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FROM THE EDITOR
MALE, FEMALE, AND IN BETWEEN

Mac Edwards

This SIECUS Report on “The Construction of Gender” has been one of the most challenging—as well as one of the most satisfying—in my four years as editor. I have learned a lot about gender, and I think you will, too.

As we began thinking about the focus of this SIECUS Report, we found that our conversations quickly moved from thoughts about the difference between “masculine and feminine” and “male and female” to more complex discussions of the transgender movement. Issues surrounding the development of gender identity are always complex, sometimes perplexing, and definitely challenging to most people’s understanding of two sexes and two genders.

THOUGHTFUL ARTICLES

Since those early discussions, we contacted some of the best people working in the field of gender identity and have subsequently received some truly impressive and thoughtful articles. The authors raise important questions. And, not surprisingly, they don’t all agree with each other. We are publishing their views to encourage you to think through these issues.

First, Dr. Walter Bockting, who is coordinator of the Program in Human Sexuality Transgender Services at the University of Minnesota, writes in “From Construction to Context: Gender Through the Eyes of the Transgendered” that it is by “thoughtful examination of the transgender experience, in all of its unique forms of expression, that we can acquire a deeper understanding of gender in the context of sexual identity—and more fully appreciate our potential as human beings.”

His article describes the ways in which transgender identities challenge conventional notions about both gender and sexual identity. He concludes by discussing implications for social change.

Next, Dallas Denny, who is the founder of the American Educational Gender Information Service, Inc., as well as the author of a number of books on gender dysphoria and gender identity, writes in “Transgender in the United States: A Brief Discussion” that “the American society itself can be viewed as somewhat transgendered because for the past several hundred years it has been steadily relaxing strict male/female gender norms.”

Her article concludes with an important message to counselors to help transgender or transsexual patients explore their feelings as well as the many options available to them for self-expression. She points out that providers can also help educate family members, life partners, and employers.

Third, Lisa Mauer, a consultant and trainer from Ithaca, NY, writes an article titled “Transgressing Sex and Gender: Deconstruction Zone Ahead?” in which she says that even though sex and gender are conventionally understood as bounded by polar opposites with no possible middle ground, mounting evidence suggests that society’s orderly classification systems do not adequately address or describe the diversity of experiences of individual sex and gender in our culture.

She, too, urges sexuality educators and others in the field to learn about the subject of gender and to open themselves to exploring related issues.

Finally, we are reprinting an article titled “Hoowahyoo? A Question of Identity” by Kate Bornstein, the performance artist and author of My Gender Workbook: How to Become a Real Man, a Real Woman, the Real You, or Something Else Entirely.

In the article, Kate poignantly talks about taking inventory of her gender identities. She concludes with a conversation she had as her mother lay dying in a hospital. “Who are you?” her mother anxiously asked. “I told her the truth,” Kate said. “I was her baby, I always would be. I told her I was her little boy, and the daughter she never had. I told her I loved her.” “Ha!” her mother exclaimed. “That’s good. I didn’t want to lose any of you, ever.”

RESOURCES

This SIECUS Report also includes some important resources for people who want to know more about gender identity.

The question-and-answer article “What’s Up with That? Talking About Transgender” is excerpted from a pamphlet published by Planned Parenthood of Tompkins County, NY. They have agreed to provide SIECUS Report readers with a complimentary copy. Contact information is at the conclusion of the article.

We have also compiled a list of “Information Sources on Gender Issues” that includes publications as well as contact information on many organizations and Web sites.

CONCLUSION

As I worked on this SIECUS Report, I became increasingly aware of the way that so many people—particularly young people—are blending masculine and feminine: in the way that they dress (earrings, cologne, and hair), in the way that they interact with friends (by displaying affection and feelings), and in the way that they work (with more regard for the person than for the gender).

I hope to take the experience of working on this issue with me forever—and to equally embrace and respect the parts of myself that are masculine, the parts that are feminine, and the parts that are somewhere in between. The parts that are all uniquely me.
Gender is one of the privileges of being human… As transsexual people, we’re able to discover all kinds of things about life that other people don’t discover because they’re not challenged to discover them. We get to give a lot of gifts to other people, such as the gift of saying what the distinctions are between gender identity, anatomical sex, sexual behavior, and sexual preference, all of which are based on different things that people confuse together. Transsexuals are in a great position to be able to see what the differences are. On a deeper level, we can provide the gift of being an example of people who have not fallen into shame or doubt or fear, but who have followed through on their desires. That’s a great gift to give to other people.

Most of us take sex and gender for granted: We are either male or female, are raised as such, and—although we might challenge certain role expectations associated with the male or female sex—we do not question our basic maleness or femaleness which seems to be a natural fact of life.

When we listen to the experience of transgender persons, however, a different picture emerges. Transgender people are a diverse group of individuals who cross or transcend culturally defined categories of gender. They include male-to-female and female-to-male transexuals (those who desire or have had hormone therapy or sex reassignment surgery), crossdressers or transvestites (those who desire to wear clothing associated with another sex), transgenderists (those who live in the gender role associated with another sex without desiring sex reassignment), bigender persons (those who identify as both man and woman), drag queens and kings (usually gay men and lesbian women who “do drag” and dress up in, respectively, women’s and men’s clothes), and female and male impersonators (males who impersonate women and females who impersonate men, usually for entertainment). Within today’s transgender coming out and liberation movement, even more alternative identities have emerged, such as gender blender, gender bender, gender outlaw, and genderfree.

How can we make sense out of this great diversity of identities? And what can we learn from the unique experience of transgender persons? First and foremost, we can come to realize that gender is far more complex and diverse than many of us think. Gender identity is one of four distinct components of sexual identity, along with natal sex, social sex role, and sexual orientation. These four components can be combined in a multitude of ways, creating a spectrum of sexual identities and a myriad of associated expressions.

It is by thoughtful examination of the transgender experience, in all of its unique forms of expression, that we can acquire a deeper understanding of gender in the context of sexual identity—and more fully appreciate our potential as human beings. This article begins that process of examination by first outlining a multicomponent model of sexual identity and then describing six of the ways in which transgender identities challenge conventional notions about gender and sexual identity. To conclude, implications for social change are discussed.

**COMPONENTS OF SEXUAL IDENTITY**

Components of Sexual Identity is a descriptive model originally developed by Michael Shively and John DeCecco and adapted by Eli Coleman and Walter Bockting and Eli Coleman. This descriptive model illuminates sexual identity by distinguishing among four of its components: natal sex, gender identity, social sex role, and sexual orientation.

**Natal sex** refers to one’s sex as it appears at birth. Usually, natal sex is determined as male or female by the external genitalia. If these genitalia are ambiguous, natal sex may be both male and female, a form of intersex, or another sex in its own right.

**Gender identity** refers to one’s basic conviction of being a man, a woman, or another gender such as transgender. People vary in the intensity of their gender identification and in the permanence and completeness of this feeling. One’s feelings of being a man and/or woman may fluctuate, both of these identities may coexist, or one can feel neither man nor woman. For many of us, it is difficult to recognize our gender identity as separate from our natal sex because the two are congruent. Transsexuals, however, experience a profound discrepancy between gender identity and natal sex.

**Gender role** refers to one’s outward gender presentation, whereas **social sex role** refers to culturally defined masculine or
feminine characteristics (personality, appearance, behavior) commonly known as sex role stereotypes. A person’s overall social sex role can be masculine and/or feminine to varying degrees, and can manifest itself as masculine in one context and feminine in another. Persons who are equally masculine and feminine are referred to as androgynous; those who are neither masculine nor feminine are referred to as neutral or indifferent.

Finally, sexual orientation refers to sexual attraction to others (to men, women, and/or transgender persons). At least three aspects of sexual orientation can be distinguished: behavior, fantasies, and emotional attachments. These aspects are not necessarily congruent. For example, one can be sexual with women only, fantasize about both women and men, and experience emotional attachment to a transgender person.

LESSONS FROM THE TRANSGENDERED

The identities of transgender persons are illustrative of the unique ways in which the four components of sexual identity can manifest themselves. As such, they can teach us many lessons about sex, gender, social sex role, and sexual orientation, six of which are presented here.

Transgender identities transcend binary conceptualizations of sex and gender. While some transgender persons attempt to conform to conventional gender roles, others define and affirm their unique transgender identity “from outside the boundaries of gender, beyond the constructed oppositional nodes” of male versus female.11 A generation of postoperative transsexuals coming of age recognized that their transgender identity continues beyond the transition phase. Attempts to “pass” as a nontransgender member of the other sex often failed, becoming a source of shame and leading to isolation. More important, such attempts are principally inconsistent with the goal of self-actualization: to be true to oneself and to take responsibility for that truth in relationships with others. Authenticity requires a deeper level of acceptance of one’s transgender identity and experience, and an integration of one’s maleness and femaleness, manhood and womanhood, masculinity and femininity, into one’s self-concept. As Susan Kimberly, deputy mayor of the City of St. Paul who went through sex reassignment from male to female, explains:

I can make a pretty solid case that I am a woman. However, over time, I have noticed that I differ—in some fairly significant ways—from most of the other women I know. I have never had a menstrual cycle. I have never experienced the discovery that I am pregnant—nor the fear that I might be. I have become a very feminine person, but I still speak a decidedly masculine language…. I lived for some 40 years as a man and, if for no other reason, I will never really know what it is like to be a woman.

