

Writer (and expert shower-taker) Brynn Craffey with buddies Chris and Jed

Good Clean Fun by Brynn Craffey

Showering without a penis in the YMCA men's locker-room presents a few logistical challenges. Every time I pull it off, though, I feel a thrill and sense of accomplishment.

It's surprisingly easy. Attitude is everything. When I pad, barefoot and dripping in my swim trunks into the crowded shower-room, first thing I do is check in with myself. Am I feeling utterly self-confident? Am I totally convinced of my right to be there, even without a large, dangling member between my legs?

In other words, do I feel legitimate penetrating this traditional male sanctum without first paying homage to our culture's binary notion of gender by spreading my thighs to the surgeon's scalpel?

Most of the time, the answer is a resounding yes. I thread my way down the center aisle, a lone "post top-surgical" female-to-male transsexual who eschews bottom surgery, surrounded by naked, penis-equipped men. On my way to a nozzle in a far corner, my feelings run the gamut. Curiosity...penises fascinate me enormously (pun intended). Entitlement...this is where I've belonged my whole life, dammit! And caution. Were my transgression discovered, the consequences could be dire.

I glance right and left out of the comers of my eyes. Is anyone paying me undue attention? I maintain a blank facial expression and avoid gazing long on any individual. In some three years' transition from living as a woman to living as a man, I've pretty much mastered the fundamentals of heterosexual male locker room etiquette: Don't make eye contact.

An Expanding Experience

by Victor Dull — New Stuyahok, Alaska

After lower surgery by Dr. Laub in Palo Alto, California, I felt that I could wait a while until I started the inflation of the testicle expanders—expanders enlarge the new scrotum to make room for silicone testicle implants. Surgery had been in October, 1995 and I did not start the expansion until January 17, 1996.

I was very nervous about the whole thing, because the doc whom I was seeing had never done the procedure before. I showed him the sample port that Dr. Laub had given me. The port is a part of an expander that is usually not located in the scrotal sac, but placed under the skin (often on the lower abdomen). It is like a thin disk, about the diameter of a quarter coin. Small plastic tubes conduct the injected sterile saline solution from the port to the expander envelope that is stretching the scrotal sac to accommodate the testicular implant.

The nurse who was assisting was familiar with the port. The doc took his time reading Dr. Laub's instructions. After doing this he had the nurse sterilize the skin over the two ports. With sterile gloves, he felt for each port as the nurse loaded a syringe with a thin needle that looked four inches long.

When the doc injected the needle there wasn't the prick of pain that I had been expecting. Slowly, he injected four cc's into the left port. I could feel the expander growing as the saline solution was inserted. At one point I felt a tearing sensation which I informed the doc about, and he said that was to be expected. The right expander filled, with a pinching sensation. Walking was very uncomfortable, and there was low-key aching in my groin. I was feeling more pain in the right side than in the left. At home I took a couple of Tylenol and stayed off my feet as much as possible, lying spraddle-legged in bed.

The next day I was still walking as though I had just ridden a horse for miles. At work my clients made comments about my walk and stance. I told them my cat had scratched near my privates. It was then I decided to schedule the procedures for Fridays so that I could have the weekend to recover.

The next session with the long, daunting needle wasn't until February 21. I had another doc who seemed nervous about the procedure, but it went off without a hitch. The left got five cc's, and the right got four. The next day the right side was hurting. Tylenol helped again.

March 14 was the next round. The left side took five cc's again, and the right side got 4.9. Both balls were aching this time.

March 19: again aching balls. The next day I spent as little time as possible on my feet. April 12: the sixth expansion, and a third doc. I was able to walk the 1.4 miles home.

April 20: another expansion, done by a physician's assistant. The left took six cc's. I can't remember what the right took. After the procedure I began walking home. After 20 feet, due to excruciating pain I had to return to the hospital to call a cab. I informed the physician's assistant, and he asked if I wanted some of the saline solution taken out. I told him I'd rather go home, take some Tylenol and rest.

Taking a shower that evening I noticed a bruise on the left testicle, the size of a quarter. My heart leaped and stuttered. My first thought was that I was going to lose the testicle. I was concerned enough to call Palo Alto and talk

Feature: PARTNERS' Stories and Commentaries — see pages 6-7

From Boy to Man in the Pacific Northwest

by Drew Lewis

Before I started my transition I thought the hardest part would be the psychotherapy, getting "the letters", and satisfying the doctors that I had filled all the requirements outlined by the HBGDA. Living in Eugene, Oregon did not give me any options in seeking help for gender dysphoria. Being a student at the University of Oregon, I had at my disposal the student health center and unsurprisingly I am the first transgendered person to who sought help there. Of course for surgeries I would have to go to Portland, but I was able to get counseling and hormone therapy through the U of O.

My doctor was able to get me in touch with the surgeons and my therapists wrote the letters so all the medical aspects of transitioning were taken care of. I had already changed my name and the gender on my drivers license, so the part of the transition I thought would be the hardest was over. The next step for me was to finally grow out of my boyhood and become a man.

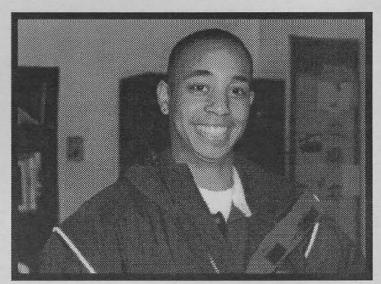
Eugene has no TG community, and the queer community is dominated by white lesbians with a man-hating separatist sentiment. My close friends stood by me but when the changes from the hormones were noticeable—and I finally began to see what I am reflected in what my body looks like—I began to notice a big change in how I was treated by people who I had always considered friendly acquaintances.

I had always been very visible in this community, but after I began transitioning I was the new exotic strange fruit. Women were intrigued and curious, but at the same time criticizing me for behaving like a man. I found myself stuck in a place with no TG community and almost complete ignorance of the concept that gender is a social/cultural construct, sex and gender are not the same thing, and the labels man/woman are just definitions defined by a society which thinks biological sex determines gender. And that drag queens, drag kings, cross dressers, trannies, butches, etc. epitomize the idea that gender is fluid and can be expressed in many ways which are not rigid. On top of

all that, it is even more difficult to explain why I would be attracted to gay men.

Dealing with being a transman in this lesbian community is difficult enough, but also being a black man in the Pacific Northwest has not been easy. Before I began my transition, I passed most of my life as a young black boy. When my voice began to drop and I got bigger, I began feeling the wrath of the racism towards black men. I had always been aware of the racism but racist behavior towards 12-year-old black boys and 20-year-old black men is very different.

With all this going on I'm still the happiest I've ever been, and I can finally see what I am reflected in the mirror.



Drew Lewis

Sex and Fiction, History and Future: A talk with James Green by Jess Bell

[The following interview with our own James Green was printed in the newsletter TRANS, issue 4. TRANS is distributed throughout Vermont, New Hampshire, and the Adirondack region of New York State.—Ed.]

Jamison "James" Green, M.F.A., is the President of FTM International, Inc., the world's largest information and networking group for female-to-male transgendered people and transsexual men. He is a writer of both fiction and non-fiction, and has worked as a writer and writing manager in high technology companies for 20 years, specializing in medical, legal, financial, and computer manufacturing industries. His fiction has appeared sporadically in small journals, and has been nominated for the Pushcart Prize.

Born and raised in Oakland, California, James had accepted the fact that he was transsexual by the time he was 20, but was afraid to transition into a male body until 1988, at age 40. Now, as a gender diversity consultant, James provides academic lectures, organizational sensitivity trainings, and transgender advocacy services to groups, institutions, and corporations. His work on the San Francisco Human Rights Commission's Report on Discrimination Against Transgendered People was instrumental in the 1995 implementation of legisla-

tion to protect the civil rights of transgendered people in the City and County of San Francisco, and has provided the groundwork for similar laws in other cities.

He has appeared in several documentary films, and has been honored with service awards from three of the largest transgender/transsexual organizations in the US. He also does occasional work as a voice actor in radio, television, and multimedia productions, as a percussionist (Afro-Cuban or Afro-Brazilian styles), and as a photographer. In addition to the transgender community, James shares his life with his 13-year-old daughter Morgan Green, and many friends. He is waiting for the right woman to come along to share his life.

1. What is the question you are asked most often in interviews, and how do you respond?

Everybody wants to know about sex, and about how people react to the fact of transsexualism and transsexual bodies. While my mother was pretty upset about the fact that I planned to transition and live my life as a man, virtually everyone else in my life was unsurprised by my decision, and was supportive. I did eventually lose my relationship with the mother of my daughter, who was (is) a lesbian, but all my other friendships have thrived. In fact, I have more friends now that I am happier with my body and there-

New Medication for Baldness by Sheil

by Sheila Kirk, M.D.

Should Propecia be considered for FTMs?

Recently and with great promotion and expectation, another new medication was made available to the pharmacies we deal with and to all of us who may have need for such a product. The giant pharmaceutical company Merck has received FDA approval to market a weakened version of the anti-androderm Finasteride, also called Proscar, to promote hair growth on the scalps of genetic males. It will be available under the name Propecia. Good results are forecast for about 50% of male users based on clinical trials before drug release. "Good results" mean a halt to the progress of male pattern baldness particularly, but baldness of other patterns as well-and the stimulation of quiescent hair follicles, hair roots that have ceased to function. Hair will grow in those areas that have scant or no hair.

Fifty per cent is a good figure and of that percentage some undoubtedly will have really notable benefit. The downside or side effects expected are important ones, but thought to occur in only 2% of the users. The side effects are impotency and reduced libido—rather worrisome for those genetic males who want to enhance their masculine prowess. Just what the effect would be upon libido in the FTM population is not known at this time.

The drug acts to inhibit the conversion of testosterone to dihydrotestosterone, the more potent of the two androgens. Dihydrotestosterone exerts direct activity against the hair follicles-immobilizing them and eliminating hair growth. Stopping this reaction allows for hair growth, and in some instances luxuriant growth at that. But note: the new product is being marketed to the genetic male population and not to the genetic female population. The reason is that it can be very harmful to pregnancy. Hence women in childbearing years at least are not to use it. Now, here is an interesting consideration. What about genetic females who have no anatomic capacity for pregnancy and even those with no interest in one as well? Why would they not be candidates for such medication? Baldness affects upwards of 20 million genetic females in this country alone. More specifically, FTM individuals taking testosterone frequently suffer hair loss and particularly develop the male pattern of hair loss. Why aren't FTMs candidates for the drug?

The medication was not tested in such a population. There is no information available to guide us in its use in FTM individuals. Will

they have reduced libido and to what degree? Are there any other side effects to anticipate? Will FTMs even grow hair at all with this drug? One good effect is that in

clinical trials in men, blood testosterone levels increase about 10%. Is this also the case with FTMs? Will they have heightened response to their testosterone regimen? Will such studies be done? Probably not! Anecdotal and empirical information will come to the FTM community when and if some try the medication.

Would I recommend it? I think I would, and any FTM individuals in my practice who want to begin trials in my care could expect very close observation. I'm not proposing another study myself, but it would be a good idea. So anyone wishing to let me know about their experience with Propecia should contact me. I would want to know what is experienced after one month, two months, four months and six months. This information could benefit the FTM community and I'm happy to collect it and report it.

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Sheila Kirk, M.D. is a board-certified obstetrician/gynecologist specializing in transgender medicine and in private practice in Pittsburgh, PA. She is a board member of the Harry Benjamin International Gender Dysphoria Association. She is the author of several books including Masculinizing Hormonal Therapy for the Transgendered and Medical, Legal and Workplace Issues for the Transsexual. Dr. Kirk can be contacted by phone Tues/Thur 10–5 EST at (412) 781-1092, 24 hour fax (412) 781-1096, by U.S. mail: P.O. Box 38114, Blawnox, PA 15238 or by e-mail: SheilaKirk@aol.com

THE FTM NEWSLETTER NEEDS A NEW DESIGNER

A.S.A.P.!

SAN FRANCISCO BAY

AREA PERSON WITH

SOME KNOWLEDGE OF

QUARK XPRESS

PREFERRED.

SEE BACK PAGE FOR

CONTACT INFO.



