APPENDIX G

PFLAG T-SON & *TGS-PFLAG*

Books are available at these prices from: A Different Light Bookstore, 489 Castro St.. San Francisco CA 94114 (415) 431-0891/fax: 431-0892

- ☐ Bolin, Anne, *In Search of Eve: Transsexual Rites of Passage*. 1988 $14.95
- ☐ Burke, Phyllis, *Gender Shock: Exploding the Myths of Male and Female*. 1996 $ 23.95
- ☐ Cossey, Caroline, *The Caroline Cossey Story* 1991 $12.95
- ☐ Feinberg, Leslie, *Stone Butch Blues*. 1993 $12.95
- ☐ Feinberg, Leslie, *Transgender Warriors: Making History from Joan of Arc to Ru Paul*. (heavy on the Marxist polemics.) 1996 $27.50
- ☐ Moir, Anne & Jessel, David, *Brain Sex: The Real Difference Between Men and Women*. 1992, not at Different Light.
- ☐ Morris, Jan, *Conundrum*. 1974, 1987 $12.95
- ☐ Pratt, Mini Bruce, *S/He*. (About Leslie Feinberg) 1995 $10.95
- ☐ Stringer, JoAnn Altman. *The Transsexual's Survival Guide II: To Transition and Beyond for Family, Friends and Employers*. 1992 $12.95
- ☐ Stuart, Kim Elizabeth, *The Uninvited Dilemma: A Question of Gender*. 1983, 1991 $14.95
- ☐ Tremain, Rose, *Sacred Country*. 1995 $10.00
- ☐ Williams, Walter, *The Spirit and the Flesh: Sexual Diversity in American Culture* 1992 $16.00

Tgs-pflag, the independent email list for transgender family support, was established in November 1995. *Tgs-pflag* has expanded into print with a series of handouts and an occasional newsletter. For more information, contact Emily Rizzo, c/o Brooklyn PFLAG, 360 Atlantic Ave. #179 Brooklyn, NY 11217 (718) 769-1421<rizzoe@fasecon.econ.nyu.edu>

PFLAG T-SON, the special outreach network for chapter education and support, was established by National PFLAG in 1996. By October, 1996, eighteen (18) chapters had identified liaisons to the network. For information, contact Maggie Heineman, c/o Philadelphia PFLAG, P.O. Box 15711, Philadelphia, PA 19103, (215) 849-4326 <maggie@critpath.org>

An inclusive mission statement - During the coming year the people in *tgs-pflag* and PFLAG T-SON will be encouraging local chapters and National PFLAG to add transgendered people and "gender identity" to their mission statements. Minneapolis/St. Paul, Brooklyn, Philadelphia, San Francisco, San Diego, Glenview, and Calgary have taken this step.

Karen Gross - following the information highway to PFLAG

I started "lurking" on tgs-pflag in December, 1995. In my first message to the list in January, I wrote, "I am the mother of a female to male transsexual who had 'top surgery' in March of 95. He has been so happy since then. My husband and I were very accepting of the situation and so was my child's husband. They have since divorced and become best friends. My 'son' thought it best to move out and hopes his former husband can find another life. They do have a nice relationship which I find very surprising. As much as I tried to accept this change, it was easier to accept the person outwardly, but I have still been hurting on the inside and really miss my daughter. We had a very close mother-daughter friendship."

That was January. In May I started a support group and we have 5 M2Fs, and 4 F2Ms (including my son) and 2 mothers. One couple each going the other way will be getting married, I think. Because I knew Mary Boenke through the *tgs-pflag* list, pretty soon my husband and I had agreed to be workshop leaders for the PFLAG National conference in Washington D.C. We had not yet attended our first PFLAG meeting! Now I have joined the Cleveland chapter and serve as our chapter representative to PFLAG T-SON, the special outreach network for transgender family and friends support. I've already visited Ellie Altman in Chicago. Jan and Mary Lou Fletcher, a legally married same-sex couple from Pennsylvania, have visited me in Cleveland. The conference will be a grand get-together for all of us who met in cyberspace.

Our son is now 27 and it was Christmas 93 when he first told of what was happening. His "husband" was also there for the discussion. He had been on hormones for 9 months by then. "M" was divorced in June of '94 after three years of a happy marriage. Counselling helped "M" find what he was really looking for. Looking back on his very unhappy childhood, I could see where he really seemed more like a little boy than a little girl. I just thought he was so jealous of his younger brother. He would wear his brother's underwear, and only wanted to buy his clothes in the boys department when he was old enough to choose.He was very good in math and computers, which at the time, was thought that males were best at. He just seemed to have very masculine ideas, and he clashed a great deal with his father, who thought he just wasn't very feminine - not the little girl he hoped we had. They are both headstrong and were never very close, clashing often. Now they get on much better.

My husband and I were worried how our elderly parents with their Victorian ideas would accept this change in their granddaughter. They have dealt with it very well. Only my mother-in-law still seems to have a terrible problem with the pronouns. I, too, have had trouble with the pronouns. "M" is now going to move in with this grandmother. My father-in-law passed away before he ever found out.

***Tgs-pflag* does snailmail too.** National PFLAG's Transgender Resource Packet is available through *tgs-pflag*. While *tgs-pflag* is an independent email list, not accountable to National PFLAG, *tgs-pflag* was developed by PFLAG members who are also active in PFLAG's Special Outreach Network for Transgender Family and Friends Support.

