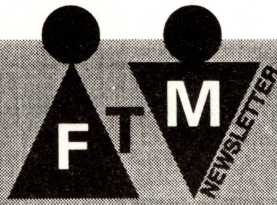


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In this issue...

Big Changes at FTM

I must start off this issue with a gigantic THANK YOU to everyone who responded to my appeal for funds in the July issue (#28). As you can see, this is #29, and it's already January. I skipped October to allow us to get a little bit more solvent. All of you who responded with donations are to be commended. Please accept my sincere gratitude, and please know that your contribution has helped to keep this community forum afloat.

In the past six months I have been mulling over how to address our funding difficulties, and also how to handle the increasing demands on my time that keep me from attending most of our monthly meetings and from processing the mail and phone requests for information as quickly as I'd like. Here are some of my ideas:

After this issue, **we will trim the mailing list to limit distribution only to those who have subscribed and/or sent money in the last six months.** Anyone who wishes to continue to receive the newsletter in 1996 will need to send in subscription fees during 1995. I realize this is a break from the tradition that Lou Sullivan began when he started this newsletter in 1987. But much like the U.S. Constitution has had to be amended as our society has evolved, it's time for us to deal with the reality that our group and the FTM Newsletter has grown phenomenally, and it can no longer be sustained as the "spare-time" enterprise of one man, sneaking a few xerox copies of 4-page newsletters on the office copy machine. Instead, it's the "spare-time" enterprise of several men that costs a few thousand dollars a year to pay for printing, postage, envelopes, paper and voicemail charges.

The cost for a set of back issues of the FTM Newsletter has stood at \$15.00 for several years. And now we've run out of copies of every issue except #27 and #28 (and #29!). This means someone (usually me) has to go to the copy center and reproduce (or have reproduced) 10 or 20 copies of each issue every month or two. I'd have more copies made, but the cost is very high, and I don't think it's smart to tie up our funds in back issues we may not sell. This xeroxing, plus all the collating and folding (which I do myself to save money) is getting to be a real pain! So David Harrison suggested, and Stafford and I thought it was a great idea, that **we put together a booklet of "The Best of FTM."** This book would include the best arti-

cles and Malebox responses from issues 1 through 30, and maybe a few original pieces, too. Then, people could get most of the information they're looking for in one, easy-to-throw-in-an-envelope-and-mail package. We will still have sets of back issues available for those who want the full historical picture of the FTM Newsletter development. But to encourage people not to order the back issues unless they REALLY NEED them, I'm **raising the price of a set to \$30.00**, effective immediately. The price of the booklet will probably be closer to \$10.00 (or less?), and it should be ready in time for the **FTM Convention in August** (more about the convention elsewhere in this issue).

It's time to go for non-profit status so we can apply for grants to help support the networking and educational efforts we sustain. I have resisted this somewhat in the past because I felt the amount of money needed to keep things afloat did not warrant it, and because I felt that it was safer somehow to remain in the underground. Things have changed in the last year, and it seems possible for us to accomplish a lot more if enough of us are willing to put ourselves on the front lines. This means really devoting some time to helping us help ourselves, from organizing meetings and learning leadership skills, to writing letters and articles, to public speaking, to phone support. It means **we'll need to have officers and a board of directors**, and we'll need to decide whether these positions should be appointed or elected. If we choose election, we have to figure out how to make that happen (remember, mailings cost money, and vote counting takes time—people have to volunteer to do these tasks). We'll be talking about this at our January meeting, so readers can expect more information on this in the April issue (#30). If any of you have ideas, opinions or feelings about this concept that you wish to express, or if you want to volunteer for anything, please write (or phone the voice mailbox, 510-287-2646) and express yourself!

Changing topics, we've had some interesting meetings lately. In October, Mr. Larry Brinkin of the San Francisco Human Rights Commission staff spoke about the results of public hearings last May to investigate discrimination against transgendered people. The Commission contracted with yours truly to write the report on the investigation, including

findings and recommendations. Copies of this report, which has been called "ground-breaking" in the local press, are available from Mr. Brinkin (415-252-2510). One of the recommendations was that the **City of San Francisco add "gender identity" to the list of protected classes under its Human Rights ordinances.** On Monday, December 12, the City Supervisors did just that. The vote must be repeated December 19, and if all goes well, the Mayor will hold a signing ceremony on December 30, 1994. But that's not all: the right wing conservatives are starting to come out in force against us here, and I expect we are in for a battle, so brace yourselves. Meanwhile, **the San Francisco Lesbigan parade committee voted on December 11 to officially title San Francisco's June 1995 parade the Lesbian Gay Bisexual Transgender Pride Celebration Parade.** At last we are included! FTM will march again this year, and I hope our contingent will be larger than last year's brave assembly.

At our December meeting, Alice Webb, LCSW and executive director of the Harry Benjamin International Gender Dysphoria Association (creators of the HBGIDA Standards of Care) was there to tell us that a new revision of the standards was under way and the organization would like our input. A number of people in attendance took advantage of the opportunity to criticize HBGIDA for wielding too much power over us, or for providing therapists with a tool (the Standards) to keep us under their thumbs. Ms. Webb tried to explain that HBGIDA has no official power, and that the standards were developed to protect consumers (us) from unscrupulous providers, based on the assumption that a provider's status as a member of HBGIDA would assure us that the provider had knowledge of gender issues and had a network of resources to rely on to obtain the best possible care for us. As we know, it hasn't always worked that way. But Ms. Webb wants to improve things, and I think we should try to work with her, rather than against her, just as we work with the therapists and surgeons we choose, because adversarial relationships do not necessarily get anyone the results he or she desires. Besides, we're going to need all the energy we can get to battle the right wing conservatives. We need HBGIDA, and all the providers, as allies in this battle, not as paternalistic certifiers of our status as either "diagnosed" or "cured," but as equal human beings who can also help educate away the fear and ignorance. Stay tuned!

Who is Thurin Schiminke?

by James Green

Thurin Schiminke is a man who makes a difference. Now an instructor in the Sociology department at Northern Arizona University (NAU) who teaches a course called "Transsexualism in Society," Thurin started out in a female body which carried the name Carmen. Growing up in Los Angeles a classic "tomboy," relating better with boys than with girls, struggling with gender identity issues without any language to use to talk about it, nor anyone to talk to, Carmen eventually turned to drugs and alcohol to mask the pain and confusion, and wound up in a treatment program in 1984. Going through the 12 steps in the process of staying "clean and sober," Carmen kept a diary, and excerpts from that diary, with Thurin's introduction, have become the primary text in Thurin's sociology class.

Thurin's manuscript is a good read. He is thoughtful and honest in describing the events of his life and his feelings. He talks about trying to be a "real woman" by marrying a man in 1989. Two years later, Carmen had decided on divorce. Carmen wrote: "Whenever we make love, I simply disappear into another dimension. What an awful, lying way to live. The time has come to end it even if I do disgrace my German family

upbringing. I am a bad person and a failure as a woman."

Thurin was open and up-front about his transsexuality once he had done the research and accepted himself. Virtually alone (without other TS support) in Flagstaff, he found his own social and medical support team and conducted his transition virtually in public, lecturing in classes, speaking on the radio, processing it with his AA sponsor. Everything went pretty well for him. Of course his diary notes the rough spots, the times when he was frightened or depressed; but in the long run, it's a real success story.

Then he hit the big time. Arizona Governor Fife Symington heard about the class that Thurin was teaching (as a grad student) and had a fit about public monies being used to promote "alternative lifestyles" or some such incomprehending statement, and the

press jumped on it like fish to bait. From the front page of the Lumberjack, a Flagstaff paper, to U. Magazine (I don't know what kind of publication that is), to the National Enquirer, Thurin had to deal with considerable public



scrutiny. Stories appeared in over 150 papers nationwide. "Crazed officials have arranged with bizarre transsexual to teach a college course called 'Transsexuals in Society' — in which the gender-bending educator actually makes students cross-dress!" screamed the Enquirer. The Enquirer reporter sought a controversial quote from an opponent and he found one in the words of Sid Taylor, research director of the National Taxpayers' Foundation in Washington, D.C., who said, "This not only wastes students' time, but warps their minds with crazy information about wacko sexual perversions. It's an outrage!" The

President of NAU stood up for academic freedom, and the course continued. The assignment to cross-dress was actually an extra credit option, one that many students thought was instructive. Of course, Thurin was invited to appear on The Montel Williams Show, the Jerry Springer Show, and Donahue, but he didn't go. He has stayed at his teaching post since the President of NAU had reservations about the usefulness of airing local issues on national talk shows, yet Thurin continues to speak publicly, and to provide referral assistance to other FTMs in Arizona.

This year Thurin has twice visited San Francisco and attended FTM meetings. It's been great to get to know him and to network with him. He has made his manuscript available at a cost of \$10.00 (if you want a copy, send your check or money order, made out to Thurin Schiminke, to FTM, and we will forward it to him). And he continues to support the cause of research and education about transsexualism in the hope of one day lifting the stigma and shame and oppression that work to keep us from fulfilling ourselves. Thurin's story is an inspirational one, like so many of our stories. I, for one, am glad that he is willing to tell it.

A Remembrance

by Kim Ing Information Re

The time has passed quickly, and I would like to reflect briefly to retrieve the memory or a friend now gone. Thoughts of the Neptune Society often evoke memories of sadness at the death of a loved one. After all, it serves our needs at the end of life rather than at the beginning of life or during life. Certainly the death of Lou Sullivan brought sadness to my heart, but his life was celebrated as a rare gift to the living at the Neptune Society during his memorial service [in March of 1991].

