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Leslie Feinberg

I can't afford to get sick

ISSUE #84
FALL 1998

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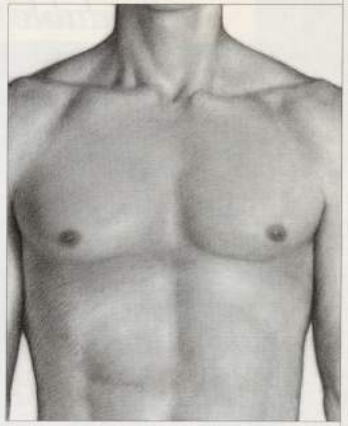

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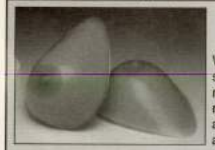

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Thank You

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Currently, Transgender Tapestry magazine is brought to you by IFGE largely as a public service. Subscriptions and paid advertisements cover the costs of paper, printing, and postage. We depend on the kindness, generosity, wisdom and activism of our contributing writers to make this magazine happen. We are honored to be able to print the words and images of some of the greatest minds, visionaries, the most astute community organizers, and the most dedicated political activists that the transgender community has the priviledge of calling its own. These kind folks donate their expertise and their experience by writing, editing, drawing and taking photos for this magazine for little or no remuneration .

Nancy Nangeroni

We expect that Transgender Tapestry will become self-sufficient in the future, and as an income-producing publication, begin to offer decent compensation to our contributors. For now, it is a labor of devotion and perseverance on their part. We could not bring you this magazine without the talent so selflessly donated by our writers and volunteers. We are humbled and awed by their willingness to support our work here.

Transgender Tapestry is proud to acknowledge the dedication and support of our contributors.

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Mariette Pathy Allen

Rose Ryan

Diane

Kate Bornstein

Barbara Carrellas

Veronica Vera

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Dennis W. Harwich

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Leslie Feinberg
Author of Stone Butch Blues, Transgender Warriors and soon to be published Trans Liberation, beyond pink or blue. Political activist.

Jessica Xavier
National Director, of "It's Time America." A TransActivist. She cares passionately about her community and their many hopes, dreams for a better tomorrow, and a future without fear.
"Think Globally, Act Locally"

Jamison Green
A writer and gender diversity consultant, is president of San Francisco-based Female-to-Male International, Inc., He is also an honorary board member of IFGE, and the 1998 recipient of the Virginia Prince Award.

Mary Boenke
Mary is associated with T-SON PFLAG. She has achieved her masters degrees in Social Work and Clinical Psychology and has worked in social service planning, administration and as a psychotherapist.

Miggi Gilbert
She is a writer and philosophy professor at York University. As a "committed crossdresser," Gilbert is a part of the new wave of trans-people who are no longer prepared to remain hidden and silent.

Gina Kamentsky
She is a renouned designer, cartoonist and musician. As an artist she brings humor and laughter to awkward, sometimes painful situations. We have been blessed to have her wisdom and talent featured on the pages of Transgender Tapestry.

Holly Boswell
Holly is a spiritual leader and activist in the trans community. She recharges souls whose spiritual light have dimmed. She is the 1998 recipient of the Trinity Award.

Carolynn
Carolynn is approaching retirement and contemplating venturing into a new career. A writer possibly or maybe working in the field of women's fashion. She is a dedicated volunteer for the trans community.

Gwen Smith
Gwen serves as the Area Coodinator of the Transgender Community Forum Online, as well as co-hosting the Sunday Gender Chat, the longest-running weekly event in TG cyberspace.

Dr. Murphy
Dr. Murphy was Wyoming's first governor of the American college of Physicians. He and his wife have twelve children.

Masai Toral is a Japanese FtM who publishes FtM Nippon Japan and Asian TS Club. He writes books aimed at educating conservative Japanese unfamiliar with transgendersim and transsexuality. He has been honored as the FtM International Man of the year.

Special
thanks to the folks of Seattle for their
outstanding effort in
showing off their
gorgeous
city.

Photos not shown: Marilyn Humphries Photos, DrFTM@aol.co, Guy Baldwin; Mr. Leather 1989, Cheryl Chase, Christina C., Jody Norton, Judy Osborne, Jeff Shevlowitz Suzanne Adams, Mardi Clark, Steve Silberman, Tracy Murinik Katrina C. Rose, Donna Colvin, Linda DeFruscio, Annie Sprinkle Photos.

Each person is intrinsically entitled to care by professionals who are interested and fully involved with our humanity, and who desire to maintain well-being for all.
MATTHEW S. CARLOS

Perspective

Mykael Hawley

Matthew S. Carlos

You may have noticed a few small changes in Transgender Tapestry. Possibly a new format, maybe a change in type face, the masculine transgender identified person on the cover, continued excellent writing, more content, juicy reads, fabulous photos, the list goes on.

These changes have come about by listening to you. When it comes to constructive suggestions we listen. We want to know what people, places and things you wish to see in future issues of Transgender Tapestry. We are here for the long haul, in fact we are just getting started.

There are incredible events happening for transfolk all over the world. Thousands of biographies of unsung heros waiting to be told, stories of struggle, overcoming all odds, history in the making, victories for the transgender community. We want to capture this. We want to put the humanity in the human interest stories. We want to know our community intimately, and what really makes us tick, warts and all.

This current issue is focused on health. To live in the battlefield of today's world fighting for our health care rights, our mind and body must be strong. If we don't have our health, then what do we have? Read what Les Feinberg has to say about health care and the health care system. Then peruse to the article that Cheryl Chase wrote on making media, how she refused to be powerless, and with a combination of persistance, self education, and coalition created successful media campaigns. Be shocked by Donna Colvin's TNT article about unqualified surgeons doing SRS surgeries. Read about addictons and HIV that are troubling our community. If these subjects are too serious then slip into some fun comfortable articles with Miss Vera's Class, for boys who want to be girls and coming out stories with happy endings. We invite you to read and enjoy this issue. Take what you need for this journey.

Mykael

These articles all emphasize the importance of exercising personal responsibility in choosing and maintaining good health care. Mediocrity is not acceptable, and it is often the transgender client who helps perpetuate its existence by relinquishing hir decision making power to a second-rate therapist or surgeon in favour of quickly obtained hormones, SRS, or electrolysis. Stressed to the breaking point, or traumatised by social conventions and previous medical malpractice, many of us fail to consider all our options and make snap decisions.

Mykael and I designed this issue to help you gain access to the complex and thoroughly individual issues of health that construct the transgender person's experience of the medical community. That said, our contributors' insights have universal import. Like ourselves, non-marginalised people fail to demand excellent routine treatment. They often do not experience acute medical conditions of the type or frequency which are common among trans people, and therefore slide by with marginal health care until crisis intervenes. When these two groups realise that the same doctors care for us all, we then can unite, and together demand professionalism as part of our human rights.

Lab work, examinations, and specialised treatment should proceed not only with our consent, but with our understanding of their specific purposes, anticipated results, probable risks, and implications for continued well-being. Referrals to other professionals in the same field, and to medical research is to be expected. The ability of every attending physician to clearly communicate this information in a way the client can fully comprehend must be universal - not exceptional, or even merely commonplace. It is time to ensure that the medical professions understand they service a community which extends beyond themselves - that each one of us contract them as a medical team who services our particular needs, who appreciates our idiosyncracies. No one should be treated 'by the book'.

Matthew

Letters, Comments and Bits O' Wisdom

Hi,

I was really considering letting my subscription to Transgender and membership to IFGE expire.

Then I received issue #83. My mind was changed with two pages, pages 20 and 58. There is something about Kate Bornstein. She is absolutely great, is putting it mildly. Please, Please in future issues have more articles about Kate with pictures. As far as I'm concerned Kate is the classiest and best to ever grace your magazine.

Thank You and Love
Sherry

Dear Sherry,

We feel the same way about Kate as you. We are honored that she chose to write for us. Yes, you will see and hear from Kate in future issues. Thank you for your subscription and membership. Because of you we can better serve our community.

Thank You
Mykael

Dear IFGE,

Could you please tell me when the next issue of "Tapestry" is due to be released to the general market? I am not in a position to order via mail and I usually pick it up at the Barnes & Noble. Also I have a very close friend who I have recommended your magazine to and she has been looking for it as well and is very nervous about asking. You publish one of the very few magazines that addresses the TG community with dignity and respect and is very informative and factual. So many of the others always treat TG issues with a sexual slant that disgusts and turns me off. So if you could tell me when the next issue is out and also if you have a regular quarterly schedule during the year, I would certainly appreciate the information and I'll pass it onto my sister. Thank you for your magazine and the help it has been to this girl since I discovered it last year.

A God blessed trans-gifted christian girl from Kansas,
Heather

Dear Heather,

As we speak we are working directly with Barnes and Noble Corporation. Hopefully soon Transgender Tapestry will be on the shelves in all Barnes and Noble stores. If God's willin' and the creek don't rise, you should see Transgender Tapestry magazine on the shelves the first two weeks of September, December, March and June. Crossing our fingers. Thank You for your kind words.

Mykael

Hi Mykael,

Seems like I wanted to write a speech and give it somewhere. But then I thought, "Where would that be?" Then I realized that there wasn't anywhere. We who defend, and debate, and lobby and travel and answer the phone in the wee hours of the morning to hear another solitary hurting voice sometimes come to the realization, that maybe there is no where to go.

You see activists falling by the wayside. I have had too much, they say, or I am burnt out, or I need to attend to my own life and finances for awhile. And you listen and you say, yea, you know, I can understand that, and then you say to yourself....I wish I could do that. I wish I could walk away from it all and never turn back. Blend into a world that doesn't want me, doesn't understand me, and certainly doesn't give a damn about me or the reasons I have had to live my life the way I have. And you throw things, you may even have a silent cry, but all the while you know you can't quit....because you see, it is your life as well that you are fighting for. And without anyone else involved, you just become another statistic...perhaps like Brandon, or maybe Christian, or Debra, could it be Tyra, or Tasha, or even the ones we don't know their names, because they weren't "lucky" enough to have gained national attention... I suppose the next thing you do is wipe the tears from your eyes and put your heart back into your chest, because it had slipped into your mouth, and you pick up a pen and you write because if you don't, you feel that you can't stand the pain....alone....anymore. Better to be doing something, hurting, then nothing...hurting. The path to somewhere from nowhere seems the best by far the best. Isn't it ?

A quiet moment while you ask God to help you be the best damn activist you can be, and if he can't do that, then just go ahead and kill me too. Because the life I was given to lead, not chosen, wasn't from my hand. It was dealt by someone or something far greater than I will ever attain. And if I can't do something, anything to change it, then ask "why, what is the point?" You hesitate waiting for the answer you know is closer than you like, because it is inside. There will be no great proclamation from above, no booming voice to answer the questions you ask on a daily basis, or at night when no one else can hear you pray....You know you have to look inside and see the frightened boy (did I say boy?), who doesn't have all the answers, hell he has so few..but they are the only ones he will hear and surely the ones he has to follow.... The boy (did I say boy?), picks up the sword and goes out to do battle yet again. To walk on the bloodied ground that has been laid before him, and try to clean up the mess that has been one transsexual's life !

Tonye Barreto-Neto

Dear Tonye,
Thanks and Amen!
Mykael

Dear Transgender Tapestry

Your editorial in Issue #82 is right on. We certainly have the best of both worlds. One thing I hate is when a hetero CD comes out someone will say, Well at least he is not gay," The implication is that if you are a CD and gay or Bi you would be weirdo: Your standing up for the bisexuals will help to overcome this wrong thinking.

A Quebec street worker decided to work as a woman and so informed her superiors. They were shocked and decided to fire her. She took her case to the Quebec Human Rights commission, who ruled in her favour and awarded her $5750 in damages. The judge said the Quebec Charter of Rights prohibits discrimination against a transgendered person just as it does against a hetrosexual. Now that is what I like to see an unequivocal stand on TG and gay rights.

I am enjoying the new direction of TransTap magazine. You are broadening the scope to include more on gays and lesbians. A very good move as we need a stronger voice to gain acceptance by society. On a personal note: should we start an exchange programme: one penis for two breasts?

May you have lots of success and happiness in your work. We stand behind you.

Nicole of Montreal

Words O' Wisdom

Imagine life as a game in which you are juggling some five balls in the air. You name them - work, family, health, friends and spirit, and you're keeping all of these in the air. You will soon understand that work is a rubber ball. If you drop it, it will bounce back. But the other four balls - family, health, friends and spirit - are made of glass. If you drop one of these, they will be irrevocably scuffed, marked, nicked, damaged or even shattered. They will never be the same. You must understand that and strive for balance in your life.

Brian Dyson,
CEO of Coca Cola Enterprises

Author's Query About Stonewall

For the first in-depth history of the Stonewall riots, to be published by St. Martin's Press, I am seeking all participants, witnesses, police officers, Stonewall Inn employees, journalists, and other interested and involved people who were present at any of the riots at the end of June and beginning of July1969. I am looking for any photographs or film footage, whether taken by a professional or amateur, of any of the riots or of other connected activities (such as leafleting or street demonstrations) taken any day or night of the Stonewall uprising. I also have a strong interest in collecting copies of earlier interviews in any medium of participants and witnesses, especially of persons no longer living. Any letters, diary entries, fliers, clippings, or other documentary material on or generated by the Stonewall riots are also of great interest. Please write to David Carter, P.O. Box 417, New York, NY10113 or send email to History69@aol.com.

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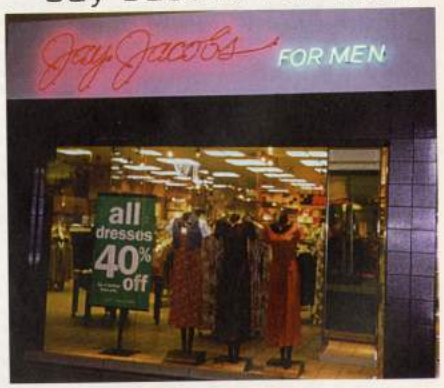


News & Notes from the Gender Frontier

Edited by Nancy Nangeroni and Rose Ryan
Special Thanks to Gain News Scource, In Your Face, and Press for Change

US NEWS

Oregon Reviewing SRS Effectiveness

The Oregon Health Services Commission is organizing a task force to determine if SRS is an effective treatment for TSs. In a move demonstrating some sensitivity to the transgender community, subcommittee members recommended that transsexual advocates be included on the task force, in addition to the usual "experts" on gender-identity issues. The task force is being called as part of the commission's routine review of the prioritized list of medical conditions and treatments used to administer the Oregon Health Plan. On this list of 745 ailments, SRS ranks 688. Only the first 574 are covered.

3rd National Gender Lobby Day

By most reports, about 100 gender activists from across the country gathered on Capitol Hill this past April for the 3rd National Gender Lobby Day organized by GenderPAC. Participants worked to educate Congressional staffers about hate crimes and employment discrimination faced by people of diverse gender expression and identity. Said GenderPAC director Riki Wilchins, "Every year we have another 2 or 3 more murders to talk about. This kind of gendered violence must be included in the federal hate crimes legislation so it can be tracked and enhanced penalties made available to prosecutors." Lobbyists also discussed ENDA, the Employment Non-Discrimination Act, which does not include protection for gender diversity. Preliminary results of a GenderPAC national survey of sexual orientation and gender discrimination in the workplace show that 38% of gays, lesbians, and bisexuals report that they too are discriminated against at least in part because of their expression of gender.

GLB Activists Object to HRC's Methods

A recent call by the Human Rights Campaign (HRC) and the Universal Fellowship of Metropolitan Ministries (UFMCC) for a Millenium March on Washington has been met by GLB activists with considerable resistance. The march organizers are being criticized for heavy-handed and exclusionary tactics for their 11th hour invitation to other groups to sponsor the event which was apparently decided upon without widespread community input or even consensus among the leading organizations. HRC, the richest of gay activist organizations, has been under sustained attack from the trans community for their non-inclusion of trans issues in their advocacy work. Now transactivists are finding increased anti-HRC sympathy in the GLB community.

Menace, Hermaphrodites Picket APA, Hospital

Once again, members of the Transexual Menace and Hermaphrodites With Attitude – 15 in all — demonstrated against the American Psychiatric Association, this time outside the APA's Washington headquarters. They called for the ending of Gender Identity Disorder (GID) as a psychiatric disorder. GID is used to diagnose and 'treat' gender- variant children as young as 3 to insure that their play is gender-appropriate and their behavior and performance of gender conform to heterosexual norms. It is also used to stigmatize transgender adults who request hormones and sex reassignment surgery. The demo marks the 4th time in the last 3 years that APA has been picketed over GID by gender activists. To date, APA has not addressed the issue.

Herms Protest Intersex Genital Mutilation

A dozen members of Hermaphrodites With Attitude and Transexual Menace picketed outside the George Washington University Hospital, protesting GWU's cutting of intersexed infants' genitals to make them resemble 'normal' male and female genitals. Hermactivists call this medical intervention Intersex Genital Mutilation (IGM). "Not only are American doctors cutting into 7 intersexed infants every working day, but people like GWU's Dr. Barry Belman are telling parents they have to do it for the good of the infant," said Cheryl Chase, founder of HWA. "Mutilating my genitals wasn't for my good; it was to make the doctors and my parents more comfortable with my body." After the demo, several protestors visited GWU Hospital departments that take part in IGM—OB/GYN, Endocrinology, Pediatrics and Plastic Surgery—to discuss their concerns with caregivers and, as one hermactivist put it, to speak for the infants who cannot speak for themselves.

CA Considers Trans Hate Crime Coverage

The California State Assembly's Committee on Public Safety has approved a bill to include protections for transgendered persons under the state's hate crimes laws. The committee voted 7-0, with one abstention, for the bill, which goes next to state senate. Currently, California law provides penalty enhancements for hate-based violent crimes motivated by a victim's actual or perceived race, color, religion, ancestry, national origin, disability, gender or sexual orientation. But local district attorney's offices are unaware that such crimes against transgendered persons can be prosecuted. The new bill is intended to clarify that hate crimes include those aimed at victims who dress like or behave like the opposite sex. According to the first national survey on TransViolence (1997) by GenderPAC, incidence of violence against transgender individuals is much greater than violence against the U.S. population in general. For example, the rate of attempted rape committed against transgender individuals in 1996 was 2.7% as compared to .13% in the Bureau of Justice Statistics' National Crime Victimization Survey. Moreover, the rate for assault against transgender individuals in 1996 was 16%, nearly double the 8.2% reported in the National Crime Victimization Survey.

Prison Warden Meets With TG Advocates

California Medical Facility (Vacaville) warden Ana Ramirez Palmer met with members of an ad hoc committee advocating for the rights of transgender prisoners this past April. The meeting, held in the prison, marks the first time an official of the California Department of Corrections has met with transactivists to discuss the care and treatment of the transgender prison population. Committee members report that the warden listened carefully to their concerns and promised to meet further with them to resolve the problems. They asked for special training for prison staff on issues surrounding the care and treatment of transgender prisoners. One trans committee member, a member of the San Francisco police department, offered to conduct such training.

New York Times Editor Comes Out

TS woman Donna Cartwright appeared this past May on ABC-TV's morning program "The View." Ms. Cartwright, a 51-year-old copy editor, is the first New York Times staffer to come out as transgendered. The sympathetic interview, conducted by Barbara Walters and broadcast live on national TV, focused on Cartwright's long struggle with loneliness and isolation and her decision two years ago to resolve her gender conflict by transitioning with a view to Sexual Reassignment Surgery (SRS) sometime early next year. Ms. Cartwright described the mostly positive reaction of her family and co-workers and the support she received from Times management. She talked of the positive impact of her decision on the rest of her life. "I have become a warmer, friendlier, more outgoing person since beginning my transition," she said.

Pollutants Blamed for Gender Shift

Scientists are now reporting that pollution may be a cause of gender variation among animal life. The claim is that the polluting chemicals somehow imitate natural hormones, disrupting the hormonal balance of animals exposed to the pollution. Researchers in Florida have found that male alligators in Lake Apopka, the site of a pesticide spill in 1980, developed stunted reproductive organs. British researchers also report that male fish near sewage plants emptying into Britain's rivers produce a protein normally found in females' eggs. The influence of hormonal changes on fetal development has long been recognized as crucial to development of sex characteristics.

VICTORIES:

National Stonewall Democratic Federation

Sun May 10, B J Metzger and others, from St Paul, attended the organizing meeting of the new "National Federation of Lesbian and Gay Democrats" chaired by Congressman Barney Frank in Kansas City, MO. We were successful in getting the mission statement changed to include Bisexual and Transgender and the name of the organization changed to "National Stonewall Democratic Federation" so it would be inclusive. This was a major victory for B & T in the founding of this new national political organization.

NGLTF Board Adds Transgender Member

The National Gay and Lesbian Task Force (NGLTF) has named L.J. Irving of Oakland to its board of directors. Irving is the first openly transgendered person appointed to the board of a national gay, lesbian, bisexual, and transgender civil rights organization. "We need to reach out, instead of expecting them to come to us," L.J. says, stating that she plans to work with NGLTF to meet people "in the clubs, in the churches, in the families."

New Orleans includes Transgender in Hate Crime Law

The New Orleans City Council voted 5 to 1 to include Transgenders in the hate crimes and anti-discrimination ordinances. Members of the New Orleans transgender community advised the city's Human Relations Commission, which proposed amendments to all city nondiscrimination and hate crimes ordinances to include protection based upon "gender identity." The Mayor's Advisory Committee, an inclusive group that recently elected a Transgender as their female vice-chair, was instrumental in passage of the ordinance changes.

West Hollywood To Adopt Trans-Protection Ordinance

The West Hollywood City Council unanimously has directed the City Attorney to draft an amendment to the City's anti-discrimination statute prohibiting discrimination against transgender people. West Hollywood will be the first jurisdiction in southern California to adopt anti-discrimination protections for the transgendered. A number of transpeople spoke to the City Council in support of the agenda item. It was also recommended that the City undertake sensitivity training for its staff.

Trans Computer Game Developer Honored

The Computer Game Developer's Association, in conjunction with the Computer Game Developer's Conference, has given their first ever Lifetime Achievement award to a transperson. The winner is Dani Bunton Berry, whose career as a game developer spans 20 years. Dani spent about half her career as Dan Bunton, then transitioned and is still, according to all reports, both an influential and well-loved figure in the industry.

Bell Atlantic GLB Employee Group Now TG-Inclusive

Following the recent merger of Bell Atlantic with NYNEX, the two GLB employee resource groups (ERGs) of the former companies have agreed formally to merge. The new organization will be named GLOBE, keeping the name of the old Bell Atlantic ERG. In addition to approving the merger, the membership also approved a new set of by-laws which make the organization officially transgender-inclusive.

Yale University Gets Sex Change

Yale has announced it will rename its Women's Studies program "Women's and Gender Studies" and reorganize the undergraduate major into three areas of concentration: Women's Studies; Lesbian, Gay, Bisexual and Transgender Studies; and Gender Studies.

Trans Cops Triumph

San Francisco Police Sergeant Stephan Thorne, after a three-year struggle, has finally won a the right to use the men's bathroom. Thorne had been assigned to the women's side of the Ingleside station locker room, an arrangement which satisfied neither Thorne nor the women officers, especially as Thorne completed his long transition. Now, he's using a private changing room built specifically for him inside the men's bathroom. Eventually, he hopes to tear down the final wall, but patiently says there's no rush on it. Meanwhile, Tonye Baretto-Neto, a Hillsboro County, Florida Deputy Sheriff, is finally back on regular active duty after superiors there finally abandoned their efforts to drive him off the force. Tonye's persistence, plus the fact of his excellent service record and lack of any wrongdoing, paid off with his reinstatement to active duty. Congratulations, both of you guys!

Stonewall Honors Transperson

At Stonewall Cincinnati's 16th annual dinner, a Community Service Award went to Diane Torrance, a transactivist who fought in many arenas for the rights of transpeople. It was Diane who put the "t" in GLBT for Stonewall; her work with the organization resulted in a change to their mission statement and policies, making them transgender-inclusive. Diane is a frequent presenter for Stonewall's Speakers Bureau and has educated countless members of the GLBT community about trans issues.

Capitol Hill Trans Education

Three members of the TransGender Education Association (TGEA) gave a presentation on Capitol Hill last April at the Library of Congress. The presentation, titled "Growing up and Coming out," was very well received with over 100 persons in attendance. For many, this was their first encounter ever, with a transgendered person. The event was hosted by "GLOBE" (Library of Congress' Gay, Lesbian or Bisexual Employees).

Librarian's Transition Accepted in Minneapolis

Debra Davis, a director of Southwest High School's media center, transitioned to working as a woman with the support of students and school officials alike. A 15-year-old freshman said that Davis' transition would take some getting used to, but, "I mean, it's not like you're gonna walk up to him and say something disrespectful. He chose to come out, and that's his business." Said one 18-year-old senior, "It's like the next integration revolution, you know. It's not a big deal at all." Debra had spent weeks collaborating on a transition plan with school officials. Principal Robert McCauley said reaction at the school was fairly subdued and calls from parents were supportive. "We're having a good day here," he said. "It's been an overwhelmingly positive response."

Texas Bar Approves LGBT Legal Issues Section

The Board of Directors of the State Bar of Texas voted to approve the creation of a new section for legal study and continuing legal education. The name of the section is the "Sexual Orientation and Gender Identification (SO&GI) Issues Section." It is believed that this is the first official State Bar to have a study section that is inclusive of transgender issues in the very name of the section.

Portland Protects Sexual Minorities

Leaders of Oregon's sexual minorities recently signed a partnership agreement with Portland city officials, that promises to benefit the transgender community there. Portland's police chief, mayor Vera Katz, and the county sheriff pledged to protect and defend the city's sexual minorities. The Partnership Agreement says that the Portland Police Bureau accepts responsibility for the protection of all citizens, "especially as it applies to the special needs of the sexual minorities community." Portland is the first major city to have its mayor, council members and police chief openly recognize the special needs of the sexual minority community, defined as individuals who self-identify with a sexual orientation or gender identity.

DEFEATS:

WA Republicans Expel TG Woman

The Whatcom County (WA) Republican Party has expelled a Transgender woman from membership after

continued on page 77

Featuring *Gender Mosaic* the Transgender Support Group of the Nation's Capital.

T North - Canadian News and Views

Christina C.

The International Foundation for Gender Education (IFGE) recently made a positive step toward extending their international presence by hosting the 1998 Annual Convention in Toronto, Canada. As a first time participant at the convention I had a very positive experience learning from and with my transgendered kin. The convention also served to introduce many Canadians to each other and I thought it opportune for us to continue to share Canadian transgendered news both amongst ourselves and with our international friends. Hence my offer to write this article and any following pieces that may be appropriate.

I have chosen to kick things off by outlining some of the activities going on in Ottawa, the Canadian capital. Ottawa is fortunate to be the home of the nation's oldest continuous running transgendered support group. "Gender Mosaic" has maintained a membership list of up to 100 members, and in May of this year celebrated it's 10th anniversary with a gala that attracted transgendered and non-transgendered people from as far away as Halifax, Nova Scotia and San Francisco.

Joanne Law, the president of Gender Mosaic, has pioneered a strong representation of the transgendered community amongst the Gay, Lesbian and Bi-sexual (GLB) community and the anniversary gala was an opportunity for the GLBT (Gay, Lesbian, Bi-sexual and Trans) community to show solidarity with several GLB representatives in attendance. Also, all of the services for the gala were provided by businesses owned and operated by GLB folk.

Gender Mosaic prides itself on providing a safe haven for the transgendered in the national capital region. Volunteers staff a support hot line and all major support organizations in the city are aware of Gender Mosaic's role. They routinely direct requests for help to Joanne Law and her team. Joanne has also set up long term relationships with the regional police force, hate crime unit and she advises the police on transgender issues. As a result, transgendered people who have had encounters with the Ottawa police because of minor traffic mishaps or their car breaking down on the highway have repeatedly cited the police for exemplary behaviour. According to Joanne all it takes is being clear and police have changed their attitude with the formation of the hate crime unit on TGLB issues ... Ottawa is one of the safer cities in North America to live as the gender we are."

Joanne also manages to host a radio talk show broadcast live every third Wednesday of the month at 6pm from Carleton University's radion station CKCU 93.1fm. The first Monday of each month she can be heard engaging a panel discussion of GLBT issues at 6pm on 89.1fm. Her broadcast and activist work keeps her in front of the media and Joanne is frequently quoted or seen in The Ottawa Citizen, Capital City, and Our Times newsapaers.

The group also conducts regular outreach activities, with members volunteering to conduct information sessions at local universities, community colleges or other venues. In Ottawa, as everywhere, the more you look the more transgendered people you find. The outreach activity along with the hot line support keeps a regular stream of new people looking to the group for support in dealing with their gender issues. To that end, Gender Mosaic holds three monthly events: a social evening, a transgendered discussion group and a second discussion group reserved for significant others. Of course individual members frequently meet one on one with those needing support and encouragement before they are comfortable participating in a group activity. The Ottawa group insists on being available to support anyone with gender issues hence its membership reflects a broad cross-section of the transgendered community.

In January of this year, Lynn Lefevre, a transgender speaker and activist in the Ottawa area, started up a discussion group for transsexuals which has grown steadily since it's inception. Lynn's TS group consists of MTF (Male to Female) and FTM (Female to Male) members in all phases of transition. Some members who have been living full time in the gender of their choice for years have joined the group to simply benefit from the camaraderie of their transgendered kin. This group is somewhat unique in terms of the extent of their discussions. The sessions, usually held on a Sunday, begin mid to late afternoon, extend over a potluck dinner and then often continue late into the evening. It is common for six hours or more of tough, focused debate to have taken place before everyone heads home feeling as the group has recently had to move to a larger location to accommodate the growing number of participants.

This July a member of the Ottawa transgender community received national media attention when she became the first transsexual to transition within the Canadian military. After months of preparations a mass awareness session for all of her co-workers was staged by the military in preparation for her transition day. The military and civilian audience responded to her courage by giving her a standing ovation. The Canadian Forces have not released her identity to the public, (thankfully) but a number of senior military officers have spoken in support of her gender needs to the media. This high profile transition is helping to sustain the importance of transgender issues in the eyes of Canadian society.

With the nation's political leaders on her doorstep, Michelle Renée, another Ottawa based transgender leader has taken advantage of this political proximity and has created the Canadian Task Force for Transgendered Law Reform. Michelle has recruited an initial cadre of members from the Ottawa area to get the task force underway and is using the Internet to coordinate participation by key agencies and individuals across the country. (email: ctftlr@geocities.com) The Task Force has conducted their first meetings and have prepared a Charter of Transgendered Rights and Freedoms that lays out essential rights and freedoms and goes on to describe the key issues facing the transgendered community in Canada. In time, the Task Force members will be approaching federal and provincial leaders on legislative and regulatory changes necessary to secure the rights of transgendered people in all Canadian jurisdictions.

Canadian Task Force for Transgender Law Reform (CTFTLR) c/o Michelle Renee PO Box 42067 RPO St. Laurent Ottawa, ON K1K-4L8 email: ctftlr@geocities.com

Gender Mosaic: PO Box 7421 Vanier (Ottawa), ON Canada K1L 8E4, TEL: 819/ 770 1945, email: gender_mosaic@geocities.com URL:http://www.geocities.com/WestHollywood/9630

Ottawa TS Discussion Group: PO Box 42067 RPO St. Laurent Ottawa, ON K1K 4L8 email: tscottawa@canada.com

July 9th, 1998 **TRANSACTIVIST JOANNA MCNAMARA IS DEAD:** [Oswego, OR: 9 Jul 98] Transactivist Joanna McNamara took her life on Tuesday, 7 July. She died of a self-inflicted gunshot wound. She was an attorney who co-founded It's Time, Oregon! and instrumental in gaining employment protection under Oregon's disability law. InYourFace! Online News Service [c]

By Design

Riki Anne Wilchins

However much time I spend with GenderPAC, it is still computer programming and consulting that pays the rent. More often than not, I'm working with products from Microsoft. Now, a weird thing happens when you call the Technical Support number with a bug in Microsoft software. Doesn't matter what it is. It could be something totally unambiguous like your monitor blowing up.

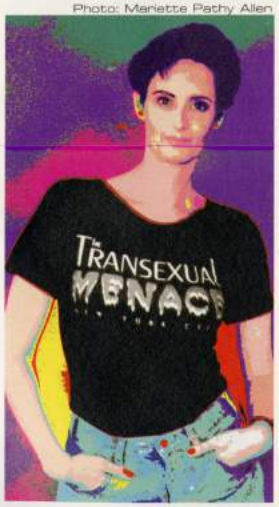
No matter. Microsoft will not admit to bugs. As you run frantically around your computer trying to douse the flames shooting from the top of your monitor, some nice fresh-faced voice in Redmond, WA will come on the line and reassure you that it's not a bug; the software is supposed to work that way. It's "by design."

As that's how I view the suicide of transactivist and lawyer Joanna McNamara reported in the July 9th edition of InYourFace! ** Dead trannies are not a bug; the system is *supposed* to work that way. It's "by design."

The same issue of InYourFace! also noted a Texas Republican in the New York Times pointing out that 'they' not only don't allow homosexuals, but "We don't allow pedophiles, transvestites, and cross-dressers either.", A lesbian in the Washington Blade asserting that "I hate [this merging of 'trans' with 'lesbian, gay, and bisexual] with greater fervor every day." The omnipresent Ford advertisement which has been running for months in which a man loses a bet and must dress in women's clothing — after all, what could possibly be more ridiculous or humiliating than that?

There are no positive messages out there for us. There is no support for what we do, for what we are. And there aren't too many inside, either. Even our conventions, for many the flower of the community, are completely in-door affairs usually held at out-of-the way hotels off the interstate. We try to feel proud walking around inside while conveniently ignoring that no one steps a foot off the grounds or shows their face outside in the daylight. We attend workshops debating if what we do constitutes a "mental illness." We rank each other by how "real" we look or how well we "pass," just as everyone else does. Many of us talk about everything but the fear we feel of losing our spouses, jobs, children, our lives.

Photo: Mariette Pathy Allen



And so when I read about dead trannies, I don't get sad as much as angry. The shame I still feel, the sense I am a social outcast, the fear of being in my body, especially during sex, the anxiety everytime I have to use a public restroom, the complex and difficult emotions I watch women traverse simply because I've asked them out for a movie, the lifelong estrangement of my siblings, nieces and nephews, the icebreaking I must go through with each new job, in short, the bone-deep sense that within this gender system I am a permanent freak — all this is not a mistake. It is the gender system doing it's thing. It is the gender system operating efficiently, exactly as it was designed.

My feelings of isolation and despair are *how* the gender system keeps everyone locked in two binary genders. Fear, shame, and economic discrimination are the tools the gender system uses to keep us all in binary genders. They are the cost of crossing the line. I am *supposed* to feel terminally self-conscious, freakish, and alone.

In fact, anyone in their right mind would feel so too. It is not a sign of dysfunction, but a sign of good reality-testing and sensitivity. Someone would have to be totally cut off from their emotions or be in a psychotic break to not feel that way.

So I don't get sad so much as angry. I remind myself that I don't need to "pass" better. I don't need therapy. I don't need some soppy motivational speaker to tell me "transgenderism is good." I don't need a new self-help book.

What I need is to change the system. What I need is to rewrite the program. What I need is a movement.

Kate Bornstein is the author of Gender Outlaw, Nearly Roadkill [with Caitlin Sullivan], and My Gender Workbook. Barbara Carrellas writes, teaches, and performs sex; she's spent the last five years developing a series of Erotic Awakening workshops throughout Australia.

Kate and Barbara are living together in New York City, and are now touring North American college campuses with their show, Cut'n'Paste Version 2.0. Kate and Barbara are too tall and too blonde.

Two Too Tall Blondes Answer It All For You

by Kate Bornstein and Barbara Carrellas

Dear Blondes,
I am a post-op MTF. My new lesbian lover insists on using a dental dam when she goes down on me. I keep telling her this is unnecessary since I do not lubricate. We've been doing it her way, but I think I'd like it better without the dental dam. What do you think?

Yours Truly,
Too Dry to be Dangerous

Dear Dry,

Barbara: I think you have a very intelligent and safe-sex-wise lover. First of all, safer-sex precautions protect not only against AIDS, but against a host of other sexually transmitted infections, many of which are a lot easier to transmit than AIDS. Herpes, chlamydia, cytomegalovirus, genital warts, gonorrhea, hepatitis, syphilis, vaginitis, yeast infections...shall I continue?

Kate: I think you've made your point, Barbara.

Barbara: Okay, and if we're talking about not sharing bodily fluids, there's more to consider than just secretions that come from genetic vaginas.

Kate: Bingo. Listen, Dry... MTF genital surgery doesn't generally remove the Cowper's Gland. We've still got that thing up inside us, and that li'l gland is responsible for making the fluid in which our sperm used to swim. What's more, many MTFs still ejaculate that stuff through the urethra after genital surgery. Presto: bodily fluids.

Barbara: If you want a sexier and thinner alternative to a dental dam, try plastic food wrap. You can see through it and you can cut a much larger piece which makes it so much easier to handle.

Photo: Dona Ann McAdam

Kate Bornstein

Kate: Just make sure you don't use the microwavable variety which has tiny little holes in it.

Barbara: And one more inducement... you know that taboo about moving your tongue from anus to vagina because of the risk of infection? Imagine this: stretch your dam vertically from anus to vagina and you can take one long lick from bottom to top - yum!

Dear Blondes,
Kate, I heard you've got leukemia, and I'm sorry to hear it. But there's a rumor going around that it's because of the hormones you're on. I'm just about to start my own hormones, but honestly I'm a little nervous. Help?

Love,
Concerned

Dear Concerned,

Kate: Thanks, hon. What I've got is Chronic Lymphocytic Leukemia (CLL), which is way slow and isn't likely to kill me, okay? As to estrogen and progesterone causing the leukemia... I dunno. CLL is only supposed to affect folks sixty or seventy years old; I was diagnosed when I was 46. The only thing I can figure that might be a factor is that my testosterone-based body was cut off from a regular supply of testosterone with the combination of the removal of my testicles and the large doses of estrogen. All my brain saw was that the ratio of testosterone and estrogen was evening out; and the only time that would happen naturally would be when I was 60 or 70 years old.

Barbara: Then again, we asked Dr. Stanley Biber about this and he didn't seem to think there was a connection. The role and behavior of hormones in the human body is still such a mystery. I am concerned about anyone taking synthetic hormones. The increasing number of menopausal baby boomers is bringing to light a great deal of work being done in the area of natural hormone supplements. I really recommend that you check out everything you can find about natural hormones. For estrogen and progesterone, one great place to start is Dr. Christiane Northrup's monthly newsletter, Health Wisdom for Women. It's available by subscription by calling **1-800-211-8561**. Or check out **www.womentowomen.com**.

Kate: We also did a web search on "testosterone" and found several online sites with information on the natural varieties; but the fact is that neither Barbara nor I have had the experience to judge the validity of the claims made at these websites.

Barbara: And for those who don't have access to the Internet, we'd suggest using the public library for that now. Most librarians have staff who would be delighted to show you how to use their internet access, no matter how little experience you've had with this sort of thing. Kate and I are researching sources and applications for natural testosterones, but deadlines being what they are, we weren't able to get that done in time for this issue of *Transgender*.

Kate: For those with specific interest in natural testosterone, you would be best to contact your nearest FTM organization. Oh, I suppose I should say this: Knowing that hormones might have had something to do with this leukemia, would I do it over again? Yeah, I would.

Photo: Annie Sprinkle

Barbara Carrellas

Dear Blondes,
I'm an FTM who's had top surgery, and I've been living very well as the man I am for the past couple of years. About a year ago, I began having difficulty sleeping. Nothing too serious, but serious enough to notice. Then the nightmares started: usually I was running away from someone or something. In my nightmares, sometimes I'm a female, sometimes the people chasing me just think I'm female. At first I figured this was just normal dream therapy, but the nightmares haven't gone away and it's been over six months since they started. Lately, I've begun feeling lethargic to the point of staying inside my house as much as I can, and that has been leading to panic attacks. I still have trouble sleeping, and I often wake up drenched in sweat. Other than all this, my life is really going very well: job, love life, etc. My wife thinks it might have something to do with being FTM but I don't see how. I'm thrilled about my gender change. What's wrong with me?

Sincerely,
Sleepless in San Francisco

Dear Sleepless,

Barbara: Wow, hon, that's a lot of stuff going on. Neither Kate nor I are licensed doctors or therapists, and even if we were we couldn't make a diagnosis or offer treatment advice in a column like this, but we did have a couple of thoughts. Kate?

Kate: Oh, sigh. Welcome to the wonderful world of transpeople, Sleepless. About a year ago, as I was wrapping up writing My Gender Workbook, I wanted to add a section in there about the

downside to all this gender-change stuff. The result was Angel on a Bad Body Day (pg. 245). I read the piece to Riki Wilchins (author of Read My Lips), and she pointed out that she too experienced periods of depression, nightmares, rage, and blah blah blah... and that all these symptoms match up with the symptoms of something called Post-Traumatic Stress Disorder (PTSD).

Barbara: We did a Web search on PTSD and found a list of symptoms that sure enough matched up to those you're talking about, as well as physical symptoms like nausea, muscle tremors, twitches, chest pain, difficulty breathing, elevated blood pressure, rapid heart rate, thirst, visual difficulties, vomiting, grinding of teeth, weakness, dizziness, profuse sweating, chills, shock symptoms, and fainting.

Kate: Not a pretty picture. What they call "cognitive symptoms" of PTSD include: blaming someone, confusion, poor attention, poor decisions, heightened or lowered alertness, poor concentration, memory problems, hypervigilance, difficulty identifying familiar objects or people, increased or decreased awareness of surroundings, poor problem solving, poor abstract thinking, loss of time, disturbed thinking, and nightmares.

Barbara: According to the American Psychiatric Association (DSM-IIIR, pg. 247), psychological trauma is defined as some experience beyond "the range of usual human experience," that "would be markedly distressing to almost anyone, and is usually experienced with intense fear, terror and helplessness."

Kate: Sound familiar? Here's the kicker: the reason it's called post-traumatic is that the symptoms set in after the trauma. Apparently, we do just fine managing the trauma itself. It's when we're done with the trauma that we crash and burn. One thing to keep in mind is that we live in a world where simply being transgendered in public is "beyond the range of usual human experience," and that walking around the way we are (no matter how well we pass or not) is "usually experienced with" some measure of "intense fear, terror and helplessness."

Barbara: But any or all of the symptoms you're describing might in fact be related to something else entirely. So... what you're going through might be related to a transgender experience if your own transgender experience is or was traumatic. In that case, get thee (back) to your therapist. Go!

Kate: Whoa! It could also be a simple hormone imbalance. I went through that one a couple of years ago. I was super depressed, almost all the time. My life didn't warrant that, so I asked my doctor. She did a work-up of my hormone levels and found them way out of whack. I went on a new dosage, and after about a month, the depression lifted.

Barbara: And let's not forget the spiritual side of things... please. If in fact you're living a life that you've chosen to live, and the life you've chosen turns out to be traumatic, then all that remains is to learn how to deal with the trauma. There are many valid spiritual paths that help people to deal with life's inevitable challenges.

Kate: My current favorite spiritual path is Zen, which basically says that life is pain, but it doesn't have to be suffering. The point is, Sleepless, you're wise to ask yourself what's up. Those kinds of symptoms need looking at, and it sounds like you might wanna look at physical, psychological, and spiritual reasons and therapies.

Barbara: Well, that's it for this issue. See you next time.

Kate: Bye! Keep those cards and letters coming in!

Suzanne Anderer, CPE

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Maria Alonge, CPE

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Graduate of Arizona State School of Electrolysis in 198
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vertible in Boston's Pride march!" I have marched in the New York parade many times over the years. Sometimes tablehopping from group to group, usually dressed in something ultra sexy, like the time Annie Sprinkle and I wore transparent bridal gowns and went as a couple; later with students as we proudly carried our academy banner and handed out business cards to any and all including New York's Finest as they kept the peace in front of St. Patrick's. I have always considered that the Pride march belonged to anyone who walked a sexual path that was not exactly straight and narrow. But I never rode that path in a convertible!

Actually, Kim had originally invited me to conduct a seminar that would promote my new book and our school as part of the once a month class series she hosts in her little hotbed of a shop. When she suggested we time my visit with Boston Pride weekend, the idea was irresistible. "Be forewarned," I told her, "my book tour outfit is a pink suit ala Jackie, you might not want to ride in a convertible with me." Kim loved the idea.

I envisioned myself ensconced in Kim's lovely white Hertz rent-a-convertible, carried like Cleopatra in her barge, waving to a sea of hands while Kim's young lesbian-activist minions preceded us passing out rose-colored flyers to advertise our endeavors and the next day's seminar, which we planned as a tea party. There was one just more element I needed to make this picture perfect and that was Patti Harrington.

Veronica Vera
Photo: Annie Sprinkle

Patti Harrington had been a virgin when he began classes at the academy five years ago. Now Patricia was out; Pat was gay, and happily, no longer a virgin. She'd come a long way, baby. Patti was now our chief academy spokesmodel. It seemed poetic justice that she ride with us down that avenue; a fitting reward to celebrate her journey of self-discovery, her gayness and her courage. Plus, Boston has a long Irish heritage and so does our pretty colleen.

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my pink jacket with black leggings instead of the pink skirt, and covered the entire ensemble with my hot pink mac, a gift from a student who was into rubber raincoats. Then we piled in the van to pick up Patti at her hotel. She had awakened at dawn to do her make-up. (She does an exquisite job but being a bit of a perfectionist, as you know you girls can be, it takes a couple of hours.) Patti looked beautiful as she made her way through the Hilton lobby in her very optimistic (considering the weather) floral print. Not even the news that the parade had been cancelled could dim her bright smile.

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Tomorrow's class? Would we even have a class? I wondered. "Would people brave the elements and show

continued on page 79

downside to all this gender-c
The result was Angel on a Ba
(pg. 245). I read the piece to F
(author of Read My Lips), and
out that she too experiencec
depression, nightmares, rage, a
blah... and that all these symp
up with the symptoms of som
Post-Traumatic Stress Disord

Barbara: We did a Wet
PTSD and found a list of syr
sure enough matched up to t
talking about, as well as physica
like nausea, muscle tremors, tw
pain, difficulty breathing, elev
pressure, rapid heart rate, thir
ficulties, vomiting, grinding of t
ness, dizziness, profuse swe
shock symptoms, and fainting.

