



Label: n. an identifying marker. v. to classify or identify.

Human beings seem to have a preoccupation with labels. A place for everything and everything in its place, and each and every one has to have a label. Labels can be used to separate the familiar and safe from the unfamiliar and (potentially) dangerous. "Us" and "Them". This is a human survival trait. Labels can also be used to hurt. Labels such as "fag", "nigger", "kike", "wop", etc., are used by one group to help them feel superior to another group, whether or not the implied inferiority is true.

One label that may not be considered derogatory but that I feel is very abused is "normal". Normal is a term used by statistical mathematicians (read as con-artists) to describe the distribution of a group of things. Remember tests being "graded on a curve"? In a group of people taking a test, for example, statisticians tell us that there should be a certain percentage of "A"s, more "B"s than "A"s, fewer "D"s than "C"s, etc. This is called a normal distribution. If the actual grades achieved on the test don't match up with the expected results, the person assigning the grades can adjust the individual grades so that as a group they match the normal distribution that is expected.

From the distribution of this data, you can derive a mean or an average value, and you can also determine how far a particular item differs from the mean. What you cannot do is look at any one item and say that it is or is not "normal". The term just does not apply.

One dictionary defines normal as an adjective meaning "according to standard or rule, regular, natural, or customary", and that is somewhat closer to what people mean, but it is still not precise. I doubt that you could get more than two people to agree on just what "normal" is! I think that when most people use the word "normal", they should substitute the phrase "that which is acceptable to me".

When Dr. Leah Shaeffer spoke to our group, she said that we were "special", that we had been blessed by the experience of seeing life with a woman's soul through a man's eyes. I like that.

So the next time some misinformed or frightened person informs you that you or what you are doing is "not normal" or "abnormal", spare them some forgiveness. They cannot help being "normal".

Judy

PS: Get out and VOTE!

Trinidad: A Unique SRS Experience

by Jackie O

Dr. Stanley H. Biber lives and practices his profession in the quiet scenically magnificent town of Trinidad Colorado. This western town that has seen the likes of Bat Masterson as town marshal and that boasts of one of the three most scenic drives in Colorado, also finds itself serving as the host for the majority of all Sexual Reassignment Surgery done in the United States. It is located approximately 12 miles north of the Arizona boarder and is an hour south of Pueblo (two and a half from Colorado Springs) on Interstate 25. The people are extremely friendly (not just to tolerant to TS's) and laid back. The respect they show for each other and the town they live in is evident everywhere you turn.

At a very young 67 Dr. Biber is still handling 100 to 150 SRS cases a year. The majority are Male to female; however he also does female to male. He has been doing SRS operations since 1969 and has consistently been perfecting his technique. Although small in stature this down to earth, sincere, caring man has earned the respect of the community he serves as well as Gender Identity Professionals throughout the world. According to Marie, his secretary, he has no current plans to retire or to take on an assistant. At some point he may elect to do so; however the individual would have to believe in what Dr. Biber is doing and wish to carry on his work in Trinidad.

Travel Options

You can reach Trinidad by Train, Bus or indirectly by air. Reaching the town by train through Albuquerque NM or by bus from Denver are two of the most common ways people arrive. Both cities are approximately 200 miles from Trinidad. I would recommend however flying into Colorado Springs, Pueblo or Santa Fe and renting a car. National Car Rental has a site in Trinidad for drop-off. Unless you have a friend to go with you wouldn't want to keep the car for the entire time your there. Their number in Trinidad is (719) 846-3318.

You will need to arrive two or three days ahead of your admittance date for one last H.I.V. test. Plan accordingly and spend a little time vacationing and enjoying the beautiful sights in the area. You are 2 hours from Toas and 3 hours from Santa Fe. Planned correctly, an overnight trip to these towns is a wonderful experience. The 3 hour trip into the mountains west of Trinidad is also well worth your time. When you're done sight seeing and ready to check into Mount San Rafael drop the car off. You will be capable of driving when discharged; however a night's rest first might be in order. Joanna rode in the car for three hours the day of discharge with no problem and very little discomfort.

Remember, take things slow and don't lift anything heavy (pack lightly). Trinidad is in the desert and as such experiences warm days and cool nights. They get snow but it doesn't last long. You will not need much in the way of clothing once you're in the hospital.

Please see Trinidad on page 8

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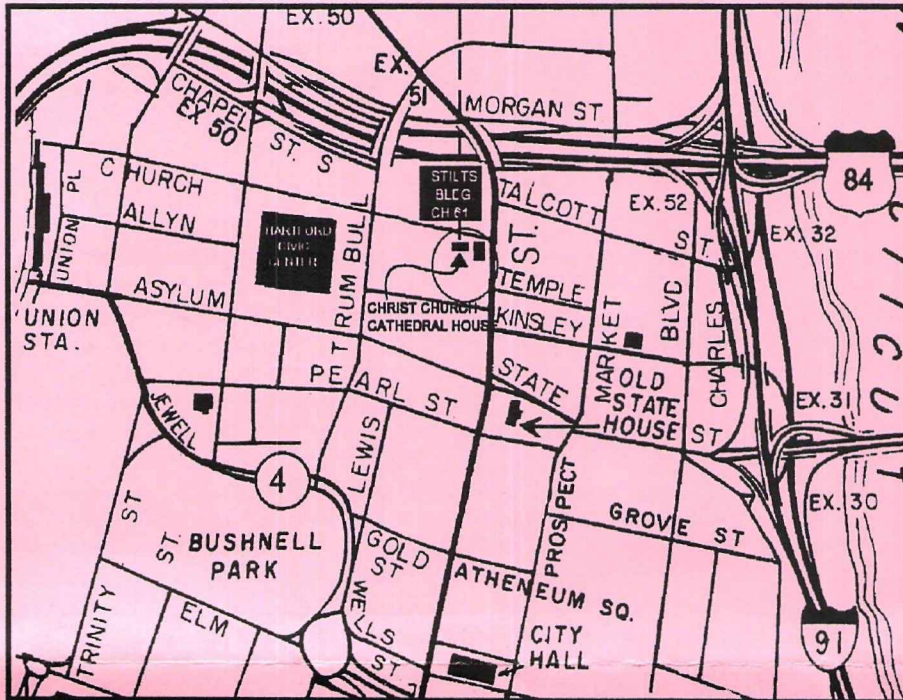
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XX Club Meetings

Regular meetings of the XX Club are held the second and fourth Saturdays of every month at 1:45 PM to 4:45 PM.

Meeting are held at:

Christ Church Cathedral (Parish House)
45 Church Street
Hartford, CT 06103



Upcoming XX Club Meetings

- Saturday, October 10- Support Group Meeting at Christ Church Cathedral
- Saturday, October 24 - Bungee jumping from Christ Church Cathedral
- Saturday November 14- Support Group Meeting at Christ Church Cathedral
- Saturday November 28 - Support Group Meeting at Christ Church Cathedral
- Saturday December 12 - Christmas Party at Christ Church Cathedral
- Saturday December 26- Support Group Meeting at Christ Church Cathedral

VOTE

The XX Club, Inc

P. O. Box 387
Hartford, CT 06141-0387

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The Rev. Canon Clinton R. Jones, D.D.
- President**
Jennifer L. Adams
- Vice Presidents**
Leslie D.
Jamie Lee R.
- Treasurer**
Julie Anne Wright
- Secretary**
Jackie O'Clair
- Community Liason**
Standing Committee

Treasurer's Report

Future Treasurers' reports will be published quarterly.

The Gender Identity Clinic of New England, Inc.

