

THE TRANSSEXUAL VOICE

APRIL 1993

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GOOD ADVICE

There are two principal phases in "becoming a woman".

The first phase is mostly mental, when you learn what it truly means to live as a woman. You start by going out in public dressed as a woman, and develop your "presentation" to the point that strangers accept you as one. You progress from occasional shopping trips and social events to weekends, and eventually to full-time living. This requires no permission from anybody, at least until you want to get your legal identification changed. It also is completely reversible - unless you are recognized; then you carry the "identification" tag until you leave town.

The reversible aspect is import. You may well find that being female is no great privilege, and you may also discover that your present emotional discomfort isn't related to gender at all, but to other things.

The second phase, actual physical metamorphosis is much more involved. The surgery is expensive if done right, and insurance doesn't cover it. Reputable surgeons won't even talk to you until you have had expensive psychological evaluation and validation (in the early days, many people emerged from surgery to find that wasn't the problem after all - suicide was common).

I don't know how far back on this board you have read, but we have a lively and supportive bunch here. We are at all points on the path; from initial self-discovery to many years past final surgery. We share our triumphs and our pain; and yes, there is a lot of pain.

The biggest price we pay is not financial; we often lose our families and our closest friends and cause them terrible pain and grief in the process. So be prepared. If this is the right path for you, there are great joys to offset the pain. If not, we all hope you will figure that out before you go to far.

Dee McKellar
Prodigy Bulletin Board
Support Group Member
(Printed w/Permission)

CROSS-GENDER IDENTITY
(Transsexualism)
By Leo Wollman, M.D.

This paper is based up data compiled from the records of Dr. Harry Benjamin, with whom I am associated, on over 500 male and female transsexuals. Members of the Caucasian, Negro (East) Indian, American Indian, and Oriental races (Chinese, Japanese and Korean) were represented in this group.

The proportion of males to females in this group is 6 to 1.

The ages range from 13 to 55. Of this number 106 males have undergone sex reassignment surgery, and about one in three of the females has undergone either mastectomy or hysterectomy and mastectomy. Three female transsexuals have had plastic surgery to create an artificial phallus. One such female transsexual has had plastic testicles inserted.

Treatment of male transsexuals consists of biweekly injections of an oily solution of estrogen, together with progesterone. Such treatment is frequently combined with the additional administration of natural estrogens by mouth. Surgical augmentation of the breasts is desired by many of the male transsexuals. My attitude on this surgery is to encourage the natural growth of mammary tissue under hormonal influence. The surgical augmentation procedure can then be performed at a later date, if the natural progression is deemed inadequate.

After sex reassignment in the male, estrogenic hormonal therapy must be continued to maintain the patient's emotional balance as well as for continued feminization, but with injections at less frequent intervals and generally in smaller doses. Often, operated patients can be maintained on oral estrogen alone.

In the male, an important side effect (often welcomed by such patients) is the diminution of the sexual urge and response.

In female transsexuals, the primary request is for the early cessation of menstruation, which is to them the stigma of femininity. This is accomplished by bi-weekly injections of a long-acting depot testosterone preparation. Such injections are sometimes locally painful and frequently accompanied by facial acne and increased sex drive.

Mastectomy is the next most frequently requested (if not demanded) surgical procedure. Such surgery should include the suitable placement of the nipples and areolae, particularly in hypermastic women.

Even after the cessation of menses, hysterectomy is often desired by the patient, and in some medical centers the hysterectomy precedes the mastectomy.

The creation of an artificial phallus which has been performed in three cases in our group, has had far from satisfactory results. Modifications of this plastic operation are being attempted and it is hoped that in the near future, a more realistic result will be effected.

Because of the paucity of testosterone secretion in the genetic female, supplementary testosterone administration (by injection) is advised.

Frequently, patients present themselves for treatment while they are well below their majority, i.e., 21 years of age. Medical ethics preclude the treatment of such individuals without the written and notarized consent of parents or legal guardians. This presents an intense emotional problem to the patients and has to be handled delicately. It appears best to explain in a common-sense fashion the possible deleterious effects following sex conversion surgery in order to give them the opportunity to try to live within the framework of their anatomic sex. It is also necessary to stress the effects any gender-role changes would present to siblings and parents and others in the family. If this proves futile, then supplementary psychotherapy should be instituted until the patient has reached the age of 21.

In this connection, the attitude of the parents is of prime importance. In most cases, the parents are either unaware of the problem facing their children or cannot understand the importance to the patient of this gender role misidentification. Hopefully, parents can be helped to understand and love their children, no matter what course is eventually adopted. Parents' education therefore taxes the patience of the physicians who deals with these problems.