Camera-ready masters from *tgs-pflag*. Print them directly from the World Wide Web or get them by mail from Emily Rizzo, c/o Brooklyn PFLAG, 360 Atlantic Ave. #179 Brooklyn, NY 11217 (718) 769-1421<rizzoe@fasecon.econ.nyu.edu>

- *About our Transgendered Children and Their Families* by Sharon Stuart, PFLAG Cooperstown, with help from subscribers to the tgs-pflag email list. http://www.critpath.org/pflag-talk/support/tgKIDfaq.html
- *A Primer by Transgender Nation* from Jessica Xavier, Transgender Nation and Washington DC PFLAG. http://www.critpath.org/pflag-talk/library/tgprimer.htm
- *Medical Abuse of GLBT Youth* by Nancy Sharp, New Orleans PFLAG. Consultant: Shannon Minter, Esq. Director, Youth Project, National Center for Lesbian Rights. http://www.critpath.org/pflag-talk/library/gid.htm
- *PFLAG T-SON & tgs-pflag 10/3/96* by Maggie Heineman, webmaster for pflag-talk and tgs-pflag, resource person for PFLAG-T. http://www.critpath.org/pflag-talk/library/tgnotes1.htm.

Mary Boenke - A PFLAG leaders's lesbian daughter becomes her son

I am Mary Boenke. Louise Rafkin's new book *Different Daughters II* includes my chapter about our new son. It may be the first published account by a mother of a transsexual and I am proud to be able to contribute even a tiny bit to this relatively new, growing field. I've have been married for 41 years and we have 3 adult offspring, two in-laws, and 5 grandchildren. Our middle "adult child" is a genetic female who came out to us 19 years ago as a lesbian and came out to us again last year as an female to male transsexual.

I am the founder and president of the Roanoke PFLAG chapter and I have been a PFLAG regional director. I went to the 1995 PFLAG Convention with the idea of starting a TG/TS network and was delighted to find others on the same wavelength. The *tgs-pflag* email list has been a fabulous education, great fun, and an introduction to especially wonderful people as well. I am especially intrigued with the concept of continua, starting with bisexuality, extending to all aspects of sexuality and gender, and on into "new" ways to view the whole interconnected web of life. My life was greatly enriched by my introduction to homosexuality and now once again as I learn about gender identity.

PFLAG Glenview - PFLAG's first transgender-specific support group

I'm Eleanor Altman, the mother of a female to male 30 year old transexual. I found out about my son's transition from female to male about one and a half years ago. I called PFLAG and they knew nothing about trangender matters, nor could give me any information or numbers to network with. On the contrary, I found myself spending 20 minutes giving the support person on the helpline my input, telling her I was okay, and found myself drained when I put the phone down.

With the help of my son I becmae connecting to IFGE, started to assemble information, and decided to form a group in the North Shore of Chicago. It turned out my group serves the entire Chicago area and far reaching communities. Our support group is quite small, consisting of about 8-12 families. Most family members do not come to our meetings. One of the reasons is, their kids,have mainstreamed well, and there is not the great need. I seem to have new people coming all the time. There are families in our area who will not attend group at all, like the family of my son's best friend in high school, and both "girls" turned out to be transgendered. Very interesting!

Our meetings are in my home, and although we do not have a regular monthly time slot, we get together every 6 weeks or so, whenever I sit down pick and date and call everyone. I serve dinner, so we can relax, feel more intimate, and we talk for 2-3 hours. We order in, and I ask members to throw something in the pot to cover the cost. I receive at least one phone call a week from my ads in all the transgendered magazines. Dr. Randi Ettner, a PhD psychologist from Evanston also sends me all her patients' families.

October 3, 1996. *Editor: Maggie Heineman* <maggie@critpath.org> The *pflag-talk/tgs-pflag* website specializes in handouts which are useful for PFLAG chapters and their helplines. Titles include *Parents Live in Closets too, 15 Reasons I have Changed My Mind,* and *The Subtler Forms of Homophobia.* The homepage is http://www.critpath.org/pflag-talk/. The library is at http://www.critpath.org/pflag-talk/library/.

© ICTLEP, Inc., July 1996

From the PFLAG-Talk/TGS-PFLAG Virtual Library
http://www.critpath.org/pflag-talk/tgprimer.htm

A Primer by Transgender Nation

1.What does 'Transgendered' Mean? A 'transgendered' person is someone whose gender identity differs from conventional expectations of masculinity or femininity. Their gender identity differs from their physical sex as assigned at birth. Transgendered people are born this way and have no choice in who they are.

2.Who are Transgendered People? Transgendered persons include pre-operative and post-operative transsexuals; transgenderists (persons living full-time in a gender opposite their birth sex with no desire to pursue surgery); transvestites (preferred term: cross-dressers, those whose gender expression occasionally differs from their birth sex); "mannish" or "passing" women, whose gender expression is masculine and who are often assumed to be lesbians, though this is not necessarily the case. Transsexual and transgenderist persons can be female-to-male (transsexual or transgendered men) as well as male-to-female (transsexual or transgendered women).

3.Are Transgendered People Gay? Most transgendered persons identify themselves as heterosexual. Their intrinsic difference is their gender identity, not their sexual orientation: these are two different things altogether. However, transgendered people are perceived by most people as homosexuals, and thus are discriminated against in similar ways.