On Insurance by Marc Andrew Mario

On my way down to Palo Alto for my second surgery, I wondered if anyone has written a short article for our newsletter recently about some things to check out regarding medical insurance. There are so many different policies floating around, some with explicit TS-related care exclusions and others without mention. I would suggest the following to our readers:

1. Read the fine print of your contract. Find out which surgeries are considered "cosmetic" or "elective." Know the insurance's definition for "elective" or "cosmetic"—it may be contrary to your case and as such prove beneficial to you, e.g. a hysterectomy is not cosmetic, but may be considered elective to avoid payment of claim. However, if judged as medically necessary by your doctor(s), you can use this in court. In addition, some of us may find we had an underlying pathology upon surgery. They can't fight a pathology report! This may force them to reimburse for the surgery.

2. Look for any clauses regarding conditions of congenital malformation of the genitalia (intersex births). You may be able to argue that your condition either falls into the intersex category or is outside of it (depending on whether and how the policy covers intersex conditions). If there is a dispute, though, you will be at the mercy of the court (or mediator/arbitrator, who will follow prevailing local medical beliefs and insurance laws in your state.

A case in point was illustrated in an ABC-TV broadcast in September, 1997 regarding babies born with genital abnormalities: many policies will pay for surgical "corrections" through the parents' insurance, since many doctors (rightly or wrongly) view this situation as an emergency requiring immediate intervention. Ironically, there is no assurance that those procedures won't have to be "reversed" depending on the child's later gender identification. Only time will tell.

Whose Body Is This Anyway?

There was the doctor who told me that if I wanted testosterone I should be looking for some surgeon to cut on my genitals.

There was the U.S. Passport Agency official who told me that if I want an M on my passport I should already have had some surgeon cut on my genitals.

There was the Human Relations employee who told me that if I want a Faculty ID card with a current picture and the name that matches that on my Driver's License, I should already have had some surgeon cut on my genitals.

There are ftms who tell me that if I want to go to their meetings, if I am a real/true/genuine transsexual, if I am one of them, I should be looking for some surgeon to cut on my genitals.

There are ftms who tell me that if I want to be one of them I should be horrified and enraged that when surgeons cut on ftms' genitals the results don't look right, feel right, or work right.

There are ftms who tell me that if I want to be one of them I should be delighted and congratulatory when one of them finds a surgeon to cut on his genitals.

There are ftms who tell me that if I want to be one of them I should be filled with pity when another ftm finds a surgeon to cut on his genitals.

There are funs who tell me that I should want to look at the results when one of them has had a surgeon cut on his genitals.

There was the psychiatrist who told me that if I want to have sex I should get a surgeon to cut on my genitals first.

There was the non-transsexual butch leatherman who told me that if I want to suck his cock with all my clothes on, I should have plans to find a surgeon to cut on my genitals.

There was the mtf who shoved her tits into my face and told me that I should give her a call after I had gotten some surgeon to cut on my genitals, because I'm just so cute.

There is Donald Laub who says that if I am to have sex that isn't lesbian sex, I should have him cut on my genitals but only if I quit my job first.

There are the leathermen of Hellfire who say that if I want to be one of them I must have had some surgeon cut on my genitals because Inferno is for people without vaginas.

There is David Gilbert who says that if he cuts on my genitals he will remove my vagina, no matter what I want, because otherwise he would be making a chick with a dick and no one wants that. There was the non-transsexual gay man who told a group of ftms how glad he is that not all of us have surgeons cut on our genitals because he wants to fuck our hot, sexy wetness.

There was the non-transsexual bi-guy who told a group of ftms how glad he is that not all of us have

There are ftms who tell me that if I want to go to their meetings, if I am a real/true/genuine transsexual, if I am one of them, I should be looking for some surgeon to cut on my genitals

surgeons cut on our genitals because we are the best of both worlds, male psyches in female bodies.

There are mtfs who tell me that if I am really transsexual I should define myself according to whether or not I have, or intend to have, some surgeon cut on my genitals. "Pre-op or post-op or non-op?"

Which op?

There was the social service agency director who shook my hand, the first ftm hand he had knowingly shaken, after a political meeting and asked if I had had some surgeon cut on my genitals.

There are people in the audiences at the academic trans theory talks I give who don't ask about the content of my work but do ask about whether or not I have had some surgeon cut on my genitals.

There are the shrinks who tell me if I want testosterone I should get myself diagnosed with a mental disorder and seek a surgeon to cut on my genitals when the shrinks tell me I am ready to have a surgeon cut on my genitals.

There are all those nons who tell me that if I get some surgeon to cut on my genitals I will be mutilating myself or sinning or making a monster or a freak of myself.

There are all those transsexuals who tell me that if I want to have some surgeon cut on my genitals I must believe myself to be mentally disordered, or disabled, or suffering from a birth defect.

There are some non-transgendered academic theorists who tell me that if I am a transsexual rather than a crossdresser or a transvestite or a butch lesbian, this must mean that I want some surgeon to cut on my genitals. And they tell me

that if I get a surgeon to cut on my genitals, this will show my internalized misogyny or my internalized homophobia or my lack of agency or my complicity with the medical regime, consumer capitalism, or the bi-polar gender system.

There are all those transsexuals who tell me that if I get some surgeon to cut on my genitals I will no longer be a transsexual and I can become a complete man who blends into society, pays his taxes, and lives a normal life.

by Jacob Hale

Personally, I'm tired of listening to other people talking about whether or not I should have some surgeon cut on my genitals. And I'm also tired of people talking about whether or not my trans sisters should have some surgeon cut on their genitals. Whose genitals are they, anyway? I want a world in which more people who believe in other freedoms of bodily choice, such as reproductive freedom, entertain the notion that maybe this freedom should apply to transsexuals' genitals too. Whose dicks and cunts are these, anyway?

Personally, I want a world in which there are more people who believe that they are more than just their dicks or their cunts. I want a world in which people who believe that they are more than just their dicks or their cunts also believe that transsexuals are also more than just our dicks or our cunts. I want a world in which people who believe that they should have some say in determining what and how their bodies mean extend this power to transsexuals too. Whose body is this anyway?



Ren Xiong (1820–1857), self-portrait.
"Heroic men are usually left out of the record."

Anyone interested in participating in your local Gay, Lesbian, Bisexual, and Transgendered Pride Parades and Festivals please contact FTM International. We are interested in those who are willing to promote FTM International and local transgendered/transsexual groups.

Why Come Out?

by Jayson Barsic

Jayson delivered this National Coming Out Day Speech in Portland, Oregon.—Ed.

I'speak today in memory of Marsha P. Johnson, Brandon Teena, Filisa Vistima and countless other Transsexual and Transgender people who we have lost to suicide, murder and denied access to proper health care.

For a large number of people in the GLBT community, National Coming Out Day is a day of celebration. A day that we express our pride in who we are by making a commitment to come out to at least one person. I've celebrated this Queer High Holy Day many times in the past as an out and proud Bisexual woman. This year is the first time that I celebrate as an out and proud Bisexual Transsexual man, I have to say that my feelings are mixed. To come out as a Bisexual person is a liberating thing-I am sharing with the world that I am not ashamed of who I love and that I will not be silenced. As a man, when I share with someone that I am in fact a Transsexual man, in many cases this person may at the very least begin referring to me as "she," which is inappropriate and painful. In some cases it is a deliberate way of showing me that the person does not see me as a "real" man, whatever that means. In the worst case scenario, I could be bashed to death (as in the case of Brandon Teena). This is not a strong incentive to come out.

In the past and sometimes in the present, we as Transsexuals have faced misunderstanding not only in the world community at large but also within the Gay/Lesbian/Bisexual movement. I have been accused of transitioning because I am a homophobic lesbian. I have been accused of trying to appropriate white male privilege, getting a slice of the pie as it were. I have been derisively told that I am mutilating my body, that this is just another case of a woman hating her body. But more than anything I have been told over and over by countless people who they think I am and who they think I should be. Once again, not a strong incentive to come out.

When I began my transition, an overwhelming number of my friends wanted me to identify as Transgender, continue being referred to as "she" and just "work on" being comfortable with a fluid gender expression. The thing is I never was uncomfortable with being fluid with gender. I have always been gender fluid—using and having characteristics that are both masculine and feminine. If that is the definition of transgender then I guess you could call me Transgender. I'm fine with that. But I am also Transsexual. I desire and require a male physiology and

CLEAN FUN from page 1

And never get caught looking at another guy's dick.

I give myself permission to change my mind at any point. I don't have to shower naked: I can always just rinse the chlorine from my swim off with my trunks on. If I feel uneasy, even if I don't know why. If someone's crowding me. If I can't claim a corner nozzle. (A corner shower is imperative to avoid the potential of a person showering to either side of me.) Or if I simply lack the nerve. I'll not drop my trunks that day. I've seen a lot of guys shower with their trunks on.

For me, the decision to shower or not shower rests on listening and being true to my my inner voice. Paying attention to that voice has been both the impetus for and an outgrowth of my coming out as FTM. To make things more complicated, I came out as FTM only to discover that "hermaphrodite" more closely approximates my true gender identity, I will most likely choose never to have lower surgery.

My physical form, like my life, is far too diverse to be neatly categorized as either female or male. I love my testosterone-induced "in-between" genitalia and am for the most part uninterested in lower surgery. Top surgery, however, was utterly life-saving. As was starting testosterone injections, developing secondary male sex characteristics and living publicly as a man.

There's more than just my male side, though. The peak experience of my life to date has been bearing, birthing and raising my daughter. In short, mothering. I've no desire to disavow that traditionally "female" experience even as I say

that to live the second half of my life as a woman would have rendered me suicidal.

For me, encompassing these seemingly contradictory gender

characteristics is both easy and natural. Hence, my comfort with the label hermaphrodite. Granted, I've come to this identity as an adult and thereby avoided the distress of growing up physically different in a culture that demands conformity. And, unlike most intersexed people, I chose the terms under which I submitted to the surgeon's knife.

These distinctions from those who are born physically intersexed are huge. On the other hand, I wrestle with similar identity questions and logistical issues as those who were born physically intersexed. Some struggles, such as those involving my self-esteem, are private. Others, like showering at the Y or coming out to potential lovers, operate in a more public realm. In every case, I strive to remain faithful to my truth by listening closely to my heart.

Therefore, if for any reason I don't want to shower naked, I don't. But most of the time, after checking in with myself, I want to. Which means I had to develop a showering strategy.

Second to attitude, positioning is critical. The YMCA shower I frequent is laid out on a rectangular plan, with nozzles spaced roughly every half-meter the entire length of the room. Only two corners afford privacy—the other two are compromised by proximity to an exit. If the two safe corners are occupied, I'll position myself at a nearby nozzle, start my shower with trunks on and move over when a corner becomes free.

If done casually, this maneuver goes unnoticed. Remember, gang showers inspire modesty. If anybody notices that I always chose a corner, I imagine they chalk it up to shyness or assume my dick is smaller than theirs. Which it most likely is. No problema, as long as no one sees how different my genitals truly are and tries to harm me or bar my entry into male space.

Once I claim my corner, I drop my trunks, keeping my back to the room at all times. Even if a guy is showering inches away at an adjoining nozzle, he can't see my crotch as long as I face the corner. If I need to turn, to rinse off soap for example, I cup my hand over my genitals as if cradling them—a common enough gesture in the showers.

When I'm done, I securely wrap my towel around my waist—don't want it accidentally slipping—and walk to my locker—which I've made sure again, is in a corner. I've dressed at my locker with as many as four guys inches away, all of us putting on or taking off clothes. Again, the key to success is to choose a corner and keep your back

Do I feel legitimate penetrating

this traditional male sanctum

without first spreading my

thighs to the surgeon's scalpel?

turned or towel on.
Pull up underwear
under the towel.

Locker room etiquette dictates that straight men not check each other out. While

we all know they do, when crowded elbow-toelbow the big concern is to avoid being checked out or—worse—get caught looking. My experience has been that everyone's too preoccupied about themselves to pay much attention to anyone else. This may be the single way that the perversity of homophobia works in favor of FTMs and others with non-conventional genitalia.

I believe in challenging homophobia—and I do so in other venues. Likewise, I want to overturn our culture's dominant male/female gender paradigm. But I prefer to choose my battle-grounds and the YMCA locker room is a place I'd rather just slip in and out of, unnoticed. Showering there serves as a perverse and subversive inspiration for myself and my friends. A kind of way to circumvent the gender police rather than confront them head-on.

Moreover, it's fun. Dare I say "good clean fun"? I get a thrill every time I pull it off, both from a subversive place and for the simple reason that I'm in the men's locker room.