Kate: Not a pretty picture. What they call "cognitive symptoms" of PTSD include: blaming someone, confusion, poor attention, poor decisions, heightened or lowered alertness, poor concentration, memory problems, hypervigilance, difficulty identifying familiar objects or people, increased or decreased awareness of surroundings, poor problem solving, poor abstract thinking, loss of time, disturbed thinking, and nightmares.

well we pass or not) is "usually experienced with" some measure of "intense fear, terror and helplessness."

Barbara: But any or all of the symptoms you're describing might in fact be related to something else entirely. So... what you're going through might be related to a transgender experience if your own transgender experience is or was traumatic. In that case, get thee (back) to your therapist. Go!

but it doesn't have to be suffering. The point is, Sleepless, you're wise to ask yourself what's up. Those kinds of symptoms need looking at, and it sounds like you might wanna look at physical, psychological, and spiritual reasons and therapies.

Barbara: Well, that's it for this issue. See you next time.

Kate: Bye! Keep those cards and letters coming in!

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Suzanne Anderer, CPE

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"You can't always get what you want. But if you try sometime, you just might find, you get what you need." *The Rolling Stones*

Miss Vera's Class:

Veronica Vera

This refrain from the Rolling Stones comes to mind each time I think about the Boston Tea Party. No, not the one that helped start the Revolution. This one had more to do with evolution. It all began when Kim Airs, proprietress of Brookline's Grand Opening gender friendly sex boutique e-mailed me an invitation. "Would I like to ride in her convertible in Boston's Pride march?" I have marched in the New York parade many times over the years. Sometimes tablehopping from group to group, usually dressed in something ultra sexy, like the time Annie Sprinkle and I wore transparent bridal gowns and went as a couple; later with students as we proudly carried our academy banner and handed out business cards to any and all including New York's Finest as they kept the peace in front of St. Patrick's. I have always considered that the Pride march belonged to anyone who walked a sexual path that was not exactly straight and narrow. But I never rode that path in a convertible!

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By ten a.m. when we were due to assemble it had already been pouring for many hours. Kim had been in contact with the parade marshalls, many of whom were from the transgender community including Nancy Nangeroni who was one of the two grand marshalls. There was no word of cancellation. The prospect of four of us- Kim, me, our driver and 6'4" Patti- riding in the white convertible lost its charm. The car seemed to shrink each time I thought about it. Kim decided we would ride in her van instead. We got made up, dressed; I borrowed a pair of Kim's hefty galoshes, teamed my pink jacket with black leggings instead of the pink skirt, and covered the entire ensemble with my hot pink mac, a gift from a student who was into rubber raincoats. Then we piled in the van to pick up Patti at her hotel. She had awakened at dawn to do her make-up. (She does an exquisite job but being a bit of a perfectionist, as you know you girls can be, it takes a couple of hours.) Patti looked beautiful as she made her way through the Hilton lobby in her very optimistic (considering the weather) floral print. Not even the news that the parade had been cancelled could dim her bright smile.

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continued on page 79

How come people become uncomfortable when they hear that someone is HIV-virus infected? In my experience it is because nobody wants to think about illness and dying. None the less HIV and AIDS still very seriously affect the transgender and non-transgender communities. And, th character of the epidemic has changed in ways that are worthy of thought and discussion.

HIV / AIDS

Gianna E. Israel

Dear Gianna:

I am very worried about my husband. He crossdresses and claims he is not gay, yet I suspect he has secretly experimented. I believe he had sex with strangers while attending a party down in New Orleans. I tried talking with him about this, but he denied having had sex while dressed as a woman. I am not so sure he understands how worried I am. He could infect me with AIDS. We haven't had sex for months because I don't want him touching me. How can I find out the truth if he won't talk to me?

A Concerned Wife,
Baton Rouge, Louisiana

Ms. Gianna responds:

Your fear as a spouse of a crossdresser is not unique. Chances are your husband is not gay, however; I cannot say whether he is experimenting with sex outside your marriage. In many instances, people crossdress for emotional relief because they need to do so as part of their self-identity. Other times, people crossdress as part of a very discreet sexual turn on or part of role play games.

Sometimes wives of crossdressers do not ask questions about their spouse's inner life, and therefore never learn the basic information needed to understand a husband who crossdresses. While you obviously are aware that your husband crossdresses, are you and your husband comfortable discussing the topic of crossdressing?

It is common that crossdressers frequently feel uncomfortable talking about their transvestite sexual fantasies - particularly because they do not wish to jeopardize their relationships. If you are fearful your husband is having unprotected sex, you need to find out more about his practices and experiences. I would suggest inquiring about why he enjoys crossdressing. Ask him why he finds crossdressing satisfying. I believe if you make it safe for him to talk about his crossdressing, you will gain a better understanding of what it is he actually does.

In your discussion, you also need to directly ask if he has had sex without condoms. If he has, he is at risk of contracting the HIV virus and passing it to you through unprotected sex. Should he have had sex outside your marriage, I would suggest you both get tested, either through your physician, or at an anonymous clinic sponsored by your local public health department. Finally, if he refuses to talk about the HIV issue, refuse to have sex with him until this issue is resolved. Also, always insist he uses a condom for your protection until he presents HIV-negative test results.

If you have trouble communicating with your husband regarding any aspect of your relationship, I would strongly advise marriage counseling. A family therapist with sex education training would be your best bet. However, almost any good relationship therapist would be able to teach the both of you how to increase your communication skills within the relationship. Both of you could then discuss the crossdressing and HIV issues together privately.

Dear Gianna:

I am 18 and transgendered. This is supposed to be a time of being a happy young adult for me. I got a big problem to do with dating. I found out I am HIV-positive. I still have men who are interested in me. I also like being a woman. When do I tell men about my having HIV?

Mavis in Baltimore

Dear Mavis:

Unfortunately contracting HIV at a young age is becoming more and more common. So, too, is the belief HIV/AIDS does not affect the young, or that discussing safe sex is unnecessary. In addition, many people are not aware that HIV mutates into different strains. This means there are numerous combinations of HIV out in the world, some strains more deadly than others. Even if someone is a long-term survivor of one type of HIV, reinfection with a different strain can be deadly. Moreover, in the past seven years a new disease has emerged which is equally as deadly as AIDS... Hepatitis-C, which also has no cure. Like other forms of Hepatitis, "C" attacks the liver and the body's immune system, and most carriers are not aware of its silent presence as it remains quiet for up to 20 years before becoming symptomatic.

Illness and death certainly are subjects people like to avoid, particularly during sex or lovemaking. After all, lovemaking is a celebration of life and each other. However, before engaging in intimacy it is crucial safe sex precautions be discussed and used. Although it is everybody's responsibility to protect themselves, in some locations it is illegal for HIV+ persons to engage in unprotected sex.

As a rule of thumb it is best to introduce the subject of condoms and dental dams before taking one's clothes off. I advise clients to do so at the same time that they discuss their transgender status with a potential sex partner. This is particularly so for pre-operative transsexual and transgenderist individuals. Some people feel comfortable enough to state they are HIV-positive. Other persons introduce the subject by stating "since I come from a high risk group, there is a strong possibility I may be HIV-positive." Rather than discussing their medical histories, others just hand their partner a protective device and state: "You must wear this if you are going to have sex with me."

One of the reasons HIV-positive people feel uncomfortable discussing their HIV status, is they are afraid of being treated badly once a partner finds out. I have provided telephone consultation to clients throughout the United States, and the vast majority of those who are HIV-positive report being able to find sexual partners as well as meaningful relationships despite their medical condition.

Dear Gianna:

I live in rural Tennessee and am HIV positive. This presents several problems. My doctor has been very supportive of my being my true FtM self. She and I are wondering if I am allowed to have my breast removal surgery. I am in good health even though I have been infected for over seven years. My doctor said she sees no reason why I can't have surgery, but we haven't been able to locate any clinical literature regarding HIV transgender surgical issues. Could you please provide a reference?

Steve in Tennessee

Dear Steve:

Being infected with the HIV virus should not effect either your ability to have a bilateral mastectomy and chest reconstruction surgery, or its outcome. At the end of this article I have included a copy of clinical literature from the book "Transgender Care", co-authored by myself and Donald Tarver, M.D.. You may order it through the IFGE bookstore or from the publisher, Temple University Press (1997). If either you or your physician have access to Medline, a computerized medical search service, you can use the keywords "transsexualism, HIV, and surgery" in order to locate any papers or transcripts on the subject.

RECOMMENDED GUIDELINES FOR HORMONE ADMINISTRATION, AESTHETIC SURGERY, AND GENITAL REASSIGNMENT SURGERY IN HIV-POSITIVE AND IMMUNO COMPROMISED INDIVIDUALS.

1 Hormone administration for HIV-positive individuals should follow the guidelines at the end of Chapter 3. (Author's note: Hormone administration is in essence the same as it is for HIV-negative persons, except in cases of severe liver failure or other medical conditions which recommend against hormone usage.)

2 Individuals utilizing physician-prescribed self-injected hormones should follow the physician's advice in the handling, cleaning, and disposal of syringes. Needle sharing is strongly discouraged.

3 HIV-positive and immuno compromised individuals are commonly prescribed prophylactic treatments or medicinal, antidepressive, dietary, and other regimens that may impair liver functioning. Physicians should be especially mindful of the monitoring of liver function.

4 Physicians (as well as both MTF and FTM consumers) are advised to review gonad-removal options because such procedures require individuals to utilize lower postsurgical dosages of hormones, thus placing less stress on long-term liver functioning. Intravaginal removal of organs in FTM surgical patients is advised over other procedures that might involve increased surgical invasiveness.

5 Evaluations regarding surgical appropriateness for aesthetic and Genital Reassignment Surgeries should follow the guidelines found at the ends of Chapter 4 and 5.

5a. To date, numerous HIV-positive individuals having a stable "fair" or better health condition have undergone aesthetic surgical procedures with no known untoward effects. Such procedures include mastectomy, breast augmentation mammoplasty, facial cosmetic surgery, and other minor elective procedures.

5b. A handful of HIV-positive individuals have undergone Genital Reassignment Surgery performed by reputable surgeons. The surgical recommendations herein are the first ever proposed for these individuals because, at present, no case studies document how Genital Reassignment Surgery affects the immune system postsurgically. However, extensive studies have been done on general, cardiac, orthopedic, and other medically necessary surgical procedures. These operations have not adversely affected immune systems of stable HIV-positive patients. Furthermore, the ethical guidelines of the American Medical Association state that physicians may not withhold medically necessary therapy because of the physicians' fear of contracting the patient's diseases.

6 Surgeons are advised to consult with a surgical candidate's primary physician to verify the individual's current health status and the medical appropriateness for any surgical procedure. Candidates having "fair" or better health conditions may be considered medically appropriate, particularly when an aesthetic surgery or genital-reassignment procedure is deemed psychologically beneficial to the individual's quality of life.

7 "Fair" health or better shall be inclusive of the individual's being free of associated diseases and major opportunistic infections for three months with regard to aesthetic surgeries and for six months with regard to Genital Reassignment Surgery. Such diseases would include Kaposi's sarcoma and Pneumocystis carinii pneumonia. Examples of major opportunistic infections would include systemic candidiasis, systemic or chronic mucocutaneous herpes simplex, aspergillosis, cryptococcal diseases, cytomegalovirus infection, nocardiosis, strongyloidiasis, toxoplasmosis, zygomycosis, and tuberculosis.

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"His skin was pale and he needed a shave. He would always need a shave."
Raymond Chandler, Farewell, My Lovely

A Close Shave

J. Randall Parry

One of my fond recollections of my father was watching him wash and shave his face. He would do both with exuberence and skill. I can still smell the menthol of the shave cream and the scent of his cologne. He would lather up, and chase me around the bathroom. I would grunt and position myself in a karate pose waiting for my moment to strike. Mom would yell for us to behave and we would call a truce till the morrow.

I came up to his waist, just barely able to peek over the sink. I couldn't wait till I was big enough to shave. Then I asked him, "Daddy when will I be old enough to shave my face?" He dabbed a puff of shave cream on my nose, patted my blonde locks, smiled and said, "Honey, you're a girl and girls don't shave their faces. Anyway, it's a pain to have to shave everyday. You don't want to do that." I was heart broken.

But to this day one of my favorite rituals of mandom is starting my day with a fresh dripped cup of coffee, an invigorating hot shower and the perfect shave. To me this makes all the difference in the world. The simple things, and a bit of pampering, are a must for a life well lived.

I have a thing for the old fashioned shaving brush and soap. The natural bristles of the brush set up the beard in a way no modern shaving cream can ever duplicate. And there is something enduringly stylish and traditional about using a brush and soap. But when it comes to the actual shave a modern double-track razor with the swanlike fluted stem and flexible head are the best. Other razors seem clumsy and downright dangerous by comparison. If you feel faint at the sight of blood there are several ways to minimize the cuts.

To begin with, wash your face, even if it doesn't need it. This helps soften the beard. Then wet the brush in scalding water and work up a lather in your shaving dish. Brush on, using a brisk, circular stroke to get those face bristles ready to fall. Now shave with the grain of your beard, which will minimize nicks as long as your blade is reasonably sharp. There are certain areas around the chin and below your nose that will always seem to have a shadow; in those places you can shave against the grain, usually on the second pass. Give special attention to the chin, especially to that funny little nook between it and your lower lip. Go slowly here since this area tends to cut easily.

Now look in the mirror. You've got that clean, fresh look of a seeker of wisdom and truth. You believe in you. And that is what counts.

Soap and Water. Before you expose your handsome, vunerable, hairy face to the cold steel, wash it with hot soap and water. This has less to do with cleanliness than with softening of the beard and opening the pores. After washing, rinse again with hot water, but don't towel off. Now your face is ready for shaving cream.

Aftershave. Shaving scrapes away part of the epidermis and leaves the skin exposed raw and extremely sensitive. After you've shaved, do a final rinse with cold water to close pores, and apply an aftershave cream with sun screen to moisten and protect your skin from the sun.

Razors. Double-track razors shave incredibly close with fewer nicks. The styptic pencil is incoporated into the design. Use smooth strokes with the grain of the beard.

Shaving Brush. A shaving brush with natural badger bristles, though pricey, is a stylish accoutrement as well as the best way to set up your beard for the perfect shave.

Shaving Tip. When using a brush and shaving soap, you need only enough lather to create a lubricating film. Don't go for the whipped cream look.

A Guide to the ties that bind

Regarding Bow

Dennis W. Harwich

No article of the gentleman's wardrobe packs such a variety response as the bow tie. It seems to redefine itself with the speed and cheekiness of a certain rock star. It takes a tidy bit of healthy self-confidence to wear one with aplomb, I find.

Some view its wearer as sturdy, solid, kindly and parsimonious. Some will see a brash, hearty guffaw of a huckster salesman. In my salad days, only the most repulsive of nerds and geeks had the misfortune of adorning themselves with the alter-ego of the pocket protector, the inimitable plaid bow-tie. Now, what am I to think of my smug dismissal of those very men whose sartorial taste elicited such disdain in me, when, to my dismay, I discover that the most powerful and affluent men in America are little more that grown-up nerds? A deeper examination of the significance of that bit of neckwear is in order, methinks.

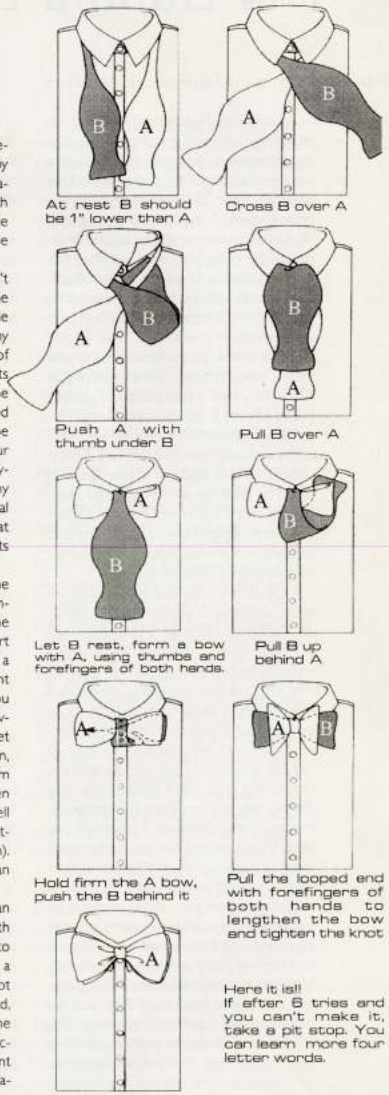
In the era of Good Queen Bess, neckwear resembled nothing so much as a ruffled platter on which to serve up the heads of the lords-in waiting to her esteemed highness. As the bald monarch miss departed this plane, so, too did such fashions. In keeping with a stern, puritanical world view, lace and frippery were eschewed in favor of simple, unadorned "fall collars" held closed at the neck by a miniscule bow. This left the neck rather chilly, so throughout the eighteenth century, as revolution stirred, we begin to discover evidence of the "stock" and "cravat" which reached their heyday in Dickensian days of yet another British queen's reign. The stock was a simple tubular neck covering, then wound round with the cravat, or tie, which could be fastened with a jeweled pin, or worn "a la foulard", much in the fashion favored by Hugh Hefner's silk ascot, or silly me, a bow!

Enter the revolution in male haberdashery fomented by the "sack suit" popularized by the office-working-type bloke of the 1880's. This suit; pants, vest and jacket, has altered in style but little in the last 100 years. What's so special about it? Well, the mass-produced sack suit was worn with a mass-produced shirt, which attached to a vestigial stock, a stiff paper or starched linen collar, held on by three buttons and decorated with, a bow tie. Men's evening formal wear became codified at about this same time, and by the turn of the century, nothing reeked status like a black tailcoat and trousers worn with a white pin-tucked bib-front shirt, a white pique vest, and the indomitable white pique bow tie.

It makes perfect sense that we today don't quite know what to make of the bow-tie wearer. Popularized by soft-handed middle class male office workers in an era when brawny laborers were greasing the machinery of progress, a rather sneering response to its tidiness is understandable. Its ancestor, the foppish cravat and stock, worn by moist-eyed poets and wits of post-revolutionary Europe and America is perhaps the reason for our response to it as somehow weak and lily-livered. Because it is associated with wealthy and powerful men who could afford formal wear and the time and entree to events at which to wear it, the bow tie deserves its cachet of luxury and status.

Enough of that malarkey, for today, the best bow tie look, in my humble opinion, engenders a studious, serious quality in the wearer; gray flannel trousers, pin stripe shirt with white round-point collar and cuffs, and a matching ensemble of maroon paisley print bow tie, suspenders and socks. There you have it. I find that I enjoy a casual navy blue v-necked pullover sweater with this look. I get great service in restaurants. Older women, who normally clutch their purses away from me, smile benignly at me. Handsome men assume I'm gay, and sexy women in bars tell me all their secrets, assuming me to be trustworthy (which, gentle reader, of course I am). Add a pair of tortoiseshell frames, and I can cruise any campus with impunity.

Anyone who can tie their own shoes can tie a bow tie, though they do look well with loafers. The primary rule of bow-tie-ing is to keep expletives to a minimum. Choose a small, simply patterned tie, a subtle stripe, dot or paisley. Save the large, garish patterned, wide-winged ties for that retro party with the Bee Gee's soundtrack. For the novice, I recommend a plain color in a contrasting accent to suit or trousers. Follow this simple diagram, and keep tie-ing.



Diane Wood Middlebrook

SUITS ME: The Double Life of Billy Tipton

Reviewed by Jamison Green

When Billy Tipton died in 1989, the world rushed in and gave him, briefly, the larger fame he had once nibbled at as a jazz musician and entertainer. But in June of 1958, after 20 years of chasing the brass ring, when the door to the big time world of popular music opened and beckoned Billy in, he backed away from the spotlight, settling for playing the hotel ballrooms and clubs of greater Spokane, Washington. In "Suits Me," Stanford University English professor Diane Wood Middlebrook explores both the geography of jazz and swing in the heartland of America, and the geography of gender in the middle of the 20th century. Because underneath his dapper suits and corny comedy routines, Mr. Billy Tipton concealed the body of a woman, and when he died, his sex revealed by paramedics and the coroner's report, he left hundreds of people who knew him, and millions more who heard the news, astounded by his "deception."

Cross-dressers and transsexuals—especially pre-op or non-op transsexuals—are rarely strangers to accusations of fraud. People assume that they are trying to be something that they are not, that they are masquerading, lying about themselves in order to gain some social privilege or access to something otherwise off limits or to which they should not be entitled. They are sometimes (ironically) accused of stealing the very identity they are projecting into the world. Professor Middlebrook's research has been thorough, and she has spoken with most of Tipton's living relatives, former wives, business partners and many other musicians of the era. What she reveals to her readers is a fully textured portrait of an era and a man who worked hard and earned every privilege he received. She lets us almost hear the music, taste the dust from the roads Billy and his bandmates and partners traveled. She lets the people who knew him comment on whether they thought he was a man or a woman. She lays out the mystery of how others perceived and ignored or challenged Billy's gender presentation, and the lengths to which Billy went to protect his secret, which sometimes wasn't all that hidden.

Suits Me is an amazing story filled with strange reversals: Billy had a male cousin named Bonnie, his mother's nickname was Reggie, his first "wife" had left her husband, Earl, for a life on the road and was known as Non Earl. And there were enough female musicians on the circuit in those days that cross-dressing

to the extent that Billy did should not have been necessary to maintain a career, as many people have conjectured to justify Billy's behavior.

Billy's death and the revelation of his "true sex" led various groups to claim his memory as a symbol of their own cause: lesbians said he lived as a man to safely love women; feminists said he lived as a man in order to have a career; transsexuals said he lived as a man because he was a man—he just didn't avail himself of the medical technology to make himself legal. Because Billy never declared himself any of these things (although he did declare himself a man), it seems presumptuous for any group to claim such an independent spirit as their own. But Billy also acknowledged to some family members that he remained a woman in body; to one female cousin he intimated he would one day go back to living as a woman once the kids he had adopted with his last wife, Kitty, were grown and out on their own, and to another female cousin he declared that he had made a conscious choice to live as a man and that he was a normal person. It is only respectful to refer to Billy with masculine pronouns, using the male gender he so completely inhabited. Middlebrook skillfully interweaves masculine and feminine pronouns to reflect the understanding of the people Billy interacts with, and to acknowledge the reality of Billy's body. In this way, she creates a striking sense of the incongruity of gender and body that Billy lived with, and others like him still live with every day.

There is only one point of contention where I take exception to Middlebrook's analysis of Tipton's motivations. She assumes that the absence of breast bindings or genital prosthetics (pants stuffers) from Billy's body at his death, and from his personal effects, was an indication that he was anticipating discovery. I contend this can't be known. He may have simply grown weary of the apparatus, seeing no need for it since he had retired from public life. Perhaps he felt he had earned the right to be a man in his own skin, regardless of its shape. Perhaps it was with relief that he discarded those accoutrements years earlier. And I suspect that, unless diagnosed with a terminal illness, most of us don't realize the finality of our own death even when the moment is upon us. It is dramatic and appealing to conjecture that he staged the conditions of his discovery as consciously as he had staged the presentation of his gender identity, but I contend that the simple reality of Billy's life is more appealing: he was socially a man and physically a woman. That dichotomy fascinates us, and we struggle to rationalize it, to explain it, to defend it or to tear it apart. Depending on our allegiances, we rush to invalidate either the body or the soul that informed it. But I think both are real and valid, and that Billy Tipton's life simply illustrates one person's adaptation to his situation. Without a definitive statement from Tipton, which he never gave, his life is open to any interpretation, whether insensitive or informed. In spite of this one logical flaw in her analysis, I think Middlebrook has composed a fine portrait of an artist, one that will ultimately give readers some insight to the reality of what we now call the transgendered experience as it was lived before the modern transgender movement had established itself.

This is an important book, both for the history in it, and for its vivid depiction of the brave determination of Billy Tipton that his talent, energy and love sustained. Some transpeople may be put off by the pronoun inconsistency, feeling that the only way to treat Billy is as the man he wanted to be and was—the way others perceived him, for the most part, in his vibrant life. Some transpeople may find the reflection of the very real challenges Billy struggled with in his female body to be a welcome reality check for their own experience with incongruous gender and bodies. Non-trans people should find this study a stimulating, evocative read, one that pulls back the curtain just enough to expose the tantalizing mystery of a very American life.

Jamison "James" Green, a writer and gender diversity consultant, is president of San Francisco-based Female-To-Male International, Inc., a non-profit educational organization serving the interests of female-to-male transgendered people and men with female histories. He is also an honorary board member of IFGE, and the 1998 recipient of the Virginia Prince Award.

Male Femaling: A Grounded Theory Approach to Cross-Dressing and Sex-Changing

by Richard Ekins. Forward by Anselm

Reviewed by Jody Norton

"The Old Ways Die Hard": M-T-F Transgender Conceived As a Man Trying to Be a Woman Strauss. New York: Routledge,1997. 185 + xvi pp.

In Male Femaling: A Grounded Theory Approach to CrossDressing and Sex-Changing, British social psychologist Richard Ekins maps current practices of transgender in England. He identifies the three major modes of what he calls "male femaling" as body femaling, erotic femaling, and gender femaling. These involve the five phases of beginning femaling, fantasying femaling, doing femaling, constituting femaling, and consolidating femaling. In general, body femaling comprises what in the U.S. we typically call pre-op, post-op, or non-op transsexualism, and gender femaling to cross-dressing (drag as a social and/or aesthetic practice doesn't figure centrally in the book).

Ekins' work is scholarly and clearly organized. He is particularly acute in pointing out the conceptual limitations of medical discourse about transgender. Unfortunately, he is less critical of his own sociological division of knowledge about transgender into expert, member, and lay knowledges. In effect, the knowledges of Ekins and other social scientists become privileged in comparison to participant or lay knowledges. Within the trans community in the U.S., however, much of the most significant "expert" knowledge and theory is generated by members (Feinberg, Denny, Bornstein, Stryker, Stone, Wilchins, etc.), thus calling into question Ekins' implicit valorization of expert over member knowledges.

Male Femaling is full of useful references, both to general sociological theory and to transgender research. There are perhaps three main limitations to the book of which readers should be aware. First, Ekins declares that "male femalers" are men (as indeed, his term for m-t-f transgenders suggests.,

Male cross-dressers and sex-changers are genetic males who "female" in various ways, variously adopting what they take to be the thoughts, feelings, attitudes, behaviours, accoutrements and attributes of genetic females. (48)

By thus privileging anatomy over more complex genetic, hormonal, and psycho-social constructions of gender, Ekins is not writing about transgender as it has been embodied in many historical cultures (hura, xanith, mahu, berdache/two-spirit) at all. Similarly, many American m-t-f transgenders do not understand ourselves as fundamentally male. Nor do we experience our male self-concepts (if, indeed, we have ever possessed such things) as coming "under threat" (72) when we begin actively pursuing our gender journeys.

Second, Ekins sees the practice of male femaling as taking place in a "masked awareness context," in that it involves "the simultaneous display of core facets of identity with the hiding of others" (51). He goes on to detail sub-processes such as "displaying," "disclosing," "passing," "reading," etc. The effect of all this is to represent doing non-traditional gender as a kind of world-as-drag-show, in which we are all constantly trying to pass--except when we "display" our "true" sex. What about Transgender Nation, or Transexual Menace? What about those of us who are not trying to pass as anything, but simply following the evolution of our own identities interactively with others? Indeed, "Cross-dressing" and "sex-changing" are definitional categories that barely scratch the surface of the myriad forms gender has taken and is taking (Ekins himself, it should be noted, quotes Dallas Denny on the possibility of designer genitals.

Finally, if Ekins' book is a useful introduction to British white middle-class gender practices, it is impossible to tell how well his universal categories apply across racial and class lines. Do transgendered West Indian sex workers in London go through the same transitioning phases as accountants in Glasgow, or farm youths in Devonshire? It seems unlikely.

Biographies are a highlight here, and a key service of the book is to educate us about contemporary British transgender experience, whatever the limitations of Ekins' theoretical analysis may be.

On Therapy

DrFTM@aol.com

I am a clinical psychologist and a female birth assigned person who has lived as a male since age 20. I recently turned 39. In 1995, after returning from the first FTM conference of the Americas, I felt compelled to write a letter to the FTM International Newsletter after responding to Michael M. Hernandez's article concerning "Presentation for Law Conference" in the 1995 Crysalis publication Vol.2(2)23-26, which was distributed at the FTM Conference. In this article, Mr. Hernandez, an attorney, states "we must each walk the path of our own choice, whether it be straight, narrow or curvy, or uphill at a 90-degree angle. We can cry, laugh, and talk about our fears with at least one person, whether it be a friend, lover, or a member of our community, or, for those of us who are less fortunate, with a therapist, or in the modern age, by plugging into cyperspace."

This quote concerned me a great deal. It somewhat highlighted my experience at a southern California support group meeting. When I attended this group for the first time, in 1995, I was able to appreciate how much I had changed in 16 years-for the better and for the worse. My reason for attending the group was to find out current information about urinary reconstruction after phalloplasty, but I ended up finding out a whole lot more! I realized that my journey was slightly different than those attending. No one there had transitioned and then became a member of the established /mainstream health care community. In fact, most of the over twenty people there were just starting their transition. They asked me questions about things that I had actually forgotten had ever happened to me (e.g. the awkwardness of the initial hormonal changes on the body, life on hormones but before mastectomy, etc.), I began to realize that they had as little or less information than I had had over fifteen years ago. I felt their pain and realized that I had only wanted to believe that things must have changed since I started my transition. Obviously, this false belief allowed me to feel that there was no need to offer my help to the community.

Another compelling component of this group, was the manner in which I was treated when everyone initially believed I was "just a shrink" (i.e. not also an FTM), who was perhaps there to drum up some business. The animosity in folks' eyes was quite overwhelming. I have worked in many settings, but had not before felt that intensity of anger from a whole group. I begin to remember how I had been treated by the mental health communtiy as a young, androgynous person, and wondered if I, too, used to have that kind of anger in my eyes.

In the last few years of meeting and working with many FTM folks, I have sadly learned that things have not changed in the mental health field since I encountered problems with overcharging, ignorance, and incompetence over 20 years ago! The HBIGDA Standards of Care (SOC) guidelines state that an individual must have a three month relationship with a therapist (e.g. licensed clinical social worker, licensed nurse practitioner, marriage, family and child counselor, psychologist or psychiatrist) to meet the criteria to see a physician for a hormone evaluation. A six month relationship is required if one wishes to be evaluated by a surgeon. Another therapist must also concur in order for one to "gain access" to a surgeon. One of these latter individuals must be a "doctoral level behavioral scientist" (e.g. psychologist or psychiatrist).

This "access" issue is of concern to most people. My friend, Jake Hale, calls this a "medical regulation of technology". I concur. Most people who are at a point of wanting to begin hormones are hardly wanting a complete stranger to say "it's okay". The HBIGDA criteria are obviously there to help people from acting impulsively when there is uncertainty. I feel very uncomfortable knowing that this SOC agenda is the reason why a person is coming to see me. I admit, that when I wanted/needed "permission" from a shrink to do something that I had wanted to do since age 5, I would say what was ever necessary to achieve this goal. As a therapist, it is scary to know that individuals coming to you have a good reason to be less than candid. (i.e. they feel you will not b supportive). I also have concerns abo therapists who knowingly engage in th kind of relationship with clients and the charge them more than a standard fee refuse to bill insurance - stating that insu ance will not "cover TG issues" - even the client meets criteria for a mental heal diagnosis (e.g. depression, anxiety, etc.).

My approach is to make as certain possible that the individual is aware of th potential negative and irreversible side e fects of the intervention he or she is see ing. I feel it is important with any major transition, not just gender issues, to ha a support system. I thereby encourage an one who works with me to bring som one who may be/is supportive. I also quest that he or she tries to get involve in support/internet groups. Ironically, whe I transitioned individuals were told to avo contact with other TG individuals. I b lieve that others who are in a similar sit ation are often the best source of info mation and potential support. Look any newspaper and view the number groups for individuals with similar co cerns/difficulties.

I believe the primary role of a the pist for a TG individual is to be empath understanding and an advocate. This i life long transition in many aspects. I wo like to be available to people as they s out living rather than as an obstacle hoop through which to jump. Sadly, the is no formal training in gender identity any therapists of which I am aware. Ma people still tell me that they are pay their therapists and educating them at t same time. After a childhood and adole cence of going to money grubbing, h mophobic, opportunistic and incompete therapists, I found one at age 18, w told me "I don't have any training in ge der identity issues, but I imagine that th is a lot of pain, anxiety and distress as ciated with what you are going throug maybe I can help you with that". This m with whom I am still in contact, did exa that. I hope that each person reading will not give up hope that they can such a person.

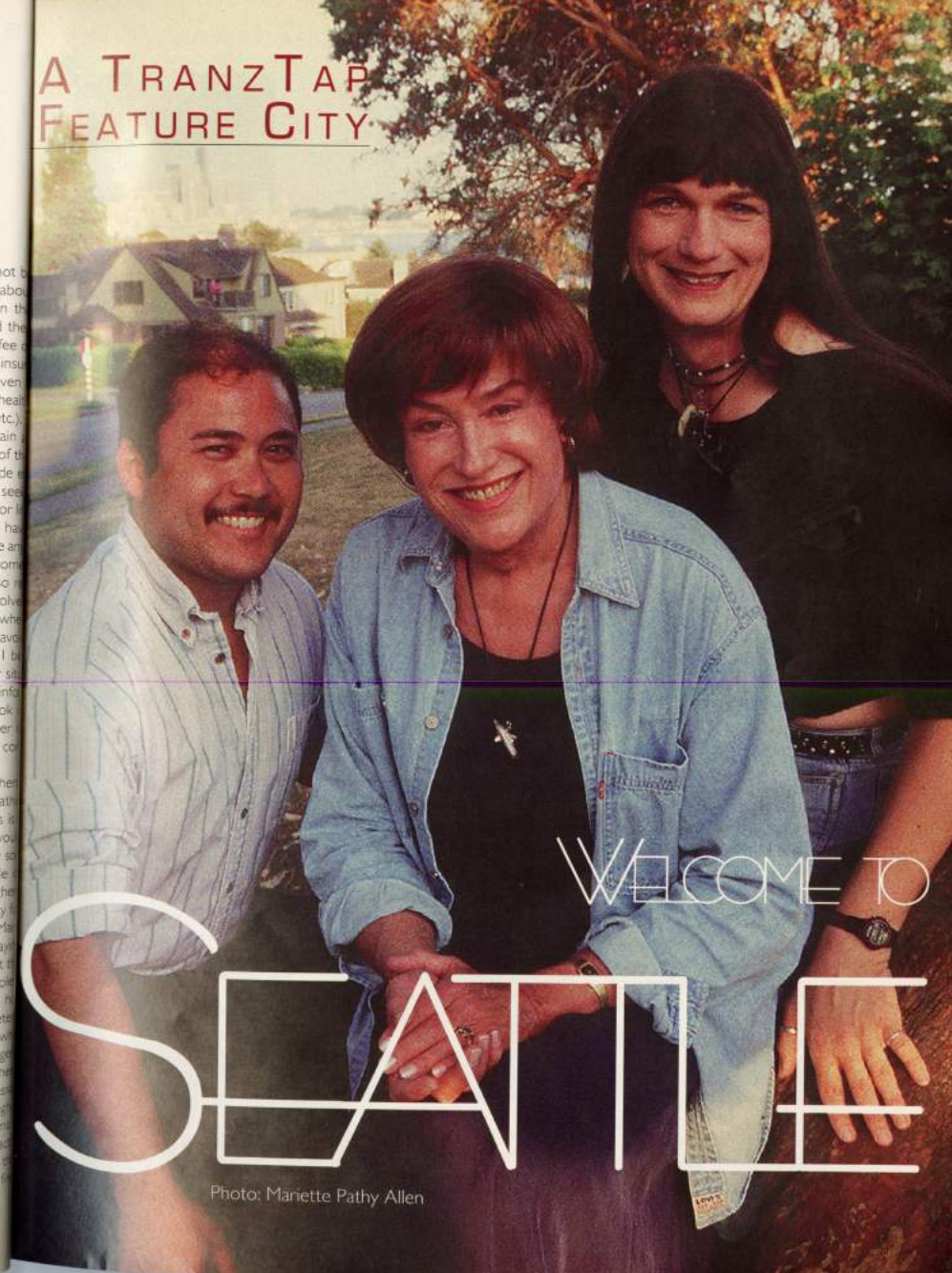


Photo: Mariette Pathy Allen

OK, you lucky traveler. Business brought you to Seattle, but you planned badly. No appointments tomorrow, so you're faced with a whole day with nothing to do. And you just happened [you foxxy thing] to pack a wardrobe full of stuff for your other, sweeter self.

Skirting Around Seattle

Judy Osborne

Broadway Market

You're in for a treat. I'm prejudiced, but Seattle is my favorite place to be transgendered. Here's some help planning your day. Be proud and courteous, friendly and happy, and you'll have a great time.

No car? No problem. The buses are free in downtown Seattle. The tour takes you out of the free-ride area only once, to another walkable area.

Want to go by car instead? No problem. Parking isn't too bad along the way, but watch out for the meter maids.

Pike Place Market

Be sure to get up early, and don't linger too long in front of the mirror. Dash to the ferry docks downtown and board a boat to Bremerton. The ferries are large and luxurious, and you can buy a decent breakfast aboard. As you leave the dock, check back to watch the sun rising over the Cascade mountains and downtown buildings. Then look ahead to see the intense morning sun reflecting off the snow-capped peaks of the Olympics. Once across Puget Sound, your boat will navigate a long, narrow channel where you almost can reach out and touch the evergreen-lined shores.

If you're not tonsorially-challenged, get right back on the same ferry and go back to Seattle. Marge King is the only reason to stay in Bremerton. If you need a wig and are up for a great experience, call ahead (360-377-7721) and grab a cab to her shop. She's been serving our community forever with warmth, humor, and a great sense of style.

Karen and Judy with new friends in a Pike Place Market Nightspot

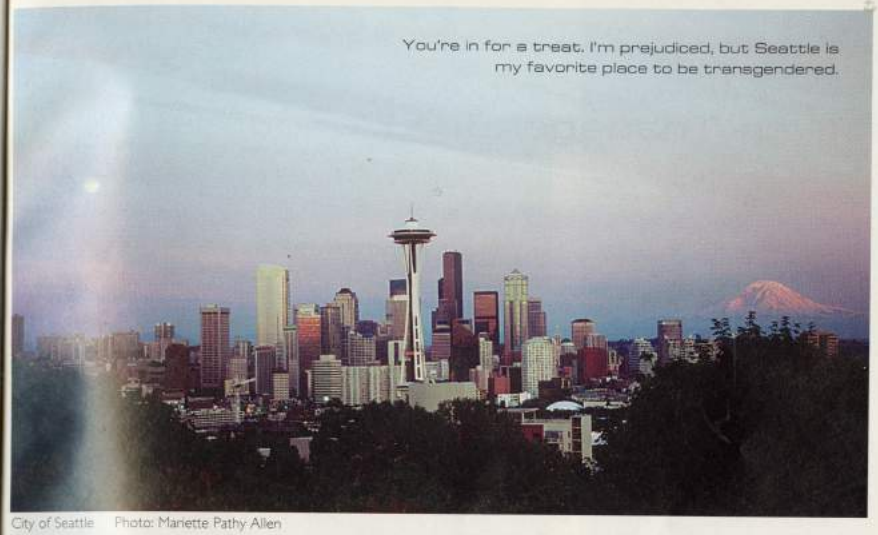
Landing back in Seattle when shops are opening, what's a lady to do? Go shopping! Lots of great shops are tucked away in unlikely places, but I like the big downtown department stores best. The original Nordstrom is a short (and free) bus ride from the docks. My joy is to browse through the racks looking for dresses by Maggy London and Carole Little on sale. Find a saleslady you like, ask her advice, and try on your selections to be sure they fit. If you're nice, she'll search out other cool things for you and toss them over the fitting room door. Leaving Nordstrom, explore Westlake Center, a vertical shopping center across Pine street. Then step across Fourth Avenue to my favorite store, The Bon Marche, and do it all again. When you're through, walk a few blocks toward the water to First Avenue and turn right, visiting the trendy boutiques and specialty shops until they run out. Be sure to stop and sip a latte along the way.

Hungry by now? You have choices. Pike Place Public Market is perched on a cliff just a short block toward the water. The huge bazaar was an original farmers' market early in the life of Seattle, but it fell into disrepair. About to become a glorified strip mall, the citizenry rallied to restore and preserve it's unique character. You won't find a McDonalds in the market during your visit, and it's not because the fast-food folks haven't tried. I like to grab a Kosher hot dog (across from the big news stand, corner of Pike) to munch on while wandering through the stalls checking out the earrings and crabs. If a hot dog won't satisfy your hunger, take the stairways down through the market to Western Avenue and walk left a short distance to the Wild Ginger. This unique restaurant serves an exquisite array of southeast Asian dishes in a modern mahogany atmosphere, and the experience is nothing short of miraculous.

Time to head for Capitol Hill, Seattle's different-strokes-for-different-folks district. If you like walking, stroll away from the water up Pike or Pine across the freeway, then begin checking out the fun and funky shops along either street. Keep track, because much of the nightlife is here too. If your feet are sore, find a bus traveling in your direction. A woman will flash you a knowing smile sometime during your travels. She's telling you she understands and thinks you look good. Be sure to smile back. Then, with a certain amount of reverence, place her unspoken communication in your treasure chest of fond memories.

Note when you cross Broadway but continue to 11th and East Pike where you can sip something cold at The Wild Rose, a nice lesbian hangout. Then backtrack half a block and walk down the steep, wildly-decorated stairway between two buildings to spend a few moments with Julia at Venus, a very fun 14-and-up consignment shop. Julia is a mother-earth kind of lesbian who instantly makes transpeople feel at home. She has clothes you can zip yourself into without turning blue, and the prices are right.

Pike Place Market



You're in for a treat. I'm prejudiced, but Seattle is my favorite place to be transgendered.

City of Seattle Photo: Mariette Pathy Allen

Returning to Broadway and turning right puts you at one end of Seattle's main street of alternative lifestyles. Wander along and sample the places that interest you — you're welcome anywhere. Quite a ways along you'll see the block-long Broadway Market on the left. Inside, buy a latte (you're in Seattle, remember?), pick up free copies of The Weekly and The Stranger, shell out a quarter for the Seattle Gay News, claim a table, and plan your evening. Go through The Weekly to check out the straight events in town. You should feel comfortable crossdressed at just about any of these, but if you prefer the alternative scene, The Stranger will list all the kinkier stuff going on. Finally, the back section of the Seattle Gay News offers a considerable listing of gay entertainment and a summary of straight events of interest to the members of alternative communities as well.

Seattle's transgender community doesn't hang out anywhere in particular because we feel free to go everywhere. You're almost always welcome as long as you choose places and events any other woman might attend alone and don't dress like a hooker. Bars and restaurants that see us often in large groups include Thumpers (gay, upscale, and good), Canterbury, The Sorrento Hotel lounge (elegant but not stuffy; dress as though you're out for a casual night on the town, which you are), Charlies, The Broadway, Bill's Pizza and (too far away to walk) Ed's Kort Haus Tavern (grungy) and The Yankee Diner. See Mardi Clarke's article to find exciting things to do after a long, late, leisurely dinner.

Downtown Seattle
Photo: Mariette Pathy Allen

The Wild Rose 1021 East Pike 206 324 9210

Wild Ginger 1400 Western 206 623 4450

Venus 1017 East Pike (downstairs) 206 322 5539

Thumpers 1500 East Madison 206 328 3800

Canterbury 534 15th East 206 322 3130

The Sorrento Hotel 900 Madison 206 622 6400

Ed's Kort Haus Tavern 6732 Greenwood Avenue North 206 782 3575

Yankee Diner 5300 24th NW 206 783 1964

Like all truthful transpeople, I was scared when I first "came out".

Seattle's Transgender Resources

Suzanne Adams

Our supporting organizations in Seattle made all the difference for me. When I first became involved, I attended support meetings at the Ingersoll Gender Center, a well known institution that supports crossdressers and transsexuals (both M to F and F to M). I was scared to pieces, as you might guess, but I evolved quickly into an active member and facilitator of the many groups that attend Ingersoll. Ingersoll introduced me to the Emerald City Social Club, and I got involved up to my bra there too.

The Seattle area is unusual in its diversity of racial and ethnic origins, its tradition of placing women in top level management positions, and its history of electing minority people and women to high political office. The city has been both a national and a local leader in advancing gay/lesbian political causes. Seattle has given considerable acceptance to the transgender community as it has grown and flourished. Beginning long ago with Ingersoll Gender Center founder Marsha Botzer and openly-transsexual activist/ political candidate Janice Van Cleve, Seattle has built a solid twenty-year history of transgender involvement in local and state politics. The area offers fertile ground for the development of transgender support organizations, and a number of strong and vital groups have formed.

Ingersoll support group assembling

The Ingersoll Gender Center holds weekly facilitated support-group meetings for transsexuals moving both ways, newly emerging crossdressers, transpeople dealing with generalized issues, transpeople facing more intense challenges (i.e., issues of mood, relationships and identity), plus a drop-in evening for specific assistance. The Center hosts frequent Sunday-afternoon social and informational events and arranges other social activities as well. The Center also reaches out to mental-health professionals with transgender information, resources and referrals; sponsors lectures and seminars regarding our community; and arranges for presentations about transgender issues to be given to interested groups. Call 206 329 6651 for additional information.

The Emerald City encourages transpeople to leave their closets and helps them reach their eventual place of comfort, enjoyment, and fulfillment. The club holds a private monthly social meeting in a lesbian, gay, bisexual, and transgender-supported church and arranges frequent social events out in the world, some in non-threatening environments for newcomers and others in very public situations. The Emerald City publishes a monthly newsletter, reaches out to the public to promote understanding of our community, and engages in political advocacy for transgender issues. Guests are welcome at Emerald City meetings but must be sponsored by a member. Call the hotline (425 827 9494) to make arrangements.

Queen City Cruise

Esprit happens in May of every year in the small town of Port Angeles, Washington, a cooperative effort between NWGA in Portland, The Cornbury Society in Vancouver, and the Emerald City in Seattle. Northwest transpeople have a chance to enjoy five or more days out of the world with friends, new acquaintances, and lots of interested townspeople.

A number of gay and lesbian organizations offer services to the transgender community as well. Foremost among these is the Seattle Counseling Service for Sexual Minorities maintains a full-time hot line using volunteer operators trained in transgender issues, and Lambert House counsels and supports gay, lesbian, bisexual and transgendered youth.