The incidence of marriage between anatomically normal males and transsexual males, both before and after surgery, is surprisingly high. One wonders if the choice of a marriage partner is prompted by homosexual proclivities on the part of the anatomic male. More research, we hope, will shed light on these subjects.

An interesting vignette of transsexual life was the marriage of a female transsexual prior to genital surgery to a social worker (genetic female). On their honeymoon night much to the dismay of the "bridegroom", "his" menses unexpectedly appeared. "He" rose to the occasion by filling "his" vagina with tampons and strapping on his genital prosthesis consummating the marriage night and providing his wife with sexual gratification.

It may astonish the reader to know that adoptions and artificial insemination by donor (A.I.D.) are being used to create a normal family complex.

It is noteworthy that traditional psychiatric treatment has proved to be practically useless in altering the decision of these patients to have sex conversion surgery.

Psychotic transsexuals whom the physician may encounter are usually refused sex conversion surgery on the belief that a psychotic male would be converted into a psychotic female. In actual practice, however, some psychotic males, after surgery without medical recommendation, proved surprisingly stable in their new role.

The inclusion of hypnotic techniques in the therapeutic armamentarium oftentimes results in more effective acceptance of the neuro-endocrine imbalance. On several occasions, regression has been attempted to elicit the possible etiology of this rare syndrome. Results were equivocal. Hypnotic progression produced interesting data which have yet to be evaluated. Progression in time is usually to a period of two years into the future. The most important function of hypnosis is to provide a relaxed attitude, as well as to help the patient experience the surgical procedures with a minimum of fear and pain.

THIS ARTICLE WRITTEN BY DR. WOLLMAN WAS NOT WRITTEN RECENTLY. I THINK THE CONTENT OF THE ARTICLE PRETTY MUCH HOLDS TRUE FOR TODAY; WHICH WOULD INDICATE THAT WE REALLY HAVEN'T COME THAT FAR SINCE THIS ARTICLE WAS WRITTEN.

I WILL TELL YOU WHEN THE ARTICLE WAS WRITTEN IN THE JUNE ISSUE; IN THE MEANTIME, I HOPE SOME OF YOU WILL HAVE COMMENTS TO SHARE ABOUT HOW DIFFERENT THINGS ARE TODAY FOR TRANSSEXUALS THAN WHEN THIS ARTICLE WAS WRITTEN.

IF YOU HAVE MEDICAL QUESTIONS FOR DR. LEO WOLLMAN OR DR. JANICE DORN, PLEASE SEND THEM TO ME IN AN ENVELOPE ADDRESSED TO THE DOCTOR OF YOUR CHOICE WITH A STAMP AFFIXED; ENCLOSED IN AN ENVELOPE ADDRESS TO ME. I WILL FORWARD YOUR LETTER TO THE DOCTOR YOU CHOSE (UNOPENED).

THE PHILADELPHIA CONVENTION
By Bambi Purisky

Well, my lovelies, what can I say? Except for quickly realizing that "my transsexual" type didn't exist. I had a wonderful time. Yeah--except for that.

All the gals were there (--and I was able to resist the temptation to display my 'Greek Passive Gal' tee-shirt--although I still think it would have gotten a big laugh).

I fell in love with Dr. Sheila and bundled-up some of my 'artistry' and gave it to the poor soul. (That'll teach her to be a mother-figure.) I commuted back and forth across the Ben Franklin Bridge on Thursday, Friday and Saturday. I frightened the Hell out of an unsuspecting Marie in the registration room; I wasn't expected until Friday. (I suffer from Groucho Syndrome--"what kind of an organization would have ME?") So I caused Marie to jab her finger brutally with the ID badge pin, plying her with questions; "Today how much is TODAY, WITH LUNCH???"

It turned out that I was a big hit at lunch, and a big bomb in my own "group". I figured it out: the female hormones--bless them--at any luncheon table I was at, caused the ladies to fall silent, and listen sweetly, pliable to my (current) hot research topic-of-the-day. While, in my own group, the male hormones of the F-to-M's made them aggressive, bossy, and thoroughly revolting. (If you want reassurance that there is a third gender, I think I've FOUND it. ME.) Crossed as a guy, inside (jockeys) and out, and never on male hormones, I am basically still a follower (ANY female raised a good, Catholic girl is a follower; beyond death.)

