

TWENTY MINUTES

MAY 1989

THE XX (Twenty) CLUB \$2.00

SEX-CHANGE MAN IS PREGNANT! Guy turned gal will be first transsexual to give birth

By Debi Beshears

A man who became a woman through a sex-change operation is pregnant after miracle surgery made the dream of her life come true! Guna Johannson, whose first name was Gunnar, will give birth to a healthy baby boy in a few months, and stunned medical experts say the event will be the first transsexual delivery in history! Dr. Georges Chaison is responsible for the astonishing breakthrough. Dr. Chaison has specialized in sex-reassignment operations for more than 20 years in Casablanca, Morocco. Dr. Chaison suceeded in transplanting the uterus and ovaries from a woman killed in a traffic accident into Miss Johannson. The surgery succeeded beyond anyone's wildest hopes. Within two months of the operation Miss Johannson was having a regular monthly menstrual cycle and within a year was pregnant. She said "I had realized one dream by changing my sex - now I knew that I was close to having my biggest dream of all come true. I was going to be a real-life mother!" She and the baby's father will be married soon and the child will be named Georges, after Dr. Chaison.

(EDITOR'S NOTE...This article reprinted from NEEKLY WORLD NEWS.)

What's wrong with this picture?



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THE XX (Twenty) CLUB, INC. P.O.Box 80690 Forest Park Station Springfield, MA 01138

THE STAFF

- Editor - Veronica Jean Brown Associate Editor - Becky
- Assistant Editor Lynda Breckenridge
- Graphic Artist ARADIA
- Contributors: Sr. Mary Elizabeth Sarah Rupert Raj Wicheline Johnson

Advisor

- Rev. Clinton Jones

When breezes are soft and skies are fair, I steal an hour from study and care, And hie me away to the woodland scene, Where wanders the stream with waters of green.

- William Cullen Bryant

Spring has sprung, And grass has griz, Where last year's Careless drivers is.

- E. M. Barrassed

And so it goes, to borrow a phrase from Linda Ellerbee. Let's hope she finally makes it big. Spring is really here and with the prolific harbingers of this most welcome season, comes a new, more gentler and kindler newsletter. Well, at least until the next controversy comes along, that is... We see at least a couple coming soon. We welcome all contributions. The Twenty Club is not responsible for opinions or accuracy of information provided by writers of submitted materials. All such material becomes the property of the Twenty Club. Parts of this newsletter may be reproduced if source credit is given.



MEETINGS Saturday, May 13

Saturday, May 27

Regular meetings of the XX Club are held the second and fourth saturdays of the month at Christ Church Cathedral, 45 Church Street, Hartford, CT, at 2 PM sharp. (Located at the corner of Church and Main Streets in the downtown area across from G. Fox.) If you believe you are gender dysphoric, you are welcome to visit and find out more about our group and talk about yourself and your feelings. The XX Club is a transsexual support group, not a dating service or social organization, though we do socialize after the meetings with munchies. We attempt to provide peer support and practical information about making the gender transition, as well as information for the Gender Identity Clinic of New England. There is no fee (not yet) to attend our meetings, but a yearly subscription to this newsletter will assist in our outreach and educational work. All other monetary donations accepted cheerfully.

GUEST SPEAKER

At our meeting of Saturday May 27, we will have as our guest speaker Sr. Mary Elizabeth (the former Miss Joanna Clark). Sr. Mary Elizabeth is the Legal author of Aspects of Transsexualism, as well as numerous articles on the subject (many of which have appeared in Twenty Minutes). She is also the co-founder (with Jude Patton) of J2CP Information Services. Also expected to be in attendance, as a guest not as a speaker, is Rupert Raj (Gender Worker). There should be a large gathering on hand, so plan to arrive early or on-time for the 2 PM exertion meeting.

NEW NO SMOKING POLICY

In an effort to be fair to everyone who attends XX Club meetings, a new no smoking policy was adopted at the April 8 meeting. There will be ND smoking permitted during the meetings while we are gathered in a group. Certain chain smokers have made the meetings uncomfortable for those of us who are allergic to smoke or have asthma. Smoking will be allowed after the meetings when we take our break for refreshments. We appreciate everyone's co-operation.

SO, I'M GENDER DYSPHORIC. I	(M HAPPY WITH THE WAY I LOOK GOD	
DON'T NEED SRS	GANE ME THIS BODY,	
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2625 E	L K	e



BUSINESS

TREASURER'\$ REPORT a fire and

Balance - from March

INCOME:

\$1164.69

Collections - meetin	gs 30.00
Newsletter subscript	ions 90.00
Brochure sales	37.50
IFGE sales	43.00
CDS sales	.00
J2CP sales	5.00
Donations	.00
Savings interest	5.65
Total Income	211.15

EXPENSES:

Refreshments Nevsletter Postage Supplies Bad Check Bank Fee Total Expenses \$193.30	19.60 115.45 49.75 .00 6.50 2.00
Net Income for April	\$ 17.85
Balance - end of April	\$1182.54



TRANSSEXUAL LESBIANS

THE ULTIMATE MINORITY

by Sandra Hesics

(EDITOR'S NOTE...reprinted from the February 1982 issue of the TRANSSEXUAL VOICE. Perhaps the ultimate fantasy dream of most M-F TS people is to find Mr. Right. Umexpected events sometimes happen along the path to gender congruity, things that Nother mever told you about.)

