

# metamorphosis magazine

Vol. 6, No. 3

\*THE MAGAZINE FOR F-M TRANSSEXUALS\*

May-June 1987

**Feature Editorial:**

**BURN-OUT: Unsung Heroes And Heroines In The Transgender World**

**Special Bonus:**

**GENDER IDENTITY CLINICS  
(London, Eng., Norfolk, Va.)**

**A Male Perspective:**

**ON BEING - AND SURVIVING IT**



**Prisoner Perspective:**

**THE INCARCERATED PRE-OP TS**

**Personal Profile:**

**A BROTHER'S STORY**

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**FREEMARTIN (a murder  
mystery about a F-M TS)**

**MOTTO: "Brothers and Sisters - working together, we shall overcome."**

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## RUPERT SETS THE RECORD STRAIGHT...



It seems that several of our members fear my involvement with the M-F segment of the TS community, and with the TV community could lead to MMRF becoming a mixed TS/TS group - thus ec-

lipsing in their eyes the interests of the F-M sector. Well, let me reassure you, here and now, once and for all, that although it is my intention to keep on serving the needs of M-F TSs (our "sisters"), and to continue to network with other TS and TV support groups (for the purpose of exchanging information and referrals), I will nonetheless still be sure to address the concerns of F-Ms on an equal basis - as I have always done (afterall, this was my original specialty - by way of personal experience!).

However, I would like to point out that most F-Ms see only a very skewed picture of their M-F counterparts; i.e., the emotionally unstable ones who are (or should be) long-term psychological clients, the ones who don't "pass" (though, in time some of these will be able to pass successfully as women, after electrolysis and hormone treatments), the high-profile "limelighters" (who often appear on TV and in the paper as bizarre travesties of the female sex), the "change-backs" ("pseudo-TSs" who revert to the original gender after surgery) and the "gender-benders" ("Boy George" types who dress in "radical drag" and act outrageously so as to flout sexual stereotypes), and the "she-males" (transgenderists who want breasts but not female

genitals) - some who pose as TS, but in reality, are anything but. In sum, F-Ms are exposed to the lower end of the spectrum (the same one seen by the psychiatrists the gender clinics, peer-support groups, the media and the public-at-large. (It's really a shame more of you haven't had the good fortune (as I have had) to meet some of the "new" (M-F) women on the middle and the upper end of the scale - including the "good-lookers", the "rich bitches", the successful career women, and the happy housewives - most of whom are very "together" (stable) and very low-profile (socially integrated). Not all M-Fs are hookers, strippers, female impersonators, ex-convicts, mental patients, or welfare recipients. (Nor are all F-Ms in prison or a psychiatric hospital or on "the dole". And the "change-backs" and unstable gender dysphorics are often also F-Ms.)

So, in light of the above facts, I would like to expand MMRF's aims services, publications and other membership benefits to include M-F TSs (but not TVs, for their goals are different) because the former are in greater need of assistance than even F-Ms. So I'm counting on all of our members to welcome our fellow "sisters" into our Foundation by voting in favor of the proposed constitutional amendments (at the AGM or by postal ballot) which have already been approved by our Board. (Perhaps it may help you to decide if you knew that I and two other F-Ms founded a support group in 1978 - which was for both F-M and M-F TSs. And the only reason I founded a separate group for F-Ms was because at that time, I wanted to solely focus on their needs, but for sometime now I have dreamed of the day when we would come full circle once more. "Brothers and sisters, only by working together shall we overcome." -R.R.

## BURN-OUT: Unsung Heroes And Heroines In The Transgender World

...[T]he transgender community has been taking advantage of the altruistic efforts of people like Joanna Clark, Jude Patton, Georgia Saunders and Lou Sullivan for far too long....Joanna and Jude are both Professional Consultants to MMRF and Lou has been a longtime member and contributor to Metamorphosis Magazine. Georgia invited me to join the Gateway Gender Alliance (GGA) as a Professional Associate in 1983 and has published a few of my articles in The Phoenix. I...offered to work for Joanna in J2CP Information Services - a much-needed clearing-house of information and referrals and...I sent her my Curriculum Vitae in this regard. Regretably, she advised me that she couldn't afford to hire me, otherwise, she told me, I "would be at the top of the list."

Yet, the burn-out these "unsung heroes and heroines" have suffered is not limited to these four. I can add to the list such people as Judy Cousins, Founding President of the Self Help Association For Transsexuals (SHAFT) in England (formed in 1980) and an Honorary Life Member of MMRF, Cheryl Warren former SHAFT Newsletter Editor, former F-M Organizer (name withheld), and former Overseas Liaison Member (name withheld). All four resigned last year - Judy after seven years of dedicated service (although she still serves in the capacity of Honorary President), the others after three years of sterling work on behalf of their membership.

And, I can mention two more in the States: Phoebe Smith, Founding Editor of The Transsexual Voice (formed in December 1981), who has been providing this valuable communications medium for transsexuals

all over North America and abroad for over five years now, and, Merissa Sherrill Lynn, Founding President of the Tiffany Club (formed in 1979?), Founding Editor of The TV-TS Tapestry (formed in 1979?), and Founder and Executive Director of the International Foundation For Gender Education (IFGE) (formed in 1985), who is devoting her life to "the community cause". Although transvestite, she has nonetheless offered transsexuals an opportunity to network and get together through the Tapestry, the Tiffany Club's TS Support Group, and IFGE (via the annual conventions).

In addition, I can further name two more in Canada; Susan Huxford, former Executive Director of the Foundation for the Advancement of Canadian Transsexuals (FACT), former Gender Review Editor, present Director of GenderServe, former Member of MMRF's Board of Directors, and an Honorary Life Member of MMRF, who resigned last year after six-and-a-half years of giving freely of her time and energy for the benefit of the FACT membership. And, myself - Rupert Raj, Founding President of FACT (formed in 1978), Founding Editor of Gender Review (1978-81), Founder and Executive Director of the Metamorphosis Medical Research Foundation (MMRF) (formed in December 1981), Founding Editor of Metamorphosis Magazine (formed in 1982), Liaison Officer for Transition Support (formed in 1986), Facilitator for Transsexuals In Prison (TIP) (formed in 1986), Member of IFGE's Steering Committee (1985-), First Alternate to IFGE's Board of Directors (1987), Member of the TV-TS Tapestry's Board of Advisors, and contributor to: the Tapestry, The TS Voice, Renaissance Update, The Phoenix, The Network News, (cont'd)

Burn-Out: Unsung Heroes... (cont'd)

Spectrum, Outreach Newsletter, SHAFT Newsletter, The Garter Press Transition, Gender Review, and Metamorphosis Magazine.

In sum, I have been serving the transgender community in a variety of capacities (administrator, educator, researcher, counselor, peer supporter, social convenor, public relations/liason officer, networker, editor, writer, chairman of the Board - you name it, I've been it) for the past 15 1/2 years with out any form of monetary remuneration whatsoever. In fact, my pre-occupation with the welfare of the transgender community is the reason why today I am without a paying career or steady source of income. Don't get me wrong, this was my choice and mine alone (my mission or calling in life) to serve this neglected, misunderstood, and even today, stigmatized class of people - rare victims of what Kim Stuart has so aptly termed "the uninvited dilemma". After all, I am a post-op F-M TS myself and I guess I want to "take care of my own".

Still the fact remains; resource people in this area - many of whom have spent years trying to fill the widening gap left by gender clinicians and other helping professions - not only deserve a measure of gratitude and recognition that the people they are helping could never begin to express, but they also desperately need a well-deserved rest (or, in some cases, retirement) from "the scene". And contingently, they need successors - who will be as dedicated and as competent as they have been - to fill their shoes and take up the slack left by the medical community, the professions of psychology and sexology, individual counselors and therapists, social service agencies, the schools, the Church,

the law, the State, and the media.

For myself, I am not yet ready to resign, even though I have been suffering symptoms of "burn-out" for about a year now (and wish I could go on sabbatical leave for a few months). Yet, I/we desperately need resources (money, people and time) in order that I, MMRF, Transition Support, and TIP, and, in order that Joanna Clark and J2CP Information Services might survive. So, it's now up to you, Brothers and Sisters, to work together - to take up the torch and keep the flame of faith burning bright...