So, the bosses in the F-to-M group ran the show, running off at the mouth, taking over, teaching, teaching, teaching. Mostly, I too, a nap.

I met Dan Riley, who sat down with me for 1/2 hour and listened and took notes (I love anyone who writes down what I say.) I formed him that the movie "Soapdish" used his picture near the end of the film. Uncredited, as it turned out. The next morning, I handed him some of my writing, anyone who is kind to me is hit with an avalanche of "my stuff--unsolicited. I also met Kit, Billy and Jack, Jason and spouse, the adorable James Green, Sky and his mate, and several other F-to-M's I was comfortable with.

James, on the very first day, let me follow him into the Men's Room, a kindness which inadvertently earned him a cassette tape of my singing.

I tried to "cruise" him--which is funny, because I don't know how to cruise yet; but he is straight, and complained of always being sought after by gay guys. (Ah, such is Life.) I was sorely tempted to ask him for his "rejects"; "Hey, buddy, want to have a good time?" But I forgot all about it---after "show & tell".

Now, show & tell was nice. Naked, but nice. With one of the guys' ladies barring the door, it was locker-room time. Unfortunately no sex, but informative. I said, "yeah, I want one of those!" At least I think I did. I wasn't formulating words too well at that point, my eyes riveted to "IT". Cursing myself for forgetting my polaroid camera (with the timer - the only way to go), I found it was "guys only time" and this room full of genetic women! It was wonderful, strange, fully mature, highly intelligent and accepting. I thought what I always think in a crowded TS/TV atmosphere: "Only in America." I first began to think that at Raffles, watching the couples, guy with guy, waltzing around and around the ballroom, adorable, affectionate, sweet in their young: yes, gay. Gay and happy. And safe, in a safe environment, in a place that was theirs. How wonderful. How great for them, that they had it all sorted out. And had the courage to live it. I wished them all the happiness they could sustain. I watched them for hours.

But, back to the Convention. As Friday and Saturday wore on, our ladies looked a little weary, and in some cases, wigs appeared askew, needing a "do" at the beauticians'; I noticed that there was an increase in the "sentimental" and, at one point, everyone seemed to burst into tears, which, given the poignant situation at hand, was understandable. (BUT, NOT this GUY, thank you: real guys don't cry. My professional training as a Mezzo-Soprano came to the fore: I remembered, "If you cry,--they (the audience) WON'T; my singing made them cry.--They didn't walk out, they just cried. Captive audience.)

I loved the sweetness of all the ladies, and it was astounding to me to realize that a stranger walking-in, would assume this a gathering of middle-aged, beautifully adorned and made-up women. If only they knew the truth, and how much energy and effort and courage it took for these ladies to be as they are--finally, the person they each want to be! And how proud they are, of this.

The ladies came from all over the country, and from Europe, from Canada, - came together as one, for they BELONGED with each other. Everyone thought the same way, and was striving for the same goal. The male-attired guys (like me) were where these ladies had "been" and it wasn't for them. As how they were dressed was where I had "been" and found that this wasn't for me! I sensed that underneath it all, was the "imitation is the best flattery" thought. In following this premise out, we each felt flattered and special, comfortable with each other, each accepting the other in the heartfelt roles we each had chosen.

I like the ladies, I really do. These are very tall ladies, to be sure and some pack a hefty weight, corseted of course.

I remember well the torture of high heels and girdles and bras--oh, ugh. We guys, just throwing on a tee-shirt (preferably with "Greek Passive Gal" on it), jockeys, and "zipping up" (or not, sneakers, and jacket and ready to go. I love this, just as much as they ladies love the make-up kit and that smart little dress.

My one complaint - finding that what I billed myself as : Female-to-Gay-Male TV/TS - is non-existent. There are no female-to-gay males, for these are just simply women loving women, who crossover in dress and voice and facial hair into the masculine gender, and continue loving their women. A real disappointment to me, but, upon reflecting on the matter, I remember I was told again and again: "Gender and Sex are different things." But, in my case, being still (and always) attracted to males, I still believed I was right, disbelieving. They are the same thing...what are they talking about?

But I must bow to the truth - I will say from now on, I am F-to-M, and judge the sexual orientation of another guy for myself. (Oh God, I hope he's gay!--But enough about James Green.)

Now, my goal is to get out to San Francisco, for next year's convention. I wonder if a cute stud in the Bay community needs a lover? Yeah, right. Ok, Ok. But--can I just watch?