Femme with a View

by Venus Bogardus

The following did not start out as a written piece—it is an edited-down transcription of a conversation with Jed. It's an expression of emotions and shouldn't be read as an analytic argument. These are my feelings, some current and some old, all open to change; I'm trying to strip away the analytic critiques cloaking my feelings. I hope when you read this that your feelings are not hurt. I am not trying tell anyone what to do, instead I hope if you have some of these feelings, or know someone who does, that this is helpful.

Where does my discomfort with certain aspects of the TG phenomenon come from? I'd like to think my discomfort is solely based on my worries about the possible health risks of hormones, or other "respectable" concerns. Yet, I know part of it is not rational, but emotional. I think, if all those things weren't the issue—if being trans was something you could do as easily as having your nails done, like having a full set, 45 minutes, \$20, boom, and it was not a health problem and it was reversible—then what problems would I still have with it? That's going to reveal where my bias is, what my emotional discomfort with it is.

I'm not anti-TS, but I worry-not from a place of critical judgement, instead from a loving place. My lovers have mainly been people somewhere in the range of TG: one is now transitioning, others identify as TG without hormones or surgery, some are woman-identified butches. My relationship to TS (FTM) is as the lover.

This is an abstraction, as though all people who are FTM are potentially my lovers. Which is, of course, a false assumption because it assumes that all FTMs are coming from a butch-who-loves-femmes position. And I am granting myself a femme archetype position—as though all FTMs who date femmes would date me! But despite knowing I'm making wrong assumptions, despite feeling embarrassed that I'm having an "It's all about me" reaction, still I'm having an emotional reaction, as though transitioning is an abandonment of butch-femme: as though it were an abandonment of me as the lover.

Both my gender and my sexual identity were predicated on, dependent on, finding butch-femme. Until I found butch-femme I was dissatisfied with my

gender identity-I always felt male next to men. I'm too pushy and aggressive. I don't like being submissive to men (though I did on some level and I hated that I did). When I was dating straight women, I felt more male than them, and I didn't like it. I couldn't believe I was a lesbian because I "didn't look like one." I didn't have a model to understand myself as queer or as feminine until I found butch-femme. My insecurity about being supposedly left by this abstract lover, the FTM, may be because I secured my femme identity in relation to butch.

I think of myself, and some other femmes say this too, as a type of transgender person because my gender identity changed: I had a gender identity that was neither comfortable for me, nor something that I could fully inhabit, when I was a straight girl in the straight world. I wasn't a tomboy. It wasn't about having any traditionally male indicators other than some of the personality ones. But it was an overall feeling of never being able to obtain womanness, to obtain femininity, the quality that I saw in black-and-white moviesthe girly quality and the torrid romanticism that I yearned for as a little girl. Only by coming to butch-femme could I take on femme indicators (nails, hair, etc.) and make them have the meanings I wanted them to have.

Gender is something temporary and all of us flicker in our ability to obtain it. It is not something that only TG people flicker in and out of. We're all flickering. Sometimes I am annoyed by the portrayal of gender dysphoria as though it were limited to TG folks. I know about the daily and comprehensive oppression of TG folks, and I know that my discomfort was not nearly as bad. But when I hear somebody young and new to theories about TG earnestly saying "I have never been comfortable" I agree, but I also want to point out that "You know, almost none of us were comfortable with our gender." Anorexia, to give another example, is partially about the harsh gender discipline of our culture.

Part of me feels abandoned by FTM, especially when FTMs start dating either other FTMs or butches or men-anybody who's not a femme. If my lover were to tell me a story about feeling more male

FAG/TRANSFAG: Desire and Disclosure **by Paul Davis**

I asked Paul to write down some of his thoughts after attending the workshop Queer FTM Sexuality: For FTMs and Other Queer Men. The class, sponsored by the Harvey Milk Institute, was held at the San Francisco gay sex club Eros in November. Forty people attended, including ten gay bio-men. Frank Strona and Matt Rice Blakk were the copresenters.

My friend Clay says I always have an agenda. That would be me: "Mr. Man." I was looking for several things in this meeting. Discussions on disclosure, visibility, dating? And beyond that I might find a cute boy!

Matt and Frank were at their best. Frank-a gay bio-man who travels the country giving seminars to gay male audiences on flirting and cruising-pontificated about the "high art" of cruising and the "Castro walk," (walk three paces, turn and lock eyes). Matt covered disclosure of one's FTM status to potential partners. The boys in the audience were wondering when is a good time to tell, but I think it may all depend on how many sets of handcuffs you have on the bio-guy and how much of his dick is in your mouth. More seriously, it depends where you are and how comfortable you may be. If he shows real interest in you, it may not be a problem.

I've sort of had it easy in that the guy I see on and off was "pre-disclosed." That is to say, I knew he was a self-made man before I even sat down in front of him. If you ask me, this is the best of all worlds. But then, I understand this to be a luxury.

I had stumbled across this mag three years ago (up to then trannies weren't on my map), and it had Mr. Xs photo. Yeah yeah...another cute guy, the world is full of cute guys, so onward. Ten minutes and back I am staring at his photo. Then

I've sort of had it easy in that the guy I see on and off was "predisclosed." That is to say, I knew he was a self-made man before I even sat down in front of him.

the next day...back at Tower...the photo. So I finally start reading the mag, and it's talking about this guy who's a tranny, OK, and he's a fag, OK, and...he's pierced...uh hm, and...gulp..he's wall to wall tats [tattoos]-all light headed and no place to fall-plus he works in San Francisco.

What the hell else does Cinderella want?

So I'm a big fag and I have this crush on this hot tranny boy...big deal. What really mattered for me was I eroticized Mr. X. That is, I find him hot, so for me all else is less important. He has hair like a man, acts like a man-walks like a duck, quacks like a duck...etc. No, he doesn't have a dick, but then...he has several. All sorts of sizes, and I'm not much for ass play right now anyway.

The first time we played, I made a guess as to what his parts were like. It's been ten years since I've even seen female genitals live! So I just dived in and and "thought of England," but really it was cool, it was so new, like I was 17 or something. I had to ask if I was doing it right? Both scary and fun.

As for not having the factory equipment...this is not a problem...but then I've only been playing fuckbuddy, I don't know how it might be longterm-but I think that could be solved. I have to mention fisting...fisting is soooooo hot.

I want to run and tell all my fag friends that they are missing the best fun.

Be writing at you soon-Pablo Write me at durwood@slip.net

A Transgendered Southern Belle...

Meets a Southern Transgentleman

by Roberta Angela Dee

There was only one message on my answering machine. I pressed "PLAY" and listened to the recording. "Hi, Roberta! This is Mike. Remember me from college? I've bought a free round-trip plane ticket for you. All you have to do is give me a call at (803) 123-1111. I look forward to hearing from you. Bye."

Who was Mike and how did he get my number? I was very careful about my private number. I played the message a second time, trying to decide if the voice was male or female. I listened again, but I couldn't tell. Could "Mike" actually be "Myke"—a sort of tomboy I had known in college? The area code was South Carolina, but I knew no one named Mike or Myke in South Carolina. I couldn't understand why anyone would be holding a free round-trip plane ticket either. I hadn't entered any contests.

My curiosity overwhelmed me. I picked up the phone and dialed the number left for me on my answering machine. It rang three times, then someone answered.

"Hello," someone answered with an androgynous voice. "Mike, here."

"Hello, Mike?" I responded with a soft and inquisitive tone. "I'm Roberta. You left a message on my answering machine."

"Hey, Roberta!" the voice replied as if hearing from a long lost friend. "It's me—Mike. Remember? I lived across the hall from you, five years ago. We were both still in college."

"You were sort of like tomboyish?" I asked, still searching for clues.

"Yep, that was me. Your description was accurate for then, but I've changed a bit since graduating from college."

"Well, how did you know to call me?" I asked. "How did you get my unlisted number. I'm not the same person I was in college."

"Yea, I know," the voice answered. "You're living as a woman now. I know a lot of people in the gay community and some of them know you. As soon as I saw your web page and saw the word "transgendered," I knew it was you. I started calling around, until I found someone who would give me your number."

"And who was that?" I asked.

"It's not important," Mike replied. "They knew me and knew that I wouldn't use the information maliciously. I just had to talk to you. I wanted to meet you."

It had been 5 years since I graduated college in 1975. Ronald Reagan would be elected President of the United States this year. John Lennon would be shot and killed outside his apartment in New York City. Although neither of these events had yet occurred, 1980 was not a time when there were very many transgendered women like myself.

I was asked to fly to Columbia on a Friday, and told I'd be returning that Sunday. I agreed.

I was very nervous about meeting someone who had known me while I had been living as a guy. It was important to me to make my transformation as complete as possible. I wanted it to be clear that I had severed myself from the life I had led as an individual upon whom circumstances had forced a male lifestyle. I was a woman now, I wanted to make that perfectly clear.

Mike carried my bags, opened my door, and behaved like a perfect gentleman the whole time we were out together. In fact, it was difficult to recall when I had been treated so like a lady.

On Friday, June 13, I arrived at the airport in Augusta, Georgia. I wore lavender open-toe, ankle-wrap sandals with 3-inch heels, black textured hose, and a short A-line purple dress cut low enough in front to eliminate any doubt whether or not I had been taking female hormones.

The ticket had been made out to R. A. Dee, and no one questioned or seemed the least bit

suspicious as to my gender. My height was another matter. A six-foot woman wearing a short dress, exposing cleavage and legs to die for, was certain to attract more than a modest amount of attention.

It was a relatively short flight. As I exited from the plane, I looked for the boyish girl I had known in college. I continued looking but could not identify her in the crowd of people waiting to meet people exiting from the Delta flight.

"I'm right here, Roberta," an androgynous voice announced less than a foot to my left.

I was stunned. She, I mean he, looked like a man. He stood 5-feet, 8-inches tall, and easily weighed 155 pounds. He was now a young man.

"You've changed," I replied, clearly revealing my surprise.

"So have you, girl!" he answered. "Damn, you look good."

I giggled as if I was a high school girl being handed a corsage for the prom.

"Give me a hug," he ordered with a commanding tone.

I held open my arms and we exchanged hugs. However, as he moved close to me, I felt something firm and familiar pressing against me. It felt like a guy, but I didn't dare say anything. It excited me and startled me at the same time.

As he backed away, I believe he could tell that I had noticed something different. He simply smiled. "Let's go get your luggage," he said, "and I'll take you out to dinner."

Mike carried my bags, opened my door, and behaved like a perfect gentleman the whole time we were out together. In fact, it was difficult to recall when I had been treated so like a lady.

After dinner, we drove to his house. It was situated in a very rural area and sat on three acres of wooded land.

Once inside, he opened a bottle of >10

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JAMES from page 2

fore more fully present in my life.

About sex, I respond that while I can have erections and orgasm, my penis is much smaller than the average man's. I have a normal size scrotum. (I

had the metaoidioplasty procedure done in 1990.) I enjoy sex more now that I am more at home in my body. I know how to please a partner physically, and I use more than my penis to do it. The biological function of a penis in sex is to deliver sperm to the cervix—that is not what I am trying to do when I make love to a woman, so I don't worry about it, and my partner doesn't, either.

2. You are currently working on a book. What is it about and when can we expect to see it on the shelves?

It's a novel about a family in which one member is an FTM. When he decides to transition, the rest of the family is forced to examine themselves and their notions about many aspects of their lives. For example, one of his brothers is sterile due to an accident when he was a child, and this brother struggles with what he realizes are similar issues of masculinity.

It could be available in the spring of 1999. But realistically speaking, that is the best case. Fiction is not as easy to sell as non-fiction these days. Fiction is more challenging to write, and therefore more of a pleasure to me, especially when I am successful at creating a character or communicating complex emotions that a reader can connect with and be moved by.

I wanted to do fiction because it gives me the opportunity to get inside different characters and explore their emotions. Most transsexual autobiography (non-fiction) is criticized for being superficial and defensive. I'm hoping that I can avoid those characterizations of my work because writing about fictional people requires depth and openness, revealing things about the fictional people that one ordinarily wouldn't reveal about oneself.

3. Outside of your community organizing and political work, in your personal life, is it more important to you to be out as a transsexual man or do you prefer to pass for a genetic male?

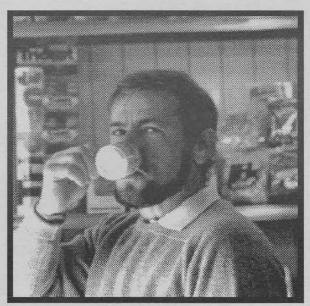
I prefer to be perceived simply as a man. That is why I went through transition. I am certainly not ashamed that I am a transsexual man, but I don't think it is necessary to spend all my time discussing that aspect of myself, any more than it is necessary to reveal any other personal information when it is not appropriate to do so.