In solidarity, Rupert Raj, Exec. Director, Metamorphosis Foundation

[First published in The Transsexual Voice, April 1987.]

ONE OF THE BEST TS BOOKS EVER!

We have sold 82 copies of Kim E. Stuart's THE UNINVITED DILEMMA: A Question Of Gender (#12 U.S. paper \$20 U.S. cloth) and 18 Research Supplements (\$10.50 U.S.). Why not buy copies for your family and friends? Order from MMRF, P.O. Box 5963, Stn. A, Toronto, Ont. M5W1P4.

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Poems, limericks, free verse wanted for anthology on TS, TG and TV verse. Over 170 pieces from 84 contributors submitted so far. Don't miss your chance to express yourself in this first volume. Please specify gender status and credit line. Rupert Raj, P.O. Box 5963, Stn. A, Toronto, Ontario M5W 1P4.

SUBMISSIONS SOLICITED FOR MAGAZINE

Tell us your story (profile) and your views (articles, letters) and share your feelings (poems), laughs (cartoons) and newsreports with us.

## ON BEING - AND SURVIVING IT

by Khalil Jordache

Feeling one's virility is perceived in many ways, and the more introspective the man, the easier it is to perceive. Personally, I am able to feel how "male" I am when I witness the behavior of women; from something as simple as the way they turn their heads to look behind them, to all the ways they touch another person. Even more so, I can feel the definitude of my maleness whenever I am so privileged as to have a woman share her thoughts with me - her views of life, love and hate, sex and the conundrum resulting from the curious fusing of them all. She continually astounds me! Women think of things in ways that men never do. They see things from a different angle, feel things on a different plane. I often wonder how women see me. Sometimes I seem to know but I'm never really sure.

I'm a transexual, and I'm a man. The latter, for me, is the more significant of the two. Still, I can't divorce myself from the gravity of my transexual condition, no matter how well-adjusted, how loved, or how reconciled I may become. It's something which affects my existence in every way imaginable. An experience, for instance, as common as being seen in public, is something for which the transexual has to meticulously prepare. He (or she) must strive to affect a quality of "normalness" inasmuch as he does not wish to attract attention to himself. While sexual identity is something that should not even come into question merely due to having been seen, possessing a static identity is something the average person is able to take for granted. The transexual, however, takes nothing for granted.

Another fact that strikes me hard is transexuality is not taken seriously enough by the medical profession as a whole. The topic is handled with gross understatement. People are dying - unable to live if they are unable to love themselves. Society in general remains ignorant to the particulars and the cruciality of the syndrome and ignorance often lends itself to contempt and alientation.

I sometimes walk the streets of various cities, ultimately masculine, daring to walk alone. I often go undetected and am seen as a man - unique, individual, but like any other man. It is wonderful to feel so nondescript. There are times when I snatch for myself moments of boyish contentment (the kind boys get from just being boys) and I assure they are nothing monumental - mere tidbits of experiences, like huddling on the street corner with a male friend who laughs and smokes, and talks or whispers, and loves to watch the girls. Experiences like palyng a good game of basketball, or working out at the gym, or listening to a buddy talk of never knowing a woman's mind, of thinking he loves her and being nervous about women and love, and my knowing exactly what he means! Experiences like wrestling with another man, fighting as long and as hard as I can, feeling the struggle of muscle against muscle, will against will, crouching, advancing gaining the advantage and breathing pride, and sometimes being overpowered - pushed to the ground only to struggle and rise again, then shaking hands...to know that vigor of friendly combat. Tidbits I tell you, nothing monumental at all.

When I'm alone I enter into that deep, dark chasm of reflection where the acts and opinions of others come together with cognizance of my own. I see the un- (cont'd.)

## On Being And Surviving It (cont'd)

deniable and traumatic consequences of my transsexual condition, knowing what I'm up against within and without. I realize that peril weaves about me like a tenacious web but my strength doesn't desert me. My quest for dignity and recognition (which is, in essence, the will to live) is single-minded. I am convinced that no one can tell me I am not a man, except myself!

---

### NEW CLOTHES

"That suit is you." Such simple  
Spoken to lock up the sale. /words  
What would he be saying to me  
If he really knew my tale?

"That shirt goes with many colors-  
Would you like a matching tie?"  
Another salesman rambling on  
Who doesn't know the 'why'.

"Those socks have elastic tops -  
They will never slip or fall."  
My heavens, so many colors  
And sizes for short and tall.

Jeans and sweatshirts on sale -  
I've had my fill, thank you.  
I know he doesn't understand  
Those days for awhile are through.

Enjoying so this shopping trip -  
No longer a meaningless chore.  
Still, it's a necessity -  
Not still, even more.

Ready now with trousers, shoes  
New shirts, socks and underwear.  
Oh no, I can't sneeze now -  
I forgot hankies; I don't dare.

--Stephen Parent

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[Editor's Note: We want your poems  
and cartoons on TS themes for publication  
in the magazine. Thanks.]

## HOW TO KILL AN ORGANIZATION

\*Don't come to meetings. If you do,  
come late.

\*If the weather doesn't suit you,  
don't think of coming.

\*If you attend, find fault in the  
work of others.

\*Never accept an office - it's  
easier to criticize.

\*Be angry if you're not appointed  
to a committee.

\*If you're asked your opinion, say  
nothing. Afterward, tell everyone  
how things should be done.

\*Do no more than necessary. If persons  
work tirelessly, complain  
that the group is run by a clique

\*Don't bother to get new members.

\*Don't tell leaders how the group  
can help you reach certain goals  
- but if it doesn't, quit coming.

\*When you attend a meeting, vote  
for something and then forget all  
about it after you go home.

\*Agree to everything at meetings;  
disagree later.

\*Get all the benefits your organization  
provides, but don't make a  
personal contribution.

\*Talk about co-operation but don't  
practise it.

---

We, the willing  
Led by the unknowing  
Are doing the impossible  
For the ungrateful.  
We have done so much  
For so long, with so little  
We are now qualified  
To do anything, with nothing!

## THE INCARCERATED PRE-OP TRANSEXUAL

by Jayson de Maeyer

Since the dawn of man, there have been persons of such individuality that it is only with man's insatiable quest for knowledge and the passage of time that civilization, with its eternal prejudice and erratic levels of acceptance, has been able to acknowledge the limitless horizons within which each of us has the undeniable right to exist as a wholly unique being.

To date, the above statement could be said to contain a large measure of truth. I'm only concerned with those who fall into the smaller percentage where ignorance and misunderstanding prevail.

People known as pre-operative transsexuals are members of this percentage. The incarcerated pre-op TS is essentially the one who suffers to the greatest degree from Society's inability to accept. To whom does he reach out for support and assistance? Brothers and Sisters in the Gay Rights Movement? No, for the vast majority of gay organizations not only refuse to help but more often than not, fail to acknowledge requests for aid. When preop TSs have been unable to enlist assistance from "outside", they have been left to battle the legal and penal systems to the exhaustion of their own resources.

Prison administrators must soon begin to realize that we are now in the 20th century and that they are entrusted with a moral obligation to treat those under their care (regardless of the type of treatment necessary) in such a way that they are capable of returning to Society as productive individuals. Furthermore the Supreme Court has recognized a constitutionally-

derived right of control over one's body. Therefore, as long as pre-op TSs are in the prison system for crimes committed against Society, then that same Society should see that they receive all the benefits available from incarceration.

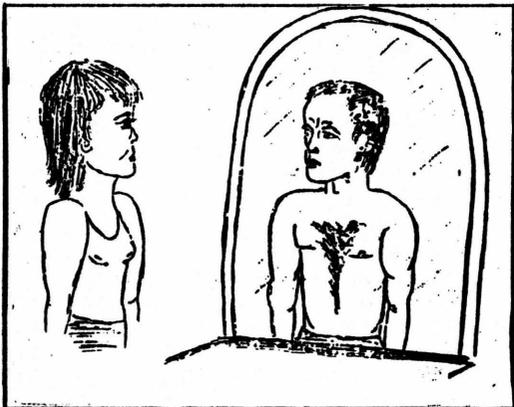
It is becoming apparent to large numbers of psychiatrists, psychologists and even some members of gender identity clinics who do not possess sufficient knowledge of transsexualism, that there are manifold problems concerning pre-op TSs trying to obtain gender reassignment during incarceration.