As I said before, yes, there are more than two genders, because I've found one - I'm certainly not a "Lady" but not a man either. I'm just Gay, a newly gay guy, as a "male" and happy and proud of it, too, and I really don't care what others say or think about it. I recently discovered the world I was born for, the community I was meant for, the ladies are--yes, a part of that. I love their gentleness and sincerity, their sweetness in reaching out to me, one of their own. It could get very funny, these two roles switched around, sort of "Tell me, Dear "Who does what--to Whom?" That's a funny line. Granted most TV ladies are heterosexual and that's fine, for them. Further, most F-to-M are lesbians, and that's fine for THEM.

But I'm different,--and they accept that.

And I haven't found my "guy" yet, but I will, I know he's out there and I'll find him.

------(In the meantime--anyone want a tee-shirt reading, "Greek Passive Gal? Or, a gay male--called "Bambi?")

CONNECTIONS

THE CONNECTION SECTION WILL BE USED TO LOCATE PEOPLE (OTHER THAN FOR PERSONAL RELATIONSHIPS) SUCH AS ROOMMATES, BIG SISTER/BIG BROTHER, JOBS WANTED; ETC. ALSO, IF YOU WOULD LIKE TO BE A BIG SISTER OR BROTHER(I'M GOING TO FIND A BETTER WORD FOR THIS ONE), THIS IS THE PLACE TO OFFER YOUR FRIENDSHIP. IF YOU ARE IN A POSITION TO HIRE A TRANSSEXUAL POST-OP OR PRE-OP, PLEASE, PLEASE LET IT BE KNOWN.

THERE IS NO CHARGE FOR THIS COMMUNICATION, BUT PLEASE DO INCLUDE S.A.S.E. FOR MAIL THAT IS TO BE FORWARDED.

ROOMMATE WANTED - ONE BEDROOM APARTMENT, CAN CONVERT LIVING ROOM INTO BEDROOM. WALL-TO-WALL CARPET, AIR CONDITIONED, FULLY EQUIPPED KITCHEN AND POOL. CALL SHELBY (513) 293-7926.

NEED ROOMMATE IN ORDER TO RELOCATE AND GO FULLTIME. CONTACT: KIM, P. O. BOX 564, LAKE CITY, S.C. 29560.

SOUTHERN TRANSSEXUAL PRE-OP SEEKING FINANCIAL HELP AND SUPPORT. HELP RELEASE THIS WOMAN WITHIN ME. CONTACT LINDSEY SAPP, ROUTE 1, BOX 50, MIDVILLE, GA. 30441.

I AM LOOKING FOR A FRIEND OF MINE NAMED SARAH LUIZ. I LAST HEARD FROM HER IN NOVEMBER 1990, AND THE LAST KNOWN ADDRESS I HAVE IN MY FILE IS A NORTHWOOD, NH ADDRESS. ANY INFORMATION IS WELCOME. NO PHONE CALLS PLEASE. WRITE TO: ERIC BUENEMAN, 4866 OLDE MILL DRIVE, MARIETTA, GA. 30066-1159.

ROOMMATE WANTED - GAY MALE (TRANSSEXUAL INCLINATIONS IN REMISSION) WITH FOUR CATS, HAS EXTRA BEDROOM IN TWO FLOOR APARTMENT IN NEW BRUNSWICK, NEW JERSEY; \$350.00/MONTH, PLUS ONE-HALF UTILITIES - NEGOTIABLE IN EXCHANGE FOR LIGHT HOUSEWORK. WILL BE HELPFUL, SUPPORTIVE, AND SENSITIVE TO SPECIAL PROBLEMS AND NEEDS OF TRANSSEXUAL. ANGEL, (908)249-8027.

I AM SEEKING SOMEONE IN THE FASHION INDUSTRY FOR INFORMATION REGARDING A LADIES BOUTIQUE. I MIGHT BE INTERESTED IN A PARTNER(S). REPLY TO BOUTIQUE % TS VOICE.

PRE-OP TRANSSEXUAL DESIRES FULL-TIME EMPLOYMENT AS COMPANION OR HOUSEKEEPER OR ??? CAN RELOCATE. FREE TO TRAVEL. NEED FINANCIAL HELP FOR BREAST IMPLANTS AND COSMETIC SURGERY. WILL WORK OFF DEBT. WRITE ROBIN L. FREY, P. O. BOX 2072, SOUTHEASTERN, PA. 19399