So although it causes considerable consternation among some of my transexual brothers and sisters, I no longer consider myself a woman. Don’t take me wrong, however. I’m not a man either, nor am I apologizing for my life, the choices I’ve made or their outcome. I’m as proud a transexual as you’ll ever meet.12

Genitals no longer define gender. In 1987–88, Virginia Prince coined the term “transgenderist” to refer to those who live fulltime as women without undergoing sex reassignment surgery: “There had to be some name for people like myself who trans the gender barrier—meaning somebody who lives fulltime in the gender role opposite to their anatomy. I have not transed the sex barrier.” Indeed, Prince is not alone. A growing number of transsexual women (male-to-female transsexuals or MTFs) have breasts and a penis, and transsexual men (female-to-male transsexuals or FTMs) maintain their vagina. Some do not desire genital reconstructive surgery, others lack the financial means to pay for it, and some—in particular FTM transsexuals—forego genital surgery because of the less than ideal surgical outcome.

Moreover, as greater numbers of transgender persons come out and affirm their unique identity and the visibility of the transgender community grows, more individuals are recognizing that they can live as transgender men or women without altering their genitals. The motivation to undergo genital reconstructive surgery is no longer limited to “sex reassignment” to confirm gender identity. Rather, other factors such as personal preference for a particular genital type (vagina, penis, or phalloclit, for example) and the impact of surgery on genital and sexual functioning are given due consideration in the decision process.

Transgender identities are not always static but may fluctuate. Transgender persons may change their identification and the labels they use to describe themselves over time and depending on the situation in which they find themselves. Many MTF transsexuals at some point in their lives have identified as crossdressers or drag queens,14 and many FTM transsexuals once identified as lesbian.15 Some transgender sex workers may identify as a queen with one paying partner, as a woman with another, and as a gay man with their nonpaying lover.16

Judith Verkerke, a Dutch transgender person, describes her fluctuating identity as follows: “I developed from being unclear about my gender to apparently a boy, to gay man, feminine gay man, to transvestite, and finally transsexual…. During my transition I became lesbian. After a feminine period, I am now a masculine woman…. I experience my gender as flexible…. I sometimes feel a gay man, sometimes a hetero-man, a hetero-woman, a femme, a butch, to name a few.”17
Cross-social sex role (femininity in males, masculinity in females) should not be viewed automatically as an indicator of crossgender identity. A natal male, for example, can be quite feminine in his social sex role, while his gender identity is unequivocally that of a man. Similarly, a boy’s preference for traditionally feminine childhood play behavior does not necessarily denote development of a female gender identity.

Alternatively, a transgender person whose natal sex is male and whose gender identity is that of a woman might have a predominantly masculine social sex role. In short, cross-social sex role does not predict or invalidate gender identity. Rather, gender identity and social sex role are best considered separately. A FTM transexual who appeared extremely androgynous described his identity to me as follows: “I’d rather live as a feminine man than as a masculine woman.” Many transgender persons go through an initial period of emphasizing cross-social sex role behavior to affirm their crossgender feelings (usually preceded by a period of suppression). Later in their development, femininity among FTMs and masculinity among MTFs is reclaimed and integrated into their identities.

Gender identity, social sex role, and sexual orientation are not as tightly linked as previously assumed. Despite clinical experience and research indicating that the four components of sexual identity are best considered separately, many theories assume that gender identity, social sex role, and sexual orientation are tightly linked. For example, gender transposition theories have linked same-sex sexual orientation (homosexuality) with a certain degree of cross-social sex role (e.g., feminine mannerisms in a male) and crossgender identity (e.g., a masculinized or defeminized brain in a female). Simply put, the assumption is that for a male to be attracted to another male, he must be somewhat like a female; and for a female to be attracted to another female, she must be somewhat like a male.

In these theories, homosexuality and transexuality differ only quantitatively (in the degree of gender transposition), not qualitatively. This assumption is phenomenologically challenged by sex reassigned FTM transexuals attracted to men, and the considerable incidence of MTF transexuals sexually attracted to women. Gender transposition is supposed to lead to the development of homosexuality (based on natal sex), yet, in these cases crossgender identity and transposition led to heterosexual behavior (based on natal sex). Gender transposition theories are further challenged by psychological research comparing heterosexual and homosexual transexuals and nontranssexuals that demonstrates the independence of homosexuality and transsexuality.

Sexual relationships of transgender persons broaden our understanding of sexual orientation. Transgender persons may be attracted to men, women, or other transgenders and may sexually interact with homosexual, bisexual, and heterosexually identified others. Their sexual interactions do not always conform to a conventional heterosexual or homosexual pattern, but rather include exploration and discovery of unique gender-creative roles and sexual scripts.

Some MTF transgenders who have not had surgery penetrate their heterosexually identified male partners anally; some MTF transgenders penetrate their lesbian female partners vaginally; and some FTM transexuals identifying as gay have vaginal intercourse with their gay male partners.

So we learn that we cannot predict behavior from identity, which has implications for social expectations and for public health. For example, epidemiological categories of HIV risk are based on oversimplified notions of sex, gender, and sexual orientation; in HIV prevention and research, the realities of transgender persons and those with whom they interact sexually are therefore not accounted for.

IMPLICATIONS FOR SOCIAL CHANGE
These and other lessons from the transgendered are at the center of today’s gender revolution. The transgender movement challenges the prevailing binary conceptualization of gender and its pervasive role in dividing the sexes, and has begun to question specification of sex at birth and the routine collection of sex information by governments and other institutions.

Martine Rothblatt likens specification of sex at birth to specification of race, and argues that this practice and its consequences constitute apartheid of sex. Judge Frans van der Reijt of the Netherlands traces the history of sex specification at birth to Napoleon’s need for soldiers to fight his wars, and argues that since the draft has been abolished, there is no longer a need for it. He advocates the elimination of sex specification at birth in Europe, recognizing that it forms a barrier for further equality in human rights.

An understanding of transgender experiences also has the potential to raise the level of the gay and lesbian rights movement. The debate on gay marriage, for example, is impacted by the questioning of sex specification at birth. If sex is no longer specified, marriage could be defined as a commitment between any two individuals, regardless of their sex, gender, or sexual orientation. In the meantime, marriage diversity already exists among transgenders, some of whom stay married after coming out and/or sex reassignment, whereas others get legally married while both partners live in the female or male gender role. Across the
United States, we see coalitions between gay, lesbian, bisexual, and transgender communities recognizing their common goals and redefining freedom of sexual and gender expression for all—including for those who identify as straight or heterosexual.

Finally, these insights from the transgender experience can lead the way to greater equity for women (and indeed for any gender). After unsuccessful attempts by feminists to ridicule and scapegoat transexuals,\(^2\)\(^7\)\(\) transgender emancipation and feminism has reexposed gender oppression and invigorated the women’s movement.\(^2\)\(^8\) The transgender movement has the potential to liberate us from the confines of seeing gender as either male or female and thereby transcend the “us versus them” paradigm. Leslie Feinberg poses the alternative of seeing gender as a circle instead of “two poles with a raging void in between. A circle has room on it for each person to explore, and it offers the freedom for people to move on that circle throughout their lives if they choose.”\(^2\)\(^9\)

Does this mean the end of gender as we know it? And would this necessarily be a loss? I find myself drawn to the following statement of Carole (last name withheld by request), with which I’ll conclude:

It remains difficult that others always make an issue out of whether I am a man or a woman. I wish it wouldn’t matter. For me gender does not need to be abolished, because I also enjoy the differences. But the expectations and values attached to sex and gender, those I can do without.\(^3\)\(^0\)

Dr. Walter Bockting is coordinator of the Program in Human Sexuality/Transgender Services, assistant professor in the Medical School’s Department of Family Practice and Community Health, and faculty member of the Center for Advanced Feminist Studies, all at the University of Minnesota.

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The author thanks Anne Marie Weber-Main, Ph.D., for helpful comments on earlier versions of this manuscript. —Editor

REFERENCES


2. Definitive data on the prevalence of transgender identities are lacking. The DSM IV suggests that 1 per 30,000 adult males is MTF transexual and 1 per 100,000 adult females is FTM transexual (American Psychiatric Association, 1994). A higher prevalence of transexualism has been estimated in the Netherlands, at 1 per 11,900 for MTF transexuals and 1 per 30,400 for FTM transexuals (Bakker, Kesteren, Gooren, & Bezemer, 1993). Transexuals are outnumbered by people with other identities under the transgender umbrella.

3. The conventional spelling of this term is “transsexual” with double “s.” This spelling reflects a binary conceptualization of sex and gender. Within this paradigm, transexuals transition from one sex to the “opposite” sex and after a process of detranssexualization are no longer transexual. Consistent with the preference of many transgender community members, I prefer to spell transexual with one “s” to articulate the concept of an ongoing transexual identity beyond the transition phase (Kimberly, 1997; Warren, 1993). Within this new paradigm, transexual coming out is seen as transcending a dichotomous view of gender, acknowledging a spectrum of gender identities.


