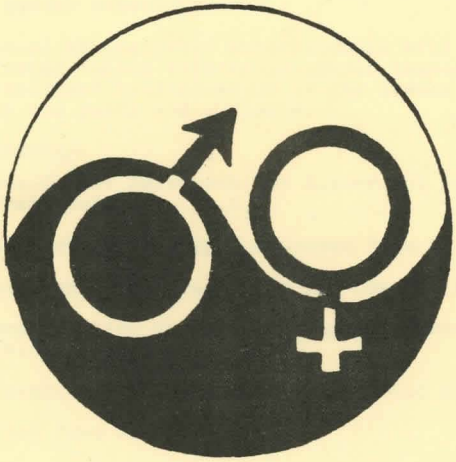
ABSTRACTS

OF

A SYMPOSIUM ON GENDER ISSUES FOR THE '80'S



AN INTEGRAL PROGRAM AT THE JOINT

AASECT-QUAD 'S' MEETING-JUNE 1984

SPONSORED BY THE

HUMAN OUTREACH & ACHIEVEMENT INSTITUTE-BOSTON, MA.

A SYMPOSIUM ON GENDER ISSUES FOR THE '80'S

PURPOSE: To clarify some of the complex issues of gender and provide a broader base for better understanding of gender behaviors

PROGRAM: A panel of qualified professionals will present selected topics related to gender issues. This will be followed by discussion of the issues raised by both the panel and audience.

TOPICS & PRESENTERS:

* Cross Gender Behaviors, An Historical Background by Vern Bullough, Ph.D.
* Bigenderism, Androgyny & Gender Role by Betty Ann Lind, M.A.
* Cross Gender Behaviors and the DSM III by David McWhirter, MD
* Masculine Life Styles & Compensatory Patterns by Virginia Prince, Ph.D.
* Transsexuality & the Gender Dysphoric by Ann Bolin, Ph.D.

DATE: Friday June 8, 1984

TIME: 2:15 - 4:15 PM

PLACE: Park Plaza Hotel, Boston, MA

ORGANIZER/MODERATOR: Ari Kane, M.Ed., Director of the Outreach Institute.

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CROSS GENDER BEHAVIORS, AN HISTORICAL BACKGROUND

by Vern Bullough, Ph.D.

One of the problems with history is that it raises more questions than it can answer. There are large numbers of cross dressers in the past, and it is deeply imbedded in all cultures. Behaviors have ranged from individuals who regularly wore one or two articles of apparel belonging to the opposite sex to those who tried to fully live the role of the opposite sex. In terms of sex preference, we have both homosexual and heterosexual cross dressers, and in terms of labeling, we have a wide range from what might be labeled a transsexual at one end to a fetishist at the other. Most cultures had a specified role for those who cross dressed and expected certain kinds of behavior ranging from the berdache of the plains Indians to the transvestite prostitutes of Japan. This raises the question of how much a particular kind of cross dressing is due to the social milieu in which that behavior is accepted, or in other terms, how much organized groups (including the medical and research community) influence cross gender behavior by excluding or including certain kinds of behavior from their membership. If this is true, there are vast implications for what researchers such as I am say and do, and what organizations such as the Outreach Institute do.

BIGENDERISM, ANDROGYNY & GENDER ROLE

by Betty Ann Lind, M.A.

Classical sources: such as the Bible, Plato's Symposium, and Tao Te Ching; focus upon the necessity for the comprehension of the "one-ness" which exists within each of us in terms of the Andro(male) and the Gyne(female) components of our personality.

For the average person the impact of socialization is directed towards acceptance of the gender role ascribed to that person's biological sex. One of the fundamental keys to this socialization process for the development of gender role is the self denial of any element of one's personality partaking in the opposite gender. A sort of , real men don't eat quiche and real women don't pump gas, delineation of the separate gender roles assigned to each sex.

Certain individuals, for a variety of psycho-social reasons, seek to develop not only the gender role originally assigned to their biological sex; but also develop a gender role assigned to the opposite sex. Such bi-genderal individuals usually maintain a strong separation between each gender in order to function in society either as a man or a woman depending upon a given need to perform in either specific gender.

In essence the keeping in balance of this bigenderal duality (ying & yang) is the fundamental androgyny addressed by the classical sources, not the unisex image presented by some contemporary writers.

GENDER DISORDERS AND DSM III-R

by David P. McWhirter, M.D.

The history of the Diagnostic and Statistical Manual of the American Psychiatric Association is a relatively brief one, spanning just over thirty years, there have been three changes, each reflecting a change in thinking about mental illness and each offering new insights into our understanding of the disorders included.