PERSONALS

SINGLE, CANADIAN ASIAN MALE, 34, 5'4" TALL; SINCERE, CARING AND HONEST MALE WHO FEELS TRANSSEXUALS ARE SPECIAL UNIQUE PEOPLE WHO HAVE A LOT TO SHARE IN LIFE. WOULD LIKE TO ESTABLISH A FRIENDSHIP LEADING TO POSSIBLE LONG TERM RELATIONSHIP WITH AN ASIAN PRE/POST-OP TRANSSEXUAL 5'6" OR SHORTER. SHE MUST BE 100% PASSABLE, HORMONE ENHANCED FIGURE STRONG ASSET. I AM A FINANCIALLY SECURE PHARMACIST. FOR THE RIGHT PERSON I MAY BE ABLE TO HELP WITH EXPENSES. PLEASE WRITE WITH PHOTO (WILL BE RETURNED) TO: NORMAN, 9304 174th STREET, EDMONTON, ALBERTA CANADA T5-T3C6

WHITE MALE-TO-FEMALE PRE-OP (5'4", 110#, 26) SEEKING (1) FRANK DISCUSSIONS ABOUT THE AFTER EFFECTS OF CASTRATION FROM PRE-OP TS'S AND/OR TG'S (non-op's WHO CROSS LIVE FULL TIME) AS WELL AS NAMES OF SURGEONS IN NYC OR NEW ORLEANS/BATON ROUGE; (2) FINANCIALLY SECURE MALE OR FEMALE-TO-MALE TS OVER 30 WHO IS LOOKING FOR A COMMITMENT, PREFERABLY IN NYC; (3) CORRESPONDENCE FROM ALL TS'S. PLEASE NO RACISTS OR HOMOPHOBES. ANGELA, 496A HUDSON STREET, SUITE K101, NYC, N.Y. 10014

GOOD LOOKING STRAIGHT SINGLE WHITE MALE, 39 YEARS OLD, 6', 189 LBS. WANTS TO MEET MALE-TO-FEMALE TRANSSEXUAL FOR DATING AND A RELATIONSHIP. YOU WON'T BE SORRY - MARK, BOX 24741, COLUMBUS, OHIO 43224.

FEMALE-TO-GAY MALE TV/TG OVER 45, ENJOYS GREEK PASSIVE AND IS SEEKING A GREEK ACTIVE MATE; AS A BOY I PASS TOTALLY. I'M ONLY 5'3" AND COMPACT; TRIM BUT STURDY WITH A CLASSIC HANDSOME APPEARANCE AND I LOOK LIKE A FEM BUTCH BOY. I AM NOT A LESBIAN. BAMBI, P. O. BOX 563, VOORHEES, N.J. 08043.

SINGLE WHITE MALE, 26, WISHES TO MEET OR CORRESPOND WITH AND/OR DATE A TRANSSEXUAL EITHER PRE-OP OR POST-OP. I WOULD LIKE TO BE FRIENDS AND MAYBE MORE. PLEASE WRITE AND INCLUDE PHOTO. ALL ANSWERED. J.R., P. O. BOX 17111, MEMPHIS, TN. 38138.

SINGLE INDIAN MALE IS INTERESTED IN A LONG TERM RELATIONSHIP WITH A POST-OP OR PRE-OP TRANSSEXUAL. PLEASE INCLUDE PHOTO. REPLY TO WALTER RIDLEY, P. O. BOX 7321, KETCHIKAN, ALASKA 99901. WILL REPLY TO ALL.

39 YEAR OLD TALL, BEARDED, BROAD-SHOULDERED MASCULINE WHITE MALE, POLITICALLY AND SPIRITUALLY ACTIVE, SEEKS CORRESPONDENCE AND FRIENDSHIP WITH F-T-GM TS, PRE-/POST-OP. I ENJOY THE OUTDOORS, WINTER SPORTS, MUSIC, THE ARTS AND WORKING ON MY TRUCK. HAVE A BUSY ACADEMIC PROFESSIONAL LIFE AND AM LOOKING, IN THE LONG TERM, FOR A COMMITTED, LOVING COMPANIONSHIP WITH THE RIGHT PERSON. PLEASE WRITE TO E W K, 87 WOODWARD AVE, GLOUCESTER, MA. 01930.

A few weeks ago I mailed letters out to subscribers in North Carolina asking for information about services, etc. available for transsexuals in North Carolina. There wasn't a lot of response, but what I did receive was good information that may be of value to others in North Carolina. Below is some of that response.

Dear Phoebe;

Your state-by-state information is a great idea. I hope my information may help another beautiful woman in need.

