

# *Polare 98*



MAGAZINE

OF THE

NEW

SOUTH

WALES

GENDER

CENTRE

January

to

March

2014

# WHAT IS HEP C?

It is a virus that lives in the blood and can make your liver sick

Lots of people in Australia have hep C

Many people don't know they have it

# How does hep C affect people?

Most people don't feel sick when they first get hep C

1 in 4 people clear the virus naturally (without taking medicine). But they are not immune and they can get it again

After a while some people might feel sick or tired or like they have the flu all the time. Some people don't feel sick at all

And a small percentage of people may get serious liver disease or cancer. This usually takes a long time

## How do people get hep C?

Hep C is passed on through 'blood to blood' contact. This happens when the blood of someone who has hep C gets into someone else's bloodstream

The most common way to get hep C is by sharing any equipment used for injecting drugs



including fitts, spoons, swabs, water, filters & tourniquets



## Other ways of getting hep C

Sharing unsterile tattooing & body piercing equipment. This includes tatts or piercings done at home or in prison

Up to 7% of babies can get hep C if the mother has hep C

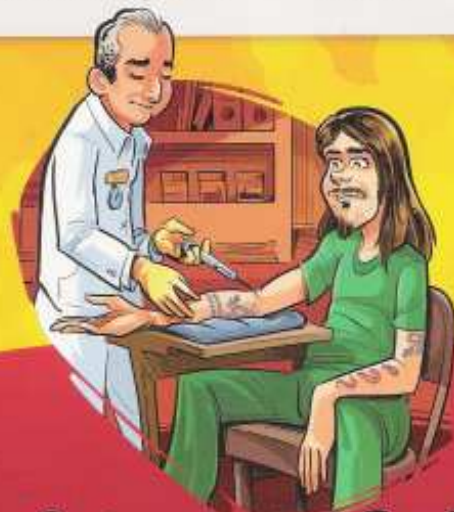


## How do you know if you have hep C?

Usually there are no signs when you first get hep C. If you want to check - get a free blood test from your doctor

### There are 2 blood tests:

- 1 An antibody test will tell you if you have ever come into contact with the hep C virus
- 2 A PCR test will tell you if you have the hep C virus now



## There is treatment for hep C. Treatment can get rid of the virus in 50-80% of cases

There can be strong side effects but treatment might be something to think about if you do have hep C. For more info in NSW call the Hep C Helpline (ph: 1800 803 990) or talk to your doctor



# 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.



**7 Bent Street**

**PO Box 266**

**Petersham**

**NSW 2049**

**Tel: (02) 9569 2366**

**Outside Met. Sydney 1800 069 115**

**(9-4.30, M-F)**

**Fax: (02) 9569 1176**

**Email:**

**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.

The image on the cover of this issue was created by **Edwina Keelen**, who received fashion and art training in New Zealand and since moving to Australia has worked as a Disability Services employee, is a member of the All-Nations Housing Co-operative, and is a member of the TAFE Crystal Street Adult Volunteer Tutorials in Numeracy and Literacy skills. She also attends conferences related to the transgender community and writes for *Polare*.

# 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](http://www.glcsnsw.org.au)

Or by mail:

PO Box 823, Newtown, NSW, 2042



## Leaving PRISON is TOUGH... I could do with some genuine SUPPORT

WIPAN are helping

WOMEN

EX-PRISONERS

Settle back into Life on the OUTSIDE

The WIPAN mentoring program  
is a great way to get the support  
you need:

- ◆ Meet face-to-face weekly
- ◆ Get assistance to locate necessary services
- ◆ Talk confidentially about life's challenges
- ◆ Enjoy activities together
- ◆ Strengthen confidence and self-esteem
- ◆ Create mutual trust and respect
- ◆ Have a positive role model
- ◆ Develop life skills

If you are interested in having a Mentor,  
contact TARA at Women in Prison  
Advocacy Network (WIPAN)

Ph: 02 8011 0693

Mobile: 0415 454 770

Email: [mentoring@wipan.net.au](mailto:mentoring@wipan.net.au)

Website: [www.wipan.net.au](http://www.wipan.net.au)

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

January-March 2014

No. 98

## CONTRIBUTORS

katherine cummings, marika, anthony carlino, tahlia trijbetz, j.r.latham, kelly glanney, kristina lovicu ashley caccamo, laurel walter, edwina keelen,

### REGULAR

- 6** Editorial by Katherine Cummings
- 12** News Items of Interest
- 13** More News Items of Interest
- 16** Over-55s Group
- 16** Young Women! Ahoy!
- 19** Gender Centre Events, Workshops,  
Activities January-December 2014
- 24** Young Women's Group Program 2014
- 38** Counsellor's Column by Anthony Carlino
- 39-42** Directory

### DEADLINE

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

**Editor:** Katherine Cummings  
*THE FINE PRINT*

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

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### FEATURES

- 10** The E-Male Project
- 14** Speaking Personally by Marika
- 20** Accommodation Services Updated by Kristina Lovicu
- 23** The Ups and Downs of Shinata Sangh, Model  
and Role Model
- 25** Cate McGregor, Woman and Warrior by Katherine Cummings
- 28** Special Considerations for Transsexual Surgeries  
by J.R.Latham
- 32** And Now There is a Sydney Trans\* and Intersex Working  
Group by Kelly Glanney
- 34** Caring for a Minority Within a Minority: Palliative  
Care and Transgender People
- 36** Transgender Day of Remembrance 2013 by Tahlia  
Trijbetz

### SERVICES & NOTICES

**Inside front cover:** What is hep C?

- 4** Gay and Lesbian Counselling/Women in Prison Advocacy  
Network
- 9** SAGE (Sex and Gender Education)/Transtopia
- 17** Needle Exchange/Pay-It-Forward Binder Program/  
FTM Australia
- 18** NSW Seahorse Society
- 19** The Carmen Rupe Memorial Trust
- 22** Central Coast Transgender Support/Inner City  
Legal Centre/Queensland Gender Centre/  
ACON Lesbian and Gay Anti-Violence Project
- 29** RPA Sexual Health Clinic
- 30** Anti-Discrimination Board of NSW
- 31** Transgender Anti-Violence Project/ OII

**Inside Back Cover:** What is hep C (cont.)



Is society deteriorating or am I becoming older and grumpier? A bit of both, I suspect.

As a child I could walk to school or to the nearest bus, tram or ferry, and travel in safety from my home in leafy Mosman (or rather the home that we were renting while we waited for the war to end or for the invaders to arrive, whichever came first).

I could chat with adults I encountered without hesitation, and there were no hordes of anxious mothers (I am not being sexist, the fathers were mostly absent in various war zones) cluttering up the streets around the schools as they dropped off, or picked up, their offspring. For a start, virtually nobody had cars, and if they had cars they wouldn't have wasted their scarce reserves of petrol on such a foolish exercise. It would have been seen as wasteful and we (the children) would have resented the implication that we could not navigate from home to school and back again on public transport or on Shank's Pony.

At weekends we would wander the bushy bits of our suburbs that the developers were destined to rape a few decades later, or climb the rocky headlands between the beaches where we swam (or, in my case, almost drowned). What was wrong with our parents, that they gave us this freedom and independence? Were there no dangers we should have been shielded from? No pedophiles lurking in the bushes?

As for physical dangers, of course they existed. As noted above, I came close to drowning once, and there were cliff faces to fall from and trees to fall out of. And sometimes naughty boys threw stones. I assume there were pedophiles, too, but on the very rare occasions their crimes were reported they were given so much publicity that I can only assume the danger was either much less than it is now or most people just didn't know about it.

I recall one case of a man who was reported to be roaming Frenchs Forest wearing nothing but a

pair of sandals and a sun hat and carrying a riding crop. The media called him The Whip and he was seen once or twice and frightened a couple of hiking Boy Scouts who had the good sense to run and report the incident as soon as they encountered him. But this was the only case I recall and surely modern children could be advised on the best course of action to take if they encountered a loonie such as he.

Some years later a steward on a ship I was travelling on tried to seduce me, but I had no idea what he was talking about and he finally gave up in frustration. I told my father about the incident after we left the ship and his response was murderous, so I was glad, in a way, that I said nothing at the time.

Nowadays, however, the media is full of stories of pederasty, and of pedophilia rings that exchange photographs and "groom" children for a life of sex and bullying by way of so-called "social media". Is there more of it going on than there used to be or are the perpetrators more organised? Or are we victims of a super-fast media that thinks the world craves this information and can't wait to spread it around so that every incident is reported, blown up to gargantuan proportions and thrown open for public comment?

If children were educated to act more independently and responsibly would this result in more cases of pedophilia, or fewer?

I don't know, but I **do** think that we are allowing our social relationships to be subverted by "social networks" that encourage incessant, and usually very lightweight, interaction between friends (and "friends") that must reduce their capacity to carry out independent thought and creative activity. I have a Facebook page and a few friends (fewer than twenty), but I am bombarded by hundreds of strangers who want to be my friends. Why?

It seems more like stamp-collecting than friendship to me. To be able to boast that you have 3,000 Facebook friends seems odd to me and if you add the concept of having "celebrity" friends, than it looks even more like stamp-collecting ("I have three albums of British Commonwealth and British stamps, including a Penny Black").

And it is not as if there were only one of these networks. There seem to be several, some of which appear to think you can encapsulate a thought within a specified number of characters (which could be a party game, but it is hardly thoughtful communication), and some of which specialise in photos, or conversation in groups, or the distribution of “selfies” or nude studies, designed to give your lover (or soon-to-be ex-lover) a convenient way to embarrass you as soon as your relationship falls apart.

The use of these social networks overflows into the area of negative education (education that spreads untruths or unthinking practices) so that texting degenerates into abbreviations and conventions that may save time and wear and tear on the thumbs, but must also have its effect on more conventional spelling and grammar. Note that I said “conventional” rather than “correct”.

I am well aware that language changes over time but language is a code and the more rapidly it changes the greater the loss in precise transmission of information. The rebus (the practice of using images for words or sounds, such as the number “8” for “-ate” or a picture of a bee for the letter “b”) has a long history in English but it was usually intended as an amusement or an elementary code, meant to be solved easily, rather than being used for serious communication.

A friend of mine, given the task of replacing the carvings around one of the main buildings at an Oxford college, decided to commemorate the election of the first female Master of that College by creating a sculpted rebus of her name.

This was duly carried out, with each letter of the Master’s name represented by the initial of one of the carvings. A few selected friends were told that the letter “b”, represented by a butterfly emerging from its chrysalis, was also a record of the fact that the person in charge of the project was in the process of emerging from her chrysalis in the male gender to her future life as a woman.

Returning to my whinge, however, it is a simple fact that standards of formal communication have declined steadily during my lifetime and some of the building blocks for communication, such as grammar and an understanding of the

different parts of speech, are no longer taught in school, but only at a tertiary level and only then if the student takes on some relatively esoteric discipline such as linguistics. People no longer appreciate the difference in case between the subject and object of a sentence, so that solecisms such as “It was given to he and I” are committed daily. It’s simple enough. “I hit him.” Subject: “I”, verb: “hit”, object: “him”. “He hit me.” Subject: “He”, verb “hit”, object: “me”. “She hit he and I.” Illiterate babble. As the meerkat in the velvet smoking jacket says, “Simple, hmmm?”

