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Stress and the Transgendered Community

Psychological and Medical Health and Lifestyle

Paper presented at the first National Lesbian, Gay, Transgender and Bisexual Health Conference "Health in Difference" in Sydney in 1996.
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Not fitting into society's box and label scheme is a catalyst for anxiety - and anxiety leads to stress.

Before I commence the main thrust of this paper, I would like to address two points: firstly, that I am focusing on the male transgendered person and secondly, the term "transgendered".

In the eyes of the general community, a person changing gender is coped with rather easily as long as in the eyes of that community the person has the model-like appearance of one of "Carlotta's Beautiful Boys".

The term "transgendered", having emerged in the last five years is relatively new even in the relatively short recorded history of this group of people (the main thrust of research and pioneering surgery was performed in the mid 1950s) and as such, some people and organisations disapprove of it. Therefore, is it any wonder that people who are not directly affected have problems identifying with the term? For the purpose of this paper I am using the term generically, encapsulating the well known terms transsexual, transvestite

(cross-dresser) and drag queen. It has been suggested that the term transgendered effectively removes the sexual connotations and undertones of these other terms. Many people worry about names, labels and boxes that our society so brilliantly uses. Personally I don't worry or concern myself one way or another as long as terms, names, labels, whatever are used with respect towards the person to whom they are attached. For myself, I identify as a lesbian transsexual. I will be a woman when I have my sexual reassignment surgery later this year. Then I will cease to be transsexual.

In general terms, there are four areas of health that I see as paramount for the transgendered person: psychological, medication and a combination of these and lifestyle.

Obviously this paper has to make some assumptions, because not all people are the same, not all situations will repeat and similarities are just that - similar. I have of necessity been general or broad in reference and in defence of that and at the risk of appearing negative, I know there will be sceptics, but there will also be supporters of my views and comparisons, much of which I'm presenting here being based upon twelve years of active counselling and forty plus years of socializing. Healthy debate, in the end, is the essence of this and every conference.

Since this is a conference on health, co-sponsored by the AIDS organisations, a natural assumption by many is to focus on H.I.V. / AIDS related issues. However, I would like to move this focus for the transgendered person.

My focal point is stress.

Many transgendered people identify with one or more of the focus groups represented here - gay, lesbian, bisexual. Therefore their health concerns relative to H.I.V./AIDS are similar to, if not the same as those groups, and these are already documented. There are other similar areas of health concerns found in these communities, but while the gay and lesbian community is so very visible in the general community today, the transgendered community is not. It differs significantly but has health issues that the gay and lesbian community have dealt with and are beginning to minimise.

I am talking here specifically of mental health issues created through acute anxiety, caused by fear, guilt and perceived public image.

Fear of the unknown. Who has seen me, who knows? What will happen to me, my future, my family? Will I be subject to physical or mental abuse? I have the body of a male and the mind and soul of a female - why am I like this? Feelings emerge of inadequacy, unworthiness, shame. If children are involved, will they be seen again, let alone the possibility of sharing the parenting roles.

Guilt, the feeling that you need to hide yourself, that a double life must and is being lived. The want to come-out - but. The guilt of deception in both time and money, especially if the person is married or in long-term emotional relationships, and a large majority are.

Public image (presentation) is a real dilemma. Leading a double life, boy by day, girl by night or whenever the opportunity presents itself. The body changes that the transgendered person embraces, those same ones presented in fashion magazines across the world.

Waxing, breasts, hairstyles provide so much embarrassment for partners who know yet whilst they are "must haves" for the transgendered person, they also are the source of frustration and deception. For the transgendered person who is not yet out, these body image changes severely restrict many potential activities with family and friends, such as beach and pool parties, where their bodies are usually semi-clad in lightweight clothing. Often this becomes too much to bear. Compromise is constantly the companion of the transgendered person, a balancing of what they have, against what they would like to have - some say crave.

The high profile events such as the Mardi Gras have made huge inroads into the hearts of the general heterosexual community, and by doing so have eroded some of the homophobic attitudes and have been a pain in the hearts of much of our loved gay community. That isn't to suggest for one moment that we don't still have that problem. However, acceptance of gay people's lifestyle is on the increase. The fear of the homophobic heterosexual person and their potential acid tongue, possible physical, psychological and financial action has long caused heartache for us all.

The transgendered community is still in the very early days of acceptance - just like being gay fifteen years ago.

However, being transgendered is often a double bind. We are discriminated against not only by the heterosexual community, but also by sections of the gay and lesbian communities, often simply because we don't fit their vision of "okay" or the "norm" either. I have long been an advocate for tolerance and togetherness in our community. However, many times in the past I have been challenged by lesbian activists in toilets and change rooms and at one function less than five years ago, a group of lesbians actually barred transgendered people from the toilets! It is bad enough having the heterosexual community putting emotional and physical pressure on individuals, it is intolerable emotionally when people who are in your own community do the same to you. This type of action puts in place barriers of fear and intolerance.