9. Research on the etiology of (trans)gender identity is inconclusive. Biological (hormonal, genetic, organic) and psychosocial factors (culture, upbringing) most likely interact. The relative contribution of these factors might vary from person to person; clinical experience suggests at least several developmental paths of (trans)gender identity development. What is clear is that—much like sexual orientation—gender is not a choice but rather an identity.


30. T. de Jong, Man of Vrouw, Min of Meer: Gesprekken over een Niet-Gangbare Sekse, p. 36

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**CALL FOR SUBMISSIONS**

The SIECUS Report welcomes articles, reviews, or critical analyses from interested individuals. Upcoming issues of the SIECUS Report will have the following themes:

**“The Millennium: Looking Back, Looking Ahead”**
Deadline for final copy: October 1, 1999

**“Sexual Harassment”**
February/March 2000 issue.
Deadline for final copy: December 1, 1999

**“Sexuality Education Worldwide”**
April/May 2000 issue.
Deadline for final copy: February 1, 2000

**“Sexuality and Pop Culture”**
June/July 2000 issue.
Deadline for final copy: April 1, 2000

**“Sexuality Education in the United States”**
August/September 2000 issue.
Deadline for final copy: June 1, 2000

**“Sexual Abuse”**
October/November 2000 issue.
Deadline for final copy: August 1, 2000
transgender is a term which was created in the 1990s to describe individuals whose appearance, behavior, or self-identification varies from binary gender norms.

In one sense, transgender is a global term that encompasses crossdressers, transsexuals, and transgenderists. However, when taken to mean transgressively gendered, transgender can be seen as encompassing anyone who feels uncomfortable with, dislikes, or resists John Wayne/Marilyn Monroe gender stereotypes.

In this interpretation, gay men, lesbians, and bisexuals are transgendered because they transgress gender norms in regard to sexual orientation, and all women who are less than perfectly feminine and all men who are less than perfectly masculine (i.e., almost all of us) can thus be described as transgendered.

The American society itself can be viewed as somewhat transgendered because for the past several hundred years it has been steadily relaxing strict male/female gender norms. This is perhaps most apparent in the changing sartorial styles and increasing civil equality of women. The casual dress of most contemporary American women would have been considered scandalous 50 years ago and was illegal less than 100 years ago, when women were routinely arrested for appearing in public in trousers. Changing gender norms are also reflected in the American workplace, in which women enter occupations and achieve levels of authority and responsibility once closed to them.

Transgender, then, is not only a new term but also an alternate way of looking at gender. Transgender sensibility blends elements of feminist, gay, and deconstructionist theory to posit that male and female genders are not natural categories but are socially constructed and vary from culture to culture and, over time, within cultures.

Under the medical model which prevailed from the mid-nineteenth century until the rise of this transgender sensibility in the mid-1990s, individuals whose gender presentation varied from binary norms were considered not merely different, but deviant. The transgender model has changed the locus of pathology from the gender-different individual to the society that will not tolerate difference. This shift has forced a reevaluation of traditional clinical categories to which these people have been assigned and cast light upon the often–erroneous and sexist assumptions of clinicians and researchers who have studied these populations.

Transgender sensibility has also enabled transgender and transsexual people to cast aside their shame and forge new and proud identities, and to come together as a community.

TRANSGENDER HISTORY

Transgender history has been largely lost, sometimes deliberately repressed, because of societal sensibilities; sometimes misinterpreted as gay or lesbian or mainstream history; and, more usually, simply ignored.

Historians and anthropologists have begun to explore the fragmented historical record and are finding compelling evidence that the people called transgender today have existed from prehistoric to modern times in hundreds of cultures on six continents. In fact, many societies have had formal and often honored social roles for transgender men and women. Anthropologists have documented such roles in cultures including Polynesia, Siberia, Eastern Europe, and Native North America. Will Roscoe’s *Living the Spirit* contains a six-page listing of North American Native tribes that had well-defined alternate gender roles.

In the West, transgender traditions were systematically eradicated at about the time of the rise of Christianity. Thereafter, transgender people lived largely in secret, but they left legal and other records which have provided hundreds of case histories.

THE MEDICAL MODEL

During the nineteenth and early twentieth centuries, clinicians like Havelock Ellis, Magnus Hirschfeld, Richard von Krafft–Ebing, and Karl Ulrichs, began studying the people that today are called intersexed, gay, and transgendered. They devised categories based on supposed psychopathology which have evolved and differentiated over the years into terms currently in use: transvestite, transsexual, gender dysphoria, transvestic fetishism, and gender identity disorder.

Initially, homosexuality and gender variance were considered to be synonymous; it was not sexual orientation but masculinity in females and femininity in males which was considered the primary defining characteristic of homosexuality. Even after Hirschfeld separated transvestism and homosexuality, homosexuality, homosexuality was still viewed as a psychopathology. It was included in the first edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* of the American Psychiatric Association and remained until
1974 when it was moved to the back of the Second Edition (DSM-II). With the publication of the DSM-III in 1980, homosexuality was removed entirely and has subsequently lost much of its stigma, but transsexualism was included for the first time in DSM-III and both transsexualism and crossdressing remain in DSM-IV under the respective diagnostic categories Transvestic Fetishism (302.3) and Gender Identity Disorder (302.6 for children, 302.85 for adults).

Many mental health professionals continue to view crossdressing and transsexualism as mental disorders and are unaware of, or choose to ignore, the growing body of evidence that suggests otherwise.

Clinical and other terms. Terms like transvestite and transsexual suggest pathology and were imposed upon transgender and transsexual people. Clinical terms tend to constrain and direct the ways in which transgender and transsexual people are discussed and viewed; for instance, transvestite, transsexual, and their analogs Transvestic Fetishism and Gender Identity Disorder are considered “diagnostic categories.” Diagnosis supposes psychopathology. It is difficult to view people as whole and in positive terms when the language used to describe them argues otherwise.

Transgender and transsexual people have begun to experiment with new identities and new names which do not pathologize them. The term transgender has gained consensus, and many people who would once have called themselves transvestites or transsexuals now simply say “I am transgendered.” The term transgender came into widespread use around 1994 and is now the most frequent term used by the gay and mainstream press, most researchers and clinicians, and many transgender and transsexual people. Transgender people do, however, use a variety of terms to refer to themselves, and some still prefer the clinical terms.

CROSSDRESSING
Crossdressing is a time-honored tradition in many societies. In America, it is common in films, on television, on the stage, and in novels. Female impersonation has long been widespread in gay nightclubs, even though it has always had a wide mainstream audience. “Womanless weddings” are still held from time to time in the South, and drag is common at Halloween and other times of celebration.

Crossdressing was long considered an activity practiced exclusively by gay males, but heterosexual males began meeting in private to crossdress in the 1950s and 1960s, often with great fear of exposure. Men are now free to crossdress in public with little fear of arrest or harassment. Social and support groups can be found in many cities, and there is a small but thriving industry of publishers, makeover services, and manufacturers of silicone breast forms as well as women’s shoes and clothing in larger sizes.

In the 1970s, heterosexual crossdressers created a national organization for socialization and support. Tri-Ess, the Society for the Second Self, was formed from two earlier organizations and was styled as a crossdressers’ “sorority.” From its inception, Tri-Ess vigilantly policed its ranks and excluded members who were openly gay, bisexual, or transsexual, or who were suspected of being so. This is an embarrassment today in light of the political gains made by homosexuals. Most transgender community organizations and events are open to anyone, regardless of sexual orientation or gender identity.

Motivations for heterosexual crossdressing. Some heterosexual males find a strong erotic component in crossdressing; indeed, episodic partial crossdressing is common. Some men expand their crossdressing and begin to totally emulate females, depilating their bodies and wearing wigs and makeup. For many such men, the erotic and fetishistic aspects of crossdressing diminish or disappear over time, and their crossdressing is driven by a sense of internal femininity. It is at this time that crossdressing becomes an expression of the “woman within.” This replacement of the erotic by the personal is not well understood by researchers and clinicians, who tend to think of the crossdressing of heterosexual males as exclusively sexual. Some clinicians also believe there is a major difference between crossdressers and transsexuals. I personally feel this is often not the case. I have known hundreds of males who initially considered themselves crossdresses but eventually became gender dysphoric, identified as transsexuals, and pursued sex reassignment.

TRANSSEXUALISM
Technologies perfected in the late twentieth century—specifically surgery to alter genitalia and breasts, the synthesis of human sex hormones, and electrolysis—have made sex reassignment practical. Before the emergence of these technologies, passing as a member of the other gender was exceedingly difficult or impossible for most men, who were betrayed by their secondary sex characteristics. In general, women could pass more easily, which may be one reason why there are more accounts in the literature of passing women (i.e., women who pass as men) than passing men. Another reason given for women passing as men was to escape from social roles which did not allow them to vote, travel, work, or own property. The history of transsexualism. In the early 1950s, a young American named George Jorgensen journeyed to Denmark and underwent hormonal and surgical treatments and returned to the United States as a woman. The publicity upon Christine Jorgensen’s return was enormous. Because of her, the world saw that gender was not necessarily synonymous with biological sex, and that individuals could change their appearance and social role from one gender to
another. Immediately, Jorgensen and her physicians were deluged by men and women desperate for a sex change.27 This created a demand for sex change technologies which eventually led to the creation of a sex-change industry.