While it may be plausible for those serving short sentences, it is a grave misconception on behalf of those imprisoned for lengthy periods of time. What has been totally disregarded here is the perspective viewpoint and definition by each pre-op TS of "lengthy periods". This must be taken into consideration as it is inconceivable that one could possibly stop being who one is simply because the courts have sentenced one to a term in prison. The equivalent psychological needs and sexual urges which have compelled these people towards sex-change initially do not cease just because they now exist within a prison environment.

One of the numerous obstacles that pre-op TSs encounter within the prison bureaucracy is the inability of the authorities and the inmate populace to differentiate between homosexual and transsexual. The TS is not gay. He has no wish to form an alliance with someone of his own sex but wants to forge an emotional-sexual relationship with someone of the opposite sex.

Numerous prison physicians will insist, if therapy is requested, that the TS in question must have participated in a gender (cont'd.)

## The Incarcerated TS (cont'd.)



program prior to arrest, before any such consideration. Given the fact that the expense of such programs may not be easily met, many TSs acquire their hormones without any preliminary lab test or follow up blood work from sympathetic doctors - the legality of which is inconsequential. Regardless of previous medical arrangements, the intake of hormones into the system is essential for a specified time period - to advance reassignment.

There are few (if any) alternatives for TSs confined within the prison system. The area of medical health has been accorded such co-institutional under-pinning that even were eventual recommendation for treatment forthcoming, the directives are so inclusive that revision would be required to cover all the necessary requirements.

Unfortunately, prison physicians under the enlightenment of conservative administrators are hesitant to prescribe hormones or cosmetic surgery for the incarcerated TS, solely on their own initiative. Prison psychiatrists and psychologists procrastinate and are disinclined to diagnose any inmate as transsexual. To avoid the obvious

bureaucratic complications and to excessively oversimplify the situation, they re-allocate the classification to that of "gay". These helping professionals try to convince the depressed TS, should he still persist in treatment, that his assertion is a misconception.

Medical science has yet to find either cause or "cure" for transsexualism (other than sex-reassignment) nor has prolonged psychotherapy been successful in altering a TS's identification with the opposite sex, including the desire for surgical modification. Prison physicians and administrators have justified their decisions to deny pre-op TSs therapy or surgery with a multitude of rationalizations.

Hormone therapy and subsequent surgery is an acknowledged rehabilitative process. It is difficult to comprehend that any treatment which has shown success in the rehabilitation of a person can be so disregarded by the correctional system. Dr. John Money, of Johns Hopkins' gender clinic, has individually studied 24 cases from his files in an attempt to objectively determine the consequences of the surgical phase of sex-reassignment in "social" terms finding it significant that: "No patient acquired a police record for the first time, following reassignment. The majority...melt into a law-abiding obscurity...the cost to society for policing and jailing transsexuals will not increase...it is more likely to decrease."

The frightening aspect regarding the treatment of TSs is that our judicial system and Society may well continue on its misperceived path of judgement and may react as emotionally-biased towards any future scientific advances. Through the ages Society has feared progress and change. (cont'd.)

### The Incarcerated TS (cont'd.)

In the words of one author, "It is for the law to try to catch the ever-fleeting shadow of the needs of society, not for society to adapt to the law." In this context, the Law should equally extend its support, and protect the rights of TSs - the same as other people.

Medical science has yet to develop the perfectly-balanced psychological and biological human. The only facet we are all endowed with is the ability to err. Therefore, our "civilized" society must expand the horizons within which each of us exists. People should learn to unconditionally accept the existence of TSs - and their right to become whole persons including any necessary acts (eg., sex-reassignment) which allow them to achieve their objective in life: selfhood.

Post Office Box 184  
San Juan Capistrano, CA 92693-0184  
(714) 496-J2CP (714) 496-5227

### **J2CP Information Services**

J2CP Information Services provides information/referral services formerly provided by the Erickson Educational Foundation and JANUS Information Facility. J2CP Information Services is a separate entity and is not affiliated with either of its predecessors.

J2CP Information Services provides an information package consisting of pamphlets and literature concerning gender dysphoria syndrome, transsexualism and transvestism. This information package is available at a cost of \$25.00 to cover research, printing, postage and secretarial services. Additionally, J2CP Information Services will attempt to provide referrals to reputable counselors, psychotherapists, or gender programs, and peer groups near your home.

Certified checks or Money Orders should be made payable to J2CP Information Services. Please specify whether you are male-to-female, female-to-male, or transvestite when writing. If transsexual, please provide your place of birth.

### MORE NEW TS SUPPORT GROUPS

Chicago Gender Society, P.O. Box 578005, Chicago, Illinois 60657  
Attn: David Maxwell (312-231-8923)

People Realizing Identity Differences Emerging (PRIDE), 9130 S.W. Oleson Road #A-1, Portland, Oregon 97223 c/o Tiffany Wonder (244-7171)

The Gathering, P.O. Box 21052, Columbus Circle Station, New York, New York 10023 (N.B. New address)  
Attn: Jana Thompson (201-342-6548)

\* \* \*

### FOREIGN TS/TV SUPPORT GROUPS

Hedesthia Central, P.O. Box 78026, Grey Lynn, Auckland 2, New Zealand  
Attn: J.F. Gall, National Secretary

Scottish TV/TS Group, c/o SHRG 58a Broughton St., Edinburgh EH1 3SA  
Scotland (031-556-4049)

Seahorse Club, P.O. Box R341, Royal Exchange, Sydney 2000, Australia; P.O. Box 89, Norwood, South Australia 5067, Australia,  
Attn: Lynda Ailion; P.O. Box 2337V, Melbourne, Victoria 3001 Australia.

Self-Help Association For Transsexuals (SHAFT), 106 Barton Avenue, Keyham, Plymouth, England PL2 1NZ  
Attn: Alison Bennett, General Secretary (0752-559939)

The Transvestite/Transsexual Support Group (U.K.) Ltd., 2/4 French Place, Shoreditch, London E1 6JB  
England, Attn: Yvonne Sinclair (Helpline: 01-729-1466)

Trans-CCL, Centre du Christ Libérateur, Minorités Sexuelles, 3 Bis Rue Clairaut, Paris 75017, France  
Attn: Rev. Joseph Doucé (627-4936)

Trasek, PL 55, Helsinki 00531  
Finland, Attn: Pirkkoliisa

Reviewed by Rupert Raj

FREEMARTIN (a euphemism for F-M) is one of three books that paint a black picture of female-to-male transsexuals. These publications portray F-M TSs respectively as: a pseudo-transsexual (a misguided and misdiagnosed masculine lesbian) who changes back after sex-reassignment surgery (lesbian-activist Diane Feinberg's diary, JOURNAL OF A TRANSSEXUAL), as mentally-ill women who manifest a serious psychosexual disorder (psychoanalyst Leslie Lothstein's research study, FEMALE-TO-MALE TRANSSEXUALISM: Historical, Clinical and Theoretical Issues), and as a sexually-deviant, psychopathic killer who murders women and mutilates their corpses (journalist/novelist David Cohler's murdermystery FREEMARTIN).

"Dykes", "psychos" and "sex-slayers" yet! What next? Sacre bleu!

Cohler spins a bizarre tale of a so-called post-operative F-M TS named Carl Newman ("new man") who, after ingesting male sex hormones and undergoing surgery to create an artificial penis (into which is implanted a hydraulic pump to make erections) becomes sex-crazed. After having sexual relations with a runaway, a prostitute and a society girl, he strangles each one (because of threatened blackmail, attempted penectomy and ridiculing laughter, on their respective parts). He then mutilates the dead bodies by cutting out (excising) the breasts and genitals with a pocket knife. Once the police are after him, Carl commits suicide: His nude body is found inside the freezer where he trimmed beef for a living - his head nearly decapitated and his lifeless hand still clutching his "hard-on".