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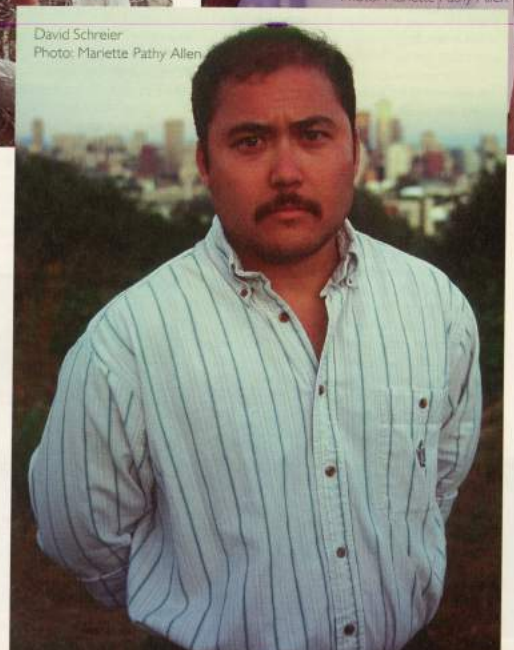
Elane Lerner Photo: Mariette Pathy Allen

Lissa Aoki
Photo: Mariette Pathy Allen



David Schreier
Photo: Mariette Pathy Allen

This Seattle atmosphere is certainly the reason I was able to assimilate so quickly into the TG community and adjust to my woman's role in public. Seattle turned out to be one of the best communities for transgendered individuals to transform from one gender to another, as well as a choice place for me to go into the public presenting myself in the gender of my choice. I have been actively involved in the transgender scene for about seven years after having endured forty mostly "closeted" years. Thanks to Seattle's wonderful support organizations, in that very short seven year period I have had the opportunity to come out of the closet and get involved with some world class organizations, serving currently on the Emerald City and Ingersoll boards, coordinating group facilitators at Ingersoll, and having just stepped down as the Emerald City president. That's the atmosphere of Seattle, and I love it.

Suzanne Adams

"Oh, girl, you can go anywhere in this town!" That's because this town is Seattle and anywhere is a transgendered axiom when it comes to the most oft asked question among trannies—are they accepting?

Seattle's Club Scene

Mardi Clark

The Wildrose

Well, are they? Ok, years of crawling around the under and overbelly of the Emerald City has impressed me with one thing - that anyone you even want to know thinks--and treats--us as the exotic and desirably cutting edge trendsters that we have come to be in post-modern culture.

Meaning? We get into the clubs here for free, ok? We go to the front of the line in places where Madonna haunts and Pearl Jam plays unannounced gigs at 10pm on a Thursday night. This is the place where a totally beautiful 20-something woman will approach a 40-something transvestite and tell her, wide-eyed, that she is the most beautiful woman she has seen that night. This is Seattle.

This piece is about nightlife. Every city has some, and the guidebooks the tourist people pass out aren't exactly geared to us and neither are a lot of cities period. But Seattle is not an insular, isolated interior city-make no mistake about that. It is cosmopolitan, international, connected-- a world-class city with significant populations of varied non-Western cultures where we are more of a visible fact of life historically than we ever were in the midwestern USA! This contributes to an attitude of more than toleration of "difference"--we actually embrace it here!

Let's go! First stop is ARO Space, sited on the gutted remains of a famous grunge rock venue, now an International-class live and techno music showcase matched nowhere this side of southern California. (I am NOT going to pretend this is LA--we are waaaay friendlier up here!) Importing guest DJs from Tokyo to Berlin, this is the place to meet the beautiful people and dance on the latest edge of music--House and Techno an expansion and popularization of the sounds electronica made possible. Laid out in a labyrinth-style, the club wanders around two levels, a multitude of doorways, lounge areas, two dancefloors, two bars and extensive balconied areas and white space aplenty-where the people are the decor! A vegetarian cafeteria with an extensive and moderately priced menu--cooked to perfection--completes a destination club. Oh, did I mention the three-act Vegas-class drag show on Wednesday nights? Go.

The Coffee Messiah

In Seattle, Capitol Hill is billed as the "gay" district. Good or not, depending on your point-of-view, the clubscene here is dwindling. The last woman-oriented danceclub in Seattle closed down this summer. A male-

The New Orleans

strip revue recently became an all ages mixed disco. The anchor club, Neighbours, has seen its reputation trans from "gay" to "mixed", seeing straight couple from the burbs braving its "discreet" alley entrance in exponentially increasing numbers. This is seen by some as driving the nails into the coffin of gay culture and by others as the reification of acceptance of differentness by mainstreamers. But I think it is wonderful because it is exposing steadily increasing numbers of the "norms" to something beyond their whitebread exist-

The Wild Ginger

ence--and finding understanding in the process.

Where Neighbours is playing the disco hits of the 80's for the bare-chested crowd with drag shows Tuesdays through Thursdays, nowhere currently gets the tranny clientele like 21st Century Foxes on the edge of the Hill. In a newly remodeled location next door to friendly Hamburger Mary's on the corner of Denny and Olive way, this club is the Friday

Hamburger Mary's

night destination of many of Seattle's tran population. In short, it is the Queen Mary o Seattle. Quality varies widely, some night being Vegas quality and others being---we somewhat less. Featuring everything fro flame-eating belly dancers to torch singer this is a friendly place where the most skittis kitty will feel comfy and relaxed. Want place to go the first time? You'll only ge friendly smiles here! After-hours check ou the coffeeshop "Coffee Messiah" just up th street for a taste of a Seattle specialty, shoo drag.

Rounding out the Seattle nightlife an hundred year-old cabarets now the haunt o the dark couture of the Goth crowd wi their special brand of haunting music. 'Be yond the Edge Café' is an eclectic combina tion, so common in Seattle, of a bookstor coffeeshop with a twist ... for in the book store is a pagan altar, a rack of ceremon robes, shelves filled with essential oils an herbs, and facinating paraphenalia of the a cient spiritual arts. The café is also the stage

21st Century Foxes

area for the dungeons lying beneath, whe the arts of the S&M crowd are practiced pub licly Saturday nights! Not your ordinary jo joint ... but not to fear, the folks at the 'Edge are the friendliest sort, the food scratchmade and you certainly won't fi more entertaining reading material to en with your scone and coffee.

ARO space, 925 E. Pike	206 860 73
Neighbours, 1509 Broadway (enter through alley on Pike)	206 324 53
21st Century Foxes,	Denny and Ol
Hamburger Mary's, 206 324 8112	Olive and Den
Coffee Messiah, 206 860 7377	1554 East Olive Wa
New Orleans Cafe, 206 622 2563	114 1st sou
Beyond the Edge Cafe, 206 325 6829	703 Pi

By intention or accident, gathered by design, or formed by fate, the faces at Esprit 98 were among the most beautiful I can imagine. I do not speak of the makeup, the dresses, or the carefully trained poise. I am talking about their eyes.

reflections

Matthew S. Carlos

Esprit '98 was a watershed conference - the first time to any participant's knowledge that MtFs and FtMs not merely attended seminars at the same location, but attended each others' seminars, and cavorted on the town. After years of feeling welcomed, yet somehow isolated at primarily women's conferences, the men rejoiced at the visceral camaraderie.

In addition, an unexpectedly high number of SOs were present by Friday evening. Despite a packed conference schedule Esprit organisers committed the time to design an impromptu seminar for these remarkably supportive women. A small group of consultants worked late into the night strategizing about the manner of assistance which could be provided under such short notice. The commonsense consensus centred upon the reality that it is admittedly draining for SOs to support their partners, and much like the closeted trans person, SOs commonly feel they are alone in their experience. In the end, the simple opportunity to become aquainted with others who share their experiences was met with gratitude and happiness.

Downtown Seattle

and when chanced meeting in the street. We accept that there exist people who experience the world much as we do- and we know these people personally.

Two weeks ago I placed myself firmly in these ranks of the socially jaded. I lived in New York, a city where I was confronted with over 6 million faces a day- the sheer presence of which dulled my senses, and I grew unimpressed with diversity - hadn't I seen it all? I lived with the gorgeous, the punk, and the corporate. It took flying more than 3500 miles west to encounter the beautiful.

The following thoughts are reflections upon this wonderful upwelling of personal integrity and compassion.

Community is a powerful force. Interactions with other people (both those who share our concerns, and those who ridicule us) pervasively shape our vision of the world, and how we interact in it. For people who are 'out' to themselves and live as such day and night, fellowship is easily presumed. We interact with other people more or less like ourselves regularly - in debates online, at rallies,

By intention or accident, gathered by design, or formed by fate, the faces at Esprit 98 were among the most beautiful I can imagine. I do not speak of the makeup, the dresses, or the carefully trained poise. I am talking about their eyes.

These people possess such a depth and brilliance of character that it shone through even those tiny portals of human vision. Compassion radiated. This is something neither ink and paper, nor computers flitting messages across vast electric spaces can replace. It is among the most essential human experiences.

That is why no matter what I say about the gravity of the sessions, the stature of guests whose presence brought dignity and humour to the occasions, or the seminal importance of FtMs and MtFs joining in the same activities and seminars you will never quite know its significance. You need to have seen those eyes.

I am aware that I forgo these kind of intense interpersonal experiences each day. My sight is set too often at the tasks near at hand: the phone call I am expected to return, the articles to write or edit, the ideology of the person with whom I argue. I forget to look into the eyes of those wonderful people with whom I work and live.

Perhaps both the jaded and the newcomer to our transgender community share this frailty of acute short-sightedness. Newcomers are all too often unaware that there exist other people with whom they may connect, that these people too often live isolated lives (though perhaps within a swarm of others), and that it takes each of us to help lead each other out of our myopic cavern.

It is easy to say conferences such as Esprit are important for the new members of our community. They are excited by the workshops, nervous and delighted by the masquerade. But, when we carry on just for them, we become patrons in the worst sense. We fail to recognise that these events are important because of their sheer humanity. That is something with which none of us jaded folk are too familiar.

Jamie Stowell, Lissa Aoki

David Schreier, Mardi Clark

Elaine Lerner

American Gothic

David Schreier, Mardi Clark

And when you look into the story of Julia Morgan's last act deep enough, you may discover that you are seeing something disturbing: a mirror into our own selves.

Juila Morgan: The Looking Glass

Gwen Smith

On June 10th, 1998, a preoperative transsexual, Julia Morgan, killed her gender therapist, the turned the gun on herself. You may have heard this tale, or at least heard the straight press shouting something about a "man dressed as a woman" killing a woman.

Yet, there is more to this story than you'll find from the Associated Press or other media outlets. And when you look into the story of Julia Morgan's last act deep enough, you may discover that you are seeing something disturbing: a mirror into our own selves.

To those who knew her in San Diego transgender circles, she wasn't abnormal, nor some deranged gun-nut. There weren't any major clues that she would someday take her life, and the life of her gender therapist, an intern named Rita Powers.

"She had been abandoned early on and had never known unconditional love," states a friend of hers, named Evelyn. "She was very independent and had come so far by herself. She had done 2 years of college getting 3.9 and had a good job, a car paid for, her own apartment, and was so proud of her getting somewhere with no help."

She also had plenty of future plans. She planned on getting her surgery referral letters, first from Rita Powers, then a second from another well-known therapist in the Midwest. She had planned her surgery, to eventually quit the job she was at, finish college, and really "be someone." How many of us have planned similar paths?

Gwen Smith

Stress grew in her life as well. While she was full time in most places, she still worked at the hospital as a male, barely disguising her ever-feminizing figure under women's jeans and t-shirts, leading to more and more strangers "mistaking" her for female. She feared losing her job over these issues, and had seemingly planned to leave the job after surgery. She was receiving some negativity from her therapist, probably over her "double life" at work, and had been given indications that her first surgery letter wasn't coming. Although I have been fortunate to not be in these same situations, I — like most preoperative transsexuals — have had a higher-than-desired level of stress in my life, and much has to do with transition.

Although those around her tried to talk her into changing jobs and counselors, she felt it would cost her more, in both time and money, than she was willing to spend. Her life-long independence also got in her way, as she seemed unable to let others help her live her life.

I can only speculate that Julia began to see her hope-filled plans fraying at the edges, and she began to plan her own demise. After her June 10th therapy session, according to a source in the building, Rita followed Julia out of the office and tried to coax her back in to the office to talk. Perhaps, for the independent Julia, this was a final straw: her plans for surgery in jeopardy, and suicide being the only other course of action that she saw, she violently took the life of the one person that was standing in the way of both options.

My situation and Julia's share many things in common. I am hoping for my first and second surgery referral letters soon, and have reserved a surgery date in spite of some strong financial difficulties that could change these plans. I've always been a strong, independent person — and yes, one that some might even call headstrong at times. Yes, I have even contemplated suicide as a way out, at times.

How much different am I from Julia, really? How different are we all? Many in the community, without knowing much about the circumstances of the incident, have been quick to vilify Julia, and try distancing themselves from being seen as being in any way similar to her. Yet, with only a little speculation — if I didn't feel I had other options, if I was living with the additional stresses that Julia was, and so on — I cannot honestly say if I would react all that differently than she did. And that is a frightening mirror to gaze into.

Gwendolyn Ann Smith is the Area Coordinator of the Transgender Community Forum on America Online, as well as co-host of their Sunday Gender Chat. She also serves on the Board of AEGIS, and works as an online consultant and web designer. This article was originally published in the Transgender Community Forum on America Online. http://members.aol.com/gwensmith

Alcohol and drug abuse are known to have a very negative affect on general good health. In this issue, as we focus our attention on health and well-being in the transgender community, we are pleased to bring you the very personal story of Holly, a gay transgender woman who has turned her life around and is very active in many transgender clubs and activities in New England. We applaud her courage and hard-won insight.

Transgendah, Sobah 'n Free

Mykael Hawley

Before we delve into the discussion of recovery from addictions, please tell us how are things for you today? How do you identify on the gender/sexuality spectrum?

I'm Holly R. and I live full time as a woman. My recovery is fine and it's the only way for me to live.

Do you consider yourself fully recovered from addiction?

I'll never be fully recovered from addiction. I consider myself "recovering" and I'll be that way 'til the day I die. If I believe I'm fully recovered, at some time I may think that it'll be possible for me to pick up a drink, or drug again. So it's basically a day at a time. I practice constant vigilance and rigorous honesty about my addictions and alcoholism.

How do you describe your physical, spiritual and mental health today?

[Laughter] My physical health is not so good right now and it's because of, I believe, my abuse of alcohol and drugs. My mental health is good, I do what I have to do today. I know who I am today, and that makes life a lot easier. I have peace of mind, and serenity on a regular basis.

I was a spiritually bankrupt person once in my life. Today I believe in God, I believe that God loves me, that God made me the way I was. God doesn't make any mistakes. God lives through me, and other people. I believe today my spirituality is probably one of my stronger points. Spirituality also means the way you treat other people. If you feel good about yourself, you treat other people in a good way. I try to help other people, especially in this community, if I can, especially if they have a drug and alcohol problem.

I am in a twelve-step program that has another way of looking at "mental, physical and spiritual" The mental obsession happens before you pick up a drink or a drug. A lot of that can be attributed to not living the right life for me, like keeping secrets. Deciding to dwell on the fact that maybe a drink or a drug would help the situation, is the mental obsession that leads up to the actual picking up of that drink or drug. Then the physical compulsion takes over, where you may think you can get away with one bag, or one drink. Once I put that in me, I can't stop at one, until I either end up in detox, or the hospital, or back in prison, where'd I'd been many times before.

Illustration: Mykael Hawley

When I finally went to get my hormones, I had come to terms with who I was and where I wanted to go with my life, being female. I went for the next step because I had had the electrolysis done, and I was now sober, I made the decision that I was gonna go on hormones. When I got to the doctor, they did the regular physical for hormones, one of them is the liver test because hormones affect your liver more so than other drugs. That's why you're not supposed to drink when you're taking hormones, or drink very moderately, which I don't know if people hear from their doctors or not. Booze and hormones don't really mix.

Well, I found out that I had a chronic liver disease and right there a decision was made for me. It was kind of a blow, it was like I had spent my whole life working up to this moment, you know, the electrolysis is done, what next? Where do I wanna go with this now? I was sober, and clean, and they were true feelings, and I decided I wanted to go on the hormones, and then maybe eventually the surgery. But I was stopped dead in my tracks. It made a whole different lifestyle change for me with diet, and for me to even take a drink now would be death. The hormones, my doctor said, because of the shape my liver was in, would kill me in six to eight months.

"I was a runaway. I used to hang around outside the gay bars. The older men would pick me up to 'work' on the corner, and the money that I would make was to buy the booze and the drugs."

I still want to live full time as a woman and I've been able to do that., and there's acceptance. I'm actually looking into seeing if you can get surgery without hormones. I've raised the question with a couple well-known transgender health people, and it has never been asked because it's like the last step, and the hormones were before that. So we'll see.

It seems that self-abusive behavior is most commonly expressed in addictions, where drinking or drugging can look like a good way out of pain. How do you view this phenomenon in the transgender community in general, do you think that there is a higher incidence of addiction there?

Definitely, alcoholism and drug addiction [is more common] in the transgender community and in the gay community. 'Cause I identify myself sometimes as gay, I thought I was gay at one time in my life. I know I'm transgendered today, and so I've seen a lot of it. If society tells you that you're doing something wrong, the way you live your life, the guilt can start to eat you up inside. You slip into that secrecy and you know, you're just not feeling right, so you drink and you drink and you drink, and you drug and you drug and you drug, looking to feel good, just to get a good feeling, we used to call it "gettin' a buzz on." Eventually it goes away, because you just drink so much and drug so much, that then that becomes the problem. It runs high in other minority communities for the same reason. Touching on what I said earlier, I used to think that God made a mistake, when God made me, so what the hell was the use of me living? It was death on the installment plan, basically. You know, the secrecy and the hiding, you just gotta drink to try and find the peace of mind, 'til it becomes a problem.

Historically, in the gay community it seemed like the only place you could go for safe haven was a local bar, where alcohol and other drugs became synonymous with coming out. Ironically, drinking and drugging allowed many of us the courage to express our true identities, and when they become addictive, they destroy our self-worth. Has the bar scene played an important part in your coming out?

When I first experienced being gay, because that's what I felt before I thought I was transgendered, I was actually too young to go in the gay bars, I was a runaway. I used to hang around outside the gay bars. The older men would pick me up to 'work' on the corner, and the money that I would make was to buy the booze and the drugs. Then when I was old enough, or looked old enough, it was the only place where I could be who I was, even though back then I wasn't even sure. It took me a long time, like it does everybody else to accept this totally. I see today, younger and younger, and they've already made up their minds, and that's a wonderful thing, because they don't have to go through the turmoil and confusion, and the alcoholism and drug addiction that a lot of us did because of the fact that things are more open today, and a little easier, you know, to be transgendered.

When I found Jaques and Playland which are called "transvestite" bars, I was totally at home. Whenever I was out of jail or wasn't living on the street, I would live the double life again and that would be my haven to express myself. So I'd run to Jaques to get drunk and get high, and be Holly. Yeah, then it played a very important part. Today it doesn't play an important part, because I found out there were other things to do. Yeah, in the old days, there wasn't anything else to do, besides going to a transvestite bar to be who you wanna be. Even after I got sober, in 1979, I stayed away for a while, but I did hang around the bars for about ten years without drinking, because it was the only place for me to be until I found the other organizations, like Tiffany Club and IFGE. Today I find that if I examine my motive for going there [it's okay], and it's certainly not a steady diet, probably four or fi times a year. My motive is always right, maybe see some old acquaintances th work there, that are also in twelve-ste programs. We used to drink and dru together, and now we're clean and sob together, and I still like to see those peop Also, I like to dance, and that's where y dance. My motive for going is to danc I'm still allowed to have a good time life, and it has nothing to do with drinkin That's where being on good spiritu grounds comes in, 'cause I know what I doing and I know why I'm there. I'm n there to flirt with a drink or with the peop I know there that still do drugs.

My outlet for my energy is poli cal now. I believe that you have to r place the alcohol and drugs with som thing, and I do that today with the twel step program, but I also do that with a tivism in the community, with helping oth transgendered people that are coming o and having trouble, or having trouble w drugs and alcohol.

You said you had gotten sober for a tim and then started drinking again. Now you' recovering. What methods do you use come back and to stay sober this time?

The best way to put it is ho esty with myself. The double life had end. There had to just be one, which ca out to be Holly, all the time. I was luck had another opportunity to live, but thin had to be different. For me it was to honesty and acceptance, and knowing th God loved me. I was out in the comm nity, and I was out in gay bars, but I was out to my family, or on the job, I was out at twelve step meetings. Ther straight meetings, and gay meetings a now we have transgendered meetings.

I'm out now, I'm honest, and ju myself at meetings. This is what I had t do, because I wanted to live and I wante to be happy. I came out to the direct of the treatment program I was in wh had a lot of history with, and it just we from there. Being an open-minded, liv

"If you try and stand up there as a transgendered person, and you're drunk, or you're high on drugs, you have no validity whatsoever. And for us, to be a realist, we seem to have to go that extra mile to get people to listen."

and-let-live person that he was, he said, "You're right, you have to change these things. Everyone knows you can stay sober for another eleven years, but do you want the same sobriety you had before?" I said, "No, I need that peace of mind." So, the plan was set in motion. I came out in the straight world and I came out everywhere. That gave me a freedom that I never knew before. I just have to live my life for me today, and be who I'm being, and that clenched-fist feeling, that guilt and shame, is gone. I just have to be me.

As far as being clean and sober today, it allows the people around me to benefit, because I'm not an angry person any more. I'm not hiding things, I'm not living these lies and secrets. I'm available to the transgender community in many different ways. I'm available to other sick and suffering alcoholics and addicts in the transgender community, and there are quite a few. Unfortunately, a lot of them don't seem to get it right now. One of the things I found out was that we have to make a lot of decisions being transgendered people, major decisions in our lives and I see too many girls and guys in this community making major decisions about their bodies and relationships under the influence. I do believe, wholeheartedly, one hundred percent, you cannot make these decisions under the influence because it will come back to haunt you one way or another.

Will you share some of the warning signs that someone might be having a problem with addictions?

I work in the field [of addiction recovery] so I do run counseling groups. The first warning sign would be drinking when you don't want to drink, drugging when you don't want to drug . If it's affecting your job, or your family, or if you find that you have to be under the influence to express your identity, MTF or FTM, then I believe you have a problem. If people around you are starting to point the finger, saying you better clean up your act, and I'm not talking about transgender stuff, I'm talking about the drinking and the drugging, maybe you should listen to them. The keyword is obsession.. If you seem to have to do everything drunk or high, especially being transgender. I see it all the time, it's a false sense of courage in this community and in the gay community.

In your vision of the perfect world, what do you see for the transgender community, if we were just able to freely be who we are?

I think it would be what the gay community has been striving for and they have partially gotten, their 'bill of rights' and all that. Just to be another group within society that had the same rights and freedoms and like it didn't matter that you were transgendered, going for a job, or housing, or adopting a child. Maybe people wouldn't have to abuse substances and their own bodies. The peace and the honesty and the courage comes within ourselves, and it can't be false, with drugs and alcohol.

I have dreams and I have hopes for our community, but I'm a realist. I've been around the block too many times, been in situations that. Getting back to spitiruality, another way of describing the difference between religion and spirituality is that religious people are always trying to stay out of hell, and spiritual people like myself are people that have already been to hell, and back. If you're waiting for the rest of the world to give you their blessing and condone your lifestyle, you'll probably be dead and gone before you got it. So you better take care of yourself. You have to be who you wanna be, 'cause there's always going to be someone around the corner ready to tear you down. I hear all the complaining about the way other people treat us, saying, "If you had the problems I had you'd drink and drug, too" Well, I had the problems you had because I'm transgendered, and I don't drink and drug any more.

We have a saying, "When you're drinking and drugging, even when you're right, you're wrong." I believe that. If you try and stand up there as a transgendered person, and you're drunk, or you're high on drugs, you have no validity whatsoever. And for us, to be a realist, we seem to have to go that extra mile to get people to listen. That's that. Love yourself!

Where can someone go if they believe that they are having trouble with drugs and alcohol?

There are alcohol and drug hotlines in every phone book. They'll direct you to where you can get help. In the Boston area, we have a transgendered meeting. If you need treatment, get treatment. Help is everywhere nowadays. The twelve step program I belong to is everywhere, you can find a recovery group every night. And it's free, it's just alcoholics and addicts trying to help each other and there are plenty of gay meetings. That's where I had to go to be comfortable before I started the transgender meeting.

There's no excuses any more. If you're transgender and you're having trouble with alcohol and drugs, or even think you're having trouble with them, and you're trying to make all these decisions as to your transgenderism, take thirty days off from the booze and the drugs, take sixty days, take ninety, and then take a look at your life, and take a look at being transgendered, so that you're doing it with a clear head, to see what kind of moves you wanna make in what direction, and if that is really what you want. If you don't have a problem with drinking and drugging, then it won't be a problem to stop for a while. But if you find yourself drinking and drugging after you said you weren't going to for X amount of time, then maybe you better take a good hard look at the booze and the drugs before you take a look at anything else.

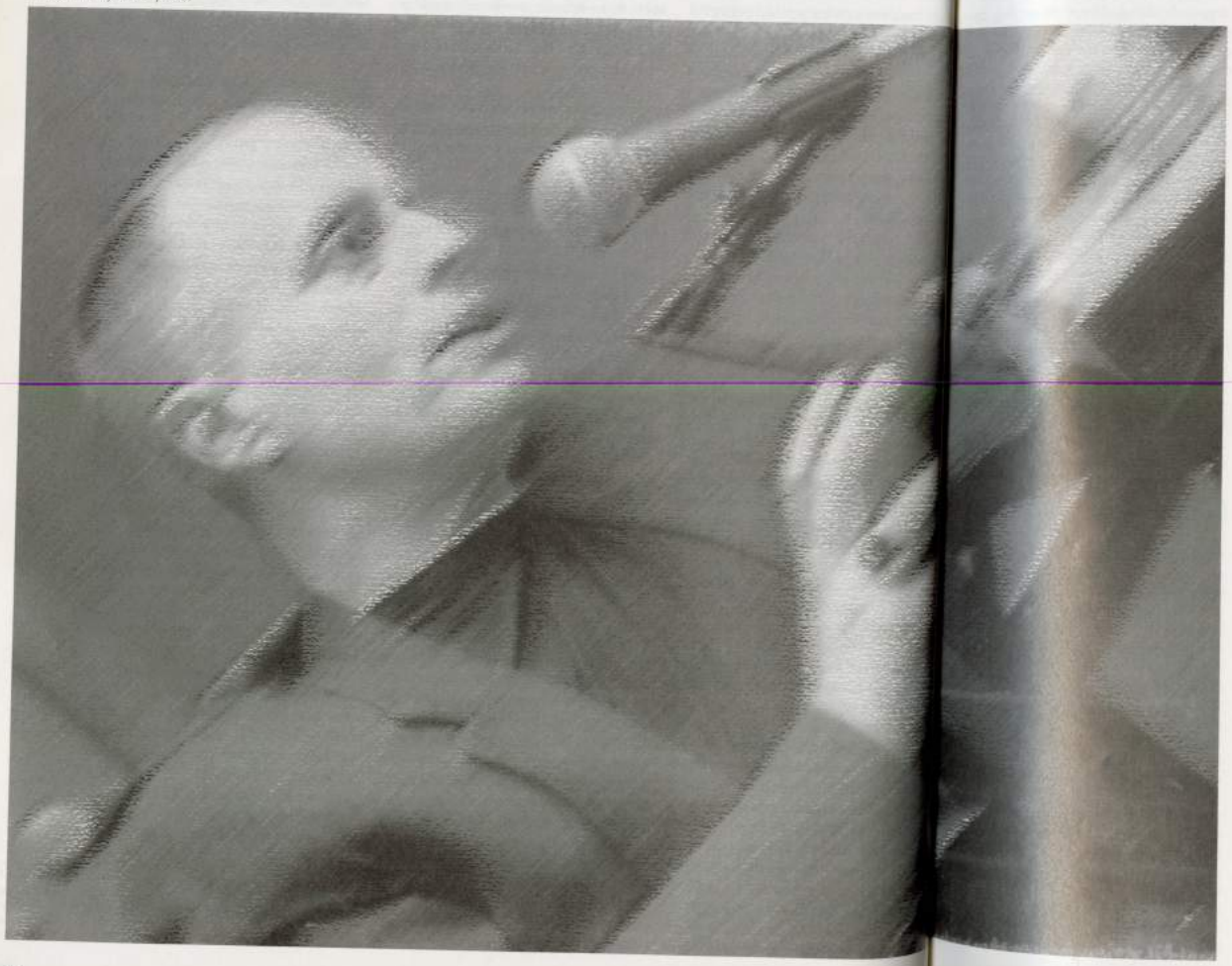
To start an AA group in your community, you can begin by calling Central Services of Alcoholics Anonymous. The number is located in your local phone book. From there they can tell you what you need to. It only takes two drunks to have a meeting.

I would like to thank Leslie Feinberg for this special Transgender Tapestry sneak preview of Trans Liberation, beyond pink or blue. This is Leslie's fabulous new book to be released this fall. Sit back, relax, remove your shoes and get ready to be blasted with a high intentisity volt of reality.
web site: www.transgenderwarrior.org

I can' afford to get sick.

Leslie Feinberg

Photo: Marilyn Humphries



Ironically, the morning I arrived at the Boston Convention Center to speak to the 2nd Transgender Health Conference, I felt sick as a dog. I climbed the steps to the stage, I wasn't sure I'd be able to stand and speak. From the podium, I could see about 350 people, filling the auditorium. I knew some worked at AIDS service centers; others were health care providers. Some were gay, lesbian, and bi others were heterosexuals a few were trans. Some were assigned by their agencies to attend, others came on their own accord.

I felt so ill the room seemed to spin. Yet if I stepped down from this podium, where would I go to seek health care? I decided to attempt to speak, and if I couldn't continue, I'd ask for help from the audience.

Photo: Marilyn Humphries

I'm very lucky to be alive today and able to speak to you about the health care crisis for trans people. I hovered near death all last year-unable to secure a diagnosis, tests, or a cure. Two obstacles blocked my path like boulders: bigotry and poverty. Both are deadly roadblocks in an economic system that organizes health care as a profit-driven industry.

When my fever first spiked, I did not have a doctor to call. As a transgender adult, I had only sought treatment in life-and-death situations. Moments when I was weakened and scared because of illness were times I least relished a stranger examining my body: I felt vulnerable to potential hostility.

I remembered the resident who, while examining me for strep throat, suddenly shoved his hand down my pants, shouting, "You're a freak!"

I remembered the doctor who told me in a quiet voice that the devil - not Jesus - had encouraged me to choose the path I've walked in life.

I remembered every moment of humiliation I'd ever experienced at the hands of health care providers. That's why I always made up a phony nom de guerre and gave bogus ID to emergency room staff. Get out with a quick medical evaluation, a prescription and my dignity- that was always my aim.

Of course that meant I'd never had any continuity of care from a primary physician who I could trust to treat my body with caring and respect. Instead I'd had to grapple with the fear that the malice or contempt of the doctor or nurse would result in poor or malicious mistreatment. Unfortunately, this is not an individual crisis. Throughout the United States, masculine females and feminine males, cross-dressers, transsexuals and intersexuals are home alone dealing with pain, fevers, the trauma of gang rape and beatings, and other emergencies, hoping the symptoms will go away so they don't have to reveal themselves to a venomously hostile doctor or nurse.

In 1995 my symptoms did not go away. I was incubating a deadly bacterial heart infection, and as a result, I developed acute cytomegalovirus and other diseases.

Like tens of millions of documented workers in this country, and uncounted millions of undocumented workers, I had no health insurance. Paying the rent and buying food has always been a struggle for me. As a visibly transgendered person I have always had low-wage jobs, if any. I had no savings or pension fund to dip into. And in fact, no working person can afford a catastrophic illness, even if they save a small nest egg.

So with a raging fever I made my way on the subway, through a sleet storm, to a clinic that has a sliding payment scale. The waiting area was standing room only. Young mothers held a crying infant in one arm and clutched a restless toddler's hand with another. Elderly people sat alone; they leaned their heads back against the wall, or they doubled over coughing. The staff was sometimes rude to us. But they were just as abrupt with each other. Five hours later as I still sat waiting to be seen I had a better sense of how overworked they were.

In fact, the staff was so overburdened that the clinic was nearly dysfunctional. The results of my blood test were misplaced. Had they not been lost, I could have been cured after eight weeks of intravenous treatment. This was just the first of the tragedy of errors and hurdles to health care that resulted in a year of grave illness, needless intravenous medications, discrimination, abuse, powerlessness, and rage.

You see, I could be like a transgender Scheherazade. I could tell you horror stories about how I and other trans people have been treated by the health care system from now to my last breath and there'd still be more outrages to relate.

You might feel such seething rage at health care workers that you would stand up with us as trans people against them. But that's not my goal. I want you to be angry about the abuses we have suffered. I want you to help us create zero tolerance for gender-phobia and trans-phobia in the health care industry. But I believe that pitting patients against health care staff only exacerbates the problem. The only way we can begin to create change in the care of trans people is to open up dialogue with health care workers.

But there are obstacles that prevent such a discussion from taking place. Bigotry is pandemic in this society, so the education of health care workers has to be part of our larger struggle to build alliances between everyone who suffers from discrimination and prejudice.

The owners and CEOs of the lucrative health care industry try to block large-scale dialogue from developing between staff and patients, as well. For example, I can't name the doctor who told me my fever was a result of my being "a very troubled person." I can't name the hospital in which I awoke at night to find staff gawking at me, laughing and referring to me as "it." I can't name the staff who referred to me as a Martian. If I did, the hospital administrators, on behalf of the owners, could sue me. Is this litigation threat meant to protect hospital workers? No, the threats of libel suits are designed to protect the hospital corporations from financial damages.

We as trans people have no interest in hurting health care workers. We have a stake in building camaradene between us. We can offer important feedback on how the administration of health care is structured in ways that create a schism between trans patients and health care workers. For example, the hospital into which I was admitted mandated that patients be placed in wards based on birth biology. That meant that I was placed on a female ward, where my masculinity created an immediate furor. This same hospital places male-to-female transsexual women who have completed sex-reassignment surgery on male wards. In which ward will intersexual people fit?

Some might argue that this is a division based on nature. I heard similar arguments used to defend racial segregation in health care services when I was a child. Racial segregation wasn't decreed by nature; it was rooted in racism. Trans oppression is not identical to racist oppression. But prejudice and hatred nearly killed me because I didn't fit into the rigid female or male ward system.

Wouldn't it make sense to create wards based on the type of injury or disease and the degree of care required? Many hospitals place females and males in separate rooms within mixed wards without dire consequence. In such a situation, the patient's gender expression or sex creates much less of a stir. And we have a right to demand that health care institutions provide mandatory sensitivity classes in which representatives from diverse trans communities can have an opportunity to speak to the staff.

Some nurses and physician's assistants and doctors will hear us and quickly understand that trans people deserve to be treated with respect. But I say to those who hold opinions about transgender and intersexuality and transsexuality that they're not willing to let go of: If you feel you can't treat us compassionately then do us both a favor- remove yourself from the situation. Let us work with someone on the staff who is sensitive to our humanity.

Even well intentioned health care providers can be hampered in their approach to trans patients based on what they've been taught is natural. A very caring nurse recently told me she wished trans people would inform her of that fact right away. If she finds out later, she feels duped. And she believes it's important for their care that she knows what their birth biology is.

To be blunt, it's really not her business. Each trans patient must have the fundamental right to privacy. The question of patient self-revelation can't be seen solely through a clinical lens. There are larger social issues. Maybe you feel you would treat this patient the same way once they came out to you. But when you put it in their chart, or mention it to the next staff member, the trans patient may be mistreated.

Underlying the anger or embarrassment of health care workers who feel "tricked" by a trans patient is the feeling that "I thought you were one sex, but you're really another. " You're really another. What does that mean? That trans people are pretending to be something that they're not?

This view is based on biological determinism - a weapon used for centuries to justify the oppression of women. Biological determinism only regards the sex we are assigned at birth as authentic. All of our lives and our identities are valid and real. But if we don't come out to health care personnel, it's not because we are duplicitous. It's because we are oppressed.

Winning more sensitive care for trans people is not enough to save our lives. Not if we can't afford to see a doctor or go to a hospital. The fight against bigotry must go hand in hand with the battle to make health care affordable. And in this fight, trans people do not stand alone.

Today we are witnessing the final stages of the transfer of health care to an industry run solely to make profits. The changes in health care parallel those now occurring in all large businesses and financial institutions. Smaller hospitals and health

Photo: Marilyn Humphries

care facilities are consolidating into large-scale corporations. Hospitals are closing their doors in communities that desperately need them because the facilities are deemed unprofitable. Public health centers are being privatized. Profits are being maximized by downsizing the number of workers and speeding up those still employed.

Patients' lives are held hostage to the greed of the pharmaceutical giants that patent drugs used to treat life-threatening diseases. When I contracted acute cytomegalovirus during a catastrophic illness last year, the cost for one month's medication was out of reach for me: $13,000. With government deregulation, private insurance companies pick and choose those they feel are healthy, and reject disabled, ill, and elderly people.

Medical science can achieve microsurgical limb transplants, gene manipulation and splicing. In this epoch of rapidly expanding medical knowledge, why is a treatable disease like tuberculosis again on the rise amongst the poor in this country? Why are more and more people being shunted into HMOs where treatment cost is the bottom line? Why are Medicaid and Medicare being whittled away instead of expanded?

Because the productive growth under capitalism isn't designed to meet human needs. Each hospital, each insurance carrier, is only concerned with its own bottom line.

How can we wage a political battle to expand access to affordable, adequate, and sensitive health care? By fusing the power of the poorest and most oppressed communities, people with AIDS and their service providers, elders, the lesbian, gay, bi, and trans movements, civil rights organizations, the women's movement, and labor - employed and unemployed.

Together we can demand that the government channel the necessary funds to meet public health emergencies like AIDS and breast cancer. And that welfare, Medicaid, and Medicare assistance be restored and expanded to all who need it. We can demand that every patient be treated with respect, and that every vestige of prejudice must be eradicated from health care.

We can demand that every form of health care be free - from emergency to preventive care, from open-heart surgery to prenatal care, from eyeglasses to dentures, from lab work to drugs. Open the doors of medical schools to all who want an education and eliminate the staggering costs of tuition. We deserve free health care because it is a right, not a privilege.

Do you think that 's a lot to ask for? That it sounds utopian? Well, my partner Minnie Bruce just returned from three weeks of working and living with families in Cuba-a tiny island of 11million people burdened by the legacy of colonialism and being economically strangled by an illegal U.S. blockade. One of the many achievements of the Revolution that most impressed her was that every single person in Cuba receives free health care - from the womb to the tomb. And preventive care - not just emergency attention. Glasses, braces, surgery, prescriptions - all are free to everyone. Medical schools - all education - is free too, because education, like health care and a job, is considered the birthright of every human being. The United States is the richest country in the world, we are often told. So show us the money.

In fact, the greatest polarization of wealth and poverty in the world exists here in the United States. That's why it will take a collective fight to win the health care we deserve. Remember how Medicaid and Medicare were won in the first place? By people who got fed up waiting for the next election. They took to the streets to vote with their feet in picket lines and marches and sit-ins and rallies. It will take just such a mighty movement to provide every human being with sensitive, respectful, and free health care. Each of us deserves nothing less.

TRANS LIBERATION

beyond pink or blue

By Leslie Feinberg

Coming Soon to a bookstore near you! Don't miss it!!

Out Takes from Gender Talk Radio Show wmbr 88.1 FM Cambridge, MA Leslie Feinberg, Minnie Bruce Pratt and Nancy Nangeroni

Photos: Marilyn Humphries

Masai is a Japanese FtM who had his surgery in the United States 10 years ago. He publishes FtM Nippon and Asian TS Club. Masai also writes books aimed at educating conservative Japanese unfamiliar with transgenderism and transsexuality. Masai is FTM International Man of the Year, for his hard work and outstanding service to the community

FTM日本

Masai Torai

At last, Japan's first 'official' TS surgery will be performed this summer! Because I know Dr. Takao Harashina (a serious and longtime proponent of Japanese TG/TS medical care) I have watched the developments of this movement from the top down. On one level, this surgery is not as official as one might think. The Japanese government does not support or recognise SRS. While I transitioned a decade ago, I am still registered as a female on my official papers. Furthermore, Dr. Harashina is the ony person in Japan who will perform the surgeries. The result is hundreds of patients with long waits for SRS.

Yes, Japan is quite conservative, but is also one of the countries tender towards transgender people - as long as the mainstream continues to define us as trans, and not simply male or female. In short, the Japanese people think we are amusing buffoons. They are friendly because they feel they are a superior race.

This is good and bad. The good point is that we do not have hate crimes directed towards trans people - because people rarely hate clowns. They just make fun of us, that's all. As long as we say we are TG/TS we are relatively safe. The bad point is that it is so hard to live as the gender we choose. It is never our hope to be called and treated as a trans person. I, at least, want to live as a man. This is why we can not open our true selves to people. If we did, they would never treat us as part of their tribe. When I say nothing about my condition I have NO problem - though it is difficult as a regular worker because we must show our ID when we want a job (ID which retains our birth sex). Temporary workers are not so constrained, and so I work as a male temp.

We should fight to change our proper legal status, but if we show our faces to do it we may loose the degree of an ordinary life we possess. We stand to gain our co-workers' contempt, and hate. Oh, I can hear their complaints: "Look at that upstart clown! How cheeky!

Cartoon: FTM Nippon

We shouldn't let him act haughtily like that!" Hate crime will follow close on the tails.

However, we do not want to live this shadowy existence anymore. We want to work as regular workers! We want to get married! We want to see doctors easily. We want to rent apartments, books, and videos. All of which require us to provide identification.

How can we fight without showing our faces? Or should we give up our calm lives?

One day I told the people at a meeting of the Keanu Reeves fan club, which I have belonged to for a long time, that I am FtM. They were SO surprised. They do not think about this sort of issue in their daily lives. But they told me gently "We do not care about such things. You are you, anyway. We know your nature. You are not nasty. Don't mind!" This is it, I thought. First, we should let the Japanese see that we are fine people; that we are no different from them. Then, we can appear in front of them, and they will not hate us because they already know us. It is ignorance that causes fear.

I wonder if this could really work. It depends upon the individual personality of each trans person. But, because this issue is just beginning here, we may be able to fashion the future according to our best designs. Please keep watching us, brothers and sisters! We are doing our best.

Japan's First Legal Sex Change

After more than 10 years of wishing and waiting, a Japanese transsexual will get treatment at last — the first of hundreds who have made requests. Estimates of Japanese citizens desiring sex reassignment range from 2,200 to 7,000. Previously, those wishing gender reassignment were forced to go to other countries or "back alley" surgeons. Harashina had been rejected by the ethics committee of the Saitama Medical School in 1996 on the grounds that society would not approve. But later the school went on to set up a gender clinic which developed a set of guidelines for the diagnosis and treatment of transsexuals. Two hundred people have submitted requests for SRS, 70% of them female, although only about 10% of them are expected to receive final approval under the strict assessment guidelines. Saitama deputy director Kazuo Horiuchi noted that, "Japan's social and legal conditions do not recognize the change of gender. Although we can help our patients feel at home with their true sexuality, we can do little in helping them fight against the legal and social prejudice shown towards them." The Ministry of Justice reaffirmed that it is adamant in refusing to change birth records to reflect sex reassignment.

Dr. Murphy was Wyoming's first Governor of the American College of Physicians. He and his wife, Rita, have twelve children. His e-mail address is dozn@trib.com and his gender homepage is http://w3.trib.com/~murphy/docindex.html

CLOSETS

Dr. Murphy

Closed and confining spaces, closets conjure images of secrecy, guilt and fear. They hide our bodies, imprison our souls. Invisible, yet real, they confine the spirit that lives within each of us. They hinder us from being open, honest human beings.

I gave the closet full control of my life for sixty years. Rita, my lovely wife, knew I was a crossdresser. She alone. Not my children, not my colleagues, not my friends. While rarely free of the desire to slip on a skirt, dab lipstick on the bow of my mouth, attach clip-on earrings, I sublimated my desire. The demands of marriage and family, profession and public persona were paramount.

In semi-retirement as a physician, some of this has gone by the way. If only in coming out in print, in the presence of a clear coat of nail polish and newly acquired pierced ear lobes. I have begun to throw back the veil of secrecy demanded of those fully in the closet.

When the youngest of our twelve children was age twenty-four, Rita and I opted to tell each child of my proclivity to crossdress. The response was variable. One daughter avowed complete comfort with my story; another asked we "never talk about it again." One son sat in silence; another son had two solid hours of questions.

Rita and I are native Casperites, though we met and married in Denver. I am an internist. As a newspaper columnist (writing about multiple subjects for Wyoming's only statewide newspaper), I am arguably one of the most recognizable physicians in the intra-mountain West.

Five years ago, I met my first fellow GEM (Gender Enhanced Male). I favor this term to transvestite. In my mind, it is less pejorative. Seventy-one years old. I now have friends across the transgender spectrum. I have attended six national TG conventions.

In April of 1997, I wrote a column for Wyoming's newspaper telling my readers that I was a GEM, a crossdresser. I held my breath. The response was ex-

cellent. "Brave" from a civic leader, "courageous" from a fellow physician. I am not naïve enough to believe there was no pillow-talk by many of the 50,000 Sunday subscribers to the Casper Star-Tribune.

I have given much thought to this business of coming out of the closet. Here are summary conclusions. Ask me again when I am eighty-one!

I am glad I said nothing, did nothing, to upset the equilibrium of my large family as we grew up together. By word and example, I taught tolerance.

I did not tell any of my patients. Struggling to make an income to assure each child a college education, I did not have the courage to endanger my professional position. Looking back now, I would not do differently.

Approaching seventy, I considered coming out in print. "Seventeen reasons to do so, sixteen not to do so," I told Rita. She supported my decision, whatever it might be. I asked myself: What would be the adverse effects on her, my children, my grandchildren? To former friends, would I be a pariah, even a pervert?

If I could contribute just the slightest bit toward gaining acceptance of our TG community, did I not have a responsibility to do so?

The column ran. I survived, perhaps even prospered. I have no regrets.

Some caveats:

Telling someone you crossdress differs from having others see you crossdressed. I confine my en femme spirit to points beyond my city. My closet is not entirely empty.

