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The H.B.I.G.D.A. XVIII Biennial Symposium

10-13 September 2003, Ghent, Belgium

by Elizabeth Anne Riley

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I arrived at the opening introduction. An informal occasion for networking and chatting. Here I recognised Randi Ettner author of "Gender Loving Care" and began the meeting of minds ...

Vern Bullough (U.S.A.) mentioned that there are twelve Catholic saints who were only identified as women upon their death.

There were many presentations most of which ran in parallel. This was extremely unfortunate as there were at least fifty presentations that I could not attend. The committee was given very loud feedback regarding this aspect, so hopefully will take note for future symposiums.

Following is a run-down of some aspects I found particularly interesting.

- A new version of the Harry Benjamin standards is currently being devised to reflect and respect the continuity of the spectrum of clients' needs and an awareness that professionals need training to include the acceptance of diversity within the community.
- Canadian prisons must now pay for gender re-assignment surgery for inmates.
- Only four states in U.S. have anti-discrimination laws protecting the transgender community.
- "In Germany a population of 65 million alone there are 45,000 recorded cases of Gender Dysphoria from medical records, but self-help organisations report more like 400,000 cases" - Friedemann Pfaefflin (Germany)
- Friedemann then hypothesised that "the characteristics of the medical provider may affect the prevalence rate" and "bigger cities, that have clinics, have higher prevalence rates (than smaller cities)".
- 27 percent of applicants for reassignment surgery in Sweden are foreigners.
- Vern Bullough (U.S.A.) mentioned that there are twelve Catholic saints who were only identified as women upon their death.
- Pamela Connolly (U.S.A.) presented the multicultural perspective of clients in Samoa, Tonga and India.
- Professor Louis Gooren gave a wondrous and scientific account of how testosterone levels at different phases effect genital formation and growth. He then went on to discuss the "bed nucleus of the stria terminalis" which was about the time I began to glaze over.
- Peggy T. Cohen-Kettenis (the Netherlands) gave an



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account of children with Gender Identity Disorder in Canada and the Netherlands. Ken Zucker (Canada) debating Diagnostic and Statistical Manual (D.S.M.) - the reasons to de-list/retain Gender Identity Disorder in the next D.S.M. due out in about 5-6 years.

- Professor Louis Gooren spoke in depth about the specific effects of hormones in both M.T.F. and F.T.M. clients.
- There was a fascinating account of Cricothyroid approximation and the use of other phonosurgical procedures to alter perception of the sexual orientation of the voice. James P. Thomas (U.S.A.).
- My paper, "Counselling Clients with Gender Dysphoria: An Ethical Approach" was well received. I will give a summary in next *Polare*.
- Joris Hage (Netherlands) gave a historical review of sex reassignment surgery.
- Stan Monstrey (Belgium) spoke about phalloplasty - "Is it worthwhile"
- "Vaginoplasty, Dr. Preecha said in Bangkok they have completed 2,500 gender reassignments between 1980 and 2002. He mentioned four cases of necrosis but not a single case in the last four years.
- Stephen Whittle (U.K.) gave an account of ethics, law and practice.
- Richard Green (U.K.) discussed "Legal and Illegal Discrimination against Transsexuals" and the "Gender Recognition Bill" to be presented in Spring 2004 that provides full legal recognition of the new gender for all purposes including marriage.
- Tom Mazur (U.S.A.) discussed a number of intersex conditions and research results regarding indications of Gender Dysphoria in this population. In 89 cases of various intersex conditions there were only two cases with gender dysphoria (one F.T.M. and one M.T.F.). In both cases the condition was Partial Androgen Insensitivity Syndrome (P.A.I.S.)
- Kate Bornstein presented a video presentation "Taking the Last Drag". A humorous look into why transgender people should not smoke.

Quotes:

- "Character is only one factor in determination of sex and does not override gender identity" - Eli Coleman, President of H.B.I.G.D.A.
- "Legal recognition and rights are necessary for sexual health" - Eli Coleman"
- "Poor peer relations were the highest indicator for children's psycho-social success" - Peggy T. Cohen--Kettenis.
- "Success of hormones depends on age, genetics, race and good luck" - Professor Louis Gooren.
- "(transsexuals) have no higher cardiovascular mortality than the regular population" - Professor Louis Gooren.
- "Only four cases of breast cancer in M.T.F.s ever and no cases in Amsterdam" - Professor Louis Gooren.
- "In M.T.F.s, only two cases known of prostate cancer" Professor Louis Gooren.
- "In F.T.M.s only two cases of ovarian cancer in Amsterdam" - Professor Louis Gooren.
- "All complications (of F.T.M. surgery) were in smokers" Stan Monstrey (Belgium)
- "Operating on a smoker is like operating on someone who is 70 irrespective of their age" - Preecha Tiewtranon (Thailand)
- "In the U.K. £6m - £12m has been spent to prevent transgender rights by various groups" - Richard Green (U.K.)
- "Law is not about control- it is about vision" - Stephen Whittle
- "the church is the largest group of transvestites in the world" - Friedemann Pfaefflin.

Above is a mere fraction of the amount of remarkable material presented at the conference and I want to thank the Management Committee for providing me the opportunity to experience such a marvellous, extraordinary and informative event.

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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. We offer a wide range of services to people with gender issues, their partners, family members and friends in New South Wales. We are an accommodation service and also act as an education, support, training and referral resource centre to other organisations and service providers. The Gender Centre is committed to educating the public and service providers about the needs of people with gender issues. We specifically aim to provide a high quality service, which acknowledges human rights and ensures respect and confidentiality.