Sounds like shades of "Dressed To Kill" - the 1980 movie-thriller of a schizophrenic psychiatrist (supposedly a pre-op M-F TS) who fatally slashes his female patients with a shaving razor after making love to them as a man, because the female side of his split-personality bitterly resented these male sexual urges, which suppressed her emergence as a feminine identity.

"Freemartin" means: "a sexually-imperfect, usually sterile, female calf twinborn with a male; also; a similar female of another species" (Webster's Third International Dictionary). In the book, Carl Newman (who also went by the name "Brad Brooks") is the freemartin. He is described as a handsome, 30 or 35-year-old, post-op F-M TS, 5'8" or 5'9", 150 or 160 lbs., dressed in tight jeans, cowboy boots and tousled black hair, very intelligent but unstable, volatile, abrasive, abusive and violent - a parody of the macho man. He hates "fags", admires Gary Cooper, John Wayne, Charles Bronson and Clint Eastwood, likes Westerns and Country music, and swears alot. He has a suntan and a rich baritone voice like Marty Robbins. He was raised on a farm in the American mid-South by puritanical parents who never mentioned the word "sex" and whom he had never seen nude. He left home for good at 16 and has not been back in 15 years. He was the tomboy type and a "real bully".

The macabre story is told partly in the perspective of the villain (Carl) in the form of a pre-taped confession which the police play after his death. The tape begins:

You probably think I'm a freak. That's because you don't understand. Not yet. I'm going (cont)

FREEMARTIN (cont'd.)

to MAKE you understand....I'm the kind of person it takes some time to appreciate....I want you to know me as I was and as I am...What I did, I did. There were reasons. But I am not alone. There are many, many others like me. So think about them. It may be too late for me but they have done nothing. Think about all of us. And examine your own attitude....

The novel is also reminiscent of the 1978 real-life case of Susan Lynn Wood (a.k.a. Adam Hazel) - a 16-year-old, mentally-ill girl who killed a Toronto taxi-driver with a baseball bat and knife, then cut off his genitals and glued them to her body to prove to the father of her girlfriend that she was a man. The courts found Susan not guilty by reason of insanity and ordered her to be confined indefinitely to a psychiatric hospital. One doctor testified she might be a suitable candidate for sex-reassignment but could require psychiatric treatment for up to 25 years.

Was Cohler's central character inspired perhaps by one or both of these gender-dysphoric schizophrenics? And what was his motive for casting a transsexual as the "bad guy" in this morbid gruesome story? A clue is found in the Author's Note at the back of the book:

In late 1979, Johns Hopkins Medical Center in Baltimore, a pioneer in the field of gender reassignment, announced a ban on such operations. A study which led to the institution's decision noted that a large number of gender reassignments failed to correct patients' psychological problems. The study urged institutions which continue to allow transsexual

surgery to intensify preoperative psychological screening of prospective patients.

But was Carl truly transsexual? It would certainly appear so if we were to take his words to heart:

I don't think there was an exact moment when I realized I was in the wrong body. It seems like I always knew. Even as a kid...I knew I would grow up to be a man. I was the tomboy type...[not] the only tomboy in school but the best...[And] I stayed a tomboy....Grownups asked me what I wanted to be when I grew up....I answered prize-fighter or fighter pilot. ...[Menstruation] came as a real shock. Because I considered myself a boy. I looked and acted the part...I wasn't aware of being a girl. I thought all I had to do to be treated like a boy was to behave like a boy 'cause that's the way I FELT... It's my nature to be a man. I didn't choose it. I merely made my body conform to my nature....

Yet, he literally also had an acute case of "penis envy":

I think I was jealous of boys but I didn't know why. They seemed to have more freedom... [It] seemed that because a boy is tougher than a girl, he can do more, go farther....I was insanely jealous. I wanted what he had. I knew I wanted a penis of my very own. I have one now and I know how to use it a lot better than [him]...So I became obsessed with becoming a man... COMPLETELY a man. The change became the most important thing in my life...I had 11 operations ...Phalloplasty...I got balls too...It was MY money and MY cock. I wanted it so bad I did not care about the pain...(cont)

**FREEMARTIN (cont'd.)**

And he was definitely anti-social not to mention psychopathic:

I was...the most aggressive [tomboy]...I was a real bully, one of those mean types that hang around the schoolyard just hoping for some dope to get in the way...I finally stopped popping kids for no reason...I was...tough...I could take care of myself...I didn't let people fuck me around. They could see I don't take shit from nobody. ...You wouldn't want to kick sand in my face...I don't like fags much. But I never beat one up...I hit her when she said that...the kind of thing a man has got a right to do to keep his woman in line...Nobody treats ME that way. You'll find out. You'll find me strong... And I can fight back.

Well, it's more than obvious that the story's antagonist happened to be one of those extremely unstable transsexuals (and there are a few of them out there) but surely they are in the minority! So why didn't Cohler anticipate British journalist Wendy Nelson's example and pen a sympathetic yet objective biography of a transexual(s) (as she did in her 1982 book, THE GENDER TRAP "the moving story of Chris & Cathy the first transsexual parents"? In fact, one of Nelson's reasons for writing the book was to try to help the married couple gain some financial support for their respective surgeries through public enlightenment of their plight - a far cry from Cohler's curious motivation for his spurious work of fiction!

[As an aside, I intend to write a "paper" on the media's variable coverage of transsexuals - which will include a comparison of both Cohler's and Nelson's treatments,

representing two divergent perspectives of a common (and too-commonly misunderstood) subject matter.]

So, when is someone finally going to come up with a decent portrayal of an (F-M) transsexual(s)? True, we've already had some fine efforts from Radclyffe Hall, Mario Martino and Lou Sullivan. Now, what about the rest of you out there? I hope you're not waiting for me to do it!

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# Sex-change dad wants custody of wife's baby

By PETE COOKE

A lady cop who underwent a sex-change to become a man and then married, is getting divorced — and fighting for custody of his wife's baby!

"I am the intended father of the child my wife is carrying," said 26-year-old Michael Fitzgerald. "We hired a surrogate father to impregnate my wife."

Before his sex-swap Fitzgerald was Officer Linda Susan Schaefer of Cocoa, Fla. In 1982 Fitzgerald married Cynthia Jean Fornari.

Cynthia, who became pregnant with the help of a surrogate father last May, filed for divorce the same month in Hillsboro, Oreg.

"She told me several times that she wouldn't allow him to have any contact with the child," said Ray Bassel, Fitzgerald's attorney. Bassel said Fitzgerald is

seeking full custody of Cynthia's baby.

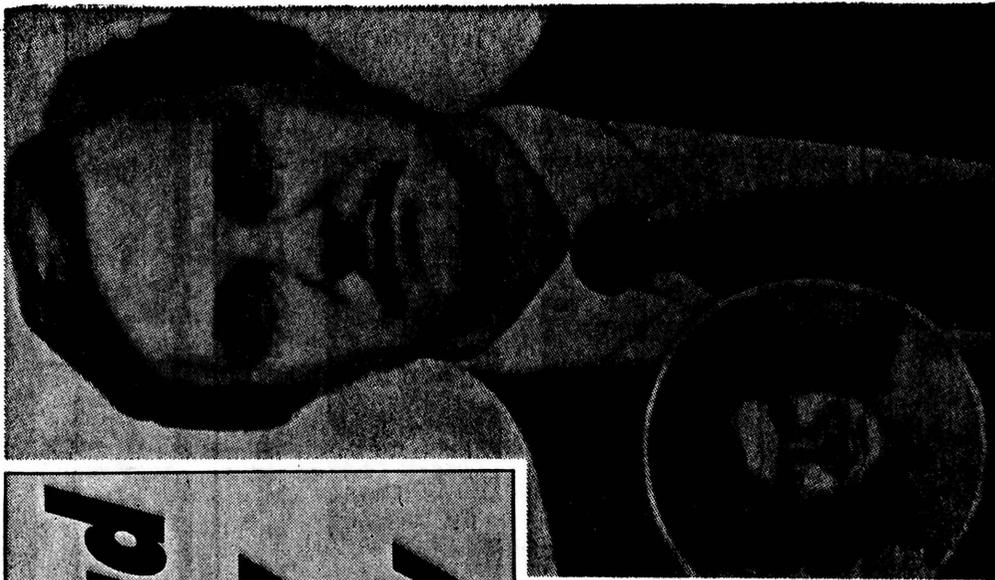
"Our position is essentially that he would be a better parent," said the lawyer. "We believe he could provide a better, more stable home environ-

ment for the child." Bassel contends that his client should be "entitled to the same rights as he would have if he were the natural father."