4.How are Transgendered People Discriminated Against? Like gay men, lesbians and bisexuals, transgendered people face employment and housing discrimination. They are also denied public accommodations and access to health care for their medical conditions. They are also potential targets for hate crimes: verbal harassment, hate mail, harassing telephone calls and acts of violence committed by the same persons who hate homosexuals and bisexuals. But unlike gay men, lesbians and bisexuals, transgendered people are much more likely to fall victim to discrimination and hate crimes, because most of them possess physical or behavioral characteristics that readily identify them as transgendered.

5.What about their Privacy? Like the majority of gay men, lesbians and bisexual people who keep their sexual orientations secret, the majority of transgendered persons also strongly desire to keep their transgendered states secret. Like gay men, lesbians and bisexuals, transgendered people are also vulnerable to their sexual minority status being revealed against their will, i.e., being "outed".

6.What are the Different Types of Transgendered Persons? The largest subgroup of transgendered persons are crossdressers who are mainly heterosexual men, although there are also women who crossdress. Apart from their occasional crossdressing, they lead lives that are quite ordinary in all other respects. Most crossdressers are married and many have children, so they have much to lose from their transgendered state being revealed. They also wish to remain in the sex they were born, unlike transsexuals.

7.What about the Transsexuals? Transsexual and transgenderist (non-operative transsexual) persons differ from cross-dressers in that they come to feel they can no longer continue to live their lives in the gender associated with the sex they were assigned at birth.

8.Why do they feel that way? The overall psychological term is called gender dysphoria, an intense feeling of pain, anguish, and anxiety from the mis-assignment of a transgendered person's sex at birth. All transgendered people suffer from it, but the feeling becomes more acute for transsexuals and transgenderists, usually in the middle of their lives. These feelings lead many transgendered people into depression, anxiety, chemical dependencies, divorces and other family problems, even suicide. In order to seek relief from their gender dysphoria, transsexual and transgenderist persons transition, or to begin living their lives in their true genders, which are opposite their birth sexes. This means they literally must "out" themselves to their employers, their families, their friends, everyone.

9. Why is that necessary? Gender transition is impossible to hide, since gender is a pervasive facet of all aspects of one's life. Beyond being the only way of relieving some of the gender dysphoria they suffer, transition for transsexual persons also marks the beginning of the real life test. During this minimum one-year period, they must be able to demonstrate to their psychotherapists their ability to successfully live and work full-time in their true gender. This is an absolute prerequisite for sex reassignment surgery (SRS), the only known relief from the intense, physical gender dysphoria of transsexual people. The crucial importance of this trial period to a transsexual person is impossible to overstate: it is literally life or death. It is also when transsexual persons are most vulnerable to discrimination, harassment and violence.

Media Guide: Some Basic Guidelines When Covering Transgendered Individuals in Stories

1. Outing: Remember that any reporting of the transgendered status of any transgendered person without his or her expressed permission is outing that person, and has the equivalent potential for harming that person as does outing a gay man, lesbian or bisexual man or woman. Outing is Invasion of Privacy.

2. Full-time Living Status: If a transgendered person is living fill-time in the gender opposite their birth sex (i.e, a "man" living as a woman or a "woman" living as a man) prior to or without sex reassignment surgery, that person should be referred to at all times with terms appropriate to their current gender.

Usage Tips: "Transgendered Woman" is appropriate for male-to-female persons. "Transgendered Man" is appropriate for female-to-male persons. "Transgendered Person" is appropriate for both types of the above.

3. Part-time Status: If a transgendered person is not living full-time, they may intend to do so the future. Do not assume that a cross-dressed person is a "transvestite", someone who engages in cross-dressing only occasionally.

© ICTLEP, Inc., July 1996

Usage Tips: Instead of "transvestite", the preferred term is crossdresser. "Male Crossdresser" or "Female Crossdresser" are appropriate for these persons only if it is clear they do not live full-time nor intend to. (see #7).

4. Surgical Status: Generally speaking, if a male-to-female or a female-to-male transsexual has had sex reassignment surgery, the appropriate terms are "Transsexual Woman" or "Transsexual Man". However, almost all post-operative transsexuals are extremely sensitive about their transsexual status. This information should be considered confidential and should never be used in a story without their clearly given prior consent. (see #1)

5.Pronouns and Possessive Adjectives: To refer to transgendered persons using pronouns and possessive adjectives appropriate to their birth sex (i.e, "he" or "his" for male-to-female persons, "she" or "her" for female-to-male persons) is equivalent to calling a gay man "faggot" or a lesbian "dyke". It is extremely offensive.

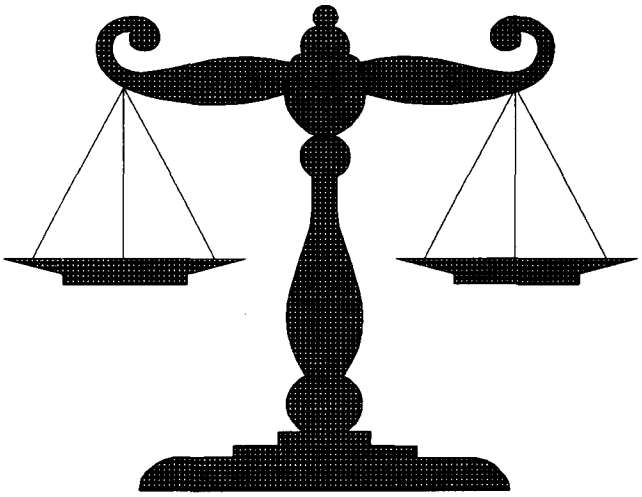
Usage tip: At all times, use pronouns and possessive appropriate to a transgendered persons current gender status or gender expression.

