

DOUBLE



A bi-monthly magazine for people with GENDER issues
Edition 13, 1996

Legal people don't bite



WINTER SOLSTICE BBQ

JULY 25th

An opportunity to meet with
legal practitioners and voice your needs.

Time: 6pm

Venue: The Gender Centre 75 Morgan St, Petersham

RSVP: Craig (02) [REDACTED]



A Magazine for people
with gender issues

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Unsolicited contributions are welcome, though no guarantee is made by the editor that they will be published, nor any discussion entered into. The editor reserves the right to edit such contributions without notification.

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Polare provides a forum for discussion and debate on gender issues. The ideas and opinions expressed in this publication are not necessarily those of The Gender Centre, the NSW Department of Health or the Department of Community Services.

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Editorial



Welcome to issue 13 of *Polare*. I'm well and truly settling into my new role, and may I say thank you to all those readers who have offered their support through positive feedback on my first edition.

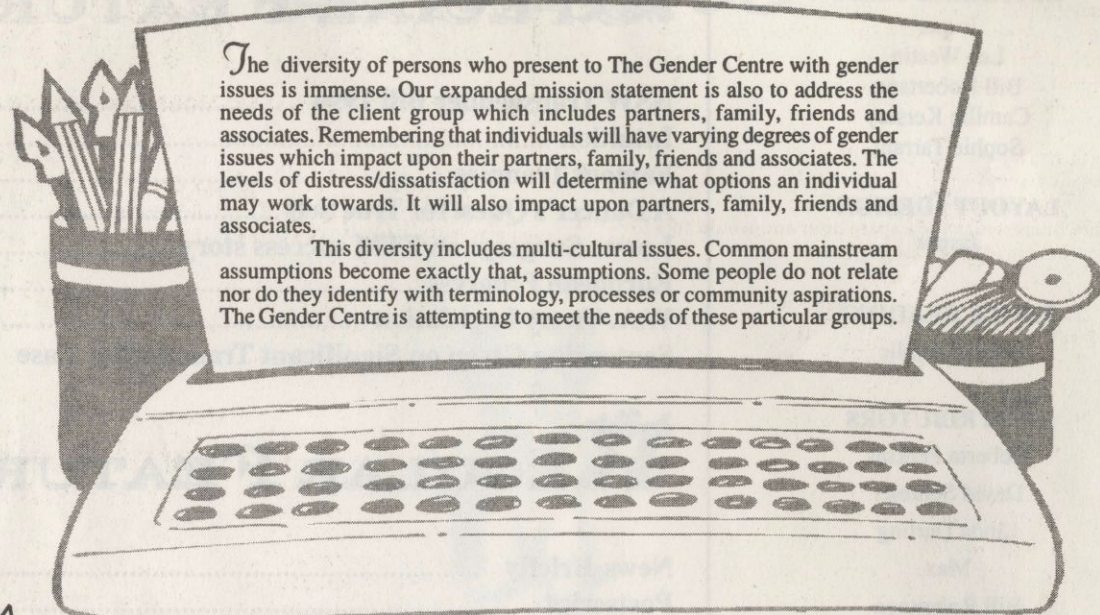
This issue continues the format set in number 12, and there are still more changes to come. We wish to expand our advertising base, so if you have a trany friendly business, or just want to attract trany trade, then contact me regarding some special offers available.

Of course, the big news is that both the NSW and WA Transgender Bills have recently come of age. *Polare* provides direct information on each Bill, and in particular, we have provided transcripts of the NSW Transgender Bill 1996, which is soon to be gazetted.

The Gender Centre's successful "Surgery Information Session" with Dr Haertsch has naturally attracted some comment, some of which we've published, and no doubt there will be a variety of viewpoints. Feedback so far though, is that those present would welcome more sessions of this nature.

As our cover for this issue implies, there are many viewpoints on issues which may, or may not, be yours or our "cup of tea". Yet may I encourage you to have a cuppa and settle-in to read this edition, which I hope you'll enjoy.

PM's Piece



The diversity of persons who present to The Gender Centre with gender issues is immense. Our expanded mission statement is also to address the needs of the client group which includes partners, family, friends and associates. Remembering that individuals will have varying degrees of gender issues which impact upon their partners, family, friends and associates. The levels of distress/dissatisfaction will determine what options an individual may work towards. It will also impact upon partners, family, friends and associates.

This diversity includes multi-cultural issues. Common mainstream assumptions become exactly that, assumptions. Some people do not relate nor do they identify with terminology, processes or community aspirations. The Gender Centre is attempting to meet the needs of these particular groups.

BREASTS for SALE

⇒ A pair of Ella brand breast prosthesis, in excellent condition, are available for purchase.
⇒ Each breast, in its own box, is constructed from medical silicone and is covered by a strong, soft film to ad an extra life-like touch. Included are two bra-pouches to clothe and warm the breasts. Each posthesis is under 3 years old.

The style is "Round 3004 C Size 6"
Complete package cost \$400 new, will sell for \$250
Call The Gender Centre: 02 [redacted]



The Gender Centre

HIV Outreach Project

The Gender Centre HIV Outreach Service is available to visit you in places that are convenient for you. Whether you would like some supplies - condoms, lube, gloves, dams, fit packs etc. - or just someone to chat with, contact the outreach worker at The Gender Centre for an appointment on 02 [redacted].

The outreach workers are also at Forbes and William Streets every Thursday night from 9.30pm - 12.00am

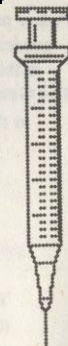
The Gender Centre Needle Exchange 75 Morgan St Petersham (02) [redacted]

10am - 5.30pm Monday to Friday

Or phone the Alcohol & Drug Information Service 24 hour advice, information & referral.

Sydney [redacted] Country (008) [redacted]

- | | |
|--|--|
| Syringes
1ml, 2.5ml, 5ml | Spoons
Water
Swabs |
| Needles
21g, 23g, 25g, 26g
Butterfly Clips | Fit Packs
Sharps Containers
Pill Filters |
| Dams
Condoms | Gloves (sml, med, lge)
Lube (tubes & sachets) |



A confidential free service for people with gender issues

HEALTHY HEARTS AND HORMONES

It's quite possible that M2F trans may have a lower risk of heart disease. The Cardiology Department and the Andrology Unit, of Royal Prince Alfred Hospital are conducting a research project which is investigating the effects that hormones have on blood vessels and would like volunteers who are M2F or F2M.

Would you like to volunteer? What is involved? A painless ultrasound of your arm and a blood test to check your cholesterol and hormone levels. If you are interested, have a spare hour and would like to help medical science give us a call on:

The Andrology Unit (02) [redacted]
Department of Cardiology (02) [redacted]
The Gender Centre (02) [redacted]

This procedure is carried out in a private and confidential manner.

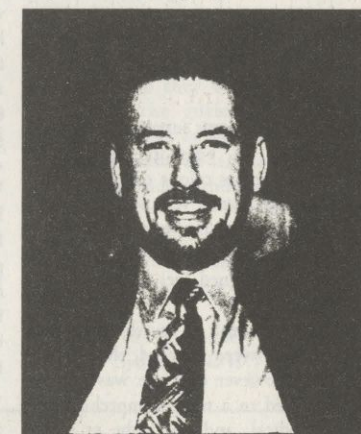
A RESEARCH PROJECT OF
THE ANDROLOGY UNIT AND
DEPARTMENT OF CARDIOLOGY,
ROYAL PRINCE ALFRED HOSPITAL &
THE UNIVERSITY OF SYDNEY

News Briefly

NEW EDITOR FOR FTM

American female to male network and newsletter, *FTM International*, has had a change in editorship. This success story of trans publishing, was originally headed by the late Lou Sullivan. Jamieson Green has both edited, administered and coordinated *FTM* for some years, and has now taken a deserved break from the concentrated effort the support network requires. The current issue of *FTM* [Issue 34, May 96], ushers in its new editor, Marcus de Maria Arana, whom we are sure will continue on the fine work of his predecessors. Marcus is also actively involved with the organisation, Community United Against Violence, based in San Francisco. The agency is akin to Sydney's Anti Violence Project.

James Green, outgoing *FTM* editor



TRANYS IN HEART STUDY

25 trans will take part in a study at Sydney University to assess the effects of female and male sex hormones on the onset of heart disease. The study, funded by the National Heart Foundation, will attempt to determine whether

oestrogen protects against heart disease and whether testosterone advances it. Men have been shown to be at the highest risk of heart disease, as are post-menopausal women. This has led some researchers to believe oestrogen acts as a preventative agent.

Source: *Capital Q* Issue 192

WA PROTECTION BILL FOR TRANYS

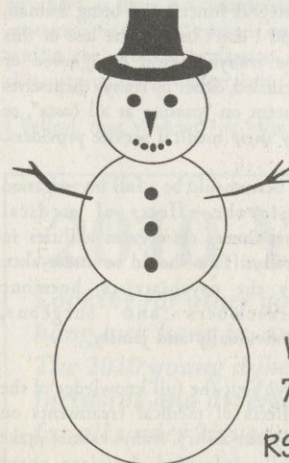
The WA Government announced anti-discrimination legislation to protect people who have had gender reassignment. State Attorney-General Peter Foss said the Gender Reassignment Bill would be introduced later this year. It will establish a Gender Reassignment Board with the authority to alter birth certificates and other register listings.

CRIME VICTIM DISCRIMINATION

New York - A gay and lesbian group has charged that racism and homophobia are behind the denial of burial reimbursement for an African-American transsexual and sex worker who was killed during a robbery in Harlem last year. A request from Moses Preston Waller's grandmother for reimbursement of burial expenses was denied by the New York State Crime Victims Board which said Waller's behaviour "contributed to the infliction of his injury". The board did reimburse, however, the families of the female sex workers murdered by serial killer Joal Rifkin. Source: *Capital Q* 14/6

July WINTER SOLSTICE 25th BARBEQUE

Legal People Don't Bite



Several legal people will be present to answer your legal queries regarding the transgender experience.

Time: 6.00pm
Venue: The Gender Centre
75 Morgan St, Petersham

RSVP: Craig (02) [redacted]

Whilst all letters received by Postscript are appreciated, letters that are considered by the editor to be either defamatory or libellous will not be printed.

Setting the Record Straight

Dear Editor,

I was interested to see the TLC article in *Polare* issue 11. I find that there are two points that I would dispute however.

The impression was given that the TLC is/was the only group instrumental in getting these reforms on the agenda of legislative bodies. I know that this is untrue. In addition to the TLC, the Gender Councils [in WA, SA and Qld] have been lobbying for change in these areas as well.

At the Standing Committee of Attorney Generals [SCOAG] meeting last year, the decision was made to place our issues on the agendas of each State's legislative body. While this is an achievement, it is NOT a victory!

This is "Square one", and any legislation still has to go through the normal process of development and review within parliament before passing through the relevant houses. Such legislations could be changed beyond recognition, or defeated. Claiming victory is just jumping the gun.

Nothing would give me greater pleasure to know that I was protected by anti-discrimination legislation, and that at some point in my transition, I was legally recognised as a woman. But lets be realistic and wait until these changes are passed and made into law, before celebrating too much.

NSW is not the only State intending such legislation. [Laura has enclosed a newspaper clipping regarding impending legislation in WA]. The earliest that these will be passed is a year away, but it is

still reassuring to know that protection and recognition is on the way, assuming all goes well.

In any case, this might all be academic for me. My trip to Sydney [as mentioned in my article in issue 11] paid off. As a result, I have a renewed vision as to where I'm going in my life. I'm leaving my public service job, moving to Newcastle [not Sydney, attractive as it is] and studying a Double Major in Visual Arts at University.

I wouldn't have been able to do this without first leaving Perth and all that I knew there. It wasn't easy, but at the moment, it certainly seems worth it.

Laura Anne Seabrook Dunning
ex-spokesperson & coordinator of the Gender Council [WA].

A Pleasant Surprise

To the editor,

It was a pleasant surprise to receive the no 12 edition of *Polare* magazine, its colour cover in neat blue was attractive, and what was more, it was also very informative on subjects of interest to the people it was designed for.

I do not mean to say the previous editions were no good, they were fine, however this one was a step forward to a more comprehensive periodical, and no doubt as such appreciated by all of us.

For instance, the article on page 23 by Ruth [redacted] dealing with "Problems in transition" was of a good analytical nature, and worthy of being read by all considering surgery.

Further, I can not help but comment on the pretty picture on

page 27 of Wendy Gilbert Grey in her ad of her electrolysis business, but I hasten to say, she is not just a pretty face, she is truly a professional and caring worker, and I can fully recommend her services from personal experience.

All in all, keep up the good work *Polare*!

Araluen [redacted]
[Sydney, NSW]

Response to Surgery Information Session

Dear Jasper,

I was at the information session with Dr Haertsch at the Gender Centre in May. I was certainly impressed with his frankness and admissions about the shortcomings of surgery. Of course, many people would have been disappointed by his lack of knowledge of F2M techniques, after the session was advertised as being for tranny guys too, but I guess there was some glitch in communications here.

What disturbed me most was the lack of knowledge about orgasm functions. It seems that the medical profession is satisfied if M2F trans can function as partners for men to fuck, but there is little or no consideration for the sexual satisfaction of trans themselves.

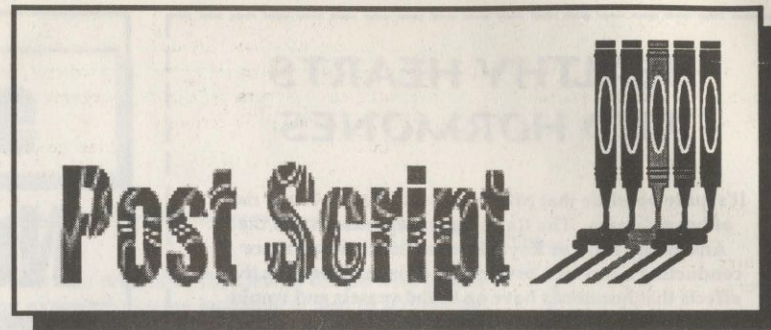
When I asked Haertsch about follow-up on the ability of post-op trans to have orgasms, he replied that most women don't have them anyway, and therefore it is to be expected that surgically created women will fare even worse. This raises a couple of points for me. As far as I am aware, the reason many women don't experience orgasm is not physiological, but rather psychological or circumstantial. It

may be that as a result of their conditioning, they don't expect sexual pleasure ["Only bad girls like sex"], or they simply have partners unwilling or uninformed as to how to help them orgasm. My other point is that there is still no rational explanation for why M2F surgery should diminish orgasm ability, given Haertsch's claim that he saves the somatic nerves and doesn't affect any of the autonomic nerves. Perhaps there is some other nerve function affected, or it may be some peripheral effect of surgery, psychological adjustment, or even just a "side effect" of hormones. There was also raised the question of what happens when pre-op M2F trans on hormones orgasm. Haertsch was unaware of the phenomena of non-ejaculation orgasm experienced by many on hormones. I am unaware of the mechanics of exactly why this happens, and I guess that therefore neither of us know how this mechanism would be affected by surgery and therefore affect post-op tranny orgasm.

In the often sex-phobic society, many people may believe that orgasm is just a bonus. I believe it is an integral function of being human, and I don't believe the loss of this for trans should be ignored or belittled, either by trans themselves intent on "passing at all costs", or by their medical service providers.

There should be a full investigation into the effects of medical treatments on orgasm abilities in trans. This should be undertaken by the psychiatrists, hormone prescribers and surgeons, individually and jointly.