According to investigators, Fitzgerald has used as many as 30 aliases in committing a court-to-court string of frauds. Last fall a judge in Hillsboro ordered Fitzgerald to pay \$11,000 restitution in a theft case and sentenced him to serve a year in jail. The sentence was suspended two weeks later when the judge ordered Fitzgerald handed over to Florida authorities to stand trial on charges he faces there.

Fitzgerald was charged with perjury, filing a false insurance claim and two counts of grand theft in Orlando, Fla. Despite his client's rap sheet, Bassel maintains that Fitzgerald is a "fit and proper person" to have custody.

Most of the child's divorce proceedings have been in court. The couple's divorce and custody battle is



**FORMER** lady cop Linda Susan Schaefer, inset, who is now ex-change hubby. Michael Fitzgerald, wants his wife's baby scheduled for trial in March, counselling in an attempt to but Bassel said Fitzgerald and work things out between Cynthia, 30, are undergoing them.

Weekly World News, Jan. 20, 1987 (Reprinted by permission)

IN THE NEWS...

HUSBAND'S HYSTERECTOMY LEADS TO LAWSUIT, San Francisco Examiner, Mar. 24, 1987. A Sacramento post-op F-M TS and his wife are suing Prudential Insurance Co. for more than \$1 million in punitive damages for failing to pay a \$10,000 claim for a hysterectomy performed six months ago because of an inflamed uterus that had to be removed. The plaintiff had a mastectomy in 1981 - before signing up for insurance coverage at his work place. Prudential officials will not pay the claim because "if he's a man, he's not supposed to have a uterus." Melvin Belli, the couple's attorney, is also charging Prudential with allegedly discriminatory behavior towards them.

A USER'S GUIDE TO HORMONES: The Mysteries Of How They Affect Human Behavior, Growth, Sexuality And Health, Newsweek, Jan. 12, 1987.

DEAR ABBY: I Slept With A Plastic Man, San Francisco Chronicle, Dec. 3, 1986. Abigail Van Buren tells woman who wants to know if her lover is a post-op F-M TS and if sex-changes are registered, "Ask him", for the first, and "No, it's a private matter", for the second.

TWIN BOYS GET SEX CHANGE BECAUSE PARENTS WANT GIRLS (photos), The Sun, Aug. 5, 1986. Hansel Hesse, 36, a West German mother, was so disappointed after giving birth to twin boys, she convinced her husband Rudolph and Dr. Heinrich Bolling to turn them into daughters. Bolling was against the idea but later agreed when Hansel told him if he refused she would get another doctor to do the operation. He fears the girls may become adult men trapped inside surgically-altered female bodies, which could lead to psychological problems.

LOVING MOM BECOME DAD - SO HE CAN MARRY GIRLFRIEND (photos), The Examiner, July 15, 1986. F-M TS Gabriele (nee Rosalba) Anderini, 34, of Perugia, Italy, and the mother of two, had a sex-change operation (the first for an Italian woman) so she could marry her girlfriend of four years - Laura, 28, a psychologist. She says: "The only real men are transsexuals because they're also women." Gabriele explains: "I was a boy trapped in a girl's body." Her masculine feelings continued even after marrying Aldo, and mothering two children: Paola, 14 and Paolo, 10. So, after 11 years of marriage, it ended in divorce. Gabriele began taking male hormones in 1982, and grew a beard and developed a man's voice.

GUY SUES DRUG COMPANY CLAIMING: You Made Me A Girl! Weekly World News, July 1, 1986. A 38-year-old man is suing E.R. Squibb & Sons - one of 200 companies that manufactured the artificial female hormone diethylstilbestrol (DES) - for \$9 million, claiming that because of DES taken by his mother before he was born, he spent 14 frustrating years as an embarrassed, tomboyish girl named Kathleen. The unidentified plaintiff told the Torrance, California jury (who ruled against him) the DES stopped production of the male hormone testosterone and left him with a female body. At 15 a doctor discovered his testicles had not descended from his abdomen so, he had a sex-change operation and changed his name. The man said the drug company was negligent for not determining the effects of DES on unborn children and in ignoring lab tests that showed it arrested genital development in animals.

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[Editor's Note: Acknowledgement is long overdue to Carl E., Lou, Joe W., Barbara and Leo for periodicaly sending in newsclippings. Ta'.]

## GENDER IDENTITY CLINICS

### Charing Cross Hospital Gender Identity Clinic, London, England

Britain's only National Health Service Clinic offering sex-change surgery to people who want to live as members of the opposite sex has fought off the threat of closure.

The future of the Charing Cross Hospital gender identity clinic in West London, which has performed hundreds of sex-change operations, was called into question earlier this year, after the surgeon who had pioneered the work retired. Surgeons with long waiting lists in other fields complained the service, costing at least L2500 per patient, was a luxury the NHS could not afford.

The hospital is losing L1 million a year from its L35 million budget under a government scheme to redistribute health service resources, and a shortage of nursing staff for the operating theatres is also restricting surgical work.

But after a special review River side Health Authority decided the clinic provides an essential service and should be allowed to continue to provide 50-60 operations a year, the same as in previous years. Only 16 were performed in 1986 because of a delay of several months in appointing a new surgeon.

To try to secure the clinic's long-term future, the authority has now asked the Department of Health to recognize it as offering a 'supra-regional' service as it takes patients from all over the country. That would qualify it for special funding and spare it from competing with other specialties.

Hospital General Manager Peter

Dröog said: "A number of surgeons were concerned about the morality of funding this work, in the sense that they were asking why they were not allowed to catch up on their own waiting lists while we were doing what they regard as luxury surgery. It was a question of what's more important, a 78-year-old who wants a hip replaced, or someone who wants this form of surgery. We decided the clinic had established itself as a national centre providing a necessary service. So the clinic's work is now secure, it's business as usual."

A few other hospital in London and some other parts of England do offer sex-change surgery to individual patients approaching them locally but Charing Cross Clinic is the only National Service, specializing in problems of gender.

It offers detailed psychological assessment, training for living in the role of the opposite sex, and help with changing documents - everything except the birth certificate can be altered. The clinic also provides long-term outpatient care although many patients prefer never to return once their sex-reassignment is complete.

Its success in helping transsexuals has been borne out by a study completed recently by a research psychologist working at the unit. Dr. Charles Mate-Cole says his research has shown the benefits of surgery are much more than cosmetic; mental and emotional strain in transsexuals is relieved and social confidence is promoted, allowing them to lead fuller and more productive lives.

In one study, 1a questionnaire testing for psychoneurotic traits, such as anxiety, depression, hypochondria and obsessiveness was given to 150 male patients. (cont)

### Gender Identity Clinics (cont'd.)

Fifty had been attending the unit for psychiatric investigation for 6-12 months, 50 had been accepted for surgery after assessment lasting two-to-four years, and were on the waiting list, and another 50 had had the operation between six months and two years previously.

The study found very high levels of psychological distress in the group still being assessed for treatment. Those accepted for surgery were less troubled, and the post-surgery group showed near-normal scores.

The operation on males can be done as a single procedure, in which genital tissue is inverted to form a vagina. The treatment also involves taking female hormones to promote breast growth. For women, the surgery involves removing the breasts, ovaries and womb. Surgeons at some hospitals have also tried to construct male organs but this can be a long procedure, and the results are generally considered unsatisfactory. Male hormones are taken to make the voice break and to promote beard growth.

The male to female operations performed by the clinic outnumber the reverse by about four to one. The Self Help Association For Transsexuals (SHAFT) estimates there are at least 10,000 transsexuals in Britain. Many have received surgery either on the NHS or privately in Britain and abroad.