Harry Benjamin, a New York endocrinologist, was involved in the early treatment of people eventually known as transsexuals. In 1966, he published The Transsexual Phenomenon in which he defined the syndrome of transsexualism and postulated that sex reassignment was an effective treatment for those who were dysfunctional and unhappy in their gender of birth. His book was the first to popularize the term transsexual.28

The term sex reassignment originated in the laboratories of John Money, who edited Transsexuality and Sex Reassignment with Richard Green in 1969. This text provided a treatment protocol for Benjamin’s transsexual syndrome.29 Money was instrumental in opening the first gender identity clinic in the United States at Johns Hopkins University in Baltimore in 1966.

By the late 1970s, there were more than 50 gender clinics in the United States. In general, they were characterized by a cautious approach to transsexualism which resulted in rejection of most applicants, many for reasons which today appear sexist or otherwise discriminatory.30 For example, applicants were rejected because they did not have the “proper” sexual orientations (i.e., pre-transition heterosexual and, thus, post-transition homosexual), because they would not “pass” as a member of the new gender, because they did not apply for treatment at an early enough age, because they did not appear sufficiently feminine or masculine,31 or because they had already achieved some measure of success in their birth gender.

Most clinics were affiliated with universities and were, thus, centers for research as much as treatment. Most of the scientific articles published about transsexualism in the 1970s originated from these clinics, and were concerned with, not surprisingly, the diagnosis, treatment, and management of transsexual patients. In general, the literature of this period depicts transsexuals as immature, hysterical, or otherwise dysfunctional. This was likely due to the biased selection criteria used by the clinics as opposed to the nature of the transsexuals themselves. Reports also distinguished between primary and secondary transsexualism,32 terms which may ultimately be an artifact of the assumptions and treatment regimens of the time.33 Unfortunately, even as the new millennium begins, some gender programs are still applying unfair and biased selection criteria.34

A significant year for transsexualism. The year 1979 was a watershed year for transsexualism. First, feminist Janice Raymond wrote The Transsexual Empire that attacked transsexualism as a plot by male physicians to render women obsolete. Unfortunately, Raymond also campaigned to deny transsexuals the right to surgical and hormonal treatment.35

Second, Jon Meyer and Donna Reter wrote in Archives of Gender Psychiatry an outcome study which purported to show “no objective advantage” to sex reassignment surgery for male-to-female (MTF) transsexuals. Meyer, who was the director of the Hopkins gender clinic, timed the release of the article when John Money, the clinic’s primary proponent, was out of the country. Meyer popularized his findings through press releases that attracted the attention of every major newspaper and magazine.36

But Meyer’s methodology was sloppy, and his article came under immediate attack.37 Eventually, the study was seen as likely fraudulent and as part of a plot to discredit sex reassignment.38 It did, however, result in the closing of the Hopkins and a number of other gender programs.

Ironically, these closings proved beneficial to transsexuals because sex reassignment technologies were subjected to a market economy and became available to virtually everyone rather than the select few the clinics accepted.

Third, Standards of Care were developed by the Harry Benjamin International Gender Dysphoria Association.39 They drew upon protocols developed at Johns Hopkins, most notably the real-life test, which required an individual to live fulltime as a member of the new gender before becoming eligible for a sex reassignment test. They also called for letters of authorization from counseling professionals before an individual was allowed access to hormones and surgery. These Standards are not codified into law but came into widespread use and are widely used today.

The Standards were updated most recently in 1998,40 which marked the first time they saw significant (and controversial) changes, including new requirements for obtaining hormones and, for the first time, a position on surgery on individuals who are HIV-positive. The Standards are currently undergoing another revision, and will continue to evolve to reflect new ways of thinking.

FTM TRANSSEXUALS

This review would not be complete without discussion of transgender and transsexual men; that is, female crossdressers and transgenderists as well as female-to-male (FTM) transsexuals.41

Initially, FTM transsexuals were considered rarer than MTF transsexuals. The DSM-IV, for example, gives the prevalence of MTF transsexuals at one in 40,000 and FTM transsexuals at one in 100,000.42 Many authorities now consider that there are many more FTM transsexuals than was once believed. It appears it simply took time for the FTM community to establish itself and come forward.43 There are any number of reasons for this. First, females are able to be masculine without attracting undue attention in American culture, so they did not need to apply to gender
programs to dress and behave like nontranssexual men. Second, genital surgery for transsexual men to construct a phallus, although expensive and painful and with often questionable outcomes, has improved over the years, and good quality chest reconstruction surgery has become more available. Third, transgender and transsexual men were simply overshadowed by MTF transsexuals, who were getting more attention from researchers and the media.

The professional literature has only recently begun to recognize the variability of FTM transgender and transsexual persons. Authorities have long stated that female crossdressers do not exist. Some clinicians still deny their existence, regardless of the fact that female crossdressers have been writing about their experiences for many years. This denial seems to stem from two erroneous beliefs: that all male crossdressing is fetishistic in nature and that females do not show such fetishism. When the men's community began to come together in significant numbers, transgender and transsexual men discovered they were a diverse community with many different ways of identifying and expressing themselves. It is now known that there are indeed female crossdressers, and that some receive erotic satisfaction from crossdressing. It is also known that many transsexual men are attracted to other men, and that some were quite feminine when living as females.

SEXUAL ORIENTATION

It is also important to address the issue of the sexual orientation of transgender and transsexual people because the general populace and, unfortunately, many clinicians do not seem to understand that gender expression does not dictate sexual orientation. Transgender and transsexual people show the same range of sexual attractions and orientations as the general populace. Transsexuals are either heterosexual, bisexual, or homosexual before transition. This orientation may or may not change after transition. Many transgender and transsexual people are attracted to other transgender and transsexual people. Unfortunately, the DSM-IV continues to classify transsexual people by their sexual orientation, and clinicians sometimes zero in on sexual orientation when the presenting problem is gender identity.

COUNSELING THE TRANSGENDER CLIENT

Transgender and transsexual individuals often experience confusion and anxiety about their gender identity. In the past, guilt and denial were pervasive. But today many work through their issues without therapy by attending support groups, accessing Internet resources, and talking with individuals who feel positively about being transgender or transsexual. Most, however, seek counseling, either to help them with feelings of guilt and denial, to help with the disruption of their lives caused by the reactions of others, or to seek the requisite letters required for sex reassignment.

The role of therapists is to help the individual explore his or her feelings as well as the options available for self-expression. If the individual seeks sex reassignment, therapists can serve as a resource by locating needed services and making referrals. They can serve as a sounding board for issues that arise during transition. They can help family members and life partners deal with their often tumultuous feelings about the transgender issue. They can serve as educators for employers who wish to learn more about gender identity issues so they can accommodate the individual during transition.

When appropriate, therapists can refer the individual to a gender program; however, despite the existence of several excellent gender programs, most transsexuals prefer an “à la carte” approach to sex reassignment, in which they serve as the case managers to their own transitions: choosing which procedures to have, when they will be performed, and who will perform them.

The social pressures associated with transsexual transition or coming out as a crossdresser are significant and can be overwhelming. Even the most well-adjusted person may decompensate when faced with loss of employment, abandonment by friends and family, or ongoing harassment from neighbors or coworkers. Therapists can help the individual negotiate through a period of upheaval, pointing out constructive ways to deal with problems. It is not uncommon for transgender persons, especially transsexuals, to have histories of abuse which manifest as dissociative disorders or post-traumatic stress disorder. Guilt and shame can be overpowering. And, of course, transgendered and transsexual people are not exempt from psychiatric disorders.

As gender identity issues have come out of the closet and as resources have become widely available on the Internet, young people have begun to come forward in increasing numbers. Organizations designed for young gay men and lesbians are seeing increasing numbers of transgender youth and often are not sure how to serve them. Because runaway youth are at risk for exploitation and abuse, it is especially important that therapists work with families so transgendered young people will remain at home.

The transgender revolution is still in its infancy. It has already begun to change the ways in which Americans think about gender. It is having a profound impact on the ways in which transgender and transsexual people are treated by society and the ways they feel about themselves. Transgender people have begun to push for social change with considerable success. Already more than 20 cities and three of the 50 states have legislated civil rights protections for gender minorities.
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REFERENCES

1. Transgenderists are individuals who identify somewhere between the two traditional genders. Some transgenderists live publicly as members of the other sex, but without the sex reassignment surgery desired by transsexuals. Transgenderists tend to be highly individualistic in the ways they view their gender. Some see themselves as neither man nor woman, others as both man and woman, and some as members of a third or alternate sex.


4. Some transsexuals object to being classified as transgendered. I have therefore used the terms transgendered and transsexual to refer to the constellation of crossdressers, transgenderists, and transsexuels.


6. It is, of course, impossible to determine how someone from another culture or another time would identify when presented with a list of contemporary gender definitions. Perhaps some would call themselves transsexual, some gay, some crossdressers, and some transgenderists. But we cannot be sure of this. We do know, however, that these individuals showed extreme variance in their gender presentations, including the wearing of clothing and the taking on of social roles characteristic of the other sex, and that some males voluntarily had themselves castrated and emasculated.