6.Avoid Aspersion by Using Quotation Marks: Never put the appropriate pronouns or possessives in quotes. Never put the sexual orientations or genitalia of transgendered persons in quotes.

7.Self-Identification: Ask an individual transgendered person how they wish to be identified. We all like to describe ourselves differently, and some variance in terminology is to be expected. Self-identification is an important right. When in doubt, just ask.

These guidelines serve two purposes. Precise usage of the appropriate terms contained herein when covering transgendered persons will improve journalistic accuracy. In the interest of civility, correctly using the specific terminology while avoiding inflammatory and derogatory wording in media coverage of transgendered persons is both impartial and respectful. To do otherwise is to be insulting, injurious, and slanderous. To do otherwise is to intentionally show disrespect to transgendered human beings. That is called transphobia.

From Jessica Xavier (Transgendered Nation and Washington D.C. PFLAG). One of a series of handouts available through the PFLAG-Talk/TGS-PFLAG virtual library. http://www.critpath.org/pflag-talk/



© ICTLEP, Inc., July 1996

From the PFLAG-Talk/TGS-PFLAG Virtual Library
http://www.critpath.org/pflag-talk/tgKIDfaq.html

About Our Transgendered Children And Their Families

Q: What does it mean to be transgendered?

A: Transgendered people are individuals of any age or sex who manifest characteristics, behaviors or self-expression, which in their own or someone else's perception, is typical of or commonly associated with persons of another gender.

Q: Are there different types of transgendered people?

A: Yes. There is great diversity among transgendered people. Various terms are used to describe segments of the transgendered community. Some of these terms are transvestite, crossdresser, bi-gendered, androgyne, transsexual, drag queen and male/female impersonator. Each of these terms describes a distinct type of transgendered person. A detailed glossary of transgendered terminology is available on request (see below).

Q: What causes a person to be transgendered?

A: No definite answer can be offered to this question. Research suggests there is a biological basis for transgendered behavior but to what degree is unknown. Transgendered people manifest their condition at different stages in their lives ranging from infancy to old age. This leads to the observation that biology creates a capacity while nurture and individual choice may retard or accelerate the emergence or degree of transgendered behavior.

Q: How many transgendered people are there in the world?

A: No one knows what the population of transgendered people is because there is no means of identifying and counting them. The evidence suggests that many transgendered people hide their condition to avoid discrimination and abuse by others. However, transgendered people are found in every society and culture, and in every country, from the most primitive to the most advanced. And, transgendered people have been present throughout human history. Figures such as Saint Joan D'Arc, The Chevalier D'Eon, Lord Cornbury and Dr. Mary Walker are but a few of the transgendered people to be found In the pages of history books.

Literary references to transgendered people abound. In the latter half of the twentieth century the visible population of transgendered people has increased into the millions worldwide. The evidence suggests that transgenderism is but another facet of the diverse human condition.

Q: Are transgendered people considered to be disabled, sick or mentally ill?

A: Under the provisions of the Americans for Disabilities Act (ADA) transgendered people are not considered to be disabled solely on the basis of their transgendered status. Transgendered people are not considered to be medically at risk by virtue of their status. Transgendered people may be diagnosed by the psychiatric profession under the provisions of the Diagnostic and Statistical Manual

of Mental Disorders, Fourth Edition (DSM-IV), American Psychiatric Association, 1994. However, the vast majority of transgendered people do not require psychiatric diagnosis or treatment and are not regarded as mentally ill or incompetent solely by virtue of their transgendered status. The inclusion of transgendered people in the DSM-IV is subject to periodic review. Just as homosexuality was removed from an earlier DSM, it is possible that transgendered people will not be included in future DSM's.

Q: Can transgendered people be treated or cured?

A: There is no known cure or course of treatment which reverses the transgendered person's manifestation of the characteristics and behaviors of another gender. Transgendered people have at times been subjected to electric shock therapy, aversion therapy (applying physical pain to condition response), drug therapy and other procedures. None of these "cures" have succeeded. Many such "cures" have been painful and dehumanizing for the victims.

Q: Is transgendered behavior sinful and against the teachings of the Bible?

A: An isolated passage in the Book of Deuteronomy (22:5) reads: "The woman shall not wear that which pertaineth unto a man, neither shall a man put on a woman's garment: for all that do so are abomination unto the Lord thy God." This passage is part of what biblical scholars refer to as the Hebrew Purity Code, a system of rules for social behavior and dietary consumption intended to "purify" the body and spirit in God's eyes. In the broader context of the Purity Code this is a minor passage which is accompanied by prohibitions against intercourse with a menstruating woman, wearing clothing made of mixed fibers, sacrificing a blemished animal and remarrying a former wife. Taken together the prohibitions of the Purity Code amount to arbitrary cultural taboos as contrasted with the more profound precepts of the Ten Commandments. Biblical scholars and theologians warn of the danger of selective interpretation of the Bible in a way which upholds some passages while ignoring others and overlooking the broader context. Other authors point out that what "pertaineth unto a man" and what garments "pertain to women" have undergone continual change throughout history. Judged strictly by Hebrew standards the entirety of modern civilization would appear to violate the Purity Code.

Q: Are transgendered people homosexual, bisexual or heterosexual?

A: The sexual orientation of transgendered people may be homosexual, bisexual, or heterosexual.

Q: Are transgendered people subject to discrimination and denial of their human rights? Are they subjected to hate crimes and bashing incidents?