Nor is there a general appreciation of the difference between singular and plural and the need for the subject of a sentence to “agree” with its verb in number. I have been subjected recently to an illiterate tv advertisement for a product called Ostelin, complete with dancing skeletons, and this ad. assures me that one out of three Australians are not getting enough Ostelin. Really? One are not getting enough, aren’t one?

Incidentally, a few days ago I was on my way home from the Gender Centre and, as I walked through the green and pleasant park beside the GC, I observed some families picnicking ... three couples, to be precise and a horde of children moving too erratically to be counted. “How nice,” I thought, but as I came closer I noticed that all six adults were holding some form of digital device and were too busy consulting or texting or chatting or instagramming or tweeting on their smartphones, iPods and other electronic devices to communicate with each other, however cursorily. In truth the only cursors were those that allowed access to the world of virtual reality, binary thumb-talking or web-crawling.

I have been told that I lack “street cred.” which I take to mean that I am out of touch with the “person in the street” and should try harder to conform to street conventions. I prefer to try to preserve the discipline of language that is intended to communicate with a minimum of ambiguity.

Why should I emulate variations from a relatively stable standard, and if I *am* to divagate from the beaten track, which of several variants should I adopt? Where is the reference tool I can consult

in moments of doubt? Where are the authorities to whom I can go for a ruling?

I have encountered at first hand the impediment to communication in New York City where all versions of English are deemed to be equally authoritative and those who speak Anglo-English, Black English or Spanglish sometimes find difficulty in communicating. The end result is politically correct as well as being embarrassingly frustrating.

Humans are social animals. We have achieved amazing changes in the world we live in, through language and the ability, unmatched by any other species (so far) to record information with precision, and archive it for future reference. Knowingly to encourage the destruction of the tools that allow knowledge to be preserved and distributed is to foreshadow the death knell of human civilisation as we know it. The babble from the Tower of Babel will once again divide us, voice from voice and mind from mind, and only a tiny subset of humanity will preserve the necessary skills to keep us moving forward. Having consumed the physical resources of the planet, or made it uninhabitable through the use of fossil fuels, we will find that we can no longer benefit from the mental resources of those who have gone before us.

The writings of Roger Bacon are difficult enough for us to follow, the writings of Chaucer almost incomprehensible and works such as *Beowulf*, in Old English, (sometimes called Anglo-Saxon) need to be translated virtually word by word before they make any sense for most of us. The invention of printing and the consequent increase of availability of dictionaries and grammars did much to slow down the idiosyncratic changes that affected languages before 1453 but now much of that blessing is being dissipated by careless use of language and the culpable attitude of educators who refuse to educate.

What has this to do with transgender(ed) society. Everything, because we are part of the world and we have just as much responsibility to protect the transmission of information as anyone else. We expect people to listen to our arguments and to be persuaded by them, but unless we create a canon of information that can

be maintained and regarded as having some authority, we might as well build our towers of innovation and invention on quicksand and see them join the remains of Babel and King Ozymandias's vast and trunkless legs of stone as the detritus of a forgotten and useless Wasteland, complete, of course, since it is a *modern* wasteland, with polystyrene hamburger containers and a few discarded and dented soft drink cans and non-biodegradable plastic bags.

I have talked elsewhere of the illiteracies and solecisms perpetrated by those whose main object is to disseminate information (however inaccurate and self-motivated) i.e. the advertising and public relations industries. But really, why *should* I buy a barbecue from someone who can't spell the word?

Moving on, or as the current jargon would have it, going forward, allow me to describe some of the delights in store later in this issue. I have sometimes mentioned Matt Kailey's columns of trans-commonsense but I have not mentioned his book (he has more than one, but I have been re-reading this one). It is called *Just Add Hormones: An Insider's Guide to the Transsexual Experience* and describes Matt's transition at the age of forty-two. It is clear, clever, informative and one of the few books that has caused me to laugh out loud (that's right, the dour Scot laughed).

There is a column by Laurel Walter, who has been appointed to the Gender Centre to look after those of us who have passed the age of fifty-five. Laurel will be facilitating the Over-55s group and assures me it will be well-worth attending. There is also a new group being formed, for women between the ages of eighteen and thirty, and this will be facilitated by Ashley Caccamo.

The Women's Group I invigilate will continue to admit all and sundry, if they identify as female, at any stage and of any age, and on appropriate occasions we will fling our doors even wider if we are dealing a topic appropriate to our various genders, sub-genders and transitional groupings.

*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](http://www.sageaustralia.org)**

**SAGE - campaigning for your rights!**

The Gender Centre & Aurora Foundation present:

### *Transtopia 2013*

gender-questioning?

gender-queer?

Transtopia is a monthly group to be held over ten months in 2014 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 Nicola (on Mondays) at the Gender Centre  
(02) 9569 2366



## **The E-Male Project: An online exploration of the experiences of Australian female-to-male trans\* people**

**What is the purpose of the study?** The E-Male Project is an online study designed to explore the lived experiences of Australian female-to-male trans\* people.

**Who are we looking for?** Australian female-to-male trans\* individuals aged sixteen and older.

**What will participants be asked to do?** Participants will first be asked to take part in an anonymous survey online. Following this, participants will be asked to participate in a researcher-guided anonymous question/answer discussion blog. At no time will we ask you identifying information - you will remain anonymous - and no one who is not a participant in the study will be able to access the site.

**Will I have to use my name?** No. Participants will be required to choose a pseudonym of their choice that will identify them throughout the study. Participation will be *completely anonymous at all times*.

**What will the discussion be about?** The questions and discussions will focus on topics such as your sexual orientation, your experiences about disclosing your preferred gender identity, the transition process, your physical and mental health, experiences with healthcare services and other aspects of your life.

**Why do we want to study the lives of Australian female-to-male transgender people?** There are no previous studies that have focused *in depth* and *exclusively* on this part of the Australian population although sometimes they are invited to participate in studies as part of the LGBTI group or the general transgender population. We would like female-to-male trans\* Australians to voice their experiences as a group in their own right without assuming commonalities.

**Who is on the research team?** Our research team includes Associate Professor Gail Hawkes, Dr Amy Lykins, Dr Tiffany Jones, Dr Tinashe Dune, Dr Mitra Rashidian and Ms Andrea del Pozo de Bolger. Many members of the E-Males research team have previously engaged in legal and educational advocacy. Associate Professor Gail Hawkes, Dr Tinashe Dune and Dr Tiffany Jones have been involved in the creation of a Massive Open Online Course (MOOC) within Eduone at UNE ("Sexuality-based prejudice and discrimination"). This course features significant materials on issues of sexuality, sexual orientation, gender identity, homophobia and prejudice as well as queer pride. The course can be assessed at [www.eduone.net.au/module/sexually-based-prejudice-and-discrimination/](http://www.eduone.net.au/module/sexually-based-prejudice-and-discrimination/). Dr Tiffany Jones has repeatedly used research to engage in ongoing parliamentary enquiries and advocacy for transgender, gender queer and intersex citizens with the aim of increasing anti-discrimination protections and provisions in national and state legislation, and education policies.

**How do I participate?** Please go to the following URL:

[http://unebcss.us2.qualtrics.com/SE/?SID=SV\\_9SOLx5W9hqUPcuV](http://unebcss.us2.qualtrics.com/SE/?SID=SV_9SOLx5W9hqUPcuV) (copy and paste in your browser) both for more information about the study and to participate if you are interested. For any questions about participation or the study in general, please contact Ms Bolger at [adelpoze@myune.edu.au](mailto:adelpoze@myune.edu.au).

**This study has been approved by the University of New England's Human Research Ethics Committee HE12-229 expiry date 29/01/2014.**



“I was filling out the form  
and it said ‘Tick ONE box:  
male OR female!’”

Talk to someone  
who gets it...



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0448 006 961 | [imanadari.com.au](http://imanadari.com.au) | [imanadari@gmail.com](mailto:imanadari@gmail.com)  
Broadway, Glebe

## News Items of Interest

### **EUGENIA FALLENI TRIBUTE PROJECT INCORPORATED FORMED**

Mark Tedeschi, the author of *Eugenia*, has now established the Eugenia Falleni Tribute Project Inc., whose purpose is to raise awareness of the isolation and prejudice suffered by Eugenia Falleni *aka* Harry Crawford, and to raise funds to erect a gravestone above his unmarked grave in Rookwood Cemetery.

A permanent website has been established at: [eugeniafalleni.com.au](http://eugeniafalleni.com.au) and donations can be made through the website. If you wish to become involved in this project please contact Mark Hewitt on [markhewie@gmail.com](mailto:markhewie@gmail.com)

A small committee has been established and more interested parties are being sought.

***The Attempt to create an informational email list has been discontinued due to lack of interest and it is suggested that those who wish to be kept up-to-date with events should consult the Web-page and/or the Gender Centre Facebook page and/or the Gender Centre Twitter file.***

They haven't called, they haven't written ...

The Editor welcomes contributions from our readers. Letters, articles, opinions and life experiences are all welcome.

The deadline for contributions to the next issue is 8 March.

### **FTM TEENAGER ALLOWED TO PROGRESS HIS GENDER CHANGE AFTER YEARS OF BEING BULLIED**

A sixteen-year-old has been given permission by the Family Court to commence medical procedures to alter his physical characteristics from female to male.

'Shane' told the court that he had suffered bullying at the hands of teenage girls whose 'pack mentality' caused them to bully him in toilets and isolate him socially.

"Kids would try to watch me when I undressed in the changing room to see what parts I had."

'Shane' was also subjected to questioning about his gender identity, even to the point of some children asking if he was transsexual.

Justice Peter Murphy said the experts consulted had unanimously agreed that 'Shane' was suffering from gender dysphoria which, if untreated, could lead to long-term mental illness, severe depression and self-harm.

'Shane' and his parents asked for permission to proceed to the second stage of transition, which involves irreversible procedures, as opposed to the first stage, where 'puberty blockers' are used but the procedure is reversible.

'Shane' has changed schools and is living full-time as a male.

### **ACT GOVERNMENT CONSIDERING LEGALISING THIRD GENDER**



**Simon Corbell**

The ACT government is looking at laws to recognise intersex and transgender people in their official documentation. This would create a third category of

'indeterminate', 'intersex' or 'unspecified'. It is also intended that those who wish to alter their birth certificates to match their innate gender will no longer be required to have genital surgery before having their documentation amended.

Attorney-General Simon Corbell describes the reforms as "very important" and points out that they would bring ACT law into line with the

# More News Items of Interest

categories used by the Federal Government when issuing passports.

“I think it’s a necessary evolution of the law to reflect changing social expectations and acknowledgement of people who do not see themselves in the context of binary sex or gender,” he said.

## ECUADORIAN JUDGE QUOTES BIBLE IN REFUSING IDENTITY CARD GENDER CHANGE

Diane Rodriguez, a transwoman and gender activist in Ecuador, has been refused the right to have her identity card amended to show female gender.

Judge Ricardo Rivadeneira has disallowed the documentation change, quoting the Bible as saying “God created man in his own image, male and female.”