Without the full knowledge of the effects of medical treatments on orgasm ability, trans cannot make fully informed decisions about



hormones, surgery or other medical options.

Norrie May-Welby.
Sydney, NSW

* * * * *

I would like to thank first and foremost the staff at the Gender Centre for organising an open forum with Doctor Peter Haertsch on the evening of Wednesday May 15, 1996. I also offer my appreciation on behalf of all who attended the forum to Dr Haertsch, who had allocated some of his time to attend, for the first time, at the Gender Centre.

I attended the forum with an open mind on the topics that would be discussed, I was rather surprised to say the least, Peter came across as a person who was very open and indeed as a person with extensive experience and knowledge, as well as a number of successful results, in neo-vagina reconstructive [sexual reassignment] surgery.

Peter opened the night by introducing himself in depth, starting the night with his personal life and then with a brief outlay of his medical career, then continuing into the depth of his experiences around the world with other professionals with regards to sexual reassignment surgery. I was quite surprised to learn that this man has devoted much of his time to this field, especially considering that most other medical people can't understand why he continues with this type of work. I can only say that he is a strong man to take the flack that is served out by others, as there is a considerable opposition, on "moral" grounds even within the medical profession to this surgery being undertaken.

I believe that without the efforts

of Peter and other surgeons around the world, we who have decided to undergo sexual reassignment surgery for our own personal needs would be in turmoil and certainly living in limbo.

I personally believe that Peter assisted us with very valuable information, information direct from one of the surgeons who has current experience in the field. I have heard about the procedure prior to meeting Peter however it was a little vague. I have known others who have been satisfied with Peter's surgery and others who are not.

What do we really expect from surgery, how do we really know if it will be up to our expectations? I personally know that I will proceed with surgery and I know there are many transsexuals who won't for many reasons.

I do not judge other people's intentions nor do I wish to cause political upset with organisations currently around. My personal view is that of my own, and I don't and won't speak for other transsexuals. I understand that unfortunately, a little trouble had erupted outside the Gender Centre, the venue for the forum, and the services of a security guard were engaged by management of the Centre.

I do not wish to comment on what happened because I don't understand the behaviour of those individuals responsible, nor do I wish to know their reasons for it, I only know that we all have our own opinions and that's all I have to say on the matter.

I found that Peter is a talented and experienced professional in his field who has devoted most of his time in neo-vagina reconstruction

surgery in ways on performing and attending places around the world to observe and learn from other surgeons which can only benefit us.

I feel deeply for the female-to-male transsexuals [FTMs] who found this information of not much importance, however, I hope FTMs will be able to meet their needs with a surgeon, hopefully in Australia. I can honestly feel for these guys, I know if my surgery was not available I would be very emotional and unstable to say the least. I hope FTMs find a solution in the not too distant future.

I would like to see another night organised with Peter Haertsch and possibly with the endocrinologists who treat transsexuals as well as the three psychiatrists and local doctors. To have an informative event with opinions from all sides in gender identity and surgery, maybe some more questions can be answered by the relevant parties present. I suppose that we may even suggest to see a video of the surgery and slides as well as a step by step view of the procedure that Doctor Haertsch performs, as well as hormonal levels, medication and side effects by the endocrinologists, and a point of view by the psychiatrist in recommendation of clients to the surgeon as well as post operative counselling if the need arises. Our doctors could also be aware of the services available to those transgender persons who they refer as well as asking the guests questions that may arise, as well as having pre and post op transsexuals present to understand the options available.

I hope that something may be organised in the near future.

Ms Alexander.
Sydney [NSW]

STAFF IT

Staff It is a personnel agency recently established to provide Personnel and Support Services to the Gay and Lesbian business community. At their office in Pyrmont [Sydney], the organisation has established a data base of a wide range of Gay and Lesbian employees seeking both casual and permanent work in compatible locations.

Staff It has 15 years experience in Personnel and Contract Management, and are committed to providing professional services to the Gay and Lesbian Community. Importantly, Staff It are also tranny friendly and welcome enquiries from the Transgender community.

For more information, contact

Gemma Kelly
(02) [redacted]

Editor: Polare does not publish letters or articles whose purpose is to publicly air conflict between individuals or organisations, community or otherwise. However, healthy debate, without resorting to personal attack, is welcome and encouraged.

2010 YOUNG DYKES GROUP

Looking for other young lesbians to hang out, hang in, and socialise?
The 2010 young dykes group is an inclusive and diverse social group for all under 26 year olds ...



We meet every first and third Saturday,
12pm - 2pm of each month at:
Newtown Neighbourhood Centre
Cnr Bedford and King St Newtown
For more info ring ORA on (02) [redacted]

This is a brief overview, with accompanying extracts, of the Transgender Bill 1996, as in its first print, and as received by the NSW Attorney Generals Department. It is by no means complete, nor is it intended to be a legal or professional analysis of the document. The Transgender Bill 1996, was recently passed in parliament and remains to be gazetted.

Main Purpose: To amend the Anti-Discrimination Act 1977 to provide a separate ground of discrimination on the basis of gender orientation and to introduce legislation to provide for the legal recognition of post operative transgender persons.

Background: The proposed amendments to the NSW Anti-Discrimination Act will provide for a separate ground of discrimination on the basis of gender orientation in relation to the following areas:

- ◆ employment
- ◆ education
- ◆ provision of goods and services
- ◆ access to places and vehicles
- ◆ accommodation; and
- ◆ registered clubs

Exceptions from the operation of the proposed amendment will apply in relation to the following areas:

- ◆ employment in a private educational authority
- ◆ employment in a private household
- ◆ attendance at a private educational authority
- ◆ accommodation in a private household, or where no more than 6 people reside
- ◆ insurance and superannuation; and sport

The proposals in relation to legal recognition will allow the Principal Registrar of Births, Deaths and Marriages to issue a new birth certificate to a person upon presentation of a medical certificate from a registered practitioner stating that the person has undergone sexual reassignment surgery.

Such certificates will only be issued where the birth of the person to whom the application relates is registered in NSW and where they are not married.

The proposal will also provide that sporting bodies are exempt from compliance with the anti-discrimination provisions where a person who has a new birth certificate stating their reassigned sex, cannot satisfy national or international sports biological testing requirements, and will provide for an offence of transgender vilification.

The First print of the Transgender [Anti-Discrimination and Other Acts Amendment] Bill 1996, lists its objects to include the amendment of "the *Crimes Act 1900* to recognise that sexual assault offences may be perpetrated against persons who have undergone sexual reassignment." It also aims to "amend the *Wills, Probate and Administration Act 1898* to provide that a beneficiary under a will is not [unless the will expressly provides otherwise] disinherited merely

because the beneficiary is a transgender person."

It is interesting to note that the amendment of the *Crimes Act 1900*, under Schedule 3, amends sections 61H and 80A of the Act to "add to certain definitions relating to sexual assault offences, specific references to surgically constructed vaginas so as to recognise that sexual assault offences may be perpetrated against persons who have undergone sexual reassignment surgery."

The following extracts are from the Transgender Bill 1996, and do not represent the Bill in its entirety. What is published here is text which is deemed useful knowledge for the average transgendered person.

Schedule 2 Amendment of Births, Deaths and Marriages

Part 5A Change of Sex

Proposed section 32B enables an unmarried adult who has undergone sexual reassignment surgery and whose birth is registered in New South Wales to apply for the alteration of the record of the person's sex in the registration of the person's birth. A similar application may be made by the parents or guardian of an unmarried child who satisfies the same requirements.

Proposed section 32C requires such an application to be accompanied by medical verification of the sexual reassignment surgery

The Bill under section 32A defines sexual reassignment surgery as being "a surgical procedure involving the alteration of a person's reproductive organs carried out: (a) for the purpose of assisting a person to be considered to be a member of the opposite sex, or (b) to correct or eliminate ambiguities relating to the sex of the person." It has not yet been clarified what constitutes "a surgical procedure", particularly in relation to those transys who do not consider surgical intervention an option.

32C Application must be accompanied by a declaration by doctors

An application under section 32B must be accompanied by:

- (a) statutory declarations by 2 doctors, or by 2 medical practitioners registered under the law of any other State, verifying that the person the subject of the application has undergone sexual reassignment surgery, and
- (b) such other documents and information as may be prescribed by the regulations.

Interestingly, part (3) of **32D Alteration of register**, states that "an alteration of the record of a person's sex must not be made if the person is married." Perhaps the parliament recognised the potential legal precedent in allowing couples to remain married once a partner had changed gender in the eyes of the law, thus effectively condoning homosexual marriage. Of course, unable to make this quantum leap, and one assumes, not wishing to be challenged by the Gay and Lesbian Community, the Act requires that transys must first divorce before legally altering their birth certificate, losing all privileges of their married state. The question remains that, if having altered their birth certificates, can transys legally marry as their preferred gender?

As an act of privacy, the Bill states under **32E Issuing of new birth certificate**, that the newly issued certificate "must not include a statement that the person has changed sex."

However, under the same schedule, **32G Use of new birth certificate**, "makes it an offence for a person to produce, for the purposes of the law under another jurisdiction, a new birth certificate issued for a transgender person unless the law of that jurisdiction expressly allows the new certificate to be produced or the person, in producing the new certificate, informs the person to whom it is produced of the transgender person's change of sex."

Transgender Vilification

The following is the definition of Transgender Vilification, under **Division 5, 38R**:

Public act includes:

- (a) any form of communication to the public, including speaking, writing, printing, displaying notices, broadcasting, telecasting,

screening and playing of tapes or other recorded material, or

(b) any conduct [not being a form of communication referred to in paragraph (a)] observable by the public, including actions and gestures and the wearing or display of clothing, signs, flags, emblems and insignia, or

(c) the distribution or dissemination of any matter to the public with knowledge that the matter promotes or expresses hatred towards, serious contempt of, or severe ridicule of

(i) a person on the ground that the person is a transgender person, or

(ii) a group of persons on the ground that the members of the group are transgender persons.



38S Transgender vilification unlawful, clarifies that "It is unlawful for a person, by a public act, to incite hatred towards, serious contempt for, or severe ridicule" of transgendered persons.

More detail is given under **38T Offence of serious transgender vilification** where it is unlawful to publicly incite hatred towards etc. a transy by means which include:

(a) threatening physical harm towards, or towards any property of, the person or group of persons, or

(b) inciting others to threaten physical harm towards, or towards any property of, the person or of persons.

The maximum penalty for the above is, in the case of individuals, 10 penalty units or 6 month imprisonment or both, and in the case of a corporation, 100 penalty units. It is noted that a

"person is not to be prosecuted for an offence under this section unless the Attorney General has consented to the prosecution."

Division 5 Transgender vilification, however, does not apply to a "fair report of a public act, material that has protection of absolute privilege under the *Defamation Act 1974* or a public act done reasonably in good faith in the public interest." 'In good faith' is defined as being for "academic, artistic, scientific, research or religious discussion ...".

What actually constitutes discrimination against transys is defined under **Division 1 General, 38B**. This section basically states that it is discriminatory to treat a transy differently to a non-transgendered person, or to expect a transy to comply with a requirement or condition that doesn't take into account the transy's circumstances, or to treat a transy as if they were still of their former gender.

Discrimination in work

Under **Division 2 Discrimination in work**, the proposed section **38C** makes it unlawful "for an employer to discriminate against an employee or an applicant for employment on transgender grounds". This section, however, doesn't apply to employment within private households, a private educational authority, or where the number of persons employed does not exceed 5. Why the latter is exempt is not made clear.

Seven more sub-sections of **Division 2** outline other areas of unlawful employment discrimination including; local government councillors, firms of 6 or more partners, commission agents, industrial organisations, authorities which confer occupational qualifications, and employment agencies.

Other areas of the Bill

38L refers to **Access to places and vehicles**, under which it is unlawful to refuse to allow a transy "the use of any facilities in any such place or vehicle that the public or section of the public is entitled to use, for payment or not", or to require a transy to "leave or cease the use of any such place or vehicle or any such facilities." Finally, it would appear as though transgendered people may access toilet and

continued page 26

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362 [REDACTED]

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45 George Street
Paddington NSW 2021

INTUITION

by Linda Darling

What is intuition? It is often only experienced in flashes. These can be a realisation, perhaps while looking at a painting, a cloud form or into the heart of a fire. It can also come through a dream, a fantasy, boring everyday activity when the mind's attention begins to wander. It may come in the form of a sudden insight into a person or situation, in a solution to a problem, an inspiration from a poem or a mystical experience.

In a situation which seemed complex, a simple "truth" emerges. Something that was not explained verbally is understood. Clear, immediate information, uncoloured by emotion, often with no obvious means to arrive at this knowing. When considered rationally this information may initially appear illogical or absurd. It is a connection with the unconscious. A kind of knowing.

When a hostile world around us downplays creativity, imagination, fantasy and the possibility of being different to the "faith" it embodies, how then can we create ourselves?

The connection of apparently unconnected phenomena and the knowing they give rise to, have no place or value in the linear rational world. Daydreaming, flashes of "understanding", creativity are seen as distractions, not real. They are seen just as obstacles in the way of earning a living and family life.

I believe a feeling experienced by many transys I've met is one of helplessness, powerlessness, a state of waiting to be told what to do. Not to; be, not to be, hear, read, show, hide, pretend, enjoy, think and feel. We respond to what is expected. Deep down however there is a sense of anger and frustration. This is one way of being cancelled; the potential other - stillborn.

There is a feeling of unreality that comes from floating free of the familiar. Who are we anyway? No one encourages us to find out. The underlying message from society is "remain locked in our definitions of reality, you don't have the power to change". To know what we need for ourselves, to become who we truly are, to find a place in the world, the power to live our own lives, seems denied to us.

Intuition is a key to who we are; what we need, how to integrate the rational. For intuition to flourish, there needs to be an atmosphere where meditation, contemplation or spending quiet moments alone can take place. There is a need to encourage non-verbal [poetry excepted] forms of expression. Expression such as music, dance, arts and crafts - opportunities for imagination and visualisation. We need to develop awareness of our mental control and our physical and emotional tensions, find the best ways for us of relaxing there. We need to learn to listen, to tune in to our own inner voice, to allow ourselves to experience deeper levels of being, to follow our own course, to recognise and then to trust intuition.

Without intuition I believe we live a "half-life", unable to relate harmoniously to ourselves, others or the earth. I can't conceive a true and successful therapist who has not developed and uses intuition. I can't think of a better space to begin this process than in a Transy Community / Cultural / Healing Centre, where individuals could move from "health" to healing, from dependency to autonomy.

HAVE YOU BEEN IN JAIL?

I am researching HIV/AIDS risks in jails, and how going to prison affects people's behaviour and relationships.

I am very interested in talking to transys who have been in jail about their experience, and getting behind the stereotypes.

We can talk over the phone or in person.

If you would like to take part in the research, or if you would like more information, phone:

Jan
(02) [REDACTED]

This research is being conducted at
the National Centre in
HIV Social Research,
Macquarie University

KRC

KIRKETON ROAD CENTRE

100 Darlinghurst Rd
(entrance on Victoria St above
Kings Cross fire station)
PO Box 22
Kings Cross NSW 2011

Tel:(02) [REDACTED]

Fax:(02) [REDACTED]

CLINIC HOURS:
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Monday - Friday

2pm-6pm
Saturday - Sunday

OUTREACH BUS:
-every night-

Green Park, 8pm-10pm
Premier Lane, 10pm-11pm
Bourke St, 11pm-11.45pm

Indigenous OR WHAT

For people of colour and
indigenous peoples.