(203) 646-8651

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NEWSLETTER SUBMISSIONS Newsletter submissions may either be mailed to the XX Club at our address above or submitted at a XX Club meeting. While not necessary, it would be helpful to the editors if your contribution was submitted on an MS DOS computer disk (5-1/4" or 3-1/2") (any word processing format or ASCII). This newsletter represents the XX Club, Inc., and the Gender Identity Clinic of New England, Inc.. For that reason, a submission will not be printed if it does not center on an issue of importance to the transsexual community, or if it in any way slanders any individual or group of individuals. Due to space and time constraints, your submission may not be printed immediately. Unfortunately, we cannot be held responsible for the return of any materials submitted. Please state clearly what name, if any, or any other personal information you want, or don't want included in publication of your submission. Personal information about contributors will not be disclosed. Please give due credit to your sources. All submitted material will be considered, and VERY much appreciated. Material submitted serves as a de facto release to publish. Any photographs submitted must have a signed release from all individuals in the photograph.

CHANGE OF ADDRESS: Please send new address and old address, including zip codes, to "XX" at the above address.

Special thanks and appreciation are extended to Veronica Jean Brown and Becky Ann for their many years of dedicated service through publication of the newsletter, Twenty Minutes, which has ceased publication.

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We wish to thank Aetna Life and Casualty Printing Services for their help with printing this newsletter.

XX (Twenty) Club Information
The XX (Twenty) Club, Inc.
The Transsexual Peer Support Group, of the:
Gender Identity Clinic Of New England, Inc.
 P. O. Box 387
 Hartford, CT 06141-0387
 Tel: (203) 646-8651

Nature: The XX (Twenty) Club is the transsexual peer support group of the Gender Identity Clinic of New England, Inc.. Our purpose is to provide knowledgeable information and ongoing peer support to transsexual persons throughout the many stages of their transition, as well as information about the Gender Identity Clinic of New England, Inc.. Friends and relatives are encouraged to attend in the hope of gaining greater understanding and acceptance of their loved one's gender dysphoria. We are open to both male-to-female, and female-to-male gender dysphoric persons. The XX Club, Inc. is non-profit and non-sexual. While our meetings are held at a church, we are not a religious organization and have no official affiliation with any religious denomination. We hold no prejudice against any other group of people. We are a peer support group, we are not a dating service, or an instant source of new best friends.

Services: The XX Club, Inc. officially publishes a bi-monthly newsletter (XX) Twenty, serving persons with gender dysphoria and helping professionals. We meet twice a month (2nd & 4th Saturdays, 1:45PM-4:45PM), at the Christ Church Cathedral; 45 Church Street; Hartford, CT. Meetings are structured to provide support, information, and open accepting understanding. On occasion (no more than one meeting per month), we have professional speakers on educational and medical subjects of interest to gender dysphoric persons. We also have social get-togethers, club parties, outreach to New England and New York gender organizations, and a speakers bureau. Smoking is not allowed during our meetings, but is permitted during our refreshment break, and after the meeting in designated areas only. In the course of our meeting we have a half-hour refreshment break. People are encouraged to get to know one another during the break and help themselves to food and beverages. Please feel free to bring food to share with our group.

Security: We hold no security restrictions on people who wish to subscribe to our newsletter. Persons interested in attending a meeting are welcome to come as long as they have a personal interest in gender dysphoria, understand the supportive nature of our group, and are willing to respect the anonymity of all persons attending. At no time may another persons name, address, telephone number, or any other personal information be given to another person without full permission. Cameras and recording devices are not allowed at our meetings.

Membership & Meeting Fees: Annual membership dues for the XX Club, Inc., are \$20.00 per year. Dues include a one year subscription to our newsletter, (XX) Twenty. Members and visitors are encouraged to contribute a minimum of \$1.00 per person at each meeting to help defray our expenses. Membership dues and meeting fees are used to contribute to Christ Church Cathedral for the use of their facilities and personnel, defray the cost of newsletter production and distribution, and provide refreshments for Twenty club and GICNE meetings. While these contributions allows us to remain self-sustaining, no one will be turned away because of lack of ability to contribute.

'PEELING THE ONION'

A Blatant Commercial Appeal

by Jennifer Adams

Our linguistic tradition, as befits its origins and heritage, is rich with agricultural metaphors. Many of these have, in modern times, been rendered obsolete or at least strange-sounding to our sophisticated urban/suburban ears. But everybody knows onions. Some people even LOVE onions. The lowly onion, in recognition of ONE of its peculiarly illustrative properties, exemplifies a simple but intriguing concept: that of "reality" or realizations being revealed through layered, sequential discoveries and insights in a linked (Markovian) interdependent sense. What you see at any given moment is merely the surface.

NOW, but - like an ocean or other significant body of water, to mix in the inevitable nautical reference - much remains hidden beneath. ALWAYS: one can only imagine or speculate as to what has not yet been directly exposed to conscious examination through direct experience.

So it is with transsexual transitions. One can easily chart landmarks or checkpoints as goals or indicators of progress along the way, but as with any notable endeavor, unexpected events, complications, or detours MUST be accommodated and accepted as integral - even ESSENTIAL - ingredients of the overall process.

We have clear, familiar examples of such markers during transition: approaching or contacting a clinic or support group; initiating hormonal therapy; beginning electrolysis; undergoing various surgical cosmetic procedures; entering the period of full-time living in the gender role of choice; seeking approval for and completing sex reassignment surgery. Each of these is a specific, easily identified MAJOR action or accomplishment. As such, we tend to focus our attention on these as goals IN THEMSELVES. They are eminently TANGIBLE.

But life, like the onion, is far more subtle. Beneath each layer removed lies another, then another, lying in wait, all sharing aspects of the same general nature, yet each uniquely different from the others in infinitely intricate ways. In the aggregate, in fact, these layers constitute the onion itself.

This brings us to an interesting observation. For some strange reason that utterly defies logic or the way an IDEAL world would function (and in which, presumably, we should NOT find ourselves facing these trials in the first place), it seems that every milestone successfully negotiated somehow engenders its own higher-order set of concerns. After that initial surge of joy and optimism, doubts inevitably creep in. INEVITABLY. Okay, enough of theory; let's see if we can bring this down to earth with some specific examples.

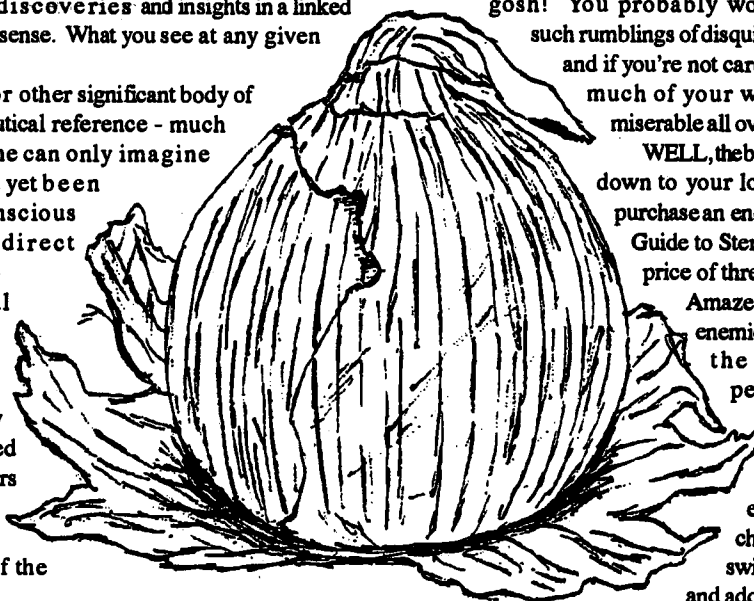
Like, you finally find out about the Clinic or the XX Club and you finally get up the courage to make contact, and WOW! What a revelation! A whole new world opens up to you, of understanding and discovery, of hope and joy. But then, upon inspection, there seems to be SO MUCH yet to do just to get past the starting line, SO MUCH! Welcome to the realm of the onion, start peeling. Maybe you're learning the first steps of "The Transition Shuffle," by J. L. "Twinkletoes" Adams, now available in hardcover for only \$3.98. Such a deal!