33. Primary and secondary were diagnostic categories to which MTF transsexuals were commonly assigned. Primary transsexuals were considered to be more “naturally feminine” than secondary transsexuals (R. J. Stoller, “A Contribution to the Study of Gender Identity,” International Journal of Psycho-Analysis, 45, pp. 220–26.) and were noted to present for treatment at an earlier age. They were believed to be better candidates for sex reassignment surgery than secondary transsexuals. (G. R. Brown, “Bioethical Issues in the Management of Gender Dysphoria,” Jefferson Journal of Psychiatry, 6, pp. 23–4.) Secondary transsexuals tended to present later in life, having developed their transsexual identities gradually from earlier identities as heterosexual crossdressers or gay males. (E. Person and L. Ovesey, “The Transsexual Syndrome in Males: I. Primary Transsexualism,” American Journal of Psychotherapy, 28, pp. 4–20.) FTM transsexuals were not divided into “types” because they were believed to have a single manifestation, that of a very masculine woman who was attracted only to males. (L. Lothstein, Female-To-Male Transsexualism: Historical, Clinical and Theoretical Issues (Boston: Routledge & Kegan Paul, 1983). See footnote 33 for discussion of primary and secondary transsexuals.


42. Early researchers described transsexuals in reference to their biological gender rather than the gender of identification. Thus, transsexuals transitioning from male to female were called male transsexuals and their female-born counterparts were called female transsexuals. Today, the terms male-to-female transsexual and female-to-male transsexual are more commonly used in the clinical literature. Many transsexuals prefer the term transsexual men and transsexual women to refer to, respectively, male-to-female and female-to-male transsexuals. Note that in this usage transsexual is an adjective rather than a noun and thus does not tend to objectify the individual.


46. J. Green, “FTM: An Emerging Voice.”


In a town where I once lived, there was a place called Gender Road. Ironically, it was a dead end street. During the last decade sexologists, philosophers, biologists, anthropologists, and many everyday people like myself have come to a startling yet irrefutable realization—gender, as traditionally defined in this society, is also in many respects a “dead end street.”

Concepts of gender and sexuality are quite important in this culture. They are viewed as somewhat interrelated, and often times misunderstood. Confusion in terminology further complicates an already complex subject. The intricate dance to define terms extends even to Webster’s dictionary, which defines gender as “sex,” 1 but posits that sex is “either of the two major forms of individuals that occur in many species that are distinguished respectively as male or female.”2—making no mention of gender as a synonym. Indeed, the words sex and gender have come to possess entirely separate and distinct meanings, although in common usage they are often used interchangeably.

**TRADITIONAL DEFINITIONS: NO PASSING ZONE**

Sex has traditionally been defined in biological terms. Genitalia, chromosomes, reproductive organs, gametes, hormones—all have been used to classify individuals into the two distinct categories of male and female. Society recognizes these two contrasting sexes based upon the appearance of a person’s genitalia. Sex is assigned at birth by inspecting for physical cues. The presence of a penis signifies male; the absence of a penis signifies female. And, not unlike other significant socio-sexual events, this society has rendered the process of sex assignment as the nearly exclusive province of the medical establishment.3 Society places immense significance on the concept of sex. “Is it a boy or a girl?” is an infant’s first introduction to the world. (And, as an expectant coworker recently shared with me, that same question is the most often asked of her and her partner, although the birth of their child is still more than three months away.) Although there may be many other salient pieces of information to gather about the newborn, sex alone has the distinction of consistently ranking first in importance. Health will be assessed, fingers and toes counted, facial features taken in, all after this individual is placed swiftly into its proper category, one of two neat little boxes that will allow society to know how to proceed with its newest member. Gender is traditionally understood as the implicit understanding a society shares—a societal “rule book”—for being masculine or feminine. Gender is who you are and what society expects you to be, based solely upon your sex. Gender learning begins at birth, based upon the ideas, beliefs, and values that those around us attribute to the pronounced physical sex. With the “announcement” (as it is termed in medical vocabulary)4 of a newborn’s sex comes an elaborate set of rules, rituals, and conventions that create and uphold the bipolar gender system.

Sex has to do with body parts, gender with the manner in which a person puts the assignment of male or female into practice within societal limits. Both gender and sex, although rarely commonplace household discussion topics, form the backdrop with which people order their world. Discrepancies related to this collective understanding are not taken lightly. People whose genitals defy easy classification as male or female, or those who do not act in accordance with the gender “rule book,” face stiff penalties. Sex and gender also form the backdrop from which society postulates about a person’s partner choices—those deemed male are expected to be attracted to women, those designated female are expected to be drawn to men. A heterosexual imperative is unspoken yet understood in our culture’s sex and gender scheme.

Although not consciously aware, most people deal with sex and gender distinctions every day. When considering the “sex” category on an application for a driver’s license, individuals are culturally conditioned to select one of two answers. The Department of Motor Vehicles is certainly not expecting an essay answer. I suspect a person’s application would not get very far in that office if an essay were written in the margins. There is no write-in option when the two choices do not suffice, as in the case of individuals with various chromosomal or physiologic differences from the expected norm. One speaker at a recent conference recounted his experiences in attempting to obtain a driver’s license and other documentation that reflected his XXY chromosomal status: the Motor Vehicle Department insisted he have an “M” on his license, while the Passport Office insisted with equal fervor that his passport carry the “F” designation.5 It is difficult for most individuals to unknowingly cross a sex boundary because that border...
exists arbitrarily between options widely believed to be distinct and mutually exclusive.

When a person crosses a gender boundary, either knowingly or unintentionally, the consequences can be swift and uncomfortable: the potential embarrassment of insulting the parents of a child by guessing incorrectly its sex; the uneasiness felt after (based on voice or cadence cues) people refer to the person on the other end of the telephone as “sir” and are then corrected by that person; the confusion (or anger) aroused by someone walking down the street who simply does not fit the customary cultural sex and gender templates.

**CONTEMPORARY CHALLENGES: DETOURS, U-TURNS, AND ROUNDABOUTS**

Having delineated traditional definitions of sex and gender, the next step is to examine contemporary challenges to society’s systems of classifying individuals into male and female, masculine and feminine. Although both sex and gender are conventionally understood as bounded by polar opposites with no possible middle ground, mounting evidence suggests that society’s orderly classification systems may actually be “dead ends” which do not adequately address or describe the diversity of experiences of individual sex and gender in our culture.

**The sex dead end—why male and female are not enough.** Sex is not a simple case of either/or. Approximately 1.7 percent of infants are born with “ambiguous” genitals or other observable disorders of gonadal differentiation, meaning that the usual visual inspection for sex determination yields inconclusive or conflicting results. There is no social etiquette for responding to “It’s a...?” at the birth of a child. The occurrence of genitalia outside of “normal” limits in this society is often grounds for immediate panic—many physicians feel they must act quickly to assign a sex to the infant.

Sex itself is therefore subject to cultural limits as well. A standard set of measurements defining the minimum “acceptable” (culturally allowable) length of an infant penis is utilized in cases of ambiguous genital characteristics, giving the appearance that the process of sex determination is both acutely important and thoroughly objective. Genital anomalies are treated as developmental accidents to be surgically corrected, rather than viewed as evidence that the culture’s classification system is inadequate in addressing the true extent of human biological/sexual diversity. With more than one in a hundred infants whose sex cannot be immediately determined under the current binary system, and more whose assignment may come into question later—such as an XY (chromosomal) baby who has external female genitals and will never fully develop internal female sexual organs—the prevailing method is insufficient. Given that sex is so important and omnipresent in this culture, a system that fails to address all of its members is troubling.

Individuals for whom a sex-assignment (and subsequent medical/surgical intervention) was made at birth or in infancy using these standards are coming forward in growing numbers to speak about their experiences. In addition, roughly four in a hundred individuals may possess some components of both male and female reproductive anatomy, although this actuality frequently remains hidden if internal organs are concerned. In other words, 4 percent of the population does not fit into the existing male/female scheme, but they simply may not know it. Even chromosomes have been shown to not always accurately depict the sex of an individual—the expected XX or XY genotypes need not invariably correspond to the physical appearance of a female or male individual, as in Reifenstien’s syndrome in which an XY infant has a partially developed external organ that appears as a clitoris, but is actually a fully formed penis. Such infants may be assigned and raised as either male or female. Extensive variations in physical anatomy, hormones, and chromosomal combinations indicate that, rather than the two separate, mutually exclusive sexual categories that have been conventionally recognized, sex is actually manifested on a biological continuum. A system that classifies males or females based on an inspection of their genitals does not consider or respect the diversity of the human experience across the spectrum of sex. Classical definitions have, therefore, become a dead end.

**The gender dead end—why masculine and feminine are not enough.** Just as genital sex and chromosomal makeup are not always a simple equation, gender identity does not always go hand-in-hand with a person’s sex assignment at birth. Just as there are clear limitations in the sex typing of newborns, there are similar inconsistencies between an individual’s sex assignment and gender identity.