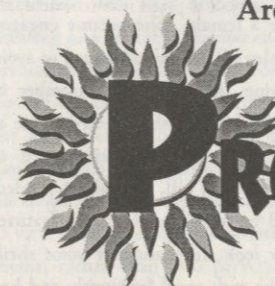
Are you black, brown or
shades of tan??
Queer, Lesbian, Trany,
Gay, Bi?

We're a mob who get
together and socialise,
talk,
politicise and have fun!!

If you have the above
BENT inclinations ring:
ORA or SOFI on (02) [REDACTED]

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MONTH

Are you interested in contributing to the Transgender Sex Worker page in
Working Girl / Worker Boy magazine, produced by the Prostitutes
Collective of Victoria (PCV) for sexworkers.



Vent your spleen!
Wax Lyrical!
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- Articles
- Poems
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- Advice
- Songs



If you are, please contact Jason
on (03) [REDACTED] 1046 between 11.00am & 6.00pm, Monday to Friday for more information.



and
**"Sex Changers"
 of Late
 Modern Times**
 by Roberta Perkins

Throughout the 19th and 20th centuries gender crossing became better known and more prominent in western society. To Victorian society it was an embarrassment, but to the post "sexual revolution" generation it has become increasingly fascinating and even something to symbolically emulate. Then in the last half of the present century came the medical phenomenon commonly called the "sex change".

Famous Trannies in the 19th Century

Perhaps the best known 19th century trannie is Dr. James Barry, who was born a female in 1795. Much of James' early life remains a mystery; so skilful did he disguise his biological sex that we don't even know what his given female name was. The earliest record of any certainty that we have of him was his graduation from the Edinburgh Medical College in 1812, at a time when women were forbidden in the medical profession. A year later he joined the British army as a medical officer. After a few years in the home guard, James was promoted to staff-surgeon in 1819 and sent to the Cape of Good Hope as medical advisor to the Governor. A few more years later he was serving on St. Helena and Malta, and was elevated to Surgeon-Major in 1827. After that his rise was meteoric in the army medical corps, and he served in the West Indies as chief medical officer. James was prickly in temperament and quick to lose his temper. People said of him that he was guarded and secretive. His slight frame, small limbs, short height and smooth face aroused the suspicion of some of his colleagues, arousing the curiosity of outsiders, one of whom remarked that "he was thin in build and in stature

resembled a woman, with small limbs in good proportion. His voice was shrill and squeaky and quite unlike the voice of a man. The impression left after speaking with him was that he laboured under some sexual malformation." Whatever people thought of him, there is no doubt that he was admired for his medical skills. In 1851 he became Deputy Inspector-General and in this capacity served in the Crimean War in charge of the medical corps. It is interesting to speculate on the type of professional relationship Dr Barry and Florence Nightingale, as his nurse in charge, might have had throughout the war. After the war James reached the top in his profession by becoming the Inspector-General of Hospitals in 1858. He spent his remaining years in London, and died at home in 1865. A post-mortem revealed that James Barry was indeed of the female sex, the first time this was publicly confirmed.

Whilst a cloud of doubt surrounded James Barry's sex for much of his life, there were many other females who lived their lives as men without the slightest suspicion in most people's minds, including Charley Wilson, alias Catherine Coombes, a painter and decorator by trade for 42 years, John Coulter, who amazingly was married to a woman for 29 years without

her being aware he was a female, Charles Durkee Pankhurst, a stagecoach driver in the American west, and "Mountain" Charley, a Rocky Mountain trapper of many years. The tradition of females entering the military as men continued into the 19th century. Nadezha Durova was a peasant girl who married and had a son before running away dressed as a boy to join the Russian Army in 1805. As Aleksandr Aleksandrov he saw action in 1807 and took a part in the campaign against Napoleon in 1812. He left the army four years later and in 1836 began working on his manuscript with writer Aleksandr Pushkin, who persuaded him to revert to a female sex role, in which state she remained until her death in 1866. Another female-soldier was Loreta Janet Velazquez, who joined the Confederate Army during the American Civil War disguised as a man purportedly to find her husband. In the process Loreta ended up in a number of battles and was wounded twice.

Jenny de Savalette de Lange lived as a woman most of her life and even had a birth certificate designating her a female. She became engaged to marry a cavalry officer, but managed to avoid actually marrying, and she had a number of other suitors, all of whom she rejected. One of her discarded lovers had some unkind words to say of her: "[She was] tall, thin and lop-sided, and she leaned on an umbrella. Her features were hard; her look stern and her voice shrill and cracked...She took snuff frequently and had such a masculine appearance that people who passed in the street used to say how much she resembles a man." But Jenny obviously had some influence in high places because Napoleon granted her a pension in 1812 and even rooms in the palace of Versailles. Although this pension

ceased with the fall of the Empire in 1822 she was paid the salary of a postmistress, even though she never actually took up a position in the mail service. Her pension and the Versailles chambers were returned to her in 1825, but in 1853 she lost her rooms at Versailles when the palace was turned into a museum. Five years later Jenny died in a little apartment in Paris, and upon examination her body was found to be that of a male, but no-one knew her original name nor identity.

Sexology and Trannies in the Early 20th Century

Around the turn of the century the new science of psychology introduced some new concepts on gender crossing and cross dressing. But the first attempts at scientifically investigating sexual variations were made by a German physician, Carl Westphal, who wrote the earliest scientific publication on cross dressing in 1869. Richard von Krafft-Ebing is the foremost sexologist whose milestone book *Psychopathia Sexualis*, published in 1887, established the concept of sexual perversion, which included everything apart from heterosexual activity for the purpose of procreation. Sigmund Freud did not investigate cross dressing as a subject of psychoanalysis, although he considered it a form of fetishism and an outcome of penis envy in females or castration anxiety in males. Iwan Bloch demonstrated the universality of cross dressing. But it was Magnus Hirschfeld who first described cross dressing as a different phenomenon to homosexuality and fetishism. Some say his own homosexual orientation gave him an insight into the area referred to as sexual deviancy in his day than any other contemporary scientist. In his major work on the subject in 1910 he tried to view cross dressing as a variation on a sexual theme, rather than as a perversion, and in 17 cases closely examined by him 12 were heterosexual, two bisexual, two autosexual and one homosexual. Hirschfeld called the phenomenon *transvestism* [literally: cross-dressing]. Another prominent sexologist of the early 20th century is Havelock Ellis, who preferred the term *conism* [after the Chevalier

d'Eon] to describe cross dressing. But, more importantly was his recognition that more extreme forms of cross dressing, that is where someone actually wants to be of the opposite sex and is not just satisfied with donning the clothes of the opposite sex, may be a separate phenomenon.

With or without scientific terminology to describe their behaviour females and males continued the long tradition of gender crossing in western society into the 20th century. Female soldiers passing as men fought alongside their male comrades in World War I and were occasionally discovered, such as Maria Bochkareva, who fought as a man in the Russian Army in the war and was allowed to continue in the trenches even after she was found to be a female. Later she would lead the Petrograd Women's Battalion of Death in the Russian Revolution in 1917 in support of the White Russians against the Bolsheviks. Of all the female-to-male trannies in the pre-"sex change" period Billy Tipton, who became a prominent jazz musician with his own trio in the 1930s and was married with two adopted sons who called him "father", is probably the most successful. None of his close musical

In the last half of the present century
 came the medical phenomenon
 commonly called the "sex change".

colleagues suspected his biological sex, and anyone who suggested he was effeminate looking was challenged by Tipton to fisticuffs.

There were some very successful male-to-female trannies in the pre-"sex change" era too, like Adele Best, who lived as a woman for 54 years without detection, which included three husbands who were none the wiser either. Georgia Black also married, and was widowed twice, and had an adopted son who knew her only as his mother. One of Iwan Bloch's cases, Frederica, provides a clue to how these trannies might have kept their biological sex a secret from their husbands;

she managed to have many lovers who never doubted she was a woman by using her anus as a vagina. In 1923 a pretty young woman was detained by Chicago police as a murder suspect after she was identified at the scene of the crime. But as she sat in her cell in her nightgown and kimono the police noticed the young woman sprouting a stubble beneath her make-up. The woman turned out to be a noted gangster who frequently dressed as a woman. In court she appeared in make-up, satin slacks and silken top, but managed to achieve an acquittal because the witness who positively identified her said her eyes were blue, whereas, in fact, they were grey. Another example of trannie variance was the tragic case of a Parisian public servant found hanged in his room attired in lingerie, hosiery and make-up in 1926. On investigation police found that this quiet unassuming little man was none other than the notorious Madame Cartier, who frequented the night life of Montmartre and was well known for dancing and dining the evening away and, like Cinderella, disappearing into the night at midnight. Next morning the little public servant would make his way back to his office in the morning, that is, until that fateful morning of his suicide.

The authorities wrote the case off as just one more deranged homosexual killing himself out of shame.

Came the "Sex Change"

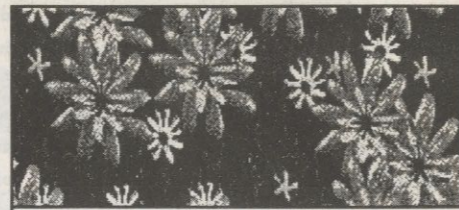
For many trannies in the past their greatest desire was to change their genitals to the shape of their desired sex. That desire would become reality for thousands following the so-called sex reassignment surgery of the mid 20th century, during what I have referred to as the "sex change" period. But this period began at the end of more than half a century of experimenting. Perhaps the earliest attempt at reconstructing genitals to shape them like the opposite sex took place in 1882 when a German woman Sophia Hedwig's genitalia was operated on to try and give them a semblance of a male's. Although it was not very successful, Sophia's sex was changed officially and she became Herman Karl for the rest of his life. In 1917 another woman, Alberta

Hart, herself a physician, underwent a hysterectomy and thereafter lived as a man known as Alan. The next most important case occurred in 1931 when Margrith Businger was granted the full status of female by a Swiss Canton court following a castration operation. Two years later Danish artist Einar Wagener underwent an operation in Berlin by surgeon Franz Abraham, who removed both his testes and penis, and he became Lili Elbe when given the official status of female in Denmark. Poor Lili died only six months later while waiting for vaginoplasty [a constructed vagina]. During the war a repulsive experiment was carried out by a Nazi surgeon who reshaped the genitals of a male Jew prisoner who had no intention of changing his gender. About the same time Arnold-Leon Leber was castrated in Switzerland, but an attempt at vaginoplasty was unsuccessful. Nevertheless, he was legally proclaimed a female by a Swiss court and she took the name of Arlette-Irene. By this time the issue of "sex change" was becoming much discussed in the medical journals and one writer Dr. David Cauldwell coined the term by which people came to know those who sought "sex change" surgery when he spoke about "psychopathia trans-sexualis" in a 1949 edition of *Sexology*.

In the same year of Cauldwell's article a female called Laura Dillon completed the first "sex change" that involved a reconstructed phallus. She had undergone a mastectomy and a phalloplasty, but not a hysterectomy nor oophorectomy [removal of the ovaries]. Laura became Michael, entered medical college and served as a ship's doctor before disappearing into oblivion as a Buddhist monk in India, where he eventually died. In 1951 an ex-RAF pilot during the war and more recently a racing car driver, Robert Cowell, was operated on but was not given a vaginoplasty. Nevertheless he changed his identity and became known as Roberta for the rest of her life. The most celebrated "sex change" was that of Christine Jorgensen, a one-time US soldier called George, who was operated on by the Danish surgeon Christian Hamburger in 1953. Jorgensen had an orchidectomy [removal of testes] and penectomy [removal of penis], but a reconstructed vagina was not completed. However, she was the first trans woman to undergo extensive oestrogen therapy, and her case became the model on which all subsequent "sex change" treatments were based. Following the immense publicity of the Jorgensen case, Dr Hamburger received 465 written requests for surgery from women and men all over the world. For the first time society was beginning to grasp the extent of the transgender phenomenon. The focus moved from Europe's experimental surgery to the

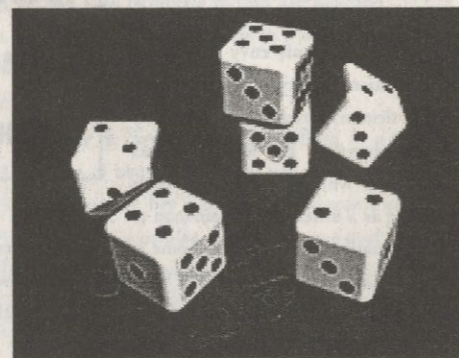
United States and "sex change" as an acceptable practice in medicine. Endocrinologist Harry Benjamin took it up as a major cause with his well-known statement of "if the mind cannot be changed to suit the body, then let the body be changed to suit the mind." He was granted funds by the Erikson Educational Foundation to pursue research into transsexualism further and eventually established the guidelines upon which modern-day "sex changes" take place. The first operation in the USA was carried out on a female-to-male, who had a mastectomy and oophorectomy in 1960, but the first fully successful conversion took place with a negro male-to-female trans woman in 1965. Since then medical institutions in many parts of the world have carried out "sex change" operations as a normal part of their medical and health services. And, as they say, the rest is now history!

"The woman turned out to be a noted gangster who frequently dressed as a woman."



Many poems have been wrote, by
people near and far
But when I write my poems they're the
rarest ones that are
I write about the bushlands, our deserts
and our seas
I write about our rivers, the animals and
trees
I write about the cliffs and rocks, the
misty mountains tall
I write about the teaming rain and
thunderous waterfall
I write about the riverbank, so peaceful
and so quiet
I write about the moon and stars on the
beach at night

written by Kimmie



Don't dice with
your life
play it safe
always

A Dancer's Quest for True Self

The government has displayed
unprecedented tolerance for his
high-profile transformation.

In a country where individual choice is still a privilege, China's leading dancer, Jin Xing, continually tests the limits. At age nine, Jin begged his parents, an army officer and an interpreter, for permission to join the Shenyang Military Song and Dance troupe in northeastern Liaoning province. When they refused, he went on a hunger strike; after two days they relented. Years of gruelling training took Jin to the top of China's ballet world and earned him a government scholarship to study in the U.S. - the only Chinese dancer ever to do so.

Despite his success, Jin always kept secret something he feared made him too different. "Even as a child I dreamed of becoming a girl", he says. Now 28, China's Nureyev has decided to undergo a sex-change operation that will make his wish come true.

Jin's latest choice challenges the sexual and cultural mores of conservative Chinese society. As an adolescent, he was attracted to men, but because homosexuality is taboo, he instead put all his energy into his art. His 1988-93 stay abroad was a turning point. While honing his dance craft, he also explored his sexuality. "After a year, I realise I didn't fit into the gay community", he says. "I discovered I (was attracted to) men who like women."

Jin first met transsexuals while teaching modern dance in Europe and recognised what he now says is the truth of his own sexual identity. By the time he returned to China in 1993, he had made up his mind to become a woman. When his first Beijing performances - profound, complex and imbued with homosexual themes

received a warm reception, Jin finally felt ready to tell his family about his decision. As the only male heir on his father's side of the family, he was shocked to find them so supportive - and so unsurprised.

Likewise, the government has displayed unprecedented tolerance for his high-profile transformation. Ministry of culture officials recently visited him in the hospital to discuss future performances. "They think I'm a crazy artist, but they respect my work," he says. "By the time they left, they were calling me Miss Jin." A state TV crew is even making a documentary. Jin hopes this publicity will help others grappling with uncertain sexual identities - Chinese hospitals have reportedly turned down most of the 30,000 requests for sex-change operations they received in the past six years. "As one person, I cannot change society," he muses. "But I want people to know that nothing in life needs to be immutable. There is always a 'maybe'."