In telling your child, you are telling his or her spouse. Your in-laws have friends. Do not expect silence: the wife of one of my children says I am a homosexual.

Rita is a loving and supportive wife. I often travel with her while I am crossdressed. She has lectured with me at the Texas 'T' Party and California Dreamin'. She asks only that I not dress close to home.

My grandchildren seem more amused than angry. My twenty-one grandchildren (one to sixteen years) saw my new ear studs during a recent family reunion. All the older youngsters laughed and joked with me, not at me! I argued these small globes were hearing aids. A non-sell. Well, they were gold that gravitated from my teeth to my ears. Oh, grandpa! Shannon, the oldest girl, told me they "look neat." For now, case closed.

Eddie, a good friend, recently asked what size dress I wear. He asked in a crowded restaurant! I wear size 16-18. I assured him I bought my dresses in his wife's petite department of a local clothing store. We both laughed, and remain friends. Humor is a potent weapon.

I told my only brother Don, a Jesuit priest, about ten years go. Wonderful acceptance. My only sister Mary, a North Carolinian mother, learned four years ago. Acceptance did not come easily, but it came. Our friendship has never been closer.

I am not the slightest critical of my GEM friends who choose not to tell their wives, children, associates or others. "Coming out" is a difficult decision, an even more difficult act. It was only in my Medicare years that I decided it is right for me. It may not be so for you.

My conclusion: We fret more about this concern than reality requires.

Having left (most of) the closet behind me, I feel much better - no matter how I dress.

At the last minute, both of my friends cancelled and I was left "all dressed up with no place to go".

Transgender Adventure

Carolynn

It was Spring vacation in New England. My spouse was busy at work, and I planned to spend some extra time as Carolynn. Two good 'girl' friends and myself agreed to go out to lunch at one of the local suburban restaurants west of Boston. We had lunched there before and were pleasantly accepted and thought we go would again. At the last minute, both of my friends cancelled and I was left "all dressed up with no place to go". Thankfully, after viewing the Boston Marathon on Monday in Franklin, I stopped at the new Starbucks Coffee Shop in Sudbury for a complimentary coffee. There I picked up the paper and saw an advertisement for a Job Fair at the Boston Radison Hotel - with the theme of 'Diversity in the Work Place.

Before I go further, you need to know that I am approaching retirement, and hope to get post retirement part time job as Carolynn. So, I thought, why not see what they really mean by 'diversity' in the work place, and attend the job fair. Among the many positions advertised were a variety of sales positions at the major mall department stores. After dressing in my routine women's business professional look, with a conservative black checked jacket and black skit, moderate one inch heels, a print blouse and conservative but attractive make up, I drove into town, found a parking space near the hotel and walked over to the job fair. I was greeted by the hostess, given a registration form, and took the elevator, with a group of other applicants, to the sixth floor reception room. Then off the elevator and into the crowded ladies room to check hair and makeup, like all the other female applicants.

After filling out the registration form and handing it in, I talked with a few of the local company representatives. The representative from the local department store was helpful, but stated that the lo-

cal store makes the hiring decisions. Well after a few more stops at the various company booths, I left and stopped at a nearby restaurant for a glass of wine and to think about my plans for the rest of the day.

While sipping a glass of Chardonnay, I decided to drive out to the Natik Mall, stop by that major department store, and a ask for an application for a sales position. On the way, I stopped at the Wayland House (where I store my feminine clothes) to change my coat to one less fitted, and my shoes to stylish flats.

After parking and entering the store, I walked to the Human Resources Office. Upon entering, I was greeted by the secretary, a young black woman. I introduced myself and said I was interested in a sales position. She handed me an employment application, which I filled out on the spot. When I completed the application, the secretary asked me if I wanted to meet the Human Resources Manager for an interview. 'Of course,' I replied, and was led into a pleasant but modest office where I was introduced to a woman in her thirties, Ms. D. After a pleasant interview of about 10 minutes, in which we discussed my experience, education and interests, Ms. D asked in what department I was interested in working. I knew I did not want the men's clothing department, so I thought that household would be the least threatening. They had just filled that position - but she asked if was I interested in any other Department? In response, I suggested Women's Wear. Ms. D replied that there was a vacancy. We discussed briefly my retail experience

Off she went to track down the Women's Apparel Manager, and in about ten minutes returned with the young woman who managed the department. We 'were introduced and went to another office for the interview. After a pleasant ten minutes in which the woman seemed to indicate I was seriously being considered for employment, she asked if I could work four nights a week and one weekend day, a total of about 26 hours. On my application had indicated I wanted to work only about 16 hours a week. So, I stated that I'd have to think it over, agreed to call the next day to inform her of my availability, and left thankful for another opportunity to spread my wings.

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Psychotherapist

Specialized in Treatment of Gender Identity Disorders (TV/TS)

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Mary has been married to the same wonderful husband and father for 43 years. They have three fine adult children and five beautiful grandchildren. She achieved masters degrees in Social Work and Clinical Psychology and has worked in social service planning, administration and as a psychotherapist.

A Second Coming Out

Mary M. Boenke

Our middle child came out to us as a lesbian nineteen years ago after her freshman year of college. Homosexuality had never crossed our minds. The subject was not discussed in those days, we had never known any openly gay people, though Helen had few of the stereotypcial characteristics that might have caused us to wonder. As a long-time Unitarian and Social Worker, gayness was fine with us - intellectually. But, we discovered that when it was one of our own, it was still an emotional wrench. We went through most of the typical parental reactions before we became quite comfortable with our daughter's identity. When I tried to discuss it with my loving husband, John, he said with his typical brevity and good sense, "Well, she's still our daughter, we can't change her, we love her, so... what is there to talk about?"

After retiring 7 years ago, moving to Virginia, and needing something new to focus on, we started a PFLAG chapter in Roanoke. I subsequently became the Mid-Atlantic Regional Director, eventually playing mid-wife to about ten chapters. In the process John and I met with, and comforted many, many parents of gay, lesbian and bi-sexual folks. We learned a very great deal about the typical reactions to their children's gay identity and we began, in earnest, to celebrate our beautiful, talented daughter as a lesbian.

And then, - she came out to us again last year- as a transsexual. Again, we were neither well acquainted with the subject nor any trans people. We had not noticed any "symptoms" to make us wonder, and so we were again taken by surprise. In addition, we were still reeling from the news of our genetic son's recent leukemia diagnosis, and preparing for his bone marrow transplant. (It went well, he is in remission and feels fine.) As is my custom, I read what I could find and became active, almost immediately, working on trans issues, largely within PFLAG.

I shudder to think how we ever could have handled this newest challenge without our PFLAG background. Our experiences there were invaluable, helping us to recognize our own reactions and to deal with them. Certainly we experienced shock (it can't be true!), denial (maybe this is just a phase, it will pass), guilt (if only I had not been a working Mom or had spent more time with her), fear (oh dear, will she be safe), and embarrassment (what will people think!) For once, we had tears as we told and retold our story. Our PFLAG friends listened and hugged us, and we began to adjust and heal. While we think other parents are over-reacting when they say, upon learning of a son's sexual orientation, that they feel they have lost that son; we were, indeed, truly losing our daughter, as such. We chuckle when people say they have never known a homosexual because we doubt it is true, but probably we really never had known a transsexual.

While orientation is a relatively easy concept, it took us a while to understand transsexuality. After Helen's second coming out, we were able to make sense of a few past clues we had never understood - the teenage short stories about men and a few scattered comments about wanting to be a man. Of course, we wish we could have helped much sooner, but then, hindsight is always 20/20.

We learned the basics; how to explain these fundamentals to others, and started giving talks to PFLAG and other groups - what I have since identified as "Transgender 101". We learned that "transgender" is often the term used to cover the gamut of gender identity, from transsexuals who want to change their bodies and live forever in their new gender to cross-dressers, who need to express their other gender only part-time. The gender transition process, a la Harry Benjamin's Standards of Care, requires some months of counseling, referral for hormonal therapy, living full-time in the new gender, usually for a year, and then, if desired, sexual reassignment surgery. Then, of course, there are many legal and other special hurdles that make transition often so difficult. We worried and celebrated with Allen as he passed each new hurdle - the "M" on his driver's licence, the lowered voice, the first facial hairs, switching to use of Men's Room in public places and a new job, where he is known to his colleagues only as a man.

As Helen's voice began to change and a new personna was adopted, we realized we had to learn his new name and began to say "Allen". The new pronouns were harder. "He" and "him" seemed so foreign, but we persisted. Allen was patient with us, knowing we were really trying. When we went for our first visit, I was edgy, wondering what our beloved kid would look like. One of my email friends told me to just expect to see someone who looks and acts like our former daughter's twin brother. That really helped. That's exactly how I would describe our new son. I would also add that his face and figure have changed; he is a little heavier set, more muscular, lower voice, more self-confident and happier!

In retirement, Mary and John moved to the beautiful Blue Hills of Virginia, where they love to read, write, organize, wander the hills, and welcome guests. They have remained inveterate rabblerousers since the early 60's Civil Rights Movement.

"Happier" is, after all, the important thing. What parent could wish for more? We are so grateful to our new friends for support and eduction when we desparately needed it. And so we come again to our own bottom line - HE's our son, we can't change HIM, we love HIM. So what more is there to talk about?

Well, actually, there is LOTS more to talk about - what's going on in PFLAG for one. I went to the 1995 PFLAG Convention in Indianapolis, a brand new "trans parent" looking for others interested in transgender issues - and found them. Some were parents of transgendered children, some were trans folks themselves and some, committed friends and allies.

The first activity was the creation of an electronic support list called TGS-PFLAG, which became my own life-line and basic education. The following spring, T-SON (PFLAG's Transgender Special Outreach Network) was formed, following the pattern established for developing special interest groups within PFLAG.

We organized and grew rapidly because some of our members are very computer savvy. Our core steering committee frequently corresponds electronically, though some of us have not yet met in person. A telephone HelpLine was started and a second email list (PFLAG-T-SON) was established for discussion of organizational issues.

Three issues of our TransParent newsletter, several articles, and a booklet, Our Trans Children, have all been published. The booklet is readable, succinct, inexpensive and very popular. To date we have sold over 9,000 copies, mostly to PFLAG chapters, but also to gender organizations and gender clinics around the country.

In 1996 we began inviting each PFLAG chapter to identify a Transgender Coordinator (Tcord), a kind of "point" person, to receive our literature, to network with local trans folks, and to help educate their respective chapters on transgender issues. To date over 160 chapters have appointed Tcords, most have had at least one educational meeting, many have new trans persons or trans-family members, and TSON members are involved in a number of trans-family support groups.

We have also done hundreds of speaking engagements - with all levels of the PFLAG administrative heirarchy at both regional and national conferences, as well as to gender conferences and local groups of all kinds. Interest in transgender people and issues, both within and beyond PFLAG, has been truly gratifying.

Recently we began receiving a steady trickle of calls from parents of very young children who show persistent cross-gender traits - little girls who refuse to wear frilly dresses, prefer traditionally male toys, and insist on adopting a boy's name, haircut and so forth, and vice versa for little genetic boys. We currently believe they are too young to be called transgendered so the diagnosis of Gender Identity Disorder is used. There is no medical treatment for these children in this country, but we have put together some relevant materials and started putting these families in touch with each other via an informal email list called Parents of TransKids.

I have come to see very similar patterns between gay and trans issues. I am guessing trans persons, once the term and concepts are well known, will self-identify much more frequently; perhaps about one in ten gays will realize they have gender issues. I rarely speak to a gay (GLB) group but that someone does not approach me afterwards and say something like, "This is the first time I've ever told anyone I'm probably a trans person."

However, it has taken a while for the gay community to begin accepting trans persons within the fold. In spite of starting the Stonewall Riot, struggling with the same minority political issues, and coming out of the closet at earlier and earlier ages (just as gays did), transgendered persons have been viewed by many gays as jeopardizing the onset of gay legal rights. In fact, when I speak to groups I often start by explaining the difference between orientation and gender identity. But before concluding, I always say, "And now that you've separated these two issues, you have to put them back together again." They are overlapping - in symptoms, political process, possibly etiology, and certainly socially and legally.

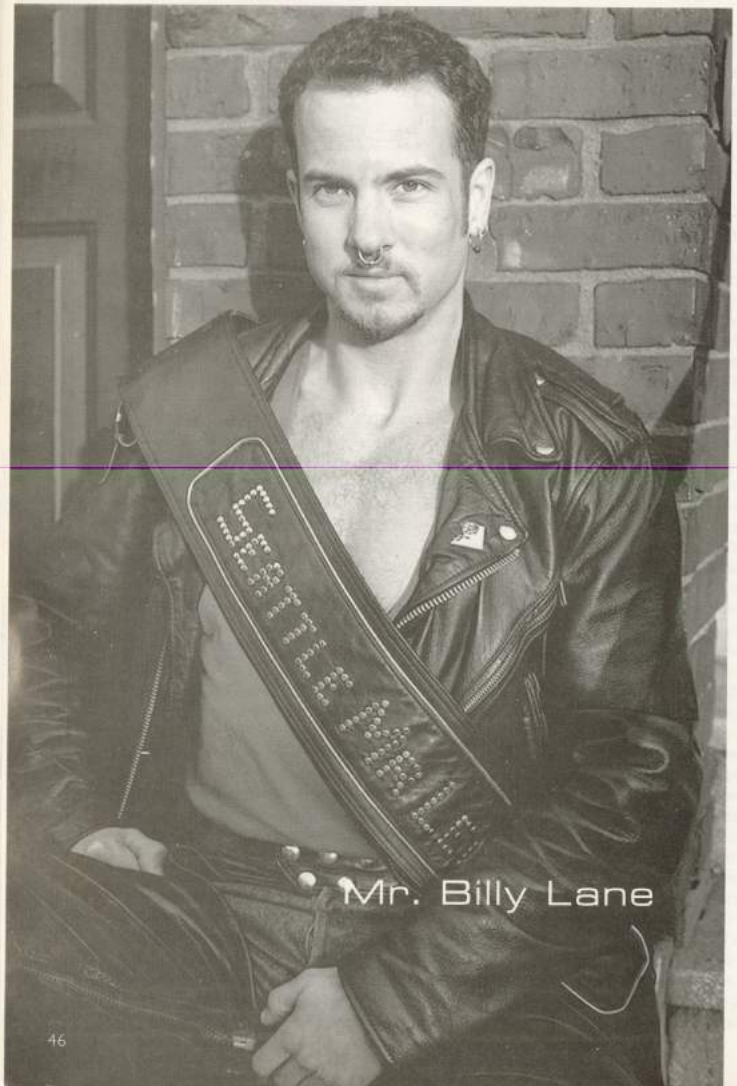
Realizing this, we in PFLAG's Trans Network have tried to be as inclusive as possible. We have also become philosophical about the arbitrary and rigid sexual definitions imposed by our society. Granted there are significant general differences between men and women, we believe these have been greatly exagerated and solidified by social custom. We respect the right of everyone to identify as they wish, even if the package we see fits none of our previous stereotypes.

In December 1997, we formally requested a change in PFLAG's By-Laws to make our organization officially transgender inclusive. The national Board has unanimously recomended this change and it is scheduled to be voted on at the coming Annual Meeting in San Francisco September 12.

TSON will also hold a Trans Gathering there Sept 11-13 and would welcome all interested trannies and allies. Workshops will include "The Gender Spectrum", "Gender Identity Disorder and Gender Variant Children", and "Trans Support in a PFLAG Context". For more information on any of TSON's resources, or to volunteer to help, please contact Karen Gross at Kateygr@aol.com or 216/691-4387 [HELP]; or me at 540/890-3957, maryboenke@aol.com.

Yes, more out and proud! A Transgender Tapestry favorite column.
If you are out at work, play, home and to yourself please drop us a few lines of your biography plus a picture of yourself. If you wish to nominate someone else, with their permission of course, send it in. By e-mail: Mykael@ifge.org or snail mail P.O. Box 229, Waltham, MA 02454-0229.
Just do it! Before Oct. 1, 1998, for the winter issue. This will be a regular feature every month.

More Out and Proud



Mr. Billy Lane

History was made at the 20th Annual International Mr. Leather competition, the most prestigious title in the Leather world. The winner represents alternative leather S/M, and fetish sexualities in the coming year, world wide. Mister Billy Lane, Mr. Seattle Leather 1998 and a female to male transsexual placed 10th in a competitive field of 62 other extraordinary contestants from numerous countries.

Only after contestants had been presented to a large and appreciative audience, was the historic announcement made that this year's field included for the first time, a transsexual competitor. The audience and contestants were obviously unable to discern whom it might be.

During the speech portion of the competition which followed the physique part of the event, Mr. Lane himself made the announcement about his transition to the loud applause and clear approval of the huge audience. The man sitting in front of me said, "I had no idea who it was. Now that takes some very serious balls in my book." Mine too.

Congratulations are in order to Mr. Lane: at SMrL1998@aol.com

Guy Baldwin
International Mr. Leather 1989
Mr. National Leather Assn. 1989

Valerie C. Spencer

Is working in the field of Social Services, specifically HIV Education. It has been her goal to serve communities of color within Los Angeles County by dissiminating life saving prevention messages and assisting in the bolstering self-image. Nationally known Transgender and AIDS activist, Connie Norman recruited Valene to become active in the fight for services for Transgender persons stating, "You are Woman enough to represent the community and Bitch enough to get the work done." That is when the torch of advocacy was passed on to Valerie. Her current projects include, developing a spiritual support group for TGS and their significant others. "This group will not be religion specific but will have a spiritual focus. We will share methods of developing a faith that works and works for US. In this society, TGs have been told and taught that we do not have access to the halls of faith. "My Goal; Break Barriers, Unite The People."

Jordy Jones

Born in the sixties, and was a child artist in the seventies. She received first critical notice at age six for insisting that the pregnant hamster she had donated to the local art league's annual auction was, indeed, art. Jones pursued an ambiguous artistic genderqueer existence throughout the eighties, and began transition in the early nineties. His current project, "BRANDON: A One-Year Narrative Project in Installments" explores issues of gender fusion and techno-body in both public space and cyberspace. It is a multi-author/multi-institutional collaboration conceived by media artist Shu Lea Cheang. Other contributors include Susan Stryker and Lawrence Chua. BRANDON is curated by Mathew Drutt of the Guggenheim Museum, Soho,and is inaugaurating the Guggenheim's Virtual Museum. Brandon is accessable at the Guggenheim Museum Soho's videowall during regularly scheduled hours, and via the 'net at - http:/ /brandon. guggenheim.org

Nancy Nangeroni

Nancy is currently the Executive Director of IFGE. She is very active in the political scene as well as in rollerblading. Nancy is the '98 Boston Gay Pride Parade Grand Marshal. Playing and writing music is her passion. "I always wanted to be a musician but my family thought it best for me to be an engineer." She also hosts Gender Talk, an educational radio talk show that airs on WMBR 88.1 FM at 8:30 wednesday evenings in Cambridge, MA. Nancy is executive editor for Transgender Tapestry, writes TransActions and feature articles for the magazine. She is founder of Transexual Menace Boston. With Lavender Alliance, she helped Cambridge MA become one of the few cities in the nation to pass an equal rights ammendment for the G/L/B/T community. She is creative in her thinking and has the ability to make her ideas happen. She has an abundance of energy but likes to relax and cool down with her guitar and of course her sweetie.

Gwen Smith

Labeling Gwen Smith a 30-year-old, pre-op transsexual tells you nothing of her personhood. Gwen serves as the Area Coordinator of the Transgender Community Forum on America Online, as well as co-hosting the Sunday Gender Chat, the longest-running weekly event in TG cyberspace. She has been on America Online since early 1993, and on the on Q staff since January of 1994.

Her work in cyberspace has opened her up to other opportunities to help out the community. She is a board member for AEGIS, on the planning committee and webmistress for the Southern Comfort Conference. She has also provided internet consulting services for many other transgendered organizations.

In her time spent not in cyberspace, Gwen is a graphic/web designer, designer and desktop publisher, and enjoys Animaniacs, Disneyland, AD&D, good friends, and fun times. She also enjoys the occassional writing, and her words have appeared both in the TG and "straight" press. She has her own web site, located at http://members.aol.com/gwensmith. Gwen is also married to Bonnie Kathleen.

Out and Proud

Penni Ashe

At 49, Penni has, in quick succession, co-founded and become the Acting State Director for It's Time, Massachusetts! and become active in two coalitions, one of which is predominantly non-glbt in character. During this time, she has become the Eastern States Director for It's Time, America!, as well as ITA's Acting Media Director. In addition, she is the only openly transgender board member of GLOBE, the Bell Atlantic glbt employee resource group, and in serving on the board was instrumental in making the organization transgender inclusive.

Allie Lie

Allie Lie has been coming out all over the place sinceBoston/ Cambridge's Gay Pride Week 1996. She lives in Cambridge, MA, is the parent of two increasingly gender aware elementary school boys and the estranged spouse of a loving and accepting but sadly devout heterosexual. She maintains a neglected website at: http://www.geocities.com/SoHo/Lofts/8208. alliekat@geocities.com

Mardi Clark

Mardi Clark lives in Tacoma, Wa. A pagan and a leftist, she was born and raised in South Dakota. She enjoys dancing, the outdoors, travel, writing and is an active participant in the local trans community. Employed full-time in the entertainment industry. Mardi enjoys taking her rendition of the popular TV character Xena: Warrior Princess to events around the country. She is also one of the authors of, "Out in Seattle", issue #84 Transgender Tapestry Magazine. Check it out, its a great article. (Picture, Denver Pride Rally, 1998.)

Mykael Hawley

Senior editor and art director of Transgender Tapestry Magazine. He has been out for 4 years and in transition for one and a half years. His birth place is Coeur d'Alene, Idaho, this is where he became the accidental activist as he referes to himself. His passion is his wife Jeannette and together they travel as much as they can. He loves living in Boston, going to the theatre, to the ocean, and long lazy naps. He is the co-founder of American Boyz group, Boston, Transgendah Sobah n' Free meeting at IFGE. One of the co-founders of It's Time Mass., and co-ch of 3rd Annual FTM Conference of the Americas.

Michelle LeFree

Michelle LeFree, is a 47y/o TS mother of 2 teenage children with a highly productive 25 year career in medical imaging. She very successfully transitioned in her corporate workplace and the medical imaging professional community 2 ½ years ago. She's never been happier and has her eye to the future.

Vanessa Murray

Vanessa is the manager of Synchronicity Bookstore at IFGE. She has been out and living full time for two years. She is the reassuring voice at the other end of the phone line that sometimes make your troubles lighter and life worth living again. She has a passion for peer counseling, her garden, her home, family and especially her wife Janet. She is always the first to lend a helping hand or offer a meal. You can see her at most conventions with her traveling bookstore or lending an ear to someone going thru a difficult time.

Miqqi Gilbert

Miqqi Gilbert is a philosophy professor at York University. As a "committed crossdresser," Gilbert is a part of the new wave of transpeople who are no longer prepared to remain hidden and silent. She has been a cross dresser since she was little. For her it is an expression of her feminine side, a declaration of her anima strength, and an awareness of how holistic we all truly are. However, while she knows that she cross dresses, she has no real idea of why she cross dresses. She simply knows that she does. Her acceptance of this part of herself, without shameor guilt, has taken a long time and hard work. She posts a web page in the hope that others may also come to accept their transgender status for what it is: A fact of life that is never going to change.

Holly Cross

Holly has been out since god, though she wishes that she had come out sooner. She knows everyone and when health permits, she is at every event that she can get to. She is generous and has helped many a transfolk along their way. If you have any questions about trans history just ask Holly, she remembers everything, she is the living encylopedia of the TG community. Holly has been a faithful, committed volunteer to the TG community, now she is basking under the sun in retirement out west in California. She does miss her favorite haunts in Massachusettes especially Provincetown. She loves clothes and has lots of them.

Monica C. Miatello

Monica is a pharmacist with a degree in pharmacy from the University of Toronto, Canada. She has been living as a woman full-time since May 8th, 1997 and is currently President and C.E.O. of CDS Pharmacies Inc., a small chain of drug stores located in southwestern Ontario. Monica lives in Ailsa Craig, Ontario, with a population 900, in a rural farming community. (an unlicely place for a successful transition.) However, after extensively educating the community all is going well. Monica was also able to maintain her position as chairperson of the "RxCentral" group of pharmacies. On a personal note, Monica is happily married and shares two young daughters with a very supportive partner, Sandra. Monica is a charter member of the Monarch Social Club and is currently a member of Xpressions, Toronto.

Tess Cowell

Tess does not define herself, she says simply," I arrived at a solution that was appropriate for me and it was a very personal decision." She lives in California, a successful dentist by profession and transitioned almost two years ago. You can read about her unique SRS in *Transgender Tapestry* Magazine, Issue #83. A spiritual person, Tess posesses a soulful grace that pervades her life - how ever difficult that life becomes. She wishes to share her experiences about her SRS surgery, if anyone is interested you can reach Tess at 1525 Aviation Blvd., Box 222, Redondo Beach, CA 90278

The Lady Chablis

You wouldn't know who I am unless you've read the book Midnight in the Garden of Good and Evil by John Berendt. But that's okay, I'm otherwise known as The Doll, y'mama, The Lady Chablis- Midnite is one hell of a good book-. All you have to know about it for now is that I am the outrageously charming black drag queen who stole the two best chapters in it: "The Grand Empress of Savannah" and "Black Minuet." John thought of me as a minor character, but as The Doll proved to him, she is not, I repeat: N 0 T-a minor anything. In the movie version, The Doll plays herself in the role of yours truely. But that just stands to reason, I am the best person for the job. I must say, it's a good thing they did because I make "The Movie". And let's not forget that I have my own book out, "Hiding My Candy", Warner Bros. wants to make a movie of my book. That's right, lit'l ol me. So don't you worry child, you'll see lots of me in the future.

Nancy Cain

Nancy is the business manager (the goddess of the ten key) for IFGE, and on the board of the Tiffany Club of New England, one of the largest support, social groups in New England. Nancy has been out full time for two years. She loves her home, zooming in her cute little sports car, and the man in her life, not necessarily in that order. She is a closet graphic artist and enjoys being a femme girlie girl. She has been coordinator for many a successful First Event Conference/Party. She loves movies and can remember every detail, even the dialog. Don't try to top her prowess in trivia games or leather, you will on the bottom before you can say, "Oh, Honey!" Nancy has a wicked sense of humor and is addicted to a good cuppa coffee, chocolate, and sweet nibblies.

It's happening. Upcoming generations are entering a social climate that is significantly less gender restrictive, and the boundaries between queer and straight are softening.

New Generations of Gender

Holly Boswell

As a transgender person, what better excuse could I have imagined to revisit my alma mater than to speak at the first ever college "Transgender Awareness Week"?! Even though I networked through Oberlin's gay alumni organisation, and recently saw "T" added to the "LGB" in the campus Union, this event blew me away. My own experience as a closeted, oppressed transgender student during the anti-war years of '68-'72' felt sadly grey. This was a special opportunity for me to return and share my true colours.

Oberlin College had, in fact, already hosted five annual Drag Balls (which attract 80% of the student body), and become recognised as a significant "gay Mecca' among colleges. Thanks to Cara Wick of the Multicultural Resource Center, Oberlin decided to devote the week preceding the Spring '98 Drag Ball to investigating what the 'transgender phenomena' is all about.

All I knew going in was that I would give a presentation on Monday, visit some of my old professors, address two classes who had critiqued my writings, help students 'pass' in order to understand what it is like to live in another gender, and join forces with Leslie Feinberg on Thursday. Not only were my hopes for this agenda fulfilled, but gender and sex and politics were transcended in a way that can only be described as a 'love fest' - child of the sixties that I am.

Holly Boswell

Oberlin has a well earned, potent reputation as radically progressive, intellectually rigorous, socially and politically aware. The students are very bright and sincere, generally urban and sophisticated, hip to the point of jaded, stresses out over-achievers. In this regard, it is wise to view my experience of them as a tip of an iceberg - they being the harbingers of an undeniably powerful coming trend.

During my week on campus, I saw students who no longer subscribed to rigid codes of gender. I saw a preponderance of lesbians, and other questioning women, clearly compelled to reclaim their masculine energy in a transcendent way. I saw 'alternative' men, for whom cross-dressing was a natural option, who had barely begun to recognise and reconcile their own gender liberation. I saw Cleveland's Trans Family invited to address these complex inquiries, but tend to offer the stock transsexual options. I was beginning to see Oberlin as a fertile playground for the meaningful exploration of true gender liberation.

These students were amazingly astute, challenging the transgender community and society as a whole to redefine gender altogether. In some ways, they looked for new traditions. In other ways, they sought the radical solutions of living free of ge der and other restrictive thought-forms

They asked the tough question 'how should we define trans gende 'how does androgyny figure in?', 'how privilege and class unfairly enable a pe son to express trans gender?', 'how trans gender be reconciled within partn and family dynamics?', 'how can socie move beyond identifying people only men or women?', 'how do our views gender shape our spiritual beliefs in g or goddess?', 'aren't we all trans gende 'if we transcend gender, then what?',

As a 'gender pioneer', my return Oberlin was profoundly gratifying and e powering. To come from the depths self doubt and despair during my stude years, never imagining more than libe tolerance and alienation if I returned my true self, and find such welcome a acceptance, engagement and understan ing, honouring and celebrating of the v issues I embody - this was truly vindic ing, and healing.

I am most pleased to bring back t hope filled message from the frontie our succeeding generation. They are a to embrace the notion that gender is i nite. And, they are beginning to understa that gender is a catalysing concept t can unleash our full potential as human b ings.

Leslie Feinberg arrived later that we to deliver a powerful and compassiona 'call to arms' for gender liberation. It w a great honour for me to share the p dium. If I were to characterise my co message - as a compliment to Leslie's was that of playfulness and joy. I belie Leslie would agree that it would be gre if gender could be a playground, instea of a battlefield. But as we fight our battle we must cut loose, and honour the f range of expression we are inspired to e act. Let us play together, and honour the the human possibilities we can bring i this equation we call life.

"...it would be great if gender could be a playground, instead of a battlefield".

At first, it seemed as if some karmic conjunction was working in my favor. In 1992, just when I had finally overcome my crippling shame and decided to speak out about being intersex and suffering a clitorectomy, the country was buzzing about genital mutilation.

Making Media - An Intersex Perspective

Cheryl Chase

Alice Walker's book, "Possessing the Secret of Joy" was a best-seller; editorials in staid mainstream media outlets decried clitorectomy as a violation of human rights, as child abuse, as barbarism. Surely, when they heard that mutilating genital surgeries were performed on a routine basis in American hospitals, the media would be all over the story, right? Wrong. Now, five years later, with prominent coverage in Newsweek, the New York Times, the San Francisco Chronicle, and on NBC Dateline, the issue has finally hit the nation's radar. How was this accomplished? Why did it take as long as it did?

In 1992, I wondered where the media expose of intersex surgeries was. Since the late 1950s in the United States, it has been standard to treat the birth of a child with unusual genitals as a "social emergency," and to remedy the discomfort of parents and doctors by genital surgery on the infant. Motivated in part by a fear that the children might grow up homosexual, doctors perform cosmetic genital surgery on about 1 in 2,000 children. The vast majority medically unnecessary, these surgeries remove clitoral tissue, excavate vaginal cavities, or move or extend urethras. Outcomes are poor in functional, cosmetic and emotional terms. Surgeries are often repeated, sometimes over a dozen times. A profound shame prevents people from discussing what has happened to them.

Denunciations of African surgeries serve as a sort of proxy. The none-too-subtle message is that Africans do not respect women, or that Africans are irrational and unscientific, or that Africans do not love and protect their children. Implied is that "we," (i.e. enlightened Americans) respect women, are rational and scientific, and love and protect our children.

What a contrast with our own medicalized genital surgeries. To examine this issue, we must confront the fact that one of the very establishments we hold dear does not always respect women (surgeons assign nine out of ten intersex infants they see as girls because "it's easier,"), are not always rational (whatever doctors do is respected as "scientific," even when it makes little sense), and do not always love or protect our children (psychologist Suzanne Kessler notes that genital ambiguity is "corrected" because it threatens not the infant's life but the culture the infant is born into).

Resistance toward examining our own cultural practices combined with the authority accorded the medical establishment virtually stonewalls the struggle of intersex people. But we refused to be powerless, and a combination of persistence, self-education, and coalition led us to strategies which ultimately turned the tide.

Come out!

Until five years ago, intersexuals remained silent, paralyzed by shame and each unaware that s/he was not alone. The history of the gay and lesbian movement shows that overcoming shame is crucial to forming a successful social movement. Following a 1993 article by Anne Fausto-Sterling on intersexuality, the magazine The Sciences published my letter announcing the formation of the Intersex Society of North America (ISNA). That letter, and a few others, brought correspondence from a handful of other intersexuals, all similarly emotionally traumatized and many surgically mutilated as well. We took immense comfort from finding others like ourselves, and from learning others had also experienced their "care" as a betrayal, as punishment for being different.

By late 1994 we collected some of our stories into the first issue of a newsletter called Hermaphrodites with Attitude, a venue in which our stories could be made public without sacrificing our privacy. The newsletter made clear that social and medical abuse of intersexuals is a real and widespread phenomenon, not just the sad story of a uniquely unlucky victim of medical misjudgment.

I wrote to many physicians who practice on intersex children and are respected as medical authorities. I urged them to consider that they were attempting to treat the very real pain of social stigma by erasing or hiding the stigmatized characteristic. Real healing will come only by decreasing the stigma, and that will come not from hiding, but from coming out, from asserting pride in who we are. My correspondence was almost universally ignored by doctors, which fact told me that change would be effected only by bringing the issue to wider social attention.

Cultivate "expert" Supporters

In part as a means of trying to generate media coverage, I cultivated interest and support within non-medical professional communities. Working with professionals has been an important part of ISNA's strategy. Journalists want to get "the other side" from someone who is not intersexed, and who is accorded cultural authority as an expert. Medical intersex specialists predictably tell them that intersex activists are bad apples that should be ignored, while they consider closeted intersexuals success stories. By 1996 we had a large pool of sex researchers, psychologists, sociologists, psychotherapists, historians, ethicists, and psychiatrists who would tell journalists that physicians are simply missing the picture. The work of historian/ethicist Alice Dreger, feminist critic of science Anne Fausto-Sterling, and gender theorist Suzanne Kessler analyzed the process by which the medical mistreatment of intersexuals had come into being. This sort of historicizing is a powerful tech-

nique; it allows us to say, "It wasn't always that way, it got made that way. And if it got made that way, it can get unmade."

Use Technology

The growth of the Internet has been a great boon for us. We have been able to leverage our computer skills into high visibility, making it very easy for intersexuals, parents, journalists, and professionals to find us. This visibility amplifies the impact each time major media covers us. Internet mailing lists have made it easy for us to bring our issues to professional communities outside the medical profession. Our Web site serves as an information clearinghouse not just to intersex people but journalists looking for background research and an interesting angle. It also promotes the coverage we have already received, giving our struggle increased cachet among mainstream media. It is not an overstatement to say that without the Internet, it would have taken decades to get where we are now.

Learn How to "do" Media

One of the keys to our success has been a process of self-education facilitated by the generosity of queer activists in Transexual Menace, GLAAD, and NGLTF, especially Riki Wilchins and Robert Bray. Many individuals in these organizations were generous with their time and knowledge, teaching us how to write press releases, assemble press kits, pitch stories, develop relationships with journalists. Guides such as "Let the World Know" (a guide to media activism from Rocky Mountain Media Watch), and accounts of turning points in queer history such as "Straight News" (how gay activism forced more fair and accurate reporting in the media) and "Homosexuality and American Psychiatry" (history of the successful struggle to remove homosexuality from the catalog of mental disorders) let us learn from the successes of our predecessors.

Use Humor

The first issue of our newsletter inaugurated an ISNA tradition: humor. Rudolph the Red-Nosed Reindeer graced the cover, with a hand-colored red nose on each copy. The accompanying article satirized medical literature on intersex genital surgery by discussing Rudolph's nose as a disfiguring deformity, and an "after surgery" picture, captioned "excellent cosmetic result," depicted a clearly mutilated Rudolph in tears. Humor is fun, and it is disarming. Physicians insist that intersexuality is so monstrously shameful that no parents, no child could possibly stand the burden. When we are willing to publicly come out and even joke about being hermaphrodites, we demolish that argument.

Anger is a TURN-OFF

The flip side of the utility of humor is how fast anger will turn people away. Angry? You bet we are angry. But that anger needs to be kept to our safe support spaces. If our public presence is too marked by anger, we won't be fun or interesting to watch or read about.

Simplify (but never exaggerate!)

OK, OK. Actually, sex difference, childhood emotional development and the like are complex social issues. But popular media is not designed to educate the public about anything subtle. And if your issue is both unknown and tabooed from discussion, you're in for a mighty struggle to get any attention at all. Your issue must be presented in simplistic, black and white terms. In the case of social justice for intersexuals, genital surgery is far from the only issue. But it is the most dramatic, the clearest. Current social policy is to eliminate intersexuality before the child can develop any self-awareness. Surgeons are promoting ever earlier surgery, within weeks of birth. If we can deligitimize the social policy of elimination, we will be in a much better position to force social discourse over how we will treat intersexuals.

Create Newsworthy Events

It's usually a lot easier to get journalists to cover events than issues, so it is important to figure out how to turn issues into events. In spring of 1997, ISNA joined a lobby day in DC sponsored by GenderPAC. For absolute novices, "lobbying" sounds awfully intimidating. Hell, I don't know how to do that. But it turns out that it's easy. GenderPAC held our hands, helped us create literature appropriate for legislative aides, and notified the press. Professional lobbyists from HRC and NGLTF coached us and accompanied us on our first visits. We haven't yet managed to get the law changed, but women from four states converging on DC to explain to elected officials that clitorectomy happens here (it was done to us) and we want it stopped - and are willing to be photographed - that's news. By the way, we are now old pros at lobbying, and we'll be happy to share our knowledge. This event was covered prominently in the New York Times by Pulitzer Prize-winning journalist Natalie Angier.

Create Visibility and Credibility by Association

Working in concert with more established queer activist groups, we were able to generate some credibility by mere association. The Gay and Lesbian Medical Association was supportive, carrying some of our releases in their newsletter, and inviting us to present a panel at their annual meeting in summer of 1996. The Association of Gay and Lesbian Psychiatrists helped us to set up a case presentation at the APA's annual meeting in spring 1997, with an associated open house. Perhaps even more significant than the education of a few dozen physicians that was accomplished at each of these events was the fact that media took us more seriously, merely because we had gained a medical audience. These are also news events, particularly for professional publications.

AEGIS sent out an issue of Hermaphrodites with Attitude in their Aug 95 mailing to 600 professionals. GenderPAC and AEGIS began to carry our news on their Internet lists, which reach important activists and media. GLAAD began to carry us on their lists, which amplifies our work in two ways. One is to more reliably deliver our releases to a large number of journalists. Journalists skim GLAAD's lists; they are more likely to toss a release from an unknown organization. The other is to provide feedback to the media for coverage of intersex. The producers of the intersex segment on Dateline told us that the piece generated a great deal of favorable viewer response; much of that can probably be attributed to GLAADlines.

Hit the Streets

In September 1996, Congress passed Pat Schroeder's "Female Genital Mutilation" bill, which prohibited clitoral surgery-except the sort practiced on intersexuals. Schroeder ignored requests by ISNA and by Anne Fausto-Sterling to word the bill in such a way as to protect American children as well as immigrant daughters. The passage of the bill came as a shock, and outraged intersexuals accepted Riki Wilchins' offer to teach them how to set up a picket. In concert with Transexual Menace, in October an impromptu group calling themselves Hermaphrodites with Attitude picketed the annual pediatricians' convention in Boston.

Create Visuals

News is more riveting if it has an image. A picture of an intersexed person is very dull, and merely encourages objectification. A picture of a crowd of intersexuals picketing a convention is likely to look like just a crowd - unless they are carrying a huge banner that says "Hermaphrodites with Attitude." A picture of four women, no clits, is dull. A picture of a lobby team of four clitorectomized women standing in front of the capitol building is news. That photo made the New York Times first section, and the front page of Clinical Psychiatry News.

Seize the moment

By January of 1997, the intersex cause was beginning to win many doubters, and a few actual converts, among medical intersex specialists. Justine Schober, a urologist with experience in intersex genital surgeries, read ISNA materials, watched our video tape, Hermaphrodites Speak! and decided to publicly denounce the surgeries. The Urology Times, in February, noted that even as intersexuals picketed on the street, and the pediatricians issued a press statement asserting full confidence in the necessity and success of the surgeries, surgeons inside the building were expressing grave doubts and relating negative outcomes (but still refusing to talk to intersex advocates).

We had a large community of adult intersexuals who had healed enough of their shame to be able to speak publicly; we had a few parents who were willing to speak about their experiences and could rebut doctors' assertions that "things are so much better now;" we had sexologists, sociologists, psychotherapists, historians, and even one or two surgeons and ethicists on our side.

We were in a good position to extract from the media the story we wanted: a story about us (our culture, which, through the medical establishment, in order to maintain the fiction of male and female as black and white, punishes and silences those who don't fit; how intersexuals are fighting for social change). And to avoid stories about them: intersexuals as "Other," as freak, as victim.

Just as all of these pieces fell into place, a stroke of good luck came to us. Sex researcher Milton Diamond publicized the real outcome of what has become known as the "John/Joan" story. In the early 1960s, one of identical male twins had his penis accidentally destroyed during a botched circumcision. Doctors decided that a boy without a penis was no boy, so they would remove his testes and have his parents raise him as a girl. Later, sexologist John Money reported that "John" had developed quite nicely into a woman named "Joan," and this single case was considered evidence that boys born with small penises could be made into girls. In March of this year, Diamond reported that John had come forward to say that had never been comfortable as a girl, that as a teen he had refused additional "feminizing" genital surgeries and hormones, and that he was now once again living as a man.

Diamond's report turned into a huge media event, reported on the front page of the New York Times and other major papers, in the newsweeklies, and permeating the rest of the media from there. Most of the coverage wanted to spin the story as unique mishap whose principal interest lies in the evidence it provides that sex differences are innate. By doing so, many in the media painted feminists as working against Nature by asserting that certain gendered differences are social, not biological.

The daily victims of the same medical treatment are labeled "hermaphroditic" or "intersexual," making it hard to identify or sympathize with us: "Oh, it's a medical condition." But John was agreed to be a "normal" male, which allowed people to recognize his story as a tragedy. Indeed, the fact that he married a woman and adopted children raises the spectre that the doctors who insisted he wear a skirt and date boys were attempting to turn him into a (gasp!) homosexual.

We took advantage of the press's attention to the John/Joan story, making them aware that intersex children are treated every day with the sorts of medical arrogance, mutilating surgery, and willful deception that were imposed on John.

The recent media coverage in Newsweek, New York Times, and others has been very successful for us precisely because it presents the story as one of struggle and social justice (a story about us, our culture), rather than about them (intersexuals as freaks). But without a lot of help from our friends, we would never have gotten here.

Gays, lesbians, and bisexuals are stigmatized and oppressed because they violate social standards for acceptable sex behavior; transexuals because they violate standards for sex identity. Intersexuals are punished for violating social standards of acceptable sex anatomy. There has been visible resistance within many queer and feminist activist groups to accepting transgender issues as part of their agenda. Likewise, many activists have objected to the inclusion of intersex issues on the queer agenda, and there have even been objections from some intersexuals to coalition politics that associate intersexuality with transexuality. But our oppressions stem from the same source: rigid cultural definitions of sex categories, whether in terms of behavior, identity, or anatomy. I plan to be part of a movement where we work together against that common source of oppression.

Cheryl Chase is the executive director of the Intersex Society of North America, a peer support, education, and advocacy group founded and operated by and for intersexuals. She can be reached via their Web site at http://www.isna.org.

Check for Mutilation on Return cuts through medical discourse to take an incisive look at intersexuality.

Corrective Procedures

Tracy Murinik

In the catalogue for his exhibition, Stuart Barnes states that "in a university, library books on the subject of ambiguous sex have suffered a history of violence: they have been mutilated. Pages have been torn and images of intersex genitalia excised from them. As a preventative measure they have been shelved in a locked office behind the library's reference desk. Still available for loan upon specific request, they have been issued with stamps that state in bold type, 'to be shelved at the reference desk. Check for mutilation on return.'"

People are notably silent at the opening of Stuart Barnes's exhibition, Check for Mutilation on Return. It is a space which catches one a little off-guard. Vaguely detached and unassuming at first glance, the act of looking and making one's way through the installation becomes increasingly intense and disturbing; chilling and perplexing.

It tells of the violation of human rights and the mutilation of human bodies through social systems fixated on an obsessive prerequisite of strict binary sexual categorisation. Intersexuality as a threat to these categories, Barnes notes, is still largely regarded in medical circles as a physiological abnormality in need of "correction".

"Intersexuality" is the currently acceptable term for what used to be known as hermaphroditism. But, he suggests, the understanding of what that "correction" implies has shifted through the consciousness of intersexual activist and support groups, who recognise many of these procedures to be, instead, devastating mutilations, likening them to acts of child abuse.

Medical discourses around ambiguous sex have served and confirmed its tabooed status. Barnes describes this taboo as having resulted in a general rule of silence that is adhered to by doctors and parents, leaving issues of the child's consent and possibilities of alternative treatment options largely unspoken. "Instead," Barnes comments, "they were surgically realigned in an attempt to adhere to the operative categories of the social order."

Innocence removed:
Stuart Barnes puts sexuality, mutilation and hermaphrodites on the examination table in his installation

Attached to green surgical sheets, and dispersed along the walls of the cabinet, is a series of disposable nappies, many cut through and inlaid with texts around their genital area. Some of the texts appear to be from medical journals, some from medical records, others personal accounts of physical and emotional loss, distress and violation.

It is an awkward conflation of imagery: the silent innocence of a baby's nappy, undercut with the sophisticated, sterile articulation of the medical document, or the tormented narrative of the "corrected" adult. The incisions mark, in a double-play, a double-mutilation. The violence done to library books seems to attempt to remove, from record and from history, any evidence of the intersexual.

The analogy which Barnes invites in this visual play is with "corrective" surgery, which attempts to deny the feasibility and acceptability of the intersexual child. The "phenomenon" is deemed illegitimate and confined to the realm of myth. The nullification is both physical and discursive. What emerges in many of the texts that Barnes includes is a rationalising sentiment that smacks of homophobia. Many of the surgical decisions are based upon the desire to shape and curtail sexuality within the confines of a heterosexual existence. But the personal testimonies included in the work manage to individualise and personalise their existence way beyond the generic stereotype.