Even the concept of gender itself has undergone the transformation from a single focus on societal roles based on sex to a broader understanding that gender actually encompasses the interactions of multidimensional forces, both within the individual and across society as a whole.

Gender can no longer be adequately described as merely society’s “rule book” of femininity and masculinity, what it means to be a woman or a man. The groundwork for challenging this system has been laboriously laid out by innumerable individuals and forces, including the women’s, men’s, and gay and lesbian movements. In today’s world, many reject culture’s implicit binary gender primer in favor of more balanced or blended self-definitions. Still others abandon society’s gender limitations altogether, adopting gender self-definitions not bound by two, or even three, gender choices. For example, author Leslie Feinberg has...
created new nongendered pronouns to encapsulate *hir* (and other people’s) gendered experience. Many consider past definitions of gender as mere stepping stones to grasping the true breadth and scope of the human gender mural.14

**COMPONENTS OF GENDER**

Gender is a complex web of many variables. Gender expression, gender identity, gender role, and gender attribution are some of the concepts through which gender is defined and experienced.15 They answer *who, what, which,* and *how.* In combination, they provide the framework of a person’s aggregate gender environment, both internal and external.

**Gender expression.** This is the manner in which people put into practice their ideas about how to outwardly display their internal “sense” of gender. A culture’s existing gender code of acceptable behavior can also influence people to express or suppress their own gender awareness through public expression. Gender expression is a phenomenon relatively easy to observe—clothing, jewelry, fragrances, voice characteristics and language, behavioral attributes, body language, social roles and expectations are some of the ways in which people express gender. Society’s accepted gender roles define the acceptable ranges of gender expression for women and men. Currently, the socially sanctioned extent of male gender expression, although greatly expanded from times past, is still much more restricted than that of women. Gender expression is the *how* of gender: “How do I express my gender?”

**Gender identity.** This is the internal gender sense that people possess. It answers two fundamental questions: “Who am I?” and “To/with what gender do I belong?” Gender expression *springs from* gender identity. In a cultural context, women are expected to answer: “I am a woman. I feel like a woman.” And men are expected to answer: “I am a man. I feel like a man.” Societal gender constraints cause many individuals to answer these questions by choosing within appropriate limits,16 thus reinforcing current cultural gender standards. When presented with only two choices, and when consistently reinforced by all societal forces to choose the “right” one, many people find the mere concept of gender identity puzzling. How could people not feel like the sex to which they are born? These same societal constraints serve also to further exacerbate feelings of unease in those who recognize that their internal gender sense does not correspond to what is expected. These people face many questions: “Do I identify with my genitals?” “Do I identify with my gender peers, my gender opposites, both, or neither?” Gender identity is the *who* of gender: “Who am I?”

**Gender role.** The manner in which people act in order to fit into society’s prescribed parcels of appropriate female and male behavior forms the basis of gender roles. It is the behaving in conformity with the gender expectations described previously. It can also include challenging gender limitations in search of more accurate, appropriate, or equalized roles. The tasks of childrearing, taking out the trash, acting as breadwinner, providing emotional support, and a host of other chores, jobs, and pastimes are examples of gender roles into which individuals fit, or attempt to fit, or take exception to, based on their sex. Gender role is the *what* of gender: “What do I do?”

**Gender attribution.** This is the process (usually unconscious) through which people label the sex and/or gender of others. Although usually unaware of this constant internal procedure of separating people into male and female, it creates and maintains the elaborate sex-based structure with which people relate to others. Since sex is so much a defining feature of American culture, the process of gender attribution is equally important in determining people’s interactions with others. Many clues assist our unconscious and continual pursuit of dividing our world into male and female. Physical signs (hairstyle, clothing, voice characteristics, body size, attributes), behavioral cues (eye contact, physical carriage, manners), textual information (names, documents, relationships), and power dynamics (assertiveness, aggressiveness, communication style) are some of the pieces of evidence people use in attempting to gauge the sex or gender of others, dividing them into the two distinct camps of women and men.17 Only when the clues conflict or do not yield enough information, may people become aware of the process of gender attribution. That reaction of being annoyed or surprised at the inability to characterize a passerby based on sex is the unique feeling of consciously experiencing a gender attribution moment. Those that take this one step further, self-questioning “why am I having this reaction, anyway?” are wrestling with society’s insistence that people inhabit a two-sexed, two-gendered universe. Gender attribution is the *which* of gender: “Which sex/gender is that person?”

**Cultural context.** This context is also significant. Some cultures have very different understandings of gender. The gender terms and questions described above are peculiar to American society. Gender in some cultures is situationally determined, hence an individual cannot be described as being of a static, unchanging gender.18 The presence of a third gender is vital to the everyday workings of some societies.19 For example, over 155 native North American societies recognized individuals that our society would view as gender blended or transposed. These individuals (termed *berdaches* by contemporary anthropologists) were viewed not as aberrations, but as highly valued community members serving important social and spiritual functions.20 Other cultures also actively explore areas of gender ambiguity or cultural gender reassignment. The Takarazuka tradition in Japan,21 and the many roles of transsexuals and crossdressers...
in Central and South American cultures are but two more examples.

Curiously, there is a dramatic increase in societal interest in gender issues. Preoccupation with the many facets of gender is obvious. People need only glance briefly at the media to witness the extent to which popular culture delights in challenging ideas of gender roles and gender identity. Blurring the lines between male and female, masculine and feminine has become big business. From music videos to gender-neutral fragrances, from fashion trends to soft drink ads, it appears that in today’s world gender (not merely sex) sells. On television, Steve Carey, the crossdressing brother in “The Drew Carey Show,” is portrayed as arguably the most “normal” of the entire cast of characters. But cultural backlash against these changes and challenges is also evident. This unease is observed by the note of urgency in a number of books: A Return to Modesty by Wendy Shalit, \(^24\) Men Are from Mars, Women Are from Venus by John Gray, \(^25\) and The Rules (as well as The Rules II) by Ellen Fein and Sherrie Schneider where the authors wistfully look back to a time when male and female roles seemed more traditional. \(^26\)

**TRANSGENDER IDENTITY: MERGE AHEAD**

Strategies embracing gender chic pitch products and performers as society as a whole struggles to grasp a new swell of values, activism, and identity—the transgender movement. For example, androgyny-chic is filling the marketplace not only with unisex clothing for either/or but also—and perhaps most notably—with Calvin Klein’s CKOne fragrance: the exact scent packaged in the exact bottle yet aimed at both male and female consumers. And on television, RuPaul plays with gender as a crossdressing talk show host as the culture watches with fascination.

Transgender has come to mean many things to many people. Most basically, it denotes individuals whose internal gender identity does not match the one society expects of them, given their genital sex. For example, a person labeled “female” at birth may feel that is not an accurate or adequate description of her adult internal sense of gender; a person born “male” may find that gender discordant with his private experience of self-gendering beliefs, thoughts, and ideas. Others may feel that they bridge traditional masculine and feminine divisions, combine them in new ways, or sense a great degree of “gender slide” throughout male/female and/or masculine/feminine continuums on an ongoing basis. Author Martine Rothblatt describes transgendered individuals in her book The Apartheid of Sex as people who “feel a need to express a gender identity different from the one society associates with their genitals.”

For some people, the use of hormones and/or sex reassignment surgery provides a better match between gender identity and physiological sex. But coming out as transgender does not inevitably signify to friends and family that one desires surgery or other medical intervention to bring genitals and gender into alignment—there are as many experiences of gender as there are people in the world. Fluidity of gender identity is as central to some people's experience as the unshakable conviction that a person is always either male or female is to others. As Dr. J. White and Dr. M. Townsend said in their article “Transgender Medicine: Issues and Definitions” in the March 1998 issue of the Journal of the Gay and Lesbian Medical Association: “Indeed, growing numbers of people choose to live as ‘intergendered,’ incorporating aspects of both male and female roles, and in so doing define a new social role altogether. Many of these people consider surgical treatments unnecessary at best and barbaric at worst.”

Although the term *transgenderist* was originally coined by Virginia Prince\(^29\) to denote only those who live full time as the “opposite” gender without undergoing sex reassignment surgery,\(^30\) transgender in contemporary usage has come to be an umbrella term representing anyone who transgresses traditional notions of sex and gender. Transgender challenges societal assumptions that sex and gender are fixed, always in agreement with each other, immutable, and delineated as distinctions between two mutually exclusive categories. It contests assumptions that have been the core of past research—people must be masculine or feminine but not both, masculinity and femininity are mutually exclusive boundaries of a one-dimensional, central gender essence of human nature, and anything other than conventional masculinity or femininity is pathological.\(^31\) Used in this way, crossdressers, transsexuals (preoperative, postoperative, nonoperative), intersexed people, and those who feel discordance between their socially assigned and private experiences of gender (but may not fit into either of the groups described above) would all be termed transgender. As the concept of transgender moves further into the cultural foreground, increasing numbers of people—particularly radical, savvy youth—are embracing the term transgender as an expression of general discontent with the current limits of a bipolar system.

Transgender challenges to the binary gender status quo have sought to answer, among other questions: “Where?” “When?” “Why?” “How come?” “How much?” “So what?” and “Who made up these rules, anyway?”