Jin has undergone the first two stages of the procedure, breast implants and facial hair removal, and this week will have the final eight-hour operation. He admits to being nervous but says, "The more I am forced to convince others, the more I convince myself that I am doing the right thing."

Reported by Mia Turner, and reprinted from *Time* magazine, April 10, 1995.

Editor: Please note, the inappropriate references to Jin in the male gender throughout this article is of the writer's choice and does not reflect *The Gender Centre's* view.

The UFO

The lurid light filled the night sky
As the U.F.O. went speeding by
I wish I'd seen it all imposing
Instead I found it decomposing
What sorrow, what a fright
To only see its remains, its plight
Now the night stands still
I'm all alone, I shed a tear
Then head t'ward home.

Pearl of Wisdom

It is much better to applaud
what one has
Than to lament over the things
that one doesn't.

Articulations

I invite heartily anybody who needs to
use these to do so.

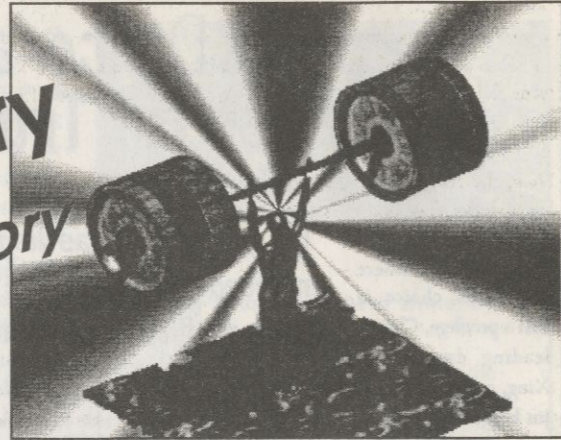
No.1: "If you have only ever loved me for what I've tried to be, rather than what I am, then your love, for me, has been as bogus as the facade that I showed you and as a result, you are not hurting me by withdrawing that."

No.2: "Do you have some secret obsession with the space between my legs? If not, why do you insist that I am any particular sex? Do you get some secret benefit from my having a penis? (transpose where necessary) Then why should I not change it to suit my needs and feelings, since it is me who wears it, and be more comfortable within myself?"

all poetry by
M.A. [redacted]

by David [REDACTED]

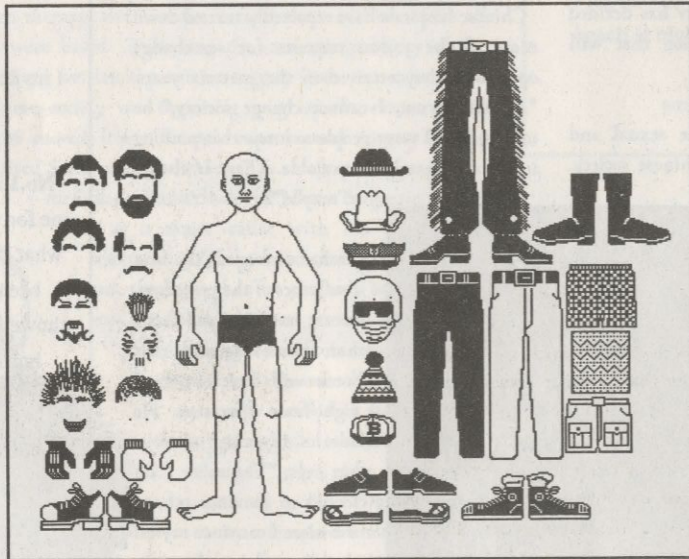
Lower Surgery an Success Story



Well guys, I just got back from Meltzer's. I had the urethroplasty done [I had the genitoplasty done 4 years ago]. And I'm happy to say, everything works just find. I have had no problems with fistulas [holes] or strictures [blockages]. I am now 8 weeks post-op, and my urologist [Dr Skoog] says everything looks great. Now, to answer some of the concerns:

First, how they do it. For the metiodioplasty, they first extend the enlarged clitoris and form a phallus. With the anterior wall of the vagina, they form the new urethra [they used to strip the lining at the base of the bladder and use this to lengthen the urethra, but it was too problematic]. So, for those guys who have no intentions of having the vagina closed up, you may have to consider alternate options. The new urethra is connected to the existing urethra and extends through the bottom portion of the penis and comes out just below the head of the penis. It is done this way because if it were to go directly through the head, then it would distend the head and make it unnatural looking. The major point of concern for me was the site of attachment of the existing and new urethra. It was highly possible that this site could have become swollen and become blocked. The secondary concern was fistulas. However, because they triple wrapped the urethra when they closed everything up, this was not as much of a concern as a stricture.

For the phalloplasty, fistulas are more prevalent, but they can be easily fixed. There are two distinct techniques for forming the new urethra when going this route which are very different than for the metiodioplasty. One route is to use abdominal skin that has had all the hair permanently removed through electrolysis. Another route is to use forearm skin.



My surgery was somewhat more complicated by the fact that I'd had the vaginectomy done 4 years ago [along with the free up]. Since I had very little vaginal tissue [they left 1" to do the urethroplasty in the future], they used the tissue from the inside of my mouth. With this, they were able to form the new urethra. This technique is commonly used for genetic children. Unbelievably, I was able to eat the

day after surgery, but I was taking very small bites. I was flat on my back for 6 days while the new urethra healed.

For the first night, I stayed at Oregon Health Sciences University. After that, I was moved by ambulance to Temporary Living Centre [TLC] where I stayed an additional 5 nights. I originally intended to stay at a friend's house during recovery, but my urologist was uncomfortable with the thought of my movement on my part for fear of damaging the new urethra. So, he and Dr. Meltzer settled for TLC. This place was great. It's a center set aside for those people who are too sick to be at home but too well to be in a hospital. It's a hospital-like environment with a 24-hour, on-duty nurse who took care of my medications. They fed me breakfast, lunch and dinner.

I had my own room with a cot so that my wife could stay with me. They knew my situation because of my records, but they

treated me no differently than anyone else. All this for \$100 per night [as opposed to OHSU's \$1000 per night].

I was catheterised through my penis for 3 weeks to allow the new urethra to heal. At the same time, I was urinating through a super pubic catheter [through my belly]. After the three weeks was up, they removed the catheter going

through my penis, leaving the super pubic in and blocked off. This was so that I could use my new urethra while having a backup just in case a stricture did form. Fortunately, I had no problems besides a little pain from the swelling. A week after using the new urethra, they removed the super pubic.

Now, the results: I have now been peeing freely from the new urethra for 6 weeks now. Some good news and some bad news.

First, the bad news: Some things I hadn't been expecting [I have no brothers nor have I been with any genetic males so I had no point of reference]. When I begin to urinate, I have no idea where the flow will go. It leaks a few drops after I've finished urinating. And lastly, because of my size [I am a little over 2" flaccid], a major concern of mine was being able to pull it out of my pants far enough so as not to hit my pants when it dripped. I had a long conversation with a genetic male friend of mine and found some very interesting things out.

The good news: The initial flow and leaking problems are the exact same for genetic males. That is why the urinals are always wet around the floors. When guys begin to pee, they have no idea where the flow is going to end up and have to redirect it after its begun. And then, when they have finished, they have to "spank it like a bad baby". A friend of mine read an article in a magazine regarding this issue. Apparently leaking becomes worse as men age. They suggested in this article for men to reach behind the scrotum after urinating and push up, essentially milking the last of the urine out. After hearing about this, I began to do it and viola, no more dripping problems. So, these 2 issues are identical with those of genetic males.

The last issue was the length problem. I was told by my genetic male friend that I was at the stage he was at when he was 3 years old. I needed to learn, as he did, how to hold things and to practice. I have found that by holding my pants tight against my body under my penis while urinating, my penis extends far enough out so I can pee without getting anywhere near my pants, even after I've finished and it's just dripping straight down. I have found that the tighter the pants, the better - there's less material in front to have to push back. As for the flow, it comes forward, very quickly and very easily. Because of its new direction and because my penis hardens when urinating, I have found that using a urinal is much easier than a toilet [some genetic male friends of mine have said the exact same thing]. To use a toilet, I have to redirect my penis down, whether I'm standing or sitting. I find that by using a urinal, I am able to leave my penis pointing straight out of my pants and the flow goes directly away from me, not going anywhere near my clothes and less chance that it will hit my shoes. Fortunately, I have been using a urinary device. I have gotten used to standing next to guys at the urinals and overcome some of my pee shyness. Not to mention I spend a helluva lot less time in the bathroom.

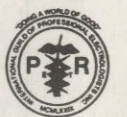
One last thing: As I stated, when doing the urethroplasty for the metoidioplasty, they use the vaginal wall. The tissue is still alive. They used the remaining 1" of mine to aid in the connection of the new urethra to the existing one. As a result, I have found that when I become aroused, secretions will actually come out of my penis through the new urethra. Some have equalled it to pre-cum and semen. Another "pleasant" side effect. *reprinted from FTM Issue 34 May 1996*

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EUROPEAN

"On December 14th a Press for Change [U.K. trans organisation] activist made legal history by taking her case for unfair dismissal all the way to the European Court of Justice . . . and achieving a judgment in her favour.

The judgment, ratified on the 30th April 1996, means that the European Community's Equal Treatment Directive applies throughout Europe, to all transsexual people. It affects, therefore, about 40-50,000 European citizens." - *Stephen Whittle*

The following is an outline of the successful activist's case [who is referred to as P.], extracted from Stephen Whittle's [Ph.D, M.A, LL.B, B.A] superb in-depth legal analysis of the precedent.

"In April 1991 P. was taken on as a manager at an educational establishment operated at the material time by Cornwall County Council, the competent administrative authority for the area. A year later, P. told the Principal and Chief Executive of that establishment [whom we shall call S.] that she intended to undergo a sex-change operation. At first S. appeared supportive and tolerant, and reassured her about her position within the establishment, but later his attitude changed. According to the national court's reconstruction of the facts, S.'s change in attitude was essentially due to the opposition of the board of governors, who at one time put forward the idea that P. should continue to work for the establishment as a self-employed contractor.

In the meantime, in summer 1992 P. underwent initial surgical treatment with a view to her gender reassignment, as a result of which she was absent from work on sick leave. It was during that period that S. and the governors took the decision to dismiss her, of which she was given three month's notice, expiring on 31 December 1992. At the same time P. was asked to complete by that date several specific tasks which she was preparing. When P. informed them that she would be returning to work dressed as a woman, they told her that she could complete the tasks assigned to her from home, so that it was not necessary for her to attend the establishment's premises. Finally, P.'s contract of employment terminated on the date fixed without her having returned to work.

P. underwent the final gender-reassignment operation on 23 December 1992, that is to say, before her dismissal took effect but after she was given notice on 15 September 1992 of the termination of her employment. On 13 March 1993 P. brought an action before the Truro Industrial Tribunal, claiming that she has suffered discrimination on grounds of sex. Both S., and the council claimed, on the contrary, that P. had been dismissed by reason of redundancy.

The Industrial Tribunal found that, whilst there was a case for redundancy, the true reason for the dismissal

PROGRESS

was the objection on the part of S. and the council to P.'s intention to undergo a gender-reassignment operation."

The following extracts are from Stephen Whittle's Article "Transsexuals Finally Make Legal Headway", printed in Gemsnews Issue 23

"... the Industrial Tribunal found that English law provides no protection to transsexuals, it long being the case that under the Sex Discrimination Act, all that an employer needed to show was that they would have treated a transsexual of either [naturally recorded] sex in the same manner. However the Attorney General has approached the question differently. He asked not whether P would have been dismissed if she had in fact been a female to male transsexual, but rather would she have been dismissed if she had remained a man. Holding that she would not have been, therefore he could see no reason for not upholding a claim that there had been discrimination by reason of sex.

He held that, for the purposes of this case, and the European Directive, sex is important as a social convention. Discrimination is frequently to do with the social roles of women rather than their physical characteristics, similarly discrimination suffered by transsexuals is linked to moral judgments which have nothing to do with their abilities in the sphere of employment. As the Court has a duty to ensure that the general principles of Community Law are upheld, and as these include a respect for certain fundamental rights, one of which is the elimination of discrimination based on sex as expressed in the directive, then the directive must be held to cover changes from one sex to another as much as it covers whether is discriminated against because they are a man or woman."

If the European Court of Justice follows the Attorney General's recommendation of extending equal treatment of men and women to cover transsexuals, to be ratified, it means that, according to Whittle; "...throughout Europe it will be unlawful to discriminate against a transsexual, whether female-to-male or male-to-female, on the grounds that they are going to have or have had gender reassignment."

If the Court does indeed ratify the Attorney General's recommendations then transsexuals in England will finally be able to see legal changes to their position. Press for Change must be commended for their diligence in actively seeking human and civil rights for English transgendered people.

Here in Australia the struggle has been no less great, and with the advent of new legislation in Western Australia and New South Wales, transsexuals are closer to achieving the legal status that should be our birthright, as with all peoples of this Earth.


FOR A TRULY
TRANSSENSUAL
EXPERIENCE,
Safer Sex
EVERY TIME!



TRANSSENSUAL ESSENTIALS
(condoms, lube, gloves and dams)

can help prevent contact
with the HIV virus
& other sexually
transmitted diseases

AVAILABLE AT
THE GENDER CENTRE

*
Ph: (02) [redacted] 
Monday to Friday 10am to 5.30pm

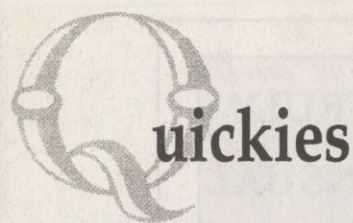
Transgender

Support

A support
network has
been established
for HIV+
transgender people.

For those wishing
to make contact
with the network,
phone:

The Gender Centre
on (02) [redacted]



quickies

*Bite-sized information
relating to the transgendered
experience*

ABANDONED TEENAGE BOYS

A court in Salt Lake City [US] sentenced a 25 year old woman to a year in jail for posing as a 13 year old boy.

Just before last Christmas, Birdie Jo Hoaks touched the hearts nationwide with his story that he was a teenager abandoned by his family because they could no longer care for him. Hoaks showed authorities a birth certificate for Michael Ross.

Dozens of people called Salt Lake City police offering donations, gifts, and even their homes. But one of the calls was Hoak's undoing. It came from Vermont authorities who said that Hoaks had pulled the same scam in the Green Mountain State, and earlier had spent six weeks in a Kansas boy's home. She was suspected of similar offences in Texas, Idaho, Montana, New York, New Jersey, Main, Alaska, and West Virginia.

At the time of the Vermont incident, a newspaper reported that Hoaks had a twin sister, Becky, and that the pair had roamed the country milking kindhearted citizens while posing as abandoned teenage boys.

Source: Cross Talk Issue 76

TRANSYLVANIA TRANSSEXUAL

There are transsexuals in Transylvania. Following a hearing last year, 19 year old Sorin Ratiu became Romania's first transsexual. The court said that unless Ratiu received the surgery, he would probably kill or mutilate himself. Eight days after the ruling, Sorin went into the operating room in Bucharest and emerged as Sorina. The only thing different was that the operation was televised on state TV! Viewers were treated to close-ups of the severed genitalia and other gory details of the eight-hour operation.

Source: Cross-Talk No. 69

RIGHTS WITHHELD

In Des Moines a federal appeals court has rejected an inmate's demand to dress as a woman and dismissed his demand for counselling. Merlin Long, 62, is serving a life sentence for first-degree murder, and claims that ever since prison officials took away his women's clothing and makeup in 1981, they have ignored his need to be counselled for "gender dysphoria". A federal court ruling which rejected his demand was last month upheld by the appellate court.