In 1977, a major controversy rocked the women's community when it was discovered that Sandy Stone, a recording engineer for Olivia Records, a female-owned recording company, was a transsexual. A similar controversy also erupted recently in Philadelphia, when Leslie Phillips, a post-operative transsexual was removed from the Lesbian Weekend Committee. In general, the transsexual presence in the women's community has become quite an issue, sometimes divided into two camps; those who accept transsexuals, and those who don't.

Transsexual lesbians (or lesbian transsexuals) are not mentioned in the textbooks, and only recently is their existence being admitted in the medical literature. One transsexual I interviewed admitted that although she had some inkling before her surgery that she would become a lesbian afterward, she never mentioned the fact to anyone, especially her psychiatrist. "Tell him? No way. Back then, the surgery was so hard to get that I told them anything they wanted to hear. I assumed they wanted nice, healthy, heterosexual women to come out of the hospital, so that's what I told them they were going to get." This same attitude was echoed by several lesbian transsexuals with whom I spoke.

Probably because pre-operative transsexual candidates for surgery never mentioned the lesbian possibility to their psychiatrists, it was never written up in the medical literature. Only now when studies are being done on postoperative transsexuals is the phenomenon becoming apparent. Post-operative transsexuals have less to lose by telling the truth in a psychiatric interview, and now the truth seems to be that the percentage of transsexual lesbians is surprisingly high. You can be sure that we will be hearing more about it as time goes on.

Just how many post-op transsexuals become gay is hard to estimate, and there is too little information at this time to draw any conclusions. However, as some sort of starting point, of the twenty or so post-operative transsexuals I know, about four are either exclusively lesbian or have had considerable contact with women as sex partners.

That calculates to about twenty percent, a surprisingly high statistic. Of course, it isn't safe to draw any conclusions from such a small sampling. The importance is that if <u>any</u> group of transsexuals is studied, there are likely to be lesbians in the sample. In fact, in <u>The</u> <u>Transsexual Empire</u>, Janice Raymond states that she doesn't know any transsexual feminists who do not also claim to be lesbians.

As I stated previously, the women's community is split regarding the issue of transsexuals. Janice Raymond calls the transsexual involvement in the women's community a violation of women's sexuality and spirit, in short rape. It seems to be the case in the women's community that transsexuals are tolerated, unless they assume positions of leadership or authority. That is when the problems start. The message for transsexual lesbians is clear: keep a low profile. Some years ago when I was considering starting a women's/lesbian publishing company, a transsexual friend who was involved in the women's community as a writer and editor, advised me to keep my transsexuality a secret, or I would never succeed. Therefore, the transsexual lesbian exists under a dual hardship: not only must she deal with society as a transsexual, but if she decides to "come out" as a lesbian, she may experience rejection from the women's community as well as from society.

Why transsexual lesbians? According to Raymond, it is because transsexuals want to capture female energy and possess women in the deepest possible way. A more accurate approach can be made by seprarating gender identity from sexual preference. The two are completely independent, and transsexuals make the same choices of sex partners as native-born women. Possibly, identifying as a lesbian may be a way of over-identifying with females not only in rejecting masculinity in oneself, but in one's choice of peer group and sex partners as well.

An interesting line of research would be to study the preand post-operative behavior of transsexuals, to see what types of correlation exists. Buite possibly, transsexuals who were involved with women pre-operatively will continue to choose women as sex partners after surgery. However, this still remains to be seen, and any readers who have an idea on this subject are welcome to reply to the author.

> Sandra Mesics Box 764 Bensalem, PA 19020

VICIOUS ANTI-GAY RADIO

ATTACKED IN SPRINGFIELD

(EDITOR'S NOTE...condensed from a recent NETROLINE article)

The Alliance for Equality, a Western Massachusetts human rights coalition has issued angry and formal complaints against WSPR radio in West Springfield and with the FCC, because of an anti-gay talk show that aired on March 27th.

Bill Brady, hosted a three hour program devoted to the proposed Massachusetts civil rights bill for gay men and lesbian women. Callers were encouraged to express views against gay people. Those callers who expressed support for the bill were berated by Brady ("When's the last time you were with a woman pal?").

Brady's attacks were vicious as he endorsed the genocide of gays under Hitler, advocating placing all gays in Wyoming and erecting a fence to keep them there. He encouraged the beating of small children who exhibited homosexual signs. Brady went so far as to attack women by saying, "women are an intellectually dysfunctional gender to begin with."

The three hour show was non-stop in its gay bashing, though Brady professed, "I don't hate gays, I pity them." He repeatedly encouraged violence and discrimination.