4. What inspired you to create FTM International?

I didn't create it. It was started in 1986 by a man named Lou Sullivan, under the name FTM. Lou experienced the difficulty of trying to find information about transition, and he wanted to alleviate that for others. He also identified as a gay man, and was told by the medical establishment that he could not

be a transsexual if he wanted to have sex with men.

The definition of a transsexual at the time was more akin to "acute internalized homophobia," so that you wanted to have sex with people whose bodies matched yours, but you couldn't stand the idea of being gay or lesbian—so you



James samples the local espresso in Venice, Italy

needed to change your body to be able to have sex. Now, this may be true for some people, but certainly not everyone.

Lou was one of the pioneers who worked to educate the medical establishment about the difference between sex, sexual orientation, and gender identity. We owe him a lot. He died in March of 1991 from complications of HIV. A week before he died, he asked me if I would promise to make sure the

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FTM Newsletter (his quarterly publication) would continue. He picked me, not because I was his friend (we actually didn't know each other well at all), but because he knew I was capable of the task, and that I would keep my word. I agreed to do it because I didn't see the newsletter as being much work.

I didn't realize that I would also inherit the quarterly support meetings that he ran. At the next meeting after he died, the typical attendance of 12-20 suddenly became over 50, and the demand was expressed for monthly meetings. The newsletter also grew from 8 pages to 20, and from a distribution of 230 to 1000. We have subscribers in 14 countries. Adding "International" to the name was Stafford's idea (he is a graphic designer who

helped make over the newsletter in 1993). I think he needed it for a graphic element.

In the fall of 1996 we became a registered nonprofit educational corporation. What has motivated me over the years is the contact I've had with other FTMs, hearing their stories of both defeats and

successes. I realized that there is a terrible shame that comes to many of us as we struggle with our gender issues, especially the need to transition, and this is compounded for many of us by a lifetime of rejections. I strongly believe that it is wrong for us to be made to feel this way, and I want to both encourage people to be able to get good information so they can make informed decisions about their lives (especially with respect to medical treatments), and also help to educate trans and non-transsexual people so that we can live full, productive lives, with full civil rights, and without shame about who we are.

5. Throughout history, I believe, mtfs and other male-to-female transgendered people have been more visible than ftms. Do you agree and if so, what do you attribute ftm invisibility to?

Yes, it's true. I think it's due to a mix of factors: first, we are quieter and tend to disappear socially because there is more accep-

tance of diversity in male appearance than in female appearance. As men, we are not so noticeable. Second, men who transition to women are more of a social threat to the prevailing masculine paradigm—the idea of cutting off a penis is much more appalling than the notion of coveting one. Third, as my friend Loren Cameron noted in an interview with Marcy Sheiner in the April, 1991 issue of "On Our Backs," "What women do isn't seen as so important, even when they're becoming men." And lastly, many people are simply ignorant of the notion that transsexualism is anything other than "a man who wants to be (or thinks he is) a woman."

It is also true that there are many MTFs who pass very well as women and who would never draw undue attention to themselves. But some MTFs are more visible because they still behave somewhat like men socially—and this makes them noticeable because it makes people feel uncomfortable around them. We FTMs have to deal with the conflict between having our issues understood—because our medical and social issues (but NOT civil rights issues) are very different from those of MTFs—and any desire we might have to integrate into society and live as men. As a community, we have not dealt with this conflict yet, and our cumulative invisibility is a by-product of that, too.

6. In terms of community-building and trans activism, what do you feel is the relationship between firms and other transgendered people?

FTM transsexuals have specialized medical needs that are not well-addressed by existing Standards of Care, and we need to speak up and advocate for ourselves and our different needs. But with respect to social acceptance of

JAMES from page 8

trans-ness and civil rights for transpeople, I believe we must ally ourselves with all other marginalized people, because we all suffer from the same oppressions and the same prejudices. I believe it is only by demonstrating that we are not just a few, isolated individuals that deserve special treatment—we are part of a continuum of human diversity that needs to be respected—that will we succeed in teaching those who abhor or fear us that we are people, just like them.

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7. What do you think of Kate Bornstein's sentiment that the actual categories of male and female are oppressive and that transpeople should avoid identifying as "fim" and "mtf" because it reinforces the idea that there are only two genders?

I agree with Kate that the categories can be oppressive, and that there are probably more than two genders. But I think that the label FTM is descriptive of the transition that I have undergone—not who I am, per se. I think it is about my body, not my gender. My body went from female to male, but my gender has always been masculine. Far be it from me to tell people how they should identify or describe themselves.

For me, FTM works in certain contexts, just as father, and writer, and musician, and transsexual man, and male, and many other descriptive terms can and do apply to me. I know what it is like to be transgendered, because that's how I perceive myself to have been when I was living in a female body. But now that my body and my gender identity and gender expression are in alignment, I do not see myself as transgendered any longer. If other people want to live in that transgendered state, whether or not they are transsexual people, that is fine with me, and I support their right and ability to do so.

8. What has been FTM International's greatest obstacle around community building among ftms?

Apathy is one major obstacle, but I think it is mitigated somewhat (and worsened, too) by the overwhelming toll that being transsexual takes on people. When one is working two or three jobs to try to save for surgery, or living in fear of being outed and losing employment, friends, family, one does not have much energy to devote to other people.

Another factor is the incredible diversity we have within our ranks. We don't have a common culture, like the sub-culture of the gay/lesbian world. In many cases, all we have in common with each other is that we (transsexuals) want to change our bodies, so we come together to get information,

and then move on. We're told that is the important feature of transsexualism—to want to move on, to integrate into society and disappear—so we are not encouraged to gather for any other purpose. We don't have much reason to need or like each other, apart from getting some temporary resource material to help us on our way. Why should we bother to get involved?

9. What has been FTM International's most exciting accomplishment since its inception?

Probably the first All-FTM Conference of the

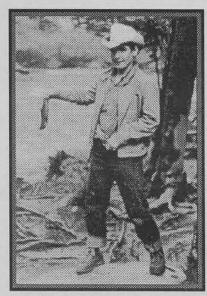
Americas in August, 1995, in San Francisco. Nearly 400 people came. Never before in the history of the world had so many FTM-identified people been together in one place before. It was incredibly moving to me, and the energy was magnificent.

10. Where do you see the transgender movement and FTM International in 20 years?

I would hope that in 20 years FTM International has a paid staff of several people dedicated to providing information and education on gender issues and FTM transition to anyone who needs it. I hope that transpeople will have full civil rights protections, and that medical treatments for FTMs are improved and not so costly. I don't think the categories "male/masculine" and "female/feminine" are going to go away (sorry, Kate), but I hope there will be less rigidity surrounding them, so that people are less threatened by diversity across and within the categories.

I believe that we are a little microcosm of society, and if we can learn how to deal with the diversity within our ranks—diversity of gender, race, religion/spirituality, ability, sexuality—we can find a way to spread the message of mutual appreciation and support that society needs to move our culture forward. I'd like to see

some progress in the form of less oppression, less abuse, more freedom, and more willingness to get beyond our personal issues and experience and contribute to the whole of life. We all have contributions to make, whether we are raising kids, doing jobs, or devoting volunteer time or money to social or ecological projects. I would like to see that gender and bodies—any gender, any body—are not barriers to anyone's ability to participate fully in society. I think these are achievable goals, and I hope that others will think so, too.



James (age 14) with trout

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SOUTHERN BELLE from page 7

red wine and we drank glass after glass while seated on the sofa. Within an hour I was quite light headed.

"That bulge in your pants makes you look like a guy," I commented, and then giggled—again like a high school girl.

"I'm packing," he answered. "More importantly, I am a guy."

"Oh, I'm sorry," I answered apologetically. "I'm still adjusting to the new you. But tell me something, what do you mean when you say you're packing?"

"Actually, packing is an old term," he began to explain. "Sometimes a

butch lesbian will wear a sexual 'aid' to indicate to other lesbians that she's very butch or that she presents herself in a masculine manner. The term doesn't really suit me any longer because I'm a man now. I should have simply told you I'm wearing a strap-on."

Well, those words "strap-on" quite nearly sobered me in a second. "You mean like an artificial cock?" I asked.

"Well, I don't know if you could say it's artificial," he replied. "It's real enough for its intended purpose."

"Damn, Mike," I said. "You really are a guy. You've certainly changed."

"No," he answered. "Not really. You know, I've always preferred women, and I've always preferred loving a woman in the way that a man would love a woman. I've taken hormones. I've had my breasts removed. Other than that, I'm the same man."

"Yes, sweetie, but why are you wearing it out in public?" I asked. "Why are you wearing it now?"

I could tell I had embarrassed him. Still, I hadn't embarrassed him so much as to cause him to change the conversation.

"Well, in certain circles this would have indicated to you that I was happy to see you, and that I was interested in approaching you sexually."

"This is not quite what I expected, Mike," I explained. "To be honest with you, it's very insulting to think you've invited me here just to fuck me. You must have a very low opinion of me."

"I'm sorry, Roberta," he said apologetically. "I thought you'd understand. I was very turned on by your web photo. I've always been attracted to you. Even when you were a guy. I mean, I could see that inside you were always a woman. Thought that maybe we could have something intimate together. You're a very attractive woman."

"And you want to make love to me as if you were a man?" I asked.

"Not 'as if' I was a man, because I am a man," he replied firmly. "I want to make love to you as a man making love to a beautiful woman who deserves to be loved and appreciated for who she is."

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My thoughts raced back to the moment he had first hugged me. What I felt then wasn't nearly as intense as what I was feeling now as he looked at me.

Could I, a transgendered woman, fall in love with a Southern transgentleman? Could I open myself to whatever kind of love he could provide?

At this point, I had little difficulty accepting Mike as a man. In fact, I had no difficulty at all. The problem I was dealing with focused more on the fact that Mike had been a woman. Therefore, he understood the subtle workings of a woman's mind.

The question in my mind was: At this moment, was I responding to Mike because he had proven himself to be an attractive, attentive and assertive gentleman? Or, was I responding to a woman who knew how to coax me in the way that a woman needs to be coaxed? To make matters worse, I was confused as to whether it made any difference.

Finally, I concluded that I liked Mike and that he was undeniably a man. What did it matter that he was perhaps a bit more polished or skillful than most men?

"Be my man," I finally whispered, not knowing what that would mean, nor where it could lead.

Mike leaned forward and we kissed. I closed my eyes. A minute or two

later, he led me to his bedroom and undressed me as I had often dreamed a man would undress me.

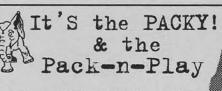
Then, he removed his clothes, down to his boxers. He waited for me to respond. I lowered his boxers and admired the phallic ornament he had donned just for

me. I kneeled and kissed it, took it into my mouth, and showered it with affection. "Good girl," he commented.

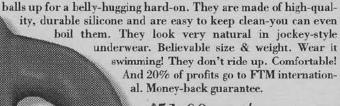
He removed my panty and lubricated my tiny orifice. He fingered it gently, carefully. Then, after a generous amount of foreplay. I was completely relaxed and he mounted me.

I lay on my back, my eyes closed. My prince had come to me and had entered me with more magnificence than I could have ever imagined. Mike had been my first encounter with a transman. How could I have known heaven had only been 8 inches away? I knew then and there, he would not be my last.

The author can be reached at Dianic007@aol.com



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Mike leaned forward and we kissed. I closed

my eyes. A minute or two later, he led me

to his bedroom and undressed me as I had

often dreamed a man would undress me.

EXPANDING from page 1

to a friend about it. She told me there was no need to worry. The bruise was perhaps a result of how the doc had injected the needle. Three days later the bruise was gone.

May 6, 1996 was the last expansion. Both expanders were filled with the required amount of saline solution.

Later that month, I found myself back in Palo Alto being prepped for surgery. While I lay on a gurney covered by a cozy warm blanket, Dr. Laub stopped by and I told him about the bruise. He said that could happen, but it wasn't common. He took a green marker and began making Xs and lines on my groin as though playing tic-tac-toe with himself. He said I was big enough for large implants. I had planned on medium, but got hoggy at the last minute and agreed on the large.

The anesthesiologist came in and began setting up the I.V. She explained what she was doing as I watched. When she turned away I closed my eyes. When I opened them, I had the sensation of being stoned. I closed my eyes to make it pass, and did not open them until after about a two-hour nap. Two nurses tended to me as I came out of the anesthesia. One, bless her heart, allowed me small sips of water. I kept gasping because I couldn't get enough air into my lungs. Lying there, not being able to move, was very disturbing. It took all I had to focus on positive things; at one point I thought, "This must be what quadriplegics feel like sometimes."