Source: Capital Q Issue 193

PRIEST NOW A WOMAN

Parisian priest Philip Darlet gave the vatican an unusual problem over the issue of women clergy when he changed gender to become a woman. Now called Phillipe, the Vatican can't defrock her unless she marries.

Source: Gems News No. 19

BREASTS FROM THE LAB

Researchers at the University of Michigan and the Carolinas Medical Centre think they have discovered a way of adding breast tissue without introducing foreign substances. They say that within five years they hope to be able to remove a tissue sample from a woman's body, use the sample to grow additional cells in the lab, and then implant the mass in the breasts where they should multiply and mature into real breast tissue.

Source: Cross-Talk No. 73

TRANSGENDER AUTHOR IN NEED

Leslie Feinberg, author of the books *Stone Butch Blues*, and *Transgender Warriors*, has been seriously ill since December last year, with a series of bacterial infections and spiking fevers. Leslie's illness has so far cost her/him \$12,500. Donations are sought to help Leslie proceed with tests and other medical costs.

Cheques payable to: the Column Foundation, earmarked for Leslie Feinberg Health Fund. **Post to:** Leslie Feinberg Health Fund, c/- William Sachs Esq., Column Foundation, 370 7th Avenue, 7 Penn Plaza, suite 830, New York, NY 10001.

TOUGH SWEDISH EXAMINATION

According to a researcher at Umeaa University,

seven out of ten sex change operations performed in Sweden are successful when measured by the patient's satisfaction and self-esteem. Owe Bodlund attributes this high success rate to the tough examination process which is required before a sex change can be approved. It takes between five and ten years for a person to fully complete the change. Of the approximately fifty patients who apply for sex reassignment each year, only ten to fifteen are approved. A total of 250 operations have been performed in Sweden, and interestingly, they are evenly split between MTF and FTM.

Source: Cross-Talk No. 67

FTM HYSTERECTOMY UPDATE

According to the latest *Boys Own* from the U.K., it is now recommended that only about 25% of FTMs need a hysterectomy in their early years [of treatment]. In these cases it will be because of breakthrough bleeding due to cervical erosions. It is now recommended that the remaining 75% of FTMs wait until they reach post-menopausal age, when there is an increased risk of developing pre-cancerous cells in the cervix. Waiting like this prevents the risks associated with such major surgery, also prevents the associated effects on sports performance etc. - it also saves tissues which may prove useful at any time when a phalloplasty is performed.

Source: Boys Own No. 19

TRANY NEWS GROUPS

Two of the more accessible news groups on the Internet for transgendered people are **alt.transgendered**, and **soc.support.transgendered**. Both sites carry articles, interventions, opinions, and factual reports of interest.

INTERNATIONAL FTM EVENTS

For those boys contemplating travelling this year, the following events will be happening:

➔ The FTM Conference of the North Americas will be held in Seattle between August 9-11 at a cost of US\$60.

➔ FTM Get-together 96[UK] is combined with the annual Gendys Conference. The Get-together will be held in Manchester on September 7. Cost £25

Polare welcomes any items that could be placed in *Quickies*. Please include your source.

THE GENDER CENTRE INFORMATION PAMPHLETS

CONTACT THE COMMUNITY WORKER
THE GENDER CENTRE (02) [REDACTED]



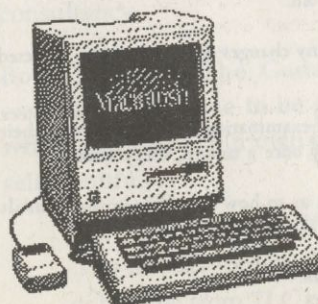
DROP IN

WEDNESDAY MORNING

Each Wednesday morning from 10am to 12 noon you can drop into The Gender Centre for a cuppa and a chat. It's a very casual, very informal morning and a great way to meet new people.

75 Morgan St Petersham.
Call Sophie on (02) [REDACTED]
for more information.

COMPUTER COURSE

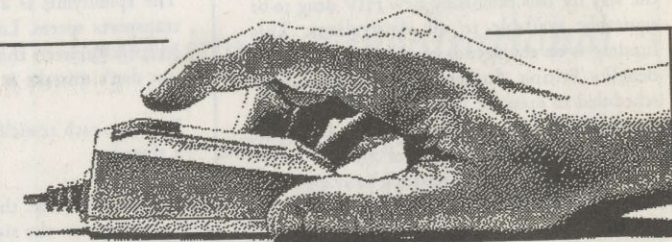


The Gender Centre is considering offering a free basic computer skills course which will familiarise you with the Mac Operating System, basic word processing and design principles.

Expressions of interest to attend are sought from the transgendered community.

This is an informal, non-certified course suitable for absolute beginners, and will be held at The Gender Centre's premises.

If interested, contact the Gender Centre on (02) [REDACTED]





Russia's New HIV Drug

A drug pioneered by Russian researchers has shown to be promising in reducing the amount of HIV in the human body. In a study at London's Ealing Hospital the drug, named HEPI, reduced levels of HIV in the blood of infected people by 95% and produced fewer side-effects than existing anti-HIV therapy. Engineered by scientists at Moscow's Gamelaya Institute, it works not by inhibiting the replication of HIV like drugs currently marketed but rather it suppresses the immune system's response to the virus. *Source: Capital Q, Issue 192.*

Way Cleared for Invirase Funding

The Pharmaceutical Benefits Advisory Committee [PBAC] recently recommended the drug Invirase for Section 100 Funding, clearing the way for this promising new HIV drug to be equitably available to all Australians. This funding is on the agenda of the Pharmaceutical Benefits Pricing Authority [PBPA] which is scheduled to meet on July 16. Invirase has been approved for "the treatment of HIV/AIDS in adults and children 12 years of age and older" as a component of combination therapy with other antiviral agents.

Until now, people living with AIDS have only had access to one class of drug therapy - nucleoside analogues such as AZT, ddC, 3TC and d4t. Unlike nucleoside analogues, which block the enzyme reverse transcriptase, Invirase blocks the enzyme protease. By prescribing Invirase in combination with nucleoside analogues, it will be possible to block two of the enzymes which are critical to the replication of HIV.

Producer of the drug, Roche, claim that "Invirase has been proven not only to cut deaths by two thirds and delay the onset of illness by over half, but also to have few side effects."

Testicular Self-examination

Cancer of the testis is the most common cancer found in genetic males between the ages of 15 - 35 years.

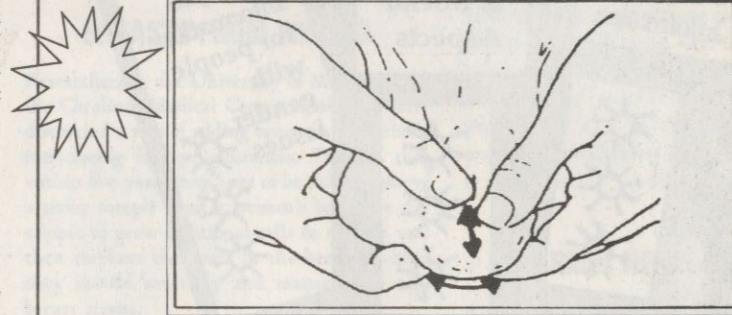
The best way of detection is regular testicular self examination. it's easy and only takes a couple of minutes to do once a month.

Testicular cancer is on the increase and Australia has one of the highest rates in the world. If you find out that you've got cancer early enough, you've got a better chance of cure [nearly 100% if you're early enough] and less severe treatment. If left untreated, however, the cancer acts aggressively and progresses rapidly to other parts of the body and the only treatment options are chemotherapy and/or surgery.

No one is sure how testicular cancer is caused but your chances of developing it are increased if someone in your family has previously had problems or if you had an undescended testicle.

The best time to inspect your testicles is after a warm bath or shower. the heat relaxes your scrotum making it easier to find anything unusual. Standing in front of the mirror may help.

Support the testicles in the palm of your hand and note the size and weight of each testicle. it is not unusual for one testicle to be bigger or hang lower than the other.



The epididymis is a soft tube-like structure at the back of the testicle that stores and transports sperm. Locate the epididymis by gently pressing the skin at the back of the scrotum between thumb and forefingers. Also gently feel behind the testicles. this is so you don't mistake it for an abnormal lump.

Examine each testicle separately. Using both hands, roll the ball between two fingers and a thumb.

What to look for: the presence of a lump [usually on the front or side of the testicle], any change in the size/shape of the testicle, swelling of the testicle or groin, discomfort of the testicle OR sensation of heaviness of the testicle, sensation of dragging in the scrotum or a dull ache in the lower abdomen or groin.

NOTE: Pain or discomfort is not always present. Any changes or abnormalities detected should be checked by a doctor.

All people with testicles should make testicular self-examination a routine part of their life. Once you start, it is advised you do it regularly once a month, every month.

If you would like more information, or are unsure as to how to self-examine, consult your doctor.

Source: KRC Newsletter No.4 1996

NSW Transgender Bill LATE PRESS NEWS

As reported by Julie Catt, in "Surprise Reactions to Trany Victory", [published by the *Star Observer* Issue 308 20/6], "The recent triumph of the Transgender Anti-Discrimination Bill has left some community groups confused over its practical ramifications.

Births Deaths and Marriages Department's Dan Hogan told the *Star Observer* that the department was 'surprised' that the legislation, which also permits post-operative transsexuals to change their birth certificates, went through the NSW Upper House without amendment.

He said that it was expected that the Coalition would follow through on their threats to amend the legislation, and that the bill's sudden passage has left his department a little unprepared.

Although the legislation has yet to be proclaimed law, Hogan said the

wheels are in motion to accommodate an influx of post-operative trans wanting their birth certificate changed to reflect their new gender. The dozen or so trans that have called Hogan have been told that the law will go into effect in six to eight weeks.

Hogan says he is commonly asked whether an altered birth certificate will allow a trany to marry someone of the opposite gender: "Under Commonwealth law, this sort of marriage does not exist, so this form of marriage would be immediately null and void". "

Interestingly, Catt reports that the "Lesbian Space Project convenor Sand Hall declined comment on the legislation pending further investigation into its legalities."

Source: Sydney Star Observer Issue 308 20/6



The New South Wales Department of Health is planning to employ a consultant to look at the problems of Psycho/social Trany Health in New South Wales in relation to Sex Modification Procedures (SMP).

If you have any health concerns, both past and present, here is your opportunity to put your viewpoint forward. We suggest that you write down your concerns on paper. If you do not feel empowered enough to do this, representatives from either Transgender Liberation Coalition (TLC) or The Gender Centre will help you. We anticipate that both written submissions and other interview processes will be part of this consultancy.

Both TLC and The Gender Centre would encourage everyone to be involved, no matter where you are in your own process and how you self identify.

Contact either:

The Gender Centre on (02) [redacted]
or Nadine from TLC on (02) [redacted]

Is there time out for you from the pressures of life, a time in the week where you can be still?

We invite you to come and
Relax
at

The Gender Centre.

Each Monday evening at 6.00pm,
there is an opportunity to participate in
relaxation classes that use a variety of ways to
help you relax.

soothing and inspirational
music
• essential oils •
guided meditations
& relaxation excercises



So come along and spend some time relaxing
and hopefully leave refreshed and inspired.

My Story ...



This is a column where readers can submit their own gender-related stories. We ask that you keep your articles at 700 words or less



Having just read your Polare newsletter I feel that I would like to share my experiences to you and your readers.

Having had a great deal of happiness throughout my life, wearing women's clothes, from as early as I can remember, I feel very comfortable in high heels, I have purchased and discarded more dresses, and pairs of high heeled shoes, wigs in my life than I care to remember.

Being born in the UK in 1960 when females were females, being brought up in a loving family, but around my female cousins and sister, I was the youngest and the only boy from 8 females. It was then while playing with my sisters and cousins where gender took a turn for me; while playing doctors and nurses I was always the doctor. I protested a few times, when my role was reversed - at this time I was only about five or so. My sister, then seven, and cousins all about the same age, started ballet classes - we had to drop them off and pick them up as my father was the only one who had a car in the neighbourhood. I don't remember doing this next thing but my sister tells anyone at BBOs and the like, that I went into a shoe store in my own town and wanted to purchase some ballet shoes, which in 1964 was not acceptable, and the store owner said to my dad "tell him to come back when he's a bigger girl". I think now that this may have sparked my new wonderful hobby.

[I'm] now at the age of 36 years, married and have one dependent son of 2 years and another on the way. My wife maintains that she is open minded and knows about my desire to wear women's clothes, even to the point of [my] seeking employment were I can wear these clothes, [yet she] still finds a reason to throw it back in my face which has resulted in many an argument. I mentioned my son [to her] who puts on my wife's high heels and attempts to put on lipstick. My wife turns to me and says "take those shoes off, you're just like your dad". I love my wife and son very much, however, [despite] her malicious manner of argument like, "shut up you're just a transvestite", I still feel the need to wear high heels and panty hose. I want to write a book about my experiences and would like to meet or correspond with anyone who has experienced the same kind of things. Thank you very much, Stephanie.

To contact Stephanie, send your letters/details to Polare & we'll forward them on.

Learning from the Curse

The curse of my life has been my transsexuality which has made me fight endlessly against, myself [I am 65] denying myself bodily changes which I have always desperately longed for. The cost [of this situation] has been my working powers, my vitality and joy of life. Half a year ago, I took the most male action of my life and decided to seek psychiatry, medicine, and surgery to help me overcome my energy-sucking discrepancy and physically become female.

My dear wife feels my decision is a betrayal and as such, is threatened and hurt. I can follow this perspective; so while my decision, for me, has created the most freeing, expanding vitalising feeling ever - on all levels it feels right - our family situation has gone into crisis.

Denmark has some 40-50 people a year seeking help as I do, and only 2-3 people a year have their wishes fulfilled. Some go abroad if they have the money. With determination, creativity, flexibility and a lot of luck, I may get through here. Were it not for my wife's resistance I [would] have tried five years ago, and were it not for my own resistance and self-judgement, I [would] have tried fifty years ago.

This most painful issue of my life ended my first marriage 25 years ago. My present marriage is now at a critical point, but hopefully, our relationship may continue and develop into a new structure, for we both feel that we have much to share - and we have a daughter of five. Recently, reading some issues of Polare, I felt greatly supported; simply knowing I am not alone with these challenges - that others are facing some of the same problems as I do - does help a lot.

It is obvious that in the very wide spectrum of transsexual lives, many try to conform, and find their way fairly well, following similar patterns delineated by women and men in general. Some do live lives as sexy women and others of very male men, hence supporting the existing polarised patterns [of gender].

Of particular interest to me, however, are examples of lives where an unusual background is applied as a resource to introduce, in attitude and living action, into the consciousness of the greater community some of those unique insights, perspectives, questions, and attitudes which gending-crossing does offer as gifts of experience and wisdom. Hence, I greatly appreciate reading articles like Nicky Stone's Androgyny [Polare no.7, May '95], which show me how the curse of transsexualism may be transformed into a deeper human insight and a much needed revision of collective attitudes - attitudes and beliefs which have forced upon us the inhuman constructs of male and female as narrow, rigid and separated categories instead of wide, flexible, and creative ones.

I feel I never was a man and physically, of course, not a woman either. I always belonged between the sexes. For several years now, I have never been wearing the clothing disguising me as a man; it is all female, but not extremely so - no high heels, no wig, no padding, no make-up, rather, colourful scarves and pretty leggings. Hopefully, hormones can start quite soon and be followed by surgery.