Comments by former patients include: "If I hadn't had this operation I feel I would have ended up in a mental institution for the rest of my life." Another said: "After a life of trouble and unhappiness I now feel part of the human race and can face problems." Another typical comment was: I

felt I was living a lie - now this is the real me, and I can get on with living."

Although surgery fails to help some people, it is much more successful than any other form of treatment for transsexualism, including intensive counselling, according to Mate-Cole.

[Reprinted from the Sunday Times, Dec. 24, 1986, and the SHAFT Newsletter, Vol. 3, No. 2, April 1987.]

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### The Center For Gender Reassignment Norfolk, Virginia

The Centre for Gender Reassignment has been present for approximately 10 years. A recent increase in interest has expanded our Centre and the number of patients that are now included in our gender program. Over the past 20 months, we have had well over 100 requests for information regarding our gender program. The majority of these patients are female transsexuals. This is perhaps due to our reputation for phalloplasty surgery.

Upon visiting the Centre, each patient is evaluated by two psychologists, two plastic surgeons, a gynecologist and our co-ordinator. We follow the "standards of care" of the Harry Benjamin International Gender Dysphoria Association.

If the patients fill all of the requirements, surgery is discussed and scheduled. There are several insurance companies which are now covering sex reassignment surgery.

To date, our program has been viewed favorably by all of our patients. We credit this to the fact that we have an enthusiastic group of health professionals who work together for the gender patients. As we become more educated (cont'd)

## Gender Identity Clinics (cont'd.)

regarding gender dysphoria diagnosis and its surgical results, we will be better able to guide and direct the patients as to the best way to cope with this problem.

-David A. Gilbert, M.D., Assistant Professor, Plastic Surgery

...Mastectomy and chest contouring surgery are often carried out with the hysterectomy and oophorectomy. These operative procedures precede definitive genital surgery and allow the patient, the therapist and the gender clinic to observe the patient under surgical stress and study his reaction to surgery. There are three basic aims in mastectomy and chest contouring: 1) to remove all breast tissue, 2) to contour the chest well by "feathering out" extra breast skin and adjacent fatty tissue, 3) to convert the female nipple-areola complex to a male appearance.

The transverse transareolar incision is the best surgical approach to achieve these goals. Other surgical approaches are inadequate to remove all breast tissue and often produce obvious scars. Surgical removal of all breast tissue and contouring of surrounding fatty tissue creates a redundant skin pocket that requires reshaping. The nipple and areola are removed, defatted, flattened and replaced on the chest wall as a full-thickness skin graft. Redundant breast skin is also removed. This surgery is usually successful, but may be prone to complications such as hematoma (collection of blood under the skin flaps), partial necrosis (death) of the nipple, loss of nipple sensation, and breast asymmetry. The chest scars are red, raised and obvious initially but following maturation will begin to lighten in color and soften in

texture. The scars are often well-hidden in the body hair over the chest wall....

...Successful construction of a phallus (penis) is extremely difficult. Penile reconstruction presents surgeons with one of their greatest challenges. The function and anatomy of the penis is unique and not easily reproduced by the transfer and utilization of any other tissue in the human body....

Our reconstructive unit has had a long involvement in phallic reconstruction. Close co-operation between the plastic surgeons, urologists and gynecologists have produced improvements in the function and appearance of the new penis. Ideally, penile reconstruction should address the following requirements; 1) a one-stage microsurgical procedure that can be predictably reproduced, 2) creation of a competent neourethra to allow for voiding while standing, 3) restoration of a penis that has both tactile and erogenous sensibility, 4) enough bulk to tolerate the insertion of a prosthetic stiffener to allow for successful sexual penetration, and 5) be aesthetically acceptable to the patient. In an attempt to meet our five criteria, 15 such reconstructions have been performed with one failure. Except for the insertion of a prosthetic stiffener, we attempt to totally construct the phallus in one stage.

(cont'd.)

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## Gender Identity Clinics (cont'd.)

A 32-year-old female-to-male transsexual was approved for genital surgery by our Gender Identity Committee. A neourethra was created by dissecting and releasing the labia minora that surround the female urethra. A full-thickness skin graft was tubed over a catheter and joined to the labia to extend the urethroplasty. The neourethra was then covered with a right gracilis myocutaneous flap for scrotal and phallic bulk. A left radial forearm flap was elevated and transferred to the neophallus. The flap was wrapped around the augmented urethra and revascularized (the radial artery was joined to the inferior epigastric artery and the brachial vein was joined to the inferior epigastric vein). The right internal pudendal nerve was then joined to the lateral antebrachial nerve of the transferred flap. Postsurgically, the patient developed a proximal urethrao-cutaneous fistula that was subsequently surgically closed. The patient also underwent the aesthetic creation of a "subcoronal groove" using a full-thickness skin graft and the insertion of silastic scrotal implants to simulate testicles. Two years later, the patient has a phallus that contains erogenous and tactile sensibility throughout its length, allowing him to achieve orgasm. He can also void while standing...

...The disadvantage of the forearm flap is the need to skin graft the forearm and sacrifice a major artery to the hand (although no vascular compromise or hand loss has ever been reported)...Despite the need to repair urethrao-cutaneous fistulas in a later operation all our patients can stand to void.

Sensation to the phallus returns within 6-12 months postsurgically,

carrying protective feeling and erogenous sensibility through the pudendal nerve. Our patients report erotic sensation, the ability to masturbate, and subsequent ability to achieve an orgasm with the constructed phallus. This is a great advance over previously reconstructed phalluses that were insensate.

To date, no permanent stiffener has been developed for a constructed penis. Penile prostheses developed for impotence..are too large to be introduced into a surgically-created penis...Many transsexuals we interview have no desire for a stiffener for sexual penetration.

Scrotal reconstruction may be carried out with the existing embelished female labia [if large enough]...and implanted with silastic testicular prostheses....

Aesthetically our phalloplasties are an improvement in quality over previous techniques...The patient is advised he may have to occasionally shave the shaft of his penis postsurgically. A secondary procedure to create a subcoronal groove with a full-thickness skin graft gives the appearance of a circumcized penis. Most importantly, he is warned there is no guarantee regarding scars and wound healing. Poor scars may result despite optimal surgical techniques.

In summary, phalloplasty surgery has been advanced by micro-neurovascular surgical techniques allowing a one-stage definitive procedure with the re-ervation of the phallus postsurgically. As our experience grows, these techniques will continue to be improved.

[Edited from "Transsexual Phalloplasty" by: David Gilbert, M.D., Deborah Gilbert, R.N., and Charles Horton, M.D. A patient brochure is available from the Center. - Ed.]

## A BROTHER'S STORY-Personal Profile

I was crying, "Please Mama, over there," pointing to the boy mannequins dressed up in little suits and shirts with ties. I was three-and-a-half. My mother was holding frilly, lacey, pink dresses under my chin to see which she liked the best. She told me of this incident when I was 25. I don't remember it.

The earliest I do recall something was very wrong was when I started Kindergarten at four-and-a-half. The teacher began separating the boys from the girls for various reasons. I felt ashamed that I had on a dress. I used to stare at the other little girls and wonder if any of them felt confused and wanted to be like the boys. I wondered if anatomically any of the boys had the same "bottom" as I did and if their mothers just cut their hair short and let them wear jeans and shirts to school - just let them be boys.

The summer after my aunt and uncle came for a visit. Jimmy, my cousin (six weeks younger than I) would play out in the corn field behind our house. One sunny afternoon I saw, for the first time, the difference between a girl and a boy. I wasn't really worried at the time - I just thought I hadn't "grown" one yet. As the years went by, I still hadn't grown anything, but my feelings of knowing that I really was a boy on the inside became stronger and stronger.

In the fourth grade, I had a "crush" on a cute girl who sat across from me. She was so feminine and wore the prettiest little dresses. Back in the 1950s, every girl was required to wear a dress or skirt. I was so embarrassed for her to see me in a skirt. Every day I had to go school was a huge

mental "trip" for me. Whenever we had field or sport days, I was allowed to wear jeans and I was in seventh heaven! Some mornings I could not bear to put on a skirt and would beg off by telling Mom I had a headache or stomachache.