From the earliest days there was minimal recognition of the classification of gender disorders, in fact the only suggested mention of such, prior to DSM III is found with the diagnosis of "transvestism" in DSM II, published in 1968.

Our knowledge about the entire area of gender disorders was only beginning at the time DSM II was finalized. The early work of Harry Benjamin had brought the term "transsexual" to the attention of the world and the world famous surgery and attendant publicity surrounding the Christine Jorgensen case focused it for those really knowing about it. We then passed through a period when establishing the diagnosis of transsexualism was dependent upon a certain fixed set of diagnostic criteria. Our patients learned what those criteria were and repeated them to us verbatim and by rote. We thought they were all transsexuals with the same developmental histories.

Over time all of that has changed. Although DSM III does contain an entire section of Gender Disorders and it is only a few years old, we are already recognizing the inadequacies

Over time all of that has changed. Although DSM III does contain an entire section of Gender Disorders and it is only a few years old, we are already recognizing the inadequacies of the categories it provides. As our pooled experience and knowledge grows, those of us working with the gender dysphoric person are progressively more aware of the great diversity in backgrounds and social histories and the wide range of differences. This presentation will be about some of the suggested differences that need to be included in the next edition of DSM III-R.

MASCULINE LIFE STYLES AND COMPENSATORY PATTERNS

by Virginia Prince, Ph.D.

In the animal world the function of the female is to become pregnant, give birth, nurse and nurture the infants to a condition of self sufficiency after which she repeats the process. The job of the male animal is to provide the sperm necessary to initiate this process. In the human species since early times males have cared for mother and child through hunting, providing food and protecting against enemies animal and human. This division of labor led to differing lifestyles for males and females which was the beginning of gender differentiation. The males had to learn to be men, that is, they had to BECOME men and females just kept on doing what all females had always done. This process of BECOMING continues in the present day and has become more complicated as society itself has developed.

Girls at puberty, when menses begin and the breasts develop, are told that theyare unmistakably a female. She does not have to do anything to develop this condition and there is nothing she can do to prevent it. She just IS--both a female and a woman.

The process of BECOMING for boys begins when they learn what it means to be a boy from father, brothers, playmates, teachers and others. Through certain interests, behaviors, activities and games, he discovers that some of these are off limits to him because they are areas associated with girls. Thus whatever interests he may have in these areas must be repressed, and he learns to avoid situations or activities that are for girls.

Approaching adulthood, most boys come to understand from many different sources, that his culture expects a lot of him. He must be strong and physically able to defend himself. He must be capable of dealing with problems of various kinds. He must be able to bear grief, hurt, pain, embarassment and fear without showing it through tears or the like.

Men learn what society expects of them--and what they come to expect of themselves. There is always a degree of anxiety in the masculine gender role about not being quite everything he should be and this leads to a variety of behaviours whose purpose is to reduce or remove that anxiety and sense of inadequacy, ineffectiveness, and insufficiency. Many behavior patterns observed among men can, I believe, be seen as reactions of one of five different kinds of solutions to this psychological problem.

The man who is completely satisfied with himself and with his performance both sexually, maritally, socially, psychologically, and economically, is no longer BECOMING, he has achieved the goal of BEING. The number of men really occupying this position is very small. My hypothesis is that all men have this problem and that there are several ways of coping with it. I list five groups of pseudo "solutions" to compensate for the inadequacy of achieving the goal of BEING.

- The Over Compensation Group
- The Silent Majority or Muddling Through Group
- The Avoidance Syndrome Group
- The Admission and Punishment or Reverse Compensation Group
- The Physical Punishment Group

Each of these groups will be described and their particular characteristics elaborated upon. This hypothesis will hopefully show that women just ARE, and that men are always BECOMING.

TRANSSEXUALS AND THE GENDER DYSPHORIC: RITES OF PASSAGE

by Anne Bolin, Ph.D.

In the course of two years of participant-observation with a group of sixteen male-to-female transsexuals, it became apparent that one of anthropology's better analytical tools was applicable in understanding the gender transformation of transsexuals. This tool is the tripartite model of rites of passage. Rites of passage facilitate and ease individuals into new statuses wherever they are found. It is not, therefore, unexpected that a group of transsexuals associated through a self-help organization should develop and in some ways formalize their own rite of passage into womanhood. Like rites of passage elsewhere, this group of transsexuals' transgender journey had three stages: separation, transition or liminality and incorporation. These stages dramatized and punctuated the status passenger's progress into the new gender. The transgender rite of passage was rich and thick with the death of a man and the birth of a woman. It is suggested here that ethnostrategies such as a transsexually derived model for how men become women can be valuable therapeutically. Through rites of passage the individual is prepared for the new gender and a new socio-cultural world through a process that is gradual and validating.

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