**Diane Rodriguez**

According to Rodriguez’s lawyer, Monica Valarezo, the judge quoted a number of verses from the Bible. She said, “Beliefs, dogmas and those sorts of things do not belong in legal matters.”

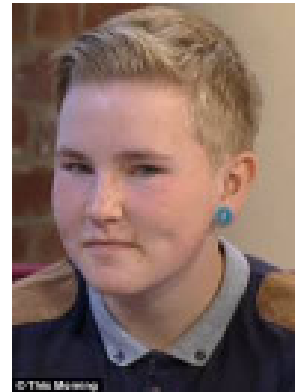
Giovanny Jaramillo, Permanent Representative of the Ecuadorian Committee for Human Rights, announced that he will dispatch letters of protest to the Vice-President, the National Assembly, the National Court of Justice and the Judicial Council, and has also reported the case to the Inter-American Commission of Human Rights.

The Ecuadorian Constitution forbids discrimination on the grounds of gender identity, among many other characteristics that may define an individual. It does however, still define a marriage as being between a man and a woman and, despite setting up relationships for same-sex couples that are supposed to be equivalent to marriage, fails to make provision for same-sex parental adoption. A lesbian couple is challenging this ruling and hopes to win the right to marry.

## BRITISH BOY ALLOWED PUBERTY BLOCKERS AT AGE TWELVE

Leo Waddell is one of the youngest recorded transgender children in Britain to be allowed puberty blockers, and says his greatest wish for 2013 has been granted.

Leo was originally named Lily but has lived as a boy since he was five and changed his name legally when he was eleven. When he encountered resistance from his GP on the question of administering hormone therapy he persisted until his local hospital agreed to administer the injections.



**Leo Waddell**

Leo’s mother is supportive and said, “Leo is over the moon. He’d already started puberty, and every month it had been a nightmare for him.”

Leo said: “I feel like a weight has been lifted off my shoulders. I’m finally where I wanted to be.”

## MURDERED TRANSWOMAN GIVEN CHURCH FUNERAL IN ROME

Andrea Quintero, a homeless transwoman struggling with drug addiction was living in Rome, centring her existence around the main train terminal Termini, where she was accepted by train staff and referred to as the Trans of Termini. She was found beaten to death and thrown on the railway tracks in July 2013.

Her family in Colombia refused to take responsibility for her disposal but a Jesuit-run charity organised a funeral for her in the beautiful Jesuit Church of of the Gesu, said to be a favoured church by Pope Francis.

The presiding priest is reported to have used proper female pronouns when describing Quintero. He also made the comment that the funeral was “a signal for the entirety of Rome to show that many people face discrimination and live their difficult lives in the face of indifference by our city.

Quintana’s killer or killers have not been found.

# Speaking Personally by Marika

As another Christmas looms, I approach it with quite different feelings of anticipation and expectation than I did in past years. As parent and grand-parent to a number of children, my festive involvement was, for decades, almost entirely focussed on immediate family.

A delight always, despite the inevitable tensions raised by the need to get it 'right' in the traditional Victorian sense and the almost inevitable adult slide downhill propelled by a combination of fatigue and alcohol at the end. The main objective, as far as I was concerned, has always been the imparting of magic and joy for the delight of the youngest family members.

Over the last few, seasons, however, as I've moved away, a number of them have also distanced themselves. My lifestyle has taken what some of them regard as somewhat too 'colourful' a turn.

Besides, my involvement has inevitably, for better or worse, become less direct, as they grow up and I become less energetic. I hate to admit it but I don't think I'm wrong in sensing that they tend to regard me kindly still but, nevertheless, more as a benevolent old neighbour who likes to drop in for a bit of festive cheer when it's on offer but has the good grace not to hang around for too long afterwards.

So, when my dear friend Joanne suggested we could launch her 'beaut' new kitchen by arranging a Christmas lunch as an opportunity of bringing together *her* sons and their partners and *my* son with his young family, I jumped at the idea.

Joanne and I had been introduced to each other's offspring individually but none of them had yet met with each other socially. When we

commenced transition, I in 2008, and Joanne in 2010, these were the children, and their partners, who stood by us when others found it just too hard.

I think it fair to say that it was the knowledge of their unwavering support that sustained us in those darker moments of feeling that what



**Marika**

we'd done would alienate us from many social opportunities in the future.

Quite silly really, but I'm sure these were feelings that many reading this would have shared, at some time or other. It's not long ago that my days were nothing more than a crushing bore, exacerbated by the bitter pill of having lost my beautiful studio with its regular stream of interested visitors.

As things have turned out, the reverse has become the reality. Sure, there are occasional days when, waking up in the morning, the realisation that I've no commitments other than perhaps a few housekeeping chores or a little grocery shopping is a rare but pleasant relief. Most of my days now are full and, more often than not, once again spent in the delightful

company of various friends of one kind or another.

In early October I accepted an invitation to take part in a three day 'Women's Retreat' in the Blue Mountains. It was organised by the Metropolitan Community Church with some generous financial support from LINC (Lesbians Incorporated).

Although I've always identified as an avowed agnostic, the pastor and members of MCC (Sometimes referred to as the 'Gay Church') have, without reservation, made me feel welcome whenever I've accompanied my Christian friend Joanne to Sunday Services etc., as well as to a number of social functions. I've also, incidentally, been well received by Joanne's Rotary Club friends, but more about that later.

The Retreat was wonderful and something I will always remember for the warmth of its embracing honesty and spiritual depth. I came away feeling uplifted, nourished and profoundly grateful for the privilege of having found myself in the company of so many inspirational people.

It got me thinking about how, in the maelstrom of everything that has happened to me over the last few years, there has been little space for reflection on higher things.

With that in mind, I set my mind to unpacking the thought processes that so indispose me to ever accepting that it's possible for any human being to be even remotely capable of understanding, let alone defining, what it is that drives the universe, the thing generally referred to as 'God'.

As an agnostic I do recognise that there has to be something at the heart. The engine, if you like. Whatever it is, I'm in awe but understand that it's beyond human comprehension. You

will be surprised, no doubt, when I tell you that I have occasionally 'prayed' to it, but only by way of an internalised recognition.

My new-found respect for the MCC is simply based on their acceptance of me without reservation, despite the fact that I've made no secret of my challenging spiritual convictions or of my transgender and lesbian status. They, broadly, share my belief that every individual has the potential to develop a personal awareness of, and relationship with, whatever it is that drives everything.

To impose one's beliefs upon others is contemptuous of this potential and highly offensive. Experience tells me that such behaviour is invariably based on a perverse need to dominate or control other human beings and is particularly reprehensible when it's applied to the vulnerable such as the elderly, the recently bereaved or the intellectually disadvantaged.

The notion of respect for all life, human or otherwise and without exception is, I believe, one shared by all people of conscience, and is not the exclusive preserve of formalised religion.

I believe that consideration of any person as inferior because of race, education, religion, social position, politics, age, gender, sexual preference, intellect, physical condition etc. has to be strenuously resisted.

\*\*\*\*\*

As I sat writing this article, the death of 'Mandiba', Nelson Mandela, was announced on the ABC news (it's Friday, 6th December). Although his passing has been expected for quite some time now, ever since he was admitted to hospital, his sudden end because of a lung infection has,

nevertheless, stunned me to a degree that I could not have anticipated. I had to stop writing and allow a few moments to compose myself emotionally.

As well as the enormity of the loss of this great man to the world, it's more than a little unnerving that the demise of this perfect exemplar of the sentiments expressed above would be announced at just this moment. Food for thought.

By the time you read this, I hope to have come through legal proceedings I initiated against an individual in early September on the grounds of sexual vilification and threats of violence.

I can't, however, share any of the details with you at this point because the case is still before the courts. It should be completed prior to the next *Polare* edition due in April.

Whatever the outcome, I hope to be able to share it with you then because the situation is one that some of you may also be confronted with some day.

It was very tempting to let the whole incident pass in the knowledge that the necessary legal processes can be painful, tedious and stressful.

Upon reflection, however, I realised that legal action was the only way to send a strong message that discrimination of any kind is reprehensible and punishable by law.

This is especially relevant when the offence is accompanied by actual, or threats of, violence. To do nothing about it would simply encourage the same line of behaviour again and again, if not towards me, towards someone else.

So, whatever the outcome, I think it's the message that is important, not just to the individual charged, but also to their social peers who are likely to

be of a similar racist or homophobic mindset. (birds of a feather).

As many of you already know, I have a small one-bedroom apartment on the Central Coast where I spend most of my time. Between three to five days out of every fortnight, however, are spent with my friend Joanne in Sydney. Consequently, I have been invited to accompany her to a number of pre-Christmas events in and around the city. One such event is to be a dinner with Joanne's Rotary Club friends and colleagues at a local golf club a few days before Christmas.

I've met with many of them during other social get-togethers previously and I've always been well received as her partner even to the extent that a couple who will be traveling to Europe for a month or so in 2014, have offered me their lovely house and garden in a quiet part of the city as a writer's retreat during their absence. I've accepted because, not only will it be an opportunity to get down to some serious writing, it will also be a chance to catch up with several friends I've been neglecting.

An added bonus will be the lovely old dog left in my care. I love dogs, and have had several over the course of my life.

Anyway, at the dinner I will probably drink more than I should as I invariably do, in the knowledge that Joanne will be driving me home safely. My point in telling you this is twofold. Firstly as kudos to Joanne for being such a responsible friend who will never drink and drive, but also as a reminder to you all to stay safe and out of trouble over the festive season.

Enjoy! Love!

*Marika*

## **GENDER CENTRE APPOINTS SUPPORT WORKER FOR OVER-55s**

*Are you intimidated by, or uncomfortable with, negotiating your way through mainstream services?*

*Are you in need of help or support to access & negotiate appropriate services?*

*Are you in need of support in residential care?*

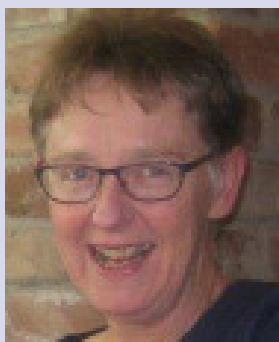
*Would you like assistance to attend routine health checks or screenings?*

*Do you want some practical assistance?*

*Are you feeling more vulnerable as you age?*

*Do you just want to talk?*

Hi I'm Laurel Walter, the new Over-55 Support Worker at the



**Laurel Walter**

Gender Centre, funded by the Department of Health and Ageing specifically for the transgender and gender--questioning community for people over the age of 55.

I'm at the Gender Centre in Petersham four days a week, mostly Tuesday to Friday, from 9.00am-4.30pm.

We are also running an Over-55 Support Group on the second Thursday of each month.

Please phone in advance if you'd like to attend. Contact: Phone **9569 2366**. If you're out of Sydney: **1800 069 115**.

## **Young Women! Ahoy!**

**S**tarting in mid-February 2014, the Gender Centre will be starting a new Women's Group for transwomen between the ages of eighteen and thirty.

My name is Ashley Caccamo and I am currently involved in organising meeting dates, workshops and handouts for the group.