Author and performance artist Kate Bornstein views transgender as not merely an identity issue but also as a value-based movement—“a value base of transgressing gender in any old way, shape, or form. It doesn’t matter how you [mess around] with gender, you’re transgender. Just because I had [sex reassignment surgery] that doesn’t mean I’m any more transgendered than anybody else.”\(^32\) She also counters
the myth that transgender people must always feel trapped in the wrong body stating “I've no idea what a 'woman' feels like. I never did feel like a girl or a woman; rather, it was my unshakable conviction that I was not a boy or a man. It was the absence of feeling, rather than its presence, that convinced me to change my gender.”

Because the transgender movement is in the process of defining itself, and the existing terminology does not adequately or impartially make room for such diversity among people, many have created words or terms to describe their own experiences. Some individuals have adopted a preferred term to identify themselves on the gender continuum, which may or may not be “transgender”—drag king, genderbender, shapeshifter, nelly queen, bigendered, and androgyn are some of the terms currently in use to best suit individual identity. A recent study on demography, healthcare, and interpersonal violence in the transgender community provided participants 21 choices of “current gender” from which to choose, plus “other”; the survey also instructed “check all that apply.”34 There may also be personal or political advantages to self-labeling as transgender, or something altogether different, given the context. For instance, people may choose to identify as transsexual with their family (if this is a term they are more familiar with), but as transgender in the gender community, and may further substitute an informal word or phrase of their own invention while strength is internal.” Transgender theory, consciousness, and politics are constantly evolving. At the forefront of the drive to examine and deconstruct traditional ideas of gender are those who clearly see its effects or those who deal with society's ongoing invalidation of their very existence. A growing body of transgender individuals are speaking out and sharing both personal experiences and professional critiques of the current state of gender beliefs in society.

A recent model described by Kate Bornstein explains traditional gender concepts, transgender identity, and cultural power dynamics in terms of a pyramid structure. The mythical “perfectly gendered person” (in our culture, including their sex/race/class/ethnicity/orientation and any other identities that may intersect with gender) is positioned at the top of the pyramid, signifying the greatest access to power. The next highest subset of people on the pyramid aim to emulate our cultural ideal of “perfect” gender, with slightly less power. People who can't be like that group, can have an unconscious goal of being liked by that group and have correspondingly less power. Forming the base of the pyramid are others, many in number but with little access to cultural power. Invert the pyramid, and degrees of freedom come into focus—paradoxically the person with the most power, entrenched in so many traditional ideas, has the least freedom, whereas the further people are from that point, the more freedom they have to explore and express themselves in ways that best reflect their true identities.

In another analysis of the intersections of race, class, sex and gender, and power dynamics, author Jamison Green reiterates the importance of the personal—“power is relative, while strength is internal.” Even transgender philosophy and spirituality are burgeoning fields, as the transgender movement takes shape. Presentations on topics as diverse as “effectively harnessing the power of the media,” “intersex legislative lobbying,” “out in academia/politics/medicine as a transperson,” and “passion and sexual health in transgender relationships” were offered at the Third International Congress on Sex and Gender in Oxford, England, in September 1998.

As transgender thought coalesces, shattering traditional notions of gender in a resounding manner, the true diversity of the gender continuum becomes better illuminated.

It is important to note that transgender identity is entirely separate from sexual orientation, and in many respects may render the concept of sexual orientation obsolete. How would someone label a person born female, who has transitioned to a man, whose partner was born male and has transitioned to a woman? Customary (and comfortable, and reassuringly dualistic) notions of orientation break down as the traditional sex and gender assumption—that all aspects of sex and gender are in agreement in all people at all times—crumbles as well. In reality, sexual orientation is another continuum upon which sex and gender may intersect. But it is a very separate and distinct (and perhaps, in the context of transgender, unnecessary, or at least perplexing) issue from transgender identity. The sexual orientation scale is the continuum upon which people may gauge their attraction to others—again, in this culture defined in classic Western duality, bounded by the opposites of homosexuality and heterosexuality.

Common issues critical among lesbian/gay/bisexual communities and transgender communities include coming out, violence, access to health care, and self esteem. But common issues do not necessarily translate into identical approaches. Instances of those who hastily added the word transgender to their organizations, only to discover they are painfully ill prepared to address the needs and concerns of transgender individuals, are numerous. Yet, at the same time, new alliances, particularly between bisexual and transgender communities, are being forged. Anything That Moves, for example, is a magazine for bisexual people that regularly includes extensive transgender content in each issue.
due to the similarities the members of each group share—a clear understanding of middle ground amidst a society that views all things in terms of dichotomy.

Violence. Stemming the tide of violence against differently-gendered people is a major concern. Several studies have investigated this violence, and some estimates indicate that 80 percent or more of the transgender population have been victims of assault based solely on their gender identity or others’ perception of their gender.38 In an example of ways gender affects even those who are not transgender, one study demonstrated that at least 30 percent of discrimination against lesbian, gay, and bisexual people is actually due to discrimination about gender expression and perception, not sexual orientation.39 In a time when the Matthew Shepard murder garnered immense publicity, there is continued silence about the epidemic of violence against transgendered people. Between October 1998 and April 1999—a seven-month period—there have been seven violent murders of transpeople.40 So many people have been murdered in the transgender community that the Remembering Our Dead Web site (http://www.gender.org/remember) was created specifically to commemorate the lives and memories of all known victims of gender-based murder.

Genderphobic incidents have recently gained some mention in the popular press—the murder of Brandon Teena41 and the delay of medical attention to Tyra Hunter (which resulted in her death) have raised awareness.42 But much work remains. In both cases, the victims’ transgendered status was perceived to justify inaction on the part of uniformed professionals. The consequences of this inaction were deadly.

Not only transgendered people, but their friends, families, and lovers can also be targets. The current case of Private Barry Winchell, the soldier at Fort Campbell, KY, who was fatally beaten by fellow servicemen, was initially portrayed as an anti-gay hate crime. Recent reports indicate, however, that he may have been targeted and killed because he was involved in a relationship with a transgendered person.43

The vacuum of information and respect in some cases is filled by those in the very professions they seek to educate: TOPS: Transgendered Officers Protect & Serve (an organization for transgender employees in law enforcement, fire departments, and the military), the International Conference on Transgender Law and Employment Policy (transgender individuals in the legal and employment policy fields), and the North American Transgender Health & AIDS Network (transgender health, HIV/AIDS, and sexual-ity educators) are but three examples.

Activism. Gender activism has resulted in both increased awareness and legislative change. Several city ordinances and state laws now prohibit discrimination based on a person’s gender identity or another person’s perception thereof.44 A few major corporations have included transgender-inclusive language in their workplace nondiscrimination policies.45 On the international level, the European Court of Justice has asserted that employment discrimination based on transsexual status is unlawful throughout Europe.46 Gender oppression and gender-bashing incidents are not new phenomena. The experience of being punished or chided for “gender inappropriate” behavior is not exclusive to differently-gendered people; in our gender-polarized society, it is a basic fact of life. In its most primary form, gender oppression affects not just transgendered people, but everyone—“the college sweetheart who develops life-threatening anorexia nervosa trying to look ‘feminine,’ the Joe Sixpack dead from cirrhosis of the liver because ‘real men’ are hard drinkers.”47 Indeed, all members of American society are engaged to some degree in gender struggle, as Leslie Feinberg recently stated, “One person’s gender expression is not liberated until all of ours are.”48

Reconstructing Ideas, Improving Approaches

Transgender issues are real. Transgender people are in the world. Sexuality educators and others in the field have an obligation to learn about this subject and to open themselves to exploring related issues. They can start by examining and understanding basic ideas of sex and gender. They can continue by relentlessly questioning the exclusionary bipolar systems. And, in the process, they can provide support and validation for transgender students, coworkers, friends, and family.49

Sexuality educators have the responsibility to revisit traditional sex and gender dead ends. They can then begin the work of building a long road of gender diversity and expression—a road where there are no “dead ends” and no “do not enter” signs. In the meantime, my own gender journey may include again visiting that place called Gender Road.

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A cofounding member of the New York Association for Gender Rights Advocacy, she has worked at the local, state, national, and international levels to raise awareness about gender issues in legislative bodies. She is also a charter member of the North American Transgender Health and HIV Network.

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REFERENCES


2. Ibid.


13. Money and Wolman, p. 11.


29. Virginia Prince is an 87-year-old biochemist and crossdresser who started the first magazine designed for heterosexual crossdressers in the mid-1960s. The first major sample of crossdressers was drawn from the subscribers of the magazine. It also marked the first serious research into this topic since the turn of the century. She has been instrumental in establishing organizations of crossdressers throughout the world.


32. K. Bornstein, “Gender and the USFDA Food Group Triangle.” (Delivered at the plenary session of the Second International Congress on Sex and Gender Issues in King of Prussia PA, on September 20, 1997).