In what feels like a quietly triumphant inversion, it is the texts that lie embedded, framed by nappies, instead of their inferred labels "framing the patient". It is a reclamation of rights to the body, a call for acknowledgement, tolerance, and responsibility.

Check for Mutilation on Return by Stuart Barnes is on at the Mark Coetzee Fine Art Cabinet in Cape Town South Africa

Thanks To Tracy Murinik, "article originally published by the Electronic Mail And Guardian."

www.mg.co.za

Check for Mutilation on Return

'Brandon' exhibit features media artist and filmmaker Shu Lea Cheang, artists Susan Stryker, Jordy Jones, and Pat Cadigan

Guggenheim Goes Digital

Steve Silberman *Wired* Magazine

The provocative and difficult life of a murdered transsexual has inspired a provocative and difficult Web site: Brandon, the Guggenheim Museum's first major art project to be commissioned specifically for the new medium.

The issues raised by the site promise to spark heated dialogues about the creation and archiving of digital art — and the role of major museums like the Guggenheim in curating it — that will smolder into the next millennium.

The site takes the short life of Teena Renee Brandon as a jumping-off point to probe questions of gender and identity. Until her death, Brandon — a blue-eyed, clean-cut, 21-year-old Nebraskan — was more successful in passing as a man in real life than the gender-switchers who pack America Online chat rooms are in posing as horny seductresses.

Stabbed and shot dead on New Year's Eve 1994 by the same youths who had raped her on Christmas Day, Brandon was described after the murder by a local teenager as "a lot of girls' dream guy" in the Chicago Tribune. It is believed that Brandon and two witnesses were killed to prevent them from testifying against the alleged rapist, John Lotter, who was sentenced to death for the murders in 1996.

The site, launched on 30 June, uses several different interfaces to challenge the viewer's assumptions about gender. A series of questions and answers ponders the fate of someone who was "uncomfortable in her own skin," and a striking array of JavaScript-generated windows juxtaposes images of tattooed bodies, pierced nipples, and medical illustrations of dissected penises.

Another section proposes a fictional narrative in which Brandon falls in love with a 19-century hermaphrodite before the two are scooped up by an alien spacecraft. "Genital abduction of a third kind," the text muses.

Much of the site is still unfinished; additional text and images will be added in stages over the course of the next year.

Guggenheim associate curator Matthew Drutt, who commissioned the project from media artist and filmmaker Shu Lea Cheang, says that the site's examination of the constitution of gender — and the creation of multiple gender-identities —made it a perfect choice for the Guggenheim's first major commission in cyberspace.

Photo:
Mariette Pathy Allen

"Brandon has become a celebrated figure for gender activism on the Web," Drutt says, "and the widespread use of disposable personas in the online world raises many questions about the construction of identity."

Cheang was chosen, Drutt says, as an artist who creates challenging works that are native to the Web. The site is highly collaborative: Artists Susan Stryker, Jordy Jones, and Pat Cadigan all contributed to Brandon, and the Amsterdam-based Society for Old and New Media will launch a linked project, "Digi Gender Social Body: Under the Knife, Under the Spell of Anesthesia," this fall.

"Where would video art be today if the museum had gotten behind it in the '60s and early '70s? We're at a strategic point now where we're seeing a new generation of people who have been schooled in this medium," Drutt observes.

Drutt, a regular attendee at SIGGRAPH and other digital showcases, has been a longtime admirer of Cheang's art, he says, because it doesn't "foreground the technology and background the content."

Visitors to the site, however, may stumble over technological barriers that make some of the content hard to access. Macintosh users will find that the site crashes their browsers repeatedly. Download times — even on a T1 line — are long, and there's a scarcity of navigational tools on the site, which is intentional, says Drutt, somewhat testily.

"It takes a lot of patience and perseverance. It's art, it's not a didactic site." Putting nav bars so visitors can hop effortlessly from one section of the site to another would be "like putting explanatory text next to a Van Gogh painting," he contends.

Other site glitches — such as multiple "file not found" messages appearing in the "Panopticon" section — represent content-to-come, Drutt promises: "This is Brandon 1.0." Cheang was unavailable for comment. Drutt is helping gear up the Guggenheim for a major Web initiative he refers to as "the virtual museum," to be launched next year.

By commissioning Brandon and other Web-native projects, Drutt says he is "forcing" the museum to wrestle with difficult considerations about archiving, conservation, and ownership of new art forms in the digital age.

"Rather than shy away from those questions, we're embracing them," he says.

'All of Her Life'

'All of Her Life' was given a reading at Esprit '98. Participants in the conference, most without any acting experience - but eager to help portray a subject near to their hearts volunteered for the roles. Following the reading, Jeff commented that it was the most powerful rendition of the play he had witnessed. Obviously he was not alone, as there was not a dry eye among the actors or the audience. Mykael and I are proud to offer you an exerpt from this remarkable play. Some of the scenes from the version I received late this past May were removed to preserve the flow of the story while accomidating the space requirements of this issue. We pick up the play in medias res:

Jeff Sheviowitz

I was born in 1958, in Los Angeles County. My family is Jewish, but we never went to services, or anything like that. At the age of 18, I told my parents I wanted to have a sex-change, and they freaked, which scared me. In 1982, after a suicidal depression lasting the better part of my teens years and early 20s, I was given Jude Patton's name and went to see him. I transitioned very easily and smoothly, getting support from my friends, if not my family.

Around 1983, I began the group UNDER CONSTRUCTION, for FTM men. We had weekly meetings for several years and then took a rest. (I have a letter from Lou Sullvan around '84 or '85 saying that hearing about my group motivated him to hold the meetings for his group on a regular basis. His group, of course, evolved into FTM International.) Around '92, I started it up again, this time holding meetings on a quarterly basis. It has beengoing ever since.

During this same time, I've been speaking at college and University campuses in the Southern California area. I've spoken at Human Sexuality, Sociology, and Psychology classes about my personal experiences as well as some of the medical background about trans sexuality. Among the ones I've spoken at are Cal State Fullerton, Cal State Long Beach, University of California at Irvine, Cal State Northridge, Long Beach City College, Orange Coast College and others.

In 1984, I began taking Hebrew and Torah study classes in preparation for an adult Bar Mitzvah. In 1985, I had my Bar Mitzvah, the culmination of close to a year and half of study.

"All Of Her Life" is my first screenplay. It was a quarterfinalist in the Fadeln: Magazine Screenwriting Contest. Other writing endeavours include pitching to two different television series and nearing completion on a book that I ghost-writing for a Holocaust survivor.

Jeff

Setting: The office of Patricia/Tristan's psychiatrist, Dr. Lerman. Patricia sits back in her chair, becoming increasingly comfortable.

LERMAN: So you've felt like this for exactly how long?

PATRICIA: I can't remember a time when I didn't feel this way.

LERMAN: But now, at the age of 19, you're doing something different.

PATRICIA: Now I know that something can really be done. When I was a kid, every year when I blew out the candles on my birthday cake, or saw a shooting star, I'd wish for the same thing: to wake up as a man, or at that age, as a boy. Over the years I've spent a fortune in wishing wells.

LERMAN: Before we finish for today, I'd like you to tell me a little about your crossdressing.

PATRICIA: I don't cross-dress unless Mom forces me to. She'd be thrilled if I wore skirts and dresses all the time.

LERMAN: You misunderstand. As far as I'm concerned, you're cross-dressing now.

PATRICIA: No, it's not anything like that. I dress like this because it's how I feel comfortable.

Setting: women's clothing store -early evening. Tami, at this time a 20 year old sales clerk, straightens up a rack of clothes. Patricia comes in. While she is there only at the command of her mother, she hums happily, her mood exuberant. She half-heartedly looks at the clothing.

TAMI: May I help you, Sir?

Patricia glances up, surprised and extremely pleased. She responds, trying to speak with a deeper voice without sounding ridiculous.

PATRICIA: Just looking.

TAMI: Maybe something for your girlfriend, then?

PATRICIA: I don't have a girlfriend.

TAMI: Oh. Your mother?

PATRICIA: No. I just thought what better way to meet a nice, attractive woman. And I did.

Embarrassed, flattered, Tami lowers her eyes, no longer meeting Patricia's gaze.

TAMI: Thank you.

PATRICIA: Oh, and I have to get something for my sister for a graduation.

TAMI: Do you know her size?

PATRICIA: 'Bout my size. We're.. twins.

TAMI: We have some nice things over here.

PATRICIA: Actually, I'm running a little late right now. Are you going to be here tomorrow?

TAMI: Yes.

PATRICIA: So will I.

TAMI: Uh, what's your name?

PATRICIA: Tris.

TAMI: Short for 'Tristan'?

PATRICIA: Huh?

TAMI: Tristan. He was one of King Arthur's Knights of the Round Table. He was in love with the beautiful maiden Yselda.

PATRICIA: I never read that. I will, though. I promise. See you tomorrow.

Patricia leaves. Tami goes to another Clerk. She draws the other woman aside.

TAMI: I just met the nicest boy.

CLERK: When?

TAMI: Just now. He's coming back tomorrow. I'm waiting on him. Even if I'm on a break, you come get me.

CLERK: Do you mean that guy you were just talking to?

TAMI: Yeah.

CLERK: I hate to break this to you, but he looked like a gay boy to me.

TAMI: Jealous.

CLERK: Bet you.

TAMI: You're on. Loser works next Saturday night.

CLERK: You're on.

Setting: Livingroom - evening. On the couch, Lenny (Patricia/ Tristan's father) watches television, flipping between several different sporting events. The front door opens and Patricia comes in. Without turning around, Lenny shuts off the television.

LENNY: Tris. Come here a minute. Sit down.

PATRICIA: Sure.

Marcia (the mother) joins them from the kitchen. She sits next to Lenny, allowing him to talk, too upset to do so herself.

LENNY: Are you a lesbian?

PATRICIA: It has nothing to do with that.

MARCIA: You've never even been with a man.

PATRICIA: You don't get it. I am a man. That's how I feel about myself. If I were with one, then I'd be gay.

MARCIA: How can you say that? You're an attractive woman. And even if you were a lesbian, it's nobody else's business. We don't have to say anything.

PATRICIA: That's not the reason.

LENNY: You'll never be a real man, Tris. No matter what people have told you.

PATRICIA: What is a 'real man', Dad?

MARCIA: So that's what you want. To end up like that freak on the show today.

PATRICIA: Is that really what you thought of him?

MARCIA: Yes. What kind of life are you going to have? Who would ever want you?

PATRICIA: A loving, understanding woman.

MARCIA: You're being very selfish and thoughtless.

PATRICIA: Is that what you really think of me?

MARCIA: Yes.

LENNY: Honey, please....

PATRICIA: Maybe you'd be happier if I moved out.

MARCIA: Maybe that would be for the best.

PATRICIA: Fine.

Patricia runs upstairs.

LENNY: Tris!

MARCIA: You were no help at all.

LENNY: What the hell do you think you're doing?

MARCIA: I can't watch her destroy herself.

LENNY: Throwing her out won't solve anything.

MARCIA: Then you come up with something. I can't take this anymore.

Setting: women's clothing store - late afternoon. Patricia enters. The Clerk goes in the back. Tami enters.

TAMI: Hi. Ready to spend money?

PATRICIA: Turns out I don't have to. I promised you I'd be back today, though.

TAMI: Do you have a minute?

PATRICIA: Sure.

She leads the way to the back of the store. Patricia follows.There is a small room with the time clock, a table, a couple of chairs, a coffee maker, etc., and a small fridge. No one is there.

TAMI: Something to drink? Soda? Coffee?

PATRICIA: No, thanks.

TAMI: I know this is going to sound strange, but may I ask you something? Something personal?

Patricia automatically backs up, growing tenser.

PATRICIA: Sure.

TAMI: Are you gay?

PATRICIA: What do you mean by that?

TAMI: Well, you know. Are you into guys?

PATRICIA: No. I'm not.

TAMI: Good.

Impulsively, she kisses Patricia lightly on the cheek. Embarrassed, she quickly walks out. Patricia remains immobile, stunned.

Back in the public space of the clothing store, Tami smiles broadly as she passes the Clerk.

TAMI: I'm going to love having next Saturday night off.

Setting: two months later - late afternoon in a park. Patricia and Tami finish a picnic meal. Tami begins to clean up. Patricia stops her.

PATRICIA: I'll get it. You relax.

TAMI: Are you okay?

PATRICIA: Yeah. Fine.

TAMI: You've just been very quiet today.

PATRICIA: I've been thinking a lot. About you. About us.

TAMI: So have I. You're different from any other guy I've know.

PATRICIA: I sure am....

TAMI: And I think I'm falling in love with you and it's a little scary.

PATRICIA: That's exactly what I need to talk to you about.

Tami sits quietly, waiting. Patricia, too anxious to speak, instead makes certain everything is cleaned up and put away. Finally, Patricia sits across from Tami, hands folded, trying to find words.

TAMI: Do you want to stop seeing each other?

PATRICIA: No. But that's what I'm afraid of. I.. think I love you, too. I don't want to do anything to hurt you.

TAMI: Then what's this all about?

PATRICIA: Do you know what a transsexual is?

TAMI: You.. .want to be a woman?

PATRICIA: No. That's the body I have.

It takes a couple of moments for Tami to make the connection. As soon as she does, she stands, glaring.

TAMI: You waited two months to tell me! How dare you.

PATRICIA: When should I? The day I met you? Would you have gone out with me?

TAMI: Of course not.

PATRICIA: That's what I was afraid of. You wouldn't have given me the chance. Should I have told you on the second date? Right after dinner, but before the movie.

TAMI: You made me love you.

PATRICIA: So did you. I didn't think it would happen so fast. Then I was afraid you'd hate me if I said anything.

TAMI: How long were you going to wait?

PATRICIA: I was almost hoping you'd want to stop seeing me. Then I wouldn't have to tell you.

TAMI: Sorry I ruined your plan.

PATRICIA: You're right. I shouldn't have waited. But you never answered my question. When would have been a good time?

TAMI: I need to think about all this.

She takes the picnic basket and walks to the car.

Setting: driveway of a small apartment complex. Patricia, dressed in baggy sweatclothes, washes her car. She can be easily taken for an average young man. Her hair is now cut in a very masculine style. A car pulls into the driveway. She glances up. Recognizing the car, she stops washing her car. Lenny and Mark (Patricia/ Tristan's brother) get out of their car. Lenny stands by the car door, staring at her, unsure what to do or say. Mark goes to turn off the water. He looks at Patricia, evaluating.

MARK: Nice haircut, Tris. You look like a geek.

PATRICIA: Thanks. That means a lot to me, coming from someone who should know.

MARK: I don't get it. You'd rather be a geeky guy than a cool girl.

PATRICIA: So would you.

MARK: Yeah, but that's different.

PATRICIA: No. It's not.

LENNY: Do you have any idea how much this would hurt your mother? To see you like this?

PATRICIA: Yeah. I think about that a lot. Do you know how much it was hurting me not to do this?

LENNY: I don't understand any of this.

PATRICIA: That's okay, Dad. I'm not sure I do, either. I just know how I feel.

MARK: You shouldn't call Mom anymore. She's been wigged out ever since she talked to you.

LENNY: Why are you doing this?

PATRICIA: Dad. Would you and Mom come see my therapist? Maybe it would help.

LENNY: I'll ask, but I can't promise.

Lenny steps toward her, wanting to hug her, but a distinct awkwardness prevents him. He doesn't know how to deal with her anymore. He finally, tentatively, holds out a hand. She takes it and they formally shake hands.

PATRICIA: Thanks, Dad.

LENNY: I can't promise anything.

Setting: Patricia's small apartment. Patricia intently works on an architectural model, the pieces of which are spread over the coffee table. The doorbell rings. Puzzled, Patricia finishes putting a piece in place before rising to answer the door. She opens it.

TAMI: Are you going to ask me in?

Too stunned and afraid to say anything, Patricia simply opens the door wider, gesturing to a chair. Tami comes in and sits down. Patricia closes the door and sits on the couch across from her.

PATRICIA: I was afraid I wouldn't see you again.

TAMI: That thought crossed my mind. Along with about a million and one other things.

PATRICIA: My feelings haven't changed. I guess a person can change just so many things at a time.

TAMI: Neither have mine. No matter what argument I make, I always come back to the same thing: Tristan is' the man I want to be with.

In preparation for this article, I interviewed several leading authorities in the area of psychotherapy and the "gender community." Because some of the opinions expressed by these professionals might draw attack by those who disagree with their opinions or practices,

I will not name names nor quote individuals here. Moreover, I have changed certain inconsequential specifics to further disguise the identity and practices of individuals whose experience I have drawn upon. My intention is to fuel conversation, consideration and re-evaluation, but not to instigate or in any way support attack upon individuals and/or their practices.

Ethics and Transgender Care

Nancy Nangeroni

Recently, a transperson in San Diego shot to death both herself and her therapist. In the days following this horrifying incident, at least one person alleged that the therapist employed unconventional technique. This self-identified client reported that the therapist employed a strategy of heightening the stress upon her clients, reportedly as a test of whether they could handle post-surgical issues. Later reports did not contradict this, but defended the therapist as a friend of the community. Whatever the therapeutic technique being practiced, the outcome was deadly.

In a Massachusetts prison, a transwoman wastes away, convicted of murder. Hir story: s/he had been intensely conflicted in hir gender issues, and had become addicted to alcohol and drugs at an early age. Finally, though, s/he began to get hir act together, getting sober and clean while seeing a therapist. When s/he confided hir gender issues to the therapist, s/he was told, "what you needed is a good woman, and I'm that woman." They became lovers, and s/he moved in with her therapist, during which time the therapist's temper surfaced on multiple occasions. During one temper outburst, she attacked her lover and former client, first with scalding water, later by threatening hir with a knife. S/he blacked out, coming back to consciousness two days later to find hirself charged with the murder of hir therapist. S/he now passes hir days in county jail trying to obtain some modicum of justice and the hormones s/he needed from the start.

These are just two cases of questionable treatment by presumably well-intentioned care providers apparently leading to disaster. There are more. The frequency of such tragedies, occuring much too often for a population as small as ours, demands some questioning of what is going on.

Many members of our community suffer from attention deficit disorder. Doctors think the problem is an inability to pay attention to one thing for any great length of time, but I think that's just the symptom of a serious lack of attention received. Individuals in our community often lead isolated lives, never sharing a part of themselves with others. This leaves us without loving attention in the area of our gender difference, and vulnerable to all who would give us the positive reinforcement we so desperately need for our sense of wholeness. The good feeling that comes over us when a person from outside the community tells us we are beautiful is as irresistibly euphoric to many as crossdressing itself. We fall over each other declaring our appreciation for such persons, putting them on

Photo: Mariette Pathy Allen

a pedestal of welcome. Too many of us suspend critical judgment of their practice, equating gratitude with trust. Too often we become easy prey for all who would take advantage, whether by design or by accident arising from bad practice.

On the other hand, our community has had to teach the medical and psychological professions about ourselves, laboring at great length to counteract the historically transphobic approach of both professions. Disillusionment with health care professionals runs strong, especially among transsexuals. Many transfolk wind up treating such caregivers as necessary obstacles who are either incapable of or unwilling to make the effort necessary to reach a true understanding and appreciation of our whole selves, but whose services nonetheless fulfill real needs. Though distrusting the caregiver, these trans clientele are made particularly vulnerable by their lack of participation in a genuine process of self-inspection and true dialogue.

At the same time, some caregivers have developed loving and supportive relationships with trans individuals and community, and seek to be of real service to our needs. These good people are helping educate their professions to greater understanding and more appropriate assistance for gender-diverse peoples. But in doing so, some of these people cross the line that their profession normally draws around appropriate relationship with their clientele. Therapists who socialize extensively with their client community are performing acts which their profession frowns upon. And yet, gender-variant people continue to line up for their services. What is going on here? Are transgenders mere lemmings, ignoring conventional wisdom in flocking to the promise of help without heed for actual results? Or are the services being given to our community necessarily outside of conventional ethics, a necessity brought about by our own outlaw status in this society?

I was attending a party at a convention when a therapist who I knew only by name walked into the room. As this person entered the room, at least half the transwomen in the room - probably 20 in all, presumably all clients of this therapist - began applauding. I was surprised to see a therapist encouraging this sort of relationship with their clientele, one which seemed to engage clients in a state of mild hero worship, which could not help but distort their ability to critically judge the therapist's advice.

Contrast this to another therapist I know who attends community events rarely, because s/he has a deep and abiding respect for maintaining boundaries which facilitate hir effectiveness as a therapist. While availing hirself of the best of the available literature on the subject, s/he scrupulously avoids situations which would place hir in a conflict of interest which might influence hir ability to objectively advocate on behalf of hir clientele, and argues strongly for such practice.

When I sought out a therapist for myself, I chose someone who was not too close to the community, because I was concerned that too much immersion in the trans community would prejudice their perspective. I also chose someone who was not a transperson themselves, for the same reason. In retrospect, I was certainly prejudiced by an earlier encounter with a therapist who was also a transperson, and another who was a community regular, both of whom had behaved quite inappropriately. However, there are some excellent therapists who are also transpeople, and there are also some excellent professionals who spend significant time at community events. On balance, the most important characteristic for a therapist is neither familiarity nor distance, but rather a healthy approach that acknowledges the difficulties in providing truly unbiased service. There are both good and bad therapists inside and outside the community, and there is also a chemistry that acts between therapist and client that can render a therapist who is enormously helpful for one person completely ineffective for another. Thus each individual client must exercise great care in finding the therapist who will be good for them.

While it is theoretically possible for a therapist completely unfamiliar with transgenderism to render appropriate, non-prejudicial service to a person of non-conforming gender, it is unlikely that they will be able to do so. Likewise, while the therapist who is transgender or personally involved with the transgender community may have the best possible intentions, it is also unlikely that they will be completely free of prejudice about what is the "right" approach to transgenderism. For some trans clients, doing the opposite of what most others would advise is the healthiest possible course, and it remains the therapeutic challenge to recognize such diverse truths. The therapist must walk a fine line between making good use of their extensive experience with trans issues, while still allowing themselves to put their prejudices on hold and be educated by their client to new solutions that might not have been previously advisable or even possible.

A conscientious therapist must find a balance between, and allowing for the emergence of new forms of diversity for which there is no precedent, or with which precedent the therapist is simply unfamiliar. This begs the question, how does the therapist walk that line between ignorance and short sightedness, and how does the trans client judge the therapist's effectiveness in doing so?

A good starting point for the client in making a judgement of their therapist's bias is to discuss it. Prejudice is the distillate of experience, and all people hold some amount of prejudice. Anyone who denies that they harbor prejudice is being unrealistic and simply harboring their bias under a veil of denial. Such people might be dangerous as therapists and should probably be avoided. Prejudice which is openly discussed, however, can be allowed for and counteracted consciously, hence robbing it of much of its power. Thus, an open and ongoing discussion of bias in the therapy setting is not just a good idea, but essential to a therapeutic relationship that is to be truly healing.

All of the respected professionals I interviewed spoke of standard ethics practices which would limit contact between therapist and client outside of the therapeutic setting. By all accounts, standard practice is that the therapist should give notice to the client if the therapist will be appearing at a social function at which the client is present. The issue is vulnerability, and the client's need to enjoy their private space without word or action from that space influencing their therapeutic relationship. And yet, even while all of the professionals I spoke with follow this same rule, there is considerable latitude in their interpretation. Some will go to great lengths to avoid contact with their clientele on the grounds that any contact is potentially injurious, especially if their client is closeted with respect to crossdressing. Other professionals feel that a show of friendliness is important in creating an atmosphere of acceptance and trust, and that to obviously avoid such is damaging in itself.

Mental health professionals are bound to keep confidential the identities of their clientele. Standard practice holds that the therapist must not, upon a chance meeting in public, acknowledge the therapeutic relationship. This protects the client, whose reputation or other relationship might be damaged by the knowledge that they are in therapy. While the National Association of Social Workers (NASW) Code of Ethics allows therapists to identify clientele given their permission, some professionals regard the publishing of real names in written works as bad practice.

There are some limits for all mental health professionals that are firm and easy to identify. They may not engage in a sexual relationship with any client past, present, or future. This means that they may not accept a client who is a former lover, or become lovers with any former client. Any sexual advance by a therapist towards a client is a serious ethical violation, and should never be tolerated. Therapists also cannot violate any confidence, except when a person is dangerous to themselves or others, in which case they are required to report it to authorities.

I asked what kinds of guidelines we might provide to members of our community, for how they can determine when a therapist's behavior is out of bounds. The answer is unfortunately not simple. Clearly, sexual contact is completely unacceptable. Any touching that makes the client uncomfortable is also inappropriate. If something your therapist says or does strikes you as strange or makes you uncomfortable with that person, the first thing to do is to discuss the matter with the therapist. In most cases, this will resolve this issue. If it does not, get the opinion of another other helping professional. It is an unfortunate fact that there are practicing therapists who have serious emotional problems, and each of us needs to maintain some alertness against such people. As one therapist said, "Just because you're a therapist, doesn't mean you're healthy." Make sure your therapist has, at a minimum, either a therapist of their own, or a consultation group that provides some oversight to their practice.

Finally, there is the issue of marketing. It has long been the practice of surgeons to attend conventions and conduct sessions describing the surgeries they perform. While such sessions are of great interest to individuals, they are also great marketing opportunities for the surgeons, who drum up considerable business with such appearances. The same holds true for mental health professionals. Standards of practice frown on all but the most conservative self-promotional practices.

One professional stated that too often, therapists who are not experienced in gender issues insist on holding onto clients rather than referring them to more qualified individuals. While there are still too many geographical areas where there is no such qualified help, fortunately this is changing. While we need to keep developing knowledgeable practitioners, these days there is no reason why they cannot get their education by attending conventions and training sessions. Clients should not have to educate their therapist.

There is clearly a spectrum of behavior on the part of our community's therapists which crosses the line beyond which individuals can and do get hurt, sometimes tragically. Were it not for our culture's devaluing of transpeople that leads to less serious interest in our hurts, we would probably be hearing far greater outcry, and might have more help in policing exploitive behavior. However, this is the society we live in, and nobody's going to fix it for us. We're doing a good job of educating caregivers about the healthy and beautiful aspects of gender diversity. Perhaps now it's time to take a critical look at the care we are receiving — and paying for — and to insist on the highest standards of performance and ethics.

How can we determine when a caregiver's behavior is detrimental to one or more members of our community, and what should we do about it?

What can we teach individuals to empower them to identify when their therapist's behavior is out of bounds, and how best to handle such situations?

To what extent should we welcome therapists at social events, and what, if any, guidelines should be maintained for their behavior in such a setting?

How can we assure that professional participation at events is educational rather than business-oriented?

These are questions that neither I nor any other individual can answer for everyone. The answers are many and varied, and depend upon individuals and situations. Perhaps what we need to do is teach not the answers, but the questions.

Miqqi Gilbert is a philosophy professor at York University. As a "committed crossdresser," Gilbert is a part of the new wave of trans-people who are no longer prepared to remain hidden and silent.

There is "Out" and then there is "OUT!"

Miqqi Gilbert

A little while ago I received a call from a journalist named Robin Wilson who was doing an article for the Chronicle of Higher Education. The CHE is the major "trade" paper for colleges and universities in the States. It carries news and views concerning academic life, and is also the major official organ for job postings and such like. Robin's article concerned transgendered faculty and grad students currently at North American Universities. She'd gotten my name from my dear friend Jacob Hale who teaches philosophy at CSU Northridge, near Los Angeles.

In 1995 while I was resident at the Centre for Feminist Studies at the University of Southern California, the CHE had published a big article on Deirdre McCloskey written by Robin. Deirdre had previously been Donald, a world famous economist who had suddenly announced her intention to go full-time as a woman. The article was well written and very sympathetic, so I greeted Robin's request for an interview with pleasure. And, indeed, the interview was thorough, and the resulting article, published in the February 6 issue of the CHE, was what I expected: one might cavil about details, but it was generally sound. Also, the CHE had hired a local photog to come and do a shoot of me, and I thought the accompanying picture was reasonably good.

The article was re-produced on their web site, http://chronicle.com/colloquy98/transgender/background.htm, and there I was along with a number of other TG academics, most of whom I knew. The whole thing was good fun, and I got some nice response from folks who saw it.

I was in Florida two weeks later visiting with my mother. On Sunday night, Feb 22nd, I received a strange email from someone I didn't know saying something about the Globe and Mail that made no sense to me. I figured it was actually about my web site and ignored it. The following morning, Monday, I telephoned my wife at her work to wish her a good morning. That's when I learned that the Toronto Globe and Mail had purchased and reprinted the CHE piece, including a huge picture of me in the Focus section of the

Saturday Globe. I had no idea they were going to do this, neither, of course, did she. Or our children.

Well, as many of you know, I'm one of those rare "out" cross dressers. But, dear friends, there's "out" and then there's "OUT." I still get flashes of people from my past who certainly saw that article-old friends, ex-lovers, students and colleagues, and I have to confess that I giggle. The great thing about it all is that once your picture has been displayed en femme in Canada's national newspaper, you have nothing else to fear.

The other side is that I can use my position to serve as a lighthouse for other cross dressers who do not feel able to be open about their dressing. Just the other day I received a letter at work from a 75 year old cross dresser who had never before really told his story to anyone else. He now knows that someone, somewhere understands him and feels empathy with him. A while later I received a series of emails from a little eight year old girl (via her father). She prefers to dress like a boy and wanted to know how I coped with the washroom problem-seems she gets yelled at regularly.

A lot of my TG friends have asked me what the reaction has been, have I received any bad stuff? The simple answer is, no. It's all been good. It's all been people, straights, stopping me and complimenting me on my courage and saying how great it is that I took a stand. Oh, sure, at my tennis club one guy suddenly looked to see if my legs were shaved, (they weren't, that day anyway,) but anyone who wasn't impressed is just too polite to mention it.

I suspect that many of us who feel we "can't possibly come out" don't really appreciate just how little other people care about our private lives. I'd be the last person to urge anyone else to come out or go public-I would never want that responsibility, but I can suggest that a lot of the fear comes from within. Who knows, maybe it's true, and we really do have nothing to fear but fear itself.

I said that was the simple answer, because on the other hand, while everyone is very supportive and positive, the key remark they all make is very revealing: Everyone tells me how brave I am and how much courage I have to go public. The first few times I heard that I was flattered. But the more I thought about it, the sadder it became, because if we deconstruct that praise, the message is clear: Coming out as a cross dresser takes a lot of courage because it is a real violation of gender norms. It is outrageous and shocking. Anyone who admits to being a cross dresser, these folks seem to be saying, is taking huge personal risks. If otherwise, then I do not deserve to be complimented on my courage. Would that the compliment were unnecessary; would that men could live and be how they wanted without having to take risks and stick their necks out just because they like to wear skirts or pumps.

But it's not like that. What it's like is that if you cross the gender divide you are an outlaw and will be talked about, pointed at, forced to appear on television talk shows, and have to make the whole thing a far more central part of your life than you ever chose to. But then I've also come to know how important it is to do just that. There's that letter I got from the 75 year old man and the eight year old girl, and maybe there are other men, and women, who perhaps feel a bit less alone, less isolated, even less suicidal, because they read about someone else like them. And maybe if we all did it then no one would even notice.

Let Us Not Forget

Katrina C. Rose

Though neither the first transsexual nor, now, even the most famous, Christine Jorgensen initially made headlines in 1952 and 1953 - popping up intermittently after that prior to her death in 1989. For most people unfamiliar with TG issues, the transsexual historical timeline has a large gap between Christine Jorgensen in the 1950's and Renee Richards in the 1970's - a black hole with nothing in it: no names, no lives, no stories.

Of course, there were plenty of stories in between Christine and Renee. Though most TSs of that era avoided the limelight, not all managed to do so. Jorgensen was outed as publicly and as sensationally as anyone can be. And, later there was the occasional article on an individual transsexual - usually just a few short paragraphs. In the research that I did for a law school seminar paper last semester (on transgender issues - go figure), I found several of those all-but-forgotten stories. And one was Charlotte McLeod's.

The story of how Charlotte emerged from Charles can be found in the March 8, 1954 issue of Time. The brief piece starts off by referring to SRS simply as "emasculation." No - not very enlightened. But remember, this was 1954. Segregation was not only still legal, but considered by many to be a really cool idea.

The Time article stated that "Last April, after carefully reading the news of Christine's treatment by Danish surgeons, Charles took ship for Copenhagen. He found that the Danish Ministry of Justice had ordered doctors not to perform an emasculating operation on any more foreigners." This order was due to the sensationalistic press coverage of Jorgensen's surgery. "Charles told his troubles to a helpful taxicab driver, who took him to a quack. For a sizable fee, the quack performed a crude operation, using a kitchen table for an operating table." Hopefully, this was the same character who did the work on Jack Napier's face in the first Michael Keaton Batman movie. We all know what happened to that quack.

"Two weeks later, Charles dragged himself to Copenhagen's Bispebjerg Hospital, determined to complete the Christine treatment. Since his condition made him an emergency case, doctors gave him further surgery, and he received hormone injections." SRS was effectively illegal in the United States at the time - although the actual illegality centered on so-called mutilation of the sex organs.

Charles McLeod, a person who "was regarded as an efficient bookkeeper and typist" but could not hold a job "because of his effeminate ways," could not get legal treatment here - and, following the press coverage of Christine Jorgensen's transition, could not even get it in Denmark. He had to go to a butcher.

As I read the old Time article, I couldn't help but draw an analogy between McLeod's predicament and that of a woman of that era facing an unwanted pregnancy and seeking an abortion. Perhaps its not a perfect analogy. After all, despite self-imposed timelines that many of us try to adhere to, no TS has a genuine 'nine months or else' deadline like that of a pregnancy.

As I was writing this piece, I couldn't help but wonder if I might be re-aiming an unwanted spotlight at Charlotte. I have no idea what became of her after 1954. In fact, I don't even know if she is still alive. I certainly hope that Charlotte is still with us and is enjoying the life that all of us deserve - a normal one. I also hope that she doesn't mind me reminding the world of Time's 1954 intrusion into her life.

Katrina C. Rose is a 1998 graduate of South Texas College of Law (currently studying for the Texas bar exam) and is a contributing writer for the Texas Triangle. She may be contacted at TexKatrina@aol.com.

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The Case of Mistaken Identity

Gordene MacKenzie and Nancy Nangeroni

My name is Joan don't f*ck with me boys Crawford. I am a gender detective. I think of myself as twice born. Most of my childhood was a bad accident waiting to happen as I attempted to be the boy I knew I was, which set off serious institutional and parental alarms. Uncomfortable in my lean but female body, I spent a childhood of incarceration. Finally, at the age of 30, my body and I signed a peace treaty and I emerged as a monarch butterfly, having finally come to terms with being a transvestite/drag queen who is turned on by sequins and gold lace.

A few birthdays and several stiff psychedelic whiskies later - I had a revelation that forever changed my life. I realized that the sequin was the basic building block of all life. Because of my loud appearance, penchant for sleeping late, and a deep grainy voice, I've spent a lot of my life doing, shall we say, "odd jobs." That ended a few years back when I bought a cheap 9mm Hungarian luger and a beautiful carved leather lined in crimson velvet shoulder holster. Then I hung out my shingle as a private eye. I hired a former lover who is a great undiscovered artist to paint the Egyptian Eye of Horus in gold leaf under my name, hoping this would influence the caliber of clientele contracting my services.

It was on my first assignment that I met my associate and fellow drag detective Norma Diva Dyke Desmond. I had been hired to investigate a drug smuggling case. It seems a manager of one of our finer fabric stores was importing white powder along with all that gorgeous cloth. I went undercover, posing as a store clerk. It was a tough case to crack, but I loved being surrounded by all that lush material.

A week later the case was going nowhere. Clues seemed to be eluding me. I was about ready to give up when I noticed a new bolt of fabric had arrived. I sought refuge in the sensual comfort of this new, lush, gold lace tipped fabric with smoky black highlights.

As I began to wrap myself in the luxurious beauty of color and texture. I realized someone already had the same idea. Backing out, I grabbed my holster, I heard sighs of pleasure and thought I caught the reflection of sequins shining like mirrors on the tile floor. I gripped my gun firmly in both hands, finger on the trigger, and shouted: "Come out of that bolt of fabric with your arms raised." I heard a nervous laugh, like a hyena echoing, through the sensuous cloth. A moment later I was face to face — or gun to face — with Norma Diva Dyke Desmond.

The magenta sequin band s/he wore around hir bright red henna hair disarmed me. Hir braceleted arms were raised, protecting hir face. I shamefully lowered my weapon. In a throaty but high pitched voice s/he admonished "sweetie, darling, be careful or you'll hurt someone with that." No one had ever talked to me like that. I entertained the idea that perhaps I had just met another person like myself — a transvestite/drag queen. S/he stood scared, but defiant. One hand rested firmly on the hip of hir soft pink and white flower print silk skirt. The other hand s/he held quizzically beneath hir three-day-old stubble on the chin of hir heavily made up face. We drifted over to the sequin section while s/he recounted details of hir life. Before long, she had helped me crack my first case.

Norma defined as a young TG, a bit edgy over the trauma of being a male-born woman. S/he had left the farm s/he was raised on and headed for the big city in hopes of finding others like hirself and more tolerant of difference. Before finding either s/he ran out of money and had taken up, in desperation, with a not too kind T chaser who, besides paying her bills, also happened to be the drug smuggling manager of the fabric store.

With the case solved and Norma's former sugar daddy sent up the river, Norma needed a job. In one afternoon our mission was clear. I would train Norma as my associate and together we would be gender detectives investigating gender crimes.

One drizzly windy autumn afternoon Norma and I were taking a fabric break from our busy caseload. Norma was enthusiastically redecorating the office in red metallic cloth accented by wild striped and spotted animal print faux furs. We were both prancing around the office draped in some of the cloth when the door flew open and a skinny M2F girl ran into our office dripping wet and scared. S/he looked to be about 16 and was a good pass. Looking her over, my attention paused briefly as I caught the hospital bracelet still dangling from her wrist. I smelled danger and she noticed.

"Please help me, they've been torturing me. I don't want to be a boy, I can't, please, don't make me go back there!" Her nervous anxiety was infectious and her eyes pleaded with all the intensity of a wounded and trapped animal. Somebody slugged me with a hammer in the place where my heart usually sits.

"Please don't make me go back there," she continued, "they're evil, I couldn't stand it, I'll kill myself!"

"It's OK, honey, nobody's making you go anywhere," interjected Norma, who seemed to have a good instinct for this.

"Where is 'back there?'"

"It's a hospital, a prison, a mental hospital where they lock you in and torture you for not being the way they think you should be. I hate them."

"Do you know why you were there?" Norma questioned gently.

"It was my parents, they hate me because I'm not a regular boy. They put me there so that the doctors could make me into a regular boy. But I won't do it, I can't. It's all wrong for me, I just need to be a girl, I don't know why, but I do."

Hir frightened but strong brown eyes pleaded with us to help hir avoid going back. I tossed the red metallic cloth I'd had draped over my shoulder holster, my tailored coat and trousers, then gave her thin hand a warm shake.

"What's your name, honey?" I softly asked.

"Brenda."

As I introduced myself and Norma, who had shed hir cloth to reveal her tight red leather miniskirt, I noticed recent bum marks on Brenda's temple, and knew they were caused by a recent episode of electroshock therapy. We had our work cut out for us.

Norma offered Brenda one of her large fake zebra print fur cloths. As s/he wrapped hir trembling thin body in the warm cloth and I fumbled to turn the thermostat up, Brenda recounted hir story. This one struck at our very cores.

It seems Brenda had endured a life of institutionally sanctioned torture for being a woman in a male body. Hir absent parents were frequently out of the country arranging for large U.S. businesses to "relocate" (too kind a word, no doubt) in so-called third world countries. As a result Brenda was raised in a small town by hir Fundamentalist grandparents. Because they viewed film and TV as instruments of the devil, most of Brenda's early awareness of transpersons came from the tabloids on the supermarket shelves. S/he embarrassingly recounted how tabloid stories like "Polluted Water Turns Man into a Woman" gave hir hope that s/he too could externally transform into a girl.

In a dramatic attempt at self-transformation, s/he had submerged hir adolescent body in the muddy waters of the Rio Grande River, hoping it's polluted waters would be the elixir to make her body female. When nothing happened, other than a severe case of mosquito bites, Brenda remained undeterred. S/he persisted in trying to live as the girl s/he was. In response, Brenda's grandparents took it upon themselves to cast the "she devils" out of hir through religious exorcisms.

After s/he nearly drowned during an exorcism, in which hir head was held under water too long, hir parents, whose sole religion is business, took hir to live with them. Their attempts to push hir toward gender conformity condemned hir to a different kind of hell. S/he was sent to a daily gender reorientation program at a local Gender Identity Clinic for young gender non-conformists.

Brenda's thin body had shivered ever so slightly as s/he recounted a typical day at the clinic, where any masculine behavior was reinforced and feminine behavior was punished. Hir vivid description of how s/he received blue tokens redeemable for rewards like money, ice cream, movies, etc. when s/he acted like a boy and red tokens redeemable for punishment when s/he acted like a girl made both Norma and I wince.

Under house arrest and guarded by parents who had become the gender police, Brenda's life became unbearable. If s/he did anything "girl-like" or associated with girls, s/he was severely punished — often beaten — by hir parents. At one point the family was talked into allowing a therapist to move into the house to monitor and video tape hir behavior 24 hours a day.

After a week of torture during which taped episodes of femininity would be used as evidence against hir, unable to hide her true feelings and in order to avoid punishment, Brenda ran away. S/he was quickly caught, arrested and spent two tortured days in a juvenile detention center with boys who beat hir up and threatened to rape hir for being a "sissy."

Back in the gender prison of hir own home, no longer able to keep up a facade, Brenda slashed her wrists in a bathtub filled with blue dye and floating orange slices, to the Door's song, "This is the End." As the music ended hir culturally battered body slid deep into the blood stained water.

Brenda woke up on the locked ward of a mental hospital, punishment for hir attempted suicide. Drugs and electroshock therapy were employed to try and burn the woman out of her.

A triumphant smile came across her dark face as s/he dangled the hospital keys s/ he stole. It was the first smile we'd seen. Norma and I, riveted to hir story, took a deep breath when s/he finished. Brenda raised hir hands dramatically, like birds in flight. "I've had enough of their torture. I was headed to drown myself in Mother Ocean, when I noticed your sign with the gold Egyptian eye and the words 'gender detectives investigating gender crimes.' It looked too good to be true, but I figured I'd give it a try. So, instead of dipping myself into another watery grave, I decided to come through your purple door instead. Can you help me?"

Norma's eyes clouded up, and I thought I could see the memories of hir tortured childhood re-emerging behind them. She had told me once about dressing in hir "girl clothes" behind the sugar shack before school. Childhood images still burned like kindling in hir mind.

Though my demeanor is stealth, I poured myself a whiskey to block out memories of spending a night in jail at 16 for running away from home, released only on the condition that I remove my jeans, boots and work shirt and put on hideous pink and white polka dot girl stuff. I had feared I would die on the long drive home and be buried as "just a girl." As my mind

Brenda slashed her wrists in a bathtub filled with blue dye and floating orange slices, to the Door's song, "This is the End." As the music ended hir culturally battered body slid deep into the blood stained water.

returned to the present, I took a stiff drink and noticed Norma's reflection in the mirror as s/he pulled hirself together. Being a gender detective, I'd heard such stories before, but always about someone else far away. This was the first time I'd heard of such a thing in my own backyard. Although my blood was boiling, my head was clear.

Our mission was twofold. We needed to try and bring some understanding about gender difference to hir parents, however difficult that might be with people who, according to Brenda's description, saw everything in terms of dollar signs. We also needed to somehow dismantle the narrow-minded clinic's idea of systematic brainwashing and torture that they routinely used against gender variant children.

First, though, we had to do something with Brenda. There are penalties for harboring minors, and I wasn't about to get stuck with that payment. We couldn't keep her at my place or Norma's because that would be the first place the authorities would look.

Fortunately, I've got an old friend who can always be counted on, especially when it comes to animals and kids who are being abused. She's a sweet old soul, as loving and reliable as the day is long, and we took Brenda to this kind woman's home, where we assured Brenda s/he would be safe. Although s/he looked a bit spooked, Brenda assured us that s/he would stay put. In return we had to promise to call every hour, and to warn her if anything bad might be headed that way.

With Brenda safely tucked away, our first stop was the home of Brenda's parents. The address Brenda gave us led us to one of the more expensive neighborhoods in the city, where the large homes, ostentatious in their obvious wealth, were set in showcase yards isolated from one another by walls of lush greenery. As we walked up the neat brick walkway towards the front door of the stark white, modern, uncomfortable-looking house, a dog on a short chain in the side yard barked fiercely. Armed with pamphlets and books from PFLAG and dressed down, most of our sequins on the inside (and in our briefcases), Norma and I rang Mr. & Ms. Mamerika's doorbell. The woman who answered the door appeared to be in her late 50's, dressed a bit too elegantly for home, but with a manner that said that she wasn't going anywhere. Her face was drawn by lines of tension around her mouth and temples, as if she suffered from a constant, nagging pain. "Yes?" she asked, curtly.

"Hello ma'am, I'm sorry to disturb you, but I'm wondering if we could have a few moments of your time. It's about your son." Even though I knew that Brenda was their daughter, they thought of hir as a son, and I needed to start someplace that made sense from the parents' perspective. "Who are you," she asked sharply, "and what business do you have with my child?" Her emphasis on my was clearly intended to demonstrate her ownership and, thereby, my lack of power in this situation. Which was true: in the eyes of the law, Brenda's parents own her just as they own the dog that had barked at us.

"My name's Joan and this is my partner Norma, we're detectives." I left out the gender part, figuring I better not tip my hand. If these folks were as transphobic as Brenda's description of their actions implied, the very mention of the word 'gender' might put an end to any progress. I handed her the special card I keep for just such situations, the one with just my name and address and the words "Detective for Hire."

"And what is it you want with my child?" This woman would have made a great drill sergeant.

"Well, ma'am, you see, we, my partner and I, that is, we received a phone call earlier today from someone who said they were your son. They were asking for our help and, even though they wouldn't meet with us, we felt that we had to do something. So here we are. Can we please talk with you and your husband?" Her eyes narrowed.

"Now you listen to me, Joan and Norman, I don't know who you think you are, but if you don't leave right this minute I'll have you arrested. And if I hear that you've spoken one more word with my child, I'll have your licenses, both of you. Now get out of here!" "But ma'am," Norma piped in, "we're just trying to help you and Brenda."