I am glad to be a part of the Gender Centre and the work it does. As the group facilitator I will be attending and hosting the meetings every month to ensure that the support, guidance and spirit of the group will be secure and consistent throughout the months to come.

I hope that those of us who attend this group will work together to make this monthly meeting as productive and educational (as well as fun) as possible. Being a transwoman myself I know some of the problems we face.

**I feel that with many minds working together, we can make this group something special and my main objective is to ensure that we take home something we didn't have when first we met. I hope that what you take away with you will be uplifting, heart-warming and informative.**

So, please join us. I hope we can build this group together and that we can make some unforgettable friendships, participate in memorable and informative workshops and take part in lively, and sometimes controversial, discussions.

If you have any questions or are curious about specific meeting dates or workshops, see the projected programme on p.22 or if you just wish to know more about the Gender Centre, please contact us by phone on (02) 9569 2366 or check our website, [www.gendercentre.org.au](http://www.gendercentre.org.au), or our Facebook and Twitter networks for up-to-date information and breaking news.

*Ashley Caccamo*





## NEEDLE EXCHANGE



7 Bent Street,  
PETERSHAM  
(02) 9569 2366

9am-4.30pm  
Monday to Friday

A confidential free service for people  
with gender issues (*Ask for the  
Outreach Worker*)

### Sharps Containers

Pill Filters  
Condoms  
Spoons  
Water  
Fit Packs  
Swabs  
Dams



Syringes  
1ml, 2.5ml,  
5ml  
Needles  
21g, 23g,  
25g, 26g

or phone the Alcohol and Drug Information 24 hr  
advice, information and referral service. Sydney  
02 9331 2111  
Country 009.42.2599

## Pay-It-Forward Binder Program

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

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

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

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

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

Our website is:

<http://binderprogram.ftmaustralia.org> or you  
can email: [binderprogram@ftmaustralia.org](mailto:binderprogram@ftmaustralia.org)



# FTM Australia

## 2014

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](http://www.ftmaustralia.org)

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

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- **Mefol Aftercare cream** Valued at \$30

**City** **Drummoyne**  
Dymocks Building, 170 Victoria Road,  
Level 3, 428 George St, Sydney Drummoyne  
**9221 8595** **9719 1391**

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## NSW Seahorse Society

is a self help group based 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](http://www.seahorsesoc.org)

Email:

[crossdress@seahorsesoc.org](mailto:crossdress@seahorsesoc.org)

Membership enquiries, change of details etc. contact Membership Secretary, PO Box 6179, West Gosford NSW, 2250

**“crossdress with dignity”**



## Gender Centre Events, Workshops and Group Meetings Jan-Dec 2014

1.30pm		Feb 3, 24 Women's Group	Mar 24 Women's Group	Apr 28 Women's Group	May 26 Women's Group	June 30 Women's Group	July 28 Women's Group	Aug 25 Women's Group	Sep 29 Women's Group	Oct 27 Women's Group	Nov 24 Women's Group	
1.30pm	Jan 9 Over 55s	Feb 13 Over 55s	Mar 13 Over 55s	Apr 10 Over 55s	May 8 Over 55s	June 12 Over 55s	July 10 Over 55s	Aug 14 Over 55s	Sep 11 Over 55s	Oct 9 Over 55s	Nov 13 Over 55s	Dec 12 Over 55s
5.00pm		Feb 12, 26 Youth Group	Mar 12, 26 Youth Group	Apr 9, 30 Youth Group	May 7, 28 Youth Group	June 4, 25 Youth Group		Aug 6, 20 Youth Group	Sep 3, 17 Youth Group	Oct 1, 15, 29 Youth Group	Nov 5, 19 Youth Group	Dec 3 Youth Group
6.00pm	Jan 3 FTM Connect	Feb 7 FTM Connect	Mar 7 FTM Connect	Apr 4 FTM Connect	May 2 FTM Connect	June 6 FTM Connect	Jul 4 FTM Connect	Aug 1 FTM Connect	Sep 5 FTM Connect	Oct 3 FTM Connect	Nov 7 FTM Connect	Dec 5 FTM Connect
6.00pm	Jan 13 Parents' Group	Feb 10 Parents' Group	Mar 10 Parents' Group	Apr 14 Parents' Group	May 12 Parents' Group	June 9 Parents' Group	July 14 Par- ents' Group	Aug 11 Parents' Group	Sep 8 Parents' Group	Oct 13 Parents' Group	Nov 10 Parents' Group	Dec 8 Parents' Group
5.00pm	Feb 19 Young Women	Feb 19 Young Women	Mar 19 Young Women	Apr 23 Young Women	May 21 Young Women	June 18 Young Women	July 23 Young Women	Aug 20 Young Women	Sep 17 Young Women	Oct 22 Young Women	Nov 19 Young Women	



### 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**

# Accommodation Services Updated

The Gender Centre has been in operation for over thirty years now and has evolved into a different service from the one that it once was. Because of this evolution it is important to keep people updated on what we offer by way of supports and services.

The Centre started out as a crisis homelessness service for transgender women. The Centre still is predominantly a homelessness service that offers an array of different supports that include:

**Crisis Refuge accommodation:** This program is for people who are homeless and have no other accommodation options, The service has three refuge houses and can accommodate up to eleven people in total across the three properties. While living in the refuge each person is supported with intensive case management to help them progress towards independent living.

**Early intervention support:** This program offers support to people who are experiencing difficulty in their lives which could lead to a crisis such as homelessness. In this program people work with a case worker to address the key issues in their lives that have led to the crisis.

This may include referrals to other agencies for specialist support. In such circumstances the referrals are undertaken with the full knowledge and consent of the client and to a service that is transgender friendly and aware. This can include, for example, support for people who are transitioning in their workplace, needing court support or requiring support in educational settings

**Post-crisis support:** this service is available for people who have moved into their own accommodation but still feel they need a little bit of extra help to make sure they are stable in their new homes. Case work and ongoing support form the basis for this program.

**Counselling:** The Centre offers a counselling service that matches well with the services above. Counselling is one of the mechanisms by which clients can be supported to explore the issues that have led to crises in their lives. This is particularly useful as a part of the early intervention and post-crisis services that the centre offers. This approach to not only practical support but also emotional and psycho-social supports ensures that clients are equipped to address life issues in a holistic way

**Polare page 20**  
**January-March 2014**

**Over 55 specialist worker:** The centre has an ageing and aged care specialist whose role is to work with any person over the age of fifty-five who is in need of support. This role also involves working with ageing and aged care services to ensure they deliver services in a culturally appropriate manner suitable to the needs of transgender and gender diverse people

**Group-work programs:** the Centre offers an array of groups to meet different needs within the transgender and gender diverse community. These groups include a men's support group, a parents' group, young person's group, an over-55 group, young women's group, and a general non-age-specific women's group. The best way to know what groups are on is to check out the centres website for updates or the Gender Centre Events, Workshops Activities page in *Polare* (p.17 in this issue).

The Centre also offers training and support to other services and organisations for an array of different needs. To find out about this program people are encouraged to call the Centre (02 9569 2366) and discuss

their learning needs with the team.

There are other services the Centre offers that are available to transgender and gender diverse people. If you have an issue or want to know something and you think that what is listed above does not meet your needs, give us a call to see what other supports may be available to you.

*Kristina*



## Leichhardt Council GLBTI Action Group

Leichhardt Council has formed a GLBTI Action Group and has, so far, planned two events for the LGBTI community during Mardi Gras.

1. Raising the Rainbow Flag, Friday, 7 February at 8.00am at the Leichhardt Town Hall. The Rainbow Flag will be flown throughout Mardi Gras.
2. "Feel the love" Mardi Gras event, with light refreshments. Program not yet finalised with speakers and music to be arranged. To be held Friday, 13 February at 7.00pm at the Leichhardt Council Administration Building.

For further details contact Laurel Walter, Over-55 Support Worker, at the Gender Centre on 9569 2366

## PLEASE NOTE:

In February 2014 the Gender Centre will be launching an online survey dealing with the emergent needs of transgender and gender diverse people of all types in Australia.

Details have not yet been made available, but if you wish to participate (and please do), then keep an eye on the Gender Centre website and our Twitter and Facebook social networks for details.

Participation *is* important, as the gathering of accurate and authoritative information is the best way to ensure that services are tailored to need and facts can be collated and presented to the authorities so that gender diverse communities can achieve the necessary social, legal and medical standards they have been denied for so long.

Please watch for the survey and take part as soon as you can. Early, accurate information is vital to our future.



**The ACON Lesbian and Gay Anti-Violence Project can be contacted on (02) 9206 2116  
or Freecall 1800 063  
or [avp@acon.org.au](mailto: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 World Professional Association for Transgender Health Standards of Care (formerly known as 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](mailto: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](mailto: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](http://www.glcsnsw.org.au)

**FREE!**  
**HOME TUTORING IN READING AND**  
**WRITING FOR ADULTS**  
**(nights preferred)**  
**Call Margot 9335 2536**  
**or Mim 9335 2350**  
**@ Petersham TAFE**


**PARENTS OF TRANSGENDER**  
**CHILDREN**

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**



**A.I. Electrology.**  
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**THE UPS AND DOWNS OF SHINATA SANGHA, MODEL AND ROLE MODEL**

Shinata Sangha, 24, of Birmingham, England, is an MTF transgender who has known all her life that she was destined to be female. As a child she insisted on wearing female clothing, makeup and jewellery.



**Shinata Sangha**

Her father had died when she was four and her mother worked several jobs to maintain the family that consisted of Shinata, her three sisters and her brother.

At fifteen she met the first transgender woman she had ever known and had thought she was the only person of her type in the world.

By the time she was seventeen she had been invited to host an event at a London transgender club. She also worked as a transgender model and started down the road to reassignment.

She had met a supportive boyfriend when she was eighteen and was crowned World's Most Beautiful Transgender in 2011 and 2012. Then it turned out that her boyfriend was already married and she was devastated. She came close to suicide but finally realised she had sacrificed a lot to be where she now was and she would not give up now.

She helps at LGBT community events and does her best to support young transgenders finding their way.

There are still obstacles. Casting agents cancel bookings when they find out Shinata is transgendered.

An Australian swimwear firm cancelled an engagement for 2014, saying she wouldn't be good for their brand.

[Ed. note: I wonder what firm that was? Does anyone know?].

Shinata won't let prejudices stand in the way of her dreams. She has achieved a great deal and intends to continue fulfilling her ambitions and helping others like her to fulfil theirs.

# Young Women's Group Programme 2014

19th of February

## INTRODUCTION

Here we will be introducing ourselves to the rest of the group. Getting to know new faces, participate in some light activities and also talking about what plans are ahead with our new group.



19th of March

## CHANGING GENDER - MY STORY

This month we will be talking about gender and our stories. Ashley will talk about her transition and growing up, as well as a volunteer speaker who will share their personal story. We will also be discussing gender and how it affects us in our daily lives and what it means to us.



23rd of April

## PASSING PRACTICALS



This month the group will divide into two groups and talk about 'passing', and what this means. You will have the chance to participate in workshops exploring different elements relating to passing.