After some time had passed, my ride arrived and took me down to my hotel. I recall nothing of this trip. My roommate was already there; he had had the same procedure just hours before. Days were spent keeping the sutures clean by swabbing the area with Q-tips dipped in half-and-half hydrogen peroxide and water, then painting the sutures with Betadine.

In my journal May 21 I had written, "Took a walk four or five blocks to get more hydrogen peroxide. During a checkup the next day, the nurse scolded me for taking that walk. No more walking, it could cause swelling. So it was a session of testicles on ice to prevent swelling." During that visit to the nurse she removed some sutures. It was hard to tell the stitches from the hair, which made for some painful plucking.

May 26: "The skin is peeling off the right testicle. One large flap looks gross. Small area near right testicle still stings occasionally." At my last visit to the doc it turned out that this was where a suture knot was. I was deemed fit for travel and was given instructions on how to cut the knots when the time came. I continued to clean the suture sites with Betadine.

June 4: "Preparing for bed I noticed a spot of dried blood on the right testicle where scar tissue is forming. Cleaned it with Betadine. No more walking in jeans."

June 10: "Took out knot in left testicle, can't do the right. I'll make an appointment to get a doc to do it."

June 11: "Doc gouging around looking for a black or blue thread until I told him it is clear, like fishing line. Snip, it's gone and I'm done."

Perhaps it is because I chose the large implants that my testicles are snug against my body. They look deformed with the right one jutting forward a bit, but I wouldn't trade them for family jewels made of gold. I have since returned to my home village due to the requests of friends and elders. The acceptance of my people has been unbelievable. There are days when I walk through the village, people greet me as Victor, and it feels as though it is just a dream. But it is reality. An awesome one at that. In church I stand on the men's side and feel comfortable. I am currently working part-time in the school where I used to teach while I study to become a school counselor.

What finally brought me home was a comment made by one of the elder women who once was angry with me for what I had done. About a year ago we were on a plane together flying from New Stuyahok to Dillingham, where I had been living since the death of my mother three years prior. The woman asked me why I lived in Dillingham and I told her I needed to work. She said I needed to return home, find a woman and get married.

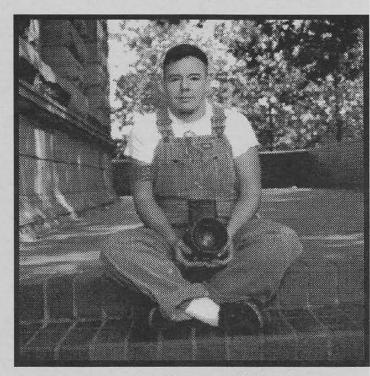
WHY COME OUT? from page 5

anatomy and it is necessary that I pursue that in order to live my life in any fulfilling manner.

Someone who is Transsexual grows up with the very real and excruciating sense that they do not belong in the body and gender identity they have been assigned, first by doctors and subsequently the world. The process of obtaining hormones and/or surgery to transition into the sex of identification is long, arduous and expensive. The process of transition is intensely emotional, taxing on relationships and it is immensely private. We are changing sex; when I am asked to come out or feel it necessary to come out as a Transsexual man, I am basically disclosing my medical status. I am faced with inappropriate or sometimes appropriate questions about the status of my genitals and the chemical makeup of my body. And again I say, this is not very strong incentive to come out.

So what is it that does drive me to come out in spite of it all? Mostly I do it for altruistic reasons. If one single person who is Transsexual and in pain and in need of help sees me or hears my voice and sees that it is possible to obtain what they need to keep living, then it is worth it to me. I also want to fight for simple rights that some people may take for granted-mostly the right to fair and good health care. If my presence as an out and active Transsexual man can further the equal treatment of Transsexuals in the world in any way, shape or form then I am willing to be out as often as I can. Also, since I am Bisexual, I feel very invested in mutual understanding and respect between those of us who identify as Gay - Lesbian - Bisexual - Transgender - Transsexual or any combination thereof. Like most people, I want my experience of myself and my world to be validated by my community. I'd like it if people stood up for me when there is a bully on my doorstep-whether that bully is an individual or a piece of legislation or a particular politician or whatever. But like I said before—I'll say it again—it is with mixed feelings that I do come out. Sometimes I just wanna be another flamin' femmey bisexual guy and that's all. Thanks.

Editor's note: Jayson puts out a zine (underground magazine) called Willyboy. You can get a copy by sending \$2 per issue plus a self-addressed, stamped envelope (with 55¢ stamp per issue) to Jayson Barsic, POB 2603, Portland, OR 97208-2603.



Del (La)Grace, Seattle, 1996 Photo: James Loewen

FEMME from page 6

after fucking a guy, I'd feel like, so what am I? Why can't you feel fully male with me? Because I think of you as fully male.

My reaction is similar to the reaction I used to have when butches wanted straight girls: I hate it. It's a ferris wheel: "I feel like I'm not as good as a man but if this straight girl wants me then I'm better than men." And the straight girl will play into that. But then she drops the butch, and then the butch is at the bottom of the ferris wheel, saying "I'm not as good as a man, because I got left by her." I see it as sort of a game-playing that straight girls do, like in high school when they said to their butch frierd "If you were only a man, I'd marry you."

When I see FTMs dating men, I feel afraid of a similar dynamic: I'm not as good as a man, but if this gay man is being sexual with me, then that means I'm a man among men. It's a self-help truism, but I think it's important to have a sense of self that isn't dependent on our lovers. On the other hand, I know that my sense of gender was predicated on being in butch-femme relationships and it is

only subsequently that I secured a sense of myself as femme even when single. Also, there are probably lots of good motivations for wanting to be "sexually relevant" to men, straight women, etc. I'm sure it can feel really good. I don't believe my fears are true. I'm explaining the justifications I'm coming up with to hide feeling left.

Butch-femme has been life-saving for so many that FTM scares me, as though, especially in the young, maybe they haven't given butch a chance. Lots of femmes and butches know how to read the maleness in TG butches, how to see them. It is magical. The metaphysics of butch amazes me. It's a miracle to me, and a blessing. I truly feel myself being fucked even if we don't have a strap-on. I can see the maleness there without hormones.

When one of my lovers went forward with transitioning-even though we were not full-time lovers, we were not living in the same city, and it's never been like that—his transitioning provided him with way more sense of his own maleness than I could give him. I felt sad partly because I wanted to be able to provide that assurance, just the way that he has provided that femme assurance for me. I know my feelings are egocentric and wrong and not useful. I know we certainly don't get everything we need from any one lover or any one type of lover. But I know other femmes with some of these feelings.

I have an irrational fear that FTMs who change their bodies, sleep with men or other FTMs that it's about a hatred of femaleness; this is my self-hatred that I am projecting on to them. It's my fear that what's between my legs might be disgusting. I never really trusted that my male lovers wanted to go down on me— even if they clearly did. Orly when I started sleeping with lesbians did I first start to relax about my body. If my mythic FTM lover is changing his genitals and is sleeping with men, does this mean he is disgusted by pussy?

Many butches have years of discomfort before coming into their own sexually and socially. My ex had to work (on her own and with lovers) for years before having satisfying sex. She was in her late 20's when things started working for her and she could cum during sex. I think if the self she was at 21 were living in San Francisco now, he'd be transitioning. My bias is that I'm happy she didn't transition; not because she's not transgender and not because I'd mind if she wanted to be called male, or "he," but only because she is happier now than she has ever been, and comfortable with being TG without hormones or surgery, and I think TS is risky and not necessarily a solution.

Maybe it would be easier for her if s/he were understood as male by more people more of the time, but I am impressed by her assertion of being neither male nor female—to a world that violently demands that there are only two options. I want this position to be a respected choice for TG butches. But then my ex is 5'7" and flat-chested and narrow-hipped and, without hormones, passes most of the time.

With my ex-lover, when I'd see people treat her as a man, and I'd watch her negotiation of that, it always had mythical and magical meanings to me. She was a wizard in the old sense, a powerful but fallible protagonist. S/he had this gift of flickering between and inhabiting this gender terrain that other people generally don't inhabit, and that some people couldn't see. I admired her

struggle, even though I wished she didn't have to fight.

There's a little-girl part of me that had a lot of pain going on in my world as a kid, that I could only partially acknowledge or express. I look at butches and feel admiration because they're the ones that express a resistance to a system to which, as a child, I could not express my resistance.

I am often annoyed by straight men. They feel so entitled to do so many different things. My attraction to FTMs is based on their experience with F; I like people who have been understood to be female in their childhood years, and resisted. Some grow up to be butch-identified and FTM. For me, there's

men who have been raised men, and the majority of them are assholes, and there are some of them who have managed not to be assholes, and then there's TG men, for whom the proportion is probably reversed. It's the suffering, the discomfort, the sensitivity, the not-feeling-entitled that's very attractive to me. It means that what I offer to my lover is understood as a gift and not just taken from me.

The beautifulness of that butch-femme/TG dynamic is that I feel special both because I can see what this person is in multiple levels, their multiple realities in a moment, because I feel valued to be their mirror and because they also see me. A good lover can understand the multiple levels of my femininity, whether it's putting on straight-girl drag to go to work as a stripper, or being feminine/female with them. And they are also accepting, and usually supportive, of my aggressiveness and intelligence. We see each other in metaphysical ways, beyond what exists in normative culture. It's co-dependent, but it's beautiful.

I temporarily lost the ability to see the multiple realities of my lover on Halloween, when she put on a beard. As a sex worker, I get turned off about men a lot. I see the slime of the earth being sexual. My associations with maleness, aside from a few good male friends (including FTMs) and my very wonderful father, are limited to customers. Seeing my lover in facial hair freaked me out. She looked like a customer to me.

I had all of these incredibly fast reactions: she looked like a guy who wouldn't say anything interesting, for instance, but I'd have to listen to him. At the end of the night when she was taking off her full scraggly beard and had it down to something more queer, like a goatee, then she looked a lot better to me. Still, if my future partner is already FTM, I might not see him on the street. I fear I'm going to lose the ability to see the magical people that I love.

I understand that where I'm at right now is transitory, transitional. I'm going to feel differently. I already do.

Menace Men T-Shirts Available

Ever wondered what to wear to that demonstration or political action? Afraid no one will know what you stand for? Well, here's just what the doctor ordered: The Transsexual Menace Men T-Shirt!

Transsexual Menace is not a club, not another organization, not a disco! Transsexual Menace is a loose (very loose) confederation of individuals who are not afraid to throw the frightening spectre of the dreaded transsexual in the faces of those who would oppress us, and who come together only when necessary to act in rebellion to the stereotypes, ignorance, and fear that would keep us oppressed.

These are 100% cotton, Hanes Beefy-T's, black with white and menacing red lettering, available in S, M, L, XL. Only \$12.00 (plus \$5 shipping and handling for each 1–2 ordered). Get yours now from FTM International, or contact Tbhawk@AOL.com (make checks or money orders payable to FTM). And never be at a loss for action wear!

If my lover were to tell me a

story about feeling more male

after fucking a guy, I'd feel

like, so what am I? Why can't

you feel fully male with me?

INSURANCE from page 3

3. Follow all rules to obtain prior authorization or certification for surgeries or even mental health claims, if necessary. Do this even if you know or feel your claims will be denied. Failure to do so may restrict or prevent your chances of reimbursement. And, most importantly, keep a record of when you called and whom you spoke to...you may need to prove this. If your doctor's office makes the phone call for you, please ask them to make a permanent note in your record that such a phone call took place, who they spoke to, and the result. Keep a copy for yourself. Most supportive medical people are very compliant with our requests. That has been my experience, at least.

4. Look for specific TS exclusion clauses. If you have a choice in selecting your insurance, you may want to weigh the differences carefully. HMOs may have many more restrictions to our care, but I don't know this as fact yet. If there is no specific exclusion in your contract, using NY state as an example, the law is decided in our favor. Vague or ambiguous insurance language is not accepted by the court either.

5. If you are being discriminated against by the insurance company/administrator because you are TS, and they hassle you over every claim you submit (e.g. routine antibiotics, chiropractic care, etc.) by demanding more proof from you as to why services were rendered, keep copies of all such correspondences. Again, depending on the laws in your state and if you have a good attorney, punitive damages could also be awarded if you decide to take your case to court. Also, don't hesitate to ask for a written explanation as to why they are denying your claims. A letter from your insurance company indicating discrimination based on your TS status may be very helpful in court...and believe it or not, they may be crazy enough to send you one!