Nartford, Connecticut gay leaders, who are currently battling anti-gay radio WKSS announcer Sabastian, agree that Brady's show was the most vicious they'd heard.

Brady said his show was a step forward to speak out on what was "wrong in society". He called his show a landmark achievement in broadcasting. The Alliance for Equality wrote: "Sadly enough, truer words were never spoken: never before has a radio program reached a depth so low." Brady used words like "light items," "faggots," "flamers," "limp wrists," "closet queens," "dillies," "weenie whompers," "blades," "fairies," "queers," "sword swallowers," and "football bats."

Where does this type of discriminatory behavior leave the transsexual in transition? How would Brady react to a lesbian or bisexual post-op female TS? With unknown numbers of pre and post-operative TSs facing the additional uninvited dilemma of being gay, lesbian, or bisexual, it may be prudent to be very, very careful. For those interested persons in the Connecticut or Western Massachusetts area, you may write to the Alliance for Equality, PDB 80556, Springfield, MA 01138. The Twenty Club will write to AE, I mean why not, their post office box is only a few feet away from ours.

RELIGION

SEX REASSIGNMENT AND THE CHURCH: UNJUSTIFIED MUTILATION? - PART 2

By Sr. Mary Elizabeth, SSE

(EDITORS NOTE: Since the wide-spread publication of "Sy Rogers and the 700 Club: A Response," Gr. Mary has received over forty letters from readers seeking answers to their conflict between religion and gender. In future issues, she will continue her attempt to find answers to the many questions offered in her mail. Comments or questions are invited and should be sent to Twenty Minutes.)

The central question which many gender-conflicted persons have to face at one time or another is: "Does surgery on one's sexual organs constitute a sin against God?"

In part one of this series, we began to explore the contemporary view that "sex reassignment surgery is unjustified multilation." (Springer, 1987), and therefore a sin. In this segment we will continue our journey of exploration, seeking to answer that which may very well be unanswerable.

The theological argument against sex reassignment surgery appears to stem in part from the Biblical emphasis that man is made in God's own image and that it was good-<u>i.e.</u> 26 "Then God said, 'Let us make man in our image, in our likeness, and let them rule over the fish of the sea and the birds of the air, over the livestock, over the the earth, and over all the creatures that move along the ground.' 27 God created man in his own image, in the image of God he created him; male and female he created them. 31 God saw all that he made, and it was very good." [Genesis 1:26-27, 31 NIV], and a lack of objective evidence that a biological conflict between body and mind exists. They allege that gender dysphoria is a psychological phenomenon, which by its very nature is based on subjective experience." (Ibid).

The preceding Creation narrative from the book of Genesis, supported by the medieval church's certainty that the only valid criterion for determining gender identity is our genitals, has left an indelible mark on many, regardless of their individual belief systems. But, what does 'in His own image", mean?

Some interpret the image of God in man as a reference to our bodily apperance. But, given the variance of our creation-<u>i.e.</u> black, white, red, yellow, or olive skinned, not to mention, that some of us are fat, skinny, tall, or short, just what does "in Nis image" mean?

During the age of enlightenment, we were assured the image of God was our ability to reason. The great thinkers of the Renaissance age located the image of God in one's artistic creativity. Later, the Priests identified it as spiritual faculty, while the Victorians claimed it was our ability to make moral judgements. (Brand, 1987). More recent, it has been suggested that it is more of an intangible, rather than a physical, likeness of God. (EEF, 1978).

Philosophers and theologians have speculated for centuries on all that can be contained within the mystery of this single phrase. They have projected onto their definitions the principal concerns of their own era. And, despite centuries of debate, no consensus of opinion has been reached. (Brand, 1987). A more substantial argument might be found in "God created man ..." (Genesis 1:27). "If God is Creator, if this Creator--as the Bible says--created persons as male and female" (Jones, 1986), does this not hint at Divine or Supreme ownership of our bodies? If Divine or Supreme ownership exists, then do we have the right to make even the most insignificant changes to our bodies--<u>i.e.</u> face lift, nose reconstruction, etc? Springer points that "many believers have settled Ithis question]," and provides the following in support of their argument.

"Mumanity falsely believes that its life and the life of creation are at its disposal to do with as selfishly desired. The act of this rebellion is directed toward a tree in the garden . . .

The threats presented by both nuclear weapons and genetic engineering spring from the conviction that humanity has the right to manipulate, create and destroy creation as it sees fit. Life is its own to posses. By contrast the biblical picture presents the creation as God's gift to be preserved, nutured and treasured . . . Such actions claim perogatives for humanity that rightly belong omly to the Creator."

(Springer, 1987, quoting Grandberg-Michelson, 1983), citing Leviticus 19:19--i.e. "Keep My decrees. Do not mate different kinds of animals. Do not plant your field with two kinds of seed. . . ." as additional support of their argument.