A: Transgendered people face discrimination in the workplace, in housing, in healthcare, in the military service, in prison and in the society at large. Many transgendered people are unemployed or under-employed by virtue of their status. With the exception of a few jurisdictions the jobs of transgendered people are not protected by law. Because of their "visible" behavior and choice of attire transgendered people are frequently subjected to verbal and physical abuse by other citizens, leading in some cases to the loss of life. In the U.S.A. such hate crimes are currently not reported statistically as crimes perpetrated against transgendered people.

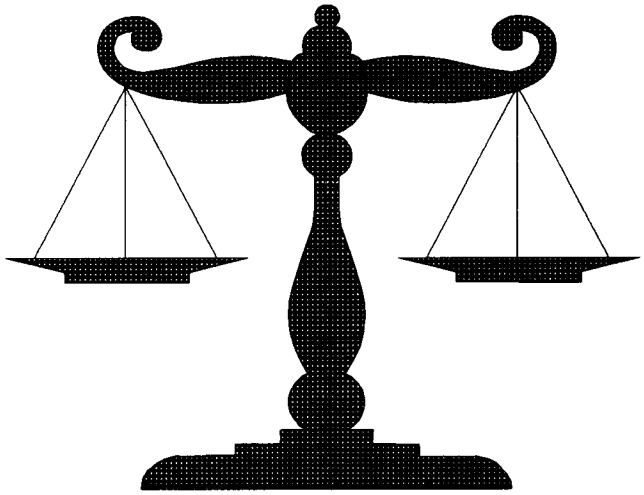
© ICTLEP, Inc., July 1996

Q: How can I help support the transgendered person in my family?

A: First, offer your family member your unconditional love and support. Secondly, educate yourself about transgenderism and transgendered people and their concerns. Thirdly, help your loved one educate and "come out" to other family members and friends who will be supportive.

By Sharon Stuart/Tom Heitz (ICTLEP & PFLAG Cooperstown) and subscribers to tgs-pflag.

TGS-PFLAG is an independent email list for transgendered people, their families and friends.Visit the PFLAG-Talk/TGS-PFLAG web page, http://www.critpath.org/pflag-talk/ or contact Emily Rizzo <rizzoe@fasecon.econ.nyu.edu>.



© ICTLEP, Inc., July 1996

From the PFLAG-Talk/TGS-PFLAG Virtual Library
http://www.critpath.org/pflag-talk/gid.htm

Medical Abuse of GLBT Youth

In recent years, the medical abuse of youths has become more prevalent, and is, for the most part, being conducted without the awareness of individuals and organizations concerned about the treatment of gay, lesbian, bisexual and transgendered youths.

Clearly, transgendered youth are at great risk for abuse; however, advocates for gay and lesbian youths should be equally concerned, and should not assume that gay and lesbian youths are not at equal risk. Many gay and lesbian advocates fail to realize that abuses which occurred prior to 1973 to correct the "mental disorder" of homosexuality are now being carried out under the "mental disorder" of Gender Identity Disorder. Adults can argue about the "labels" used to justify the abuse but that does not alter the fact that youths are being abused.

In 1973, the American Psychiatric Association eliminated homosexuality from it's list of mental disorders. However, this elimination did not result in the elimination of homophobia within segments of the psychiatric community. It is still possible for influential "homophobic" psychiatrists to serve on sub-committees which develop criteria for psychiatric diagnoses within the Diagnostic and Statistical Manual (DSM) of the APA.

The publication of DSM-III in 1980, was hailed by gay advocates as a significant breakthrough; however, what received little attention is that a new "mental illness" appeared in the DSM-III in 1980: "Gender Identity Disorder of Childhood (GIDC)." Receiving even less attention is the fact that the criteria for receiving a diagnosis of GIDC are being broadened with each revision of the DSM and that substantial numbers of gay and lesbians are being diagnosed with GIDC. While there are legitimate arguments that children with "true" gender identity disorders benefit from receiving appropriate medical care, recent evidence would indicate that significant portions of children with Gender Identity Disorder are receiving inappropriate and abusive, but approved, psychiatric therapy.

Dr. Susan Coates, a clinical psychologist who runs the Childhood Gender Identity Project at Roosevelt Hospital in New York, the largest gender treatment center for children in the U.S., when asked what can happen in the offices of psychiatrists and psychologists all over the world to children who refuse to behave "like a girl" or "like a boy" replied, " You'd be shocked, you would be very shocked, at what goes on even at this age level." The evidence indicates Dr. Coates is not exaggerating. She fears that these children will be referred to therapists who use "intense behavior modification" and drug therapy. A recently published book, "Gender Shock", exposes these abuses.

In 1980, with the publication of DSM-III, Gender Identity Disorder of Childhood is described as "apparently rare," and it was estimated that approximately one percent of children were affected. In 1994, with the publication of DSM-IV, the condition is stated to occur in two to five percent of children. Further research reveals that the criteria for being classified for Gender Identity Disorder

are being broadened with each subsequent revision of the DSM and that more and more children are meeting the less stringent diagnostic criteria and are subject to abuse.

Transsexuality is not becoming more prevalent, although more transsexuals are seeking treatment as they become aware that medical treatment is available. Certainly they do not comprise from two to five percent of children! Most common estimates for the occurrence of transsexuality range from 1 out of 23,000 individuals to 1 out of 40,000 individuals. Transvestitism or cross- dressing is much more common, but even then, estimates are about 1or 2 percent of the population and most of them do not show obvious cross- gender behaviors as adolescents. Most hide their activities, confine cross-dressing behaviors to private settings, and would not be exposed and referred to psychiatrists for treatment. Evidence and logic indicates that substantial numbers of gay, lesbian, and heterosexuals youths who demonstrate behaviors which are considered to be "gender variant" are receiving abusive therapy to correct their gender deviant behavior.