And then a while later you go before the Board and manage to get approval for your hormones, WOW! And maybe you even get the prescription filled and start gobbling down those pills, scrupulously, religiously, before sneaky little doubts begin to raise their nasty little heads. A deeper layer of the onion reveals itself: is your prescription correct? When will things start to happen? Will those pills EVER work? Gee, you've been taking them for a WHOLE WEEK now, and... Well, gosh! You probably would NEVER have anticipated such rumblings of disquiet, would you? But they're there, and if you're not careful they may grow to dominate much of your waking existence. And make you miserable all over again. The onion?

WELL, the best solution is to RUN, don't walk, down to your local neighborhood drugstore and purchase an encyclopedia, "Dr. J's Official Street Guide to Steroid Hormones," for the low low price of three dollars and ninety-eight cents!

Amaze your friends and confound your enemies with your expert knowledge of the basic all-purpose cyclopentano-phenanthrene structural formula. You'll jump with excitement on learning ALL about your androgens and estrogens and how EASY it is to change one into another simply by switching a ketone and a hydroxyl, and adding or subtracting an ethyl group at the carbon-10 location, HEY! Easier than opening childproof pill bottles! Find out the difference between "progesterone" and "progestin." See what cholesterol looks like to a biochemist! AND, as an ADDED bonus, thrill to secrets passed down through generations of pharmacists regarding the source and name derivation of Premarin [hint: PREGnant MARE's urINE], and properties of its primary active components: sodium estrone sulfate and sodium equilin sulfate. And much, much more. More than you ever wanted to know, WOW! A single layer, peel it.

Or electrolysis? That subject near and dear to our hearts, our faces, our pocketbooks, and our (OUCH!) pain thresholds. It always seems that more of those li'l critters manage to pop up, just when you thought you'd reached a stage of clearing a particular area. Or the calculations involved in determining whether to shave NOW or LATER or NOT (risking "scruffy" days before your next appointment), and STILL negotiating life in the interim as a smooth-faced woman. Or, for many, the dread of enduring that torture needle for another X minutes or Y hours. But one thing's for sure: your dedication will show itself. Should you do thermolysis? Galvanic? The blend? Fear not. For all the answers to these and other earth-shaking questions, just get yourself a copy of



that definitive tome, "Jenn's Unexpurgated Electrolysis Primer," a STEAL at \$3.98. (F to M people can skip this section. Ooops, sorry Folks, too late.)

Ah, what about cosmetic surgery? Plastic surgeons can lift, liposuck, reduce, snip, augment, implant, tuck, and do many interesting things to your corpus, all in the name of IMPROVING its (your) physical appearance. Now first of all, it's said, the importance of any changes resides in the mind. I don't know if I believe THAT or not (see discussion several paragraphs below), but gee, it all seems so simple, right? You save up your dollars, you go for a consultation, you set a date, and then you sit back and figure, well, that's it, that's all there is to it - lie back and let 'em slice. BINGO! But WHOA! Not so fast, Kemo Sabe. First you have to wake up from the anesthesia and get yourself locomoted out of there in one piece, if it's an outpatient facility, and the fun and games begin: take your antibiotics and pain pills, and do all those little unmentionable tasks they DIDN'T tell you about beforehand. These are discussed in my excellent text, just out: "Dr. Adams' Compleat Cosmetic Surgery," for - wouldja believe?! - only \$3.98 at your local bookstore! AND, for a short time only, order now and get the lyrics to that RAVE hit song sweeping the charts, "Felix," sung to the tune of "Feelings." For greatest benefit, you should buy the book, of course, but I CAN offer a tip or two here to incite your interest. GRATIS.

Like, from Chapter One, dedicated to the "Care and Feeding of Your New (and Beautiful) Nose." The fun really starts when those bandages come off and that swollen proboscis/honker emerges, seemingly much LARGER than when you took it in for repairs. Then there's the potential reshaping and rebalancing, as your recalcitrant cartilage seeks its own perverse path of least resistance which, you are solemnly advised, MUST be actively corrected. And don't forget the exercises of clearing out detritus of accumulated organic tissue (mucus, blood, etc.) by irrigation (sniffing) with homemade saline solution. Or those repeat visits for God knows HOW long till all is healed, and at last you've finally exchanged that awful beak for an honest woman's nose. WHICH YOU'LL LOVE!! So PEEL that onion, lightly. Be sure to read Chapter Two on tracheal shaves, sore throats, and how to deal with a [hopefully temporary] FROGGY VOICE. Ah, the joys of onions!

Hmm, full-time living, anyone? Oh yes, here we are doin' FULL TIME!!! Well, really, Dear, this is what it's ALL about, isn't it? Almost? I mean, you WOULDN'T be caught dead going through all this if it WEREN'T in your game plan, now, would you? What? Oh, you're having second thoughts? Well, yes, now you REALLY see this is no simple game we're talking about - It's merely the rest of your life! Okay, you may have read about the "XY Shuffle," but that piece was written months ago. Now it's the "XX Shuffle," Babes, and that means FULL TIME, at home, work, and play! SO, shouldn't the XX Shuffle get equal billing? It's only fair. Surely, the "XX Shuffle" deserves a column all its own, but - ALAS! - such is apparently not to be. But you CAN get the paperback for - YOU GUESSED IT! - just \$3.98. So call now. Operators are standing by to take your order.

Time was, this whole idea of living fulltime loomed as a distant dream for all of us. Something glorious, not really real: a far off blissful state of being, punctuated by shafts of golden sunlight streaming down through magnificent cloud banks, graced by melodious voices of heavenly hosts, suffused with ethereal fragrances; your entire BEING hoisted up upon mighty wings of unending emotion, exalted. Like dyin' an' goin' to HEAVEN! You get the picture, you know EXACTLY what I mean! But like now it's HERE, in full force, with a whole new set of

AIDS

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1 800 342-AIDS

joys and worries, freedoms and hassles. "Worries?" you ask, unaware that such an existence could even come CLOSE to engendering "worries." Hassles? Ahh... AGAIN?!! Well, yes.

And now for the bottom line, another layer exposed, SURPRISE!!! You might as well know the truth: actually, it's not all that EASY being a girl, didn't they TELL you? Or, BECOMING one. It's fun, it's delightful, it's WONDERFUL and ALL those good things, but... Like... There ARE all these new little layers to peel your way through. Oh, my, where to begin?

Well, like maybe NOT being listened to or taken as seriously as before? Oh yes, it's true. Being talked THROUGH instead of to? Yes, sadly to say, it happens. But SERIOUSLY, let's consider the not inconsiderable demands on one's poor abused pocketbook! Consider that YOU will be SINGLEHANDEDLY supporting the entire women's fashion and cosmetic industries, maintaining hundreds of thousands of jobs worldwide in your full-time pursuit of sartorial and COSMIC splendor. Part of the price, the dues. Anybody want some surplus XY clothing? BUT WAIT! Not so fast!! I see by the LATEST fashion news that now, for some strange unfathomable reason, the girls seem to be copying the BOYS this season. Does this mean you gotta keep wearing those same old XY clothes?!! Pinstripe suits, ties, vests, wingtip shoes? TROUSERS?!! WHOA! WAIT A SECOND! PLEASE! NO! IT'S NOT FAIR! Ah well, peel that onion.