Both arguments--<u>i.e.</u> "in His image" and "Supreme ownership" appear to fail in light of God's continuing revelations in medical science. These revelations allow physicians to ease physical and psyche pain in a variety of ways--in particular, the correction of physical deformities.

Our nature has brought us to equate, "ugly with bad and beautiful with good." As every burn victim, handicapped person, and leprosy patient has painfully learned. "Inje humans give inordinate regard to the physical body, or shell that we live in." Our cultural commitment is to a "tall, handsome, and confident nale or a slender-yetshapely, smiling female." (Brand, 1987). Those who do not meet this cultural standard are judged and treated harshly. As a result, hundreds of thousands of surgeries are performed yearly to correct physical deformities, with little, if any consideration, to the notion that we are tampering with the image of God or omnership of His creation. The surgeon's goal is to bring wholeness to his patient. Cannot the same standards of judgement be applied to sex reassignment surgery?

Canon Jones raised the issue of wholeness in his paper--<u>Theological Questions/Pastoral Responses</u> ... "If the human being is made, as Biblical language states, 'in God's image,' then it mould seem that it was God's intention that human beings should experience wholeness, since surely the Divimity is One and is Whole." (Jones, 1986). Answers to life's complicated problems are not easily found, but abundant life and wholeness seem to be what the Gospel is all about.

The life, teaching, death, and resurrection of Jesus of Nazareth persistently speaks in terms of healing physical and emotional anguish, touching and being seen among social outcasts, freeing individuals from the bondage of guilt and frustration, and including them within God's unyielding love. Jesus was not a stone caster. He was always eager to restore health to those who were blind or deaf, or palsied, or taken in the act of adultery.

The dominant theme of the Gospels is a Divine Person actively engaged in bringing *wholeness* and *equality* to people who are trapped. How then does one justify denying therapies and surgical procedures capable of bringing completeness, wholeness, and oneness to a person desparately in need?

May the peace, joy and love of our risen Lord be with each of you, now and for ever.

Next: A Psychological Phenomenon?

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RONALD



THE GATHERING

SECOND ANNIVERSARY

DATES: Saturday - May 6, 1989 - 6:00 PM Sunday - May 7, 1989 - 1:00 PM

The GATHERING is now two years old. They will celebrate with a Pocono weekend at the home of Jessica B. All who attend are requested to dress up for both the Saturday night Banquet and Sunday afternnoon luncheon. Those persons planning to attend should bring some warm clothing as you will be in the mountains and temperatures may be up to 10 degrees cooler. Guests are invited as are relatives, acquaintances, friends and TV's. The cost is twenty-five (\$25.00) dollars per person and checks should be made payable and sent to Jessica Babel, Star Route 169A, Pocono Lake, PA, 18347. For more information call (717) 646-7736.



by Michelle Hunt. R.N.

Dear Michelle: I am a post-op soon to celebrate my third birthday. I plan to have a Z-Plasty later this year. Just what is a Z-Plasty and why didn't the surgeon do it when I had the original surgery? M.M.

Dear M.M.: A Z-Plasty as applied to your case is a procedure to bring your labia (lips) together at the top, and to form a sort of hood over the urethral opening. It is called a Z-Plasty because that is the shape the fold of the skin assumes during surgery. The reason this procedure can not be done as part of the original surgery is due to the sharp folding of the skin causing a decreased blood flow, and with the swelling present in SRS, may result in the skin dying and falling off.

(Reprinted with permission of the author from the February 1988 issue of the TRANSSEXUAL VOICE.)



As reported in the April Renaissance News, Veronica Jean Brown has been awarded the first annual prestigious MONA award, in the category of "I'll show you mine if you show me yours." Those close to. VJB said she is ecstatic and thrilled at this honor. She has received certificates of achievement from Cub Scout Pack 93, IFGE, Tiffany, and The Gathering, but of all these, she holds her MONA most dear to her still beating heart.

Rumor has it, that she may challenge Janice Van Cleve to a game of strip Monopoly if Van Cleve attends the 1990 IFGE convention slated for Boston next year.

TRANSVESTITES AND TRANSSEXUALS:

Toward A Theory Of Cross-Gender Behavoir

by Richard F. Docter, PH.D., Plenum Press, New York/London, 1988, 251 pps

Reviewed by Rupert Raj

Tenth in the series of Perspectives In Sexuality: Behavior, Re-search, and Therapy, Richard Docter's book is an important successor to Steiner et al's 1985 study on the development, research and management of gender dysphoria (eighth in the series), not only because his "national gender project" carries on the research endeavor, and builds on the clinical results presented in the 1985 re-port - and also, those of its predecessors - but, for the further reason that he employs a research perspective that is unique to the study of crossgender identity -that is, a social psychology approach that incorporates a developmental/learning model of behavior.

This psychological/cognitive model - in contrast to the biological/ medical model and the intrapsychic /psychodynamic model - attempts to explain transvestism and transsexualism in terms of social learning processes, such as classical and operant conditioning, modeling and imitation. Docter believes that such cognitive and developmental factors have been historically understated in terms of crossgender research. Yet, he urges us not to ignore the rich and vital contributions inherent in the other two paradigms, and he includes them in. his review of the literature.