Seldom has such an event left me with more of a sense of gratitude than with loss. Somehow, the essence of what Lou was all about permeated that gathering through his family and friends. Most of the people who

spoke of their memories of Lou let all of us feel included in those memories. Friends of Lou, many of them strangers to the family, were embraced, not kept at a distance.

In the eleven or twelve years that I knew Lou, inclusion into his life was really what he was all about. He embraced one and all, and that is why he could be a friend, an advocate, a story-teller, and a communicator. Although Lou was opinionated and stirred the pot, he did not generate animosity toward himself because he was patient, empathetic and always a good listener. He persuaded through friendly reasoning, not confrontation.

Eight or nine years ago I was asked to give a talk at the Pacific Center concerning gender dysphoria. I called Lou and asked him to appear with me because I thought that it would

make a much more balanced program. He told me he was very busy and had plans for that date. Later that evening he called me back and said that he had thought about it and would change his plans and come. He did come, and he added immeasurably to the program. After the discussion period, he took a number of female-to-male transsexuals in the audience into another room and met with them, answering their more specific questions.

Lou's willingness to interrupt his own life to help others speaks for itself.

We all miss Lou for different reasons, but his death should encourage us to emulate the traits we all admired in him as our personal memorials to the spirit of his life. Lou would have applauded that kind of active remembrance.

The Interview

by Jay Information

It's late afternoon, a beautiful, sunny fall day. I am sitting at the cafe, sipping a mocha, trying to get comfortable and feel functional. I am wearing a beautiful dark grey glen plaid Hickey-Freeman custom suit with a faint blue underweave that matches my eyes. I am also wearing a crisply starched white cotton button-down shirt, and a maroon silk tie with a repeating pattern of tiny beige seashells, probably miniature scallops. My shoes are serious black cap-toe oxfords. I am impeccably shaved and my hair is perfectly groomed. And I am incredibly uncomfortable.

I am getting ready to go interview at a small Berkeley law firm, and I feel abysmally unprepared on some levels and completely at ease on others. Strangely, I am prepared emotionally and mentally to stand my ground, be friendly and competent, answer all questions politely without sabotaging myself, and act like I really would be the best candidate for the position.

Unfortunately, I am uncomfortable in my clothes, even though I love suits and ties, and have a magnificent clothing collection. Clothing, after all, was for many years, the only way I knew how to transition. It was as if I awoke in the mornings and dressed the internal energy of my being in the appropriate clothing, and tried hard to ignore the body in between. I am not certain that I really pass today, even though most of the feedback I receive from the outside world confirms that I do. I am not certain because I have breasts concealed by a jogging bra under two undershirts.

God, I will be so grateful when I can wear a shirt with a simple undershirt and be able to take off my jacket without fear. I am also unsure because I have no evidence of what I consider real beard growth. Strange, given that I actually do have some beard growth on my chin, upper lip, and my short side-burns. It's just that it's not thick, or fast-growing enough, and there's none on the sides of my face, that tell-tale area where most men have a shadow, the faint appearance of stubble.

However, looking around me, I see that other guys' shirt fronts wrinkle similarly under their suits, even though they do not have breasts, and many guys don't seem to have any more evidence of facial hair than I do. So, I should relax. At least I have the body language, size, basic shape and structure, clothing, and most of the mannerisms correct, as, after all I

am the real thing internally even if the body differs. So my voice isn't quite low enough. I need to talk carefully, be confident, and take my time.

It is excruciating, this twilight zone where I am in some ways "neither" and at other times "both", and cannot fully feel my power since my body and culturalization impede my progress at every turn. I am a male who has been taught, through the false appearance of my body, to be self-sacrificing, overly gentle, non-assertive. I struggle, in these days of feminism, to understand why in some ways I have been less assertive than many women I have known. And I struggle further to sort out which of my attitudes are culturally-induced and which are learned self-destructivisms based on the terror of a childhood spent, not merely as a transgendered being, but as a survivor of extreme physical, emotional, and sexual abuse at the hands of alcoholic, dysfunctional and highly fundamentalist family members.

**"This is my life,
my body, my
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So I must
go forward."**

Through this lens I firmly perceive the never-never land of the recovery issues and damage sustained by being a male soul in a female body who was subjected to sexual abuse. I wonder about the subtle psychological ramifications of this experience, and am aware that I am now in a realm of personal recovery that I do not even hope to hear discussed among my recovering survivor peers, and wonder about the existence of research to uncover the patterns resulting from such abuse.

My recovery-peers present another problem. After seventeen years spent in therapy, self-help groups, and assorted twelve-step programs, the general consensus among my peers is that, despite eleven years of sobriety, I have "lost it" entirely by choosing to transition. My recovery-peers, former friends, have decided that I no longer have recovery since my decision to embark on this path to claim my true self, in spite of the fact that the most important part of the program is "to thine own self be true." I know of no other way to be truer to my self than to transition.

The idea that I am changing my body to match my internal self is abhorrent to them, and I have come to the awareness that I am seen as my body by them, in a severely objectified way, in fact, the same objectified way that they claim is oppressive when it is done to them. Yet in my case, it is appropriate, they believe, as this most profoundly self-loving and self-accepting act of mine is construed by them as self-mutilation, internalized hatred of myself as a woman, victimization at the hands of a society that hates women, in fact, such severe hatred that I have been driven to this extreme. They are saddened, horrified, and immediately want nothing to do with me.

My only answer is that this is my life, my body, my presence in the world, and my very economic survival that are at stake here. So I must go forward. I go forward, encouraged by the presence of my brothers on this path, though I truly know none of them well as yet, trusting the path to unfold as it should, though none of my experience in life thus far has taught me that I am particularly safe in trusting anything. However, I trust myself, have always trusted myself, in the belief that I am a man, regardless of the inconvenient lie of my physical form.

It is now almost time for the interview, and I have to go through with it with as much confidence as possible, hoping I am sufficiently in touch with my true self to come across as polished, confident, an authentic guy, a capable paralegal seeking work in an extremely conservative realm. It would be so much easier to sell myself professionally with a neatly trimmed beard and a flat chest. Yet, I know, day by day, this awkwardness will pass, and I will become fully myself.

These days, time moves so rapidly in some ways as I let go of my past, yet in other ways, so slowly. The most important and comforting thing I have learned in my entire process of self-healing is that no one in the world around me is aware of what I feel inside. No one can know what I feel unless I tell them. I am safe behind my own boundaries, and my fears, insecurities and self-doubts about my interim physical form are private.

I am safe to go interview and present myself according to my inner being-ness, yet am exhausted by the inherent duplicity of my situation. I occasionally am envious of those who take their bodies for granted and are completely at ease in them. It must be wonderful. Yet I wonder if, being comfortable in them, they ever think these kinds of things. Or are all humans uncomfortable with their bodies to some degree?

Hours later, I smile, thoroughly proud of myself. I have done a fantastic interview, and was well-liked. Now I wait to see the results of my efforts.



By
Blake

Transsexualism and The X Chromosome

Many of us are aware of the recent media focus on the psychological and sociological aspects of transsexualism. The number of talk shows on both television and radio has increased, along with articles in major newspapers and magazines, such as the one in the July 18, 1994 issue of *The New Yorker* magazine. In addition, there have been announcements of scientific discoveries which challenge the prevailing view of sex determination and sex differentiation. The implications of these discoveries with regard to a biological basis for transsexualism has not been so widely reported.

The August 30, 1994 issue of *The New York Times* carried an article on the discovery of a gene believed to be responsible for reversing the sex of those with an XY karyotype. The gene, which is called DSS for Dosage Sensitive Sex Reversal, has been mapped to the short arm of the X-chromosome. The significance of this is profound because up until now, the default mode of a developing fetus was believed to be female. According to this model, the absence or presence of testosterone at critical times either left the fetus in a nascent female state, or masculinized it. Now it appears that the default mode is neutral and that just as there is a gene on the Y-chromosome (SRY) which codes for development along male lines, there is a gene on the X-chromosome which causes development along female lines. This provides new opportunities to research the possible biological basis of transsexualism in general, and female-to-male transsexualism in particular.

Sexual development has several different components, aside from the appearance and function of the external genitalia. There is also a difference between sex determination and sex differentia-

tion. Determination, in biological terms, is the acquisition of the ability to express a certain constellation of genes and not others. Differentiation is the outward expression of those genes. Determination and differentiation may be widely separated in developmental time and may be reversible. It is a complex interaction of genetic endowment and environmental influences that leads to the final outcome. Sex differentiation has the following components: chromosomal sex—usually, but not always, 46, XX for females, and 46, XY for males; H-Y antigenic sex, recognized through a microscope in most cases on the surface of 46, XY but not 46, XX cells and which plays a role in differentiation of the male embryo; gonadal sex—usually either ovarian or testicular or, rarely, as a combination ovotestis; prenatal hormonal sex—either masculinizing, feminizing, or

"There does not have to be a gene for transsexualism in order for transsexualism to be genetically influenced"

sometimes failing; sex of the internal reproductive organs; sex of the external reproductive organs; neuroanatomical sex (of the brain and central nervous system); the sex of assignment and rearing. (Some also add sexual orientation to the list.) It is easy to see that enormous variation is possible in the alignment of these traits.

In 46, XX females, some of the genes on one of the X-chromosomes are inactivated for the purpose of equalizing the dosages of certain genes between the sexes. Although X-

chromosome inactivation is still not very well understood, one of the tests which relies on it is the karyotype. Since the inactivated X-chromosome is visible as a densely staining spot (called a Barr Body) which can be seen under a microscope, this test is routinely used to screen people competing as women in athletic competition. The karyotype verifies the presence of the second X chromosome, without which an athlete cannot compete as a woman. In the 1960's and 1970's this same test was routinely used in the diagnosis and treatment of female-to-male transsexuals (FTMs). After several years of these karyotypes confirming the presence of Barr Bodies, the administration of the test on a routine basis was abandoned and one of several psychiatric diagnoses was considered to have been confirmed: A biologically normal female who persists in the belief that she is really a member of the opposite sex. One of the problems with this approach is that a karyotype gives limited information. It tells the size, shape, number and appearance of the chromosomes, but does not analyze their genetic material.