21st of May

## SUPPORT & FAMILY

This meeting we will look at the importance of support. Where should we find support? What type of support do we need? And how to help your family and friends understand what you're going through.



18th of June

## SOCIAL ACTIVITY

This month we will decide how we should spend our group meet up.



23rd of July

## BULLYING & HARASSMENT

This meeting will be focusing on bullying & harassment and how we can find support where we should go to keep safe of times of bullying & harassment. This can be a difficult topic to explore, so we will aim to create a space where everyone feels safe and supported.



20th of August

## SELF DEFENCE CLASS

This month a self defence lesson is going to take place. Although you may never need it, you will be taught how to defend yourself should the need arise.



17th of September

## ART THERAPY

During this month, participants will have the opportunity to create their own artistic work.



22nd of October

## OPEN TO SUGGESTIONS

The group will not have a theme for this week and will be left open for participants to pick what they would like to do. This can be a social activity, or exploring a particular topic of conversation.



19th of November

It's been a year! Time for good byes, reflection over some food on the BBQ





# Cate McGregor, Woman and Warrior

Issue Ninety-Eight

by Katherine Cummings

Lieutenant-Colonel Cate McGregor has been much in the news for the past few months, as she emerged from her previous *persona* as Malcolm and became known to the public as the highest ranking transgender in the Australian military. As chief speechwriter for the Chief of the Army, Cate had the necessary writing skills and contacts to ensure that her story was well-told, and in the right places.

She has appeared on the ABC's "One Plus One" and in a variety of other media, and recently the *Australian Women's Weekly's* January 2014 issue devoted eight pages to re-telling her story and providing some background to the transgender phenomenon in general.

Cate has many influential and well-known friends, including the Prime Minister, and her reception in her new *persona* has been generally accepting to the point of being affectionate. There have, of course, been exceptions and she has been the recipient of hate mail and abuse via the so-called social networks, networks which all too often turn out to be anti-social or just plain vicious. Patrick Lyon from News Limited records an assertion that Cate was "counselled" for having gone outside the permissible limits of response. Personally, I applaud her refusal to be made the punching bag for ignorant bigots in the armed forces and elsewhere. Her invective may not have been ladylike, but the attack that impelled her response was not gentlemanly, and, if quoted accurately, came close to infringing the Anti-Discrimination Act that bars vilification of transgenders.

As I said to her in a recent email, her conduct provides an excellent example of the French saying "This animal is dangerous. When attacked it will defend itself."

Cate comes from a military family so it was not surprising she chose the Army as her profession, although her progression through her career has not been without changes of mood and direction. Having graduated from Duntroon, Cate's predecessor-person, Malcolm, left the

army after having attained the rank of Captain. Cate now says she did so in a fit of pique because there were no wars in progress and promotion was slow.



**Lieutenant-Colonel  
Cate McGregor**

The *Women's Weekly* article (by Caroline Overington) states that in 1985 Malcolm found himself consulting a counsellor who diagnosed him as transgendered (sorry about the changing pronouns ... I am trying to be consistent with the gender being presented at any given time).

Malcolm joined a law firm in 1990 and then entered the world of politics, as a political adviser and speech writer for both major parties in turn. During this time his employers included Bob Carr (Labor) and John Hewson (Liberal).

The next stage saw a period as political correspondent but by 2000 Malcolm had rejoined the Army and was taking part in military operations in East Timor.

Sometime in the period between entering politics and rejoining the Army, Malcolm visited me a few times to talk about gender issues. At this time Malcolm was considering joining the Naval Reserve so that we had more to talk about than gender, as I had done my National Service in the Navy and had by then spent several years in the Naval Reserve.

Malcolm, however, decided to return to the Army, and during this period also met the love of his life and married.

When Cate finally decided she had to be Cate her wife was the first to be told and Cate rightly refuses to reveal what went on between them at this point. Many of us sympathise with this and remember with great sadness the irresistible compulsion that caused us to break the bonds with our spouses, for fear of being pushed into suicide or madness.

But Cate has preserved the friendship of her wife, and that is a wonderful and enviable situation, a situation that is becoming more common as time passes, and will, I hope, become the norm rather than the exception.

Cate is an attractive woman and belies her 57 years, both in her personal appearance and in the stylish fashions she wears (in uniform she is also very attractive).

In her interview Cate talked of leaving the Army in the middle of 2014 and said she would like to be trained as an air hostess. I assume this was said tongue-in-cheek as I can't imagine her wanting to move from a career of decision-making and leadership to being the woman (however well-groomed) who "makes cups of tea for people on aeroplanes".

Whatever Cate chooses to do, I believe she will do it with dedication and skill and she will always be a role model for transgenders, in the armed forces and elsewhere, who need to reconcile their inner life with service to the nation.

Leaving the topic of Cate and concentrating more on the *WW* piece by Ms Overington, I would like to take issue with some of the peripheral material in the article. I do not know if she did her own research or if she used background material gathered for her by some junior journalist, but some of the material was poorly researched and even misleading.

Overington brings up a foolish phenomenon referred to as "sex change regret". This is probably the brainchild of those who want to prevent people from having gender reassignment and makes about as much sense as they ever do. It is stated that people who suffer from sex change regret "have the operation [and] desperately wish they hadn't". No authority is given for this furphy, and no references are provided. I understand that the *Women's Weekly* is not an academic journal but a little fact-checking would not have gone amiss.

In 2009 the Monash gender dysphoria clinic was in trouble because some malcontents accused the staff of the clinic of rushing people into gender reassignment rather than exposing them to extended rounds of psychotherapy intended to return them to sanity. These critics suggested that the process of psychotherapy should have gone on until the "right" decision was reached (no prizes for guessing what the "right" decision was). An article by Jill Stark in the *Sun-Herald* for 31 May 2009 mentions three

dissatisfied clients of Monash (out of some 600). Follow-up comments on the Internet raised the number to eight. Even if the number had been increased to twenty this would still mean a dissatisfaction rate of less than four per cent.

There are many medical procedures that have a much higher dissatisfaction rate than this. Check stomach banding and breast enhancement. Academic surveys of satisfaction rates for gender reassignment (or, as it is sometimes called, gender affirmation), carried out over more than thirty years, show an almost uniform satisfaction rate of around 86 per cent. A recent study at Leicester University Hospital gave an even higher satisfaction rate of 95 per cent. So much for "sex change regret".

The only example given for this phenomenon is that of Alan Finch, who went through reassignment, then decided he had made an error and went back to living as a male, and has devoted a lot of his time since then to attacking the Monash centre and trying to have authorities intervene to prevent gender reassignment.

Alan, in fact, confessed that he cheated on the assessment tests to gain admission to the Monash Medical Centre programme, and when I first read of his conversion to "Helen" in an article in *Woman's Day* (19 December 1989), Helen was ecstatically telling the world how happy she was to be a woman at last, having spent so much of her life desperately wanting to be female.

She also contracted a marriage, which was illegal at the time, and protested bitterly when it was expunged. "I will fight for the law to be changed!" he (or she) is quoted as saying. By 2004 Alan had changed course 180 degrees and was in full flight trying to sue the Monash Centre for malpractice and saying he should have been forced to have more psychotherapy.

In the 2009 version of his story Alan claims to have had doubts and misgivings about going forward and that he mentioned these doubts to the surgeon moments before the operation was about to begin. He then, he claims, blacked out and was devastated to find when he awoke that his wishes had been ignored and he was the horrified possessor of a neo-vagina. A fine dramatic touch was added to the 2009 account ... a younger sister who sobbed and primally wailed

as she pleaded with Alan not to go forward to surgery. In the earlier version she did not get a guernsey.

It appears, then, that Alan Finch is not a reliable witness (the *Weekly* apparently tried to find him and could not, lucky them) and the concept of “sex change regret” is a shaky one, unless one is prepared to allow that almost any medical procedure (or social one, for that matter ... consider the failure rate of marriages) is liable to involve a subset of cases who wish they hadn't done whatever it was they did, and are prepared to find someone else to blame for a decision they made, as adults, having, one hopes, informed themselves of the possible consequences beforehand.

Another case cited by Ms Overington is that of Mike Penner, an American sports writer who transitioned from Mike to Christine in 2007, then reverted to Mike and eventually committed suicide in 2009. This may be a case of sex change regret but no hard facts have emerged in the case of Penner and we have no way of knowing what other pressures may have caused him to act in this way. I have a friend in the USA who has gone from male to female to male and back to female and seems perfectly happy. I have another friend who went from female to male and back to female and is now considering a return to male. And why not? There are no hard and fast rules about how a human being should act in these circumstances, and human behaviour is almost infinitely variable. It is true that there is a high suicide rate among transgenders, but a recent study has shown that the rate is forty times higher among pre-operative transgenders than it is among post-operative.

I also think it is demonstrable that many of those who suicide do so because of the way they are treated by society before, during or after the event, frequently losing their employment or being denied employment and education, and all-too-often losing the support of those nearest and dearest to them. To suggest that those who suicide do so because they are suffering from regret at having transitioned is superficial and unsupported by any studies I know.

The concept of “sex change regret” smacks of prejudice, ignorance and bias rather than any

real attempt to research the situation. There is a wealth of published material on the history and current status of the transgender phenomenon. Leaving aside the instances of sex change in mythology and the unproven cases of historical characters such as the Chevalier d'Eon and the Abbe de Choisy, who may have been transgendered or may have been transvestites, our knowledge of the transgender situation, and our consideration of the legal, social and medical rights of transgenders dates effectively from the early 1950s with the “outing” of Christine Jorgensen late in 1952.

The “nature or nurture” argument rages on in this area as in many others and a number of researchers, in Australia and elsewhere, are working on the aetiology of transgender.

Until we know more, much of what we believe is bound to be based on conflicting evidence, much of it anecdotal.

It does not help however, for this evidence to be cited uncritically in articles intended for the lay reader who has no knowledge of, and little interest in, the deeper concerns of those who are trying to persuade society to accept them as people who have not sought to be different, and who do no harm in their difference.

Transgender is not a hobby, nor a whim, nor a perversion.

It is a medical condition, treated by medical professionals, and should be treated with the kind of respect and empathy one would expect for any other human condition.

*A few references for those interested in reading further*

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# Special Considerations for Transsexual

Issue Ninety-Eight

## Surgeries by J R Latham

In a recent letter to the editor published in the international journal *Aesthetic Plastic Surgery* "Ethical issues in considering transsexual surgeries as aesthetic plastic surgery", I raised the question of whether treating transsexual patients differently from cosmetic surgery patients was ethically just.

In Australia, and across many countries around the world that use the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (the DSM), people who want to change the physical characteristics of their bodies towards the gender which does not match their genitals, are diagnosed with a mental disorder: recently renamed "gender dysphoria," and more commonly known as transsexuality.

Transsexuals have long been sensationalised in the media, from American-born Christine Jorgensen who underwent genital reconstruction surgery in Denmark in 1952 to Australian army Captain Bridget Clinch who came out as transgendered in 2010. Transsexuality is fascinating, perhaps because the mere existence of such people calls into question our most fundamental beliefs: men are born boys with penises, and women are born girls with vaginas.

