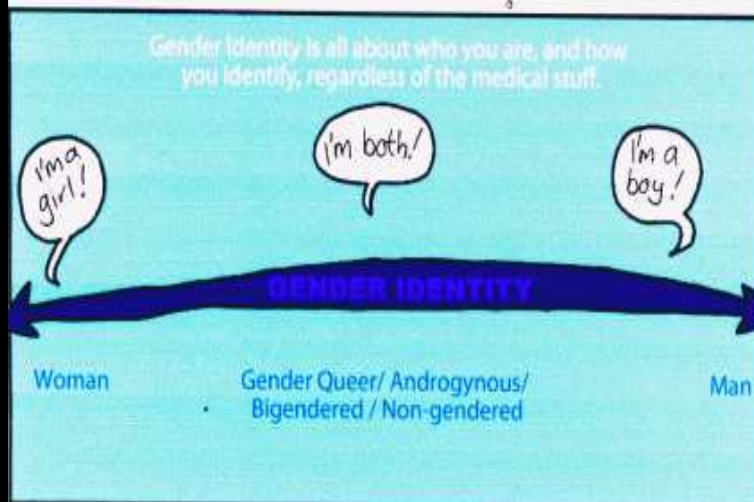
PROSTITUTES COLLECTIVE OF CHRISTCHURCH-NEW ZEALAND
Provides a confidential service for trannies working in the sex industry.
PO Box 13 561
Christchurch,
New Zealand

PROSTITUTES COLLECTIVE OF WELLINGTON-NEW ZEALAND
Provides a confidential service for trannies working in the sex industry.
PO Box 11/412, Manner St Wellington New Zealand
Tel: (64) 4382-8791
Fax: (64) 4801-5690

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

BUT not everyone's gender identity matches with what the medical indicators err... indicate...

GENDER IDENTITY IS ALL ABOUT WHO YOU ARE.



Plus, the cool thing about this continuum is that there are plenty of ways to travel!

* This is often referred to as **TRANSFORMING**

Some people change their names and pronouns, or dress differently.

'He' for me!

Some people change parts of their body.

And others just know that who they are doesn't match what society assumes.

And it can all get much more complicated too!

We haven't even gone into how masculinity and femininity is a continuum too, and is totally context specific

Feminine to me is wearing pink lace in my shoes!

My cat brings out my feminine side

We love showing off our femininity!

Using continuums is just ONE way to think about gender, sex and sexuality

There's HEAPS of other ways too!

Many cultures use different words to describe similar concepts.

There are heaps of other models you can use!

For example, in a Western paradigm - we like to separate gender & sexuality. But that's not the case for all cultures.

Takapou is a Māori word, and a cultural identity used to describe non-heterosexual Maori people.

Fā'afafine is a Samoan word that also goes beyond the binaries of male and female, as well as the separation of gender and sexuality.

But, whatever words you use, and wherever you are on any of the continuums (or whichever model you use)

And wherever, or however you travel, remember...

YOU'RE AWESOME!

THE END!

The Permanent Solution...

in Permanent Hair Removal

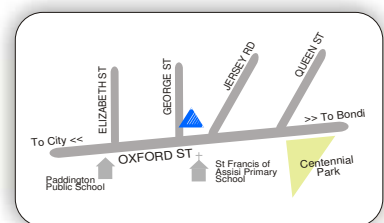
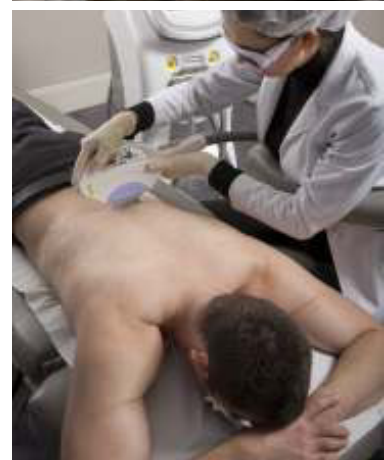
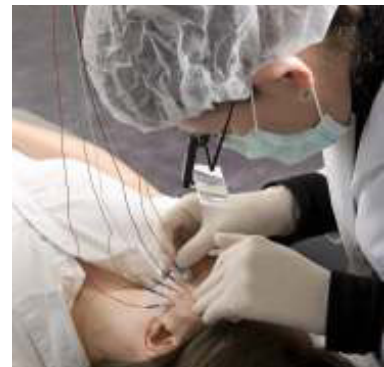
For those who are embarking on the transition from male to female, the permanent removal of hair is vital. However, with so many clinics and procedures to choose from, it's crucial that your chosen solution is reliable, safe and permanent.

At Advanced Electrolysis Centre, we have been specialising in permanent hair removal since 1996, continually improving the methods and the technologies that deliver the best results. You'll be in the hands of our experienced and qualified specialists, where you'll receive the ultimate level of personal care and attention. We also offer on-site parking for our 3hr clients subject to availability.

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.

So, whether you are in need of some general information, or you have already decided on a method that best suits your needs, come in for a chat and get expert advice on how to effectively be free of your unwanted hair FOREVER!

- Multi probe galvanic 16, 32 and 64 (Dual operator) follicle treatment
- Guaranteed Permanent Results
- Skin Rejuvenation
- Pigmentation Reduction
- Red Veins & Rosacea



 **advanced**
ELECTROLYSIS CENTRE

Phone: (02) **9362 1992**
9 George Street (just off Oxford St),
Paddington
aecsytdney.com.au