And demands on one's time! Why, just getting ready for work takes a LITTLE bit of extra effort in the AM. A little bit. EVERY morning. And whenever you need to go out. Not just alternate Saturdays for XX Club meetings, or other intermittent occasions, but regularly, EVERY day. Day in, day out. But you know something? It's a wonderfully CONFIRMING process, the DOING of it. It's real. It's worth it. There's definitely something psychological going on there, though I can't quite put my finger on what it is, exactly. Psychological layers to peel.

And then, in pretty quick order, you get USED to it, like second nature. Things become NORMAL again. I mean, you begin to feel like a NORMAL person again (if you ever REALLY did before), and all these things become matter-of-course. Only, you just happen to be living as a female rather than as a male (or vice versa, I suppose, for those of you inclined THAT way). Would you have believed THAT

would happen if someone had told you? It's true! Perhaps a surprise, a pleasant layer to encounter. Or maybe you DID sort of know it was there, just WAITING for you, but somehow you really didn't fully believe it. Enjoy. Read all about it in "Old Doc Adams' Annotated Full-Time Almanac," now at popular prices, REDUCED to \$3.98. WHO COULD RESIST?! Go ahead, peel the onion.



Yes, we must deal with these psychological changes - GROWTH, if you will - that accompany the physical changes and external physical events. But who's to say the external, tangible "physical" is in any sense more real than the internal, somewhat INTangible "psychological"? To a great extent, it is these internal feelings, assessments, responses and decisions which ultimately guide and direct our behavior and the tenor of our lives. FEELINGS: the very real sense of wonder and awe - and, yes, apprehension - as we approach the MEANING of these new discoveries and apply them to our lives. (Peel, yes, but the song? PLEASE, not again.)

And SRS, what's it like? Can't say, haven't been there yet. Or beyond, toward a fuller sense of normalcy over on the destination side. Normalcy with self and in relationships as well. But you can be sure that JLA Creative Publications will offer THE obligatory literature - required reading for all - when THAT time comes, with all the answers to these and other questions. Wonderful though it be, SRS is only another layer - NOT the endpoint many (who HAVEN'T been there yet) make it out to be. Those who HAVE been there will tell you that, after the glow's worn off. So many layers yet to go, each one a new beginning, each a prelude to the next, and the next, which continue on for a lifetime. They never end. As long as you're alive there IS NO identifiable endpoint, only more layers. And the way you peel them determines what those underneath will be like. AMAZING! Who'd a believed it? Onions make you cry? Wear goggles, hold your nose. Peel away. The onion. The onion is you.

With any intellectual curiosity, you'll find yourself asking questions like "Who am I becoming, how am I changing?" And MOST importantly, "Is all of this RIGHT for me? Is this true?"

The bottom line is, you can read books and you can talk to those who've been there. But to get to the heart of the matter, you've gotta do it yourself. So go ahead, peel. Layer by layer. The onion. The onion is you.



Artwork courtesy of Julie Wright

SEVERING YOUR OPTIONS

by Dianna C.

The Gender Identity Center of Colorado (GIC) is only about 200 miles north of "TS Mecca," Trinidad, Colorado. That's about three to four hours by car, depending upon your testosterone

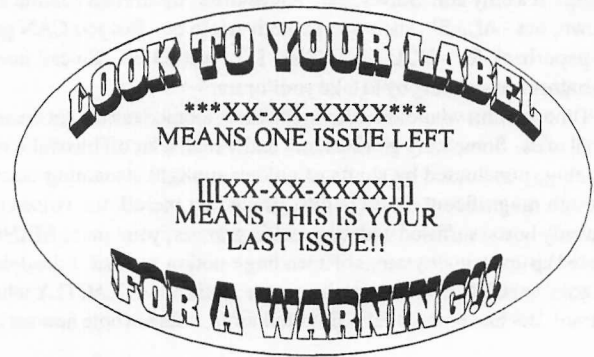
levels. It's a little over six hours by bus, with stops in Colorado Springs, Pueblo, and several small towns along the way. The last two hundred miles of a lifetime journey for some, the first two hundred of the rest of a lifetime for others.

The last hour of the trip is through some pretty desolate desert country: gently rolling brown plains and plateaus sparsely dotted with scrub brush and small cactus. Trinidad is a turn-of-the-century town situated in a shallow valley between a desert plateau and a mountain ridge. Mt. San Raphael Hospital is a modern facility off to the southeast, on the hills overlooking the town. The old hospital building, a Hollywood-horror-movie-type structure, was torn down about five years ago. How brave the girls who entered that building to begin a new life must have been!

Tapestry and other gender community publications have published many glowing stories about Sex Reassignment Surgery from nearly every conceivable angle. But, so far, no one has been willing to address any of the major problems. My experiences indicate that the anticipated improvements in personal quality of life are not quite so easy to obtain, nor are they so beautiful as these stories would indicate. And none of these problems are with Dr. Biber's work. Dr. Biber is an artist, a first-rate sculptor.

I have driven quite a few girls from Denver's airport to Trinidad and/or back to Denver; several other GIC girls have also helped with this service. It is actually very educational, to see and talk with girls from around the world all sharing a common bond. In this brief period of very intense personal reflection for these girls, the good, the bad, and the ugly situations are immediately apparent.

The major problems arise from giving in to a testosterone-induced, male-ego-driven need to accomplish and complete the task above all else; failing to really personally consider the consequences, the options and



alternatives with a qualified/educated/experienced therapist before scheduling surgery.

This misguided quest is the result of an absolutely unreasoned belief that Sex Reassignment Surgery will make all of life's clouds go away, and that the world will turn Technicolor-beautiful with the completion of the surgery. Surgery can only fix what is wrong with your body; surgery can never fix what is wrong in your life. SRS will not, by itself, make life more livable.

Surgery cannot and will not change anyone's perception of who or what you are. No one will ever know whether you have indoor plumbing or outdoor plumbing unless you tell them, or show them. If you have to prove that you have indoor plumbing to pass as a woman, you will never pass as a woman.

The major quality of life problems become undeniably obvious soon after the options have been cut off.

One of the most common problems I see in the Trinidad recovery rooms is a lack of electrolysis. Hormone replacement therapy and surgery will not stop facial hair regrowth. My personal belief is that it is critical for facial electrolysis to be completed prior to surgery, because the alternative, the option, is to spend two or more years as a bearded lady. The hairs need to be long enough for the electrologist to see their direction of growth and grasp them for removal.

Another major problem is related to lack of physical preparation for surgery. If you have been a couch potato, hidden away while waiting for you "twelve months" to go by, your body will have a much harder and more painful time healing.

I am amazed by the variety of colors I have seen a post-op body generate; I didn't know it was possible for the human body to turn some of those colors. The levels of pain and discomfort expressed during the first few days after surgery, and the ability to use the dilator over the next few weeks without intense pain are directly related to prior physical conditioning and overall health. The girls who were careful about their diet and exercised regularly over a long period of time prior to surgery had little swelling, no abnormal coloration, and quickly went off pain medication (often in only one day!).

But, probably the biggest horror stories of all are the ones with the most long-term ramifications. And these are from the girls who were not psychologically ready for the lifestyle changes. Being absolutely convinced of the necessity of the surgery is not the same as having prepared to live life as a woman. Hating your body is not the same as proving, at least to yourself, that you can live, work, socialize, and survive in the female role, twenty-four hours per day. Proving to yourself and to the world around you that you can face and accept life's challenges as they come as a woman, and not just survive in a "safe" world of your own creation is critical.