In the eyes of the general community, a person changing gender is coped with rather easily as long as in the eyes of that community the person has the model-like appearance of one of "Carlotta's Beautiful Boys". However if the person changing is anything but "model-like", in other words they are average people, there are problems. Obstacles are put in their way at every opportunity, discrimination is rampant, because we are not covered under anti-discrimination laws like everyone else, including the gay and lesbian people here today. So with situations like toilets, changing sport and interest alliance (male-to-female participation, competing in the opposite gender competition) etc., anxiety levels go through the roof. I was no different from many. I suffered a major nervous breakdown in the early days of my coming-out; but unlike many, I was lucky. I have a great partner and doctor, and between them they pulled me out of it (with lots of friends of course).

Being a gay woman or man to the heterosexual community presents basically one issue, that of sexual preference. Being transgendered presents that issue plus the challenge to both female and male sexuality, an outward physical change. Humans have an innate ability to pressure others to conform, whether they be gay or straight. It is this pressure to conform that creates the contradictory emotional scene. It is no surprise to me that many outwardly gay and transgendered people have an "up yours" attitude to those challenging them. It is said that the best form of defence is attack!

Parental and family pressure for the transgendered person is probably no different from how it is for a gay person, but once again the pressure to conform and deny yourself is incredible. Is it any wonder that anti-depressants are the most commonly prescribed drugs on the market, with self-prescribed alcohol close behind?

Within the transgendered community, the very visible drag queen probably has the least stress problems with identity, probably because most of them are performers and as such many constantly change physical identity. Also the large majority are gay and their stress problems are more likely to be with being gay than because of their gender appearance.

The male cross-dresser (transvestite) is the least represented person in the transgendered community, yet statistically, evidence from around the world that as many as 5 percent of mainstream population have experimented with cross-dressing (and they usually continue). That means that in my golf club, where there are 500+ male members, there could be as many as 25 cross-dressers, or over the years, I have taught as many as 200 in my classes. But to date I have not met any at the golf club. Nor have any students confided in me, and I'm the student counsellor, as well as the counsellor for the support group in South Australia. So what does that tell us about cross-dressers?

Usually they are incredibly fearful of anyone knowing their secret. They are usually in a strong heterosexual relationship, very often married, and happy parents, but totally scared, frustrated, anxious - you find an adjective to describe their concerns and feelings, because I am having difficulty. They want to express their inner-self but can't! So what is different between these people and gay people? Most gay people don't marry into a heterosexual relationship; they recognise early in life that they are gay and while they may have difficulty in coming-out, they usually avoid heterosexual relationships. Cross dressers do commit to relationships, the vast majority are heterosexual, their partners are strongly heterosexual and most partners are not empathetic with a person who is male and yet occasionally wishes to express their inner femininity. Veiled questions and comments about articles in the media etc., are the cross-dressers clear indicators of their partners attitudes. To add to this frustration, a partner may show compassion to a family member or friend who comes out as gay or transgendered, but this character trait is not acceptable to her in her immediate household, particularly her sexual partner.

Society seems to be able to cope with people who show a positive, clear attitude in their sexual preference, appearance and sexuality, i.e. gay or transsexual, but cross-dressers do not display this clarity. They are viewed as being in limbo and this sends conflicting messages to partners and the community in general. For a simple example, take a person wishing to purchase an item of female clothing. They wish to try it on, after all it is expensive, which change room does this person use? If it is a large store there may be facilities close by, but what about the exclusively female store and other client's comfort? A clear dilemma for both the purchaser and the store. If I go into the same store, there are no problems, I present as a woman. The cross-dressers problem stems from his presentation because he does not have the confidence, build etc., to present comfortably as a woman.

Changing tack now, the transgendered person (Transsexual) requesting, and more importantly needing sexual reassignment surgery has not only the foregoing issues to contend with, but also "the program".

This program is in fact the medical procedure that must be followed and regardless of your urgency, personal progress or stage of life, must be adhered to. Because of the nature of the total procedure, mental, moral (religious), medication, legal, political and surgical, and because there is no reversal after surgery, there are standards set down, often referred to as the "Harry Benjamin" standards because they were developed in the United States by Dr. Benjamin. Not only is this process long and expensive, it is very stressful. Doctors play "good cop, bad cop" to try and catch out the non-genuine patient, or unsuitable one, and to ensure that mistakes are not made. If you happen to live in Melbourne it is not too expensive, but watch your credit card blow up if you live elsewhere! In the back of every patient's mind is always the fear of rejection. Together with this, we also have the necessary hormone replacement therapy for the transsexual. This is all about experimentation. Sure they have an idea what to prescribe, but everyone is different and needs special treatment.

If a patient happens to be unemployed through all this, there is also the additional stress of finance. There have been many examples of girls "working the streets" to pay for their program, but this is part of another story, one of the transsexual lifestyles during the minimum two year cycle of the program.

Unfortunately, society teaches early in life that boxes and labels help us cope (if only superficially) with differences, but that doesn't help the person who is "different". Not fitting into society's box and label scheme is a catalyst for anxiety - and anxiety leads to stress. Support groups and counselling schemes have come a long way in the last fifteen years, but we still have a long way to go.

Please, let us all be tolerant, kind and respectful to each other.

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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.