It is interesting that although structural and neuroanatomical differences are recognized to exist between males and females, transsexualism is largely considered to be a "psychiatric disorder with a surgical solution." Limited studies comparing the anatomic brain sex of male-to-female transsexuals (MTFs) with their non-transsexual counterparts have been reported, but it would appear that no corresponding studies have been done for FTMs. Since the establishment of a psychiatric diagnosis and its inclusion in *The Diagnostic and Statistical Manual of the American Psychiatric Association* (DSM), transsexuals have had to endure the repercussions of being stigma-

tized by the medical-psychological-psychiatric community, as well as by the society at large. This stigma affects not only the transsexual, but family, friends, employers and even the medical providers who treat them.

Conferring a psychiatric diagnosis upon an individual places an ethical responsibility upon that professional to review, challenge, or even change it should it be found to have been conferred in error. All too often, once a diagnosis has been made, no further investigation is done. While it is true that there are people with psychiatric conditions who happen to be transsexual and that being gender incongruent has psychological effects, it remains to be proven whether or not transsexualism—in and of itself—is a mental illness or psychiatric disorder. Whatever socialization people are exposed to, whatever programming they receive, the extent to which they incorporate it depends on what is inherent to them. I believe that is why there are so few transsexuals. If transsexuals possess a different genetic makeup, what might it look like?

Some possibilities are: transsexuals and non-transsexuals may share a gene or genes which determine anatomy and receptivity of the brain with regard to the imprinting of gender identity, but somehow these are expressed differently in the two populations; transsexuals and non-transsexuals have a different genetic makeup, with one or the other group possessing or lacking a gene or genes that the other has; X-chromosome inactivation variations in FTMs might cause a gene on the X-chromosome which is related to the maleness gene on the Y-chromosome to be present in a different-than-usual dosage, etc. These are just a few of the possibilities which should be being considered in medical and scientific circles. There does not have to be a gene for transsexualism in order for transsexualism to be genetically influenced.

FTMs are a grossly understudied population, even though there is a wealth of information to be gained. MTFs have been studied very broadly for a longer period of



Every cell of the body contains the full chromosome compliment. The genes are the units of information storage for all the traits we possess and are carried on the chromosomes. This is an electronmicrograph of the set of chromosomes of a human male cell. Note the X in the center and the Y below and left of the X.

time. If the two populations are studied jointly, more progress is likely to be made. It is important to point out here that the transsexual experience of gender incongruity does not require the study of genetics to legitimize it. However, study of genetics is advocated to explore and to better understand the diversity inherent in the human population. Species are always evolving and genetic variation is a component part of this process. Medicine tends to pathologize individuals who, when viewed in the larger scheme of things, may be part of a natural trend toward diversity.

Last August, San Francisco

radio station KFRC hosted James Green, editor of the FTM Newsletter and Judy Van Maasdam of the Palo Alto Gender Dysphoria Program. During the talk show program, a telephone caller asked why transsexualism was considered a psychiatric disorder, rather than a medical condition, requiring those who present for surgery to have a letter from a psychiatrist or other member of the psychology professions. Ms. Van Maasdam replied that the inclusion of transsexualism in the DSM is a diagnostic tool which provides necessary guidelines for treatment in the absence of "objective med-

ical tests." In other words, until there is some sort of test that can be used like a blood test to verify a physical cause, psychiatric guidelines have to be used to determine a course of treatment.

My response to that is, grab a geneticist, roll up your sleeves and GET TO WORK!

FTM is interested in hearing from those who have been tested by any means other than a routine karyotype, especially if DNA probes were involved. We are also interested in hearing from professionals who are engaged in administering genetic tests to their FTM clients.

New Yorker Article Response

by James Green

The July 18, 1994 issue of the New Yorker contained a ground-breaking article on FTMs by fiction writer and therapist Amy Bloom. This article elevated the discussion about FTM/TS existence and issues out of the pages of psychology and surgery journals and put it squarely in the face of the intelligentsia, normally a squeamish lot who don't like to admit to having bodies to deal with at all, let alone bodies that one might choose to change. If readers of this newsletter have not seen this article, I strongly recommend a trip to the library.

Several issues later, two letters appeared. The first was from FTM Jeff Shevlowitz, and the second from three practitioners at Johns Hopkins Medical Institution. The contrast between these two letters was very instructive. I will reproduce the letters below:

Mr. J. Information writes: "As a female-to-male transsexual, I have only the highest compliments for Amy Bloom and her presentation of our situation ("The Body Lies," July 18th). There is one aspect, however, that Ms. Bloom failed to mention: the evolutionary aspect of sexual preference. When I began "the project," I was certain I would find a nice woman, settle down, marry, raise a family. What I did not anticipate was the gradual discovery of my own bisexuality. Many FTMs I have known and spoken with have also reported this evolution. Once you come to terms with wanting someone to accept, love, and value you for your intrinsic qualities as a human being, it is easy to begin viewing others the same way."

Peter J. Fagan, Ph.D., Chester W. Schmidt, Jr., M.D., and Thomas N. Wise, M.D., all signed the following letter, which was printed below Mr. J. Information's letter: "For the past twenty years, we have evaluated and empirically studied gender-dysphoric women who have undergone sexual reassignment. Many of Amy Bloom's observations about the essential psychological stability of these women are correct, but, upon more careful study, such female-to-male transsexuals appear to be individuals who are fundamentally homophillic [lesbian] but cannot

consciously accept their sexual orientation. Contrary to the opinions expressed by Dr. Laub in Ms. Bloom's article, there is absolutely no indication that there is a biological condition causing gender dysphoria. Although surgery seems to confer benefits on some individuals, it should be considered psychosurgery, not a treatment for a biological disorder."

I find the juxtaposition of these letters to be quite telling. Mr. J. Information is clearly a thoughtful man who has progressed from self-acceptance to the ability to see others for who they are. Yet the doctors are quick to judge. From my own experience talking with hundreds of FTMs, these doctors seem to be reflecting their own bias. The patients who came to them for treatment probably perceived that bias, and reflected it back to them in order to fulfill the doctors' expectations and thus qualify for treatment.

I spoke with Dr. Donald Laub about his reaction to both the article and to the letter from his professional colleagues. His response to the article was generally favorable, though he felt many of his remarks were taken out of context. Dr. Laub said that the metoidioplasty operation was "under-appreciated." The procedure is quite satisfactory for those who can comprehend human sexual union at a higher echelon of subtlety, and this fact was not conveyed at all.

Dr. Gail Lebovic, Laub's associate, also felt that she and Dr. Laub were characterized as being quite casual, even "flippant" about genital reconstruction, when in truth they are both "very serious about our work." She also said that the article's recurring theme seemed to be money. "Yes, the cost is extraordinary," Dr. Lebovic said, "But she [Ms. Bloom] implied it all goes straight to the doctor's pocket, and that's not true. The costs include the hospital fees, anesthesiologist, lab work. Surgeon's fees in themselves are not extraordinary for these procedures."

Dr. Laub's response to the letter from the Johns Hopkins trio was very firm: "They're wrong," he said. "I am convinced that this is a real somatic [of the body, physical] condition, the test for which we have not discovered." For myself, I wonder where these doctors get off expounding about their 20 years of working with

FTMs: it's my understanding that they haven't had a program at Johns Hopkins for years. And you can see how seriously they take us, when they call us women. I'd like to see them visit one of our San Francisco meetings and see how many of us they can find who are unable to accept a "homophillic" sexual orientation, when there are numerous members who identify as gay men, and many of us who came out of the lesbian world who had no problem with that identification. And then there are those who, like Mr. J. Information who have acknowledged their bisexuality. What would all of us do to these doctors' theory?

With respect to the original article itself, there are two major issues that are incorrect: The first is an inaccurate report of the duration of hormone therapy for Female-To-Male transsexuals. Ms. Bloom says "six months to two years of biweekly intramuscular injections of two hundred milligrams of Depo-Testosterone...". In truth, the hormones must be taken for the rest of one's life, or as long as one wishes to sustain their effects. The dosage and frequency may vary, depending upon the individual's body chemistry. The idea is to maintain normal male testosterone levels in the body. Some people can do this with an injection every three weeks, others require it every ten days. Usually the ten day regimen is accompanied by an incremental decrease in the quantity administered. There are also alternative types of testosterone—"Depo" is only one of the two common types prescribed in this area, and there are other types preferred by other endocrinologists. The type prescribed depends on the physician's preference and also on the individual's body chemistry.

Ms. Bloom seems to have confused the duration of hormone therapy with the time frames commonly recommended for surgery by most gender clinics. The candidate is usually cleared for bilateral mastectomy after six months of hormones and cross-living; and most surgeons prefer the candidate to have lived fully as a man for at least two years before undergoing genital reconstruction. This is to be certain that the individual has a clear picture of what his life is like as a man and is not going to have regrets about making this radical physical change. These time

frames are guidelines; individual circumstances vary.