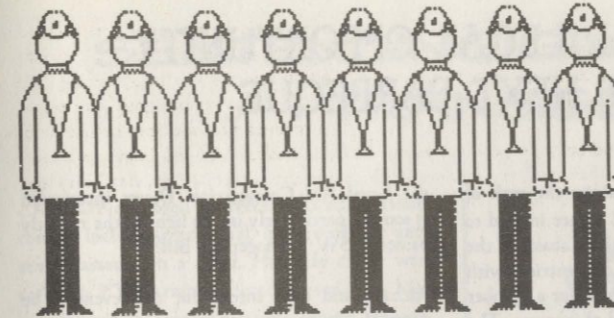
Having for years been known in my small town as being somewhere between the sexes, and with no wish for dramatic changes in lifestyle, the bodily changes I long for might even be noticed by only a few of the people I daily meet in the streets and shops? So, I am one of those who explore the forbidden space between the boxes labelled "he" and "she".

It is my intention to avoid playing roles I cannot honestly feel comfortable with. However, when occasionally I can feel my integrity, my strength and centering, this forbidden part of the spectrum of expression, opens up wonderful, joyful, and creative experiences. When fear, uncertainty, and lack of awareness [arise], I get those well-known feelings of inferiority, failure and humiliation. It is evident that my attitude to myself is the key to the opening.

In my process, I have from others, and, mostly from myself, endlessly heard words like "but the real issue is the acceptance of what is, and not a question of male or female body". It is one of those powerful perspectives I have used to deny myself access to the desired bodily changes - and it's a tough one. I am no angel and I need to admit that I cannot accept my body being male. What is important now, is that I can accept that I cannot accept my male body.

I feel that I betray myself each time I copy or please others, or hide myself and refuse to stand up for the meanings and expressions of my individuality - even when facing ridicule and aggression. Of course I am not there all the time: I fail, I fear, I defend myself, I try to escape - and hopefully, do not blame myself for the failures, but often I do feel when I'm on the right way and when I'm not. This helps me have trust and guidance through the darkness.

If you would like to correspond with Ejler you can contact her via Polare



My View ...

by Max (FTM)

The Session + The Questions = My Response



May 15 proved to be an all round informative evening where Dr. Haertsch I feel adequately covered the techniques of surgery for Trany Girls. Though he did appear to gloss over a couple of points, questions raised by the audience were answered concisely. The audience was also quite helpful in ensuring Dr. Haertsch left with some [to him] previously unknown facts.

Something though, I guess I'd expected, was little information and much less enthusiasm when it came to discussing Trany Boys' surgery. A positive point though was Dr. Haertsch's belief that for Trany Boys, transplants using micro surgery could very well be eventually a reality, but alas it would either not come in my lifetime or if it did I'd be too old and senile to make any sense of what was being offered to me.

Admitting to not having succeeded at every operation, Dr. Haertsch explained his process over the years of trialing various surgical techniques by other surgeons elsewhere in the world and discovering which he believes to be best and appropriate for each individual. Yes, he admitted to his knowledge of loss through suicide by three members of our community. He did deny the need for psychological intervention on his part as he is totally unqualified as a counsellor, [the issue of counselling demands further discussion].

I know there was recently a survey conducted on Trany's, their lives, surgery, etc. and another survey approximately two years previous. I don't personally know of the results but I am prepared to surmise.

I feel that only a small portion of the Trany

community responded to either survey. If that was the case then yes the surgical failure rate of the Trany community would appear to be greater than what it actually is. Needless to say, irrespective of the % we still need to ask, in what way was the surgery a failure?

➤ Was it a physical failure, if so what was actually the cause of this failure?

➤ Was it a psychological failure, did it not make the Trany a 'true' man or woman as they supposed it would?

Some people decide to have surgery and then again some don't, whatever you decide make yours an informed decision.

➤ Was it a combination of both a physical and a psychological failure?

When we talk of suicide and its prevalence in the Trany community, we need to look carefully at where the prevalence lies. Is it more predominant within the pre-op or post-op Trany?

What are the reasons all these people are committing suicide? No doubt one could quite readily ask the same three questions as for surgery failure rates [after all, people generally commit suicide because they deem their life a failure] adding these further questions:

➤ Were there any unresolved emotional problems [u.e.p.] in the Trany's life that was the sole cause of suicide?

➤ Was it a combination of an operation's physical failure plus u.e.p.?

➤ Was it a combination of psychological failure plus u.e.p.?

➤ Was it a combination of an operation's

physical failure, a psychological failure plus u.e.p.?

➤ Were there any other health problems [i.e. AIDS] ?

Of course, unfortunately as these people are no longer with us, we will never really know why they chose to leave.

Dr. Haertsch spoke of receiving a letter from a consultant of the NSW Health Department [Clinical Policy and Practise] with a request

for his assistance to look into policy and practises relating to ; gender reassignment therapy, hormonal therapy, surgical procedures, and post-op follow-up care. These are points I strongly feel are in need of attention, and if at all possible, I would like to be a part of the process.

I want to see it ensured that Dr. Haertsch, or any surgeon for that matter, does their best [if not better] work on each individual. I want to see that every individual is fully aware that a successful outcome of surgery is based on their emotional acceptance as well as their psychological acceptance, and that Dr. Haertsch, or any other surgeon, has done their best. Since your body heals differently as do all individuals - one cannot truly compare against another.

What it boils down to in the long run is: even if Dr. Haertsch, or any other surgeon, says yes to performing surgery on you, ultimately YOU are the final decision maker therefore, for your own health's sake, please ensure you are carefully and professionally counselled and you've gotten all the answers [that are possible to get pre - surgery] to your questions.

Some people decide to have surgery and then again some don't - whatever you decide, make yours an informed decision.

W.A. TRANY LEGISLATION

Media Statement from the W.A. Attorney General - 7/4/96

People suffering from gender dysphoria and who have completed medical procedures to alleviate their condition will gain legal recognition of their reassigned gender under proposed new State legislation.

There is estimated to be at least 250 people suffering from gender dysphoria in Western Australia, of which about 80 have undergone gender reassignment procedures.

The proposed WA legislation will see a Gender Reassignment Board established to issue recognition certificates to people who have undergone gender reassignment procedures whether in WA or elsewhere.

It will also include provisions protecting a person who has undergone gender reassignment from discrimination on the grounds of gender identification.

Under the proposed legislation, the board will have to be satisfied that the person:

- ★ believes that their true sex is the sex to which the person has been reassigned;
- ★ has adopted the lifestyle and has the sexual characteristics of the sex to which the person has been reassigned; and
- ★ has received proper counselling in relation to their sexual identity.

Attorney General Peter Foss said under the proposed legislation, a person who had undergone gender reassignment would be issued a certificate which recognised their new gender.

Their birth certificate and any other relevant register listing their gender would also be altered to reflect a change.

"This legislation will assist disadvantaged persons by clarifying their legal status and rights", Mr Foss said.

"The legislation has been progressed as a result of discussions in the Standing Committee of Attorneys General."

Mr Foss said a Gender Reassignment Bill was in the process of being drafted and it would be introduced in Parliament later this year.

Media contact:
Peter Harris [redacted] or [redacted]

SPECIAL LEGAL OPPORTUNITY AT NEXT BARBEQUE

Our Winter Solstice barbeque on the 25th of July, will be a special one, and all are invited to come. Richard Funston and Julia Cabassi of the Inner City Legal Centre, in conjunction with The Gender Centre, are organising for a number of legal practitioners to attend this event. The purpose of this is twofold, firstly, it means that the Trany community will have the opportunity to gain direct legal advice on their particular issues and needs, and secondly, and perhaps more importantly, it gives the legal practitioners themselves the opportunity to become more aware of the transgendered community's needs and special requirements.

The barbeque, then, would be the perfect opportunity for you to both educate and gain assistance from the lawyers present, most of whom will represent various legal centres and

the Legal Aid Commission. Direct interaction is sought, particularly in the light of the recently passed NSW Transgender Bill.

Richard and Julia intend for this event to be part of an ongoing process of creating a Transgender Legal Working Group which would identify and address the needs of the community. One of the anticipated functions of such a group would be to monitor new legislation and be involved with policy work.

It is asked that the community recommend to Richard any lawyers who would be interested in establishing and participating in the new Working Group. Richard or Julia can be contacted at the Inner City Legal Centre on:

[02] [redacted]

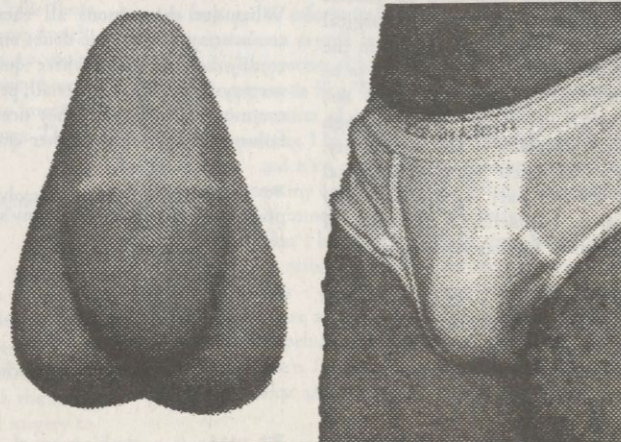
For B.B.Q details refer to ad on p.3

IT'S THE PACKY!

The "Packy" is a high-quality pant stuffer developed by and for FTMs, in association with Vixen Creations, manufacturers of premium adult sex toys.

- made of high quality, durable silicone
- easy to keep clean -you can even boil it!
- looks very natural in jockey-style underwear
- believable size & weight for a flaccid penis
- wear it swimming - doesn't ride up, comfortable
- 20% of profit goes directly to FTM International
- MONEY-BACK GUARANTEE

\$51.00 plus \$5.00 shipping and handling in the USA.
Please allow 2-5 weeks for delivery. CA residents add local sales tax.
For international shipping, add \$10.00 S & H.
Send Check or Money order to:
J. STALLORY, 1261 Howard St., San Francisco, CA 94103-2711 USA



SENTENCING GIVEN ON SIGNIFICANT TRANSGENDER CASE

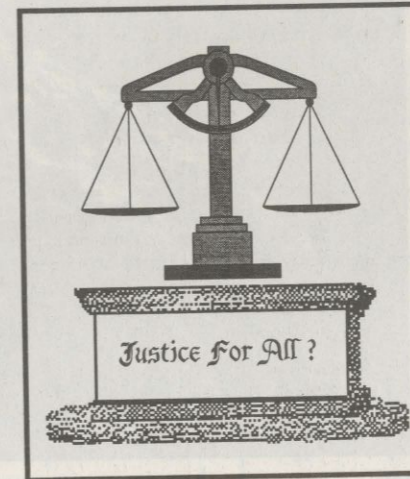
Sean O'Neill, aged 20, recently faced 11 felony counts including criminal impersonation and sexual assault on a child. His only crime was to be an FTM transgendered person who had experienced consensual sex with several teenage girls, when he himself was only 17 or 18 at the time.

In *OUT* magazine, Donna Minkowitz reported on the criminal proceedings observing that "the case . . . is unique because it may be the first time law enforcement has treated gender-deception as something tantamount to rape".

If convicted of all charges, Sean, likened by James Green upon first meeting him, to "a frightened little boy", could have wound up in Colorado State prison for over 30 years!

On February 16 of this year, the hearing for Sean's trial took place. Community organisations from around the nation came to support him, including The Transsexual Menace, Menace Men, and Lesbian Avengers. Tony Barreto-Neto, a Deputy Sheriff from Florida and founder of TOPS [Transgendered Officers Protect and Serve], and James Green of FTM International, were both asked to testify at the proceedings to "demonstrate that being a transsexual does not automatically make a person a criminal".

The DA had asked for the full prison sentence to be handed down, labelling Sean as a "predator", and stating that "she should be removed from the community". This is despite



the fact, that if Sean had had a male body, the whole matter would have been routinely reduced to a misdemeanour, as is the case with most teenage heterosexual instances.

Sean's lawyers in turn asked for a minimum sentence of probation and counselling declaring that "Sean O'Neill is a troubled young person doing his best to find his way, and to find affection in this world, without role models or appropriate guidance".

The judge took 20 minutes to deliberate after a hearing of about three and a half hours. As a result of his deliberation, Sean received a sentence of 90 days in the county jail with

consideration for the appropriate accommodation, and is also to be on probation for six years. He will be a recorded sex offender and may not have unsupervised contact with females under 17 excepting his younger sisters.

As reported by James Green, the judge stated that "This case is not about pedophilia, not about transgenderness, not about love or trust, this case is about deceit and consistency".

James Green revealed that "We went to Colorado Springs because we felt it wrong for Sean, a confused young transgendered person, to be brought up on these charges. We achieved only a partial victory. But most importantly, we don't want Sean O'Neill to become another Brandon Teena*".

Sean's case was seen as significant for the Transgender Community. His conviction posed the very real threat of the authorities making it a criminal offence to conceal your gender of birth to others. This is despite the high level of discrimination and violence that exists towards trans. Sean's sentencing, though greatly reduced, still allows this threat to exist.

* An FTM who was raped and murdered after his genetic female status became known.

Source: "Predator?" by James Green, FTM Issue 34

The Individual Wig

Provides a tranny friendly, discreet service and a wide selection of wigs and hair extensions.

SHOP 4, 16-32 OXFORD ST DARLINGHURST (02) [redacted]

Chic Beauty Therapy

All kinds of beauty therapy; Waxing, tinting, facials, individual make-up design.

Aromatherapy & therapeutic body massage.

86 ELIZABETH RD ELIZABETH BAY NSW 2011 PH: (02) [redacted]

WIGS!

seductive, slinky, striking, sexy, crazy, cool & classy

* WIGS INTERNATIONAL 12 KING ST NEWTOWN [redacted]

FOR THE WOMAN IN YOU

- Lovely Lingerie
- Lacing Corsets
- Waist Cinchers
- Falsies • Prosthesis
- Control Strings etc.
- Wigs & Cosmetics
- Shoes & Boots

Larger sizes stocked
A TOUCH OF GLAMOUR
27 Enmore Rd, Newtown 2042
Catalogues — phone for info.
(02) [redacted]

continued from page 7 ...

bathroom facilities of their chosen gender, without fear of refusal or being ejected.

Under **30N Accommodation**, the Bill makes it further unlawful for a person [whether principal or agent] to discriminate against a transgendered person in regards to accommodation, by refusing their application, changing the terms, giving them a lower order or precedence, deferring their application, or by denying or limiting any benefits that arise from particular accommodation. It will also be unlawful for an agent or principal to evict a transgendered person on the basis of their status. However, section (3b) of **30N** cryptically makes exempt "the accommodation provided in those premises [that are] for no more than 6 persons."

Other sections of this Bill, cover Sport, registered Clubs, Superannuation, and Education, which space limitations render us unable to detail.



*In silence the
teachings are
heard:
In stillness the
world is
transformed*

*- Haven
Trevino*

THE PERSON WITH UNWANTED HAIR

THE PROFESSIONAL ELECTROLYSIS CENTRE

Your Unwanted Hair Can Now Be Permanently Removed

After meticulous attention to your clothes, make up and grooming, the continued evidence of your beard shadow can detract from your feminine appearance. No matter how close you shave or how closely you apply your make up, you may still be unable to eliminate this problem.

Perhaps you have tried waxing or plucking or even chemical depilatories. These methods are only temporary solutions. We can offer a permanent solution.