6. If your employer offers what is known as the "Flex" plan, take advantage of it, especially if you are planning any surgery the following year. You have to estimate your medical expenditures for the year ahead, which can be a bit tricky if surgery is not in the picture. The maximum limit in NY state is \$5000 taken from your salary before taxes for a given year. This is a tax advantage for you. If you are not having surgery (which would easily use up

the the maximum limit), some of the allowances are travel expenses for medical reason—plane fares/motel charges (\$50 per night allowance)/car rental & gas—personal disability insurance premiums for insurance you may have purchased separately, any medical policy deductibles or copays (including Rx copays), and nonprescription medical supplies (e.g. surgical tape, bandages, contact lens solutions) to name a few. Check the info that they provide with the Flex plan enrollment for a comprehensive list.

7. If you use the Flex plan and eventually get reimbursement for your denied medical claims (e.g. surgery), this amount can be recorded as income by a tax advisor so you are in compliance with the law. Check with your tax advisor.

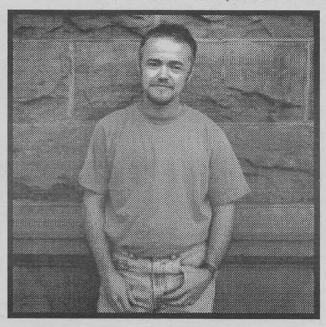
I hope this information will be helpful to our readers. Although it is based on my personal experience, I encourage people to really look into their options and don't be afraid to ask questions. Conserve your resources whenever possible so as not to drain your financial future.

SEAN R. MARVEL

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FINANCIAL PLANNING FOR ALTERNATIVE FAMILIES AND INDIVIDUALS



Note: The San Francisco Transgender Community Task Force and the San Francisco Human Rights Commission initiated a project in August 1996 to get the City and County of San Francisco to eliminate the exclusions for transsexual procedures from all of the health insurance plan options offered to City and County employees. A committee of the TG Task Force held several meetings with Health Service System Board (HSSB) members, who are responsible for the city's negotiations with the four insurance carriers it use. Led by FTM member Russell Hilkene, the committee performed research for over a year to determine the prevailing medical practices and costs for all TS procedures that are now excluded.

The committee then produced a report and re-petitioned the HSSB, which agreed that the exclusions should be removed, and promised to work with our committee during 1998 to develop policies with the goal of offering complete health care coverage for transsexual employees by the 1999 benefit year. It is our hope that this effort will serve as an example for other insured groups to prove that exclusions of benefits for transsexuals are arbitrary and prejudicial and may be removed without grave economic consequence to insurance providers. FTM International members

who are working on this project are: James Green, Robert Haaland, Russell Hilkene, Yoseñio Lewis, Shannon Minter, Esq., Shadow Morton, and Stephan Thorne. Tremendous assistance has been given by Larry Brinkin, Martha Knutsen, and Marianna Balquiedra of the SFHRC, Dr. Lin Fraser, Dr. Michael Brownstein, Dr. Lori Kohler, Dr. Barry Zevon, Judy Van Maasdam, Lisa Middleton, Claire Skiffington, and Dr. Shoshanna Gillick.—James

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A letter from your insurance

company indicating

discrimination based on your

TS status may be very

helpful in court...and believe

it or not, they may be crazy

enough to send you one!

MALEBOX



GENTLEMEN:

David Hughes's article And They Don't Come Back (FTM #39) spoke with the power of truth, compassion, and optimism. Thank you, David.

S. Andersen

TO WHOM IT MAY CONCERN:

I'm a pre op F2M needing the answer to one question. I have the masculine haircut, clothing, moves, speech ... basically all but one thing; how do I become enabled to urinate while standing at the urinal? It's impossible to explain why I have to "squat to pot" when I'm with the "guys."

I've tried the strap-

on dildos that are hollow from the manufacturer around the house; you know, place a female catheter into myself with the other end through a small hole on the "tip end" of the dildo. Inside of the dildo, near the end, I've a device that normally pinches the catheter closed and opens when I pinch it (through the dildo). That way, I won't leak all over the place.

The only problem with the set-up is that the dildo is too long (8" long) and firm. I really don't want to walk around

(outside the house) looking like I have a broom handle in my crotch.

Truly hanging around for the answer,

Quanda Kindle, Montgomery, Alabama

Dear Quanda,

Well, not everyone feels like they have to explain why they don't use the urinal—lots of bio boys (men born

male) don't like to use urinals either. But FTMs who prefer to stand up to piss do have an option or two. One trick is to take the plastic lid off a can of coffee, Crisco, Cool Whip, etc. and cut off the outside edge. This leaves you with a flat circle of plastic. Simply fold the disc into a cone shape and put it under and a little behind your urethra (the opening where the urine comes out). Then aim and shoot! After a little practice it's easy to use. I know quite a few FTMs who use this all the time, without anyone ever noticing the disc. Your hand covers a lot of it, and people just don't look that closely.

I've also seen "pack-and-piss" packing devices for FTMs, but haven't seen them marketed recently. —Jed

DEAR JED.

We are writing in response to your article in issue number 39, "Report from Boston." We appreciate that you have shared your opinions. We feel some response is in order. Your editorial, in our opinion, presented an unfair, harshlydrawn, and inaccurate view of the August 1997 Boston FTM conference.

To begin with, the author describes having "missed some of the qualities of previous conferences: the overt homo behavior of Seattle's opening ceremonies, for one. While many out gay/bisexual men were

organizers in Boston, I only knew this because I'd met some of the guys in other contexts: it didn't come up in the events and speeches I saw." To be blunt, what on earth did you expect from us? One of our Friday night acts was a musical duo who were clearly introduced as "partners." Gay and bisexual men (including one of the authors of this letter) and their partners were very much in evidence throughout the conference.

Even more disturbing and inaccurate were your allegations regarding the racial and ethnic make-up of the Boston organizing committee: "Boston's conference seemed no whiter than the previous two in its general attendance, but it did in its leadership." If you had looked more closely, you would have noted that we had a highly diverse organizing committee, with African-Americans, Latino-Americans, and Native Americans well-represented on it.

As for your allegations of exclusion of non-op, non-hormone guys, those were the most ludicrous of all. From the very beginning we made every effort to make our conference as welcoming and inclusive as possible for all FTM-identified people. If you want to get in a snit about semantics, that is your problem.

Finally, the aspect of the article which we found most hurtful was its general tone of negativity. Many dedicated and enthusiastic people put in long, unpaid hours to put on that conference. Our mission clearly stated that we put on the conference to promote community growth. It would have been really nice to have felt appreciated rather than attacked for non-existent prejudices. If you take a look at the conference evaluations which we recently made available to FTM International, you will find that the response to the Hero's Journey conference was overwhelmingly positive.

A negative response such as yours could hardly encourage guys in other cities to put on conferences in the future - is this really a message that you want to send?

Sincerely,

How do I urinate while

standing at the urinal? It's

impossible to explain why I

have to "squat to pot" when

I'm with the "guys."

Andy, Mykael, Jeannette, Ben

I am sorry that my appreciation for all your work was not more evident in my assessment of the conference. I got a lot out of the event, and I know it must have been a Herculean labor to put on. I wrote my article because I think these conferences are important, and have a huge impact on the FTM world. It wouldn't have happened without your blood, sweat, and tears.

I also think these conferences are significant

enough to deserve critical discussion afterward, and that it's a sign of maturity in a movement that it can criticize aspects of itself.

I heard a lot of assessments of the conference, both during it and afterward, from people there—a great many of these echoed what I thought and later wrote about it. I also talked to other FTMs about why they didn't go; usually because of money, sometimes because of talk they'd heard about racism and noho-phobia at this AND past conferences. (By noho-phobia I mean prejudice against guys not on hormones.) Because I had devoted a lot of this last issue of the Newsletter to more shiny-happy stuff from the conference, I wanted to get in one analyticallicritical piece. I did not see it as negative, just critical. The difference is that I meant to put my thoughts out for debate, not to be insulting or hurtful. And you're right, I don't want to turn off anyone who might want to put on a future conferences.

I figure I came across as hurtful to you because of an unstated assumption I have about racism, homophobia, and the rest of it: namely, that we all screw up. We all live in the same racist, homophobic world. I see all of us FTMs as in the same new movement, still learning how to do most things. The Newsletter could easily have a lot of the same criticisms leveled at it. We're all working on it. That's how I see it.

So, to address the examples you mention: What I wanted was for

MORE MALEBOX

some of the gay and bi men who worked so hard on the conference to make clear mention of their sexual orientation in keynotes or other speeches on the main stage. While I'm glad to hear that an FTM couple was on the stage, I was not the only one who didn't clock that "partners" meant more than a musical duo. Likewise, I was not alone in commenting on the lack of people of color in leadership positions. If they were there, then maybe I wasn't looking closely enough, and you can't always tell somebody's race by looking, anyhow. But I did hear conference organizers themselves talk about the absence of people of color in visible positions—and suggest constructive ways to improve on it, as I said in the article.

About noho guys, I'm not in a semantic snit. I still want to know what "other parallel movements" (the phrase the conference program used for transgenderists, cross dressers, boy chicks, etc.) means—who is not the FTM here? Which movement is "other"?

I do appreciate all of your work, your time, and your dedication. Again, I'm sorry I didn't get that across.

And again, I gave my honest assessment of the conference because I care about these things and I want to see critical discussion in, of, and from our movement.—Ied

IN REFERENCE to the article on masturbation [FTM#37–38], I have concockted a device that would give any FTM the same satisfaction of a genetic male jerking off. You need a vacuum type of device for a fish tank (you know—to suck the gunk out of the gravel). I myself am 2 3/4 and this fits around nicely. I tried using a medicine bottle (a long one, about 1 1/4 [inches diameter]), but it was too tight and the teeth on the bottle hurt like hell. So I then tried a bottle that was 2 inches, but the teeth still hurt. So I went to the fish store to see what they had to offer and I found the purrurfect product.

This was the fish tank vacuum thingy. It cums with a hose and fits on the to of the device. All you need to do is sand out the rough edges and it works great. Not only can this make your baby dick grow (with time), but also the orgasms are tremendous. You start off slow with stroking downwards, and then as you feel the head of your dick throbbing you want to just die but you don't: you keep it going for as long as you can. I can keep doing it for about 45 minutes without just shivering all over with the most wonderful orgasm in the entire world.

Of course this can be done alone (like I do it), but it's better if you have someone controlling the motion. I lose and lose suction. See, with this device you have to put the head of your baby dick in the hard tube and suck as hard as you can take it. Yes, it's going to hurt, but what pleasure isn't worth the pain? And once you have sucked as hard as you can, you bend the in-cumming tube in three places to hold the suction, and start jerking away!!!! After a long day of work this is definitely the way to

relax...Now I know why genetic guys love to get sucked and jerked off so much. It feels great!!!!! So if you have any questions write in and leave your number with FTM, and I will give you the blow-by-blow details.

Happy jerking, Steve N. San Francisco

> I have concockted a device that would give any FTM the same satisfaction as a genetic male jerking off.

P.S. You definitely need lots and lots of petroleum jelly to lube your baby Johnson.

Thanks for the tips, Steve! I've heard differing reports about the safety of penis pumps and the like, so be careful, guys, and remember FTM isn't endorsing any particular jerking-off product or device.—Jed

DEAR FTM,

I read in the August '97 issue of "The Perils of Hysterectomy." I was curious as to the response to this article. I would particularly be interested in any response by Dr. Sheila Kirk, or any other M.D. I am personally debating whether to have a hysterectomy associated with my metaoidioplasty and scrotoplasty. My surgeon has told me that scrotoplasty will be either cleft or oddly placed unless I have a vaginectomy, and that they cannot do a vaginectomy unless I have the hysterectomy. He has also stated that the urinary extension with the metaoidioplasty is best when vaginal tissue is used from the vaginectomy. Again, this cannot be the case unless I have a hysterectomy. While I have no particular affection for this organ, I want to make sure that the pros outweigh the cons. I would appreciate any further feedback you have received. Thanks.