Not necessarily, say trans people. And feminist theorists, perhaps most famously Judith Butler, have used these people to argue that gender does not follow from sex. Being born a boy does not mean one will grow up to be a man. Or that one day that man might not begin to live as a woman, and desire to change her body to reflect this.

In order to acquire genital reconstructive surgery and/or hormones that will feminise the body, this person must first be assessed by a psychiatrist.

This is because such a desire - to present one's body in a gender other than that suggested by one's genitals is considered a mental disorder.

But as cosmetic surgeries become increasingly more popular and even normalised, how can we continue to label as mentally disturbed people who wish to change their bodies?

Is cosmetic surgery only acceptable when it moves someone towards a culturally legible

aesthetic of beauty? Is this impossible for trans people?

These are the questions my letter asked. For those people who seek cosmetic surgery or nonsurgical procedures (such as Botox or liposuction), there is no requirement for psychiatric evaluation.

It is acceptable to want less fat, fewer wrinkles, straighter teeth, ears that don't stick out so much, or a larger penis. All of these requests are treated as routine. It is not standard for plastic surgeons (or orthodontists, or urologists, or ear, nose and throat specialists) to refer such patients for psychiatric assessment. And why would they?

A barrier like that would surely dissuade people from seeking out these procedures, and it would certainly increase the cost associated with doing so.

But more off-putting to those who value their privacy is the intrusive nature of psychiatric assessment - where one is questioned about one's puberty, body image, sexual



encounters, childhood and relationship with one's parents. It certainly was for me. But as someone whose aesthetic desires were deemed to be "of the wrong sex" - that is, male and not female - I didn't have a choice.

It was psychiatric assessment or no surgery. What was the difference, I wondered, between my desire for a flat chest, and a woman's desire for larger, or differently shaped breasts? Mine moved me away from cultural aesthetics of beauty, which of course are gendered. Females have breasts. Females want breasts. And if anything, they want them to be bigger.

Men don't want to have breasts. Men with may develop breasts - a hormonal condition called gynecomastia - and these men are routinely treated with cosmetic surgery to have their breasts removed. No psychiatric assessment required. The treatment is obvious.

To their credit, in the case of gynecomastia, the first treatment option suggested in clinical guidelines is for doctors to reassure men that there is nothing wrong with them.

Here, doctors seem to recognise a diversity of gendered bodies (some men have breasts), but this does not extend to people born female who wish to have their breasts removed.

The letter was a philosophical inquiry asking clinical practitioners if the basis of their continued discrimination against transsexual patients is viable. I had hoped to open a dialogue regarding the ethical treatment of transsexual patients. Indeed, I made this very argument in my cover letter accompanying my revised submission: in part in response to one reviewer whose comments, and I quote, were simply "In my opinion, avoiding the psychiatrist examination of these patients is an error, even if the authors [sic] have extensive experience in this field.

I believe that this conclusion will not be a recommendation for aesthetic surgery clinics." After the letter was printed in the journal, I received abusive emails, and was interviewed by the ABC. In the subsequent ABC feature I was placed in conversation with Professor David Castle, chair of Psychiatry at St Vincent's Health and the University of Melbourne, who repeated the exact material I critique in my article: transsexuals are a "special case" who need to be treated differently from "normal" people who seek cosmetic surgery to "enhance beauty".

It seemed, and it still does, that even broaching the topic of discussing the possibility of treating transsexual people like other people who desire aesthetic alterations to their bodies is absurd. It is not even worth engaging with because there is a notion of the self-evident truth that transsexuals are not like 'us'.

JR Latham is working on a PhD at the Australian Research Centre for Sex, Health and Society, La Trobe University and can be contacted through

<http://latrobe.academia.edu/JRLatham>

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

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**An anthology of real-life stories by trans  
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**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

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### 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](mailto:adbcontact@agd.nsw.gov.au)

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Visit our website at: [www.lawlink.nsw.gov.au/adb](http://www.lawlink.nsw.gov.au/adb)  
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# 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**

**or 1800 069 115 or report online at [www.tavp.org.au](http://www.tavp.org.au)**

## Do You Believe You Are Intersexed?

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

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

**[oiaustralia@bigpond.com](mailto:oiaustralia@bigpond.com)**

**or visit our website at [www.oiaustralia.com](http://www.oiaustralia.com)**

# And Now There Is A Sydney Mardi Gras Trans\* and Intersex Working Group by Kelly Glanney

**S**ydney Gay and Lesbian Mardi Gras has established a Trans\* & Intersex Working Group to advance the interests of Trans, Intersex and Queer (TIQ) people through increased visibility and greater inclusion in the Festival. Mardi Gras Co-Convenor Paul Savage says:

“Sydney Gay and Lesbian Mardi Gras is firmly committed to improving Trans, Intersex and Queer inclusion in all aspects of the Festival.

“This working group has been established to help us better understand the experience of TIQ and other gender diverse people and to provide insight into how we can best encourage and facilitate TIQ greater participation/visibility in future Mardi Gras Festivals.

“Since speaking at the launch of the Carmen Rupe Memorial Trust during the 2013 Festival, I’ve learned quite a lot about the historical marginalisation of TIQ people within our broader community.

“Those insights have helped Co-Convenor Siri Kommedahl, the Mardi Gras Board and me develop a better understanding of this history and through that, a deeper commitment to ensuring Mardi Gras provides greater opportunity for Trans, Intersex, Queer participation in the future.”

Kelly Glanney, who helped launch the Carmen Rupe Memorial Trust during the 2013 Festival and now chairs the Trans\*

Intersex Working Group continued her description of progress to date:

“The Sydney Mardi Gras Festival provides an incredibly powerful platform for individual self expression, not to mention a world of opportunity for any group with a story to tell or an important message to get across.

“The Working Group’s goal is to see ever larger numbers of TIQ people accessing that platform, participating on all levels, each bringing their own individual lustre to the incredible Kaleidoscope of human passion, colour and creativity we’ve come to call Mardi Gras.”

The TIQ Working Group has certainly hit the ground running, initiating a number of projects in time for the 2014 Festival. They are currently implementing TIQ Diversity training for Mardi Gras Volunteers and Medical Staff and working with Mardi Gras’ creative team to produce a float that will make a clear statement about the importance of TIQ inclusion in this year’s parade.

Kelly Glanney continues: “TIQ people have long been the outsiders in this community, in part because we’ve allowed ourselves to be invisible. It’s time we did more to change that – it’s time we all became more proactive in ensuring that TIQ plays an ever more prominent part in the most amazing LGBTIQ Festival on earth.

Asked about the sometimes problematic history of TIQ inclusion in the broader LGBTIQ



**Mardi Gras 2013**

community, Kelly replied, “Some were rightly a little sceptical about our decision to launch the Carmen Rupe Memorial Trust (CRMT) as part of the 2013 Sydney Mardi Gras Festival. The various Trans\* groups historical

relationship with sections of the LGB community has been strained on occasion but ultimately that decision was all about Carmen - and no one loved Mardi Gras more than she did.”

“It turned out to be the best decision we made. Team CRMT produced a stall and main stage



performance for Fair Day, a multi-media performance piece for Queer Thinking at the Seymour Centre and then won Mardi Gras Awards for our launch event at Slide and our float in the parade itself. Mardi Gras gave us the platform, our volunteers put in a huge effort

individual ways, each of us brings our own individual lustre to that shining diamond of diversity - the LGBTIQ community.

“Like any healthy reciprocal relationship, we’ve found that the more you give to Mardi Gras, the more you get back. Ownership and creative control come through active participation. Rather than simply criticising and refusing to participate as some of us have historically chosen to do, the best way to effect change is to be involved. That’s why we’d love to see more Trans, Intersex, Queer and other gender diverse people becoming involved in Mardi Gras at all levels – as volunteers, members, content producers and consumers of the amazing array of experiences on offer



### **Mardi Gras Trans\* and Intersex Working Group**

and that hard work really paid off. We even had national media coverage - the ABC’s 7.30 Report came out and covered our launch.

“It was an amazing experience for all of us lucky enough to be involved. Since that time our relationship with Sydney Mardi Gras has gone from strength to strength. In April members of the CRMT’s creative team were invited to participate in Mardi Gras’ strategy brainstorm sessions.

One of the ideas we put forward at that time was picked up and used to inform Peter Novotnys’ amazing Kaleidoscope imagery for the 2014 Festival. Now we’re talking to Mardi Gras about using some of that incredible imagery in a big production TIQ float that will be all about inclusion.

Our original idea was to frame Mardi Gras as Sydney’s “Jewel in the Crown” .. a multifaceted diamond of diversity which only shines brightly because we’re all so different – because each and every one of us brings something special to this amazing kaleidoscope of creativity, colour and motion we call Mardi Gras. In our

during the Festival. Because that’s how we make Mardi Gras more relevant for TIQ people – by more of us getting involved and making it more relevant in the process. We firmly believe that 2014 is finally our time to shine and we’re inviting all TIQ people to join us.”

The Mardi Gras Trans\* Intersex working group has set up a group on Facebook (<http://on.fb.me/IZNn3V>) where you can have your say, contribute ideas and find out more about opportunities to be involved in the TIQ float and other aspects of the 2014 Festival

On Sunday 19 January, the Working Group plans to organise a Mardi Gras Engagement Day barbecue and briefing session between 11.00am and 3.00pm at a CRMT HQ (320 Riley Street, Surry Hills) to further that discussion and to allow interested parties to sign up for the TIQ float, various events and other opportunities for participating in the 2014 Sydney Mardi Gras Festival.

For further information, please contact Kelly on 0452 454 965 or email at [mgtiwg@gmail.com](mailto:mgtiwg@gmail.com).

It is not known how many older transgender people there are in Australia. Such statistics are not sufficiently addressed in national data collection by the Australian Bureau of Statistics nor in the Australian Census.

With such little acknowledgement, no wonder trans persons have been described as a ‘minority within a minority’ and as ‘society’s most vulnerable population’<sup>1</sup>.

This vulnerability is compounded when trans people are faced with life limiting illness and do not receive the end of life care they need.

It is certainly an area for growth for the sector. Most staff have probably not come into contact with patients whom they know are trans or have been unaware that patients’ gender identity may not be reflected accurately in their legal documentation.

Some trans people may present as one gender while having physical characteristics typically associated with another gender. For trans people who have medically affirmed their gender, their gender history of having lived in another gender may require additional sensitivity and advocacy from service providers.

“A proactive program of support is necessary to understand and welcome trans persons requiring palliative care, as many have suffered discrimination not only from society but also in previously accessing health care and services,” says Mike Kennedy, Palliative Care Victoria’s Program Manager. Mike is also the Chair of the GLBTI Health and Wellbeing Ministerial Advisory Committee, providing advice to the Victorian government on the health and wellbeing of GLBTI Victorians.

“Training may be necessary to provide the care trans people, as every person, deserves at the end of life, and this training is available.

“The Living Longer Living Better reforms and

**Palliative care and transgender people** the national Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Ageing and Aged Care Strategy provide additional impetus for aged and palliative care services to comply with the new legal and social framework for care arising from recent amendments to the Commonwealth Sex Discrimination Act 1984,” says Mike.