At the Professional Electrolysis Centre we have now imported the latest multi probe electrolysis technology from the USA, and are able to offer you a more rapid and more effective permanent hair removal treatment with the added benefit of much reduced discomfort.

When you come to the Professional Electrolysis Centre, a qualified electrologist will evaluate and advise you on your hair removal requirements.

For example, we can reduce the density of your beard to eliminate a beard shadow under make up without compromising your male status. You may be bothered by excessive hair on the chest, back or neck. This, too, could be reduced or eliminated.

During the treatment at the Professional Electrolysis Centre, our highly trained electrologist will carefully insert a very fine sterile probe into the opening at the surface of the skin next to the hair. The electrolysis then renders the root permanently inactive. The unwanted hair is freely removed. A number of probes are used at one time on different hairs to accelerate the process. Our new technology, coupled with our professional care will ensure your maximum comfort.

After your treatment, we will apply our designer after hair removal balm MELFOL

to protect the new hair free area. For maximum effectiveness, continued use of MELFOL at home is recommended between treatments. MELFOL, 100gm jar, is available from the Professional Electrolysis Centre for \$39.

The Professional Electrolysis Centre multi probe electrolysis is just \$55 per 1 hour session. To ensure hygiene protection there will be a once only initial cost of \$30 to provide you with your own personal set of probes. These will be sterilised using the latest autoclave methods after each treatment and stored for your exclusive use.

For your maximum convenience:

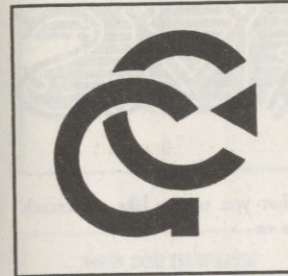
- Extended trading hours by appointment. Mon-Fri 7.30am - 9.30pm Saturday 8am - 4pm
- Parking in Formosa St, Council car park.
- YES, your Bankcard, Mastercard or Visa are welcome and accepted.

WHERE TO FIND US

We are situated in the COMMONWEALTH BANK BUILDING on the corner of LYONS RD AND FORMOSA ST.

Julio and Noreen personally guarantee your complete satisfaction. If you have any problems at all, call us at home [redacted] or at the centre and we will personally attend to it.

THE PROFESSIONAL ELECTROLYSIS CENTRE
to make your appointment now, phone (02) [redacted]
19 LYONS RD, DRUMMOYNE



The Gender Centre

Confidential free services for people with gender issues

is committed to developing and providing services and activities which enhance the ability of people with gender issues to make informed choices.

The Gender Centre is also committed to educating the public and service providers about the needs of people with gender issues.

We offer a wide range of services to people with gender issues, their partners, families and friends in NSW. We also act as an education, support and referral centre to other organisations and service providers.

We specifically aim to provide a high quality service which acknowledges human rights and ensures respect and confidentiality.

Services

- * Counselling and support
- * Social and support groups
- * Drug and alcohol counselling
- * Bi-monthly magazine 'Polare'
- * HIV/AIDS information
- * Condoms and lube
- * Needle exchange
- * Accommodation
- * Referrals to specialist counselling, medical, HIV/AIDS, education, training, employment, legal, welfare, housing and other community services
- * Outreach - street, home, hospital and gaol
- * Counselling and support groups for partners and family

Residential service

For all enquiries relating to the residential service, please contact the community worker.

75 Morgan St
PO Box 266
Petersham, NSW 2049

Tel:(02) [redacted] Fax:(02) [redacted]

10am - 5.30pm
Monday to Friday

The Gender Centre is funded by the NSW Health Department through the AIDS and Infectious Diseases Branch, and supported by the Department of Community Services under the SAAP program.

Contributions Sought for U.K. Transy Book

Editors, Stephen Whittle and Kate More, are seeking contributions to a proposed book on Transgender Studies which will be published through Cassells in order to complete their Les/Bi/Gay series.

The aims of the book are as follows:

1. To contribute to the introduction of TG studies into the academic sphere
2. To provide a theoretical background for the TG 'street' activist in their work
3. To provide a 'showcase' for new TG academics and writers
4. To introduce TG theory into Queer theory
5. To present an alternative grounding for TG theory other than those arising from non-tg therapists, medics, academics etc.
6. To support the first TG studies conference in Autumn 1997.

The publisher's needs have been identified as:

1. Connections with international book market - particularly that of America, Australia, Canada.
2. The provision of a text which would sell to Cultural and Gender study (whether Women's studies, or Queer theory) courses at undergraduate and post graduate level.
3. Provide an up-to date overview of TG theory.

Choice of Writers

One of the main purposes of the book is to provide an academic text which comes from a TG viewpoint. As such the intention is that the majority of the chapters should be written by TG people, although it has been recognised that sometimes other voices are needed to provide both academic/intellectual support and in this case Gordene Mackenzie has been asked to write a chapter which requires that she is not tg in order to write it. Other contributors are sought.

Money

There is no money to pay for contributions, however, each writer will receive a copy of the published book.

For submission details, dates and further information, please contact:
The Gender Centre on (02) [redacted]

DENTAL DAMS

WHAT ARE THEY?

Dental Dams are a latex barrier originally invented for dentists. They use them to place in your mouth when working on teeth and form a barrier protecting the parts of the mouth not being worked on.

Dental Dams have been adapted to be used as a safe sex barrier during oral sex.

They are a 6" square of latex used to prevent the possible transmission of HIV/AIDS and other STD's, such as Herpes and HEP. A

To date only a couple of varieties have been available:

1. A thick 6" Sq. with a vile latex/rubbery taste
2. A thinner version of 6" Sq. in various colours with bubble gum type flavour [equally as vile depending on personal taste.]

A larger square of latex is in the process of being manufactured - 6"x8" - which will prove to be much easier to use. Hopefully this same manufacturer can be persuaded to make them more sheer and see through as well [we all know that clients love to see everything]

HOW ARE THEY USED?

Before using a dental dam rinse well to remove the powdery talc, then pat dry

Spread the dam over the entire vulva, covering both the vaginal opening and the clitoris, holding two edges of the dam with both hands. In oral-anal contact use the dam to cover the anus. [always hold the dam yourself, don't allow your client to do this for you]

A little bit of water based lubricant can be used on the side of the dam that won't be licked. This can help with sensation and dryness as with condoms.

Don't ever share the same dam, never reuse it, and always separate dams if you are practising both oral-vaginal and oral-anal sex, because anal organisms can be harmful to the vagina.

VARIETIES OF USE

As well as the above, dams are becoming more popular in the industry for lesbian doubles

They can be used to cover the balls for sucking and licking

Anything else that you might like to stretch your imagination to

These, and whatever else, can be a way of making that little bit more for extras

ALTERNATIVES TO DAMS

You can cut up a condom, as illustrated. This is not as large, but is see through and already lubricated.

Cut a square out of a latex glove

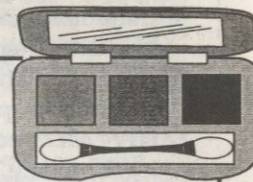
Don't use gladwrap/clingwrap as they can have tiny holes and therefore are not transmission proof.

WHERE DO YOU GET THEM?

The Gender Centre,
SWOP, Sexual health Clinics, NSW
Users and AIDS Assoc., Selected
Needle Exchanges.



Cruelty Free Cosmetics, Skin & Hair Products



Manufacturers: *listings continued next issue*

No animal testing has been carried out in the development of, or on the finished products, of the given manufacturers. The products also do not contain cruelly derived ingredients, such as whale products, seal oil and musk. Animal ingredients are limited to beeswax, lanolin, honey, milk casein and eggs.

V denotes vegan (no use of ANY animal product)

SV denotes some vegan

* *listings taken from Choose Cruelty Free Ltd Preferred Products List*

You can become a supporter of **Choose Cruelty Free Ltd**, and receive a quarterly newsletter plus a Preferred Products List.

Contact:

CCF P.O. Box 12005
A'Beckett St, Melbourne VIC 3000
Ph: (03) [redacted]

Fragrant Delights	v	Le Crystal Naturel	v
Geisha	v	Luminance	sv
Glacier	v	Mastey	v
Golden Wattle (Bee pollen)	v	Melrose	sv
Gooseberry Lane		Mia (Dominant)	
Grace	sv	Middle Earth	
Greenridge Botanicals	sv	Montagne Jeunesse	sv
Healthways Holdings (NZ)	sv	Moonkist	v
Heaven in Earth	sv	More Than Skin Deep	sv
Helen Helms	sv	Moritz (Narure's Sunshine)	
Herbon		Mudgee Honey Co.	
Hobson Dell	v	Natural Beauty Recipes	sv
In Essence		Natural Oil Workers	sv
Innovative		Naturals Collection	sv
Janesce	sv	Nature's Earth	v
Jeynelle		Nature's Fruit	v
Jurlique		Nature's Herbs	v
KMS	sv	Nazeer Henna	v
Laleuca		Oakland and Greene	sv
		One Earth	sv

directory assistance

NEW SOUTH WALES

THE GENDER CENTRE

Community service
Provides counselling, support and referral to a range of specialist counselling, medical, HIV/AIDS, education, training, employment, legal, welfare, housing and other community services to residents and clients living in the community. For more information or an appointment contact the community worker.

Outreach service
Provides the community services outlined above. Available to clients in the inner city area on Thursday nights from 9.30pm to 12am. Also available to clients confined at home, in hospital or gaol. *By appointment only.* For an appointment contact the outreach or community worker.

Social and support service
Provides social and support groups and outings. For more information contact the social and support worker.

Resource development service
Produces a range of print resources on HIV/AIDS, medical and other information relevant to people with gender issues and their service providers. For more information contact the administrative worker.

Drug and alcohol service
Provides counselling, support and referral to a broad range of services. *By appointment only.* For an appointment contact the outreach or community worker.

Residential service
Provides semi-supported share accommodation for up to 12 residents who are 16 and over. Residents can stay for up to 12 months and are supported to move towards independent living. During their stay they are also encouraged to consider a range of options available to meet their needs. A weekly fee is charged to cover household expenses. Assessments for residency are *by appointment only* and can be arranged by contacting the community worker.

For partners, families and friends
Counselling, support and referral to a wide range of specialist counselling, health, legal, welfare and other community services are available for partners, families and friends of people with gender issues. For more information contact the community worker.

For service providers and others
Advice, support and workshops are also available to employers, service providers, students and other people interested in gender issues. We also provide printed information materials including a bi-monthly magazine *Polare*. For more information contact the administrative worker.

75 Morgan St
PO Box 266
Petersham NSW 2049

Tel: (02) [redacted]
Fax: (02) [redacted]

A.D.I.S. ALCOHOL AND DRUG INFORMATION SERVICE
24 hour advice, information and referral.
Tel: (02) [redacted]
Country Areas (008) [redacted]

ACON - AIDS COUNCIL OF NSW
Provides information and education about HIV/AIDS, caring, support services for people living with HIV/AIDS.

9 Commonwealth St
Surry Hills, NSW 2010
PO Box 350 Darlinghurst NSW 2010
Tel: (02) [redacted]
Fax: (02) [redacted]

ACON HUNTER
13-15 Watt St
PO Box 1081
Newcastle 2300
Tel: (049) [redacted]

ACON ILLAWARRA
129 Kembla St,
Wollongong
Tel: (042) [redacted]

ACON MID-NORTH COAST
93 High St
PO Box 990
Coffs harbour, NSW 2450
Tel: (066) [redacted]

Every endeavour has been made to include accurate, up-to-date and complete information in this directory. Our knowledge and understanding of services for people with gender issues is changing all the time. The information in this directory is, therefore, current at the time of writing but may become out of date as new information becomes available.

ACON NORTHERN RIVERS
147 Laurel Ave Lismore
PO Box 6068 South Lismore NSW 2480
Tel: (066) [redacted]

ACON WESTERN SYDNEY
9 Charles St
Parramatta
Tel: (02) [redacted]
Fax: (02) [redacted]

AFAO (AUSTRALIAN FEDERATION OF AIDS ORGANISATIONS)
National AIDS lobby and safe sex promotion organisation.
PO Box H274,
Australia Sq, 2000
Tel: (02) [redacted]
Fax: (02) [redacted]

ALBION ST CENTRE
HIV testing, clinical management, counselling and support, treatment and trials for HIV/AIDS.
Tel: (02) [redacted]
Fax: (02) [redacted]

ANKALI
Volunteer project offering emotional support for People Living with HIV/AIDS, their partners, friends and carers. One on one grief and bereavement service.
Tel: (02) [redacted]
Fax: (02) [redacted]

ASTRA (ASSOCIATION OF SEXY TRANSVESTITES)
An erotic social club for the bold and the beautiful! All ages, shapes and sizes. Discreet meetings, weekly parties.

PO Box 502
Glebe NSW 2037
Tel: not known

ART AID AUSTRALIA
An organisation to help working artists.

Tel: Shane (02) [redacted]

FOLEY HOUSE
A safe and supportive residential service for people at risk of acquiring or transmitting HIV. Assessments for residency are *by appointment only* and can be arranged by contacting a residential support worker.

70 Marlborough St
Surry Hills

PO Box 331
Surry Hills NSW 2010
Tel: (02) [redacted]
Fax: (02) [redacted]

(BGF) BOBBY GOLDSMITH FOUNDATION
Community - based registered charity providing some financial assistance to approved clients.
Tel: (02) [redacted]

BREAST CENTRE
Provides mammography and breast implant screening for people under 40.
Rachel Foster Hospital,
Pitt St, Redfern NSW 2016
Tel: (02) [redacted]

BREAST CARE CENTRE
Provides mammography for people over the age of 40 concerned about breast cancer. The breast care centre recommends 2nd yearly mammography when over the age of 40.
Rachel Foster Hospital,
Pitt St Redfern NSW 2016
Tel: (02) [redacted]

CENTRAL SYDNEY COMMUNITY HEALTH SERVICE (YOUNG PEOPLES HEALTH WORKER)
Questions on safer sex, drug use, HIV/AIDS issues, emotional worries etc.
Tel: (02) [redacted]

COMMUNITY SUPPORT NETWORK (CSN)
Provides practical physical care at home for people with AIDS.
9 Commonwealth St, Surry Hills
Tel: (02) [redacted]
Fax: (02) [redacted]

Western Sydney and Blue Mountains
Tel: (02) [redacted]
Newcastle Tel (049) [redacted]
Wollongong Tel: (042) [redacted]

GAYPAC
An organisation dedicated to the rights of Gays, Lesbians, Bisexuals and Transgenderists.

PO Box W103
West Armidale NSW 2049

HIV AWARENESS AND SUPPORT
A support group for HIV positive IDUs

Continued page

and their friends. Meets every Wednesday. For more information contact Sandra or Tony at NUAA.

Tel: (02) [REDACTED]
Toll Free: 1800 [REDACTED]

HATS HUNTER AREA TRANSGENDER SUPPORT

Non-threatening social support for people with gender issues. Feel free to call any of us regarding any matter.

Simone (049) [REDACTED]
Andrea & Jan (049) [REDACTED]

PO Box 143 Adamstown NSW 2289
email: [REDACTED]

INNER CITY LEGAL CENTRE

Available to discuss any legal matter that concerns you.

Tel: (02) [REDACTED]

KIRKTON ROAD CENTRE

The centre provides primary health care to the general community of Kings Cross with the aim of preventing the spread of HIV/AIDS. The centre operates within a harm reduction philosophy.

100 Darlinghurst Rd
(entrance on Victoria St above Kings Cross fire station)
PO Box 22
Kings Cross NSW 2011
Tel: (02) [REDACTED]
Fax: (02) [REDACTED]

LANGTON CLINIC OUTREACH SERVICE

A free and confidential service. Provides a needle and syringe exchange, condoms and lube.