Being raised in a church that didn't believe in make-up, dancing or going to the movies, I always felt like I was sinning against God by having the kind of feelings I did for other girls. There were many, many nights I prayed to God to change the way I felt. I always asked, "why?". I'd pray that if He couldn't change my feelings, then please let me miraculously turn into a boy.

By the seventh or eighth grade, I had read about "queers, queens and lesbians" - people who loved someone of the same sex. But these people also loved themselves the way they were. I didn't feel that way at all - I wanted to be a boy with a girl. I had never heard of transsexualism. I thought I must be the only one in the world who had the kind of feelings I had.

Entering highschool at 13 created a whole new set of problems: dating, developing breasts, starting periods - I felt I would die. At least when I was in grade school my chest had been flat! For about a year I thought I wouldn't develop breasts. Other girls my age had developed by the seventh or eighth grade. I felt thought that somehow, by some miracle, maybe I wouldn't - perhaps there was something inside me that really was male. I was so proud. Then - it seemed like overnight-there they were, with Mom, of course, saying what a lovely looking woman I was turning into. Sometimes I'd become so nauseous I'd go the bathroom and throw up. I would hope I'd be in an (cont'd)

## A BROTHER'S STORY (cont'd.)

accident and have to have my breasts cut off. I hated to wash them while taking a shower. I loathed looking at myself in a mirror. Just seeing my bras in my drawer made my stomach hurt.

I was such a tomboy and stronger than a lot of boys, so I didn't have many of them asking me for a date. But when it did happen, it was so awkward, I felt like a "queer". I'd make up all kinds of excuses. I never dated. I couldn't make myself do it. But, oh, how I wanted to date some of the girls!

The hardest part was not being able to talk to anyone. After school, I'd go home, change into my jeans and ride my horse down to the river. I'd talk to myself and cry. I felt so alone. I was alone.

Then I went to college. My first year there I met a girl who looked and acted like a real tomboy. Like me, she looked funny in a skirt. We started going out for cokes. I had, at long last, found a buddy. We had never talked about anything personal. Then, a couple of weeks later, she asked me if I'd like to go with her to a party at a friend's house. She was a junior and I a freshman, so she had already made some friends off campus. Everyone was drinking beer and there were only girls present. I had never

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drank alcohol of any kind - didn't need to that night, I was on a natural "high". Lynn (my new buddy) and I were sitting out on the patio and she suddenly looked at me and asked, "How do you like my gay friends?" That was the first time I had heard the word "gay". She then proceeded to tell me the terminology of gay life. I told her about my secret feelings about wanting to be a man. She felt the same way and so did a couple of others at the party. There was no mention of transsexualism. I still felt something was wrong. Yet, at least now I had someone I could talk to, and I knew several others who felt the same way I did. I was not alone in the world. For the first time I felt I could breathe. I shall never forget that night.

It was about a year later I read a magazine article about Christine Jorgensen. That was the first time I had heard of transsexualism. Now I knew what I was - a transsexual, a man trapped in a woman's body. That's exactly how I have felt all my life. My heart soared at the thought that I might actually be able to someday get married and be accepted as "normal".

As stated earlier, I was brought up in a strict religious environment. I knew that my mother would never accept what I was thinking of doing and the rest of my family would probably disown me too. This is the situation I've wrestled with all my life. I used to think I couldn't live without my family, and also that changing my sex would be a sin against God. But my feelings have become so much stronger with each passing year.

I am 40 now and have been living with a beautiful, loving, intelligent caring woman for 10 1/2 years now. She is my lover and best friend. She's 34. I told her (cont)

## A BROTHER'S STORY (cont'd.)

how I felt at the start of our relationship. She was "straight" when we met. I'd fallen in love with her before I'd got up the courage to ask her out. She said it was the masculinity in me that attracted her. To her, my breasts don't exist. I'm a man who doesn't have a penis and happens to have breasts - for now. The only item of female clothing I have owned in the past 18 years has been a bra.

I really don't know where or what shape I'd be in today if I hadn't met Becky. She has helped me through so many times of depression and despair. We haven't had the money for my surgeries and in the past, there's been a conflict concerning my family's acceptance of me. Becky's family doesn't accept me. As long as I am still a woman my family prays that I'll change my ways and marry a nice man. We are both very welcome in their homes but nothing is ever said and there's no display of affection on our part. They think we are gay and I have never told them differently. We do with all our hearts appreciate being accepted.

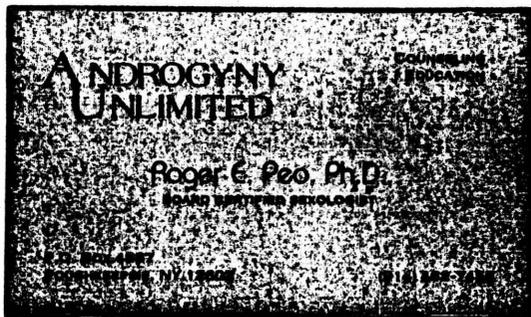
My younger brother (32) and his wife were out to visit us about a month ago. I purposely got half drunk so I would have the nerve to tell them about my feelings. To my relief they weren't that surprised at all. My brother said I'd always seemed like a brother to him. What a great feeling to finally tell a member of my family after all these years. I'm rapidly coming to a major turning point in my life. I can't go on this way - accepting myself as a woman. I still love my family just as much as always, but now I feel I have to live my life as the real me. If they could accept me it would be fantastic, if not then it will be sad, very sad.

As far as God is concerned, I've prayed to Him so many times and asked His help to change how I feel inside. Yet, I still feel the same way I always have for as long as I can remember. I made myself date a couple of times after college, but it was so awful and disgusting. I actually felt "gay" dating a man. I also made myself go to bed with a couple of men just to try to somehow make myself change. It didn't work. It only made my feelings stronger. Inside, in my heart and mind, I am a man.

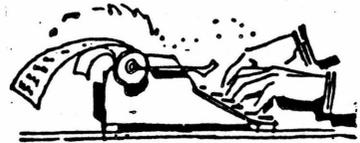
I hope 1987 will be the year I start the process of letting the world see the real me. Even as I write, I'm getting butterflies thinking how wonderful it will be to finally live as a man. To go to the men's department and try on slacks or shoes without people staring, whispering and treating me like something from outer space

I have been dressing in men's clothes and shoes for over 20 years now - no suits and ties yet, just casual things. I have my hair short and look fairly masculine. Once in awhile, a salesperson will say "sir" and what a "rush" I get! Then he'll say, "Oh, I'm sorry." - I always reply, "That's okay."

Sometime in the not-too-distant future, Society will see me and think nothing other than I'm just another man walking down the road. Then I'll smile and feel so good.



LETTERS TO THE EDITOR



Dear Rupert:

Thanks for the latest issue of Metamorphosis Magazine. As usual, you have done an outstanding job.

CORISTA (Community Of Religious In Service To America) is now legal. We received our non-profit, tax-exempt status from both the State and the Internal Revenue Service this last month. CORISTA has taken over J2CP Information Services to provide it non-profit status.... Gradually it will transition to CORISTA Information Services as I am able to reprint materials.

I wish I could attend your AGM in July. However, my budget will not allow it....

I really liked your editorial ["Burn-out: Unsung Heroes and Heroines In The Transgender World"] in this past issue of The Transsexual Voice.... Andrea Lurie is withdrawing from the national community to devote her time locally. [You] continue to work internationally but I don't know how [you] do it. Despite the amount of highly creditable and valuable work [you have] done on behalf of the gender-conflicted community, [you], like the rest of those involved, [have] never gained the financial support to make a real impact. Needless to say, it gets very frustrating at times...CORISTA received six donations as of yesterday. Rather disappointing, needless to say....

The most distressing and/or frustrating thing is that rather than supporting existing services with proven track records, everyone wants to start their own service. Some of these services will develop into creditable services, some will last a few months or years,

with questionable referrals, etc. On the other hand, this may be the opportunity to retire so I can devote my time to other interests--the homeless, latchkey children...

Enclosed is the latest edition of "Health Insurance and the Transsexual". You have my permission to reproduce it. [Editor's Note: This article was featured in our June-September 1986 magazine issue.]

I like your current motto, it's great. May God's peace, love, and joy be with you always.