The other major issue that I have with the article is Dr. Laub's apparent assumption that men who have undergone the metoidioplasty procedure are not able to use their penis for penetration. This is not true. Many are able to penetrate their partners, though not very deeply. Dr. Laub is quoted as saying that the sexual activity practiced by these men is lesbian sex, as if heterosexual men do not have sex in any other way than full penile intromission, which is also not true. FTM transsexuals are sterile; they do not ejaculate sperm when they have an orgasm. These men do not require penises that are designed to deposit sperm on a cervix. If such a man's partner desires deep penetration, the man can use his fingers or a dildo. This does not mean that sex with such a man is lesbian sex; both fingers and dildoes may be—and are—used by men with congenital penises. It is important to separate sex from gender when one is discussing transsexualism; otherwise things can become very confusing (as they are for the doctors from Johns Hopkins). Most FTMs would probably agree that having one's sexual performance classified as lesbian by a woman who knows how to appreciate it is one thing; having it classified as such by a man who implies it is inferior is another. In fact, Dr. Laub is very aware of the distinctions here, and he does know that limited penetration is possible with the metoidioplasty penis. It is too bad that what is generally a very favorable piece did not do justice to the fine distinctions between sex and gender nor take the opportunity to clearly make the case that men are not their penises.

Camp Trans

by James Green

Last August, Leslie Feinberg, Kodi Hendrix and I had the privilege of representing FTMs at the Michigan Womyn's Music Festival alternative campsite, Camp Trans, the encampment of the woman identified women transsexuals who have historically been barred from attending the festival if they are open about being

TS. Leslie and I each conducted 2 workshops for women who had to walk at least a mile and leave the festival land to attend. Over 50 women came to my first session, and 100 more came out to hear Leslie, author of the nearly classic "Stone Butch Blues." Some of the women who came out to our camp were already subscribers to the FTM Newsletter, and many more subsequently signed up.

Janice Walworth, one of the Camp Trans organizers, wrote an excellent report on the event in the November 1994 issue (#61) of "Cross-Talk, The Gender Community's News & Information Monthly," published by Kymberleigh Richards (P.O. Box 944, Woodland Hills, CA 91365, \$7.00/issue), and I will quote a few paragraphs from that article:

Ms. Walworth writes, "On Saturday morning, in an attempt to obtain clarification of the 'womyn born womyn' policy, protesters requested to meet with Communications coordinators Lucy Tatman and Sue Doerfer. They were asked whether Leslie Feinberg, James Green, and Kodi Hendrix would be permitted to buy tickets [to the festival] without violating festival policy. Leslie Feinberg introduced herself as a person who was born anatomically female but who passes and lives as a man and has a driver's license showing her sex as male. She asked whether she would be welcome to enter the festival. Ms. Tatman said that 'the festival would prefer not,' a statement she retracted after Ms. Feinberg declared that she would tell audiences on her upcoming book tour that she had received confirmation that she 'is not welcome at the Michigan Womyn's Music Festival.'"

"Kodi Hendrix then informed Ms. Tatman and Ms. Doerfer that he was born with both male and female genitalia and asked whether 'only half of [him] could come in.' James Green stated that he had no desire to enter the festival, and was only there in support of [his] transsexual sisters," but he wanted to know if he would be considered a woman by the festival owners using the same logic by which they consider male-to-female transsex-

uals to be men even after sex-change surgery. Ms. Tatman and Ms. Doerfer were unable to provide answers to either of these questions. Protesters then requested that they receive clarification of the policy regarding these three individuals from festival owners Lisa Vogel and Barbara Price.

"Less than an hour later, Ms. Tatman and Ms. Doerfer delivered a message from the festival owners declining to further clarify the term 'womyn born womyn' and stating that it is up to each individual to decide whether or not she is included in that definition....The decision was then made that protesters who wished to enter the festival would attempt to purchase tickets." [Leslie and Kodi did purchase tickets and enter the festival with the contingent—I did not.] "It was felt that the protest action had been highly successful. However, protesters still feel that the wording of the festival policy as 'womyn born womyn only' remains unclear and that it is still uncertain whether openly transsexual women will be allowed to attend the festival without fear of expulsion in the future. Unless there is further clarification of these issues in the interim and the festival abolishes its 'womyn born womyn only' policy, activists say they will continue their protests next year."

Camp Trans was a terrific opportunity for me to meet some incredible MTFs and non-transsexual women. I am really glad I was able to go, and to help force the examination of the logic of exclusion of women from women-only space. Men who feel they should have access to men-only space once they are cross-living should be able to support a woman's right to participate with respect in the women-only events she feels motivated to attend.

Los Angeles Center Hosts TG Meeting

The Los Angeles Gender Center held its first annual open-house meeting for Los Angeles area transsexual, transgendered, and cross-dressing communities on September 11th. About 100 people attended the event, which was an

opportunity to share information about services and programs related to transsexuals, transgendered people and cross-dressers. A highlight of the event was a panel discussion featuring several prominent gender community members including, Jeanne Ebner, mother of an MTF and founder of LOTS (Loved Ones of TransSexuals), Marie Keller, MFCC, author of the Ask Marie column in this newsletter, and Jeff Shevlowitz, a founder of the Under Construction Club (see Announcements elsewhere in this issue).

Hartford CT Transsexual Man Murdered

According to an April 19, '94 report in the Hartford Courant newspaper, the 21-year-old man accused of murdering 40-year-old Christiaan D'Arcy plead guilty and faces up to 32 years in prison. The murder occurred in January 1993. The convicted man, Thomas Saltonstall, strangled D'Arcy, placed the 240lb body in the trunk of D'Arcy's car and drove the car to a highway exit ramp where the car caught fire and Saltonstall abandoned it. According to the report, Saltonstall was married and it is not clear what kind of relationship he had with D'Arcy. The two men met at hairdressing school. "D'Arcy and Saltonstall did not seem to have much in common. D'Arcy was openly seeking new spiritual and sexual experiences while Saltonstall seemed to be a troubled youth—thrown out of the Army and beauty school." The report also noted that "D'Arcy, 40 was in the process of becoming a man. D'Arcy had a double mastectomy and received male hormones for years, which help transform his appearance to that of a dark-haired, 240-pound man. But he fell thousands of dollars short of the money needed for the final surgery, which would have given him a penis." The FTM Newsletter has not been informed about the result of the final sentencing, which was to have taken place in June, but we do know that at least one other FTM

continued
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Surgery Risks

Dear FTM,

Ever since the July 1994 issue of FTM arrived I have felt compelled to respond to the letter from Dan on p.8 regarding his botched surgery. My heart goes out to him, as I understand what he is going through. A similar thing happened to me when I had my surgery. However, I have a totally different perspective on it than Dan has. I also work in the medical field, so I have a little better understanding of anatomy, risks, etc. than the average person.

I don't think the surgeons can be blamed for what happened. I also had part of my surgery at the Oregon Health Sciences University, and I found the surgeons to be very competent in handling my case. I chose the clitoral free-up with a urethral hookup. I was warned that there was a possibility of a fistula developing. I didn't think it would happen to me. Guess what? It happened. I also developed strictures of the urethra and also had to undergo dilation of the urethra. I must admit, this is the most painful thing that I experienced during all of my surgeries. I, too, ended up having to catheterize myself. The possibility of self-catheterization is the one thing I don't recall the surgeons warning me could happen. I wasn't quite prepared for that! I was sent home from Oregon with instructions to catheterize myself to keep the urethra open and that in about six months I could return for repair of the fistula.

I had difficulty with the catheterization procedure and wasn't very successful at it. After I returned home, one weekend the catheter became stuck about four times and I had great difficulty removing it (it had

kinked back on itself). I had been in touch with a urologist in my area (recommended by my endocrinologist here) for follow-up care when I returned home. After my lack of success with self-catheterization, I decided this wasn't going to work, and there was no guarantee things would work after I had the fistula repaired. Therefore, I contacted the urologist here and had him schedule surgery to reverse the urinary hookup and reroute my urethra to approximately its original position. I had this done and I've been fine ever since, without any problems. It is a disappointment that it didn't work as I wanted it to and that I still have to sit to urinate. But the problems weren't the fault of the surgeons. The problem was simple mechanics and my body reaction to the procedure. I would do the entire procedure again if I had to— with the exception of the urinary hookup.

At the time of the original surgery, the surgeons left the enlarged clitoris/penis more posteriorly than I had expected, but I'm sure that was because of preparing for the urinary hookup. When it came time to do my testicular implants, after consulting several surgeons, I opted to go to Dr. Laub in Palo Alto (who had done my chest). The surgery he proposed made the most sense to me. At that time he ended up moving the clitoris/penis about one inch more anteriorly [up and forward on the body] into a more correct penis position. I've been very pleased with the results. Since that time, a friend of mine went to the surgeons at OHSU for the same surgery, and his turned out looking basically like mine and his was obtained at a lot less cost.

It is up to us— the consumer— to INVESTIGATE on our own the credentials of the surgeons, and try to talk to others who have had the surgery done in order to make an intelligent decision as to what is best for us. With any surgery there can be NO GUARANTEES. Any time you go in for ANY surgery the surgeon will warn you of possible complications and tell you they can make no guarantee as to the outcome of the surgery. There are risks involved, including death, with any surgery— regardless of how minor or major the surgery.

Dan mentioned that he had never experienced such pain as he did following the vaginectomy and urethral lengthening. Each of us has a different pain tolerance level, and I'm convinced attitude has a lot to do with our recovery. At the time of my original surgery and OHSU I had my hysterectomy, vaginectomy, and the urethral lengthening (a six hour surgery). Basically I had no pain following the surgery, only some discomfort. The worst pain occurred about three days later, and it was gas pain which is not at all unusual following any abdominal surgery. My biggest problem following that particular surgery was that next day when the nurse got me up and my legs would not support my body— they just collapsed on me. Neither of us were expecting that. I had an epidural as well as general anesthesia at the time of the surgery, and we never did figure out whether it was the epidural or just being in the stirrups for six hours that caused the problem. The doctors said not to worry about it (it scared the shit out of me) and they were right. It eventually went away with the exception of some weakness and

numbness around the area of my right knee. Does this mean I should sue the surgeons for negligence? I think not. It was an unexpected complication, but I don't feel any negligence was involved.