There are few legal protections for these children and youths. The parents are granted broad rights and, if a psychiatrist convinces a homophobic parent that he can cure a child of his or her gender disorder by confining the child to an institution for long term corrective therapy, there is no legal remedy for the child. Children who resist treatment simply meet the criteria for an additional diagnosis of Oppositional Defiant Disorder. If they have actually engaged in sex, they qualify for the diagnosis of sex offender, since it is illegal for underage youths to have sex with each other in most states. In cases of consensual heterosexual sex between adolescents, it is rare for them to be declared sex offenders and placed in programs with convicted rapists. Richard Green, a psychiatrist with extensive experience with treating GID, a member of the GID DSM sub-committee, and an attorney, states in "Gender Shock", " parents have the legal right to seek treatment to modify their child's cross- gender behavior to standard boy or girl behavior, even if their only motivation is to prevent homosexuality." In 1987, Green recommended direct behavior modification activities, discouraging in every way the free expression of cross gender role behavior through negative reinforcement, extinction, and positive role modeling.

In 1995, George A. Rekers, a UCLA and Harvard- trained clinical psychologist with extensive experience with GID, published the "Handbook of Child and Adolescent Sexual Problems" which is designed to assist the general practitioner and pediatrician when he or she is presented with a gender non- conforming child. Reker's behavior modification therapies, rather that being an aberration, are now being presented as a diagnostic and treatment model. Rekers has recently published an article highlighting the success of his therapies with children and has asked the APA to revisit their 1973 decision which eliminated homosexuality from the DSM. In view of recent information offered by Rekers, homosexuality is a mental disorder and is treatable. The motivations of these prominent and well educated psychiatrists and psychologists is not fully understood. It is known, however, that Green and Rekers have received substantial funds through National Institute of Mental Health Grants. At least 1.5 million dollars were awarded by NIMH to study gender deviant behavior since the early 1970's. Reker's himself claims that the NIMH has funded him over a half a million dollars. The biased goals of the research is revealed in the language of the grant applications where references to atypical sex roles, atypical gender identity, modification of deviant behavior, and pre-transsexual behavior are included in the grant proposals. Other agencies funding gender corrective therapies are the Foundation Fund for Research in Psychiatry, the Research Scientist De-

© ICTLEP, Inc., July 1996

velopment Award fund, the Public Health Service's clinical research grants, and the National Institute of Health's Biomedical Research Support grants.

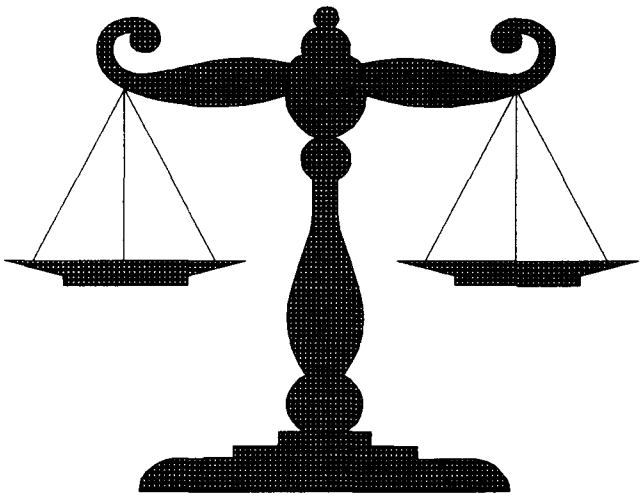
It is extremely difficult to differentiate between a gay, lesbian, transgendered, or heterosexual youth! Usually, later, the youth can determine their true identity. A youth who initially identifies as gay, or lesbian, or transgendered may be mistaken in their original assessment and may later learn that they fall into another category. Significant numbers of individuals who are female-to-male transsexuals identify as lesbians for many years before they recognize their identity. Indeed, some PFLAG leaders in other areas of the U.S. have children who demonstrate this fact.

There are many understanding and supportive therapists who are not abusive. Morton Shane, M.D. and Estelle Shane, Ph.D, in their article "Clinical Perspectives on Gender Role/Identity Disorder" state, " The fear evoked now concerning the intractable course and outcome of gender disorders in childhood can lead to anxiety and despair, and may not create the optimal atmosphere for learning about and treating such conditions. Our safest stance is one of uncertainty, humility, and empathy."

September 27, 1996. Prepared by Nancy Sharp, New Orleans PFLAG, with Sharon Stuart, Cooperstown PFLAG; Maggie Heineman, Philadelphia PFLAG; and Shannon Minter, Esq. Director, Youth Project National Center for Lesbian Rights (NCLR). Disclaimer: Organizational affiliation for identification only.

The PFLAG-Talk and TGS-PFLAG lists, website and handouts are independent. They are not managed or monitored by National PFLAG. Visit the PFLAG-Talk/TGS-PFLAG website: http://www.critpath.org/pflag-talk/

For information about PFLAG's Special Outreach Network for Transgender Family Support, contact Emily or George Neighbors, Fields Services Director, 1101 14th Street, NW, Suite 1030, Washington D.C. 2005, Suite 1030, Washington D.C. 2005; (202) 638-4200. Email: GNeighbors@pflag.org.