Docter's work also merits significance because of his treatment of transvestism as a changing process rather than a stable behavior pattern. He presents a multistage theory of heterosexual transvestism which relies heavily on the lifespan or developmental view of this phenomenon and he attempts to account for secondary transsexualism (which he believes has a much higher incidence than primary transsexualism) as "the product of the developmental struggles of some transvestites." (p. vi).

Transvestites And Transsexuals focusses mainly on the former group (comprising predominantly heterosexual men), and also features data on 35 wives of the 110 transvestites studied, including a look at marital sex and patterns of marital adjustment, choice of marital partner, problems as seen by wives, and their comments to prospective wives of transvestites. Docter's presentation of the crossdressing continuum includes discussion on a number of gender-discordant variations: fetishism, fetishistic

transvestism, marginal transvestism, transgenderism, primary and secon-dary transsexualism, and also, to a very limited extent, drag queens and female impersonators. Examination of transsexuals, a minor theme throughout the book, is limited to genetic males, and the existence of female transvestites is virtually discounted, with the exception of a referral to Stoller (1982, 1985c). Transsexual topics treated in this work include: historical and etiological aspects, primary versus secondary transsexualism, outcomes of transvestite and transsexual "careers" and studies differentiating the two, the relationship to gender identity, and follow-up studies of sex reassignment.

The inclusion of transgenderismwhich the author regards as "a behaviorally definable landmark or plateau intermediate between very intense transvestism and secondary transsexualism" (p. viii) - is especially noteworthy considering that the term is conspicuously absent from the Diagnostic and Statistical Manual of Mental Disorders (DSM-III-R), even though it has been perceived as a subgroup in its own right for many years, and Docter urges its inclusion as part of the gender spectrum.

Docter defines transgenderism as:

"full-time living in the crossgender role in the absence of sexual reassignment surgery, with oscillation, however rare, back and forth from one gender role to the other These individuals may represent cases in transition toward secondary transsexualism....The transgenderist usually seeks female hormone prescriptions and such cosmetic and dental treatment as may be considered helpful. This category has major similarities and some important differences to Benjamin's Type 4, or nonsurgical transsexual (1966). Marked individual differences in life-style are seen among transgenderists. We know of individuals who reverse gender roles daily, working as men and functioning entirely in a feminine gender role each evening and usually on weekends. For others, the duration of time in each role is measured by weeks or months, and less commonly, some function in a cross-gender role for years with very rare reversion back to the male role." (pps. 21-22).

Self theory is the overall theoretical framework used in this study. This conceptualizes the constructs , of identity, gender identity, and crossgender identity as subsystems of the self. Docter examines the concept of a "feminine self" or "second self", arguing that this temporary reversal of gender identity in transvestism occurs after extensive fetishistic crossdressing has been learned and practiced. How the self system manages the crossgender identity, his argument goes, is what determines the stab-ility, or alternatively, the "progression" of transvestism into some other behavior pattern, such as transgenderism or transexualism. Docter formulates his five-stage theory of transvestism utilizing four major thematic constructs: sexual arousal and sexual excitement, feelings of pleasure, sexual scripts, and crossgender identity.

A final point of interest should be noted. Docter states, in the Preface, that although he relates his work to the definitions given in DSM-III-R (published in 1987 by the American Psychiatric Association) - because this is the internationally accepted standard for describing and categorizing psychiatric disorders - he does "not assume that either transvestism or transsexualism ought to be conceptualized as disorders." He believes that such a view "stems from a medical mode of illness which does not clarify the understanding of these behaviors." Docter therefore reminds us that he sees "both good and harm" in using this medical model terminology. (p. viii).

This reviewer can say with confidence that <u>Transvestites And Trans-</u> <u>sexuals</u> contributes significantly to the ever-growing accumulation of scientific knowledge that may, hopefully someday, piece together, the puzzle of crossgender behavior.

Rupert Raj, B.A. (Psych.), P.R., . Director of GENDER WORKER, (Box 1224, Station A, Toronto, Ontario, Canada M5W 1G7) has reviewed a number of books, tapes and films on "Gender Dysphoria Syndrome".

The trouble with reality is there's no background music

OUT OF THE MOUTHS OF BABES

by Sarah

It had been a long day. Finally at 5:30 p.m. I headed for the double doors and home. As I made my way to the exit I am passed by three or four children about 7 to 8 years old at the most. The oldest is saying to one of the others.. "And there is a transvestite who works here.." We pass each other. As I push the doors open I turn incredulous at what I thought I had just heard. I look. They turn and look back at me. Did I really hear that, or just imagine I heard it? After all, I had read *Twenty Minutes* last night with the ranting and raving about TVs, maybe I filled in the blanks automatically. Yet from experience I know that children are my worst enemy. They come into my office and after hearing me say a few words blurt out, "Hommy, is that a man or a woman?" I forcibly restrain my tongue from saying, "Neither, 1'm a child molester and will have your heart for breakfast if you don't shut up!" Embarrassed, Mommy makes excuses for her uninhibited child.