-Joanna M. Clark, J2CP Information Services/CORISTA, 31815 Camino Capistrano, Suite L, San Juan Capistrano, California 92675-3212

\* \* \* \*

Dear Rupert:

Many thanks for the most recent issue of Metamorphosis Magazine and the other information you enclosed. The magazine (a herculean task) gets better and better - it is a real credit to you, and reflects your hard work and perseverance. I was especially interested in reading about the various gender identity programs, and hope you will be able to feature others in upcoming issues. I also very much enjoy reading Personal Profiles--actually, I enjoy the whole magazine! Keep up the good work!

I am enclosing a cheque for \$20 to renew my magazine subscription. I'd like to send some extra money as a donation, but I'm pretty poor these days. I read with interest about the monthly socials you are hosting. Best wishes and take care.

--J.B. from Ontario (cont'd.)

Letters To The Editor (cont'd.)

Dear Rupert Raj:

Since I would like to help in any way with a comprehensive TS manual, please send me the survey questionnaire. I am a post-op M-F.

I found your article "Burn-Out" in The TS Voice worthwhile and a bit sad. Not everyone is able to do what you do. For understandable reasons many post-ops want nothing more than to leave behind years of pain, as well as the TS label, and get on with their life.

I tried to be of help by compiling a bibliography of articles and books on transsexualism (a term I dislike as it is too often used as a label). Besides extensive hours of work, it involved considerable expense and travel - only to find no interest (a lesson learned). As I haven't a car, it's difficult to help with any support groups. It's not that many people aren't interested in helping, it is sometimes lack of money (or, in my case, transportation, as well).\*

I used to attend the Gateway Gender Alliance meetings in San Jose but was never asked for help, only money. When suggestions were made, the "I'm the boss" attitude of the group leader made many withdraw from offering anything. With the demise of GGA the Rainbow Gender Association now has speakers, pot-lucks, a newsletter, more attendance and a bank account with some funds. While the group is mainly TV (as was GGA) the TS segment is active. I've baked refreshments and helped set up for meetings. RGA encourages a group effort-something never encouraged at GGA.

A problem with the TS community is that it's more in flux than the TV community. "Trans" is an accur-

ate reflection of most TSs - whose goals tend towards acceptance as part of the mainstream world of men and women, instead of (as I perceive it) the goal of TVs to gain acceptance of their "lifestyle" and who seem to identify as TVs more so than TSs do as TS.

I (as well as many others) face the conflict of wishing to help others, and at the same time avoid identification as "TS" rather than as male or female. I feel this is the weakness of self-help efforts for and by TSs. The group is less stable population-wise (and seems to be a trans-itional "group") as "members" try to integrate and function in society as men or women, not as TSs. I still face the problem of how to be of help and yet avoid being viewed by society as "TS" rather than as a woman. If you know of a solution to this dilemma, please let me know.\*\*

If it were not for the efforts of yourself and others many people would never have known where - or how - to make the transition. In this alone, your efforts have proven invaluable. Unfortunately many of us cannot become full-time or professional advocates. While I can (and do) correspond with and offer support to those still in transition, lack of money and a car limits more activity. Please don't think too harshly of me for being unable to be as you.

--(Name withheld by request)

[\*Nor do I own a car or have any money to my name, but that doesn't stop me from doing the work I do. Still, I wish I could get paid for this almost full-time avocation.

\*\*Yes, I think I do and next issue I'll be proposing a list of suggested ways in which TS "consumers" can help out in the TS (cont'd.)

Letters To The Editor (cont'd.)

community without jeopardizing their low profiles. Watch for it.]

\* \* \* \*

Dear Rupert:

Thank you for sending me a copy of your magazine. My club has been going through its share of difficulties over the past year (as I was getting pretty fed up doing all the work to keep it running with hardly a thank you from anyone). I am ready, however, to start putting out a new magazine which will concentrate on more pertinent concerns to crossdressers than merely the fetishistic aspects. It will be called Birds Of A Feather, and you will be sent a copy when it comes out (hopefully within the next six weeks). Any hints or ideas you may have about the restructure of our club would be greatly appreciated. Membership has been growing steadily. At present there are 120 active members.

I'd be happy to inform my readers of your research project. Thanks for your interest in this group.

--Danielle Bluestone, President  
Canada-Wide TV & TS Contact Club  
Calgary, Alberta

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Dear Rupert:

I am so sorry the Globe and Mail article made you look bad and, that you and your sister were made fools of on "Sally Jessy Raphael"\* People are so mean and out for the "dirty laundry" of life..I re-read the letter you wrote to the Editor You really are an articulate writer. I can't get over how clear and to the point you made yourself and the statements you made about the rude, hateful and abhorrent style the reporter used. You were very righteous and I am proud of you... My comments about how I've had it with TSs is extremely premature as my exposure to them is very slight compared to yours, and seeing as the more people you meet, the more you can make statements like yours "Many transsexuals I have the privilege to know are above average-not only in looks, intelligence, prosperity, and/or happiness, but also, in personality, in human kindness..." Please keep in touch.

--C.D. from Hartford, Conn.

[\*We weren't made fools of, instead I felt we came across rather well, quite uniquely human in fact.-Ed.]

\* \* \* \*

Dear Mr. Raj:

RE: the Globe and Mail article, you and your sister were perhaps too harsh. I felt the overall tone of the article was one of fairness and sympathy, overlooking the typical journalistic style and cliches. It's too much to expect such a report to cover the subtle and complex problems of TSism when most of the public doesn't even know what the term means. I have found the average person is simply incapable of understanding what it is like to be "trapped in the wrong body" when he has never (cont'd.)

## Letters To The Editor (cont'd.)

experienced anything even remotely like it himself.

While I can imagine your feelings when reading how you "forgot" and began to cross your legs at the thighs, you must realize that you open yourself up to this sort of criticism when you, an apparently normal man, announce that you used to be female. The viewer will then scrutinize you relentlessly for any sign of remaining femininity—as indeed I myself do when meeting another transsexual.

As far as that reporter's preoccupation with "sex", that's the only framework in which the average reader can relate to our life-encompassing problem. In truth, the subtle distinction between "lesbian" and "male-in-a-female-body making love to a woman" only exists in the mind of that TS (and hopefully, his lover). The transsexual should accept the fact that his complex state-of-mind is beyond the grasp of all but the most sensitive and enlightened. I cringe at the antics of a few militant TSs who demand public acceptance and try to force the public's sympathy and esteem. Most people have never met a transsexual. Therefore they base their perceptions of us, as a group, on one vocal example. I, for one, do not care to be judged by one TS who appears on radio or TV and succeeds (through his own fault or the mediators) only in looking like a freak.

Instead, TSs should concentrate on building support within their own ranks. (I have been pleasantly surprised by the extensive network that already exists - within a few months of discovering what "TS" means I feel I've access to every TS publication and organization in North America). Yes, we are freaks.

TSs should understand what that means. It means we are a small select group. Each one of us is a unique and special individual, who for some reason, has been given a challenge that's outside the experience, beyond even the comprehension of the average human being. Our experience should allow us to transcend judging anyone by appearance, whether TS or not. It should enable us to truly understand and sympathize with the problems of males and females, since we alone, of all people on the Earth, have firsthand knowledge of both. What a unique and fortunate viewpoint!

Instead of demanding acceptance as transsexuals, we should concentrate on presenting a dignified, impeccable front, as normal male human beings. I don't know why (RE the Globe and Mail) you objected to the statement that TSs "long radically to be average." When I'm a man, I hope to "fade into the woodwork" and live as normal a male life as I can. I know other TSs feel the same. And if I'm labelled a "transsexual", I hope I am judged on my own merits, not the image that TSs - if they're not careful - create for themselves, of being tormented, frustrated people, which, unfortunately, due to the nature of our problem, must in some ways be true.

Thank you for letting me air my views. I do not mean to imply you are one of the militant\* TSs I complain about. Since I've never heard you speak, I assume you are not. Your efforts on behalf of F-Ms are appreciated, by this one at least.

--Kevin from Laguna Beach, Calif.

[\*Yes, I am "militant" (but not radical) and lobby politicians for TSs' human rights, and speak out against sex-researchers/therapists and the media when there is need.]

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