My heart froze. Norma, in her inexperience, had made the mistake of using hir femme name. As I turned to Norma in shock, I could see the agonized look in her eye that told me she knew what she'd done. Ms. Mamerika looked like she was having a heart attack. Her voice rose to a shriek. "How dare you! Get out of here right now! Bestor! Help me! Bestor, they're after my child!" Then she screamed a thin, high piercing wail that cut like a stiletto.

By this time Norma and I were already in full retreat down the walkway. We jumped in my car faster than I'd ever have thought possible, and I gunned it out of there. We never even knew if Bestor showed up.

Norma sobbed all the way home, as I stewed in thoughts of lost licenses and the quality of life on the street. Back at the office, we collapsed amidst the fabrics whose magical ability to impart comfort had diminished considerably. We both felt lower than low. Now we'd done it. How would we ever make Brenda's parents understand that s/he just needed love and acceptance, not discipline and brainwashing, if they wouldn't even talk with us? And now they'd never do that. We'd be lucky if they didn't come after us with resources that were clearly greater than anything we'd be able to muster in our defense. If Ms. Mamerika decided to make good on her threat, we were cooked. Not to mention what might happen if they discovered that we were keeping their daughter at a friend's house. If that little secret got out, we'd be spending the rest of our days inspecting prison bars from the inside.

My long training, though, with the help of more than my share of hard knocks, soon got me thinking back on a positive track. There was still the clinic; maybe we'd have better luck there.

Just then the phone rang. My heart sank as I remembered the business card I'd left behind. This would be the police.

The voice on the other end was deep, intense, and carefully controlled.

"Hello, is this detective Joan Crawford?"

I swallowed. "Yes, this is Joan, can I help you?" Though I tried to sound confident, I surely sounded as guilty as I felt.

"This is Bestor Mamerika."

My heart stopped. "Hello" I croaked, certain that he was about to announce the end of our careers as detectives.

"Is there some place that we can meet in private?"

Although it didn't quite dent the floor, I think I seriously bruised the underside of my jaw.

To be continued next issue...

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RI-P-M5499-K3302-88
Pre-op M2F TS. Full time female. Romantic optimist. Will correspond with pre-transition sisters, offer perspective and support. Member/ Secretary MORF? RI's TG Support Group. Support Youth Pride RI.

The tide of support is retreating from Dana International. Were this simply a matter of the public discovering a new bright star to fashion into their secular god. But the criticism Dana International is currently garnering has less to do with her uncontested talents, more to do with her sex, and everything to do with politics.

Dana International: Icon or Abomination

Matthew S. Carlos

Like any nineties pop star worth her weight in applause, Dana International has politics coalescing around her. But the action she's prompting isn't the high-minded tree hugging, save your forests, Don Henley sort of movement. The resource she's currently trying to preserve is her life. Upon winning the Eurovision Song Contest, Dana said, "This just goes to show the world is open-minded and liberated." Current events, however, may have her eating those words. International cancelled an appearance on Germany's television programme "Always on Sunday", saying she had been the target of death threats. Joachim Uhrig, a record company manager, quoted in Germany's Bild newspaper, mentioned the threats are a continuing problem.

From the beginning, Dana International received less than exultation from Israel's political conservatives. Shlomo ben Izri, a deputy minister in the Knesset (Israel's parliament) and member of the religious Shas party, called her "an abomination". Another Knesset member, Rabbi Shlomo ben Ivre said "choosing her is sending a message of darkness to the world." Perhaps Dana forgot these sentiments as she took the stage in Birmingham, England and thousands of Israelis around the world flooded streets in celebration.

Controversy is often a homo sapien attempt to expel pent-up hot air. But the debate currently raging in Israel is as much an attempt to define a national identity as transsexuals' efforts to forge a personal one. At issue is Israel's representation by an artist who clearly deviates from traditional religious and moral norms. The reluctance of many Israelis to unequivocally accept Dana's definition 'equality' is leading to an ongoing questioning of her suitability as representative and role model of Israel to the world. There is serious conflict over what message Israel conveys by dispatching a publicly funded transvestite to win an international contest.

David Bedein of the Israel Resource News Agency distils the contention into its blunt essence: "Does the victory of

represent a slap in the face of the people of Israel? Dana International's appearance was funded by the Israeli taxpayer, not by a private concern nor by any lobby group. The people of Israel remain by and large committed to family values. That commitment to family values overwhelmingly includes the 20% of Israel's population of non-Jews who share a family value vision that is commonly held by Jews, Christians and Moslems.

Bedein continues: "A common theme to all three religions in Israel, holds that if a person is born with traits as a man and a woman, or with any other handicap, that person deserves all the compassion and understanding in the world for his/her infirmity. As a social work professional, I see a crying need for appropriate treatment of people who suffer such incapacities, and no one should be judgmental or angry with a person who has been born with such problems. Yet to hold up a transsexual as a publicly funded model for Israel and all of the world to glorify can carry a skewed message from the government and people of Israel. It is as if a people who have promoted family values throughout the centuries are now proclaiming that 'we didn't mean it after all.' It would have been one thing for Dana International to have performed on behalf of a gay rights club or any other group that would have advocated recognition of transvestism or transexuality as a legitimate form of sexual expression. In a free world of expression, that would be their right. No one should interfere with such a right of assembly or freedom of speech. It is quite another thing to place such a person in a representational capacity of the state of Israel."

Dana is not without supporters. Her jubilant win was defended by the Reform Synagogues of Great Britain. Rabbi Dr. Jonathan Romain said: "Dana International's sexuality is totally irrelevant to her ability to sing well or perform on behalf of her country, just as anybody else's sexuality should have no bearing on their professional life unless it interferes with their work. What is much more disturbing is hostility directed towards transsexuals. They experience a major conflict of identity, being one gender physically, but the other gender emotionally. They feel they are living a lie and are trapped in the wrong body."

Nonetheless, after enjoying the kind of mass support Christ did as he

paraded through the streets of Jerusalem on Palm Sunday, Dana International is finding her continued support from the Jewish community similarly waning. The Simon Wiesenthal Center, contacted both Dana, and fashion designer Jean-Paul Gauthier to urge International to drop out of a Paris fashion show that coincided with a ceremony marking the anniversary of the 'Vel D'Hiv' swoop in which 13,000 French Jews were arrested by Nazis and sent to death camps in July 1942. The letter to Gauthier suggested he

demonstrate "respect for the sensitivity of the occasion." Dr Shimon Samuels of the Center said he had sent a letter to Dana's agent in Tel Aviv to ask that the singer reconsider her participation. "He told me that Dana will not be singing. She will simply be parading as a model and he saw nothing wrong with that, but for [Gaultier] to feature an already well-known Israeli star who happens to be Jewish in a rather frivolous and light-hearted event really violates the sanctity of the commemoration."

So it appears that as the limelight fades, one pop star is quickly discovering that using trans sexism as a marketing tool cuts both ways - leaving the transgender world's most recent poster child looking more like an advertisement for save the children.

Donna Colvin is a transsexual woman who came out and was politically active in the early 1970s. During that time she worked with Dr. John Ronald Brown who did SRS in San Francisco and Los Angeles. The following interview focuses on that time and is excerpted from a much longer interview covering her political activity, coming out immediately after Stonewall, and transsexual life in San Francisco in the 1970s. Special Thanks to TNT for this excerpt.

Dr. Brown, I Presume

Donna Colvin

TNT: How did you first get involved with Dr. Brown?

DC: It happened in 1972 when I moved into Triple GLH — the Golden Gate Gay Liberation House, which was located near Page and Divisadero. I was the first non-gay allowed into the house. At that time transsexuals were on the fringe of the gay community. Since I certainly didn't fit into the straight world, they let me stay. I became Miss Secretary for them, doing letters and office chores. I also answered their hotline phones. Well, one day a transsexual called up and wanted information on hormones and where and how to get started. I told her I would check and call her back. So I started looking and found some information on this Dr. Brown person.

TNT: Is that when you met him?

DC: No. I met Dr. Brown through Shannon O'Hara. It was at a party held at the Golden Gate Gay Liberation House. At that time I was famous for being the transsexual who lived at Triple GLH. Shannon came because she wanted to meet me. She said, 'You don't have to be here with all these gay men. I'm opening a halfway house for transsexuals. You should come and check it out.' Well, I went and Dr. Brown was there. He was the sponsor of the house.

TNT: Was this house for people just coming off the surgery?

DC: It was a transition house. It was called 'Sutter House' and was located on Sutter Street near Mt. Zion Hospital. The halfway house was run by Shannon O'Hara for Dr. Brown. Everyone there was called 'the Brown girls'. This was before Dr. Brown got in trouble. Sutter House was like a finishing school for transsexuals. Shannon O'Hara pictured herself as the ultimate transsexual. She was the headmistress going to teach us poor little things who didn't know how to dress the proper way to be a transsexual. Shannon and I had many clashes over this and I was thrown out of the house many times. Finally I said, 'The hell with you people, I don't need your halfway house,' and went back to Triple GLH. But Shannon and I stayed friends. When she went through her surgery she needed someone to help her, and I said, 'I will help you.' I did housework while she was recuperating. Then Shannon decided we needed to go to Hollywood because that was the center of the world as far as she was concerned. She packed us all up and off we went to Hollywood. This was in 1974 or 1975. Dr. Brown had already moved his main practice to the LA area because he had quite a few accidents here in San Francisco and was asked not to perform any more surgeries for awhile.

TNT: What sort of accidents?

DC: One problem happened when he was doing surgeries in the kitchen of a house on Lombard Street. I wasn't present for this particular one but several people told me this happened. A black woman named Veronica was having breast implants done when the table she was on collapsed. If the people who were there helping hadn't held the table up, she would have slid right out the window. Dr. Brown quickly sutured her together and got her off the table. What had happened was the table leg had broken. This was a kitchen table; it wasn't even a surgery table.

TNT: Was this in his home?

DC: No. A lot of old homes back then were turned into offices and that's what this was. None of the hospitals would take any of his patients because he had no contract with any of them.

TNT: Why not?

DC: Malpractice. At the time he was doing a lot of experimental surgery on people, trying to figure out the best way to perform SRS. When he first started doing the operation, they were multi-step. He did the orchiectomy and the penectomy. He did the lips and the clitoris first. Then you went back and he did the vaginal canal with skin grafts.

TNT: How did he come up with this?

DC: Dr. Brown developed this technique himself. As far as I know, he obtained information on how to do this surgery and then devised his own plan from that point on. I don't think he couldn't do a technique that was approved, but I think he got it into his mind that he could make it better. And he would experiment on that. He was always trying to improve on his techniques.

TNT: Was he medically trained?

DC: Yes. He went to school as a surgeon, but I'm not sure what type of surgeon. As for the school, I believe it was one in Mexico. I do know he had a certificate that said he was a surgeon. I think he went from being a surgeon to being a plastic surgeon, though I don't think he was professionally trained as a plastic surgeon. Another 'accident' involved a friend of mine, Anita. She had to have a revision. Well, Dr. Brown got mad at her over something. I heard him say afterwards — because I was in the office — 'I nicked that bitch. That'll teach her.' He cut her because he was mad at her. She formed a fistula, which is an opening between the intestines and the vaginal wall. Later Anita and Dr. Brown made up, so he did go back in and repair it. That's when I decided I did not want someone like this working on me. There was also the drug use. Once, when I saw him draw up valium before surgery, I asked, "Isn't that too much? We've already given the person valium." I didn't work in the operating room but I was outside of it when they gave shots to the girls prior to surgery. He had already knocked her out; why give her more? The nurse said, "That's for Dr. Brown." I thought: Uh-oh, if he's gotta shoot up valium to get steady enough to perform surgery, then this is really bad. I knew from going to parties and social engagements with Dr. Brown that he drank an awful lot. I think he had been to a party the night before and had to calm himself down. He had the afterward shakes.

TNT: How did Dr. Brown get into doing SRS?

DC: Money. It was very profitable. Not only on the surgeries themselves, but everything else — the breast augmentation, nose jobs, face lifts, you name it.

TNT: When did he start doing surgery?

DC: I think in the 1960s. By 1973, he had been doing them for some time.

"But then he did some very bad jobs. Like this one friend of mine— it never looked right. One side always sagged, she had to keep going back or 'tune-ups' as she called them, and it never functioned properly."

TNT: If Brown was so bad, why did so many people go to him?

DC: Because he was a lot cheaper than anyone else and it was easier to get surgery through him than through one of the medical clinics. That's why. Also, he wasn't always bad. When he started out he was quite good. However, over the years, his problems began to overwhelm him. It depended on what was going on in his life. If he was angry at somebody or had a fight the night before, he brought that right into the operating room. He didn't separate his emotional and professional life.

TNT: I know two transsexual women who went to Brown and say they are orgasmic.

DC: I'm sure they are. There are times when even a bad doctor can do good work. But when you're hitting on target only about 30-40% of the time, that's pretty bad. Even my friend, whom he nicked, liked the original surgery. She went back because she wanted more depth, but as far as feeling and sensation went, she had clitoris action. Once Dr. Brown got past his experimental stage, he actually did do some very good jobs. But then he did some very bad jobs. Like this one friend of mine— it never looked right. One side always sagged, she had to keep going back for 'tune-ups' as she called them, and it never functioned properly. She always had to have the stints in and he did something to her muscles so she had an uncontrollable bladder. That was one of many that I know that he did. There was also the hygiene. Or should I say the lack of hygiene? There were a lot of staph infections going around. Dr. Brown's idea of sterilizing after touching one patient to another patient was sometimes just to pour alcohol on it. Dr. Brown was using drugs at this point and his sense of what was going on and what was real was not always intact.

TNT: Did he make up surgery procedures on the spot?

DC: No. He planned them. Which is even worse. It was like, OK, we'll talk to this person, decide what they want, and the formulate how he was going to do it. I do think that sometimes he would decide if something wasn't working to improvise something else.

TNT: He'd wing it.

DC: Yes. That's a good way to put it. A wing and a prayer. There was a lot of emergency repair work, with people having to go to the hospital and have things redone. And you had to constantly wear the stint or it would just close up. One of the things I didn't like about his technique is that you had to wear what was called a stint to keep the vagina open. When you weren't active, you wore a stint. So if you had sex once a day, you would pull it out, have sex, then put it back in. It wasn't like you could dilate once a week and it'd be fine, whether through sex or a dilator. This was every day. When you were gonna have sex, you ran into the bathroom to take it out, have sex, then ran back into the bathroom to put it back in.

TNT: I know someone who had Brown's surgery, didn't use the stint, and close up. She can pee, but she's no wider than a pencil.

DC: I know three people that happened to. The only way to reverse it is to go in and have the colon technique done. Once Shannon O'Hara and I were in the Gay Community Center in Los Angeles. She went to the bathroom and discovered her stint had come out. She became hysterical. There we were, in the middle of the day, trying to keep other women out of the bathroom while I'm shoving this stint back up Shannon while she's screaming at me. I had bruises on my shoulder from her clamping down so hard. I couldn't get the stint back in. We had to call Dr. Brown up and go see him. He told her, 'I told you, don't take the stint out. Ever.' Because it closed up that fast — at least on her. I thought, 'Do I really want this? Do I want to walk around with this thing shoved up inside me all the time?'

TNT: Did he do any FTM surgeries?

DC: Dr. Brown did one that I know of. He did an experimental chest reduction surgery. He took the fatty tissue out, folded the skin over it and sewed it down. So the skin was actually in there underneath. He wanted to make it look like a pectoral muscle. Needless to say, the skin became infected because of the inturned hair. So Brown did a revision. He opened it up to where it was an inch and a half wide on each side where the breast used to be, so there was about 7 - 7 1/2 inches in each side left and right. So it was 1 1/2 wide and 7 - 7 1/2 long on each side and just left open. It wasn't even scarred, just raw tissue, no skin over the top of it. A friend and I took turns taking care of him. We had to take Bentadyne solution and rinse it out 3 or 4 times a day and irrigate it. This was when Dr. Brown was having all these problems and left the country. So Peter had to go to another doctor to repair his surgery so it would be more normal. It was just absolutely awful.

TNT: When did you leave Dr. Brown?

DC: About 1976 or 1977. Dr. Brown was back in San Francisco at that time, doing surgeries in the Jack Tar Hotel [now Cathedral Hill] on Post and Van Ness. I was still working there on and off on the stipulation that at some point he would pay me back by doing my surgery. That was when he nicked my friend Anita. At that point, I decided to write it off as a loss. He was involved in a lot of lawsuits and soon after this his license was revoked. He could no longer perform surgery in California.

TNT: So Dr. Brown never did your surgery.

DC: No. That's a whole different story entirely.

SRS Specialist Doctor Faces Murder Charge

John Ronald Brown, known for butchery and specializing in sex-change operations in the early 1970s, has been charged with murder. Formerly a San Diego County doctor, he is charged with murdering a New York man who died of gangrene after his leg was amputated. Brown, 75, had his California medical license yanked in 1977, and was sentenced to three years in prison in 1990 for illegally practicing medicine by performing a sex-change operation on a 30-year-old Orange County person. At Brown's sentencing, the judge said the victim suffered significant injuries that caused pain and suffering, said Deputy District Attorney Stacy Running, who added that additional charges may be filed.

ELECTROPHOBIA:

How To Overcome Your Fears Of Electrolysis

Linda DeFruscio, RE, RI, PME

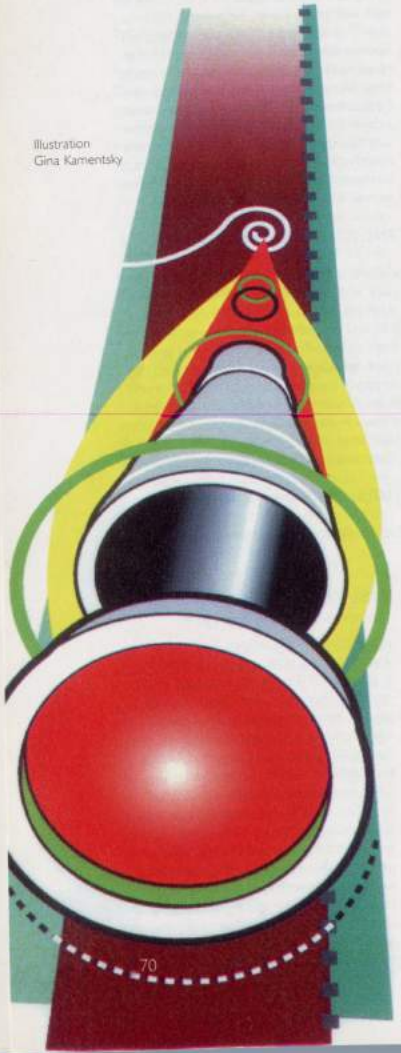

Illustration
Gina Kamentsky

Just about everybody will admit to being at least a little afraid of something. It could be snakes, or flying. Even if your fears don't prevent you from walking out your door every morning, they still linger in the back of your mind and influence your decisions. As a result, we often choose to avoid the unpleasant, unknown, or unexpected.

At one time, I was afraid of electrolysis. One day, my mother noticed me plucking my eyebrows in the bathroom mirror. "You'll be sorry if you get an infection from all that plucking." She introduced me to electrolysis that afternoon. Although she had told me a little bit about the process, I was still apprehensive and more than a little bit scared. What would happen to my face? Would everybody in school notice? "Really, it's not so bad," my mother reassured me. To demonstrate how electrolysis works, she treated a few of the hairs near my wrist so that I could watch the process.

A few minutes after she had finished working, I turned to my mother. "Okay Mom, I'm ready to do the eyebrows." She promptly went to work, shaping my mid-brow area. Over the next few weeks, we moved on to other areas of my body: upper lip, sideburns, widow's peak, chin, arms and underarms. She even did my bikini line in a French cut style, which was very popular at the time. A few years later, my mother and I were discussing what I would like to do for a living. I was faced with a two-year wait to begin training as a dental hygienist. That's when she asked me, "Linda, why don't you become an electrologist?" So I decided to get training in the practice, which led to the successful business I have today.

I have compiled a series of questions that people ask me about electrolysis. In general, these fears are a combination of mental and physical worries. (Is there any pain, and will my appearance really improve?) Here are the first 5 of a "Top 10" list of fears that potential clients share with me in the consultation session, the final 5 will appear in issue #85:

SUBJECT QUESTIONS

1) PAIN
Will it hurt? How much? Can I do anything to numb my skin?

2) SCARRING
Will I get permanent scars? Will my skin change color?

3) BLEEDING
Will electrolysis make me bleed? Will I lose blood?

4) INFECTION
Is there any risk of infection? Will I be exposed to hepatitis B or AIDS?

5) NEEDLES
Can I see the needle before treatment? Will the needle be sterile? Is it disposable?

6) COST
Is it going to be expensive? Can I afford it?

7) TENSION
How will I know what to expect from a treatment? Will I be in the right frame of mind?

8) CONFIDENTIALITY
Will my partner find out? Does the electrologist share the client database with anybody?

9) CONTROL
Why can't I just do it myself at home?

10) TRUST
How do I know this electrologist is any good? Will the electrologist be able to solve my problem?

"Aspirin," I answered. "It's an anti-coagulant. It thins your blood out, making you more susceptible to bleeding. Switch to non-aspirin."

1) Pain

This is the top fear of many people who come to my office for the first time. These prospective clients ask me, "Am I going to be in a lot of pain?" I try to show them how the process works—let them see for themselves. If they're really apprehensive, I perform electrolysis on their arm first. Not all clients feel discomfort. Some clients go for the gusto when they come in. They confidently assure me, "OK go ahead, do it on my face. It's all right." Once in a while I will even have someone who dozes off right in the middle of treatment!

Of course, people's pain thresholds vary greatly and from one day to another. In general, women are more sensitive than men. The hormonal cycles of women and M-F transsexuals on hormones may also increase sensitivity. That's why I recommend that TGs get about 70 hours of electrolysis before starting the hormone therapy. Stress is another major factor in pain levels. For success with electrolysis, become aware of how your body responds during and after your first few visits. You may have to cut back on caffeine, and make sure you've had something to eat on a day when you know you have to come in to the office. This diverts the nervous system's focus away from the skin and to the stomach.

If you are still sensitive, a physician can prescribe EMLA™ cream to reduce skin sensation. More and more of my clients are using it, about 30-35% lately. You should apply it 60-90 minutes before treatment—the longer the better, especially if you're feeling more sensitive that day. Placing a plastic wrap or around the EMLA-coated skin improves effectiveness. You can also try asking your physician about more powerful medications, though they don't usually prescribe painkillers for electrolysis.

2) Scarring

Nobody wants their face—or any other part of their body— getting marked up. Fortunately, scarring is a rare occurrence. Plain and simple, scarring indicates poor quality electrolysis. After all, what good is permanent hair removal if you're left with damaged skin? Only an incompetent, unskilled practitioner will leave a scar on you. That's why you really need to get a referral to a skilled electrologist, one who *never* leaves any trace.

The greater the intensity of current that the client can tolerate, the faster the electrologist can work, but, if the current is too intense, the skin might be damaged. Because electrolysis is an invasive technique, you shouldn't traumatize the scarred spot, or you risk permanent damage to skin texture. Scarring is a sign of too much current, too much treatment in a session, too much hair being removed from too small an area, or too shallow insertions. The top layer of skin and upper portion of the hair follicle get scorched, where the scar is the most visible. The risk of scarring is high for dark-skinned people, who may find dark spots (hyperpigmentation) on the skin as well. The cure for too much is less voltage, less hair removed, and shorter appointments. Tell the electrologist to spread the work across a larger skin surface, to decrease all skin trauma.

I take certain precautions before treating clients who were scarred by other electrologists. I don't want to do this kind of work, and try to talk the client into having the scar examined before I will treat the area. Many of the people I see have emotional and psychological issues with unwanted hair, and will insist that we work on their damaged skin. First I make them get an OK from their doctor, so that we can monitor the skin together. The physician may refer the client to a

One day I was treating Carol, who wanted her abdomen hairs done. I had never drawn blood on her, except maybe a drop for an ingrown hair. But that appointment, about 20% of the follicles had visible blood. I had the fear myself. I inquired, "What is going on here?" Carol didn't seem to know why either. I asked, "By any chance, did you take an aspirin or something like that within the last 24 hours?" She answered, "Yes, I've been taking them all week, because I strained my neck at the health club." "Well, that's what happens with aspirin," I answered. "It's an anti-coagulant. It thins your blood out, making you more susceptible to bleeding. Switch to non-aspirin pain relievers between today and your next appointment and you'll be OK." The next time Carol came in, no bleeding occurred. Her blood had returned to its normal thickness and electrolysis went easily.

laser skin resurfacing center or a plastic surgeon. When they're ready, I photograph the damaged tissue, to document that we didn't scar them. Depending on the client's degree of damage, I can work around the damaged area. In extreme cases, the scar tissue becomes so thick that hair gets trapped under the skin. The tissue redirects the hair and distorts the follicle, making the hair even more difficult to treat.

Sometimes people confuse the pinhead scabs left after electrolysis with permanent scars. People panic and think that the scabs won't come off naturally. Although they may last for a few days or up to one week, pinhead scabs are normal and no cause for alarm. Pinhead scabs will exfoliate naturally, and shed when the area heals completely. Do not remove pinhead scabs or pick at them.

3) Bleeding

All hairs are attached to capillaries, small blood vessels near the surface of your skin which nourish the hair and stimulate growth. Electrolysis tries to disconnect them from the hair root—the point where they connect. Every now and then the needle may hit the capillary directly, killing the hair, but leaving a drop of blood in the follicle. Many of these are distorted or ingrown hairs. A common culprit in bleeding is aspirin. Beware: Aspirin thins your blood, and stimulates blood flow to the skin. This could lead to increased, yet temporary, redness within the treated area. You may have to stop taking aspirin about a week before the treatment to decrease redness or bleeding. Aspirin can also make you more susceptible to pinpricks. This happens when a small amount of blood escapes from the follicle during treatment. This is neither painful nor serious. A competent electrologist will be able to control these small, uncommon seepages within three to ten minutes.

4) Infection

Some people will call in and ask, "Is it possible to get an infection?" Our needles are pre-packaged, sterilized and disposable, so there's no way you can get an infection. When each client comes in, I take down their history of infectious diseases, at least as much as they are willing to disclose. When the AIDS crisis began, people feared that someone using a dirty needle could spread the virus in electrolysis. But there have been no reported cases of AIDS transmissions by treatment. The only risk is to the electrologist, if they should stick themselves with a needle. Of course, the electrologist should be wearing thick gloves. The greater risk to the electrologist is the Hepatitis B virus. One out of every 20 people that comes through my door carries it, and may not even know it. Because there's no way I can judge which twentieth person it is, I have to prepare against Hepatitis B and other infectious diseases.

If a client has a problem with infection, I ask them about their occupation and daily routine. "What are your working conditions like?" You don't have to be a construction worker. If you work in an office that has bad air conditioning ducts, the system is blowing out a lot of garbage—mold and dust mites. We don't know if your natural immunity is enough to heal the follicle. Your electrologist can recommend an over-the-counter skin medication like Bacitracin or hydrogen peroxide that will improve healing and neutralize bacteria.

5) Needles

The electrologist has a wide array of needles to choose from. As a consumer, you should know some of the basics about electrolysis needles so that you can find out what your prospective electrologist plans to use to remove your hair. Because each needle affects each person—and each hair—differently, I always keep various kinds of needles on hand. Qualities I look for are strength, durability, flexibility and sharpness.

Needle diameters range from 2 for the finest hairs to 6 for very coarse hairs. A smaller, thinner needle may feel hotter than a larger, thicker one because the thin needle discharges more energy over a smaller surface area. If the heat makes you sensitive and uncomfortable, tell your electrologist to increase the needle size by one. In general, sizes 2 and 3 can be used on thick, coarse hair, but sizes 5 and 6 should never be used on thin or fine hairs. Your electrologist should change needle size during the treatment to account for differences in hair diameter. Since the thickness of hairs around your body varies, a skilled electrologist will use the right needle for each particular hair. I rarely use anything larger than a size 4.

People who are afraid of needles may not want to look. I offer them blinders to wear over their eyes, so they don't have to watch the process. You shouldn't feel the needle go into your follicle. What you will feel is the current as it disperses at the base of the follicle (hair root). I only use pre-packaged, pre-sterilized disposable needles. Look for them whenever you visit any professional who uses needles in their practice. When I get acupuncture done, I always check if the needle is disposable. I make sure my acupuncturist rips the needle right out of the package. When we're through, she discards the needle the medical way: a proper sharps container.

Continued next issue

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CROSS-DRESSER ROMANCE NOVELETTES

"ALWAYS A, BRIDESMAID"
Filling in for a sick bridesmaid, I saw my buddy's pink tinted fingertips checking his skirt. I stared at his figure and long curled hair. I said, "You look nice." He nearly swooned, his eyes sparkling with mischief. He smoothed the soft sweater over his brassiere and twirled around. "Maybe I should have been a girl?" Baily's mother said, "Baily's going to be a busy girl until the rehearsal. He has a lot to learn!" Baily blushed at what was in store for him.
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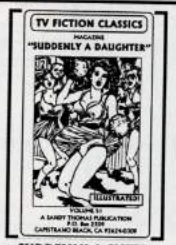

SUDDENLY A SISTER SUDDENLY A DAUGHTER
Trapped into dressing as a sister and daughter, Tracy wasn't happy. His mother asked, "Would it help if I went with you to buy a new dress?" "Okay," he replied. Would you help me fix my make-up?" "Of course dear," she said giving him a big hug. "That's the attitude that might get you out of dresses and back into pants."
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"THE FRILL OF IT ALL!"
For my first day at work, my wife suggested I wear a conservative skirt and blouse and low heeled pumps. She said, "We will be on our feet all day. Later we'll get you some nice high heels."
Was it the female hormone cycle that was pealing back the layers of masculinity? My wife and I were like girls now . . playing with make-up, hair and clothes. Actually it was pretty cool. . except for the soreness in my breasts, bloating and feeling crabby.
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Some guys will do anything for a buck. Me? I committed to act like a rich guy's wife and my son . . he's had to be my daughter!
My son had the strangest look when I told him about the paperwork being done. "But you're my father!" "Was," I said proudly, "But soon I'll legally be a female and can marry a man! You could too!" Some things are easy to get into but hard to get out!
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A few important words from Kate Bornstein:

"I remember when I was first thinking of the very real possibility of my going through a ::gasp:: sex change. This was in the days before tranny support groups. I steeled myself and made the long distance call to IFGE. To my delight, I spoke with a trans woman who calmed me down and pointed me in the direction of some deeper self-work prior to making my decision to proceed. It was invaluable advice. I owe a debt to IFGE. I think many trans-folks do. Maybe one of them is you? If not right this minute, then perhaps some day?

Look, IFGE is an organization that seems to rise above all the politics of the trans experience, getting to the heart of what matters to each of its multi-identified members. Wouldn't it be worth the mini-investment of a membership to make sure IFGE is there for all of us? I think so."

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GIANNA CONTINUED FROM PAGE 19

zygomycosis, and tuberculosis.

8 Surgeons are advised to evaluate the appropriateness and role of individualized pre and post surgical prophylaxis. This may help prevent the development of hospital-acquired illness or the reactivation of a latent disease.

9 Surgeons unwilling to perform surgical procedures on individuals designated as medically appropriate by the candidate's primary physician are advised to refer such individuals to reputable surgeons familiar with operating on HIV-positive individuals.

10 Surgeons and primary physicians who view an individual as medically inappropriate for the extensive invasiveness of Genital Reassignment Surgery yet recognize the individual as appropriate for the lesser invasiveness of gonad-removal surgery are advised to inform the individual that such procedures are available. MTF gonad removal (orchidectomy) and FTM gonad removal (oophorectomy, via intravaginal methods) do not have the extreme invasiveness or graft complications associated with more complex genital-reassignment procedures.

11 Numerous orchidectomies have been performed on MTF transgender individuals who are HIV-positive, with no known contraindications for those established as being in a stable "fair" or better health condition. Little information available regarding HIV-positive FTM response to gonad removal. Gonad removal is reported to provide individuals with some psychological sense of completion, whereas not having any procedure leaves the individual in the limbo of transition and may contribute to gender dysphoria. Pharmacologically, gonad removal enables the administration of lower dosages of hormones, thus lowering long-term risks of liver damage and other side effects.

12 Being deemed medically inappropriate for any one or all surgical procedures carries a heavy psychological burden for transgender individuals. Surgeons declining to perform surgical procedures as well as primary physicians discouraging individuals from seeking these surgeries are advised to refer or provide psychological support when turning an individual away.

Being crossdressed or living in role provides no one protection from the HIV virus. Individuals who anticipate having sex or having a fantasy fulfilled are strongly advised to carry prophylactic protection.

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TRANSACTIONS CONTINUED FROM PAGE 11

years of service to party goals. Shiela Richardson, a Transwoman who had been active in the party for two years, was ousted after anti-Gay activists discovered her support of civil rights. She had been outspoken during the past year in support of the Gay/Lesbian civil rights initiative, "Hands Off Washington." So much for Republican diversity in Washington state.

CT STUDENT SUSPENDED FOR WEARING DRESS

In an increasingly familiar scenario, a 17-year-old junior at Middletown High in Connecticut was suspended for wearing a dress to school last April. "I feel comfortable wearing a dress," he said. "It's just something I like to do. I make sure it isn't trashy and looks cool." Superintendent David Larson, who handed down the 3 day suspension, said "We don't want a carnival-like atmosphere in our school," citing Giles with creating a disturbance by wearing a purple and yellow peasant dress with a plunging neckline. Giles returned from his suspension wearing a denim skirt. At least 8 other boys supported him by wearing dresses and skirts. A dozen girls wore business suits and ties. The boys who refused to change clothes were suspended for 3 days, Giles for 5 days. The suspensions caused an outcry in the city of 44,000 just south of Hartford. In response, school officials cut short the suspensions.

TRANSACTIONS INTERNATIONAL

British TS Wins Job Bias Claim

Transsexual Kristina Sheffield has won her employment discrimination claim before a British industrial tribunal. Despite more than 34 years' experience, Sheffield was not given an interview when she made two applications to pilot for Easyjet when it was recruiting in 1996. The airline claimed that Sheffield, "tended to be very forceful and...flaunted her femininity which made people feel uncomfortable" and that she "was unable to work in a team, was hazardous to safety, and that pilots were unable to fly with her." The tribunal rejected that testimony, finding there was nothing in her work history to make her unsuitable for an interview, and concluded that, "It follows that the applicant has been treated less favorably on the ground of her transsexuality and that this amounts to less favorable treatment on the ground of her sex." Sheffield has been challenged to find employment as a pilot since leaving Brittania Airways in 1986 following her SRS. She says she was fired, Brittania says she left by "mutual agreement." She had been under consideration for promotion to a command position.

Transsexual's Marriage Causes Uproar in Turkey

Popular Turkish TS singer Bulent Ersoy is under fire in her predominantly Muslim country because of her marriage this past April to a 21-year-old man, Cem Sacha Adler. It was Ersoy's battle to switch genders that helped legalize sex changes in Turkey in the 1980s. Public outrage over the wedding may boost support for legislation pending before Parliament that would make sex change operations harder to obtain in Turkey. One newspaper wrote, "By trying to show her marriage as something normal, she has trodden all over the concept of the sacred family." Under the proposal, a person would need to prove to a court that the surgery is indispensable to his or her well-being. An unauthorized sex change would bar the person from gaining a state identification card, and deny all legal rights. Debate on the legislation has not been scheduled yet.

Australian Senate Considers TS Sports Ban

According to a report in Siren Magazine, the Australian Senate is considering passage of a law to bar transsexuals from competing in sports specific to their new gender because of unfair hormonal and physical capabilities.

Thais Embrace Trannys

Thailand's annual transsexual beauty pageant returned March 29 after a six-year hiatus and 22-year-old Thanaporn Wongprasert of Bangkok is the new queen. The event, staged in the resort city of Pattaya, coincided with the annual Miss Thailand pageant in Bangkok. The event attracted 1,500 spectators, mainly local businessmen and their wives and small children, according to Agence France-Presse.... Meanwhile Thailand's best-known kick boxer, 16-year-old Parinya Kiatbusaga, who has won 20 of 22 matches, 18 by knockout, is also a crossdresser. His feminine appearance in the ring in this tough sport is causing a sensation in Thailand. "I have the body of a great fighter," he says. "But in my heart, I'm a woman." Thailand is not a closeted country. Men dressed as women host talk shows, live in all-gay housing projects, and march in military parades. Though Thais on the whole are easygoing about crossdressing, in the rural area where Kiatbusaga grew up, neighborhood kids ridiculed him, luring him into fights. He learned to fight early. "A person would tease me only once," he says.

Malaysian Drag Contestants Arrested

Forty-five male contestants from a transvestite beauty pageant in Alor Star, Kedah, Malaysia, were tried in an Islamic court May 19 for the crimes of wearing female clothes and posing as women in public. They face sentences of up to six months in jail and a $260 fine.

Church Snubs Herm Priest

Catholic priest Sally (formerly Selwyn) Gross has been cruelly dumped by her holy order after being told by doctors that "he" was a hermaphrodite and more of a "she." She had devoted her life to the church and was hugely popular with parishioners, but has been told NOT to set foot in any Dominican house, NOT to contact them and NOT to tell anyone she was a member of the order. She was told her best option would be to work in a supermarket stocking shelves, despite having an Oxford degree in Philosophy and Theology. But when Sally asked the head of the order in Britain for leave, he told her she must not go. Her earlier request to be made a lay person was wrongly treated as if she wanted to break her vow of celibacy. Sally, who has now joined a Quaker group, says: "I have been treated terribly."

UK Activists Stymie Anti-Trans Effort

In the UK, Press For Change activists have apparently succeeded in convincing the government's Department of Education and Employment to back down from proposed legislation which would have, according to Stephen Whittle of PFC, "made it legal to discriminate against us in the workplace, to restrict us to using the 'disabled' toilet, to ban us from working with children etc." The positive outcome came about thanks to PFC's involvement in the Parliamentary Forum on Trans Issues, and over 300 responses to the DOEE's consultation paper, mostly sent by members of PFC, the FTM Network and the Gender Trust. PFC also arranged for responses from other organizations such as LIBERTY, Stonewall, several universities, and others. While the issue remains to be settled, preliminary indications are that PFC's hard work is paying off with trans-positive results.

Trans Sex Workers Murdered In El Salvador

The gay association "Entre Amigos" has denounced the murder of six sex workers, five of them transgendered and one bornwoman, and the wounding of three more transgendered people, all since February of this year. These deaths are a reminder of others that have happened within the last decade, when members of the Squadrons of the Death and the Army murdered homosexuals in operations of so-called "social cleaning". "Entre Amigos" have requested the authorities to begin a serious

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TransActions continued from page 77

judicial investigation. In solidarity with this demand, ten other associations from El Salvador are asking for messages to be sent to the President of the Republic and other democratic authorities of El Salvador.

First Honduran TS Murdered

The first Honduran legally recognized as a woman after undergoing sex-change surgery was found stabbed to death recently, along with a housekeeper. Police blamed a previously unknown group calling itself "La Mafia," which left a note in the house. They released no other details. The transsexual dentist underwent a sex-change operation in the United States in 1976. For the next 21 years, she fought to be legally recognized as a woman. She won last November when the government identified her as a woman on her voter registration card.

Wigstock Israel

Wigstock '98, Israel's annual drag festival and AIDS fundraiser, ended with a demonstration which resulted in the blockage of two main streets in Tel Aviv for over two hours. 2,000 of the estimated 10,000 in attendance stormed out and marched protesting the decision by the local police to end the evening prematurely, in accordance with the observance of the Jewish Sabbath. During the protest four participants were arrested but later released at 2:30am after the Agudah (Association of Lesbians, Gay Men and Bisexuals in Israel) leadership interceded on their behalf. Despite the illegal demonstration, the Agudah noted with pride that, after 50 years of oppression and silence, lesbian, gay, bisexual, transgender and HIV+members of the community openly participated in the first unified protest of its kind in Israel. Conditions do not recognize the change of gender. Although we can help our patients feel at home with their true sexuality, we can do little in helping them fight against the legal and social prejudice shown towards them." The Ministry of Justice reaffirmed that it is adamant in refusing to change birth records to reflect sex reassignment.

Sex Change Gene Discovered?

British and Italian researchers claim to have identified a gene they believe causes a sex reversal syndrome, in which people have the chromosomes of one sex but the physical attributes of the other. Complete sex reversal occurs in about one in 5,000 people and partial reversal, producing a hermaphrodite with both testes and ovaries, happens in about one in 1,000 individuals. The researchers' work was limited to physical sex reversal, but they say that since the gene was found in other parts of the embryo, including the brain, it could have an affect on sex-specific behavior and might explain why some females feel trapped in a male body or vice versa.

New Zealand Elects TS County Councillor

Jacquie Grant, know as the "Tranny Granny", became the first transsexual elected to the county council of New Zealand's Grey District on South Island. She is also the first transsexual member of the New Zealand Order of Merit. Grant, who has fostered 50 children, has lived as a woman for over 25 years and is thought to be the only transsexual approved for fostering by the state Children and Young Persons Service. She also runs courses for children with behavioral problems and founded Moana Zoo, a 50-acre (20-hectare) home for endangered animals. New Zealand has one other openly transsexual elected official. Carterton Mayor Georgina Beyer.

UK Church Shaken by Transsexual Priests

According to reports, the Church of England has found that two women priests began their ministries as men and that the number of transsexual and transvestite clergy is growing. According to the London Sunday Times, at least 21 clergy in the Church of England consider themselves to be "transgendered." Three are considering a sex change and are said by friends to be in a psychological "gray area," while two others are having sex change treatment. One has been forced by his bishop to take indefinite leave, but intends to seek a fresh appointment after his operation, as a woman priest. Some reportedly meet regularly with lay Anglicans as part of a secret group called Sibyls - from the Greek word for prophetess. The church is also dealing with internal divisions over homosexuality and the ordination of women.

Miss Vera's Class continued from page 17

up"? The three of us did some more shopping at the Prudential mall and had lunch in one of its bustling restaurants, leaving a few flyers behind on our table just to drum up some more business. Hey, you never know...

Kim and I stayed in that evening, but we encouraged Patti who was staying right in the center of town, to check out the scene. After all, why not make the most of that gorgeous make-up job. So she took herself to Chez Jacques a drag bar on Broadway which closed a lot earlier than she anticipated and just caught the club's last hour.

Sunday tea time. Kim's friend Syd who volunteered to pour tea dressed in her best I Love Lucy frock. She also supervised the decorations and turned the shop and its entrance into a summer garden. The students arrived. The group was small but then so was the shop, so it was perfect, and what a microcosm: Stephanie, a member of the Tiffany social club arrived in the perfect tea party outfit, a white cotton dress festooned with tiny flowers and matching white summer sandals. Her breasts were a bit high but we soon corrected that.

Eric was in male drab. He made a point of declaring he was heterosexual looking for love. Anytime a reference to bi or homosexuality was made, Eric's face twisted in pain.

Karen was crossdressed and could have used a softer wig. She was very quiet and seemed somewhat of a loner, but Karen had an air of tranquility about her that spoke of more experience with her femme self than her fashion statements implied.

Vicky was the kinky one. He boasted of long hours confined in a corset and was so happy when I asked him to volunteer for the corset demonstration. I laced him in nice and tight. Victor/Vicky's hair was long and beautiful. His simple black jeans and t-shirt were from the ladies department, his breasts fleshy but perky. I refer to Vicky as him because it feels right.

Then there were the couples. Maxine and Kathy were delighted to participate. They had been looking forward to the class for months. In fact, they had introduced themselves to me in Las Vegas where we all attended Ms. Antoinette's, 'Dressed To Thrill' party. Maxine, born Mike, a former Marine with the tattoos to prove it, was a voluptuous sex pot and she knew it. Kathy wore little make-up, and Maxine wore plenty and very well. The couple had an active and adventuresome sex life and through their own workshops were teaching other couples to do the same. Patricia and I agreed that Toby and Rob opened a new window on couplehood. She was small and boyish, he was tall and femme and they were together and androgynous. They looked like the couple of the future they were into the technology of the future.

Okay, Bill was a trip. He had a big paunch and looked like he would beat home at the local saloon hefting a few. He wore jeans and a tee shirt and all that was missing was a Red Sox cap. Did he want to crossdress? Did he want to be a cross-dresser's boyfriend? Before the night was over he had asked me to measure him for a corset and had asked Patti how long she planned to stay in town. Go figure. Patti was an incredible assistant. At the start of class, when I described different body building options, such as the "Veronica" buttocks which I had brought along, I asked Patricia if she would mind lifting her skirt to reveal some of her secrets. "Would you like me to just take off my dress?" she asked, lowering her very practical long back zipper and slipping out of her lovely chiffon. Vanna White could not have done it better.

Taking it all in was Sarah, a reporter for the Boston Phoenix. She was getting quite a story. Her presence meant we would reach many more people. I hoped she was up to her task because the students were so generous with themselves. We had fun, we talked frankly and everyone got a lipstick. The small group made more intimacy possible. The group represented different kinds of people all with at least some common threads- not only a desire for nylons and silks but the desire to revolt against gender barriers and encourage the evolution of new possibilies for life, liberty and the pursuit of happiness.

Patti and I were scheduled to leave Boston at ten the next morning, so our girl decided to sleep as late as possible and travel as himself. Kim dropped me off at the Hilton to meet Pat so we could take the shuttle to the airport. My only regret for the weekend was that Patti had not gotten to ride in the parade. As we stood outside in the now finally beautiful sunshine of Monday morning, Pat said, "The best part is that for the very first time, I am dressed like Pat, but I still feel like Patricia." The good feeling had stayed. She owned it.

We had a great weekend, a successful class, good publicity and Patti's epiphany. We did not get what we wanted, but we got what we needed. Nobody was going to rain on our parade.

Veronica Vera is Founder and Dean of Students of Miss Vera's Finishing School for Boys Who Want to Be Girls. She can be contacted through the school at 212/ 242 6449, or www.missvera.com. Patti Harrington receives electronic mail through web hostess @www. missvera.com. Kim Airs' Grand Opening Boutique: 617/ 731-2626, and www.grandopening.com.