I have a dear friend in Raleigh named Tabitha. She is a new woman and is willing to help us. She is particularly wanting to help TS people and those who are experiencing the horrors of gender dysphoria. She doesn't want to deal with cross dressers. Tabitha is a caring person who knows the seriousness of the transsexual's confusion; confusion which can cause one to become suicidal. She is intelligent and wants others to be at peace with themselves so they may enjoy their lives to the fullest. Her address is: Tabitha, P. O. Box 14328, Raleigh, N.C. 27620-4328

(Tabitha can also be reached through the Prodigy computer network bulletin board.)

Through Tabitha, I have already spoken with an experienced counselor. He is expensive but I feel I get what I am paying for. He has worked with us before and shows care and respect. Phoebe, please tell others that this situation really is a serious issue that shouldn't be taken alone by anyone. None of it is a joke. I was deeply saddened by the sight of a woman who had her held down in shame when I was leaving my counselor's office. I wanted to comfort her, but couldn't upset her right to be anonymous. Also, I was already a mess myself.

The counselor's name is Dr. Jerry Lithman, One University Place, #390, Durham, N.C. 27707. Telephone # (919) 490-89009.

I have a question - I'm near the East Carolina University in Greenville, N.C. Does anyone know if they have any intelligent and anonymous services in their big hospital and medical buildings? I'm looking for significant services and not baloney library shelves. I once talked to their (ECU) counseling services on the telephone, but became frustrated when I was placed with a gay/lesbian/bi group.

Why do they do this? I really wish people didn't stereotype or categorize us into a group that tends to be merely thrill seeking. I do understand that we all may have our individual places on the comfort scale and my feelings may only be different than others. Thanks. Stephanie

The names and address of some support groups follow; hopefully anyone in need of such will find one in their area.

GDANC SUPPORT GROUP, P. O. Box 721 Albemarle, N>C> 28002;
(704) 982-1028.

MID-CAROLINAS GENDER ASSN., Sherry Lynn Capps, Director, 926
Spring Street, #25, Rock Hill, S.C. 29730-4794 (Services
both Carolinas).

CAROLINA TRANSEXUAL ALLIANCE, P. O. Box 25100, Suite 188,
Charlotte, N.C. 28229-5100.

I wish there had been more response, but there wasn't a lot of time for the people I contacted to get the information to me.

I will be contacting people in OHIO for information for the June issue of TSV. If you live in Ohio, I hope you will send any information you think will be helpful for people in your state. Thanks. Phoebe

About a month ago, I logged onto the PRODIGY Bulletin Board. There are quite a few people who join in on the Gender Issues area of the Support Groups Bulletin Board. Some of the people who receive TSV are members. I have learned there are several other bulletin boards that have areas devoted to gender issues.

The system operator of a bulletin board located in California has asked me if I would be interested in being in charge of a forum for transsexuals on his board. There are approximately 5,000 subscribers to the board. It will be interesting to see how many of those subscribers have gender related problems.

I'd like to be in charge of a bulletin board of my own, but I wouldn't know how to go about achieving that. I'm sure it is complicated, even though there are quite a few out there. I know some of you are in charge of boards such as the one in Albemarle, N.C. - GDATN; SYSOP - Denee Efird; (615)333-0816.

There are national boards which we mentioned a few issues back in an article by Sandy Mesics. (Sandy, like many other former subscribers to TSV is no longer in touch. That's a good sign that all is well with her and all the others who have gone on with their lives.

TGA is a non-profit, non-sexual support group for crossdressers, transsexuals, transgenderists, family and friends. Meetings are in GREENSBORO!

Meetings are held every month, with an occasional get-together between meetings. They are held on a Saturday evening from 7:00 until 11:00. The meeting place is opened one hour early for those who need a place to dress.

The goal of TGA is to provide a comfortable and safe setting where people of the transgendered community can meet with their peers. Books and other information are made available to all members. Referrals to members of the helping communities are also available upon request.

All members of the transgendered community are welcome to join. Family and friends are also encouraged to attend meetings, so that they may better understand their loved ones, and receive support for themselves.

For more information: TGA
c/o Louise Hahn
P.O. Box 25221
Winston-Salem, N.C. 27114

Phone: (919)788-1553



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PSYCHOTHERAPY

Service to the Crossdressing and Transgendered community includes individual psychotherapy, marriage, family and "significant other" counseling. Sessions are conducted in a warm, accepting and safe environment. Dressing is encouraged.

Sliding Scale Winston-Salem: (919) 788-1553
Greensboro Location

The Transsexual Voice

Mail Address:
Phoebe Smith
P.O. Box 16314
Atlanta, GA 30321

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