After ten years I know better than to try to respond in any way to these verbal slips or comments made about me (but never to me) within my hearing. To do so is to acknowledge the message being sent as being applicable to you. After that, denials are useless and only lend credibility to the comment. Not only must one deny the truth being alluded to, namely, that one is indeed other than a genetic female, but by attempting to deny it one accepts the value judgement implied by the comment. The other alternative, that of acknowledging the truth of one's gender identity, while perhaps courageous, always reminds me of Jesus' warning about "casting your pearls before swine, lest they trample you." While you might escape being trampled, it does seem an unappreciated sacrifice of personal privacy to respond affirmatively to those whose manners indicate a pigstye mentallity, or a childlike need for simple answers.

So one is left to salvage one's dignity in silence or with a smile and to proceed with one's business, reminding oneself that the worth of one's life is exceedingly greater than the stigma which attaches to it the minds of some people who know nothing about you. If anything, by your silence the ambiguity remains for them to confront in whatever way they choose. We are, after all, an ambiguous lot. A few years of hormones will not make you into a femme fatale, but neither will you pass convincingly as a male. We are somewhere in between. Some of us more than others, but most, upon close inspection, bear the marks of masculinity in spite of efforts to be rid of it.

Now ambiguity is not the worst thing that can befall a human lfe. When I was younger I had the passion of a moral moron in wanting either - or choices. Some of that passion for clear cut answers I am sure fueled my gender dysphoria. I was rigidly male to cover up a far more feminine self than I could afford to admit to being. As one grows older, however, there is the discovery, at times painful, that to be a whole human being one must accept the ambiguities within oneself. Perhaps that is a realization made available for mature adults only. In any case, children are especially uneasy in the presence of that which does not fit into the simple worldview they are capable of understanding. When they are small ambiguity is unlikely to frighten them, or in some rare instances amuse them. When they reach adolesence and the tremendous peer pressures and puberty problems, that fear of anything different, especially of a sexual nature, triggers alarm bells in their heads with potentially aggressive results. It is not wise for people like us to trequent teenage hangouts unless we are fired by missionary zeal and skilled in martial arts.

I have found that in professional relationships that the advice given me by a counselor to be best. Say nothing about your personal life when asked personal questions. Instead, turn the question around to ask why matters of a personal nature are being raised. Is the interest business or pleasure? In ten years of professional life I have never had to answer such a question, nor has it ever been raised in my presence. That is not the same as saying that my professional colleagues are totally ignorant of the facts of life and my particular version of those facts. There have been occasional wrong use of pronouns, but never intentional or deliberate misuse so as to elicit a reaction from me. My best guess is that some figured out the facts ans some never will, but by keeping this aspect of my life private I have not denied the truth of it, only its relevancy to relating to me as a person and as a professional employee.

Having withheld this interesting tidbit of information about myself has required that people relate to me as a whole person rather than as an oddity or a crusader. In so doing they have discovered that I am indeed just like them in all respects, save one. As a consequence I have made good long-lasting relationships with my co-workers that have survived even after I changed jobs, yet never once have we discussed the matter of my gender identity. In some ways I think I have done them a favor by withholding that information, so that now, were I inclined to reveal it, I doubt that it would raise an eyebrow.

I hope the point that I am making is clear. I am not apologetic for who I am. But neither do I feel the need to force the issue on people. My presence is sufficient. I am a bearer of gender ambiguity in my person. Those who relate to me inevitably must choose to forget about it or avoid making eye contact with me! Since I am quite comfortable being me. I find that most people relax and just possibly accept the fact that maybe ambiguity isn't so bad after all.

And accepting ambiguity gracefully is what it is all about, not just in terms of sexual or gender identity, but much else as well. That attitude is pretty well summed up in the old adage that, "I was a lot smarter when I was younger," or "Out of the mouths of babes comes the truth" but only adults have sense enough to know when not to believe it or let it get in the way of living.

A Penile Internal

Prosthesis for F-M TS'S

by Micheline Johnson

I understand that many post-operative f-m TS's would like to be able to control the erection of their penises without the aid of mechanical external devices such as rods that have to be inserted into the penis.

An internal device is being implanted into men who for medical reasons, such as diabetes, are impotent [unable to get it up]. The device is a simple hydraulic arrangement, with two tubes running the penis, into which are pumped some fluid to make the penis erect, and which is released in order to allow the penis to go flacid. The fluid is controlled by a small device [pump] located in the scrotal area which can be operated manually through the skin.

One surgeon who is doing this type of implant is Dr. G.V. Bourdeau of the Montfort Hospital in the Ottawa area. Presumably there are others in other metropolitan areas. It might be worth while trying to persuade one of these surgeons to do the same operation on a post-operative f-m TS.

I MAY BE SYNTHETIC, BUT I'M NOT STUPID!