Dan's comments regarding the area where they took the graft from his arm concern me. What did he expect? All the guys I've known who have opted for the phalloplasty which involved taking tissue from the arm area have ended up with bad scars. Also, several had a bit of nerve damage, which was a possible complication they were warned of and they accepted the risk. However, with intensive physical therapy and a lot of work (often with pain associated with the exercises) on their part, the function of their thumb area has returned to normal.

Dan mentioned that he has undergone the surgery to reroute the urethra back to the area where the vagina used to be. I had good luck with having this done and have been able to urinate normally since. I'm not sure what the problem following his revision [was], but I wouldn't think that he should still be having problems urinating. I think I would check around and consult another urologist or two (or more) and see if there is anything more they have to offer. I wouldn't just pick names from the phone book. Ask your family physician, check with the Chief Urologist at the nearest medical school, ask the local hospital of medical society for referral names, or try to locate some nurses who work in surgery or on the surgical service at large hospitals and see if they can recommend a urologist they feel is competent in his field.

In summary, I would

just like to say that we have to be cautious and become educated consumers. Investigate and gather all the information you can before choosing your surgeon. If a surgeon guarantees a particular result, quickly run the other way. Keep in mind there are many possible complications and **NO GUARANTEES.**

Ericg Information FCA

More on Surgery

Dear FTM,

After reading Dan's letter in July '94 FTM, I had to write. I am trying to avoid the problems he has had. I am talking to several surgeons and to anyone who has had lower surgery.

Surgeons are ready to tell you about their successes, but will say very little about problems they may have had. One said he has changed his procedure to solve the problems, yet he has done only one or two surgeries since making the latest changes. From what I can find out, each surgeon has his only procedure(s) and is modifying what he does frequently.

When it comes to urethral extensions, it is probably best to go with a two stage procedure, first lengthening within the body, and then through the phallus. There are several methods of doing this, and they all have some problems. One surgeon said the bladder and muscles have to be retrained for work with the longer urethra and for some men this comes fairly easily in a couple of months.

The choice of phalloplasty or metoidioplasty is the big decision as the sensitivity afterward will be very different for the two choices. We must remember that the clitoris, labia, and entrance to the vagina are the sensitive parts to

start with, and where these end up will determine, to a large part, the sexual feelings we will have afterward. Scarring and modifying these parts during surgery can change overall sensitivity, such as transplanting tissue from some other part of the body to increase the length of the clitoris to make a full size phallus. Once surgery has been done it is hard, and often impossible, to go back to the original structure and feeling: once the vaginectomy is done there is no going back and that feeling is lost. I see from my reading that MTF transsexuals are questioning the feeling they will have after surgery.

I have been having a problem finding out all I would like to know about testicular prostheses. I am favoring metoidioplasty, and having a scrotum with prostheses will go a long way in giving a natural look to my genitals. My questions are: what is the best prosthesis material? I have heard that sometimes they are removed—why? Should expanders be used first? I have not found surgeons or FTMs who can discuss testicular prostheses intelligently.

I don't want to tell anyone what to do. Each one must decide for himself what will be best for his situation. We all need to learn all we can about ourselves and what procedures are available, and talk to other FTMs and surgeons before we make these important decisions.

Jamesg Information FTX
Editor responds:

I am compelled to rise to the challenge of answering your questions. Hope I can measure up! Testicular prostheses are made of a silicone gel material that is much thicker than the type used in the problematic breast implants. The sili-

cone sheath that holds the fluid is also much thicker, too. There is also a type that employs saline solution inside a silicone sheath—often people believe that if the implant is saline they are avoiding silicone, but it is silicone that holds the saline in place. Most surgeons feel the silicone gel type give the best result because the weight and density of the material has the most natural feel. Most popular brands are Mentor and Surgitech. You can contact Mentor at 600 Pine Ave., Goleta CA 93117 ph. 800-235-5731 and ask them for product information. Other companies that produce penile prosthetic devices (implants) and may also produce testicular implants are AMS, Synergist, GFF, Uniflate, Omniphase, Duraphase, and Jonas. You should be able to get the addresses and phone numbers for these companies (and Surgitech, too) from a medical library or even a pharmacist (who isn't too busy to help you). Testicular implants are occasionally removed because of leaks (caused by material defect—rarely—or traumatic injury), the patient decides the implant was the wrong size, an infection develops, or the body rejects foreign material (some people's bodies simply cannot tolerate implants of any type). Dr. Laub in Palo Alto recommends replacing testicular prostheses every eight years because the sheath material can break down and because the industry makes material advances in roughly eight year cycles, so the patient is afforded the latest technology. He has told me that he once exchanged a set of testicular implants that had been in place for 13 years, and the old set did not show any signs of breaking

down. The necessity of using tissue expanders depends on the amount of labia tissue and the size of the desired implant (which are available in Small, Medium, and Large!). If there is not enough labia tissue to accommodate the desired implant, expanders will allow the tissue to heal and stretch more gradually. Some surgeons believe expanders are never necessary, but you need to know whether they always use small implants (and don't allow you to have a choice in the matter). I've seen some small implants and they look like baby scrota on an adult man. But I've also seen implants that were too large for the patient's body, and this effect is just as grotesque. Implanting large prostheses without tissue expansion has been known to result in skin tearing and loss of the implant. I hope this has answered your questions. —James

Questions About

Dear FTM,

I would like for your journal to address the issue of genital surgery (F-M) more fully. Helpful perspectives would be:

- 1) The quality of surgeons and surgery.
- 2) The pros and cons of various methods of creating a phallus, especially the use of the forearm flap.
- 3) The use of other areas of the body to create a phallus, such as the buttocks and the thigh areas.
- 4) Testimonials from men who have had various types of genital surgery and their experiences with:
a) degree of overall satisfaction from the procedure.
b) sexual dexterity, degree of sensation and satisfaction.
c) complications and infections (particularly bladder infections).

d) doctors who are difficult to work with or unwilling to provide thorough follow-up care after genital surgery.

e) expenses of procedures.
f) experiences with insurance companies.

I think that the responses to these questions from gentlemen who have actually undergone these procedures would be invaluable to those of us trying to make critical decisions regarding surgery and the choice of health professionals.

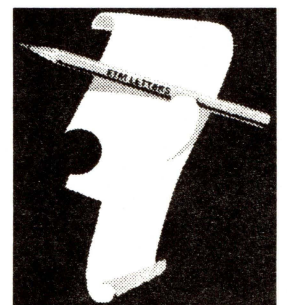
The willingness of men to share their experiences, both good and bad, is a courageous and self-less act. The FTM Newsletter should protect the privacy of individuals willing to share their stories. Thank you.

J. Information
(address withheld)

James responds:

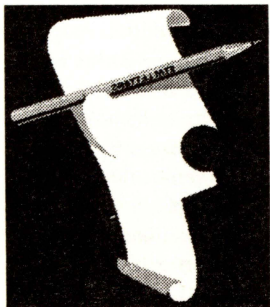
The FTM Newsletter has continuously and actively sought stories of medical/surgical decisions and experiences. Unfortunately, few have been forthcoming. It may be that men who undergo surgery are just not into writing, or perhaps they want to put the whole business behind them, I don't know. I think Eric's letter (above) is very informative, as was Dan's letter that prompted Eric's. Kevin Horwitz documented Sean's phalloplasty in issue #18 (January, '92), but few phallo patients

continued next page



More Malebox

have been willing to write about their experience. None of the phallo patients Loren Cameron spoke to in seeking subjects for his photography would allow their genitals to be photographed, even when anonymity was assured by this FTM photographer with great integrity. I have repeatedly written about my metoidioplasty in various responses to readers of this newsletter, and modesty prevents me—as editor—to use this platform to parade my privates around excessively. I would like to hear from other men, and not myself over and over. In other words, in response to item #4 above, the answer is if they write 'em, we'll print 'em; and, of course, requested confidentiality is always honored. As for items #2 and 3, I have written an article that addresses your concerns somewhat, called "Getting Real about FTM Surgery," but this article is too long for this newsletter. It will be published in *Chrysalis Quarterly* issue #9, an all-FTM issue scheduled for publication in 1995. I would be happy to provide you with a copy of the text of that article—without the accompanying illustrations, which I don't have—for the cost of reproduction and postage, which I estimate to be around \$3.00. As for item #1, I think Eric's letter points out the problems



inherent in evaluating surgeons and surgery: it is such a subjective experience that what works for one man is a disaster for another, which is why I have always advocated talking to other FTMs (because they will often talk even though they won't write!) and interviewing as many surgeons as you can before making a decision. I wish I could just definitively respond to all your issues; I hope you understand why I can't. — James

Transvestite?

Dear FTM,

Thanks for reminding me that it is time to support your work. Enclosed please find my donation.

I am 44 and I have been struggling with my feelings of "gender confusion" all my life. I am female and I wear men's clothes 100% of the time. I guess this makes me a transvestite, but the term seems to minimize my feelings and my experiences (maybe this is the nature of a label). I feel discriminated against in the job market, misunderstood by some of my friends and family, criticized by some women in the lesbian community for "acting like a man," and put down by some people in the gay/lesbian community for being stereotypically "butch" and therefore not an acceptable representative of our community. I feel uncomfortable every time I go into a public restroom because I don't know what kind of reactions I'll have to face (sometimes I think there needs to be a third choice—women, men, and someplace-on-the-gender-line-continuum). Just

walking around draws stares and comments: "Are you a man or a woman?" "Dyke," "Faggot," "Sir, uh, oh, Ma'am." I imagine my feelings might be like those of a bi-racial person—one foot in each culture, not belonging to either one but certainly connected to both.