Mike M. (via the internet)

James Green responds:

Thanks for writing, Mike. We haven't received any other feedback, either from readers who want to share their experience, or from M.D.s. I'd love to have more response from doctors. I'm not a doctor, but I think I might be able to offer a bit of information. First, when women (non-FTMs) have hysterectomies, they usually do not have a vaginectomy, and they are also psychologically attached to the uterus and ovaries as a component part of their femaleness; thus, their both the techniques used and psychological (and physical) response of the patient are very different for women than for male-identified FTMs. It is not necessarily true that the scrotum will be cleft (bifid) or oddly placed unless a vaginec-

tomy is performed. It's possible that your surgeon's technique is to use a portion of the vaginal tissue to close the scrotal sac. You should review your understanding of the procedure with your surgeon. Not all metaoidioplasties or urethral extensions are done the same way. The clitoris must be repositioned anteriorly or it will be too low, and so will the scrotum (and it may be misshapen). It is true that using vaginal tissue in the urinary extension causes the fewest complications, and it is true that if you have a vaginectomy you must have the other more internal organs removed as well. Thus, if you want a urethral extension your best bet is to go ahead and have the hysterectomy.

But, the bottom line is that the female organs are not designed to thrive in an environment flooded with testosterone. It may be prudent to observe that the benefits of hysterectom; outweigh the "negative" effects such as loss of G-spot orgasm, or putative loss of bladder support. For example, it has been known since the early 1980s that FTMs undergoing long term androgen therapy without hysterectomy/ oophorectomy experience increased incidence of polycystic disease of the ovaries and uterus. To our knowledge, no one in the FTM community has reported loss of bladder control subsequent to hysterectomy. And the nerves, glands, and muscles that respond in orgasm should be left intact when metaoidioplasty is performed. For further investigation into these issues, I recommend the following five medical journal articles:

- 1. "Endocrine Evaluation of 40 Female-to-Male Transsexuals: Increased Frequency of Polycystic Ovarian Disease in Female Transsexualism" by Walter Futterweit, M.D., Richard A. Weiss, B.S., and Richard M. Fagerstrom, Ph.D. Archives of Sexual Behavior, vol. 15, no. 1, 1986.
- 2. "Physical and Hormonal Evaluation of Transsexual Patients: A Longitudinal Study" by Meyer, Webb, Stuart, Finkelstein, Lawrence, Walker. Archives of Sexual Behavior, vol. 15, no. 2, 1986.
- 3. "Physical and Hormonal Evaluation of Transsexual Patients During Hormonal Therapy" by Meyer, Finkelstein, Stuart, Webb, Smith, Payer, and Walker. Archives of Sexual Behavior, vol. 10, no. 4, 1981.

And for a discussion of metaoidioplasty with urethral extension:

4. "Metaiodioplasty: An Alternative Phalloplasty Technique in Transsexuals" by J. Joris Hage, M.D., Ph. D. Plastic and Reconstructive Surgery, vol. 97, no. 1, January 1996.

Regarding the anterior positioning of the clitoris, see: 5. "Penis Construction in Female-to-Male Transsexuals" by D.R. Laub, W. Eicher, D.R. Laub II, and V.R. Hentz in Plastic Surgery in the Sexually Handicapped. Berlin: Springer, 1989, p. 113.

TO THE FOLKS AT FTM INTERNATIONAL:

Thank you so much for continuing to send newsletters. I hope to receive a financial aid refund soon, because I would like to send money. I am writing to tell you

MORE MALEBOX

about the experience I had in successfully changing my sex from "female" to "male" with the Social Security Administration; maybe it will help your readers. Let me back up and tell you that it is possible to get a Social Security card with your new name without going to court. Get Form SS-5 from the Social Security Administration, and you'll see that you can give them one piece of ID in your old name and one in your new name-they give examples-and it only costs you the postage stamp; or nothing, if you go down in person. I mailed mine, and actually the first time I sent it, it got mailed right back to me, with a write-in that neither my name NOR my sex would/could be changed, so I mailed a new form back, and added a copy of the "Law of Change of Name in Pennsylvania-informal change of name," and INUNDATED them with other documents, and I got my card. Now for the good part. Months later, I discovered that although my name looked fine on my card, in the Social Security records my first and middle name were spelled as one long name, which meant I'd have to sign my taxes and other documents that way. The only way to remedy that was to get a new card (don't ya love it?). I decided to show up in person, and kill two birds with one stone. I made sure that the first piece of identification I showed the clerk was a hospital bill that had my sex listed as "male." I didn't say anything about getting my sex changed in their records until my name was straightened out. Then, when I was getting ready to leave, as an afterthought, I mentioned that I was still getting addressed as "Miss" on the phone, and in correspondence from Social Security, and didn't know if it was because "maybe my voice sound[ed] a little high," and the clerk told me it was because it wasn't changed in the system, and he "[didn't] know why it wasn't changed before," and so it was changed. I had to bite my lower lip to keep from breaking out into a smile or a laugh, which I feared would give me away.

Sincerely, JMB

DEAR FTM NEWSLETTER:

I have been trying to reach Avi Zarum, who

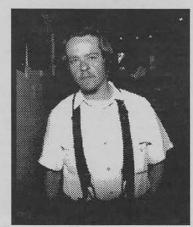
has a paragraph in your recent newsletter, end of page 18. Neither the email address nor the phone number are working. Thanks for your help.

Mary Boenke,

Co-Chair

PFLAG Transgender Network

Ari, please send us your current contact information! Thanks. —Jed



Beryl Kotula, Seattle, 1996 Photo: James Loewen

HI, GUYS.

I'm sending in my \$15 to renew my subscription to the FTM International Newsletter. I've found it very informative and enlightening. I've come a long way since last year when I was only a tadpole-confused, scared awkward adolescent to a confident, secure and assertive man. FTM has helped me a lot and now I'm in a support group and ready to begin my hormone therapy. I'm confident that I can and will fit into the world of men and Trans-men. Thanks for your hard work in getting the Newsletter out here. Keep it up dudes!

Deano F. Seattle, WA

Thanks for your good news and your appreciation. Rock on!-Jed

I'M INTERESTED in contacting TSs and interested others who are into the theater, films, directing, producing and so on. Also if there are poets and writers out there who'd like to drop a line...I'd like to hear from them.

I'm a writer and artist. I've recently become involved with stage plays thanks to the efforts of a very fine actress, Beverly Bently, who has gone out of her way to help me get into the arts.

As a writer I'm interested in hearing from gay, bi and non-gay/bi TSs, and all people who find TS life just another facet of living on "planet Earth."

Eric Ekstrom

Please send any letters for Eric to the FTM International office (see back page for address) so we can pass them on to him.

I AM A 24-YEAR-OLD FTM who is in a rather precarious situation...I am in a Women's Correctional Facility. Needless to say, I am in a community that makes beer-guzzling rednecks look like choir boys and most of the population here think "gender dysphoria" is some new sexually transmitted disease. I guess you could say I'm a bit of a misfit on an island of ignorance. I need some support from my community. I would very much appreciate FTMs, FTM-friendly, or anyone who can define Transsexual without being booked on the Geraldo show, to write me.

I have been in transition for three years, however because of my on-again-off-again hormone therapy, I was perceived as nothing more than a "rather masculine female" when I entered the system in 1996. Thus, beyond being a man trapped in a woman's body, now I'm trapped in a women's prison...this is a problem, you may ask?! Well, if I can find any shred of sanity after this-it will be a miracle. I'm writing in hopes there are a few angels out there who need a pen pal.

Write to: Miko Anderson-Pereira, 113729, P.O. Box 2308, Mt. Clemens, MI 48043.

Always,

Note: Ian has been temporarily trans- >17 ferred to the above address because he has

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MORE MALEBOX

cancer and is being treated for chemotherapy. After late April, try reaching him at this address:

, Danbury, CT 06811.

Thanks for writing, Ian. You are not alone out there. I'm glad to hear you have access to the Newsletter. Hang in there, and good luck finding some pen pals. —Jed

DEAR FTM INTERNATIONAL:

I am sending you a copy of a letter that I wrote to Danielle in response to her letter in FTM #38. I would like you to put it in the next issue and ask the readers to give some feedback on what other FTMs thought of her letter. I believe that as an FTM I am the same as a "so-called man," I just have a handicap.

I am sending you my new address along with money to renew my subscription. Thank you for your time and all that you do.

DEAR DANIELLE:

Hello, I am responding to your ad you put in the FTM Newsletter. I wonder if my letter is different from the ones you will receive? At the end of your letter you said, "Go ahead, write me, I want to understand." Well, I'm confused, and I'm writing because I'd like to understand you. ???Why is it that you "want" an FTM? You made the comment "a so-called 'man," what does that mean? I believe that a "true FTM" is no different than "a so-called 'man." The difference I see is the body they were born with. If you desire a "man," why would you shut someone out who was not FTM? Why not look at the "man" as a person, and then determine whether or not you can relate to that man? I find myself, as I write, feeling angry. I ask myself why? What comes to my mind is that I don't want to be seen, or known, as an FTM, but to be seen and known as a man. I want a woman who will love and want me as a man, not as an FTM. I want her to see the man that I am, and to be able to deal with the handicap I was born with. I'm almost twice your age and I'm not even for sure why I'm writing this letter to you? Your letter moved something in me? It made me angry, it made me think maybe you have issues with men, yet desire them so maybe you feel safer with an FTM? I don't

know. And the thought appears to me I must have issues within my own self to be reacting to your letter. I live my life as a man, and not as an FTM. The people in my life only know me as a man; that is fulfilling to me. And as an FTM I want to be nothing but a "normal so-called male," I've just got a handicap, and like everyone else in this world with a handicap at times it is painful, and at times I feel alone.

Most people don't know about transsexuality, or think about it, except maybe as a joke. What exposure have you had? Your response to a man buying you a drink is bold; why do you do that? Do you like the shock and extreme of it? Does it draw attention to you? Does my letter piss you off? Does it make you think? Does it make you question who you are? Living as an FTM there is the constant question of who am I? Maybe this letter is a question to myself of who am I? My name is David.

Sincerely, David Oliver

PLEASE NOTE: The FTM Newsletter is now quoted in books and magazines outside the FTM community. Your words here may be quoted elsewhere. If you don't want your name to appear in another publication, just use a false name when you write in to us.

More on the subject of "transgendered" as an allinclusive term...

TO JAMES GREEN:

I make a distinction between TG and TS this way. TG includes people who are interested in different gender expression beyond the usual two. TS people are interested in radically different bodies. TS people usually are also TG but TG people are not always TS. These correspond to feelings of gender dysphoria and sex dysphoria which as you have read I think of as coming in a variety of intensities and combinations. So someone who wants to live in between using hormones but not surgery would be pretty gender dysphoric but sex dysphoric to a lesser degree.

More TG but a little TS. And then there's also gender role/style dysphoria. I think of TS people before transitions as FTM transsexed and after as transsexed men (or MTF and women).

Dr. Holly Devor

HI THERE,

NEW ORGANIZATIONS!

It's been a year and a half in the making, and we're finally up and running, from what was only a vision between two guys after the Seattle conference to a now rapidly growing Vancouver community! We knew there had to be more of us 'out there' in this town, we just had to get the word out, and create a place to meet. One thing led to another, and we've created a whole lot more besides. This is history happening, I feel like a proud poppa!Please add this contact info, along with the blurb describing it, to your 'FTM Resources' list on the back of the mag.

Your newsletter was my main lifeline for a long rough while. It gave me hope, and courage to continue. Now I'm strong enough to add to that lifeline and take part in spreading a safety net throughout this province, alongside my brothers here in BC. What a life. It sure was worth hanging in there. Many thanks.

Lukas Walther Vancouver, BC

DEAR JED.

Congratulations on your selection as the new editor for FTM Newsletter. I am sure you will continue to provide the interesting reading I have found for the past year. In my practice I loan past issues of the newsletter and encourage clients to subscribe.

Would you please include our support group in your Resources section? Since Norfolk is a relatively small city, our group benefits both FTMs and MTFs. It is a lively group with a steady attendance of from five to ten members per month.

Thank you for your consideration, Maggie Chubb, LCSW Allies in Healing email: ally4u@pilot.infi.net

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ANNOUNCEMENTS

THE FTM NEWSLETTER

needs a designer! Brynn has to step down from the job, and we need somebody to fill in ASAP. You don't need to live in the SF area, though email will help if you don't. It's a big chunk of work, but it's worth it: the newsletter supports and informs FTMs in 14 countries. AND you can learn and improve on marketable skills in the process. What you need is access to Quark Xpress on a Mac, and at least a moderate knowledge of the program. Contact Jed at jedbell@igc.org or leave a message at FTM: (415) 553-5987.