How do you help a new woman whose total real-world cross-living experience is one week in a polyester pantsuit? How do you help anyone who has been acculturated in the male role, willingly or not, to even begin to understand that the culture of women is far more than makeup,

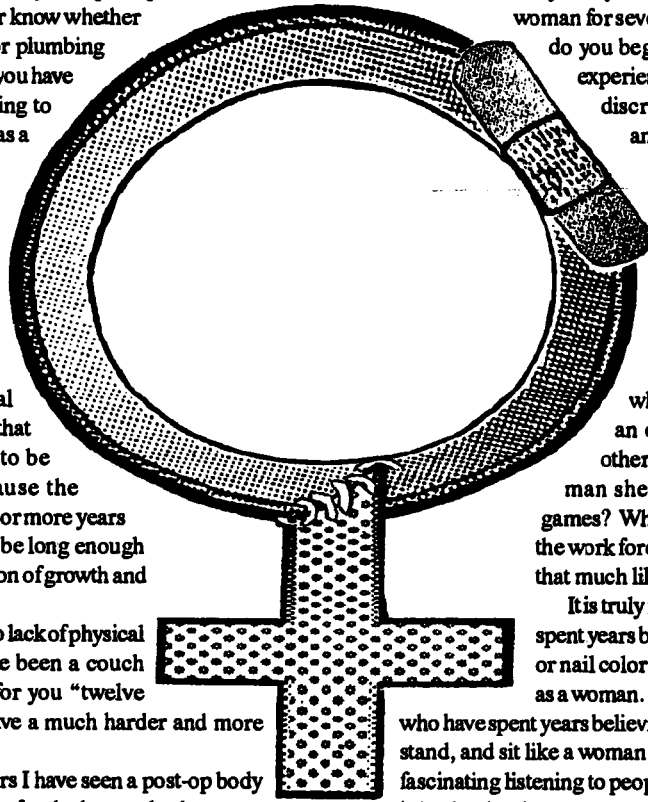
clothing, and body shape? Where do you send people to learn about how and why women treat each other the ways they do? Where can anyone learn about women, beyond the flashy, glittery, sexy, and erotic vision some women generate to attract men? Where will anyone learn about the difference between attractive and credible, desirable and smart, easy and capable? The only way to learn is by doing, by being, by experiencing all of this first hand, all under the guidance of a teacher who knows the difference.


What do you say to someone who has "lived full-time as a woman for several years, except for on the job?" How do you begin to help someone who has no work experience in the female role determine which discrimination problems and which hiring and work problems are related to being a real woman and which are related to have been read/made/known as a transsexual?

Where do you even begin to try to help a new woman who thinks fixing cars for people in the neighborhood is a "safe" career?

How do you approach a new woman who genuinely believes that she will have an extreme competitive advantage over other woman in the workplace because as a man she was able to see and learn the male games? Where do you begin to explain that men in the work force will never tolerate a woman who acts that much like a man?

It is truly fascinating listening to people who have spent years believing that a specific shade of makeup or nail color can make or break their ability to pass as a woman. It is truly fascinating listening to people who have spent years believing that it is absolutely necessary to wear dresses, or at least skirts and blouses, but never sack or jeans, in order to pass as a woman. But, truly the most intensely fascinating aspect is how these people believe that their male-world, male-culture attitude toward life and business will not generate any problem in their ability to pass as a woman! How do you help a new woman who has been half of a gay cross dressing couple, who flipped a coin to determine which one would have the operation with the agreement that the loser would grow a beard and live as the husband?





ELECTROLYSIS
PERMANENT HAIR REMOVAL
(Face & Body)

APPROVED BY AMERICAN MEDICAL ASSOCIATION

HYPERTRICHOLOGIST: KARYNE BRIGHENTI
589-4467
1098 Farmington Ave. (Rt. 6), Bristol
872-1242
435 Hartford Turnpike, Vernon

Where do you begin to help someone who is almost two years post-op, who has returned for labioplasty (the phase two operation that makes the vagina more visually perfect), and who is still afraid to use the women's rest rooms?

How do you help someone whose need to act ladylike overwhelms even their need to express real discomfort and/or pain to the hospital staff? What do you say to someone whose self-image is so poor that they have to show you photographs taken by make-over artists, brought along to Trinidad specifically to "prove" that they really can pass (visually) as women?

What do you say to the girls whose personal paranoia is still so huge that they believe that the people of Trinidad really notice or care what they are doing? Dr. Biber acknowledges at least 2,700 Sex Reassignment Surgeries in addition to his regular practice. But, time after time I hear how everyone in the hospital comes by the room to stare at the "weirdo" and, "Would you please keep the door closed so they won't do that," and, even worse, "They stand outside my window and stare in at me like I was in a zoo, or something." Nobody in Trinidad notices or cares who or what you are, whether you pass or not. It is too common here; the townspeople couldn't care less. If anything, it is the paranoia that makes other uncomfortable, because they can't be sure what it is those girls really are hiding!

How do you help the recent post-op with a routine like dilation? Where do you find the strength to help someone who has led an undisciplined life suddenly stick to a schedule that absolutely mandates an intensely painful dilation (a process that has been described as self-impaling) every four hours, a process that may take an hour or more each time.

And the hardest of all, what do you say to someone who is finally ready to acknowledge, eight or ten days after surgery, that having indoor plumbing will not change how others relate to them; that they still have to resolve the rejection of family members and maybe even co-workers? How do you comfort the new woman who received no flowers or cards, no phone calls, no outside support other than possibly a visit from someone from the GIC?

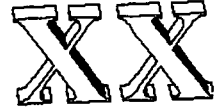
If the new woman didn't care enough about herself to get into shape physically and emotionally before surgery, what will it take to get her to care enough afterwards? If she didn't care enough about her future to take care of her life and her lifestyle before Sex Reassignment Surgery, how will that event change anything?

The questions asked here have to do with one woman's attitude of caring, of reaching out to help other new women with understanding and empathy, support and aid. A man would say he didn't need any help, thanks. A man would say everyone has their own problems, that no one should need to help and care that much for another person, and that no one should expect that much help and care. And that is why the medical community refers to most new women as "Post-op Transsexuals," rather than as "women."

Because, you see, the price to be paid to achieve this dream of all dreams (mother of all dreams??) is like a yard-long ruler, with inch marks as checkpoints. You must pay the full price, sometime, somewhere; you must reach and accomplish each and every check point. You do have the freedom to choose to have your plumbing moved indoors at any point along the ruler, but you will still travel the full distance. And the experiences of the girls who have gone before you proves over and over, without exception, that the more of the checkpoints you accomplish before surgery, the easier all the rest of the check points are to reach. It really is a "Pay now or pay later" deal.

Trinidad stands at the beginning of Raton Pass, linking the southern Colorado desert to the New Mexico desert via I-25. Raton Pass begins the only reason-able route through the mountains which separate these deserts. For many transsexuals, Trinidad likewise stands at the beginning of the pass between two lives. Make sure your "vehicle," your life, is prepared for the trip across the desert to the other side, and not just for barely making the trip over the pass!

(reprinted from *The TV-TS Tapestry*, issue 16)



Things To Watch Out For

by Judy Summers

Do yourself a favor and go to your library or newsstand and read the September Issue of *Scientific American*. The entire issue is devoted to the studies and knowledge of the mind and brain, including an excellent article on the issue of sex and the human brain. The article condenses a lot of material from many researchers and is fascinating reading.