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18-21: Third Annual International Congress on Sex and Gender, Exeter College London, England. Contact: Jan Cobb, PFC BM network, London, WCIN 3XX tel: +44 [0] 1473 421385, e-mail: Cong.bool @pfc.org.uk

20: The Grand Ducal Council of San Francisco's Coronation, San Francisco, CA

24-27: The 2nd International Transgender Film and Video Festival, London, Engalnd <gentrust@mistral.co.uk>

24-27: Paradise In the Poconos, Poconos PA, POB 61263, King of Prussia PA 19406, [610] 640-9449 e-mail poco@cospub.com [for CDs and partners]

28: The Royal Commonwealth Society Barony of Massachusetts Adornment, Boston, MA

1999 Calendar

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21-24: First Event, Tiffany club of New England Call 781-891-9325

March, 1999
3-16: Dignity Cruise XI, on the Marco Polo from Sydney Australia to Cairns. contact Cruises, Inc.: Barbara Arendt at 800-621-6699 or Mike Sinn at 800-818-7830

August, 1999
17-22: Harry Benjamin International Gender Dysphoria Association, Inc. London, England, Contact: Bean Robinson, 1300 South 2nd. Sst. Ste. 180, Minneapolis, MN 55454. Tele: 612-625-1500 e-mail: robin009@gold.tc.umn.edu

OCTOBER

National CD Month

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3 - 1998 Delaware Pride Festival, g/l/b/t, noon to 6pm Rodney Square, Wilmington 303-328-1391 e-mail: PrideDel@aol.com

4: The Royal Court de Santa Monica's Coronation, Santa Monica, CA

11: The Imperial Sovereign Court of Spokane's 25th Coronation, Spokane, WA

15-17: Lavender Law Conference, Sponsored by National Lesbian and Gay Law Association, Boston. MA, NLGLA, POB 57225, Washington, DC 20036, E-mail www.nlgla.org [TG inclusive by-laws, Board and Conference curriculum]

16-18: Colorado Gold Rush 303-202-8488 e-mail GICof Colo@aol.com

18: The Imperial Court of All Hawaii's Coronation, Honolulu, HI

18-25: Fantasia Fair, Provincetown, MA, POB 473, Portsmouth, RI 02871-0473 [7 days of fun and education for all] 401-624-4317

24 - The 4th annual Transgender/Transsexual Health Empowerment Conference, 9am to 7pm, Audre Lord Project Inc. 85 South oxford Street Brooklyn, NY 11217 212-620-7310 e-mail: rblumenstein@gaycenter.org

25: The United Court of the Lone Star Empire, Incorporated's Coronation, Dallas TX

NOVEMBER

1: The Royal Barony of the Desert Empire's Adornment I, Las Vegas, NV

5-8: Fall Harvest, Minneapolis, MN, POB 14844, Minneapolis MN, 55414 [open to all TG-identified people and friends].

5-8: Paradise In the Poconos, Poconos PA, POB 61263, King of Prussia PA 19406, [610] 640-9449 e-mail poco@cospub.com [for CDs and partners]

8: The United Court of the Pike's Peak Empire's Coronation, Colorado Springs, CO

8: The Barony of Northern Utah of the RCGSE's Coronation, Ogden, UT

11-15: 11th Annual Creating Change Conference, Pittsburg, PA http://www.ngltf.org/c98

11-15: Joint Meeting: The Society for the Scientific Study of Sexuality and Association of Sex Educators, Counselors and Sex Therapists, Sexuality and the media: Hooray for Hollywood? Westin Bonaventure Hotel, Los Angeles, CA P.O. Box 240 Mount Vernon, IA 52314-0240 319-895-6407

13-15: Full Circle of Women, So. California, Center for Gender Sanity POB 451427, Westchester CA 90045. E-mail: merkins@cris.com. [for TG women and friends]

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We at Transgender Tapestry would like to take this opportunity to thank the professional individuals and organizations who support the production of this magazine with a paid listing. Please remember to look here first for services. These are the people who put their money where their mouth is when it comes to supporting the Transgender community. Their conscious commitment is invaluable to the healthy growth of our community. A warm-hearted thanks to the following:

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RONNIE LIBBEY, MSW, LCSW, 162 Federal St. Salem MA. 01970 617-631-7171. Gender Friendly Psychotherapy on Massachusetts North Shore. Sexual Identity, Relationships, Addictions, Depression, Anxiety (85)

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DENNIS PEARNE, EdD:
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CHRISTINE C. BECKER L.I.S.C.S.W.:
341 Marrett Road (Rt. 2A), Lexington MA 02173. (781)862-6170. Individual, couple, family and group evaluation and counseling for the transgender community. #85

LIFE COURSE COUNSELING CENTER:
c/o Tetty Gorfine, LCSW, 664 Main Street, Amherst MA 01002. (413)253-2822. Email: integsol@valinet.com. Web site: www.vulinet.com/~lifecour. Psychotherapy for L/G/B/T people and their families. Transgender support and therapy group. #84

MICHIGAN

UMMC COMPREHENSIVE GENDER SERVICES PROGRAM:
University of Michigan Medical Center, University Hospital IH223, 1500 E. Medical Center Dr., Ann Arbor MI 48109-0050. Sandra Cole, Ph.D., Director. Phone: (313)936-7067.Email:um-cgsp@umich.edu. The UMMC CGSP is dedicated to meeting the medical and mental health care needs of persons for whom gender and sexual identity and expression are primary issues. Full range of service, including primary medical and mental health care, and surgery. #85

MINNESOTA

TRANSGENDER SERVICES, PROGRAM IN HUMAN SEXUALITY, DEPARTMENT of FAMILY PRACTICE & COMMUNITY HEALTH, UNIVERSITY of MINNESOTA MEDICAL SCHOOL:
Walter Bockting, Coordinator, 1300 South Second Street, Suite 180, Minneapolis MN 55454. (612)625-1500. Fax (612)626-8311. Email: bockt001@gold.tc.umn.edu. Web site: www.med.umn.edu/fp/phs/phstgsrv.htm. Comprehensive services for transgender, transsexual and intersex persons and their families. #85

KAROL L. JENSEN, Ph.D., M.P.H.:
416 E. Hennepin Ave., Minneapolis MN 55414-1006. (612)379-5377. Email: KLJensen@aol.com. Gender identity issues, TS, TG, individual psychotherapy and couple work. #85

MISSOURI

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12401 Olive Blvd., Suite 101, St. Louis, MO 63141 Phone 24 hours: 314-434-5888, 7 days. Psychological Services. Gender Friendly Counseling and testing for TGs and their families. Support Groups available, all ages. #85

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NANCY LEE, Ph.D.:
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OREGON

BARRY M. MALETCKY, M.D.:
Professor of Clinical Psychiatry, Oregon Health Sciences University, 8332 SE 13th Ave., Portland OR 97202. (503)238-5580. FAX (503)238-0210. #84

RHODE ISLAND

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Craik Building, Suite 307, 2845 Post Rd., Warwick RI 02886. (401)739-4604. Counseling, psychotherapy and education. #84

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ALICE WEBB, Ph.D. LMSW-ACP
18333 Egret Bay Blvd., Suite 560, Houston TX 77058 (NASA, Clear Lake area) (281)333-2278. Fax (281)333-2293. Email: ALESWEBB@aol.com. Pres. Elect-HBIGDA, 1997-1999. Clinical sexology, gender program, certified sex therapist, general psychotherapy. #85

VIRGINIA

RUSTY LYNN, LCSW:
225 E. Broad Street, Falls Church VA 22046. (703) 532-8723. Pastoral Counselor with over 10 years experience counseling transgendered persons. #85

ELLEN R. WARREN, LCSW:
1500 King Street, Suite 302, Alexandria VA 22314. (703)683-0710. Compassionate, affirming therapist for TG people and their significant others. 25 years experience. Individual therapy, couples/family counseling to assist with transition, confusion, emotional pain, relationships, career and family issues. #84

WASHINGTON

THE INGERSOLL GENDER CENTER:
1812 East Madison, Seattle WA 98122. (206)329-6651. Counseling and referrals.

JUDE PATTON, CMHC, CMFT, PA-C:
1812 East Madison, Suite 102, Seattle WA 98122. Phone/fax (425)787-5094. E-mail: JUDEPATTON@aol.com. Compassionate, supportive counseling for all trans-persons and their SOFFAs, by transman who is a physician assistant, therapist and AASECT certified sex educator and sex therapist. Reasonable fees. #85

WISCONSIN

MILWAUKEE TRANSGENDER PROGRAM:
c/o Gretchen Fincke, MSSW or Roger Northway, MS, Pathways Counseling Center, 2645 N. Mayfair Road, Suite 230, Milwaukee WI 53226. (414)774-4111. Full service gender program. #85

CANADA

YVON MENARD, M.D., FRCSC:
1003 East St. - Joseph Blvd., Montreal, Quebec, CANADA H2J 1L2. (514)288-2097. Fax (514)288-3547. Web: www.grsmontreal.com. Email: info@grsmontreal.com. Cosmetic surgery, MTF & FTM gender reassignment surgery. #85

STREET OUTREACH SERVICES:
c/o Wayne Travers, 622 Yonge St., 2nd Fl, Toronto, Ontario CANADA M4Y 1Z8. (416)926-0744 (24 hours). Multitude of services for TG youth. #84

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Listings in the Directory of Transgender Organizations are carried as a public service and are free to all not-for-profit groups serving the transgender community. Listings are as current and accurate as possible. If you know of a qualifying group or organization we are not listing, or if you are aware that one has closed, please write: Directory Editor c/o Transgender Tapestry, P.O. Box 229, Waltham, MA 02454-0229 or e-mail: info@ifge.org

INTERNATIONAL AND NATIONAL ORGANIZATIONS

TG-friendly - ABLIED QUEER: 1517 B. Missouri, Houston TX 77006. Email: james_e@iah.com.

FTM - AMERICAN BOYZ: Gary (410)392-3640. E-mail: FTM-admin@tantalus.clark.net.

FTM - FEMALE-TO-MALE INTERNATIONAL: 5337 College Avenue, #142, Oakland CA 94618. Education, outreach.

ALL - INTERNATIONAL CONFERENCE ON TRANSGENDER LAW AND EMPLOYMENT POLICY(ICTLEP): PO Drawer 1010, Cooperstown NY 13326. ATTN: Sharon Stuart, Corresponding Secretary. (607) 547-4118. Email: ictlephdq@aol.com. AOL Keyword: ICTLEP. Web site: www.abmall.com/ictlep. Information source on TG legal and policy issues.

ALL - INTERNATIONAL FOUNDATION FOR GENDER EDUCATION: IFGE, Box 229, Waltham MA 02254-0229. (617)899-2212 FAX (617)899-5703. E-mail: info@ifge.org. Education, outreach, peer counseling.

ALL - DEAF/HARD OF HEARING/SI - JESS: (202)547-9524 (tdd only). E-mail: 11mtanzar@gallua.gallaudet.edu.

NATIONAL GAY AND LESBIAN TASK FORCE: 2320 17th Street, NW, Washington DC 20009-2702. (202)332-6483 extension 3301, FAX (202)332-0207, TTY (202)332-6219. It is impossible to list all the gay and lesbian support groups. Write NGLTF for a referral to someone near you.

ALL - OUTREACH INSTITUTE OF GENDER STUDIES: OIGS, 126 Western Ave, Suite 246, Augusta ME 04330. Ariadne Kane, MEd, Director (207)621-0858. Programs for professionals.

ALL - RENAISSANCE EDUCATION ASSOCIATION: 987 Old Eagle School Rd., #719, Wayne PA 19087. (610)975-9119 (24 hrs). Email: angela@ren.org. Educational outreach and support group.

CD/TV - SOCIETY FOR THE SECOND SELF (TRI-ESS): PO Box 194, Tulare CA 93275. Email: TRISINFO@AOL.COM Educational outreach and support for heterosexual crossdressers. Write referral to local chapter.

TRANSSEXUALS IN PRISON: c/o Ronnie Lynne Soubrette, 104 Quineveree Ct., Castle Rock WA 09611. Support group.

T.O.P.S. (TRANSGENDER OFFICERS PROTECT & SERVE): c/o Tony Barreto-Neto Exec. Dir., 3210 Tom Mathews Rd., Lakeland FL 33809. Phone 1-800-761-TOPS or (813)752-9226. E-mail: Tbhawk@aol.com. Social, employment, legal support.

INTERSEX SOCIETY OF NORTH AMERICA, P.O. Box 31791, San Francisco, CA 94131 (415)575-3885 E-mail: cchase@isna.org Web: http://www.isna.org

FTM NETWORK [also PRESS FOR CHANGE]: BM Network, London, WC1N 3XX. Phone: +44-161-423-1915, Wed. 8pm-10.30 pm Wed. GMT). Emails.t.whittle@mmu.ac.uk. Web site: http:\\ourworld. compuserve. com\ homepages\press_for_change. Support, political lobbying and education group.

ALABAMA

TRI-S - SIGMA RHO GAMMA: SERGA, PO Box 16174, Huntsville AL 35802. Michelle Steadman, (205)880-9660. Support group.

TRI-S - SIGMA RHO GAMMA SOUTH: SERGA, PO Box 66286, Mobile AL 36660. Lisa Jackson. Support group.

ALASKA

CD/TS/SO/MTF/FTM - ALASKAN T-PEOPLE: PO Box 670349, Chugiak AK 99567-0349. Strictly social for the whole family.

TRI-S - ALPHA KAPPA: PO Box 5392, Ft. Richardson, AK 99505-0392. Group

ARIZONA

CD/TS - A ROSE: PO Box 8108, Glendale, AZ 85280-8108. (602) 488-0959, e-mail: sss@tri-ess.org web: http://tri-ess.org/rose.htm e-mail: denise@inficad.com Support group.

TRI-ESS - ALPHA ZETA CHAPTER: PO Box 1738, Tempe AZ 85280-1738. (602) 488-0959 WWW: http://users.aol.com/jessicaphx/alpha_za.htm. Support group.

TRI-ESS - TAU UPSILON: 8802 E. Broadway Blvd. #145, Tucson AZ 85710. Phone: (520)296-3472.

CD/TS/TG - EVOLVER: 416 E. 22nd St., Tucson AZ 85713. (520) 884-0541. 501 C-3 not for profit organization. Support group . Web: http://home.earthlink.net/~evolvere/ e-mail-SAndra@aol.com

TG - FTM - DEZERTBOYZ: meets in Tucson at 7:00 pm on the first Tuesday of each month at Wingspan Center. SO Contact Debra at 520-903-1421 or debra@hwr.arizina.edu. Website: http://members.aol.com/DezertBoyz/

ARKANSAS

TS-SUPPORT LINE: Contact: Francis at 316-795-4876.

CD - AR CD GROUP: 2901 Massard Rd., Ft. Smith AR 72903-5212. Support group.

FTM - ARKANSAS BOYZ: AR Contact: Garin, (501) 443-3184; Email: Kwiggin@aol.com

CALIFORNIA

FTM - GENDERQUEER BOYZZ: Contact Jacob Hale e-mail: Zeroboyjh@aol.com

ALL- THE TRANSGENDER MENACE OF SOUTHERN CALIFORNIA: A direct action group dedicated to using any means necessary to make the world, especially our Southern California corner of it, a safe place for all transfolk and genderqueers (323)962-9175 Shirley Shirley@earthlink.net or (323) 665-1130 Jacob, zeroboyjh@aol.com

TRI-ESS - ALPHA: PO Box 411352, c/o Kathy Helms, Eagle Rock Station, Los Angeles CA 90041. Tel:(818)352-9448. Support.

CD/TS - CLUB CHERCHEZ LA FEMME: PO Box 10873, Santa Ana CA 92711-0873. Send SASE for details. Private membership club.

TG-VENTURA GENDER OUTREACH: 1995 Main street, Ventura CA 93003, 805-653-1979. Contact person: Randi. Open peer facilitated drop in group for persons who have a conflict with or question about their gender. Tues night 7-9pm.

CD/SO - CROSSDRESSER HETEROSEXUAL INTERSOCIAL CLUB: CHIC, PO Box 8487, Long Beach CA 90808. (818) 243-2442. Support group. Web site: http://www.transgender.or/tg/chic

IS - AIS SUPPORT GROUP: c/o Sherri Groveman, 4203 Genessee Ave., #103-436, San Diego CA 92117-4950. Email: <aissg@aol.com>.

CD/TS/SO - NEUTRAL CORNER: PO Box 19008, San Diego CA 92159. (619)685-3696. Web: http://geocities.com/WestHollywood/Village/4718/ Support e-mail: neutral-corner@geocities.com

FTM - UNDER CONSTRUCTION: P.O. Box 922342, Sylmar, CA 91392-2342, 818-837-1904. CONTACT JEFF SHEVLOWITZ E-MAIL: LITTLESHEVY@JUNO.COM.

TRI-S - TRI-CHI - TRI ESS: PO Box 194, Tulare CA 93275. Phone: (209)688-9246. Support group.

TS-EMERGENCE- SUPPORT FOR CHRISTIAN TRANSSEXUALS: Assembly of God Church, Fresno, CA. A safe place to discuss Christian beliefs, gender issues, transition and anything. Call Terri Main 209-637-9986 E-mail: terrim@evangeltab.org

CD/TS - ANDROGYNY: Friendship and understanding in a safe and supportive environment. A place to explore being Transsexual, Crossdresser, or Transgenderist. A place to meet others like yourself. Meetings: Tuesday nights form 8:00pm until 9:30pm, Santa Monica, CA. (323)962-9175. Support group.

CD/TS/IS - RAINBOW SUPPORT GROUP: Gay, Straight, Intersex. Meets Tuesday evenings 7-9pm. Write Rainbow Community Church, Visalia Friends Meeting House, 17208 Ave. 296, Visalia, CA, 93291. 209-627-2727

CD/TS/SO - POWDER PUFFS OF ORANGE COUNTY (PPOC): P.O. Box 1088, Yorba Linda, CA 92885. Voice 714-281-0297

FTM/SO - FTM INTERNATIONAL BI-MONTHLY: FTM TS/TG - TRANSMALE TASKFORCE: 1259 El Camino Real, #151, Menlo Park CA 94025. (415) 780-9349. FTM

ALL-GIGI'S-GENDER ISSUES, GENDER INFORMATION AND SUPPORT. Hosted by Miss Major, 5 days a week Mon-Fri 4pm-6pm. Tenderloin AIDS Resource Center, 187 Golden Gate Ave at Leavenworth, San Francisco 94102. 415-431-7476

CD/TS/SO - SAN FRANCISCO GENDER INFORMATION: SFGI, 3637 Grand Ave., Suite C, Oakland, CA 94610-2029. Maintains database of TG resources for SF Bay area.

ALL-LAVENDER LINE: Pacific Center (510)841-6224. An information/resource phone line for the GLBT community covering the East Bay, San Francisco area.

MTF-FTM-TRANGENDERS IN TRANSITION: A facilitated group for transfolk at all stages of transition. Thurs. 7:30-9:00pm Cost $30-$5 per session sliding scale. Call first 415-436-9000

CD/TS/SO - EDUCATIONAL TV CHANNEL: ETVC, PO Box 426486 San Francisco CA 94142-6486. (415) 564-3246 hotline, BBS (415) 564-4903, Telzey (510)849-4112. Support.

SO - SIGNIFICANT OTHERS SUPPORT: SOS, attn: Ginny Knuth, 2478 28th Ave., San Francisco CA 94116-2305. (415)644-1499. E-mail: ginny@sirius.com. Support group.

CD/TS/SO - DIABLO VALLEY GIRLS: DVG, PO Box 272885, Concord, CA 94527-2885. (510)937-8432. Group

CD/TS/SO - PACIFIC CENTER FOR HUMAN GROWTH: 1250 Pine St., Ste. 301 Walnut Creek CA 94533. (510)939-7711. Support.

FTM TS - FTM INTERNATIONAL: 5337 College Avenue, #142, Oakland CA 94618. Support group for FTM TSs.

CD/TS/SO - PACIFIC CENTER FOR HUMAN GROWTH: 2712 Telegraph Ave, Berkeley CA 94705. (510)548-8283. I & R (510)841-6224. E-mail: paccent@pacbell.net. Web site: www.pacificenter.org. Support group.

CD/TS - SWAN'S INNER SORORITY: PO Box 1423, San Jose CA 95109. (408)297-6900. E-mail: wendi@sisgirls.com Web: www.sisgirls.com Support group.

CD/TS/SO - SACRAMENTO GENDER ASSOCIATION: PO Box 215456, Sacramento, CA 95821. (916)482-7742. Support group. Email: sacgender@hotmail.com Web: http://www.geocities.com/westhollywood/village/4409/

TS - LAMBDA COMMUNITY CENTER: c/o Marsha, 919 - 20th St., Sacramento, CA 95814. Phone (916)729-8935 or (916)442-0185. Support and educational outreach.

TRI-S - SIGMA SIGMA BETA - TRI-ESS SIERRA SILVER BELLES: SSB, PO Box 19933, S. Lake Tahoe CA 96151. Group

COLORADO

TG- SOUTHERN COLORADO INTRA-REGIONAL TRANSGENDERED SOCIETY (S.C.I.R.T.S.) Colorado Springs, Colorado. 719-591-5860 Lisa Jo K. Laptad Web site: http://www.geocities.com/westhollywood/heights/4484 Support Group meetings every Tuesday 7pm plus every 3rd Friday. Anyone who will keep confidentiality is welcome.

CD/TS - GENDER IDENTITY CENTER OF COLORADO, INC.: GIC, 1455 Ammons Street, Suite 100, Lakewood CO 80215. (303)202-6466. Educational outreach. E-mail: GICof Colo@aol.com Web: http://www.abmail.com/gic

CONNECTICUT

CD/TS/SO - GBSING, GBS, PO Box 162, Haddam, CT 06438-0162. E-mail: GBSING@aol.com Support Group.

TG-CONNECTICUT OUTREACH SOCIETY: P.O. Box 163, Farmington, CT 06034-0163, (860)604-6343, e-mail: ctoutreach@aol.com, Web: http://members.aol.com/ctoutreach/index.html Support Group

TS/SO - XX (TWENTY) CLUB: PO Box 387, Hartford CT 06141-0387. Support group.

CD - CONNECTICUTVIEW: c/o Denise Mason, P.O. Box 2281, Devon, CT 06460. Email: Mason D@aol.com. Newsletter and directory.

T/G - TRANSACT - Kaylen 203-661-2448 Greenwich, Conn. Support Group

DELAWARE

CD/TS/SO - RENAISSANCE - DELAWARE CHAPTER: PO Box 5656, Wilmington DE 19808. (302)376-1990. www.ren.org/Renaissance_D.html Support group.

FTM - DELAWARE BOYZ: Steve, 302-856-7179

FLORIDA

TG - NORTH FLORIDA SISTERS: P.O. Box 5765, E. Jacksonville, FL 32447. E-mail: cdarica@aol.com Meets 2nd Saturday of each month. Support.

TG-TRANSGENDER SUPPORT GROUP: P.O. Box 4940 Greater Fort Lauderdale, FL 33339 Every Wed. at 7:30pm at the Gay, Lesbian Comm. Center. Call 954-777-2328

CD/TS-ALSO 4 YOUTH: Sarasota, FL. (941)426-8687 e-mail: krjeffrey@aol.com

ALL- FGS- FREEDOM OF GENDER: Sarasota FL. Meets 3rd Friday of the month at 7:00 pm. Contact Kristin at 941-426-8681 for info.

TG- EDUCATIONAL SUPPORT GROUP: for the Transgender Community. Meets at the Gay and Lesbian Comm. Center of Greater Lauderdale, Florida 954-563-9500. Ask for Michael or Heidi

CD/TS/TG - PANTRA: PO Box 3426, Tallahassee, FL 32315-3426.

TRI-ESS - TAU LAMBDA: PO Box 3426, Tallahassee FL 32315-3426.

TRI-ESS - PHI EPSILON MU/CENTRAL FLORIDA SISTERS: PO Box 3261, Winter Park FL 32790-3261. (407)263-8978 Email: z26y25@aol.com. Website: http://www.horizon-usa.com/misc/fem.htm. Support group meets monthly on Saturdays.

FTM - FLORIDA BOYZ: David, Email: FTMOrlando@aol.com (Orlando, FL)

TS - EVOLVE: 714 E. Colonial Dr., Orlando, FL 32803-4639. Meeting times, 1st & 3rd Tuesday, 7pm. Phone: (407)425-4527. E-mail: GLCS@flamingopark.com. Support group.

CD/TS/SO - SERENITY: PO Box 307, Hollywood FL 33022. (954)436-9477. E-mail: susan@aol.com. Support group.

TRI-ESS - GAMMA CHI BETA: P.O. Box 510045, Punta Gorda, FL 33951 407-382-8389 Alice, Tri-Ess Chapter, Meetings 2nd Saturday of each month. Support Group

CD/TS/SO - STARBURST: PO Box 17411, Clearwater FL 34622-0411. (813)523-8760. Support group.

TS - ENCHANTE: A.C.P., 1180 Cleveland St., Clearwater FL 34615. Phone:(813) 533-0012, Amanda. Transsexual support group.

TG - TLC, P.O. Box 372711, Satellite Beach, FL 32937 407-858-2356 Karen, e-mail: haleightg@aol.com or kj6781@palmnet.net

GEORGIA

TRI-S - SIGMA EPSILON: PO Box 272, Rosewell GA 30077-0272. (770)552-4415. E-mail & Web site: http://pages.prodigy.com/kemico/sigep.htm. Support group.

CD/TS/SO - AGE: PO Box 77562, Atlanta GA 30357. (404) 223-5351. E-mail: ageinfo@aol.com. Web site: www.transgender.org/tg/age. Support group.

FTM - GEORGIA BOYZ: Star, Email: star@ellijay.com

HAWAII

HAWAII TRANSGENDERED OUTREACH: PO Box 4530, Honolulu HI 96812-4530. (808)923-4270. Email: tghawaii@poi.net. Support group. http://www.newbies.net/htgo/ Hot Line 8am - 8pm 7 days.

GAY & LESBIAN COMMUNITY CENTER: YWCA 47-388, HUI IWA St. #14-304, Kaneohe HI 96744-4416.

IDAHO

CD/TS/TG/SO - IDAHO TRANSGENDER SOCIETY: P.O. Box 7353, Boise, Idaho 83707 208-331-6669. Social Support Group

CD/TS/SO - PAPILLON: P.O. Box 1365, Veredale, WA 99037. Support Group. Phone: (509)458-2741. Meetings in Spokane

ILLINOIS

PARENTS AND FRIENDS OF TRANSGENDER COMMUNITY: PFTC, c/o Ellie Altman, Northbrook IL 60062. (847)564-9496, e-mail: EllieAlt@aol.com. Support group.

CD-TRI-S - CHI CHAPTER: PO Box 40, Wood Dale IL 60191-0040. (630)262-8707. Email: chitriess@aol.com. Web site: http://users.aol.com/chitriess/trisss/chim ain.htm. Support group.

TG - CHAMPAIGN/URBANA TRANSGENDER SUPPORT GROUP: 123 W. Church, Champaign IL 61825. Tel: (217)367-1033. Email: tsplendoe@prairienet.org Web: http://www.prairienet.org/splendor Support group. We meet twice a month.

FTM - ILLINOIS BOYZ: (Champagne, Ill).: Jaqui: 618-235-5908; Email: jaquitv@aol.com

CD/TS/SO - CENTRAL ILLINOIS GENDER ASSOCIATION: CIGA, PO Box 1291, Galesburg, IL 61401. (309)343-5192, Jaque Rounds. Support group.

INDIANA

GLBT-INDIANA UNIVERSITY, GLBT STUDENT SUPPORT SERVICES: 705 E. 7th st., Bloomington, IN. 47405-3809 Tel: 812-855-4252. E-mail: glbtserv@indiana.edu Web: http://www.indiana.edu/~glbtserv

CD/TS/FTM/MTF/SO - IGS: Attn: Linda BB, PO Box 425, Carmel IN 46032. (317)299-5377, Angela. Email: kaylin@iquest.net Support group.

TONI - PO Box 2372, Portage IN 46268. Phone (219)929-8533. Support Group Email: jenfermaresl@juno.com.

FTM - INDIANA BOYZ: (Northern Indiana). Glen: Email: Glen22213@aol.com

CD/TS/SO/FTM/MTF - INTERNATIONAL GENDER SUPPORT (aka: Shrinking Violets): PO Box 425, Camel, IN 46032. (317)781-0834. Support group.

TG - TRANSGENDER OUTREACH OF NORTHERN INDIANA Attn: Linda BB, PO Box 425, Carmel IN 46032. Phone: (317)299-5377, Angela. Email: kaylin@iquest.net Support group.

CD/TS/TV/SO/FTM/MTF - IXE: PO Box 20710, Indianapolis IN 46220. Phone: (317)971-6976. Web site: http://members.aol.com/ixe/fish/ixe.html. Email: IXE@aol.com. Support group.

IOWA

TRI-S - IOWA ARTISTRY: Box 75, Cedar Rapids IA 52406. E-mail: wander5980@aol.com. Support group.

KANSAS

TS-SUPPORT LINE: Contact: Francis at 316-795-4876.

CD/TS/SO - CROSSDRESSERS AND FRIENDS: CAF, Box 4092, Overland Park KS 66204. (913)791-3847. E-mail: jbfts@aol.com. Support.

CD/TS/SO - WICHITA TRANSGENDER ALLIANCE: PO Box 3002, Wichita KS 67001-3002. Bi-weekly meetings. Contact: Shelly 316-269-3104 or Krystine 316-688-0816. Support group.

KENTUCKY

FTM - KENTUCKY BOYZ: Lee, 502-549-5619; Email: alphavamp@aol.com (Louisville)

CD/TS/SO - THE BLUEGRASS BELLES: c/o Angela, PO Box 20173, Louisville, KY 40250 (502)446-2175, digital pager, please enter "55" after your telephone number. Email: angelaky@hotmail.com, efduhr@ukcc.uky.edu dwils00@ukcc.uky.edu, or acasbeen@ccuky.campus.mci.net. Support group.

LOUISIANA

CD/TS/SO - GULF GENDER ALLIANCE: PO Box 56836, New Orleans, LA 70156-6836. (504)833-3046. Support group E-mail: alycm@concentric.net TIAC@juno.net.

MAINE

ALL - TRANSUPPORT: Box 17622, Portland ME 04112. (207) 862-2063. Support.

ALL - MAINE GENDER RESOURCE AND SUPPORT SERVICE: c/o Jean Vermette, PO Box 1894, Bangor ME 04402-1894. (207)862-2063. Education, referrals, outreach.

FTM-MAINEBOYZ:
PJ, e-mail: pjmears@megalink.net (Maine)

MARYLAND

CD-TRI-S CHI EPSILON SIGMA: Contact Grace, P.O. Box 505, Baltimore, MD 21022. e-mail: tri_ess@hotmail.com Web: http://www.geocities.com/WestHollywood/Stonewall/3432. Educational and social activities, monthly meetings, large couples contingent, extensive wives networking group.

FTM- BALTIMORE BOYZ: Mary (410)837-8888, Gary (410)392-3640.

CD/TS/SO - WASHINGTON-BALTIMORE ALLIANCE: c/o H. Garfinkle, PO Box 1994, Silver Spring, MD 20915. (301)649-3960. Support group. Meets in DC Metro area.

TG/SO - TRANSGENDER SUPPORT GROUP OF BALTIMORE: c/o GLCCB (Gay & Lesbian Community Center of Baltimore), 241 W. Chase St., Baltimore MD 21201. Phone (410)837-5445 10:00 a.m. - 6:00 p.m. M-Fr or (410)837-8888 7:00 p.m. - 10:00 p.m. evenings. Peer and family support group. Monthly meetings.

FTM - TRANS INFO PROJECT - Information and education website for FTMs. Chat Site 'Alex's Garage ' for informal chat and Sunday night moderated discussions. E-mail: alexfox@erols.com

MASSACHUSETTS

ALL/CD/TS/SO/FTM/MTF - SUNSHINE CLUB: P.O. Box 564 Hadley, MA 01035-0564, (413)-586-5004. E-mail: aeqo7@yfn.ysu.edu Web: http://www.umass.edu/stonewall/sunshineclub.html Support group.

INTERSEX-THE MIDDLESEX GROUP: P.O.Box 25, Newtonville, MA 02160 e-mail: midsx@juno.com 617-630-9263 Specific for intersex individuals.

ALL - TIFFANY CLUB OF NEW ENGLAND, INC.: TCNE, PO Box 2283, Woburn MA 01888-0483. (781)891-9325 (answered live Tuesdays 7:00-10:00pm ET). Web site: www.TCNE.org. Support group.

SO - TIFFANY CLUB WIVES' SUPPORT GROUP: c/o TCNE, Inc., PO Box 2283, Woburn MA 01888-0483. (781)891-9325 (answered live Tuesdays 7:00-10:00pm ET). Support group.

ALL- YOU'RE NOT ALONE: Group explores different aspects of how being a Transperson affects you, your family, your life! Johanna at 781-891-9325.

TS - CAMBRIDGE SUPPORT GROUP: 617-661-9332, meets 2 times per month, JAENIA@erols.com

TS/TG - GENDER SUPPORT SERVICES FOR TSs (GISST): (617)227-6216. Support group for TS/TGs with addiction issues. Meets in Boston.

FTM - ENTERPRISE: PO Box 229, Waltham MA 022254. 781-899-2212. Every Thursday evening. FTM support group.

CD/TS/SO - INNVESTMENTS: PO Box 2194, Orleans MA 02653. Support group.

ALL-FREE BOYZ: Northampton, MA Email: Frankie Hill frankiejlh@aol.com Support.

TS - MERISSA'S DISCUSSION GROUP: PO Box 367, Wayland, MA 01778. (508)358-5919. Support group. All persons welcome.

CD/TS/MTF/FTM - TRANS-CHAT: Write: Trans-Chat, P.O Box 491, Auburn, MA 01501. 2nd & 4th Thursday night of each month from 7:00 to 9:00pm. Support Group in Worcester, MA. Michael at 508-770-9044 e-mail: Transgndr@aol.com

BI GALA - UNIVERSITY OF MASSACHUSETTS - Lowell, SIC(S) Box #34, Lowell, MA 01854 e-mail: BiGALA@student.uml.edu

BOSTON ALLIANCE OF GAY AND LESBIAN YOUTH (BAGLY): is a youth-led, adult-supervised social support group for GLBT youth to age 22. Meetings are held weekly at St. John the Evangelist Church, 35 Bowdoin St, Beacon Hill, near the state house. Wed 6-9pm, Sun 2-5. (617-437-7683, www.bagly.org

GAY & LESBIAN ADOLESCENT SOCIAL SERVICES (GLASS) runs a community center providing peer support, adult counseling, and safe haven for youth age 13-25. Near Newbury St & Mass Ave, open M-F 4-8pm. 617-437-7683

SIDNEY BORUM HEALTH CENTER provides a free clinic for primary health, mental & substance abuse care for GLBT youth age 13-25. 130 Boylston ST. near Tremont, walk-in hours 4-7pm. 617-457-8140

PROJECT 10 EAST: maintains an office and drop-in center. Education-oriented, particularly helpful for those dealing with in-school issues. Teen afternoon activities Wednesdays & Fridays 3-6pm. Office hours M-F 9am-1pm. Old Cambridge Baptist Church, 1145 Mass. Ave, Harvard Square, Cambridge. 617-864-4528, http://Quniverse.com/p10e

VICTIM RECOVERY PROGRAM, FENWAY COMMUNITY HEALTH CENTER: provides counseling & advocacy for GLBT victims of hate crime, domestic violence, sexual assault or police abuse. If you've been victimized, this may be the best place to start getting help. They are even tracking hate crimes against transfolk. 7 Haviland St, near Boylston St & Mass Ave. 617-267-0900 x311 or (800)834-3242 x311

ALCOHOLICS ANONYMOUS: There's a T-oriented AA meeting every week at IFGE in Waltham (call 781-899-2212 for info), and a T-friendly Gay AA meeting every day in Boston. Call Central Services for a free copy of their meeting list. 617-426-9444

YOUTH: FATHER BILL'S: 617-451-2011

MICHIGAN

CD/TS/SO - I.M.E. OF WESTERN MICHIGAN: PO Box 1153, Grand Rapids MI 49501. Web site: www.iserv.net/~ime. Support.

FTM - MICHIGAN BOYZ: (Kalamazoo, MI). Jonathan, 616-345-9070; Email: tushu@complink.net

MINNESOTA

GENDER EDUCATION CENTER: GEC, PO Box 1861, Minneapolis MN 55311. Debra Davis, Director. (612)424-5445, FAX (612)424-8595. Educational outreach.

TRI-S - BETA GAMMA: Box 8591, Minneapolis MN 55408. (612) 870-8536. Email: triessbg@tri-esss.com. Web site: http://www.tri-ess.com. Support group.

YOUTH DISTRICT 202: 2524 Nicollet Ave., So. Minneapolis MN 55408. (612)871-5559. Fax (612)871-1445. Safe place for GLBT youth.

CD - CITY OF LAKES CROSSGENDER COMMUNITY: CLCC, PO Box 16265, Minneapolis, MN 55414. (612)229-3613. Support.

TRANSGENDER HIV/AIDS PREVENTION PROGRAM: Human Sexuality, Dept. of Fam-

ily Practice and Community Health, U Minnesota Medical School, 1300 So. 2nd Street, Suite 180, Minneapolis MN 55454. (612)625-1500, FAX (612)626-8311. Educational outreach.

MISSISSIPPI

TS-SUPPORT LINE: Contact: Francis at 316-795-4876.

TRI-S - BETA CHI MISSISSIPPI: PO Box 31253,Jackson, MS 39206-1253. Lee Frances, Secretary. (601)982-7678 (24 hrs). Support

MISSOURI

CD/TS/SO - ST LOUIS GENDER FOUNDATION: StLGF, PO Box 9433, St. Louis MO 63117. (314) 367-4128. StLGF@aol.com. Web: http://members.aol.com/stlgf1/index.html

TRI-S - SIGMA MU: PO Box 2502#298, Springfield Mo 65801. Phone: (417)831-3433. Email: LSolomon@mail.orion.org.

NEBRASKA

CD/TS/SO - RIVER CITY GENDER ALLIANCE: RCGA, PO Box 3112, Omaha NE 68103. (402) 398-1255. E-mail: sgibbons@synergy.net. Support group.

NEVADA

TRI-S -THETA UPSILON GAMMA: PO Box 42401, Las Vegas NV 89116. (702) 387-3891. Email: sage@intermind.net. Web site: http://www.intermind.net/theta/theta.html. Support group.

TG/CD/TS/SO - TRANSGENDER SUPPORT LAS VEGAS C/O Community Counseling Center, 1120 Almond Tree Lane, Suite 207, Las Vegas, NV 89104. Voice mail: 702-392-2132, e-mail: tgsupport.lv@usa.net web site: http://www.geocities.com/West Hollywood/Heights/5127/Group.html

NEW HAMPSHIRE

PFLAG OF NEW HAMPSHIRE: T-SON, Tel: 603-622-4096, NHTSON@aol.com

WRITERS ETC.: c/o Abbey M. Greene, PO Box 6211, West Franklin NH 03235. (603) 934-3379. Support group.

CD/TS/SO - GENDER TALK NORTH: PO Box 421, Peterborough NH 03458. (603) 924-8828. Email:gtnorth@ top. monad. net. Web site: http://monad.net/~gtnorth/index.htm. Support.

G/L/Bi./T/Q YOUTH - SEACOAST OUTRIGHT: PO Box 842, Portsmouth NH 03802. Phone: (603)431-1013. Resource, referral, support for those 21 and younger; referral only for those over 21.

NEW JERSEY

TRI-S - SIGMA NU RHO: SNR, 1092 St. Georges Ave., Suite 234, Rahway NJ 07065-2664. Phone: (908)826-5287. 24-hour hotline (800)480-3152, in near states. E-mail: carolannsnr@juno.com. Support group.

TRI-S - CHI DELTA MU: PO Box 1, River Edge NJ 07661-0001. (800)484-7593(code4985). Support group. Internet: cdm@carroll.com

CD/TS/SO - MONMOUTH/OCEAN TRANS GENDER: MOTG, PO Box 8243, Red Bank NJ 07701. (732)219-9094. Support group. Email: vikkimmotg@aol.com.

CD/TS/SO - TRANSIT: (908)526-2369. Support group.

CD/TS - NORTHERN NEW JERSEY: c/o Ms. Lynda Frank, PO Box 9192, Morristown NJ 07960. (201)663-0772. Support group.

CD/TS - NJSUPPORT: c/o T. Risley, 301 F Saunders Ave., Bellmawr, NJ 08031. (609)933-2233. Meetings 1st Saturday of the month, Unitarian Universalist Church of Washington Crossing, Renaissance affiliate.

NEW MEXICO

TRI-S - PHI FIESTA!: 8200 Montgomery NE, #241, Albuquerque NM 87109. Phone: (505)299-2533. Support group.

TG/MTF-FTM - TRANSGENDER COMMUNITY GROUP: University of New Mexico, Albuquerque NM. Phone (505)260-1727. Email: egypt@unm.edu. Supportive, educational and social space for ALL transgendered identities. Meets every Monday night.

NEW YORK

CD/TS/SO - IMPERIAL QUEENS & KINGS OF GREATER NEW YORK: 80 Eighth Avenue, Suite 301, New York NY 10011. (212)229-1968 days, (212)627-1969 evenings. Open social group.

FTM- NEW YORK BOYZ: Sam, Email: srw18@columbia.edu (NYC)

ALL - GENDER IDENTITY PROJECT: Lesbian and Gay Community Services Center, 208 West 13th St. New York NY 10011 Tel: (212)620-7310. Fax: (212) 924-2657. rblumenstein@gaycenter.org Support group.

BI-GENDER RAP GROUP: c/o Lynda Frank, 330 W. 45th St. Apt. 3H, New York, NY 10036. Meets 2nd Monday each month, 6-8 pm in lower Manhattan. Contact: Lynda Frank, (212)765-3561.

CD/TS/SO - CROSSDRESSERS INTL: 404 W. 40th St., #2, New York NY 10018. (212)570-7389, or 212-564-4847 on Wed. E-mail: cdinyc@aol.com. Support. Web site: http:// www. members.aol.com/cdnyc/index.html

CD/TS/SO - LONG ISLAND FEMME EXPRESSION: LIFE, PO Box 1311, Water Mill NY 11976-1311. (516)283-1333. Email: joed2viola@aol.com. Support group.

CD/TS/SO - TRANSGENDERISTS' INDEPENDENCE CLUB: TGIC, PO Box 13604, Albany NY 12212-3604. (518)436-4513 live Thurs. 7-9 p.m. or leave a message and instructions for calling back. Support group, e-mail: vicky_s@juno.com

CD/TS/SO - TRANSGENDER NETWORK: PO Box 1611, South Rd Annex, Poughkeepsie NY 12601-0611. Support group. 1st & 3rd Fridays

TS - METAMORPHOSIS: PO Box 6260, Broadway Station, Long Island City, NY 11106-0260. (718)728-4615. Support group.

ALL-ZAPPALORTI SOCIETY, GLBT, PSYCHARATRIC SURVIVORS: Weekly meetings, Sat 2-4pm, at the Lesbian Gay Services Center, 208 W. 13th Street, New York City, west of 7th ave. 718-422-1838

NORTH CAROLINA

FTM - NORTH CAROLINA BOYZ: Terry: 919-639-6158;Email: TLCRD96@aol.com

CD/TS/SO - CAROLINA TRANS-SENSUAL ALLIANCE: 4037 East Independence Blvd., Suite 111, Charlotte, NC 28205, 704-531-9988

TRI-S - KAPPA BETA: c/o Corresponding Secy, PO Box 12101, Charlotte NC 28220-2101. (704)565-5034. E-mail: dajones @infoave.net. Support group.

TRI-S - CHI CHI RHO-TRI-ESS: Crystal Coast Rose, PO Box 733, Bridgeton, NC 28519. Support group.

CD/TS/SO - PHOENIX TRANSGENDER SUPPORT: Phoenix, PO Box 18332, Asheville NC 28814. (704)253-9882. Support group. E-mail: jessicaash@aol.com.

CD/TS/SO - TRIANGLE GENDER SOCIETY (TGS): c/o David & Helen Rogers, 5425 Turkey Farm Rd., Durham, NC 27705. Phone (919)968-8070. Support group.

NORTH DAKOTA

CD/TS/TV - TRANSGENDER SUPPORT GROUP OF NORTH DAKOTA: c/o Debbie Ann Somero, PO Box 644, Wahpeton, ND 58074-0644. Phone (701)642-1427. Support group.

OHIO

All - IT'S TIME OHIO: P.O. Box 21310, Columbus, OH 43221, 614-470-4245, e-mail: itoh@stargate.com Political Action web:http://www.Geocities.com/WestHollywood/7977.

CD/TS/SO - CRYSTAL CLUB: PO Box 287, Columbus OH 43068-0287. (614)294-9031 E-mail: cc@stargatge.com. Support group.

TRI-S - ALPHA OMEGA: Box 2053, Sheffield Lake OH 44054-0053. (216)556-0067. Support group.

CD/TS/SO - CROSS-PORT: PO Box 1692, Cincinnati OH 45201. (606)581-3711, E-mail: wgbn68d@prodigy.com. Support group.

OKLAHOMA

TS-SUPPORT LINE: Contact: Francis at 316-795-4876.

TRI-S - SIGMA BETA: PO Box 42122, Oklahoma City OK 73123. Support group.

OREGON

TS- TRANSSEXUAL PEER SUPPORT GROUP: 2400 NE Broadway, Portland OR 97204. Phone: (503)441-6746. Ask for Tracy. All TS of all ages and trans-curious are invited to attend. Thursdays at 7p.m. at Metropolitan Community Church NE Broadway at 24th Ave. E-mail: tiffanysue@altavista.net Support group.

CD - NORTHWEST GENDER ALLIANCE: NWGA, PO Box 4928, Portland OR 97208. (503)646-2802. E-mail: nwga@teleport.com. Support group.

CD/TS/SO - CAPITOL CITY CHAPTER: PO Box 3312, Salem OR 97302. Support group.

TS - SALMACIS SOCIETY/VERSITILE WOMEN: PO Box 1604, Eugene OR 97440-1604. (541)688-4282. Service & information.

TG - INTERMOUNTAIN TRANSGENDER OUTREACH: 1524 Monroe Avenue, La Grande OR 97850. (541)962-3466. Email: keol@eosc.osshe.edu. Support group.

TRI-S - RHO GAMMA/ROGUE VALLEY GIRLS: PO Box 5551, Grants Pass OR 97527.

PENNSYLVANIA

CD-TRI-S CHI EPSILON SIGMA: Concact Yvonne Sullivan, P.O. Box 3469, York, PA 17405, e-mail: tri_ess@hotmail.com Web: http://www.geocities.com/WestHollywood/Stonewall/3432. Educational and social activities, monthly meetings, large couples contingent, extensive wives networking group.