© ICTLEP, Inc., July 1996

From the PFLAG-Talk/TGS-PFLAG Virtual Library
http://www.critpath.org/pflag-talk/vlibfaq.htm

PFLAG-Talk & TGS-PFLAG

FAQ: the lists, the website, the handouts

Q. What are pflag-talk/tgs-pflag handouts?

A. Documents, 1 to 4 pages in length, which are available at the pflag-talk/tgs-pflag virtual library and are intended for hardcopy distribution. They may be printed and photocopied. Handout appearance varies depending upon the software and hardware used in the printing.

Q. What are pflag-talk & tgs-pflag?

A. They are independent Internet mailing lists through which people exchange email concerning topics which would be discussed at a PFLAG chapter meeting. We refer to them as "virtual PFLAG chapters." The email addreses are pflag-talk@casti.com and tgs-pflag@critpath.org.

Q. Why are there two separate email lists?

A. Pflag-talk was established in February, 1995. In November pflag-talkers working for transgender inclusion established tgs-pflag as a tool for developing PFLAG's Special Outreach Network (SON) for Family and Friends of Transgenders Support (T-SON).

Q. What does "independent" imply?

A. The PFLAG-Talk and TGS-PFLAG lists, the webpage, and the handouts are not managed or monitored by National PFLAG. The two "virtual chapters" are not chapters. The lists, the webpage, and the handouts have been provided independently by PFLAG members. The anarchy, freedom, and traditions of the Internet govern pflag-talk and tgs-pflag.

Q. Who are the self-selected owners, writers, and publisher?

A. Steve Basile <nestor@io.com>, Austin PFLAG, is the owner of pflag-talk. Emily Rizzo <rizzoe@fasecon.econ.nyu.edu>, Brooklyn PFLAG, is the owner of tgs-pflag. Maggie Heineman <maggie@critpath.org>, Philadelphia PFLAG, originally edited and published for both lists. A team headed by John Lindner <john@garlic.com>, Peninsula PFLAG (San Mateo/Santa Clara Counties, California), currently handles those tasks. Writers for the list are the subscribers. Handout authors are named in each handout.

Q. What is the pflag-talk/tgs-pflag library?

A. The library is one of the sections of the pflag-talk/tgs-pflag website. The homepage for pflag-talk and tgs-pflag is http://www.critpath.org/pflag-talk/. The virtual library is at http://www.critpath.org/pflag-talk/library.html

Q. What's there?

A. The virtual library has the same kinds of materials that would be in a chapter library. In addition to the handouts carrying the pflag-talk/tgs-pflag logo, there are publications from PFLAG chapters, other groups, and individuals. Most of these are on other websites. The library links to documents that would interest people interested in PFLAG.

Q. Are publications from PFLAG National available on the web?

A. PFLAG National has not installed its copyrighted publications on the web. Be Yourself has been installed at the OutProud site. No copyrighted PFLAG publications have been, or will be, installed for the pflag-talk/tgs-pflag website. However, our website provides links to copyrighted PFLAG publications which others have installed.

Q. What's at the website besides the library?

A. FAQs for the pflag-talk and tgs-pflag email lists and info about their confidential online-helpline; FAQs and website links to the related email lists: pflag-announce, spouse-support, schools, and religion; the Rhea Murray website which is a hypertext presentation linking writings by Rhea; profiles and photos of other list leaders; PFLAG chapter directory in a form which can be downloaded and printed; links to official and unofficial chapter website; published letters and testimony by list members and newspaper articles about them; a section for Internet newbies; links to outstanding indices such as the Interfaith Working Group "Other Sites" page.

Q. What does FAQ stand for?

A. Frequently Asked Questions, which is a lie, of course. FAQs set up a Q and A format for telling people what you wish they would ask.

By johng@garlic.com. Please share you PFLAG helpline handouts and newsletter favorites through the pflag-talk and tgs-pflag virtual library. Our homepage is http://www.critpath.org/pflag-talk/.

© ICTLEP, Inc., July 1996

From the PFLAG-Talk/TGS-PFLAG Virtual Library
http://www.critpath.org/pflag-talk/sex4achange.htm

Sex For a Change

by Art Hoppe, columnist, the San Francisco Examiner

READERS ARE FURIOUS that Supervisor Tom Ammiano wants insurance companies to pay for city employees' sex change operations.

Readers, as usual, are all wrong. The vast majority of such operations involve changing men into women. And if there's one issue we can all agree upon, it's the crying need for more women in government.

I'm confident the National Organization for Women along with feminists everywhere will applaud Mr. Ammiano's crusade to ensure their gender is more adequately represented in our City Hall.

For all too long the corridors of that bureaucratic institution have been dominated by cigar smoking, poker playing, whiskey drinking, hard- hearted males. Simple justice demands that more women take their rightful place around the water coolers, on the telephones and in the restrooms of that edifice.

Simple justice may not have widespread appeal these days among taxpayers. After all, they're being asked to lay out $10,000 to $30,000 in higher insurance premiums for each sex change operation. Their question, of course, is, "What's in it for me?"

The answer is that women bureaucrats are a darned sight easier to deal with than their male counterparts.

Let's say you call the Health Department's Animal Bite Reporting Service (554-2850) to report being bitten by an animal. What do you want? Sympathy. Most people who call City Hall want sympathy, either before or after they hang up the phone.