Some good news and some bad news. The Discovery Channel and The Learning Channel are broadcasting a three part series called "Brain Sex" which is very good. The bad news is that by the time you read this, the series will be over, but watch for it to be rerun. The good news is that it is available on videotape for \$79.95 by calling (800) 221-5200.

Trinidad continued from page 1

Where To Stay

As part of the information package provided by Dr. Biber you will receive an excellent article written by the Ingersoll Gender Clinic on "The Trinidad Experience". One of the hotels recommended was the Trinidad Motor Inn (719) 846-2271. It's on the opposite side of town from the hospital but it's a delightful place to stay. The Wojoylas operate the inn and serve the most delicious potato pancakes as well as other Polish dishes that I have had in a long time. Watch out for calories. We found the rates very reasonable. They gave us room discounts and were very kind to us during our stay.

Admittance for SRS

On the day before surgery you will go to Dr. Biber's office and have a very pleasant meeting with Marie Pacino who will ask you a series of

Relationship, Stress and Women's Issues

Lois Spivack, Ph.D.
 Psychotherapist and Sex Therapist

470 Ellsworth Avenue
 New Haven, CT 06511
 (203) 776-9708



questions, explain what's going to happen and have you sign a series of releases. You will also make your final payment of \$4,500 to Dr. Biber (a \$500 deposit was required to schedule the surgery). Additional payments for other surgery such as breast implants \$1500, rhinoplasty \$1500 and tracheal shave \$1000 would also be due at this time. All funds must be in the form of a certified check. Most important however, she will ask you to define the name you wish to go by after surgery. A notarized form signed by Dr. Biber will be provided to you at discharge that will enable you to change all your legal records. If you want additional copies you should request them at this time.

You will then meet Dr. Biber. You will find him warm and very down to earth. He will conduct both an interview and examination as a final determination for your surgical eligibility. The questions are frank and to the point, but are designed to give him that final level of comfort that you have fully considered what you are about to do. I was allowed to be with Joanna during this session and found the man to be very sincere and proud of the help he has been able to provide for thousands of TS's throughout the world.

Mt. San Rafael

That afternoon (by 3pm) you will check into the hospital. Your first stop is admissions where you prepay your hospital bill of \$5,925 which includes the anesthesiologist and covers your 8 day stay. The additional surgical procedures are an additional \$200 for the anesthesiologist. On check out day you will need approximately \$50.00 to cover the cost of prescriptions. Relax, the people are very friendly and over the next twelve hours a host of nurses, nurse assistants, orderlies, and of course Sister Roberta Marie, will stop by to see how you're doing. During the next eight days they will become your friends. Do not be afraid to ask questions. They will do everything they can to make your stay comfortable. This includes special requests from the kitchen. Joanna realized this too late. During the early evening you will see several videos (one is on the surgery), eat your last supper sitting up in a chair (for a while) and go through the shaving and bathing ritual. Enjoy that shower-it will be six days before you can do it again. You have a phone in the room, local calls are free and long distance is accessed through the use of calling cards. Normally you will have a post surgical in the room with you to help with preoperative jitters. Dr. Biber has two rooms set aside for SRS candidates.

Surgery

Seven o'clock found Joanna prepped and ready for surgery. Sue and I were able to see her and actually walked to surgery with her. The surgery went very smoothly and was over at 10 o'clock. Both Dr. Biber and his surgical nurse Joe Van Loon kept us informed of her progress and both were very pleased with the operation's results. Both Sue and I were very impressed with the entire operating team. They all made it a point to check in on Joanna during the next eight days but Dr. Biber, Joe Van Loon and Dorothy Goding CRNA (the anesthesiologist) went out of their way to check on her throughout her stay. By eleven o'clock she was back in her room and she had some lunch at noon. We had a small celebration to welcome Joanna (a total female) to the rest of her life.

The afternoon is spent dozing and being prodded for medical information by the nursing staff. Dr. Biber's practice is not to give you blood during the operation unless absolutely needed. You will be about a pint down and it requires you to drink a lot of fluids to get it back up during the next eight hours. Your temperature and blood pressure will

remain low until you do.

The next day saw more discomfort. Joanna found that the dosage of pain medication could be increased by asking; however the staff seemed reluctant to willingly give you more than you need, so ask! By the third day the pain seemed to start to subside; however Joanna had some severe gas pains that built in intensity over the next few days.

Depression

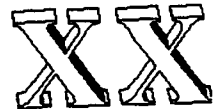
Over the last six months I have had the opportunity to speak to a number of post operative TS's. Many sail through the process like it was a party. Others can experience serious periods of remorse for what they have done. In speaking with the staff at Mt. San Rafael I found out that it is quite common and they are on the lookout for it. It doesn't last long but post SRS recovery is a very important time to feel good about yourself. Try and make yourself up and keep happy pictures and or reminders around you. Looking at reminders of your past (your X or your children) hour after hour may not be the best idea.

He takes a Tummy Tuck???

Six days after surgery the doctor removes a wire that is used to hold the organs in place and to provide a tighter tummy. There is no pain involved when this is removed. The seventh day finds you up and walking. Dr. Biber requires that you stay in bed for six days including the day of surgery. He has restructured (moved the heck out of) a number of your organs and has re-worked your body and wired things to keep everything in place, (it tightens the tummy for a more feminine look). This procedure seems to be unique to him but it works well. Joanna is very pleased with the results. The seventh day found Joanna walking all around the hospital. We had a pizza party that evening. On the eighth day the packing is removed and you learn about your new life long friend. Welcome to the wonderful world of dilation. It will be with you the rest of your life.

We spent the last night at Colorado Springs having a lovely dinner in a focal restaurant. The flight home was uneventful. However, keeping to a four or five times a day dilation schedule is difficult during the flight. The doctor stressed that this would not be a problem if kept to a minimum. Dilation is a fact of life for post SRS. This schedule should be maintained for the first six months to achieve maximum success. After the surgery your depth and elasticity are based solely on how well you do your job. No surgeon, no matter how good, can help you; at this point it's all up to you.

Dr. Biber, his staff and all the people at Mt. San Rafael do a wonderful job. His work is excellent and he deserves all the recognition he has gotten. This Jackie can't wait for her turn in a little town called Trinidad.



SAFE, PERMANENT HAIR REMOVAL

Karen A. Martin, R.E.

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Vatican urges battle against gay-rights legislation

Associated Press

NEW YORK — The Vatican is urging U.S. Catholic leaders to fight legislation that would make it illegal to discriminate against homosexuals in adoption proceedings or in hiring coaches, teachers, or military personnel.

In a letter to the nation's bishops, the Congregation for the Doctrine of the Faith reaffirmed that homosexuality is an objective disorder. It said discrimination on the basis of sexual orientation is an issue of protecting the common good, in a letter sent two weeks ago to leaders of the 55 million-member U.S. Church.

Gay activists expressed anger at the document, which the Vatican said the bishops should consider in responding to legislative proposals for homosexual-rights laws.

"The fact that a church with a history of social responsibility would use gay and lesbian people as the point where civil rights end is an outrage,"

said Peri Jude Radecic, deputy director of the National Gay and Lesbian Task Force in Washington.

The Vatican congregation, which had issued guidelines in 1986 on the pastoral care of homosexuals, said its recent recommendations were prompted by a flurry of proposed homosexual-rights laws in the United States.

In several cities and states, debates have been ongoing over how far to extend homosexual rights. Ballot measures are pending in several states.

Among other recent examples:

The 1992 Utah Legislature left out crimes against homosexuals from a hate crimes bill after some lawmakers said it legitimized homosexual relationships.

In 1991, California Gov. Pete Wilson vetoed a bill that would have outlawed job discrimination based on sexual orientation.