FTM - PITBOYZ: Dan & Michelle. E-mail: windyl@aabe.com.

CD/TS - TRANSPITT: PO Box 3214, Pittsburgh PA 15230. (412)224-5902. Web: www.transgender.org/tg/tpitt/Support.

CD - TRAVELERS EXPRESS: PO Box 150, Falls Creek PA 15840. (814)375-7651. Central PA region. Self expression in 100% non closeted environment. Passing not an issue, presentability essential. Leave message.

CD/TS/SO - ERIE SISTERS: ESCC, 1903 West 8th Street, Suite 261, Erie PA 16505. Email: eriesisten@aol.com. Support group.

CD/TS/SO - RENAISSANCE - LOWER SUSQUEHANNA VALLEY CHAPTER: Renaissance - LSV, PO Box 2122, Harrisburg PA 17105-2122. (717)780-1578. Email: lsv@ezonline.com. Web site: http://www.ezonline.com/lsv. Support group.

CD/TS/SO - RENAISSANCE - LEHIGH VALLEY/POCONO AREA: Renaissance LV, PO Box 3624, Allentown PA 18106. Phone: (610)821-2955. Support group.

FTM - LANCASTER BOYZ: Tom (717) 892-4999. E-mail: malesic@prolog.net. (Philly area)

TS - THE PHILADELPHIA TRANSSEXUAL SUPPORT GROUP (PTSSG), 1201 Locust Street, Washington West Project, Philadelphia Meets in the office of the Transgender Health Action. The 1st Saturday of each month at 4pm. e-mail: rica@netaxs.com

CD/TS/SO - CROSS DRESSERS INTERNATIONAL: CDI, PO Box 61, Easton PA 18044. S. Kristine James, Director, Karen Cioe, NYC Coordinator. Support group.

CD/TS/SO - RENAISSANCE - EDUCATION ASSOC. INC.: Renaissance GPC, 987 Old Eagle School Road, Suite 719, Wayne PA 19087. (610)975-9119. E-mail: bensalem@bbs.cpcn.com. Web site: http://www.ren.org. Support group.

FTM - PHILLY BOYZ: Steve (215)546-6444. E-mail: shock@asc.upenn.edu. Philadelphia

CD/TS/SO/MTF/FTM - TRANSYOUTH SERVICES, UNITY INC.: 1207 Chestnut St., Philadelphia, PA 19107. (215)851-1958 or (215)851-1912. Community services and "Butch Brothers" Philadelphian FTM support.

RHODE ISLAND

CD/TS/SO/FTM/MTF - MORF!: PO Box 623, Portsmouth, RI 02871-0623. Gwen Spencer, Barbie Fournier, or Tricia-Lynn Ross (401)683-6836. Support group.

TENNESSEE

TRI-S - ALPHA PI OMEGA: c/o Laury W. PO Box 871, Brentwood TN 37204-0871. Email: laurywl@mindspring.com. Web site: http://members.aol.com/apotris/aponash.htm. Support group.

CD/TS/SO - TENNESSEE VALS: PO Box 92335, Nashville TN 37209-2335. (615)664-6883 voice mail. E-mail: jlove1@ix. netcom. com. Homepage: http:/www.transgender.org/tg/tvals/. Support group

FTM - TENNESSEE BOYZ: (Nashville, TN).: Dustin, 615-431-9540; FTM Resource Email: CyberBum7@aol.com

TEXAS

CD/TS/SO - METROPLEX CD CLUB: PO Box 141924, Irving TX 75014. (972) 264-7103. e-mail: domiss@flash.net Web: www.flash.net/~domega Support group.

TRI-S - NU EPSILON TAU: PO Box 14096, Arlington TX 76094. (214)490-5738. Email: BobbieR648. Support group.

CD - HELPING CDs ANONYMOUS: HCDA, 239 Westheimer (Office of Suzanne Anderson Properties), Houston TX 77006. Tel: 281-520-3610 (pager) Email: brenda@firstnethou.com. Support Group.

TRI-S - THETA OMEGA GAMMA DETROIT: c/o Tri-Ess, 8880 Bellaire B2, Suite 104, Houston TX 77036. (temp) Support.

TRI-S - TAU CHI CHAPTER-TRI ESS: 8880 Bellaire B2 Ste. 104, Houston, TX 77411-1105. (713)347-8747. E-mail: JEFTRIS@aol.com. Web site: http:www.firstnethou.com/brenda/. Support group.

CD/TS/SO - BOULTON & PARK SOCIETY: PO Box 17, Bulverde, TX 78163 (830)980-7788 live Tues. 6-9 pm CT. Email: tx t party@aol.com. Support group.

WEST TEXAS GENDER ALLIANCE: 5350 LLano, Abilene TX 79605. Email:

temsim@jumo.com.

UTAH

CD/TS/SO - ALPHA RHO, SALT LAKE CITY: PO Box 571242, Salt Lake City, UT 84157-1242. (801)553-8141. Support group.

CD/TS/SO - ENGENDERED SPECIES: PO Box 11897, Salt Lake City UT 84147. (801)364-0136. Support group.

CD/TS/TG/SO - SALT LAKE GENDER CONSORTIUM: Genevera Martin Pres., PO Box 651073, Salt Lake City UT 84165-1073. (801)576-1416. E-mail: geneveram@aol.com. Support Group.

VERMONT

CD/TS - TRANS: (802)472-8115. Meets 1st & 3rd Tuesdays in Burlington. Support group.

CD/TS - VERMONT TRANSGENDER SUPPORT GROUP: For information leave message at (802)860-8430. Support group.

VIRGINIA

CD-TRI-S CHI EPSILON SIGMA: (DC/ Northern Virginia) Contact Joan Henderson, P.O. Box 1728, Herndon, VA 20172 e-mail: tri_ess@hotmail.com Web: http://www.geocities.com/WestHollywood/Stonewall/3432. Educational and social activities, monthly meetings, large couples contingent, extensive wives networking group.

CD-TRI-S CHI EPSILON SIGMA: (Richmond/ Williamsberg) Contact Lucy Stone, P.O. Box 382, Norge, VA, 17405 e-mail: tri_ess@hotmail.com Web: http://www.geocities.com/WestHollywood/Stonewall/3432. Educational and social activities, monthly meetings, large couples contingent, extensive wives networking .

TG-LADIES FIRST SOCIAL CLUB: Dumfries, VA (703)441-0283. E-mail LAURABCD@AOL.COM

TRANS-GENDER EDUCATIONAL ASSOCIATION: PO Box 16036, Arlington VA 22215. (301)949-3822. E-mail: tgea@juno.com. Web Site: http://www.tgguide.com/guide/dc/tgea~ndx.html. Support group.

WASHINGTON

CD/TS-CINDERELLA CIRCLE: 304 W. Champion, Bellingham WA 98225 (360)416-1437 Email: mhowe@pioneernet.net Web: http://www.pioneernet.net/mhowe/ Support.

CD/TS/SO - PAPILLON: P.O. Box 1365, Veredale, WA 99037. Support Group. Phone: (509)458-2741. Meetings in Spokane

WASHINGTON, DC

FTM - DC BOYZ: Adam (301)270-0372. E-mail: romandede@aol.com. (Metro DC.)

CD/TS/SO - PFLAG (Parents, Families and Friends of Lesbians and Gays): 1101 - 14th St. NW, Suite 1030, Washington, D.C. 20005. Phone (202) 638-4200. Fax (202) 638-0243. E-mail: info@pflag.org. Web: http//www.pflag.org.

CD/TS/SO - WASHINGTON-BALTIMORE ALLIANCE: c/o H. Garfinkle, PO Box 1994, Silver Spring, MD 20915. Phone (301)649-3960. Support group. Meets in metro D.C.

TG - TRANSGENDER EDUCATION ASSOCIATION OF WASHINGTON DC: Web Site: www.zzapp.org or e-mail: tgea@zzapp.org

WEST VIRGINIA

WISCONSIN

CD/TS/SO - GEMINI GENDER GROUP: PO Box 44211, Milwaukee WI 53214. (voice-mail). (414)297-9328 E-mail: 75261.1443@compuserv.com. Support

WYOMING

CANADA

QUEBEC

TS/SO - FACTT - QUEBEC: Box 293, Cote de Neiges Post Office, 5858 Cote de Neiges Blvd., Montreal, Quebec, CANADA H3S 2S6. French-speaking referrals, medical and psychological services and support group.

CD/TS/SO - CLUB MET: 4113 Dorion Street, Montreal, Quebec, CANADA H2K 3B8. (514)528-8874. Support group. (Formerly TAM.)

TS/SO - TRANSSEXUALS IN PRISON: Non-prisoners contact Dee Farmer, 23288037, PO Box 4000, Springfield MO 65808. Prisoners contact Mrs. Patricia Fisher, Succ 293 Cote-des-Neiges, 5858 Cote-des-Neiges Blvd, Montreal, QC, CANADA H3S 2S6.

ONTARIO

TS - TRANSITION SUPPORT: The Church Street Community Centre, 519 Church Street, Toronto, Ontario, CANADA M4Y 2C9. Support group. 2nd & 4th Fridays 7-10pm

CD/TS/SO - XPRESSIONS: PO Box 223, Station A, Toronto, Ontario, Canada M5W 1B2. (416)812-6879. Email: dwells@sympatico.ca. Support group.

CD/TS - STREET OUTREACH SERVICES: c/o W. Travers, 622 Yonge St, 2nd Fl, Toronto, Ontario, CANADA M4Y 1Z8. (416)926-0744 (24 hours). Multitude of services for TG youth.

IS - PATRICIA FLORA: PO BOX 425, Postal Station C, 1117 Queen Street West, Toronto, Ontario, CANADA M6J 3P5.

CD/TS/SO/FTM/MTF - TAKE A WALK ON THE WILD SIDE: 161 Gerrard St. E, Toronto, Ontario, CANADA M5A 2E4. (416) 921-6112 (24hr). TS support group, professional services. Email: info@wildside.org. Web site: www.wildside.org.

CD/TS/SO - GENDER MOSAIC: PO Box 7421, Vanier Ottawa, Ontario, CANADA K1L 8E4. (819)770-1945. Support group.

MANITOBA

CD/TS/SO - PRAIRIE ROSE GENDER GROUP: PRGG, Box 23 Grp 4 RR1, Dugald, Manitoba, R0E 0K0. CANADA. (204) 257-2759. Support group.

CD/TS/SO - MASQUERADE: c/o Lady Godiva Boutique, 832 Corydon Ave., Winnipeg, Manitoba, Canada, R3M 0Y2, Support.

ALBERTA

CD/TS/SO - ILLUSIONS SOCIAL CLUB: Box 2000, 6802 Ogden Rd. SE, Calgary, Alberta, CANADA T2C 1B4. (403) 236 7072. Support

TRI-S - PHI SIGMA: Box 81115, 755 Lake Bonavista Drive S.E., Calgary, Alberta CANADA T2J 7C9. Phone: (403)271-6247. Support group.

CD/TS/SO - ILLUSIONS SOCIAL CLUB: Box 33002 Glenwood PO , Edmonton, Alberta, CANADA T5P 4V8. Support .

BRITISH COLUMBIA

TS - TRANSSEXUAL SUPPORT GROUP: Dr. Angela Wensley, 14905 32nd Avenue, White Rock, British Columbia, CANADA V4P 1A4. (604)536-2053. Support group.

CD/SO - CORNBURY SOCIETY: Box 3745, Vancouver, British Columbia, CANADA V6B 3Z1. Support group.

CD/TS - FOUNDATION FOR THE ADVANCEMENT OF TRANS-GENDERED PEOPLE'S SOCIETY: FATE, 1-1727 William Street, Vancouver, British Columbia, CANADA V5L 2R5 (604)254-9591.

TG/TS/CD - ZENITH FOUNDATION: Box 46, 8415 Granville Street, Vancouver, British Columbia, CANADA V6P 4Z9. (604) 261-1695. http://www.GenderWeb.org/~zenith e-mail: Tamaras@istar.ca MTF & FTM.

PUERTO RICO

SIDA DE PUERTO RICO: PO Box 36-4842, San Juan PR 00936-4842. Phone (787)782-9600. Fax (809)782-1411. HIV/AIDS outreach organization.

SIDA DE PUERTO RICO: Calle 16 SE #1200 Caparra Terrace, Rio Piedras PR 00921. Phone (787)782-9600 Fax (787)782-1411. HIV/AIDS outreach organization.

SIDA DE PUERTO RICO: Calle Estrella #30, Ponce PR 00731. Phone (787)844-9600. Fax (787)841-1485. HIV/AIDS outreach organization.

MEXICO

GUADALAJARA, Jaliso, Mexico 44190. Cris-Lida E-mail: crisalidagdl@usa.net Web: http://www.geocities.com/WestHollywood/Village/5613/AgrupaciUn Mexicana de Travestis, Crossdressers, Transgenderistas y Transexuales. Soporte, Apoyo y Servicios VISITANOS!

SPAIN

BARCELONA: Colectivo de Transexuales de Catalunya (CTC) Meeting Mondays 7-9pm, Tel: 34 93 3005946, e-mail: lenaimoi@pangea.org Mailing Address: Apartado de correos Num. 32081, Barcelona Spain 08080

MADRID: CLINICA ISADORA, Pirineos 7, Madrid, Spain Tel: 34 91 3111000, Fax: 34 91 3116238, E-mail: isadora@omc.telprof.es Coordinator: Empar Pineda Mon-Fre 10:30am - 5pm. Director: Dr. S.Z. Chami. Surgeons: Dr. Chami and Dr. Hage from Free University of Amsterdam.

TS - COLETIVO DE TRANSEXUALES DE CATALUNA: C. Balmes, 70, lo la, 08830 Sant Boi de Lobregat, Barcelona. Phone: 08080 3454 6398 Wed. 7.30-9 pm. Please speak Spanish.

TS/FTM/MTF - IDENTIDAD DE GENERO: Apartado 3023, Granada 18080. Non-profit support group.

ARGENTINA

TS - TRANSSEXUALS FOR THE RIGHT OF LIFE AND IDENTITY: TRANSDEVI, Casilla de Correo 151, C.P. 1748 Gral. Rodriguez, Buenos Aires.

BRAZIL

TS - PURPURINA (GLITTER) PROJECT: Katia Monteiro, no. 55 Rua DA Gloria, #30, Gloria, Rio de Janeiro. Phone: 02-252-4757. FAX: 02-227-5944. Educational outreach. AIDS awareness, referrals.

TS - GRUPO BRASILEIRO de TRANSEXUAIS (Brazilian Transsexual's Assoc.): Caixa Postal 1097, Cuiaba-MT 78.005-970.

AFRICA

NIGERIA

TRANSFORMATION SECOND SELF: c/o Jane Enuneku, KM 4 Idiroko Road, PO Box 1006, OTA, OGUN STATE, WEST AFRICA. Tel: 039-722615 Fax: 039-722467

SOUTH AFRICA

PHOENIX: c/o Desiree Dexter, PO Box 1332, Springs, 1560, Gauteng. Phone: +27111 362 5247.

SATRU: (S. African Transexual Research Unit) PO Box 87283, Houghton, Johannesburg 2041.

ENGLAND

TV/TS - TRANSESSEX: P.O.Box 3, Basildon, Essex SS14 1PT. Tel: (01268) 583761 e-mail: stacy@transessex.nildram.co.uk. Support.

TS - AIS SUPPORT GROUP: 2 Shirburn Ave., Mainsfield, Notts., NG18 2BY. Email: 100572.2376@compuserve.com.

BEAUMONT SOCIETY: 27 Old Gloucester Street, BM Charity, London, WC1N-3XX. Phone: +44-1582-41-2220.

BEAUMONT SOCIETY PARTNERS' GROUP: phones: +44-1223-441246 (South), +44-1203-717528 (Central & Wales).

GENDYS NETWORK: BM Gendys, London, England DE56 1DE, Phone: 01773 828973, e-mail: jedbland@mcmail.com Web Site: www.gendys.mcmail.com/ Group for MTF & FTM.

TS - CHANGE: BM Box 3440, London WC1N 3XX. Phone: +44-0-1303-259543. Email: TS1CHANGE@AOL.COM. Home page: http://users.aol.com/ts1change/private/homepage.htm.

FRIENDS MERSEYSIDE: 36 Bolton Street, Liverpool, L3-5LX. Phone: +44-151-709-3181, Fri. 7.30-9 GMT.

FTM NETWORK [also PRESS FOR CHANGE]: BM Network, London, WC1N 3XX. Phone: +44-161-423-1915, Wed. 8pm-10.30 pm Wed. GMT Email:s.t.whittle@mmu.ac.uk. Web site: http:\\ www.pfc.org.uk/ press for change. Support, political lobbying and education group.

THE GENDER TRUST: BM Gentrust, London, WC1N-3XX. Tel:+44-1305-269222 before 10 pm GMT. Overseas Representative, Dorothy Francis, The Gender Trust, 3 Hartington Villas, Hove, BN3 6HF, ENGLAND.

TS - GENDER IDENTITY CONSULTANCY SERVICES: Phone: +44-1071 244 6090, FAX: 0171 244 6090. Email: GICS@aol.com.

INTERNATIONAL GENDER TRANSIENT AFFINITY: Box 2, 1 Banks Building, School Green Road, Freshwater, Isle of Wight, P040-9AJ. Human rights/research.

MERMAIDS: BM Mermaids, London WC1N 3XX. Group for children and teenagers with gender dysphoria and their families.

TV - NORTHERN CONCORD: M60 1LN, Manchester e-mail: JennyB@Concord.nwnet.co.uk

OUSU TRANSGENDER GROUP: Oxford University Student Union, Little Clarendon Street, Oxford. Phone: +44-1865-270777.

ROSE'S CLUB/REPARTEE: P.O. Box 186 Barnsley, South Yorkshire, S73 0YT, England, Tel/Fax +44 1226 754252. E-mail: roses@repartee.co.uk. URL: http://www.repartee.co.uk. Support for transgendered and partners + magazine and newsletters.

VANITY CLUB UK FOR GIRLS ON THE INTERNET: Provides friendship and contact with others for those wishing to get out and enjoy being T. For details, Web: http://www.geocities.com/westhollywood/village/7604/

IRELAND

TRANS-GENDER ARCHIVE: c/o Dr. Richard Ekins, University of Coleraine, County Londonderry, Northern Ireland, BT52 1SA Library and archive reference resource and research. +44 1265 44141.

BELFAST BUTTERFLY CLUB: Northern Ireland, P.O. Box 210, Belefast BT1 1BG +44 1585 430408

SCOTLAND

CROSSLYNX: c/o SGLS, PO Box 38 Glasgow, G2-2QF. Phone: +44-141-221-8372. HelpLine: +44-141-332-3333.

BEAUMONT SOCIETY PARTNER'S GROUP: phones: +44-01389-380389.

WALES

SOUTH WALES TV/TS GROUP: c/o Martina Rees, 56a Kinross Ct, Ridgway Road, Llan-Romney, Cardiff, VF3-9AE.

FRANCE

ASSOC. BEAUMONT CONTINENTAL: ABC, BP-3, F-68350 Didenheim.

ASSOCIATION D'AIDE AUX TRANSSEXUELS: AAT, Maison des Associations, 93 La Canabiere, 13001 Marseille.

ASSOCIATION DEVENIR FEMME: Les Terrasses du Mediterranee, 13006 Marseille.

ASSOCIATION DU SYNDROME DE BENJAMIN: Relais 59-59 avenue Daumesnil, 3 r Keller, 75012, Paris. 01 43 47 2125.

CARITIG: B.P. 17-22, 75810 PARIS CEDEX 17, FRANCE. Phone 33-1-42-27-42-28. Fax 33-1-64-31-05-82. Web: http://www.intersocial.org/caritig. Center for assistance, research and information on transsexuality and gender identity.

SWITZERLAND

KONTAKFORUM FEMME TRAVESTIE: Postfach 6788, CH-8023, Zurich.

TS - SELBSTHILFE GRUPPE: Postfach 92, CH-9008 St. Gallen.

GERMANY

IS - AIS SELBSTHILFEGRUPPE: Postfach 7, 71201 Rottenburg am Neckar. (Fluent English, German.)

BODY AND SOUL: c/o KIBISS KISS, Hanover. Phone: +0511/666567 oder Stefanie 0511/457347.

TV/TS - CHELSI E.V.: Treff Sachsen, Roesslerstr. 9, 09113 Chemnitz. Phone: +49-371-50094 (Friday only). FAX: +49-371-55867.

CLUB NEUES LEBEN NOVA: PO Box 710232, 80634 Munchen. Phone: +49-089/7916643, 6-6:30 pm (CET). speak German.

SELBSTHILFEGRUPPE FRANKFURT AM MAIN: Postfach 10 10 46, 63010 Offenbach. Tel. 069/8001008.

TV/TS - GEREDE e.V.: Treff Sachsen, Wiener Strasse 41, 01219, Dresden. Phone: +49-351/4640220 (Friday only).

INFORMATIONS KONTAKT UND VERMITTLUNGSSTELLE FUR TRANSSEXUELLE MENSCHEN IN BADEN WURTTEMBERG e.V.: IKV, c/o AOK Karlsruhe, Kriegstr. 41, D-76133, Karlsruhe. Phone/FAX: +49-721-62-3382.

LEBENSBERATUNG FUR TRANSEXUELLE MENSCHEN IM SAARLAND: c/o Dr. Waltraud Schiffels, Schlossstr 6, D-66117, Saarbruecken. Phone: +49-0681-583912

SELBSTHILFEGRUPPE FUR TRANSSEXUELLE MENSCHEN IN TUBINGEN: DAGMAR KALTENMARK, c/o Sozialforum, Tubingen e.V., Paulinenstr. 25, D-72072, Tubingen.Phone:+49-7472-6048. Email: 100722.3070@compuserve.com.

SELBSTHILFEGRUPPE: Monika Lusche, Muehlstr. 26, 74399 Waldheim. Phone: +49-7143-33502. Astrid Votz, Forstr. 10, 71111 Waldenbach. Phone: 07157/8222. Email: 10722.3070@compuserve.com or 10157.1116@compuserve.com.

SONTAGSCLUB e.V.: Rhinover Strasse 8, D-10437, Berlin. Phone: +49-30-208-2035 (Friday 6-8 CET). Email: kasimir@inf.fu-berlin.de.

INTERESSENGEMEINSCHAFT TRANSSEXUELLE GRUPPE IN DER SEKIS: Albrecht-Achilles-Str. 65, 10709 Berlin. Phone: 030/8926602.

TRANSIDENTITAS: Postfach 10 10 46, 63010, Offenbach. Phone: +49-69-800-1008.

TRANSSEXUELLEN-ARBEITSKREIS: c/o HUCH, Westring 278, D-24116, Kiel. Phone: +49-431-17090. FAX: 431-17099.

TSH ESSEN: c/o Claudia Peppen horst, Caesarstr. 34, D-45130, Essen. Phone: +49-201-786899.

TSH MUNSTER: c/o MIKS, Herwarthstr 2, 48143 Muenster. Phone: +49-251/511263, Claudia Scholz.

TS GRUPPE HAMBURG: Christian Susan Black, Nubeblerkamp 13a, 22175 Hamburg. Phone: 040-754-4323.

TVV: PO Box 1148, D-65780, Hattersheim.

TS - VIVA TS SELBSTHILFEGRUPPE MUNCHEN e.V.: Obere Muhlstr. 22, D-81247, Munchen. Phone: 089-89-16 19 65 6-6:30 pm CET. Please speak German.

TS - SELBSTHILFE BIELEFELD: C/0 Praxis fuer Beratung und Psychotherapie, Herrn Detlef Kunert, Karl-Eilers-Str. 1, 33602 Bielefeld. Phone: 0521/63623.

TS - SELBSTHILFEGRUPPE BONN: c/o SEKIS Bonn, Lotharstr. 95, 53115 Bonn. Phone: 0228/221754.

SHG DUESSELDORF: c/o Stefanie Sander, Pleistr. 1, B-4731 Eynatten/Belgian. Phone/FAX: 0032/87852833.

TS-GRUPPE: c/o AIDS-Hilfe Thueringen, Postfach 50, 99001 Erfurt. Phone: 0361/7312233.

TS-ANGEHOERIGENGRUPPE AWO-BERATUNGSZENTRUM: Luetzow-Str. 32, 450101 Essen. Phone: 0201/312051, 0201/312052.

TS - SELBSTHILFE GOETTINGEN, TS IN PRAXIS DR. WIEDEKING: Buehlstr. 28a, 37037 Goettingen. Phone: 0551/46755.

SHG-HEIDELBERG: Andreas Kress, Postfach 103766, 69029 Heiderlberg.

TRANSIDENTITAS e.V. SHG KOBLENZ: c/o Joana, phone: 0261/45040.

TRANSEXUELLENGRUPPE KOELN: c/o Karin, phone: 02196/1739.

PRO FAMILIA SACHSEN: c/o Prof. Dr. L. Aresin, 04315 Leipzig. Phone: 0341/61530.

TRANSIDENTITAS e.V. SHG: c/o Christoph, phone: 0391/5614616.

SHG MANHEIM: Andreas Tremmel, Postfach 1242, 67370 Dudenhofen.

TRANSIDENTITAS e. V.: WUF-ZENTRUM, Niggelweg 2, 97082 Wuerzberg, jeden4.

AUSTRIA

TRANSX-VEREIN TRANSGENDER: PO Box 331, A-1171, Wien.

BELGIUM

FRANJEPOOT: Postbox 53, B-2100 Deurne 1.

GENDERSTICHTING (BELGIUM GENDER FOUNDATION): Pluimstraat 48, B-8500, Kortrijk. Phone: +32-56-21-9541 (M-F 9-11:30 am, 1-4:30 pm, M & W to 8 pm).

TS - VERVLIET JESSICA: Ravalsvarg Sdraad #372100, Dauma, Belgium. Support.

DENMARK

FPE-NE DENMARK: Postboks 361, DK-1504 Copenhagen V. Email: FPE-NE.DK@dk-online.dk. Web site: http://www2.dk.online/users.fpe-ne.dk.

TRANSVISION: PO Box 280, DK-1502, Copenhagen V.

TRANSPAL: c/o Jen Christiansen, Ostergade 20 E, DK 9870 Sindal Phone/fax: +011 45 98935253. Social.

CD/TS/TG - TRANSVESTIFORENIGEN I DANMARK: TID, Postbox 9071, 1309 Kobenhavn K. Contacts: Solveig, chairwoman, +45 44999920, Fax +45 44959573. Fyn Mirell, +45 64801810, phone & fax. Jylland Cille, +45 97742299, phone & fax. Email: tid@danbbs.dk. Web site: http://www.danbbs.dk/~tid. The club is open to other "Ts" also but, the main focus is on crossdressing.

NORWAY

FPE-NE NORWAY: Box 1968, Vika, N-0125 Oslo.

EUROFANTASIA: Box 442, N-4301 Sandnes. Phone & FAX: +47-51-66-24-22. Email: jennys@transgender.org.

SWEDEN

TS - BENJAMIN: PO Box 9083, S 102 71, Stockholm. Phone: +46-40-611-9923, Tues. 7-9 pm CET.

FPE-S SWEDEN: Box 49029, S-400 64 Gothenburg. Phone: +46-8-34-1316.

PHI PI EPSILON SVERIGE: Box 529, S-101 30 Stockholm.

FINLAND

DREAMWEAR CLUB: Box 159, FIN-80101 Joensuu.

SETA: c/o TRANS CENTER, Box 135, FIN-00251 Helsinki. Phone: +358-0-2411-135. Email: ekt@seta.fi.

NETHERLANDS

TS - AIS SUPPORT GROUP: (038) 269845. (Fluent English, Dutch.)

TS - WERKGROEP TRANSSEKSUALITEIT GRONINGEN: EENDRACHTSKADE NZ 19, 9718 BB GRONINGEN, +31-(50) 527-35-89. Contact H.H. VISSCHER, E-MAIL: francina@worldaccess.nl.

GENDERTEAM AMSTERDAM: Prof. Dr. L.J.G. Gooren, Dept. Endocrynology/Andrology, Free University Hospital, PO Box 7057, 1007 MB, Amsterdam. Phne: +31-020-444-0542 ext. 199. FAX: 444-0502.

FTM - HET JONGENSUUR: Binnenkadijk 178, 1018 ZH Amsterdam. Phone: +31 020-6221710.

TV/TS - LANDELIJKE KONTAKTGROEP TRAVESTIE EN TRANSSEKSUALITEIT: LKG T&T, Postbus 11575, 1001 GN Amsterdam. Phone: +31 10 -453-18-93. Email: Rosalind@xs4all.nl.

NEDERLANDSE VERENIGING HUMANITAS: PO Box 71, NL-1000 AB Amsterdam. Phone: +31 020-5231100. MTF, FTM self help groups.

FTM - MANNENGROEP: c/o Humanitas, PO Box 71, NL-1000 AB Amsterdam. Phone: +31 020-5231100. FTM support group.

MTF/SO - WERKGROEP FACET: Rode Kruislaan 61, NL - 5628 GB Eindhoven. Phone: +31-40-241-5475.

TURKEY

LAMBDA ISTANBUL, PK 103 Goztepe, Istanbul. Fax 90.212.224.3792.

TV/TS - SEXUAL LIBERTIES: Use the ablove mailing instructions for Travesty/Transsexualle, c/o Iskendar Savasir. Educational outreach for all Islamic countries.

PAKISTAN

KHUSRA OF PAKISTAN: c/o Muhamid Aslam Khusra, PF-34 Abbotabad Hockey Stadium, Abbotabad.Phone: +92-5921-6158 (leave message) or 5921-2858.

BANGLADESH

YOUTH APPROACH: 3, Purana Paltan, Dhaka-1000, Bangladesh. Phone: 88-02-7555321. Email: yadc@bangla.net.

CZECH REPUBLIC

CZECH TRANSFORUM, Prague, e-mail: oskar98@writeme.com Web: http://www.fortunecity.com/village/newcompton/153 Supporting organization for Czech and possibly Slovak transsexuals. first in the Czech Republic. Just starting to work.

RUSSIA

TV/TS - ICE AND FIRE MOSCOW: Margaret Mankevitch, c/o Masha Oleheva, 95-1-36 Vernadsky Ave., 117526, Moscow. Write Directly to Margaret Mankevich. DO NOT PUT GROUP NAME OR TITLE ON ENVELOPE.

TV/SO - FPE LATVIA: Elga Remes, Jurmala, 15, PO Box 17 LATVIA LV 2015.

TV/TS/GLBT/CD - CORN-FLOWERS, The Russian Society at the Volga River's Area: c/o Yuri Kumykov, PO Box 10, Saratov RUSSIA. Social group.

AUSTRALIA

NEW SOUTH WALES

FTM - BOYS WILL BE BOYS: PO Box 1349, Strawberry Hills, 2012. Tel:+61-02-319-2034.

THE GENDER CENTRE INC.: PO Box 266, Petersham, NSW 2049. Telephone:+61-02-9569-2366. Email: gender@rainbow.net.au. Support group, counseling, referrals, accommodations, HIV information/materials.

CD - LES GIRLS: PO Box 504, Burnwood, 2134.

SEAHORSE SOCIETY NSW: PO Box 168, Westgate, 2048. Telephone: +61-02-569-6239 (Thurs. eve.). Email: seahorse@cia.com.au

SEX WORKERS OUTREACH TRANSGENDER SUPPORT PROJECT: SWOP, PO Box 1453, Darlinghurst 2010. Phone: +61-02-212-2600; FAX: 212-3978.

TRANSGENDER LIBERATION COALITION: TLC, PO Box 208, Kings Cross, 2011. Phone: +61-02-358-5664.

QUEENSLAND

IS - MARY RUSSELL: PO Box 3371, Logan Hyperdrome, Loganholme, 4129.

AUS. TRANSGENDERIST SUPPORT ASSOC. INC.: ATSAQ, PO Box 212, New Farm, 4005. Phone: +61-07-846-3787 (24-hour helpline), 236-2400, FAX 236-2398.

FTM - BOYS WILL BE BOYS: PO Box 212, West End, 4005. Phone: 07-846-3787.

GENDER CLINIC: 484 Adelaide Street, Brisbane, 4000. Phone: +61-07-839-8262.

AUSTRALIAN TRANSGENDER SUPPORT ASSOC.: PO Box 212, New Farm, Brisbane, QLD 4005. Phone: +61 03-846-3787. Fax: +61 03-254-2680. Support group, professional services and referrals, 24-hour help line.

SEAHORSE SOCIETY OF QUEENSLAND: PO Box 574, Annerley Brisbane, 4103. Phone: 61-7 38922124.

SELF HEALTH FOR QUEENSLAND WORKERS IN THE SEX INDUSTRY: SQWISI, PO Box 689, West End 4101. Phone: +61-07-844-4565. FAX: 844-8840.

SOUTH AUSTRALIA

CARROUSEL CLUB INC: a non-profit group that provides a social outlet and support for crossdressers and transsexuals of all ages and nationalities. PO. Box 721, Marleston SA 5033, Australia. Phone Michelle 61 8 8281 6190 or Carol 61 8 8289 2409

TRANSGENDER INFORMATION SERVICE OF SOUTH AUSTRALIA: Contact: Lana Barlow, 8 Mawson Rd, Meadows, South Australia, 5201

CHAMELEONS GROUP: PO Box 907, Kent Town, 5071. Phone: +61-08-362-1611.

SOUTH AUSTRALIA TRANSSEXUAL SUPPORT: Phone: +61-08-362-3223. Gayline: 362-1611, Jenny.

VICTORIA

CHAMELEON SOCIETY OF VICTORIA INC.: PO Box 500, Williamstown, Victoria 3016. Phone: 61-3-93159172. Email: lynne@melbpc.org.au.

FTM TS - BOYS WILL BE BOYS: PO Box 328, Northcote, 3070.

GENDER DYSPHORIA CLINIC AT THE MONASH MEDICAL CENTRE: Clayton Campus, 246 Clayton Road, Clayton 3168. Phone: +61-03-955-1437, ask for Dawn.

SEAHORSE CLUB OF VICTORIA, INC.: GPO Box 2337V, Melbourne, Victoria 3001. Phone: +61 359-711-684. Support group.

TRANSGENDER LIBERATION AND CARE: TLC, PO Box 1674, South Preston, 3071. Phone: +61-394-811-506, ask for Sharon. Email: gayle@melbpc.org.au.

WEST AUSTRALIA

CHAMELEON SOCIETY: PO Box 367, Victoria Park, 6163. Phone: +61-01-577-1753.

GENDER COUNCIL OF AUSTRALIA (W.A.) INC.: PO Box 58, Victoria Park, 6110. Phone: +61-09-362-5447.

WATS SUPPORT UNITY AND PRIDE: WATSUP, PO Box 771, Doubleview, 6018.

NEW ZEALAND

IS - INTERSEX SOCIETY OF NEW ZEALAND: PO Box 9196, Wellington. Phone: +6 4 4727386. FAX: +6 4 4727387.

NEW ZEALAND GENDER DYSPHORIA FOUNDATION: NZGDF, PO Box 2827, Auckland.

TOPS: PO Box 68-509, Newton, Auckland. Phone: 64 9 3666 106. Fax: (09) 3666 106-8462 549. Support group and trans friendly medical clinic.

JAPAN

ELIZABETH CLUB: 5-32-18 Kameido, Koto-ku, Tokyo 136. Phone: +81-3-3683-6092.

ELIZABETH NAGOYA SHOP: 1-13-15 Noritake Nakamura-Ku, Nagoya-shi 453.

FTM NIPPON: c/o Adachi-Ku, Adachi-Nishi-post office, Tokyo 123. Email: ftmjapan@mxm.meshnet.or.jp. Support group and professional services. Newsletter is in Japanese only. Correspondence in English is acceptable.

ASIAN TS CLUB: c/o FTM Nippon, Adachi-ku, Adachi-Nishi Post Office, Tokyo 123. Asian international TG

TAIWAN

FEMININE BOY'S CONCERN ASSOCIATION: Contact: Peter Tehua Kao, 2F, #29, Lane 97, Chien-kuo Road Hsin-tein, Taipei, Taiwan, Tel: +886-2-29112414. E-mail: peterkao@tpts5.seed.net.tw

WANTED DETECTIVES.

We need your help in updating our support group list. Please contact Mykael at, Mykael@ifge.org or Matthew at, Mcarlos@ifge.org

We will appreciate any information especially on International listings. Thank You

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Death of a National Transgender Leader

JoAnna McNamara, 1950 - 1998

Lake Oswego, OR. JoAnna McNamara, J.D. died by her own hand on July 7, 1998. JoAnna was transsexual woman and an attorney who, shortly after graduating from Willamette University Law School in 1996, wrote the brief that convinced the Bureau Of Labor and Industries (BOLI) to extend protection from discrimination to transsexual men and women, under Oregon's state disability law. According to friends, JoAnna felt that her Crohn's Disease had become terminal and rather than a long lingering death in a hospital bed, instead she took her own life

JoAnna also served as Employment Law Moderator for the Transgender Law Conference (ICTLEP) from 1996 to 1997 and helped to co-found It's Time, Oregon! a state chapter of the national transgender political organization It's Time, America! She was also a member of the Oregon Gay And Lesbian Law Association (OGALA) and had helped many transgendered people in her home state.

JoAnna is survived by her birth family from whom she was estranged, and by her step-sisters and brothers from her father's second marriage.

Her spirit will live on in her ground-breaking work that made such an important difference to transgendered Oregonians, and in the wonderful way, caring way she touched so many of our lives.

Jessica Xavier

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The IFGE is a 501 (c) 3 non-profit organization providing outreach to and for the transgender community. Among its many other activities, IFGE publishes & distributes gender-related books, magazines and tapes.

Profits from all sales go toward promoting self-acceptance, public understanding, and inclusion of greater gender diversity in society at large. Our office is located at 14 Felton Street, Waltham, MA 02453-4117

INTERNATIONAL FOUNDATION FOR GENDER EDUCATION

IFGE PUBLICATIONS CATALOG

TRUE SELVES
Understanding Transsexualism for Families, Friends, Co-Workers, and Helping Professionals
by Mildred L. Brown and Chloe Ann Rounsley

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TRANSGENDER

TRANSGENDER CARE:

Recommended Guidelines, Practical Information and Personal Accounts

Gianna E. Israel and Donald E. Tarver II, M.D.

By empowering clients to be well-informed medical consumers and by delivering care providers from the inadequate diagnostic standards and stereotypes, this book sets out to transform the nature of transgender care. In an accessible style, Gianna Israel and Donald Tarver discuss the key mental health issues, with much attention to the vexed relationship between professionals and clients.

#455

$39.95

READ MY LIPS

Sexual Subversion and the End of Gender

by Riki Anne Wilchins

Read My Lips is the first book from the founder of The Transexual Menace. Riki takes Judith Butler's gender theory and applies it to current-day transgender issues. The book is very entertaining and full of her sharp-edged wit and brilliant eloquence. Don't miss this one.

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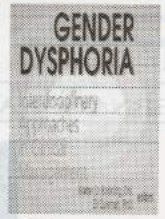

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Changing Sex and Changing Clothes

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Through an examination of the experience of transsexuals, this book enhances understanding of how gender can and does function in powerful, complex, and subtle ways. The author, who has herself been surgically reassigned, has conducted extensive interviews with transsexuals from many walks of life. Her personal experiences, have given her an access to her subjects that others would likely be denied.

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Dr. Richard Docter has produced one of the finest scholarly works on the subjects of TV & TS ever written.

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Comprehensive survey of CD and TS throughout history.

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edited by Gilbert Herdt

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Exploding the Myths of Male and Female

by Phyllis Burke

In Gender Shock, Phyllis Burke explores the many myths surrounding our rigid gender system of male and female. Analyzing the latest research in psychology, genetics, neurology, and sociology, Burke finds that gender is not the result of one's biological sex, and that gender and sexuality are separate elements of the self.

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Jennifer Spry
1997,
New Victoria

As a child Spry cherished the moments when he was left alone at home so he could dress up in his mother's clothes. In adolescence he tried to prove his manhood by competitive sailing and heavy drinking. When even marriage and fatherhood failed to make a man of him, John began the long journey towards recognition of herself as Jennifer, a woman and a lesbian.

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Katherine Johnson & Stephanie Castle

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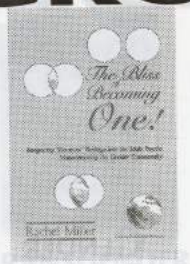

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Integrating "Feminine" Feelings into the Male Psyche

by Rachel Miller

A heterosexual CD pens positive, supportive advice for CDs, partners, friends, family and society.

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by Robert J. Rowe

Here is the intimate autobiography of a heterosexual male crossdresser. This unapologetic, self-styled fetishist and his femme alter ego, "Lori," reveal how his interest in female clothing began in childhood and how it developed as he grew older. This includes a postscript by the author's wife whose candid reflections are the only systematic discussion of the life and experiences of a crossdresser's wife.

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Straight Talk On Integrating TG into a Loving, Positive Relationship.

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by JoAnn Roberts

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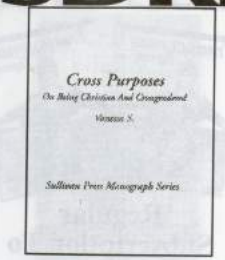

Cross Purposes

On Being Christian & Crossgendered

by Vanessa S.

There are those persons who discover themselves marginalized and/or discriminated against, at some point and for some reason, by the larger Christian community. I certainly recognize that the subject matter of this book is anxiety-provoking and highly controversial within cultural (and certainly within mainstream Christian) circles. . . . I fully understand that this book's emphasis on being Christian and crossgendered is not "business as usual" for most persons with the church.

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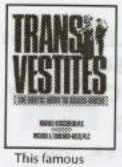

Transvestites

by Magnus Hirschfield, M.D.

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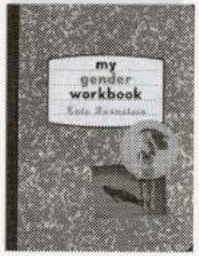

MY GENDER WORKBOOK

by Kate Bornstein

Has anyone ever accused you of not really being a man? Or not really being a woman? A. No. B. Yes. C. No, but I've felt that myself. D. Yes, and I've had to agree with them. From living without gender to thwarting the gender police, from uncoupling the sex/gender puzzle to finding out what you really think about yourself and other people, this is Kate Bornstein's guide to exploring the big G.

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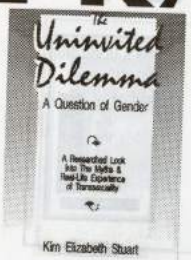

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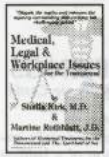

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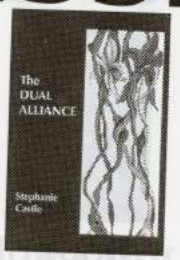

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Stephanie Castle

Transsexuals are born, not made. The roots of the condition are to be found in the pre-natal period of human existence. No one embraces transsexualsim as a sought-after condition, but dealing with it fully and effectively requires courage,determination, and sound medical support. When the desired gender change has been effected, it can be looked upon with a sense of relief similar to recovery from any major illness.

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FTM

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by Holly Devor

FTM: Female-to-Male Transsexuals in Society provides a compassionate, intimate, and incisive look at the life experiences of forty-five female-to-male transsexuals. Until now, little has been known about these individuals, and questions persist about them. Who are they? How do theycome to know themselves as transsexual? What do they do about it? How do their families cope? Who loves them? What does it mean for the rest of us?

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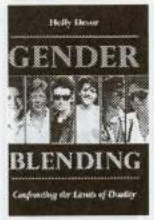

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TRANSGENDER

GENDER BLENDING

Bonnie Bullough, Ph.D., R.N., Vern L. Bullough, Ph.D., R.N., James Elias, Ph.D.

A new trend in human sexuality has arisen in the recent past and phenomena ranging from crossdressing to altering one's sex by undergoing everything from hormone therapy toradical surgery are becoming increasingly popular. In an effort to understand and assist in this revolution, studies are now being devoted to this fascinating area of lifestyle research.

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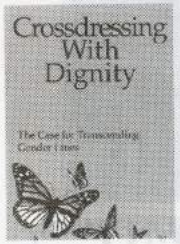

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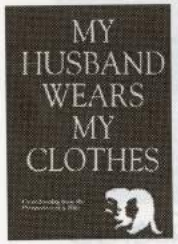

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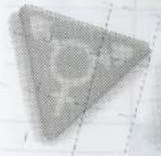

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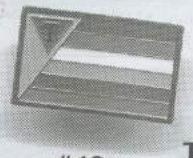

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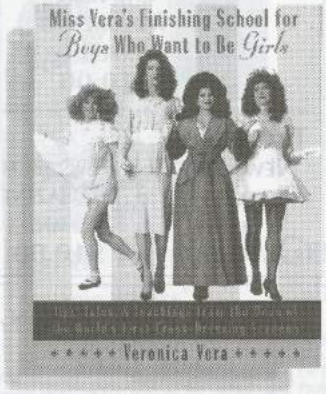

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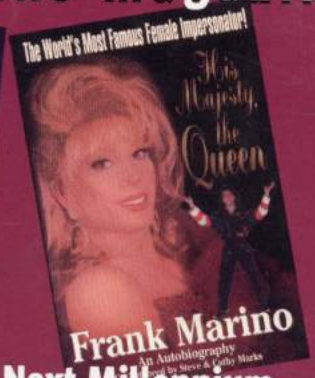

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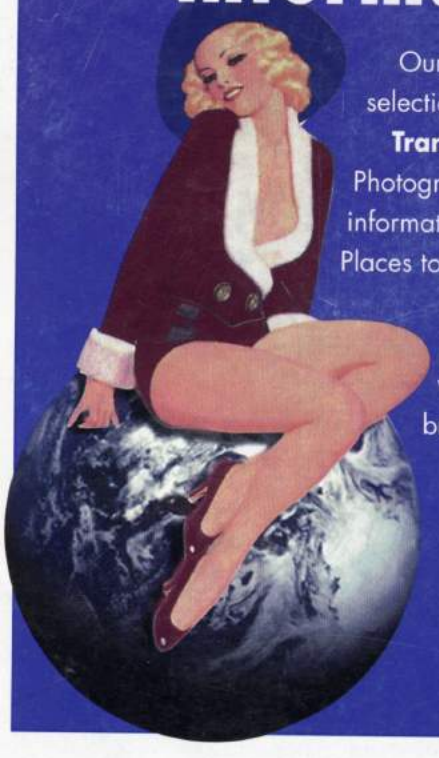

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