Gávi Ansara, the Senior Health Policy Officer at the National Lesbian, Gay, Bisexual, Trans and Intersex (LGBTI) Health Alliance, points

out that from 1 August 2013, all palliative care service providers are required to avoid both direct and indirect discrimination on the basis of sexual orientation, gender identity and intersex status. This includes service provision by religiously affiliated aged care providers who receive federal funding.

An example of the kind of obstacles to care of the trans patient - adapted from a US example given by Dr Robert Killeen in GeriPal

An elderly trans woman with metastatic cancer was profoundly weak following failed chemotherapy. After admission and supportive care in a hospice, her overall status improved. She was well enough to leave the unit, but not well enough to go home. She was too poor to afford a single room.

Chronic care facilities viewed her as if she were both male and female, and thus would not place her with a roommate. As she identified as a woman, she wished to have another woman roommate. Unfortunately, facilities saw her as originally ‘male’ and either could not or would not comply. While the hospice may have provided her with otherwise exemplary care, the chronic care facility’s lack of respect for her gender identity effectively prevented her from ever leaving the unit. Thus the lack of trans awareness by this facility led to poor quality of care.

“A first step to applying the law in palliative care services will be to identify barriers to inclusive treatment and make changes to policies and practices accordingly.”

“For example, when making first contact over the phone or in person, few organisations have procedures to avoid mis-gendering people whose voices and physical appearance may be misread by staff. If palliative care workers are helping people to clean and dress themselves, using the person’s preferred language for their own body parts and being sensitive to their need for prosthetics or special clothing can be pivotal to their overall well-being.”

“The help of palliative care staff who are attuned to these challenges can enable people to approach the end stage of their lives with comfort and dignity,” he says.

“Making palliative care inclusive means looking closely at all aspects of care, including housing assignments, toilet facilities, medical record-keeping, databases, gender-specific social groups – anything that affects a person’s daily life.

“It may also include implementation of clear policies to protect patients from harassment and other discrimination by other staff and patients, and even by their biological family members.”

“Creating ways to celebrate and honour these life journeys during end-of-life care can be personally meaningful and transform people’s experiences of palliative care.”

The Alliance has developed the Gender, Body and Relationships Passport to allow care providers to view and apply people’s wishes. This document is currently undergoing legal review to ensure its utility across a range of contexts.

The Alliance’s Inclusive Language Guide on Respecting People of Intersex, Trans and Gender Diverse Experience provides a basic overview of how to use language respectfully in care situations.

### **Rainbow Tick Accreditation**

The Rainbow tick, a world first accreditation program was developed by Gay and Lesbian Health Victoria (GLHV) in consultation with Quality Improvement and Community Services Accreditation (QICSA).

This consists of six standards against which services can be formally accredited to demonstrate LGBTI inclusive practice and service delivery. Services can include the six standards as part of their cycle of service accreditation or can apply to do the Rainbow Tick as a stand-alone assessment, subject to



**Mike Kennedy,  
Projects Manager,  
Palliative Care  
Victoria**

ongoing reassessment and quality review.

Services that receive The Rainbow Tick will have the opportunity to be listed in a national register of LGBTI accredited organisations. Melbourne City Mission (MCM) Palliative Care is one of the first organisations to start working towards a Rainbow Tick. Michael Bramwell from MCM says, “It’s not enough to have person-centred care to be compliant and be truly inclusive of LGBTI people.” “I would encourage others to seek accreditation and raise awareness of their commitment. If people know we have policies they are more likely to tell us about themselves and their needs and wishes.”

Organisations are advised to audit compliance against their own standards before applying for accreditation.

GLHV has partnered with the Peter MacCallum Cancer Centre on developing resources and training to raise LGBTI awareness and improve patient outcomes, including a series of case study video vignettes.

Loree Cook-Daniels of FORGE and the Transgender Ageing Network in the USA reinforced the question with ‘Is your ‘T’ written in Disappearing Ink? A Checklist for Transgender Inclusion’, to help ageing organisations and programs measure how well they include trans people and issues in their work.

Gávi also cautions that LGBTI accreditation alone is not enough: “Trans and intersex people may have experienced discrimination even within an ostensibly LGBTI setting. Many trans and intersex people live as and identify as heterosexual.

They need clear assurances of trans-specific and intersex-specific awareness and inclusion from palliative services.”

<sup>1</sup>Rev. Stan Sloan of Chicago House, creator of the TransLife Center, quoted by Robert Killeen MD-geripal

Reprinted with kind permission of Mr Mike Kennedy, Projects Manager, Palliative Care Victoria, from *Palliative Care Newsletter*, No. 100, December 2013, pp.12-13

**B**efore we plunge deep into the new year, with resolutions of happiness, health and safety, I'd like to acknowledge those whose 2013 may have brought with it experiences of feeling unsafe or at risk. Sadly this is not uncommon for many transgender



**Newtown: Back row Kelly Glanney, Harrison Harding, Rachel Smith, Chai Palila, Kate Doak. Front row Sarah Jayne, Tahlia Trijbetz**

people Once a year, on 20th November, the world stands together against this violence and this past November we did the same thing.

On that night, Newtown Neighbourhood Centre's main hall was buzzing with almost eighty transgender and gender-diverse people, family, friends and allies. Standing before the crowd, I looked out at a sea of faces, of people whose identities and life experiences were uniquely their own but who all had one thing in common. They had all come together to commemorate Transgender Day of Remembrance - a day that began to honour Rita Hester who was murdered in 1998 and a day that honours all those who have lost their lives due to hatred, prejudice and violence towards transgender people because of their gender identity.

Transgender Day of Remembrance also allows us to raise awareness of the ongoing violence and hate crimes against transgender people, historically and still today, and reminds us that

**Polare page 36**

**January-March 2014**

there is still much to do to fulfil every person's right to a life free from violence.

That night's event was extraordinary, as it had been created by the community, for the community. Because the process of grieving is such a personal and unique experience, with no 'one' way, no 'right' way to mourn, the evening represented just *one* such opportunity to come together as a community and recognise this day. Community members generously agreed to share their own experiences with the room - of challenges and hardship, but also of strength and resilience, reflecting on what makes them strong and looking towards the future. Others chose to express these stories through prose, music, poetry and art - again celebrating the diversity of expression within the community.

We also invited those present to contribute to our *Wishing Well*, a box covered with the iconic pink, blue and white stripes of the transgender pride flag. Into the well, people placed messages they wrote about their wishes for the future... something they wish for themselves, their hopes or dreams; something they wish for transgender people here and across the world; or something they wish for wider society. Anything at all.

These inspiring and moving messages will be compiled into an image or poster so that we can share with the wider community the hopes and dreams of the people who attended the event that night. In this way, we can help spread messages of positivity and of possibility.



**Parlt. House: Pip Ditzell, Tahlia Tjibetz, Katherine Cummings, Dan Stubbs**

The Transgender Day of Remembrance commemoration continued on Friday 22nd November in the NSW Parliament House. We were privileged to have Superintendent Tony Crandell, the new NSW Police Corporate Sponsor for LGBTI issues, present the keynote address. He jokingly professed that, as a newcomer to this role, he would inevitably make mistakes and asked for our pardon in advance. By doing so, he exposed his own vulnerability and 'humanity', reducing the power difference to what felt quite like equality.

He made it clear that it is transgender people themselves, not others, who are the experts on their lives and the issues affecting the transgender community. As such, he looks forward to walking alongside the community to gain greater understanding and knowledge. Supt. Crandell's speech was honest and sensitive, and showed great insight into the significance of the commemoration. We thank Supt. Crandell and the other representatives of the NSW Police who attended the event for their strong, positive presence, and for their ongoing commitment and support. I know that this dedication is echoed throughout the NSW Police Force and I look forward to continuing our partnership in the coming year.

In addition to emceeing the event, the Gender Centre's Katherine Cummings presented a powerful poem of her own, where intent eyes and slight nods from the group illustrated the resonance and relevance of her words. Katherine then welcomed contributions from the audience, with those taking up the offer candidly sharing their personal stories and reflections.

I would also like to mention that it was heart-warming to see representatives of a number of key organisations at the event, including the Transgender Anti-Violence Project partners, the Inner City Legal Centre and City of Sydney.

On behalf of the Transgender Anti-Violence Project and all of us at the Gender Centre, I'd like to sincerely thank all who attended these events, for standing together and supporting each other.

I am very grateful for the help of some exceptional volunteers, the Carmen Rupe Memorial Trust and the team at InsideOut TV who filmed both events, and the Newtown Neighbourhood Centre and Parliament House



**Katherine Cummings, Superintendent Tony Crandell and Tahlia Tjibetz**

for donating the use of their venues for our events. Each one of you contributed something special to the accomplishment of a powerful Transgender Day of Remembrance 2013.

I wish you all a wonderful year, where the only tears shed are those of laughter, and where we take one, or even two or three, steps closer to making those Wishing Well sentiments a reality.

**Tahlia Tjibetz**

## LGBTQI CONFERENCE 24-25 FEBRUARY 2014

Informa Australia and the Sydney Gay and Lesbian Mardi Gras are delighted to present the national premiere event.

The inaugural LGBTQI Conference will be hosted at the Four Points by Sheraton in Sydney on the 24th and 25th of February 2014.

The agenda can be found at [www.informa.com.au/conferences/health-care-conference/lgbtqi-conference](http://www.informa.com.au/conferences/health-care-conference/lgbtqi-conference)

- What defines the LGBTQI Australian experience?
- How has national discussion on LGBTQI rights, legislation, healthcare and ageing, progressed in recent years?
- Has cultural discourse moved towards inclusive discussion or is it still challenged by traditional thinking and social norms on gender diversity and sexuality?

These are just a few of the themes for discussion at the Conference. Be there!

# The Difference Between Caretaking and Caregiving

by Anthony Carlino



**Anthony Carlino**

Most people tend to consider themselves as caring people, and express it through their actions towards others.

There is, however, a little understood and darker side to the act of caring for another which is neither discussed enough nor well understood.

Caretaking refers to those times when one individual does for another something which that person is perfectly capable of doing for themselves. Behind this behaviour is a desire to be perceived as a “good person” or be liked by the recipient. In other words, the caretaker is attempting to control the perception of that person. This is controlling behavior rooted in personal insecurity and an unhealthy need to be in control. This behaviour is often associated with individuals who come from families within which there were addictions and/or abuse.

Signs of caretaking include but are not limited to:

- Believing you know what is best for others.
- Trying to fix other’s problems without being asked to do so, which is directly related to the next sign, i.e.,
- Lack of personal boundaries.
- Seeing self-care as a selfish act.

What makes caretaking so difficult for the untrained eye to spot is that the actions of the person are camouflaged under the label of caring. More often than not, the person engaging in caretaking is unaware of what they are actually doing because it feels similar to intimacy and love although it most certainly is not.

The distressing irony is that the attempt of caring for the other person often leads those being cared for into a condition of learned helplessness – which renders them incapable of doing things for themselves which they are more than capable of doing. They have been disabled by the

“caring” of another. Quite often, caretakers eventually see themselves as “martyrs” who have done so much for those cared for, and fail to realise their “care” is both unhealthy and disabling.