Cnr Sth Dowling & Nobbs Sts Surry Hills NSW 2010
Tel: (018) [REDACTED]

LATIN AMERICAN CLUB

A social group for Latin Americans, Spanish speaking peoples and those who enjoy that culture. Presents a dance and show every few months and contributes money raised to worthy causes.

4/7 Grosvenor St
Summer Hill NSW 2130
Tel: (02) [REDACTED]

LES GIRLS CROSSDRESSERS GROUP

An independent peer support group for transgender people. Free tuition, job assistance, friendship and socials, general information. Bi-monthly meetings.

Co-ordinator

PO Box 504
Burwood NSW 2134

LIVINGSTONE ROAD SEXUAL HEALTH CLINIC

Provides a free and confidential range of health, counselling and support services.

182 Livingstone Rd
Marrickville, NSW 2204
Tel: (02) [REDACTED] (2-5pm)
Fax: (02) [REDACTED]

LUNCHEON CLUB

The Luncheon Club is for people living with and affected by HIV/AIDS. A free lunch and entertainment is provided every Monday (except public holidays) from noon at the Exchange Hotel's Lizard Lounge.

Tel: (02) [REDACTED]

METROPOLITAN COMMUNITY CHURCH

MCC Sydney is linked with other MCC churches in Australia. We are part of an international fellowship of Christian churches, with a special outreach to, and concern for, anybody who feels excluded by established religious groups.

MCC deplores all forms of prejudice, discrimination and oppression - and seeks to share God's unconditional love and acceptance of all people, regardless of a person's sexual orientation, race or gender.

Cnr Heffron & Burton St
Darlinghurst, NSW 2010
Tel: (02) [REDACTED]

NorthAIDS

NorthAIDS is a community based organisation providing step down and respite care for PLWHA on the Northern Beaches.

Tel: (02) [REDACTED]

NUAA - NSW USERS AND AIDS ASSOCIATION

Provides education on safe injecting, safe using and safe sex. Information on services available for injecting drug users. Free needles, swabs, water, spoons, condoms, dams, gloves and lube. Also provides a free newsletter and other printed material for users on HIV and AIDS and other topics of interest or concern to users.

PO Box 822
16 Leswell St
Bondi Junction, NSW 2022
Tel: (02) [REDACTED]
Fax: (02) [REDACTED]

PLWHA (PEOPLE LIVING WITH HIV/AIDS)
PO Box 831

Darlinghurst, NSW 2010

Tel: (02) [REDACTED]
Fax: (02) [REDACTED]

POSITIVE WOMEN

Can offer one on one support for HIV positive transgender women. Contact Women and AIDS Project Officer or Women's HIV Support Officer at ACON.

Tel: (02) [REDACTED]

SEAHORSE SOCIETY OF NSW INC.

The Seahorse Society is an incorporated non-profit self help group funded entirely by members contributions. Membership is open to all crossdressers, their relatives and friends. We offer discretion, private monthly social meetings, social outings, contact with other crossdressers, a telephone information service, postal library service and a monthly newsletter.

PO Box 168
Westgate NSW 2048
Tel: (02) [REDACTED]

SEX WORKERS OUTREACH TRANSGENDER SUPPORT PROJECT (SWOP)

Provides confidential services for trannies in sex work within NSW.

461 Riley St
Surry Hills
PO Box 1453
Darlinghurst NSW 2010
Tel: (02) [REDACTED]
Fax: (02) [REDACTED]

SOPY - SUPPORT OF POSITIVE YOUTH

Drop in group for young people with HIV and AIDS. For info or just a chat.

Tel: (02) [REDACTED]
Fax: (02) [REDACTED]

SYDNEY BISEXUAL PAGANS

Supporting, socialising and liberating bisexual pagans living in the Sydney region.

Tel: (02) [REDACTED]

SYDNEY BISEXUAL SUPPORT NETWORK

A bi-friendly space for bisexuals and other bi-friendly people. There is no requirement to have any particular sexuality or identity-of-sexuality, just the desire to be part of a space where bisexuality (and transsexuality) is accepted and respected. We have regular social events and meet formally on the second Monday of every month at 8pm.

66 Albion St
(the old Childrens Court, cnr Commonwealth St) Surry Hills, NSW 2010
Tel: [REDACTED]

TRANSGENDER LIBERATION COALITION

A group of transys who are interested in promoting the human rights of all transys. We are trying to change the way our society treats us and improve things for transys. We Believe that transys have the power to change things for the better and the best way to do this is for all of us to unite and fight for our right to be treated in the same way as any other group in NSW. We try to negotiate changes with government departments, government policy, law and social attitudes.

PO Box 208
Kings Cross NSW 2011
Ph: Nadine (02) [REDACTED]

WESTERN SYDNEY AIDS PREVENTION SERVICE

AIDS information & support services.

26 Kendall St
Harris Park NSW 2150
Tel: (02) [REDACTED]
Fax: (02) [REDACTED]

AUSTRALIAN CAPITAL TERRITORY

SEAHORSE SOCIETY OF NSW - CANBERRA CHAPTER

Social and support group for crossdressers and transgender people.

PO Box 4707
Kingston ACT 2604
Tel: (015) [REDACTED]

W.I.S.E. WORKERS IN SEX EMPLOYMENT

Provides services for people working in the sex industry in the ACT.

29 Lonsdale St / PO Box 67
Braddon ACT 2601
Tel: (06) [REDACTED]

VICTORIA

THE CHAMELEON SOCIETY OF VICTORIA (successor to the E.B.P)

Provides a monthly social meeting and newsletter aimed at eliminating and minimising the isolation of transgender people in Victoria.

PO Box 500
Williamstown VIC 3016

SEAHORSE CLUB OF VICTORIA

A fully constituted self-help group financed only by members annual subscriptions. Full or postal membership is open to all transpersons

who understand and respect the purpose of the club, their partners are also considered to be members. We have private monthly social meetings with speakers from relevant professions. Besides a monthly magazine and a library, we offer a contact mail service. GPO Box 2337V
Melbourne VIC 3001

TRANSGENDER LIBERATION AND CARE

TLC is for Victorians (interstate visitors are most welcome) who identify as either M2F or F2M transgender (or transsexual). The group meets monthly and our aim is to address and challenge a diverse range of issues raised and prioritised by our membership
PO Box 1674
Preston South VIC 3072

QUEENSLAND

(ATSAQ) AUSTRALIAN TRANSGENDERIST SUPPORT ASSOC. OF QLD

A non profit organisation providing counselling, support, referral and information, crisis counselling, drug and alcohol for transgender people, their families and friends.

PO Box 212
New Farm QLD 4005

24 hour help line
Tel: (07) [REDACTED]

SEAHORSE SOCIETY OF QLD

We provide a safe environment for members and other persons in their lives to meet and socialize and to offer counselling where possible. We are wholly self funded and open to both sexes no matter of their sexual preference

PO Box 574
Annerley QLD 4102

SQWISI (Self Health for Queensland Workers in the Sex Industry)

Provides a confidential service for trannies working in the sex industry in QLD, with offices in Brisbane, the gold Coast and Cairns. Also provides an exit and re-training house for sex workers wanting to leave the sex industry.

65 Vulture St
PO Box 5689
West End QLD 4101
Tel: (07) [REDACTED] (24 hour)
Fax: (07) [REDACTED]

17 Lavarack Rd
Nobby Beach

Unit 1/ 3 Alison St
Surfers Paradise QLD 4217
Tel: (075) [REDACTED] (24 hour)
Fax: (075) [REDACTED]

94 Lake St
PO Box 6041
Cairns QLD 4870
Tel: (070) [REDACTED] (24 hour)
Fax: (070) [REDACTED]

Exit and re-training house.

Tel: (07) [REDACTED]
(07) [REDACTED] (24 hour)

THE GENDER CLINIC

Doctors from private practices with an understanding of the transgenderist community are available for consultation by appointment each Wednesday afternoon 1.30pm-5.30pm.

484 Adelaide St
Brisbane
PO Box 212
New Farm QLD 4005
Tel: (07) [REDACTED]

WESTERN AUSTRALIA

CHAMELEON SOCIETY

Provides support to crossdressers, their relatives and friends.

PO Box 367
Victoria park WA 6100

S.I.E.R.A.

Provides a confidential service for trannies working in the sex industry in WA.

14 Walker Ave
West Perth 6005
Tel: (09) [REDACTED]
Fax: (09) [REDACTED]

THE GENDER COUNCIL OF AUSTRALIA (W.A.) INC.

We are a council of concerned people who seek to create a platform to improve the quality of life for people living with gender dysphoria. Our members include representatives from both the gender and the general community.

PO Box 58
Victoria Park WA 6100
Tel: (09) [REDACTED] (spokesperson)
E-Mail: [REDACTED]

SOUTH AUSTRALIA

CHAMELEONS GROUP

A support group for the transgender

community of South Australia.

64 Fullarton Rd
Norwood
PO Box 907
Kent Town 5071

Tel: (08) [REDACTED]
Fax: (08) [REDACTED]

DARLING HOUSE COMMUNITY LIBRARY

A non-profit, community based resource that operates as a joint project of the AIDS Council of SA and the Gay and Lesbian Counselling Service of SA Inc.

64 Fullarton Rd Norwood
PO Box 907 Kent Town
South Australia 5071
Tel: (08) [REDACTED]
Fax: (08) [REDACTED]

NATIONAL

AUSTRALIAN BISEXUAL NETWORK

A support network for bisexual people. Many groups actively encourage participation by transgender people. Provides referral for state and regional groups and a monthly newsletter and printed information resources on bisexual issues.

PO Box 490
Lutwyche QLD 4030

INTERNATIONAL

BEAUMONT SOCIETY

Non-profit organisation for crossdressers throughout Great Britain. Social functions, counselling and a contact system for members. Provides a magazine - Beaumont magazine
BM Box 3084
London WCIN 3XX
England

CROSS-TALK

The transgender community news & information monthly.
PO Box 944,
Woodland Hills CA 91365
U.S.A.

FTM

A group for female to male transgender people. Provides a quarterly newsletter - FTM.
5337 College Ave #142
Oakland CA
U.S.A. 94618

FTM UK

A group for female to male transgender people. Provides a newsletter - Boys Own.

Yew Bank House
24 Mauldeth Rd
Heaton Mersey
Stockport, SK4 3NE
United Kingdom

GENDER TRUST (THE)

A help group for those who consider themselves transsexual, gender dysphoric or transgendered. Provides trained counsellors, psychologists and psychotherapists and a there is a referral procedure to a choice of other therapists.

BM Gentrust
London WCIN 3XX
England

IKHLAS

IKHLAS drop in centre is a community program by Pink Triangle Malaysia. Provides an outreach project, HIV/AIDS information, counselling, medication, workshop and skill building for transgender people in Kuala Lumpur Malaysia.

PO Box 11859, 50760
Kuala Lumpur
Malaysia
Tel: 6-03 [REDACTED]
Fax: 6-03 [REDACTED]

INTERNATIONAL FOUNDATION FOR GENDER EDUCATION

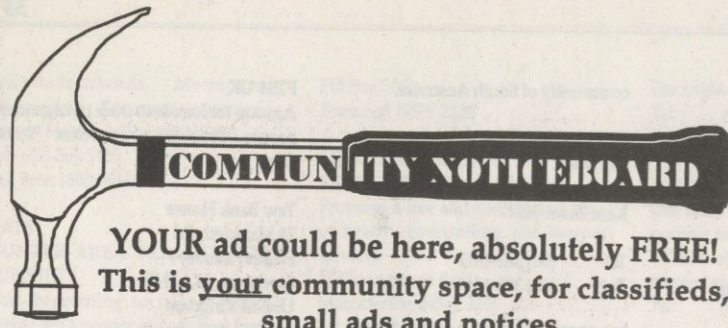
Educational and service organisation designed to serve as an effective communications medium, outreach device, and networking facility for the entire TV/TS Community and those affected by the Community. Publisher of materials relevant to the TV/TS theme. Produces TV/TS journal - Tapestry.
PO Box 367
Wayland MA
U.S.A. 01778

NEW ZEALAND PROSTITUTES COLLECTIVE OF WELLINGTON

Provides a confidential service for trannies working in the sex industry.
PO Box 11/412
Manner St
Wellington
New Zealand
Tel: (64) [REDACTED]
Fax: (64) [REDACTED]

NEW ZEALAND PROSTITUTES COLLECTIVE OF AUCKLAND

PO Box 68 509
Newton, Auckland
New Zealand
Tel/Fax: (09) [REDACTED]



COMMUNITY NOTICEBOARD

YOUR ad could be here, absolutely FREE!
This is your community space, for classifieds,
small ads and notices.
Send us yours today!

**BREASTS
FOR SALE**
see ad on page 3

**KAREN THURTELL
HORTICULTURE**

(02) [REDACTED]
2/15 Reed St
Cremorne NSW 2090
Karen Thurtell B.Sc,M.A.I.H
Horticulture Consultant
Garden Advisor

**ATTENTION tranny boys!
FOR SALE**

One hardly used, absolutely
near new prosthetic flaccid
penis, as made by a professional
camouflage prothesist.
\$400 ono Looks almost real!
Max (02) [REDACTED]

**FTM CONTACT
WANTED**

32 yr old Indonesion FTM seeks
contact from Australian FTMs.
He plans to visit Australia soon,
and is interested in surgery.
Any contact would be
appreciated. Send your letters/
details to *Polare*.

**PERSONAL
TRAINING!**

Caroline Layt
Personal Trainer
Level 2 Fitness Instructor
Reasonable Rates
Mobile 0411 [REDACTED]
Hm (02) [REDACTED]

Spiritual Guidance
Soltec

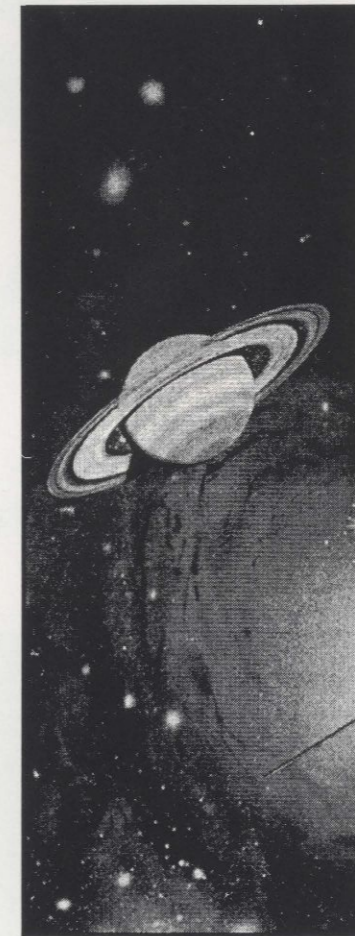
Experienced channel provides
authentic one-to-one
encounters with your spiritual
guides and beyond.
Interstate enquiries also welcome.
(02) [REDACTED]

**MTF PENFRIEND
WANTED**

MTF in prison in England,
would like pen pals to
correspond with.


If interested, contact
the Gender Centre for details
on (02) [REDACTED]

**Feel like you're from
another planet?**



We'll help you to feel at home.

(02) [REDACTED]
The Gender Centre

The background of the entire page is a repeating pattern of stylized, interconnected teardrop or leaf-like shapes. These shapes are outlined in a light, shimmering white or silver color, set against a dark teal or forest green background. The pattern is dense and covers the entire surface.

**What's your
cup of tea?**