Anyway, I appreciate the struggles we all go through to find our own way, and FTM as a group is a valuable resource in that search. Thanks for all the work putting the newsletter together and keep them coming.

Theresa Information San Francisco

James responds:

Thanks so very much for your donation, Theresa. Your letter illustrates the condition that I describe as "transgendered." This is a state that many FTM transsexuals know well and are relieved to escape through transition. But we must never forget that the choice to live in a female body is an honorable one—whether that choice means changing from male to female or continuing in the natal female form, whether it means in men's clothes or in women's. Our struggle for freedom of gender expression includes everyone. It is a struggle against prejudice and stereotypes, a struggle to allow every person to be seen as who they are no matter what clothes they wear and what genitals they have. I, too, have difficulty with labels. In fact, I'm having trouble lately with the term FTM. I feel it is too limiting, and I'm thinking of phasing it out of my self-defining vocabulary. (Should I consider changing the name of the Newsletter?) In

describing myself, I prefer "transsexual man" (or just "man"), though I would never deny my connection to the transgendered community or the fact that I lived for 40 years in a female body. Labels circumscribe ideas or concepts, but when they limit the extent of one's personhood they are certainly problematic. Which is why it is important for each person to define her or himself and for others to honor each others' self-definition. We'll never advance beyond labeling if we don't respect each other this way. Thank you for your courage. — James

Kudos

James et al.,

It's a good feeling to help contribute to the newsletter which has increasingly become an invaluable source of information and encouragement. It's interesting how, as my own issues change and progress is made (or at a standstill, for that matter), the Newsletter's relevance becomes more clear. Wishing you continued growth and success,

Marc Information (address withheld)

MTF Applause

James et al.,

The directness and clarity of your prose are too compelling for me to resist subscribing any longer. I appreciate the broader scope (beyond MTF issues) that the FTM Newsletter brings me. Thanks for a great newsletter.

Rachel, Oakland, CA

Poetry

Imagist (For a Transsexual Lover)

*Half man/half woman,
he brought me a fistful of hope
and a halo of doubt.
She kissed my blood.
He made it boil.
She freed my fear.
He captured it.
Their faces spun above me
in kaleidoscope:
she/he/she/he.
This was more than pronoun confusion.
I was not afraid
but intrigued
and yielded to the promise:
half man/half woman
What I found yet again
was the same ancient struggle:
half-formed creatures
trying and failing and trying and trying
to connect.*

—*Marcy* Writing Information R

Truths and Lies

*I have been told
that I am a figment
of my own imagination
that what I am cannot be
that my truths are lies
and their lies are truths
But I know that I am
and that my truths are not lies
and their lies are not truths
They may try to keep me
outside the boundaries
of their imaginations
But I refuse to be invisible*

—*Jason* Writing Information R

More News

was helped in his journey because of Christiaan. It is unfortunate that it was only because of his death that others were able to find out that the FTM journey is possible and that they could receive information about resources that can help. It is also unfortunate that the media felt it necessary to reveal the shape of Mr. D'Arcy's genitals: could it be that the reporter was trying to lead his readers to the conclusion that the genital incongruity was the motive for the murder?

AEGIS Launches Sullivan Press

On a happier note, but still sadly acknowledging the effect we can have only in death, AEGIS (American Educational Gender Information Service) has recently formed a publishing house which will bear the imprint of Sullivan Press, named for Lou Sullivan who was the founder of this newsletter and the information and education group that has grown into FTM International. The first publication from Sullivan Press will Gianna Eveling Israel's and Dr. Donald Tarver's Recommended Guidelines for Transgender Care, scheduled for 1995. Other titles being considered (funds permitting) are an anthology of science fiction stories with transgender themes and a

book of reprints of the best of the many transgender newsletters and magazines. When asked for a comment about Sullivan, Jason Cromwell said, "I greatly admired Lou for starting the FTM support group and newsletter. I was struck by his courage to challenge people like analyst Leslie Lothstein, and to write to professionals and say 'I identify as a gay man, and you tell me I don't exist. I want my life to be documented so those who come after won't have to go through what I did.' Lou was really courageous." AEGIS is based in Decatur, GA.

Takarazuka Theater "Where Women Are Men That Women Adore"

A reader has sent us a large clipping from the November 21, 1994 Baltimore Morning Sun newspaper in which a staff correspondent published a lengthy report on the all-female Japanese theatrical troupe that has attracted a large cult following, especially for the women who play leading men and never go out of character. We'll provide a synopsis of this story in the next issue of this newsletter. Stay tuned!

(Inter?) National FTM Conference Slated

Join us in San Francisco August 18-20, 1995, for the first all-FTM conference in the Americas. Three intense days of workshops, conversation and networking are planned. FTMs from all over the world are welcome and planning to attend. Registration cost will be around \$100.00, lodging and meals not included. We are still trying to make arrangements for the conference location and lodging, with the dual goals of low cost and logistical ease of use. Watch your mail for an information packet and registration form arriving in a few weeks! This conference will be open to all interested attendees: partners, MTFs, anyone is welcome. The conference will be presided over by FTMs, and its content will be directed exclusively toward FTM issues and concerns, including FTM interaction with the larger TS/TV/TG population. Join us for "A Vision of Community," FTM Conference of the Americas.

FTM News@aol.com—Reach FTM Online

Rushing headfirst into the oncoming traffic of the Infobahn, FTMs are modeming in to the hottest phenomena of the '90's: online communication. On America Online, we now have a message board, a monthly chat line and an e-mail address for this newsletter. Later this spring a Web-site will be added to the menu so that FTM's will be able to hook up no matter which server we use. To access the message board on America Online, type in > keyword GLCF>message boards>list categories>info. and discussion>female to male. The chat is usually the 2nd Tuesday of each month, at 6pm PST, in a **private chat room called BROTHERS F2M**. For more detailed information about accessing these services, e-mail us and we'll try to provide more detailed instructions. Our e-mail address is **FTM News@aol.com**. FTM is online thanks to Tom Reilly, Karen Wickre, and **Digital Queers**, who donated a very nice (**EXPENSIVE**) fax/modem. Please thank them online at: **DIGIQUEER6@aol.com**. Donations to Digital Queers are welcomed.

STUDY IN PROGRESS

Alice formati LCSW, Doctoral student at the Institute for the Advanced Study of Human Sexuality, is **seeking FTMs who have completed genital reconstruction** for a study of how choices for genital reconstruction were made. Participants will remain anonymous. Please write for more information, or to volunteer to respond to a questionnaire, contact: **Alice** Identifying Information Redacted

Information CA formati

READING LIST

If anyone has a copy of **EMERGENCE** by Mario Martino, and/or **MICHAEL NEE LAURA: The story of Dr. Michael Dillon** by Liz Hodgkinson that they are willing to sell, rent, or loan to the wife of an FTM who is writing a research paper, please let FTM know (**at the FTM Newsletter address**). These books are now out of print.

ATTORNEY AT LAW

Attorney with 7 years general practice experience, comfortable with TS subject, enjoys representing people who have been treated unfairly. Had a college classmate who was TS, and wants to support the cause. New York State and District of Columbia Bars. For general legal service needs in these areas, contact: **Lawrence J. Krieger, 1 East Main Street, Suite #400 Rochester, NY 14614 (716)325-2640**

LOOKING FOR LOVE

Male crossdresser seeks female crossdresser for long term relationship, possibly marriage. S, W, 5'11", dress size 24W, bra size 38B, women's shoe size 12, needs to find the right guy to make my life complete. That guy will have to be a girl who wants to be a man but who still lives and goes out as a girl, and discreetly becomes a "man" when "he's" alone. In addition to lots of sex, I'm looking for mutual support. I want to help him and teach him how to be a man, and I want him to teach me how to be a girl. We could buy each other clothes and enjoy life to the fullest as each other's sex!! Please write or phone: **Darlean** formati
g Identifying Information Redacted
Identifying Information Redacted
(voice mail)

SINGLE DADS

I have received your newsletter for several years and it has been informative. I hope to correspond with other single dads who are raising kids on their own. I'm 39 and aging rapidly. I have 3 children, 12-17, and one grandbaby (due in November). My kids are threatening to put me on the "Dating Game." So, any parents or sympathetic souls, please write and let's share the teen years together. **J.**
Identifying Information Redacted
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CO formati

ALL ALONE

24-yr-old FTM would like to meet other FTMs for correspondence. GWMs and others welcome to write also. I've been on hormones for 6 years now, and have had my top chopped off (well removed) about 5 1/2 years ago. I would love to find out more about metoidioplasty surgery and other people's experiences/struggles. I feel so alone and at times frustrated. Here in VA they do not have any support groups for FTMs. These last couple of years I have come to realize that I may be bisexual (leaning now more to gay men) and it scares me a little because where do I fit in

when I view myself as "neither sex" or half and half or not a complete sex (physically). Anybody else have that problem? Remember, everyone can write—I want to meet as many people as I can! I'll be waiting at: **Chris** formati
Identifying Information Redacted
VA formati

BRAVO SHADOW MORTON

I am a Christian man desperately seeking someone who shares the same views I do. I am not a transsexual (I never changed my sex). I am not a homosexual in any sense of the word. I am a married man with a pretty well-adjusted life as far as family, friends, etc. However, in my eyes, I was born with a birth defect—a female looking shell with a bonified 100% man on the inside. I loved Shadow Morton's word "metamorph." My friends and family have been so supportive. Yet I'd like to share experiences, laughter, tears, joy with another person with the same defect. Please, if you share any of these thoughts, I'd love to communicate with someone who knows. My family understands, but only another "metamorph" knows. So please write to me. **Richard** Identifying Information Redacted
formati
OF Redacted