Dear Veronica,

The quality, relevance and format of the March "Twenty Minutes" was simply excellent. I'm kicking myself for not discovering your publication earlier! I agree wholeheartedly with your observation that many heterosexual transvestites retain their primitive male Chauvinistic attitudes and are not supporters of Feminism or truly understanding of the hardships as well as the joys of being a woman! There most definitely is a <u>qualitative</u> difference between the TS and TV and not a quantitative continum across the gender scale.

I believe that <u>transvestites</u> do form a continum on the "hostility toward women" scale and some genuinely have empathy and decency in their attitudes to transsexuals. We must be careful not to alienate the "transgenderists" who run Tapestry and who will have the ears of the media. I believe that JoAnn Roberts is a well meaning person who is less neurotic and rigid than the Tri-Ess followers of Virginia Prince. I'm afraid the mantle has fallen on you Veronica to eloquently present the case of the "pre-op" TS who so much needs positive role models. I know it would be easier to renounce the ex-"TS" label and just become a woman, but you must realize that <u>you</u> are saving lives.

Love, Jocelyn Encino, CA

Dear Veronica,

Here I am, renewing my subscription. I have been reading the newsletter and some of the things that you said and/or edited made some real sense. The one thing that struck me was stating that a person should not be taking hormones if they were not actively persuing SRS. I thought about that and stopped taking them, after nine years, as much to see what would happen and how I would feel. I have to admit that I had more of a physical sense of well being, and at the same time, started to really resent the reoccuring masculinization of my body. In spite of that, I stayed off them and started to really consider exactly what I wanted to do, how I felt, and how much of my "femaleness" came out of the bottle.

What I discovered was that I was and am far more female than even I had considered. This was certainly not in a physical sense, but in a real preference as to how I wanted to live my life. Over the past six months or so, I have found myself for the first time removing all sorts of "male defenses" that I threw up so that people would not realize how physically female (or odd) I was starting to appear. I let my hair grow, started wearing what basically would be considered feminine clothing of a very casual nature (sweaters and jeans and the like) but appearance is such a small part of this. What I did was remove the emotional barriers and defenses. I found myself refusing to do anything that would be inconsistant with what a woman would do, act, or relate to in the normal course of life. I found myself to be more open, entered into activities such as being on the food and arrangements committee at the church, and I started sharing how I felt about myself, Barbara, without feeling that I had to hide anything.

> Best wishes, Babs Columbia, SC

(EDITOR'S NOTE...The following letter was sent to Ms. Paula Stockholm of TRANSUPORT of Portland, Maine from the Maine Attorney General.)

Dear Ms. Stockholm:

Thank you for your letter concerning the unique problems arising from the delivery of government services to transsexuals. Your example of a transsexual required to show proof of identification in connection with an offer of employment raised two issues: the requirement of gender identification on driver's licenses and the protection of transsexuals under the Maine Human Rights Act. I have asked a colleague who provides legal counsel to the Division of Motor Vehicles to determine that agency's position on this issue.

With respect to the issue of job discrimination, a cause of action may exist under the Maine Human Rights Act. This Act makes it unlawful for employers to discriminate on the basis of sex or physical handicap. The Maine Human Rights Commission has extended the theory of discrimination on the basis of physical handicap to include those persons who are perceived by employers as being physically handicapped. Although the Commission has not specifically addressed discrimination against transsexuals, I have alerted the Commission's compliance officer to your concerns.

With respect to your birth certificate, Maine law requires that certified copies of amended certificates be marked "amended". However, there is no requirement that the old name be included on the certified copy. In any event, the certified copy will not contain a note stating that you were born a male.

The final issue you raised concerned incarceration. The law is silent on this issue. The policy statement you have requested cannot come from the Attorney General because policies are made by the agencies we represent; our role is limited to providing legal counsel to those agencies. I have asked an assistant attorney general who represents the Department of Corrections to respond to you in more detail on this issue. Please note that the policies of the Department of Corrections are not necessarily binding on county jails in this regard.

Thank you for heightening this office's awareness of the problems faced by transsexuals. Please do not hesitate to contact me if you are in need of further assistance.

Sincerely, Richard G. Bergeron Assistant Attorney General

Dear Veronica,

I'd like to say hello to you, Canon Jones and the rest of the XX Twenty Club membership. My S.R.S. was completed on May 12, 1988 at the Mount San Rafael Hospital in Trinidad, Colorado by none other than Dr. Biber. In addition to the S.R.S. I received breast augmentation. The results of both, in my opinion, were very satisfactory. I'm also pleased to say that I haven't had any post-op depression or blues.

All is not so good however, I was terminated by my employer with only a simple explanation, "Its just not going to work out." I was granted a severance with benefits along with a fine letter of recommendation. As of this writing I am still unemployed with no prospective jobs in sight. Even though I anticipated this problem, it's still difficult to accept. I'm still as competent and perhaps even more so now than ever.