And who are more compassionate, men or women? In a major 1987 study of laboratory rats by Barnes and Frolich of Rutgers University, the researchers placed a feverish baby rat in a cage containing six female and six male adult rats. They found that five of the six female rats licked and cuddled the baby rat while the six male rats headed straight for the cheese and the sixth female rat.

From this, they were able to conclude that females of the species are 2.6 times more compassionate than males, which was something all of us knew already anyway.

Not only are women more compassionate but they attune more readily to the emotional needs of those in distress, which, of course, would include taxpayers. Should you ring up Potholes (695-2100) or the Sewer Odor Hotline (557-6833) -- which are among the more than 1,800 city government numbers listed in the phone book -- how lucky you are if a woman answers.

"A smell like what?" she'll say, all concerned. Or, `"Your car disappeared at which intersection?" And you'll feel in your bones that she really cares. On the other hand, no male bureaucrat in all recorded history has ever told a taxpayer, "Poor baby."

So if you want to be licked and cuddled when you call up City Hall, support Supervisor Ammiano's brilliant plan to increase the number of women in city government without increasing the number of city employees one iota.

Indeed, there's no reason this bold policy couldn't be carried all the way to the top. And if our mayor will only volunteer for this surgical procedure, I can think of a dozen fired city employees who'd be glad to groom him for his new role.

© ICTLEP, Inc., July 1996

From the PFLAG-Talk/TGS-PFLAG Virtual Library
http://www.critpath.org/pflag-talk/subtle.htm

The Subtler Forms of Homophobia
by Catherine Tuerck

During the period when I was coming out to friends - one lunch at a time - I was careful to make sure that they understood that our son, Joshua, didn't look gay. Of course, what I meant was that he doesn't look feminine. Then, when our family attended its first PFLAG meeting, I said it again and, after the meeting, Joshua challenged me. "If I was feminine, Mom, would you still be proud of me?

As President of PFLAG I talk with a lot of parents. As I get to know them and ask about their children, I hear the same theme over and over again. They tell me with pride how "normal" their children are: if it's a daughter, she's described as very feminine, and if it's a son, I'm assured he's "straight" looking/ A PFLAG parent who portrayed her son as a "normal gay person," defined what she meant by saying, "Well, he's not like all those people you see at the Gay Pride parades." Where are the parents whose kids don't look "normal?"

Recently I went with several straight friends to see the movie Philadelphia. All agreed it was good for society to see a "normal" gay man. But when this gay man admits on the witness stand that he succumbed to the "repulsive" gay lifestyle by going to porno flicks and having some kind of sexual encounter, he faints. Later in the movie, one of the gay man's law partners describes an experience in the service when a gay man had his head pushed in a toilet into which all the military "guys" had urinated. Did the law partner faint at the memory of his shameful acting out of the heterosexual male lifestyle? No siree. Somehow, even in a film meant to portray gays in a positive light, the idea is fostered that gay sexuality, because it's not the same as heterosexuality, is horrible and shameful.

I was faced with this issue again when I was in the process of hiring a new administrative assistant for the PFLAG office. Would a feminine man or a masculine woman be an acceptable choice? After all, do we want a distressed parent who calls the PFLAG office to encounter a man with a lilt in his manner of speaking? Would such parent be more comfortable talking with someone who has a "normal" voice? Is that what we are all about?

Every morning I see my next-door neighbor, a regular straight guy, as he goes for his recreational run. He dons his one- hundred-dollar running shoes, his running tights, his he-man T-shirt, and swaggers past my house, the epitome of the Tarzan male. He likes the way he looks. It's his fun. Is it any different from the gay man who wants to have his fun by dressing in drag? Is one "normal" and the other "abnormal?" I think not. Different, yes. Abnormal, no.

Recently I spoke with Michael Bailey, a researcher interested in the feminine behavior of gay boys. He has coined the term "fem-phobia," to which I would like to add the term "mascu- phobia." Especially in this day of pressure from the religious right, I think that we parents have to be very

conscious of our fears. It is not good enough to overcome our homophobia; we have to be very careful about its more suble form of fem- and mascu-phobia. We are not just parents of "normal" straight-looking and -acting gay kids; we are also parents of boys and girls who look and act like the opposite of what is called "normal." We have to make sure that our quest for acceptance includes embracing the diversity that exists in the gay community and that political correctness doesn't become discrimination. We have to think about the father I encountered, who boasted about being the coach of the football team on which his gay son plays. If this boy occasionally dressed in drag, would he fall out of the "normal" category? What would happen then between the father and son? Would it mean the difference between getting kicked out of the house and being allowed to stay?

We want our kids to be able to express who they are. Is there any sense in coming out of the closet if you can't come out in your personal style? That is exactly what you see in the gay community - gay men and women in their full diversity, in all their many individual personas. As parents, we have to appreciate all of them as "normal," whatever that means.

PS: If you haven't seen Torch Song Trilogy, I highly recommend it. It was a turning point in my own understanding, and it's available on videotape.

Catherine Tuerck is the president of PFLAG Washington, D.C. Please share your PFLAG helpline handouts and newsletter favorites through the PFLAG-Talk & TGS-PFLAG virtual library http://www.critpath.org/pflag-talk/. Write to maggie@critpath.org.

Share your PFLAG favorites through the PFLAG-Talk and TGS_PFLAG virtual library. Our homepage is http://www.critpath.org/pflag-talk/. Write to maggie@critpath.org.

Note: Limited copyroght to publish Appendix G given to ICTLEP by Maggie Heineman.

© ICTLEP, Inc., July 1996