I THOUGHT I WAS CRAZY

Before information came to me about Stephan Thorne and FTM, I thought I was simply crazy! I am sure you have heard from others of the wasted years and the attempt to look/act as society says versus who you are inside. I am interested in being a pen pal to anyone who is at any place of their transformation and wish to relate their experience to me. **Linda** Identifying Information Redacted
formati
Santa Rosa, CA

EMOTIONALLY MATURE

41-yr-old, tall, bearded, broad-shouldered, masculine and bearish GM, active and deeply engaged in life, seeks correspondence and possible friendship with F to GM TS. I enjoy the rugged outdoors, winter sports, music and other arts as well as snuggling in my cozy nest by the sea. Have a busy academic professional life and am looking, in the long term, for a committed, loving companionship with an emotionally mature guy. Write or call (before 10 PM eastern time) if this sounds interesting to you. **Eric K.**
Identifying Information Redacted
MA
formati

OHIO MEETING

I have some information to pass along. On every third Thursday of each month there is a meeting of transsexuals and transvestites at the **Golden Lion, located at 340 Ludlow Ave. in Clifton (Cincinnati)**. The meetings are open to all and usually start around 9-10 PM. The phone number is **g Information R**. I've been to a few, but I seem to be the only FTM there! I'd very much like to see more FTMs at these meetings. Everyone is really nice and very open. It's a great place to meet other TSs and get information. If anyone needs directions or would like to meet before, they can call me at **g Information R**. I need the companionship, guys! Also, we need somewhat of a showing other than just me.

SCOTLAND CONNECTION

Just a short note, basically to request if anyone's interested in corresponding with me from your part of the world.

...more networking

I'm 22 but don't mind corresponding with anyone of any age. I would be grateful if you could publish this request.

Jay [redacted] Edinburgh
[redacted] Scotland

ART-TECHNO FTM SEEKS...

Hi, I'm Jamie, an FTM art-techno-fag living south of San Francisco. Does everybody else *really* live only in SF and Oakland?:) Haven't been able to find anybody else down here, and I'd like to have more real people to talk to on a more regular basis. And maybe work out with, check out resources with, and all. So here is my email and snail and packet: [redacted] Jamie [redacted]
[redacted] Palo Alto, CA [redacted]

ARKANSAS PEN-PAL

I am a pre-hormone FTM not out at work. Would like to correspond with others farther along the path. Middle Arkansas has a few of us—but I seek a broader circle of friends, advisors, and pals. My interests are wide, not limited to FTM issues, but those are central at the moment. If interested, please write to Nick at the following address. Thanks to all. [redacted] Little Rock, AR
[redacted]

ROOMMATE NEEDED

GWM, 43, living in a beautiful and safe apartment in Piedmont Ave. area of Oakland, seeking FTM to share home with!! Your own room and entrance, cable connection. Stained wood floors, newly painted kitchen + bath, close to transportation. FTM-friendly—an old friend of Lou Sullivan!! Your rent would be \$250 + utilities (cable, your own phone, garbage, PG&E). Please contact Joseph at [redacted]

SHALL THE TWAIN MEET?

Even though our journeys physically are different, the mental and spiritual journeys are possibly the same. I have dated many men in my life, but always felt an emptiness. The transsexual journey is one that only another TS person could understand. I have never dated or met an FTM TS, but I've seen some really cute and sweet guys on TV. I am very passionate, spiritual, and am open to new experiences. I am 39, MTF, 5'10", 38-28-36, 155lbs, blonde hair, green eyes. I like movies, reading, flea markets, dancing, swimming, camping, amusement parks, picnics, anything out-of-doors, holidays, quiet times with that special someone, and any TS cause. I feel our journey is a gift from God to find our highest love for ourselves and others. If you are seeking a very feminine, intelligent soulmate, please write. Are you my guy?

Stephanie [redacted] OH
[redacted]

"F2M: The Making of Female Masculinity"

(essay in *The Lesbian Postmodern*)

by Judith Halberstam

Reviewed by Isabella

It was with interest that I approached this essay. As the 7-year partner of FTM Loren Cameron, who had myself emerged from the lesbian community, I wondered how the lesbian gaze, represented by this sophisticated "postmodern" academic, had changed vis-a-vis FTMs in the last decade. Well, this article was most instructive, although not, as the title might imply, about FTMs, but about the lesbian response to their existence.

Invisibility has always been perhaps the greatest problem for FTMs, as Jason Cromwell so ably demonstrated in his article "Default Assumptions" in the last issue of the FTM Newsletter. However, when the "old-fashioned" lesbian I remember observing my courting days with Loren was actually confronted with FTM existence, she could be relied upon to have a reaction spanning guarded openmindedness (from the most liberal) to outright horror and outrage (from the more self-righteous separatist-leaning contingent). Suspicion and a certain amount of head-wagging seemed common, although, to their credit, all of my close lesbian friends came round to a warm acceptance of Loren once they got to know him, and thus came to a greater understanding of FTMs in general. They were curious; they asked a great many questions of both Loren and me, and were genuinely interested in trying to understand, as much as they could, the specificity of FTM motivation and experience.

Ms. Halberstam, however, eschews this outmoded approach of dealing with reality. Armed with a formidable intellect, and a true academic's penchant for stultifying esoteric language (does anyone outside of perhaps three English professors in the whole of the country really know what the hell "nonce taxonomies" are without consulting a dictionary?), she regally bypasses any need to deal with actual FTMs before expounding a theory concerning them by focussing only on representations of FTMs in the media. FTMs at one remove, as it were. And what is the triumphant conclusion she draws from people looking at people looking at FTMs? Why, that FTMs don't really exist! Thus, the post-modern lesbian gaze has come full circle, from not recognizing or seeing FTMs, to recoiling when it finally does see them, to "disappearing" them by an act of will, a kind of intellectual sleight of hand.

To accomplish this tour de force performance, Ms. Halberstam relies heavily (although mentioning it only in passing) upon MTF Sandy Stone's brilliant essay "The Empire Strikes Back; A Posttranssexual Manifesto" [contained in the book *Body Guards* edited by Epstein & Straub], bending Stone's theories to a purpose for which I very much doubt they were intended. Ms. Halberstam takes as her theoretical starting place Stone's proposal that we constitute transsexuals as a "genre...a set of embodied texts whose potential for productive disruption of structured sexualities and spectra of desire has yet to be explored." It is then a textual reading of FTMs, "of genders as fictions rather than facts of life, and potentialities rather than fixed identities" that concerns Ms. Halberstam. To this end she examines, primarily, two representations of FTMs in the media that have been widely viewed by lesbian audiences: the video "Linda/Les

and Annie” and the film “Vera.”

The problem, as I see it, with using these two “texts” to examine FTM identity as fiction is that they are hardly representative of FTM reality. To rely so heavily upon deconstructing these texts to try and understand anything at all about the nature of FTM identity is ludicrous, given that “Vera” is a fictional film made by a non-transsexual man, and “Linda/Les and Annie” is a video focussed almost exclusively upon a sexual act between an FTM and his female lover. (Ironically, the only “real” FTM in these representations, Les, has since recanted his status as FTM and announced his decision to return to female status in a letter that was published over a year ago in the FTM Newsletter. I don’t know if he—or she, as the case may be—followed up on this avowed intention, but perhaps even this subject wasn’t a “real” FTM, either.) Nowhere in the entire essay is the successfully integrated post-op FTM, living his ordinary day-to-day life, ever examined, quoted, or even mentioned. His reality is not important, perhaps because to Ms. Halberstam, as to most non-transsexuals, it is the fluidity, the creation and dissolution of gender “fictions” that is so fascinating. They prefer their transsexuals forever frozen in the act of becoming, like Bernini’s marble statue of the wood-nymph turning into a tree. But life goes on, and the construction of gender that is so absorbing to the newly emerging TS, a few years down the road becomes just part of the job.

Of course, there is much truth to what Ms. Halberstam has to say about gender as fiction that all of us, both TS and non, invent. She asks that we “examine the strangeness of all gendered bodies, not only the transsexualized ones, and that we rewrite the cultural fiction that divides a sex from a transsex, a gender from a transgender.” Not content with this reasoning, however, Ms. Halberstam pushes on to her ultimate conclusion: “The breakdown of genders and sexualities into identities is in many ways, therefore, an endless project, and it is perhaps preferable therefore to acknowledge that gender is defined by its transivity, that sexuality manifests as multiple sexualities, and that therefore we are all transsexuals. There are no transsexuals.” Prettily put, Ms. Halberstam, but wrong. As a fellow “non,” I prefer to let a TS have the last word. This quote is from MTF historian Susan Stryker’s “Renaissance and Apocalypse” in the latest issue of *TNT*...“the transsexual middle passage is the part of the story that makes it uniquely our own. Whatever myth of origins we graft that experience onto, whatever plot line we follow into the unknown future, the transition from one sex to another is the single experience that no one other than transsexuals will ever have.”

Isabella is a post-lesbian modern: a queer, omnisexual “bossy femme” who projects a rather more conservative image than this description might suggest.

Sacred Country

by Rose Tremain

Review by Jeff Information

Sacred Country is one of the few novels (if not the only one) in which the main character is an FTM. It would be interesting to how and why Ms. Tremain chose that as her focal point. The fact that she must have done a lot of research is evident in the feelings expressed by the main character, Mary (later Martin).

There were times when I was reading when I recalled

feelings from the beginning of my own journey which I had forgotten, triggered by the text of the novel. Some of the details about the surgery rang true as well.