From an executive position with lucrative pay and benefits I fret I may once again be forced to start at the bottom. The climb back up the ladder will be a greater challenge this time than before, but I'm confident I can do it. Perhaps I should feel bitter toward my previous employer and those who have discriminated against me since, but I

LETTERS

honestly believe their decisions are made out of ignorance. Someday this will change. In the mean time I know where there is a 39 year-old post-op M-to-F IS who passes extremely well in society desperately searching for one more chance to begin her career over again.

Sincerely, Debra Mercersburg, PA

(ASSISTANT EDITOR'S NOTE...I quit the job I made my transition on because I could no longer cope with the nonacceptance of many of my co-workers. I then spent two years working as a temporary while going on interview after interview before landing another job in my chosen field for \$5000 a year less than what my male counterpart made. Welcome to the sisterhood.)

Dear Veronica,

A letter in Twenty Minutes wanted to know about facial surgery to reduce brow ridges, etc. There were two issues of the GGA Phoenix a year or so apart telling the story of a Holly Ann, a rather acromegalic-looking TV in Florida who had such surgery and a lot more work, leaving a pretty nice looking feminine physiognomy, when it was done. As I remember, the skin was peeled back and the brow ridges shaved down, in the same time frame as some other work on the face and jaw. I remember the doctor was on the Florida east coast.

I was pleased to see my letter in print. Wouldn't have written it if I didn't mean it. Keep up the good work on the newsletter.

Love, Holly Wayland, MA

Dear Veronica,

Greetings, it has been a pleasure to go to the XX Club, though the trip from New Hampshire is a bit long. I am glad to meet all of you at the club, and Canon Jones. It is important to have some friends (other than friends in my area and "normal") with Gender Dysphoria and similar issues, though I recognize that those that are "post-op" no longer have Dysphoria rather "Gender Balance".

I do have support here in NH and my life is now, at age 35, just becoming to a true sense. I write for I have good news to tell you, Canon and my friends at the XX Club know that the Team of Doctors here in NH have approved me for hormone therapy. I'm happy to start to work on the physical process, for having a balance of my body to match my inner feelings, emotions and mind is most important.

> A sister, Toni Manchester, NH

APRIL FALL OUT

Reflections on the late great April Fool issue of 1989.

Canon Jones: "This newsletter was silly."

Harriette Lane: "That newsletter was terrible. You can't print this stuff. People are going to believe it."

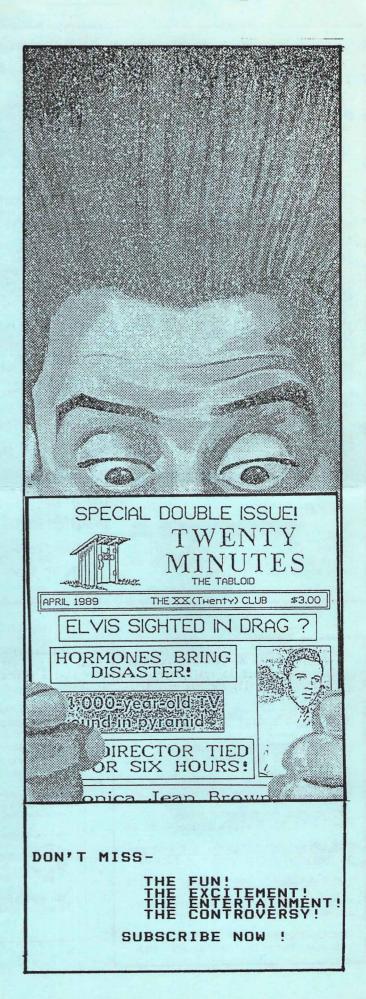
Shawn: "What do you mean 'Special Tabloid Issue'? That's what you always print."

Diana: "I had a problem, I guessed wrong on the stuff that was real and the stuff you made up."

JoAnn Roberts: "I found 'TM, the Tabloid' to be very funny."

Sr. Mary Elizabeth: "It was a pleasure reading the April issue of <u>Twenty Minutes</u>."

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FOR SALE

XX CLUB BROCHURES

TRANSSEXUAL GENERAL INFORMATION \$3.00 Brochure contains everything you always wanted to know about transsexualism, but were afraid to ask...and a few things you don't want to know about. (12 pages ppd. 1st class)

GENDER IDENTITY CLINIC OF NEW ENGLAND \$1.50 Brochure contains initial contact and general information about the gender clinic. (4 pages - ppd. 1st class)

THE BRUSSELS CONNECTION \$3.00 Brochure contains initial contact and general information about the low cost male-to-female sex reassignment surgery option available in Brussels, Belgium with places to stay, passport informa-tion and including a color keyed map. (12 pages ppd. 1st class)

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The Transsexual Phenomenon by Harry Benjamin

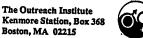
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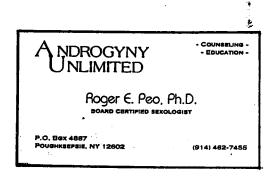


This project is being supported in part by the Renaissance Educational Foundation.

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