A Vermont law went into effect July 1 prohibiting discrimination on the basis of sexual orientation in hiring, finances, and housing.

Connecticut approved a homosexual-rights law in 1991.

U.S. Bishops generally have been less stringent in their opposition to homosexuality than the Vatican. In a 1990 document on sexuality, the bishops voted to reduce to a footnote the Vatican's 1986 declaration that homosexuality is an objective disorder and added a line that homosexual orientation is not sinful.

Polls also suggest a divided attitude in Catholic Church pews. In a recent Gallup poll, 48 percent rejected homosexual relationships as morally unacceptable and 46 percent found them acceptable.

Reprinted from the Hartford Courant, July 18, 1992

Study of brain links biology to sexuality

Combined Wire Services

WASHINGTON — Researchers have found a new anatomical difference in the brain structure of homosexual men and heterosexual men, a discovery that supports a theory that sexual orientation may be set by nature.

Studying brains obtained from autopsies, researchers at the University of California in Los Angeles have found that an important structure connecting the left and right sides of the brain, already known to be larger in women than in men, is larger still in homosexual men.

Combined with an earlier study at the Salk Institute for Biological Sciences, which found that another area of the brain was smaller in gay

men, the findings reported today in the Proceedings of the National Academy of Sciences suggests that homosexuality is not linked to any throughout the entire brain.

"This is very significant because here we have a part of the brain that has nothing to do with sex," said Salk neuroscientist Simon LeVay, who last year reported the first differences in the brains of homosexual men.

"Something unusual is clearly happening when the brain is organizing itself in fetal life," LeVay said. "This strongly supports the idea that there is a biological basis for the determination of sexual orientation. It's one more nail in the

coffin," he said, of critics who argue that homosexuality is a lifestyle choice and thus against nature.

It also further discredits the idea that that parental influence turns children toward homosexuality.

"This study supports our belief that nature created us just the way we are and that there is no reason to fix anything because nothing is broken," added Robert Bray, spokesman for the Gay and Lesbian Task Force in Washington. "It supports our our assertion that we are born this way."

Reprinted from the Hartford Courant, August 1, 1992

From The Canadian Cross-dresser, Vol 2, #6, Issue #18

Big Mistake... Joanne L. recently took a short holiday to the states and crossed at the Thousand Islands bridge. Joanne wore men's clothes and told the US Customs agents she was attending a

crossdressing convention in the Poconos. She had her driver's licence and car keys taken and the agents searched her car. After forty minutes, Joanne was taken to an office and questioned at length about why there were only female clothes in the car.

Also taken from Joanne was the phone number for the Rochester New York CD Network. After an hour, Joanne was allowed in

the US, and several days later, Joanne returned to Canada at Cornwall and was allowed back into Canada without a blink of Canada Custom's eyes.

Did the US Customs agents call the CD Hotline? Are there any crossdressers among US Customs people? Probably. -

From Notes From The Underground (Gender Mosaic, Ottawa).

From The Canadian

Crossdresser, Vol 2, #5,

Issue #17

Reason #19 for not going public...37 year old transsexual Sarah Carol is leaving Windsor, Ontario after receiving death threats and nation wide attention from her recent election as director of the Reform Party's Windsor West Riding Association.

"I can't believe the attention I've received," she said. "It's not safe for me to even walk down the street. If this story ran in Vancouver, no one would think twice about it. People out East are more close minded about things like this."

Sarah had a sex change operation fourteen years ago and recently went public to promote transsexual education in the Reform Party. She's

been ostracized by everyone including her family. She plans to return to B.C. and have her surgery completed. Hint: Don't give out your new address or phone number, Sarah.

Hire the transsexually disabled, they're fun to watch while they change...

Tallahassee, Florida - The Florida Commission on Human Rights has ruled that a male jail guard who was fired for dressing like a woman was the target of discrimination, based on the disability of transsexualism. It's being called the first ruling of it's kind in the US. The board ruled 8 - 1 that Belinda Smith, formerly Lt. William Smith, was the victim of discrimination and should not have been fired by the Jacksonville Sheriff's office back in 1985.

"Transsexualism is a recognized disorder, and, in my opinion, we have to find it's a

handicap," said Judith Kavanaugh, one of the commissioners. "Under the handicap law, this the first case of it's kind," remarked attorney Sam Jacobsen who represented Smith on behalf of the American Civil Liberties Union. "I think it's a case that will make the world more comfortable for people with this trait."

The 43 year old Smith was a fourteen year veteran of the department and was fired after being seen off the job wearing women's clothing and outlining plans for a sex change operation. Smith was required to dress and live as a woman for two years before the planned surgery.

Attorneys for the Sheriff's department argued that officers are subject to close public scrutiny and society would not tolerate a male jail guard dressing as a female.

Two questions remain; whether Smith can return to her old job, and whether she's entitled to \$135,000 in back pay. -

From the Arizona Republic.

EVEN IF BOTH SPEAK ENGLISH, MEN AND WOMEN TALK A DIFFERENT LANGUAGE

By Susan Barbieri

"Not knowing how to communicate with the opposite sex is so serious an issue that it an cost you your livelihood, as well as you personal happiness."

So says Lillian Glass, communication consultant and author of "He Says, She Says: Closing The Communication Gap Between The Sexes" (Putnam, \$19.95). Glass' starstudded book — Dustin Hoffman, Charles and Di make cameos — offer tips on bridging the "great gender divide."

Picking up where linguist Deborah Tannen left off in the 1990 best-seller "You Just Don't Understand," Glass pored through studies to find "Sex Talk Differences" that affect how we are perceived:

Women tend to bow their heads down uncertainly while speaking, whereas men tend to tilt their heads at an angle when listening and speaking.

Men and women have different body language. Men have more inattentive, sloppy body language than women. (This reminds me of the Tape Playback Feature men have. The TPF kicks in when a woman is talking to a man who is looking elsewhere or appears to be comatose. She says, "You're not listening!" He repeats back everything she said, verbatim. An amazing skill. How do men to that?)

Men and women gesture differently, which can be misinterpreted. Men tend to gesture away from the body.

Men take up more space and invade personal space more often than women.

"Less aggressive gestures — made toward the body — as well as being more conscious of the amount of space and room the man takes up, may give the woman the impression that he is being more sensitive," Glass says.

Men tend to avoid eye contact more often than women. Men do not provide as much facial response; they smile less and frown and squint when listening.

Men and women accuse and blame differently. Women tend to be more accusatory, yet indirect. They usually will say, "How come you never call me?" while men will say directly, "You didn't call."

Men usually try to figure things out on their own, while women ask for help.

Men express requests with commands ("Get me a beer"), whereas women express requests with endearments ("Honey, would you mind getting me a beer?").

Men and women joke differently. Men's humor tends to be more "crude."

Men tend to disclose less personal information, while women disclose more.

Men tend to engage in more monologue and less dialogue than women. Women tend to have better listening skills and provide greater feedback. "Since men have a tendency to engage in a monologue, it is essential that they attempt to curb this when speaking with women," Glass says. "Getting to know a person is a give-and-take proposition."

Men tend to interrupt more than women, and do not give as much verbal feedback. "Women's number one gripe about speaking with men is men's interruptions," says Glass, citing a Gallup poll.

The TV show "Crossfire" is a prime example of this. The political pundits not only interrupt, they shout down and talk over each other. Instead of meaningful intellectual exchange, it's a verbal wrestling match pitting one boorish bully against another. Not very effective communication.

Before you dismiss Glass' "Sex Talk Differences" as "malebashing," you should know that much of the research she cites was done by men. While not as even-handed as Tannen, Glass picks on women too.