QUEER YOUTH: CALL FOR PAPERS

...or essays, poetry, fiction, artwork, commentaries, reflections, editorials, prose, photography, screenplays, speeches and all other forms of expression you can post, fax or email! Submissions will be included in an anthology by and for queer youth—be they gay, lesbian, bi, transgendered, intersexual, and so on. Submissions by those under 25 are most strongly encouraged. The anthology is part of a thesis project under the Honors Program at Syracuse University, and is intended as a resource for youth questioning, understanding or embracing their sexuality. It may be published in the future. Late submissions are still being accepted, but please contact the editor before submitting. Include your name, age and return address. Write to: Amy Sonnie, 846 Sumner Avenue, Syracuse, NY 13210 Or call Amy at 315 428 8125, or email alsonnie@mailbox.syr.edu

PARTICIPANTS NEEDED

Transgendered Ethnographic Study

Transgendered -- Transsexual -- Intersexual -- Pre-Op, Post-Op and Non-Op -- in the San Francisco Bay Area.

My name is Dawn Atkins and I will be conducting a year-long dissertation study with transgendered people on perspectives of the body, identity and community. Last summer I completed pilot studies in both the SF Bay Area and Amsterdam. This longer project will include a year of field work in which I live in the Bay Area, attend and volunteer with local TG/TS groups, and conduct life-history interviews with TG/TS people. I hope to follow up on initial pilot study interviews as well as add new participants. With a small number of participants, I hope to conduct a series of interviews over the year, as well as with their family and friends. The process will include interviews with medical and counseling professionals who work with transgendered people.

Since this is a ethnographic study of a particular area, participants must live within a hundred miles of San Francisco during the study, Aug. 1998 through July 1999. Since diversity is important, I would especially welcome participants who are people of color and/or people with disabilities.

To contact me: Until mid-July 1998, PO Box 861, Iowa City, IA 52244-0861, (319) 354-0549, or email dawn-atkins@uiowa.edu.

OBITUARY

On Feb. 2, 1998 Pete Smith died of lung cancer at age 57. His testimony against his uncle, Robert Chambliss, led to the sole conviction in the 1963 bombing of a Birmingham, Alabama church. Four little black girls were killed in the explosion.

As Elizabeth Cobbs, a female United Methodist minister, Mr. Smith was the star prosecution witness in the 1977 trial of Chambliss. Smith transitioned in 1981. Robert Chambliss died in prison in 1985.

Mr. Smith's autobiography, Long Time Coming, may have been an influence on the reopening of the case by federal investigators last summer. To date, Chambliss is the only person ever charged in the bombing.

MEETINGS

ECFTMG

continues to meet on the second Sunday of every month from 3 to 6 pm at Bet Power's house; 146 Riverbank Road, Northampton, MA. For directions or info, call Bet at 413-584-7616. New brothers or significant others of FTMs who have never attended one of our meetings should call and introduce themselves before attending. Our meetings are free and open to all FTMs: crossdressers, transgendered, transsexual, non-op, pre-op, post-op, and our significant others. We are all-inclusive, safe, and nonjudgmental. We respect the right of each of us to decide our individual path. We believe our diverse situations can be joined together in united community.

ONGOING SAN FRANCISCO BAY AREA FTM MEETINGS:

See back page for FTM International meeting times and office information.

BUTCH/FTM AA meeting. Every Tuesday, FTM office, 8 pm.

NEW MEN'S group (anyone questioning transitioning or new to transition, all welcome). Fourth Thursday of every month (2/26. 3/26/ 4/24, 5/28). FTM office, 7:30 pm.

SPIRITUALITY meeting (all spirituality backgrounds and beliefs, all welcome). Second Sunday of every month, 1 pm, at the same locations as the FTM International meetings.

EAST BAY group, Emeryville. Every other Monday (3/2, 3/16, 3/30, etc.), 7 pm. Call (510) 658-0474 for location.

READING group, East Bay. Meets every third Tuesday. Boadecia's Books, Kensington. (510) 559-9184.

PARTNERS' group (for partners of FTMs). Second Sunday of the month, 2 pm. Call FTM office for information.

SMFTMs:

Finally, the S/M support group you've been dreaming of. Announcing SMFtMs: a new support, social and educational group for ALL female-tomale transgendered/transsexuals who are also sadomasochists-and our partners. Are you tired of being on the fringe of other S/M groups, whether they are gay, lesbian, heterosexual, or pansexual? Do you long for safe and sober play spaces in New England where Tgs and TSs are in the majority, not the minority? Would you like to learn more about S/M, openly discuss who you are, and meet S/M men and partners within the FTM community? Would you like to help form a network of private play spaces and monthly meetings for S/m FTMs and our partners throughout Massachusetts and New England? Initial meetings held in Northampton. SMFtMs is for S/M men of all sexual orientations, and their partners. A requirement for participation in meetings and play parties is sobriety from alcohol and drugs. The SMFtMs network is being organized by Bet Power. Contact Bet at 413-584-7616 for more info, or send a SASE to SMFtMs, P.O. Box 416, Florence Station, Northampton, MA 01062.

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Calendar

March 8, 1998

ECFTMG

6th anniversary party! 3 pm, (see previous page for contact/location). Come meet your brothers and help us celebrate another year of the ECFT-MG. Bring something for potluck; snacks will be served. All transgendered are welcome: FTMs, MTFs, significant others, and allies.

March 24-29

Crossing Borders

(IFGE annual conference)
Toronto, Canada
For information contact
International Foundation for Gender Education
P.O. Box 229
Waltham, MA 0224-0229
781-899-2212
ifge@world.std.com

March 27-29

TransPositions: Toward Transgender Studies

Cornell University
Richard Juang
Department of English
Goldwin Smith Hall, Cornell University
Ithaca, NY 14853, USA
rmj8@cornell.edu
or W. Carter Smith
Department of Psychology
Uris Hall, Cornell University
Ithaca, NY 14853, USA
wcs2@cornell.edu

April 3-5

The Future of Sexual Health: Education, Counseling, and Health Care—A Call to Action

Society for the Scientific Study of Sexuality 1998 Eastern Region Twenty-first Annual Meeting Boston, MA Jean Levitan, Ph.D. Dept. of Community Health Wm. Paterson U. of NJ Wayne, NJ 07470 973-720-2216 973-721-2215 FAX levitanj@nebula.wilpaterson.edu **April 24-26**

Social, Political, and Educational Hobnobbing for Gender Transgressors & Our Friends

Midwest Trans Institute P.O. Box 2104 Loop Station Minneapolis, MN 55402-0104 612-362-3581 (voice/tty) 612-871-2650 (fax) MWTRANS@aol.com

June 10-14

Foundation for the 21st Century: Scholarship, Activism, Community

SUNY-Oswego, Oswego, New York Vivien Rose 1998 Embedded Conference Committee Chair Women's Rights National Historical Park Seneca Falls, NY 13148 315-568-0007 e-mail: VIVIEN ROSE@NPS.GOV

June 10-14

16th Annual Be All You Want to Be Weekend

Pittsburgh, PA Be-All '98, P.O. Box 15237 Pittsburgh, PA 15230

June 13

FEMALE TO MALE: An in-service at Quan Yin Healing Arts Center

in San Francisco. From 6:30 pm to 8 pm. FTM International will talk about transgender transformation, including medical concerns, social and emotional issues. Your questions and personal experiences welcome. 1748 Market St. (at Valencia). Ph: 415 861 4964.

June 19-21

Gender, Sexuality, and Law Conference "Reflections: New Directions"

Keele University Staffordshire, UK GSL98 Conference Department of Law Keele University Staffordshire ST5 5BG England, UK 01782-593218 01782-593228 fax GSL98@keele.ac.uk

August 15

Trappings of Transhood,

a documentary about gender identity by Elise Hurwitz and Christopher Lee. At the Parkway Theatre in Oakland, 8 pm. Alternative Vision Festival: 1834 Park Blvd. Ph: 510 814 2400. \$5.

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FTM RESOURCES

UNITED STATES

California FTM International, 1360 Mission St., Suite 200, San Francisco, CA 94103 Ph: 415-553-5987•Website: http://www.ftm-intl.org Under Construction, P.O. Box 922342, Sylmar, CA 91392-2342. Contact: Jeff Shevlowitz (818) 837-1904. E-mail: littleshevy@juno.com Genderqueer Boyzzz, Los Angeles area. Contact: Jacob Hale 213-665-1130. email: zeroboycjh@aol.com

<u>Florida</u> Eden Society, P.O. Box 203, Deerfield Beach, FL 33443-0203 Contact: Lee (305) 247-6254 Nature/Services: Open transgender support group. Newsletter: EdeNews.

Massachusetts East Coast Female-to-Male Group, P.O. Box 60585, Florence Station, Northampton, MA 01060. Ph: 413-584-7616, Bet Power. Support group for female-to-male persons and their significant others. Boston Enterprise, P.O. Box 193, Bellingham, MA 02019. Ph: 617-639-7968, Mike. Weekly support group for FTMs; monthly social events open to all. The Officer's Club, c/o IFGE, P.O. Box 229, Waltham, MA 02254-0229. Phone 617-899-2212. Nature/Services: an FTM support group which meets at 7 pm on the first and third Monday of every month in the offices of IFGE.

<u>Virginia</u> Transgender Support Group, 142 W. York St. Suite 815, Norfolk VA 23510. Contact: Maggie Chubb, LCSW (757) 625-2992. Open transgender support group. Part of Horton & Horton Gender Reassignment Team. For both FTMs and MTFs.

Wisconsin Gemini Gender Group. PO Box 44211 Milwaukee, WI 53214. Voice mail #414-297-9328. Notes: The local "professional" TG program in town is PATHWAYS, directed by Gretchen Fincke (and Roger Northway). The program offers a connection to endocrinologists, surgeons, etc. The program has separate FTM and MTF groups. Pathways ph: 414-774-4111—Michael: 414-276-8877.

INTERNATIONAL

<u>Australia</u> Boys Will Be Boys, BWBB, P.O. Box 5393, West End, Brisbane, Australia 4101. Network for FTM persons, Boys Will Be Boys newsletter

<u>Belgium</u> Kortrijk, *Genderstichting* (Belgian Gender Foundation), Pluimstraat 48, Belgium B-8500

Canada British Columbia: *BC FTM Network*, Box 10, 1895 Commercial Dr., Vancouver, BC V5N 4A6. Ph:(604)254-7292; bcftmnet@hotmail.com This network provides advocacy; public education; outreach; information and peer support contacts for family, partners, allies of FTMs; contact info for other FTM resources worldwide; and a peer-run discussion/support group that meets once a month, FTM Etc (email lukasw@direct.ca for more info)

France C.A.R.I.T.I.G, B.P. 17.22, 75810 Paris Cedex 17, France

Germany TS-gruppe d., *Sontagsclub* e. U., Rhinower Str. 8, Berlin 10437 Japan FTM Nippon. Contact: Masae Torai, Adachi-ku, Adachi-Nishi-post office-dome, Tokyo 123

The Netherlands Amsterdam: Mannengroep Humanitas Amsterdam, Postbox 71, 1000 AB Amsterdam; tel. 020-6262445 fax 020-6227367

<u>United Kingdom</u> *London-FTM Network*, BM Network, London WC1N 3XX, England. tel: 0161 432 1915 (Wednesdays 8 pm-10:30 pm GMT or BST). Support group for female-to-male persons

S.F. FTM MEETING SCHEDULE 1998

FTM Int'l meetings are on the 2nd Sunday of each month, from 2 to 5 p.m., in San Francisco. Call FTM Voicemail (415-553-5987) for details. Mark your calendars in advance!

Informational	Support	See page 18
March 8, 1998	April 12, 1998	for other S.F. Bay Area FTM meetings
May 10, 1998	June 14, 1998	
July 12, 1998	August 9, 1998	

FTM INTERNATIONAL NEWSLETTER

The world's most widely-circulated Newsletter for the Female-to-Male crossdresser and transsexual. Published quarterly since 1987. Send correspondence, address corrections and contributions to:

FTM, 1360 Mission St., Suite 200, San Francisco, CA 94103 VOICEMAIL: 415•553•5987 E-Mail: TSTGMen@aol.com

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Contributing Editor: Jamison "James" Green
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Send in your meeting times!
Keep us informed about organizations, support groups, newsletters & other services that cater to and/or include FTMs. There are more resources out there, and we'd like list them!

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Use this response form to update our mailing list, let us know you want to continue receiving FTM, or to send in a donation.
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please keep me on the mailing list
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ADDRESS
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