The story begins in England with the death of King George IV, in 1952. That is when Mary, only about six years old, knows she is a little boy, and not a girl. Given my own personal bias, I would have liked the story to center more around Mary/Martin and the thoughts, feelings, experiences which were his life. Tremain bounces around the different people in the small English village where Mary grew up, spending as much time with the local butcher as with Mary herself. I find this a drawback, but other readers may find it to be a fine balance.

The end of the novel was the most disappointing to me in that it left me with many questions and few, if any, answers. We leave Martin in the American South, content with his life, but feeling a sense of emptiness. I want to know what happened in resolution.

Some parts, like where Martin is told he will never be a “real” man, may grate harshly. I was ready to write Ms. Tremain in protest over that. I still may! In any case, a book well worth reading.

Jeff Information is a member of “Under Construction,” an FTM peer support group in Southern California.

Another View of F2M

by Jordynformatic

In *F2M: The Making of Female Masculinity*, Judith Halberstam advances the idea that gender is fiction, and that the rewriting of this fiction has the potential to radically alter many of society’s most precious and insidious assumptions about the naturalness of such categories as race, sexual preference, and, of course, gender.

Ms. Halberstam’s essay has been getting a good deal of attention in the FTM community lately, and unfortunately, most of this attention has been negative. Much of this negative attention has come from people who have not actually read her article, but rather, who have heard second hand quotes taken out of context. Ms. Halberstam states, for instance, “There are no transsexuals.” Taken at face value, this position can easily seem outrageous, condescending, and even hateful. In context, however, and read accurately, this sting disappears. Ms. Halberstam’s issue is not with the personal validity of the gender dysphoric experience, but rather with contemporary society’s tendency to require individual experience to conform to the standards of whatever group that individual is perceived as belonging to.

In criticising Ms. Halberstam’s article, one writer refers to “the specificity of FTM motivation and experience.” It is exactly this notion of specificity that Ms. Halberstam questions, and which most of us as transgendered people have also questioned. As children, most of us had experiences of life that were very different than what would normally be considered the specificity of girl experience. And yet, even if we didn’t like it, there were things we had in common with girls. And now, as FTMs, there are things we have in common with other FTMs. As a San Franciscan, there are things I have in common with other San Franciscans, and as a mammal, there are things I have in common with a hippopotamus. There is specificity, there is divergence, and there is a whole lot in between.

As human beings, as life forms, even, we are not binary. We are quirky, changeable, inventive. To advance the

idea of gender as fiction is not to negate the validity of an individual's psychic and bodily discomfort with his chromosomal sex. Because we are not binary, even common experiences cover a wide range of different expressions. Not everyone who experiences gender dysphoria experiences it in the same way, and not everyone who takes hormones is transgendered. I have a (genetically female) friend who identifies as male and passes perfectly. He's never had a shot. I certainly know dykes who are butcher than I could ever be, but who wouldn't consider identifying as anything other than women. It is common for women body builders to shoot testosterone, yet maintain identities as (often ultra-femme) women. Physiologically, these womens' bodies experience the same changes that ours do. Most pre-op FTM transsexuals maintain that not having a penis does not make them in any way not men. We are dif-

ferent from one another, and we are similar to one another.

If it is not the possession of a penis, not injection of testosterone, and not degree of "masculinity" that makes an individual a man, what is it? Do clothes make the man? No, but they can certainly make the reading of one. Ms. Halberstam said "There are no transsexuals. She also said "We are all transsexuals." She could as easily have said "There are no men." and "We are all men." The point would have been identical.

In the last newsletter, Ms. Halberstam posted a small announcement pointing interested parties towards her essay. James Green responded with "please do not try to interpret my experience before you have gotten to know me." James probably does more for our community than any other single person. Nevertheless, he not represent our community. He represents James. The writer referred to previously states "she regally bypasses any

need to deal with real FTMs." These statements imply that Ms. Halberstam has no contact with real FTMs, and that she is approaching this subject from a solely academic viewpoint. This is not the case. Ms. Halberstam does know FTMs. While it may be true that she is "participating from a distance," this is no reason to insist that she not participate. To maintain that because she does not identify as transgendered, she should not speak about or write on transgendered issues is as ludicrous as saying that because I am not French, I should not write of France.

Ms. Halberstam has received some very hateful mail from some of our number. This is unconscionable, not to mention ungentlemanly. We have real enemies, but Judith Halberstam is not one of them. Disagreement is fine; disrespect is not. Ms. Halberstam is an ally; let's not alienate her.

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ANNOUNCEMENTS

Under Construction Club forms in Southern California

Jeff Shevlowitz, a long-time member of FTM, has begun to help organize an FTM group in Southern California. Known as the "Under Construction Club," the group meets quarterly in private homes. Meeting dates and locations are announced approximately six weeks in advance. Their latest meeting was October 23, so the next one will probably be in late January.

Contact Jeff for more info. **Jeff** Identifying Information Redacted
 CA Identifying Information Redacted

"FOAMIES" Fill a Real Need

Contact Jeff Shevlowitz (address above) if you would like to obtain a FOAMIE, a simple, relatively inexpensive pants filler. Only \$10.00 (includes postage), a FOAMIE is just the thing for those who have need of such a device.

New Audio Tape: The Story of A Transsexual Man
 FTM now has available a 52 minute audio cassette tape "The Story of A Transsexual Man...as told by James" in which James Green tells his story of growing up in the 50's and 60's and coming (in the 80's) to the decision to resolve the incongruity between his body and his psyche. It is the story of his losses and his triumphs. The tape does not discuss surgery. This tape was produced by Dan Zola, a man who was in a men's group with James for a year before James revealed that he was TS. Dan found James's story inspiring, and he hopes that the tape will be useful as an aide in introducing the subject of transsexualism to friends or family members because it presents this complex subject as the story of one man's quest for identity. The cost is \$10.00, plus \$1.50 shipping/handling. **Checks for this tape should be made out to Charles** Identifying Information Redacted **and sent to FTM.**

Int'l Congress on Gender, X-Dressing and Sex Issues

Designed as "A Dialogue Between Professionals and Those in the Community," this conference is scheduled for February 24-26, 1995, at the Airtel Plaza Hotel in Van Nuys, California. The conference is presented by the Center for Sex Research at California State University, Northridge, and is co-sponsored by IFGE (International Foundation for Gender Education), Tri ESS, Renaissance Education Foundation, the Society for the Scientific Study of Sex, FTM International (formerly known as the FTM Group of Northern California), the Outreach Institute of Gender Studies, and AEGIS (American Educational Gender Information Service). An impressive list of participants includes Stanley Biber, M.D., Walter Bockting, Anne Bolin, Jason Cromwell, Dallas Denny, Holly Devor, Roger Gorski, James Green, Richard Green, William Henkin, Parivarto, Jude Patton, Virginia Prince, Rupert Raj, Susan Stryker, Kim Elizabeth Stuart, Stephen Whittle, and Walter Williams. And those are just the names that have appeared in the pages of the FTM Newsletter before. There are over 100 distinguished participants and presenters. This promises to be an exhilarating three days, the first event at which professionals and members of the TV/TS/TG community will meet as intellectual equals. Registration is \$125.00 (\$40.00 for students); hotel rooms are \$69.00/night plus 14% tax (as many as 4 people may share one room at that rate, which makes it about \$20.00/night/person). **For a registration form or more information, contact: Center for Sex Research Department of Sociology California State University, Northridge 18111 Nordhoff Street Northridge, CA 91330-8318**

IFGE in Atlanta in March

The International Foundation for Gender Education (IFGE) will hold its 9th annual Coming Together-Working Together Convention in Atlanta, GA, March 12 through 19, at the Sheraton Colony Square Hotel. Entitled "Atlanta Action '95," this year's conference focuses on leadership development in the transgender community, marketing, and transgender issues. Promotional literature notes that sessions will be targeted toward mature, active people who have addressed their own gender issues and are ready to help others. For more information and registration forms, contact: **Atlanta Action '95 P.O. Box 367 Wayland, MA 01778 (617)899-2212**

FTM Meeting Schedule 1995

FTM meetings are on the 2nd Sunday of each month, from 2 to 5 p.m., in San Francisco. Call James (510-658-0474) for Details. Mark your calendars in advance!

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 November 12, 1995

Informational

February 12, 1995
 April 9, 1995
 June 11, 1995
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Transsexual Health Conference in April

The Gender Identity Project of the Lesbian and Gay Community Services Center, Inc., in New York City is planning a National Transsexual Health Conference for April 21-23. Convention fees will be on a sliding scale, and efforts are in progress to arrange low cost accommodations for attendees. "NTHC will be by and for transsexual and transgendered people, focusing on the information we need to make better choices about our lives." For more information, contact: **Lesbian and Gay Community Services Center, Inc. 208 W. 13th St. New York, NY 10011 (212)620-7310**

Transgen'95: Law Conference in June

The International Conference on Transgender Law and Employment Policy, Inc. (ICTLEP) will meet in Houston, Texas, June 14-18, 1995. Focusing on "Your Jobs, Your Rights, Your Health and Your Documents," organizers of this year's conference hope to score Sgt. Stephan Thorne as a keynote speaker. Last year's conference featured another local FTM, attorney Michael Hernandez. ICTLEP has some very high powered members, and they have accomplished a great deal to educate other attorneys, lawmakers and professionals since the organization's inception in 1992. FTM Aaron Davis is active in this group. Don't be afraid to attend if you're interested but you're not a lawyer: 70% of past conference attendees have been non-attorneys. Attorneys can get CLE credits for attending. This conference is a real hot-bed of movers and shakers. For more information, contact: **Phyllis**

Identifying Information Redacted **Houston, TX** Identifying Information Redacted

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