Women have an annoying tendency to "beat around the bush." They need to stop being so tentative and say what they mean.

Continued on next page

Continued from previous page

Glass notes that women tend to fume and hold grudges rather than express themselves in a timely way. Dragging old issues into argument can confuse and annoy partners.

Women who have high-pitched voices are seldom taken seriously, she adds. She offers techniques for lowering pitch.

The book ends on a high note. "The only way you can ever win the battle of the sexes and close the communication gap forever is through awareness, understanding and compromise. Men and women are not adversaries or opponents. We are all on the same team. Men and women harbor the same fears, wants, and needs. We are all afraid of rejection and alienation. We all want to be loved, respected, and admired."

Who could argue with that?
 (reprinted from *The Republican American*, 8/19/92)
 Orlando Sentinel

Treasurer's Report

July/August 1992	
Cash on hand, July 1, 1992	\$1186.63
Donations received	546.11
Interest income	<u>10.60</u>
	\$1743.34

Expenses:

Newsletter:		
publishing	79.02	
Postage	194.26	
Supplies	19.73	
		293.01
Refreshments		36.82
Miscellaneous		
Flowers	31.80	
Purchase of Checks	31.36	
		63.16
Total expenses		392.99

Cash on hand, August 31, 1992 1350.35

CHEF'S CORNER

Deidre E.

As we approach the cold season, it is time to think of "warm" foods. Few things take the chill from winter's attack upon spirit and sinew like soup. Whether complementing other courses, or being the meal's main stay, soups seldom fail to please.

Most of us have experienced the various commercial products. While there are many excellent varieties to choose from, I have often felt a little odd spending long hours preparing salads, desserts and entree only to offer "Campbell's Soup" to my guests. I refrained from serving a soup course for the longest time. This option saved my ego: my guests would enjoy (hopefully) a complete meal, sans soup, that was truly and completely homemade.

Some years ago, another option presented itself. I learned to prepare

soups from scratch. I particularly enjoy creamed soups. They are not difficult to prepare and are a true delight whenever and however served. Here's one of my favorites:

Cream of Celery Soup

- 1 1/2 cups celery 1/3 cup onions
- 1/2 tsp. salt 1 cup water
- 3 tbs. flour 1/8 tsp. white pepper
- 3 cups 2% milk 2 tbs. butter (margarine)

1. Cook celery for about 15 minutes or until tender.
2. Add 2 1/2 cups of milk.
3. Blend 1/2 cup milk with flour, salt and white pepper. Add to celery mixture.
4. Stir continuously until mixture is bubbly.
5. Stir in butter.

Recipe serves about six.

Many variations on this theme are possible. For example, try substituting cauliflower or cauliflower and broccoli. Try mixing in carrots, mushrooms, etc. The only limitation is your imagination!

Soups provide a finishing touch to a formal dinner, or they can be a quick meal that may be prepared ahead of time and refrigerated for later use. The latter is especially helpful for those of us with hectic lifestyles. Finally, though, nothing satisfies quite like homemade soup. Indulge yourself. Bon appetit.



President's Message

One particular characteristic of our community that strikes me again and again is the tremendous diversity of our membership.

This diversity of age, background, experience, interests and viewpoints often leads to discussions and sharings of great richness and color at our meetings. While agreement is forthcoming on many issues, this is NOT necessarily the case, nor SHOULD it be - honest differences make the world go round.

But I am continually impressed by the spirit of sharing, caring, and helpfulness exhibited one for another, even when we don't see eye to eye on all accounts.

It's a joy when advice is sought, given, then taken to heart and applied in a positive manner, but painful when it falls on deaf ears and perceived "mistakes" are continued. Occasionally there arises discontent or impatience with another person's seeming "ignorance" or "stubborn or outrageously misguided" opinions or behavior, misunderstandings which can lead to minor "family quarrels" of one sort or another. These usually patch themselves up, which is good. Sometimes a little more patience with one another couldn't hurt: we're all under a lot of pressure. We all have different agendas, timetables, and areas of greater or lesser importance to our lives.

As we ask acceptance and tolerance of the larger outside world, we also welcome and encourage the practice and growth of these traits among ourselves. Heaven knows we need it; and in the process, we become the better for it. Which, ultimately, is why we're here, isn't it?

RESOURCES

The following organizations are known to the editors to provide valuable support to the gender community. This does not constitute an official endorsement by XX, The XX Club or The GICNE. However, you are encouraged to investigate any and all resources and judge their value to yourself. Updates and additional information are welcome.

REGIONAL RESOURCES

The Connecticut Self-Help Mutual Support Network 389 Whitney Avenue New Haven, CT 06511 Telephone (203) 789-7645 Resource Type: This is non-profit Ct. State organization that has knowledge of over 400 support groups of all types.

Connecticut Outreach Society P.O. Box 163 Farmington, Ct 06034 Meetings: 2ND Sat & 4TH Wed in West Hartford. Resource Type: TV & TS Support & Social Group

Tiffany Club of New England, PO Box 2283, Woburn MA 01888-9483. Resource type: TV & TS Support group.

Crossroads of Buffalo, 2316 Delaware Ave., Suite 102, Buffalo, NY 14216. Resource Type: TV & TS Support Group

Harriet Lane's TV Set P.O. Box 4002 Wallingford, Ct 06492 Meetings: 2ND & 4TH Saturday Evenings 8-12PM. Resource Type: TV & TS Social Group

Renaissance Education Association P.O. Box 552 King of Prussia, PA 19406 Telephone (215) 630-1437. Resource Types: TV & TS Support Group and Newsletter

TGIC - Transgenderists' Independence Club, P. O. Box 13604, Albany, NY 12212-3604 Tel: (518) 436-4513 (Thursday 7-9PM) Resource Type: TV & TS Support & Social Group

Transsexual Support Group formed by The Tiffany Club of New England. Meetings: 1ST and 3RD Sundays at 6 Cushing St in Waltham, MA from 10:00 to Noon. For information Call Vivian Purves (617) 899-2212. Resource Type: TS Support Group

The XX (Twenty) Club, Inc. - That's Us! P. O. Box 387, Hartford, CT 06141-0387. Resource Type: TS Support Group and Newsletter. Affiliated with GICNE.

NATIONAL RESOURCES

GICNE- Gender Identity Clinic of New England. 68 Adelaide Road, Manchester CT 06040 (203) 646-8651. Provides coordinated services for help with attaining SRS through adherence to the Benjamin Standards of Care.

AEGIS - Chrysalis Quarterly P.O. Box 33724 Decatur, GA 30033 Telephone (404) 939-0244 (Evenings & Weekends). Resource Type: Publisher of a superb TS Newsletter

HBIGDA - The Harry Benjamin International Gender Dysphoria Association, Inc. - 1515 El Camino Real, Palo Alto, CA 94306 Tel: (415) 326-4645. Resource Type: The international association of gender professionals. Establishes the Standards of Care, the international guideline for professional treatment of Gender Dysphoria.

IFGE - International Foundation for Gender Education - TV/TS Tapestry Journal, P.O. Box 367 Wayland, MA 01778. Tel: (617) 899-2212 and (617) 894-8340, weekdays 2-10p.m. Resource Type: Provides communications medium, outreach device, and networking facility for entire TV/TS community. Publishes "TV/TS Tapestry".

J2CP Information Services - P. O. Box 184, San Caspirano, CA 92693. Resource Type: TS Information and Referrals.

The Transsexual Voice P.O. Box 16314 Atlanta, GA 30321 Resource Type: Publisher of a TS Newsletter

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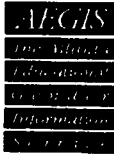
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