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Transgender and Sport

And the Assumption that Males Change Sex to Reap Rewards in Women's Sport

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American Fallon Fox, first openly transgender mixed martial artist

An area of women's sport which is creating gender confusion, heated debate and for which gender verification has implications, is transgenders (specifically male-to-female) in sport.

What can and must happen is open, fair and rational discussion about this, and other issues, that concern women in sport.

Six of the eight Australian States and Territories prohibit discrimination on the grounds of sexuality and five, namely New South Wales, South Australia, Western Australia, the Australian Capital Territory and the Northern Territory, prohibit discrimination on the grounds of transgender identity. There are substantial variations between the States and Territories, for example, in N.S.W. sport is exempted from the provisions of the Transgenders Bill 1996. Since 1995 a Sexuality Discrimination Bill has been under consideration at the

federal level. Under the proposed Bill, transgender is defined as a person of one sex who:

- assumes any of the characteristics of the other sex, whether by medical intervention (including reassignment procedure) or otherwise; or
- identifies himself or herself as a member of the other sex; or
- lives or seeks to live as a member of the other sex; or
- attempts to be, or identifies himself or herself as, a transsexual.

There are two distinctly different points of view in relation to male-to-female transgenders participating in competitive sport.

One side of the debate argues that there is a competitive advantage for a male who has undergone sex reassignment surgery because of his physical training and development. Men have significantly higher levels of testosterone and a greater muscle to fat ratio and heart and lung capacity than women. Research conducted in South Australia has also shown that males generally have greater motor skills than females. In our society it is usually the boys who have greater motor experiences and practice opportunities. That is, they are more likely to be involved in activities where they run, jump and catch. The other side of the debate argues that a physiological advantage does not necessarily exist. Transgenders must continually take massive doses of oestrogen which decreases their strength, and their bodies no longer produce testosterone. Female transgenders behave as "typically womanly" as possible and avoid doing anything to tip their physical appearance over to the masculine side (and therefore tend to shy away from sport or significant training). Within the debate are several assumptions:

- that anyone exposed to testosterone at puberty will be a good athlete
- that all males make better athletes than all females, and
- that males will change gender in order to reap rewards in women's sport which they are unable to obtain by competing in men's sport.

All of these assumptions are false. In relation to the last assumption, a transgender believes he or she was born into the wrong body and it is a passionate, lifelong and ineradicable conviction. The sex reassignment process is extremely complex and lengthy and involves surgeons, gynaecologists, endocrinologists, plastic surgeons, psychiatrists, speech therapists and lawyers. Once a person has a sex-change, they live the rest of their life as a member of that sex. It is not something someone decides overnight nor something someone would do in order to play women's sport. There is also the related issue of female born athletes who have genetic advantages for various sports. These include Marfan's Syndrome which causes women to grow to heights of seven foot (some female basketballers and volleyballers have this syndrome) and congenital adrenal hyperplasia which causes an over-supply of testosterone in women and produces extreme muscularity. If transgenders are prohibited from playing sport because of a presumed genetic advantage, this raises the question of whether people born with genetic advantages for sport should similarly be prohibited from playing.

Unfortunately, sport doctors cannot agree to what extent, if any, female transgender athletes would be advantaged by a male past. Dr. Brian Sando, senior medical director for the Australian Olympic team, says a lot depends on whether a transgender had trained heavily between her adolescent growth stage and the sex-change operation.

Dr Tony Millar, of the Lewisham Institute of Sports Medicine, says the effect of a sex-change on performance would vary depending on the sport of the competitor. The International Amateur Athletic Federation (I.A.A.F.) has discussed the issue of transgenders in sport. It felt that individuals undergoing sex reassignment from male-to-female before puberty should be regarded as female. However, decisions concerning eligibility of individuals who had undergone sex reassignment (male-to-female) after puberty should be decided by the relevant medical body within the sport organisation concerned. The only known physiological tests conducted in Australia on a female transgender showed that, although scoring well in the areas of lung capacity and anaerobic threshold, she fell well within the normal range of female performance characteristics. If we add to this physiological data, the incidence of transgenders in the population, then this issue can be put in perspective.

For example, approximately 2,000 people have received medical treatment in Great Britain. If this is extrapolated to Australia's population and then further reduced by the number of people playing competitive sport, the issue is visible only under a microscope. There is no simple solution to the dilemma of whether transgenders (male-to-female) should be able to participate in women's sport, although the predominant train of thought appears to be that they should participate for fun but not for glory. What can and must happen is open, fair and rational discussion about this, and other issues, that concern women in sport.

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