It is important to note that this dynamic between two people is co-created. Caretakers want to be in control and to be seen and viewed as good people and this allows their insecurity to be quelled temporarily (it never allows the insecurity to be overcome). The recipients want to relinquish control as it makes life easier and, ultimately, it means they do not have to take responsibility for their own happiness, a procedure which would be a hallmark of adult maturity.

It can be a revelation for a caretaker to understand that being liked for who we are is very different from being liked because we gave someone what we believed he or she wanted from us. Here at the Gender Centre, clients are welcome to bring this topic to counselling to work on and potentially relieve themselves of the burden that comes with believing that you know what is best for others. We can only know what is best for ourselves, and suggesting we know what is best for others does not respect that person nor his or her right to self-determination.

*Anthony*

**A Few Good Men ... or Women ...Or Whatever ...**

**We need volunteers to help staff the stall on Mardi Gras Fair Day (Sunday 9 February). This involves a two and a half hour shift handing out information, telling people about the Gender Centre and generally being helpful. If you'd like to be part of this, call Phinn on 9569 2366.**

## 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 with HIV/AIDS.  
41 Elizabeth St, Surry Hills, NSW 2011 or PO Box 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  
w w w . b g f . o r g . a u  
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  
PO Box 22, Kings Cross, NSW, 1340  
Tel: (02) 9360.2766  
Fax: (02) 9360.5154

## KIRKETON ROAD CENTRE

Needle exchange and other services  
Clinic Hours:  
Mon, Tue, Thu, Fri, 10am - 6pm  
Wed 12 noon-6pm  
Weekends and public holidays, 10am - 1.45pm (NSP & methadone only)  
Outreach Bus - Every Night  
100 Darlinghurst Road  
(Entrance above the Kings Cross Fire Station Victoria Street

Clinic 180  
180 Victoria Street, Potts Point, 2011  
Tel: (02) 9357 1299  
Fax: (02) 9380 2382

Clinic 180 open

## Monday to Saturday

1.30pm-9.00pm  
Needle syringe program  
Condoms

## Monday to Friday

1.30pm-9.00pm  
Sexual health screening  
HIV screening  
Hepatitis C testing, hepatitis B testing and vaccination  
First aid and wound care  
Counselling and social welfare assistance  
Drug and alcohol assessment and referral

## 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/



# Directory Assistance

Issue Ninety-Eight

## 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](http://www.plwha.org.au)

Katoomba

PO Box 187,  
Katoomba, NSW, 2780  
Ph: (02) 4782 2119

[www.hermes.net.au/plwha/](http://www.hermes.net.au/plwha/)  
[plwha@hermes.net.au](mailto:plwha@hermes.net.au)

## POSITIVE WOMEN

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

Ph: (02) 9206 2000  
[www.acon.org.au/education/womens/campaigns.htm](http://www.acon.org.au/education/womens/campaigns.htm)

## REPIDU

Resource and Education Program for Injecting Drug Users  
Mon - Fri, 9am - 5pm Sat & Sun, 1 - 5 Deliveries Tue, Fri 6 - 9  
103/5 Redfern Street, Redfern, NSW, 2016

(Redfern Community Health Centre, enter via Turner Street)  
Tel: (02) 9395 0400  
Fax: (02) 9393 0411

## RPA SEXUAL HEALTH

**CLINIC** provides a free and confidential range of health, counselling and support services. Ph: 9515 1200

## 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](mailto: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 information 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.

Lvl 4, 414 Elizabeth St, Surry Hills, NSW, 2010  
PO Box 1354  
Strawberry Hills NSW 2012  
Tel: (02) 9206 2159  
Fax: (02) 9206 2133  
Toll free 1800 622 902  
[infoswop@acon.org.au](mailto:infoswop@acon.org.au)  
[www.swop.org.au](http://www.swop.org.au)

## SYDNEY BISEXUAL NETWORK

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

## SYDNEY MEN'S NETWORK

Welcomes FTM men.  
PO Box 2064, Boronia Park, 2111  
Tel: 9879.4979 (Paul Whyte)  
[paulwhyte@gelworks.com.au](mailto:paulwhyte@gelworks.com.au)

Tel: (02) 9565.4281 (info line)  
[sbn-admin@yahoo.com](mailto:sbn-admin@yahoo.com)  
<http://sbn.bi.org>

Pub social in Newtown on 3rd Sunday of every month followed by a meal. All welcome.  
POB 281 Broadway NSW 2007

## SYDNEY BISEXUAL PAGANS

Supporting, socialising and liberating 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 function, 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@saahs.nsw.gov.au](mailto:sshc@saahs.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 Benerambah Street, Griffith PO Box 2485, Griffith, NSW 2680  
Tel: (02) 6964.5524  
Fax: (02) 6964.6052  
[glsg@stealth.com.au](mailto:glsg@stealth.com.au)

## WOLLONGONG TRAN

Transgender Resource and Advocacy Network. A service for people who identify as a gender other than their birth gender. Providing a safe and confidential place to visit, phone or talk about gender issues. Thursday AND Friday 9am - 5pm  
Tel: (02) 4226.1163

## WOMENS 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

## WOMENS AND GIRLS EMERGENCY CENTRE

174 Redfern Street, Redfern  
Tel: (02) 9319 4088

## 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](mailto:ausbinet@rainbow.net.au)  
[www.rainbow.net.au/~ausbinet](http://www.rainbow.net.au/~ausbinet)

### AISS 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](mailto:aissg@iprimus.com.au)  
[www.vicnet.net.au/~aissg](http://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](http://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](mailto:knoble@iinet.net.au)  
[www.changelingaspects.com](http://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](http://www.ftmaustralia.org)  
[mail@ftmaustralia.org](mailto:mail@ftmaustralia.org)

### NATIONAL LGBTI HEALTH ALLIANCE

Office: (02) 8568 1110  
Fax: (02) 8212 9013  
PO Box 51, Newtown, NSW, 2042  
[www.lgbtihealth.org.au](http://www.lgbtihealth.org.au)

## TRUE COLOURS DIVERSITY

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

Web: [www.truecolours.org.au](http://www.truecolours.org.au)  
Email: [Mail@truecolours.org.au](mailto:Mail@truecolours.org.au)

## International

### AGENDERNEWZEALAND

A caring national support organisation for Cross/Transgender people, their partners and families. For a detailed information pack, please contact:  
Email: [president@agender.org.nz](mailto:president@agender.org.nz)  
[www.agender.org.nz](http://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 WC1N 3XX England  
[www.beaumontsociety.org.uk/](http://www.beaumontsociety.org.uk/)

### BEAUMONT TRUST

The Trust is a registered charity, the aim of which is the support of transvestites, transsexuals, their friends and families. It fosters research into both psychological and social aspects of transvestism and transsexualism and can provide speakers to address other organisations. It produces literature and arranges workshops, develops befriending facilities and assists with conferences. The Beaumont Trust, BM Charity, London WC1N 3XX. <http://www3.mistral.co.uk/gentrust/bt.htm>

### CROSS-TALK

The transgender community news & information monthly.  
PO Box 944, Woodland Hills CA 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](mailto: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](http://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](http://www.genderbridge.org)  
[info@genderbridge.org](mailto: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](mailto: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](http://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](mailto: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 INTERSEXTRUST 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](mailto:resources@gendercentre.org.au)

# Avoiding hep C

There is no vaccine to stop people getting hep C, so...

**Don't share a bloody thing!**  
Never share any injecting equipment

Always use new equipment including fits, spoons, swabs, water, filters & tourniquets



Wash your hands before and after injecting



For tattooing & body piercing it is best to go to professionals who use sterile equipment



Don't use other people's razors, toothbrushes or tweezers. There may be blood on them that you can't see



# You cannot get hep C from...



Hugging or kissing (and it is very rare to get hep C from sex)



Sneezing or coughing or from toilets



Sharing food or drinks



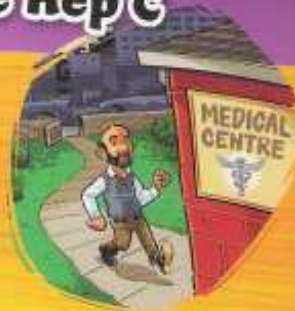
Mosquito bites



# Staying healthy if you have Hep C



Visit the doctor regularly for checkups



Cut out or cut down on alcohol and stay away from binge drinking



Eat a healthy diet



Get vaccinated for hep A and hep B



# For more information

## Hep C Helpline

ph: 1800 803 990  
inmates can call free from prison phone  
[www.hepc.org.au](http://www.hepc.org.au)

if you are not in NSW and need information about hep C call  
1300 HEP ABC (1300 437 222)

## ADIS (Alcohol & Drug Information Service)

Sydney callers  
ph: 9361 8000  
other NSW callers  
ph: 1800 422 599

## Aboriginal Medical Service

to find your nearest service contact AHMRC (Aboriginal Health & Medical Research Council)  
ph: (02) 9212 4777  
[www.ahmrc.org.au](http://www.ahmrc.org.au)

## NUAA (NSW Users & Aids Association)

ph: 1800 644 413 (NSW only)  
[www.nuaa.org.au](http://www.nuaa.org.au)

## Kids Helpline

ph: 1800 551 800  
[www.kidshelp.com.au](http://www.kidshelp.com.au)

## Family Drug Support Help Line

ph: 1300 368 186 (24 hrs)  
[www.fds.org.au](http://www.fds.org.au)

## Reach Out

[www.reachout.com.au](http://www.reachout.com.au)

To speak with someone in a language other than English please phone TIS (Telephone Interpreter Service)  
ph: 13 14 50



This booklet was produced by the Hepatitis C Council of NSW. Copyright Hepatitis C Council of NSW Inc. Funded by the NSW Health Department. Illustrations by Anton Erndli. Graphic Design by Eleanor Tapia. Printed October 2009.

# The Permanent Solution...

in Permanent Hair Removal

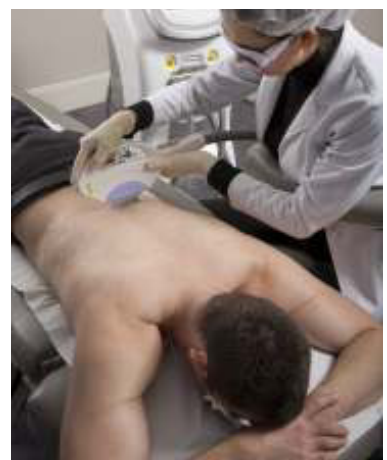
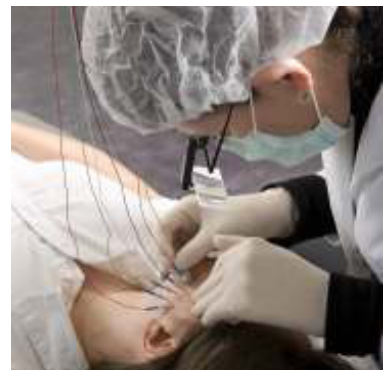
For those who are embarking on the transition from male to female, the permanent removal of hair is vital. However, with so many clinics and procedures to choose from, it's crucial that your chosen solution is reliable, safe and permanent.

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  
[aecsdney.com.au](http://aecsdney.com.au)