35. Bornstein, Second International Congress on Sex and Gender Issues.


38. GenderPAC, First National Study on Transviolence, 1998, Waltham, MA.


40. Riki Anne Wilchins (a personal E-mail on April 16, 1999, regarding National Gender Lobby Day).

41. Brandon Teena was an anatomically female person who lived as a man in Falls City, NE. Brandon was beaten and raped in 1994 by two male acquaintances of a woman Brandon was dating. The local sheriff, who reportedly referred to Brandon as “it,” refused to apprehend the suspects Brandon identified, and they murdered Brandon several days later, as they had threatened to do if he told anyone about the rape. Details are available at <http://www.fmm-anl.org/ftm/News/Bran/b bran.bkgr.html>. More information is available on the “Remembering Our Dead” site at <http://www.gender.org/remember/about/index2.html>.

42. Tyra Hunter, a transgender woman, was critically injured in an auto accident in 1995. Emergency medical personnel initially began providing emergency care at the scene but soon realized her transgender status, began making remarks, laughed at her, and ceased providing care. This negligence caused her death. A multimillion-dollar judgment was recently awarded to her family in a wrongful death suit. Details are in Penni Ashe, ed., “Verdict In Margie Hunter’s Civil Suit Against the District of Columbia Government,” Gender Advocacy Internet News (GAIN), December 11, 1998. More information is available at <http://www.gender.org/gain/g98/g121198.html>.


44. Both Minnesota (1993) and Vermont (1999) have passed state laws. Cities that have passed ordinances include Cedar Rapids, IA; York, PA; Evanston, IL; Toledo, OH; Iowa City, IA; Lexington, KY; Louisville, KY; Cambridge, MA; Ypsilanti, MI; Olympia, WA; New Orleans, LA; Santa Cruz, CA; Pittsburgh, PA; Tucson, AZ; and Minneapolis, MN. Full texts of most of these pieces of legislation are available at <http://www.nyagra.org/policy.html>. In addition, U.S. Rep. Jan Schakowsky (Ninth District, IL) became the first Member of the U.S. Congress to officially recognize gender variant people on June 14, 1999, when she amended her office nondiscrimination policies to include “gender self-image or identity.” Information on this policy is available on the Gender Advocacy Internet News Archives at <http://www.gender.org/gain/g99/g061699a.html>.

45. Lucent Technologies CEO and President Richard McGinn issued a policy statement that can be found at <http://www.equal.org/eeo_pol.html>. Apple Computer issued a policy statement that can be found at <http://www.nyagra.org/policy/apple.html>.


47. R. Wilchins, “A Note From Your Editrix,” In Your Face, Spring 1995, p. 4.


49. One resource is Nancy Nangeroni, “How To Handle Transgender Students,” International Foundation for Gender Education [online] at <http://www.gendertalk.com/comment/guidelines.html>. Another is the book M. Boenke, ed., Transforming Families: Real Stories About Transgendered Loved Ones, (Imperial Beach, CA: W. Trook Publishers, 1999). The International Journal of Transgenderism (http://www.symposion.com/ijt) provides a clinical perspective. There has been a tremendous increase in the number of online resources that address transgender issues, with Web sites catering to people of every situation and self-identification. There are also sites for parents of transgender children as well as for the significant others, friends, families, and allies of transpeople. The print magazine Transgender (published by the International Foundation for Gender Education, Waltham, MA) provides news, views, and features of interest to the transgender community and their allies. It is available at mainstream newstands. The list of books on transgender issues grows longer by the day. New and for the employer is J. Walworth, Transsexual Workers: An Employer’s Guide (Los Angeles: Center for Gender Sanity, 1998). It provides information and resources of interest to those in workplace settings.
Who are you,” asks the third blue-haired lady, peering up at me through the thick lenses of her rhinestone cat glasses. Only it comes out in one word, like “Hoowahyoo?” I’m wearing black, we all are. It’s my mother’s funeral service after all, and the little old ladies are taking inventory of the mourners. Me, I have to take inventory of my own identities whenever someone asks me who I am, and the answer that tumbles out of my mouth is rarely predictable. But this is my mother’s funeral, and I am devastated, and to honor the memory of my mom, I’m telling each of them the who of me I know they can deal with.

“I’m Kate Bornstein,” I answer her in this quiet-quiet voice of mine, “Mildred’s daughter.”

“Daughter?” She shouts back incredulously the same question each of her predecessors had asked, because everyone knew my mother had two sons. That was her claim to fame and prestige amongst this crowd. No do-nothing daughters in my mother’s family, no sir. Two sons. That was her worth as a woman.

“Mildred never mentioned she had a daughter.” The eyes behind those glasses are dissecting my face, looking for family resemblances. When I was a boy, I looked exactly like my father. Everyone used to say so. Then, when I went through my gender change, those same people would say, “Y’know, you look just like your mother.” Except I’m tall. Nearly six feet of me in mourning for the passing of my mother, and I’m confronting this brigade of matrons whose job it seems to be to protect my mother from unwanted visitors on this morning of her memorial service down the Jersey shore.

“You’re her daughter? So who’s your father? It’s not Paul, am I right?”

Now there would be a piece of gossip these women could gnaw on over their next mahjongg game. “Mildred had another child,” they’d say after calling two bams, “a daughter no less! And Paul, God rest his soul, he never knew.” My mother had told only a tight circle of friends about my gender change. She knew that spreading the word meant she’d be torn to shreds by the long pink fingernails so favored by the arbiters of propriety of the small town she lived in. She was raised in a nearly orthodox household, my mother was.

As a young girl, she would wake up every morning just in time to hear the men and boys wake up and utter the phrase, “Thank God I was not born a woman.” She lived her life placing her self-worth on the presence of the men in her life. Her father, a successful merchant, died a year before I was born. Her husband, a successful doctor, died a year before I told her that one of her two sons was about to become a dyke. She preferred the word lesbian. “My son, the lesbian,” she would tell her close friends with a deep sigh and a smile on her lips.

My mother was there the night the rabbi asked me who I was. I was a senior in college, a real hippie: beard, beads, and suede knee-high moccasins with fringe hanging down past my calves. I was home for some holiday or other, and my parents thought it would be nice if I came to synagogue with them. They wanted to show off their son who was going to Brown. I’d always enjoyed Friday night services. There’s something lullingly familiar about the chanting, something comforting in the old melodies, the Hebrew which I never ever understood but had down phonetically. But when the rabbi gave his sermon, I was incensed. To this day, I don’t remember what I was so outraged by, any sense of my anger having been eclipsed by the events that followed. But there I was, jumping to my feet in the middle of the rabbi’s sermon, arguing some point of social justice. My father was grinning. He’d never been bar mitzvah’ed, having kicked his rabbi in the shins the first day of Hebrew school. My mother had her hand over her mouth to keep from laughing. She was never very fond of our rabbi, not since the time he refused to make a house call to console my father the night my grandfather died. So there we were, the rabbi and the hippie, arguing rabbinical law and social responsibility. We both knew it was going nowhere. He dismissed me with a nod. I dismissed him with a chuckle, and the service continued. On the way out of the synagogue, we had to file by the rabbi who was shaking everyone’s hand.

“Albert,” he said to me, peering up through what would later be known as John Lennon glasses, “Hoowahyoo? You’ve got the beard, so now you’re Jesus Christ?” I’ve done my time as an evangelist. Twelve years in the Church of Scientology, and later, when I’d escaped Hubbard’s minions, four or five years as a reluctant spokesperson for the world’s fledgling transgender movement. But somewhere in between Scientology and postmodern political activism, I found time to do phone sex work. My mother never knew about that part. It was one of
the who’s I’d become I knew she couldn’t deal with. So I never told her of the day I was standing in line in the corner store in West Philly, chatting with the woman behind the counter. From behind me, a deep male voice says, “Excuse me, who are you?” And I turn to see this middle-aged yuppie peering up at me through tortoise-rimmed glasses.

“Stormy?” he asks me. Stormy was the name I’d chosen for the smoky-voiced phone sex grrrl who did erotic dancing on the side and had a tattoo on her thigh. “Stay on the line with me a little longer, sugar,” I’d purr into the phone, “and I’ll tell you what it is.”

So this young urban professional is standing behind me looking like he’d died and was meeting the Virgin Mary. I’m trying to figure out what fantasy of his we’d played out. But I’m scared. If word got out that Stormy was a “tranny,” I’d lose my job for sure. I fix this guy with the same icy stare I’d learned from my mother, and he eventually slinks away to inspect the Pringles.

My mother died before she could hear the blue-haired ladies ask “Hoowahyoo” of the tall-tall woman with mascara running down her cheeks. She never heard the producer from The Ricki Lake Show ask the voice in the phone jammed up against her ear, “Who are you?” when I told her I wasn’t a man or a woman. My mother never heard the Philadelphia society matron ask me the same question when I attempted to attend her private women-only AA group. My mother only once asked me, “Who are you?” It was a week before she died. “Hoowahyoo, Albert?” she asked anxiously, mixing up names and pronouns in the huge doses of morphine, “Who are you?”

I told her the truth: I was her baby, I always would be. I told her I was her little boy, and the daughter she never had. I told her I loved her.

“Ha!” she exclaimed, satisfied with my proffered selection of who’s, “That’s good. I didn’t want to lose any of you, ever.”

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This question-and-answer article was adapted with permission from the pamphlet of the same title published by Planned Parenthood of Tompkins County (PPTC), 314 W. State Street, Ithaca, NY 14850. Phone: 607/273-1526, extension 134. SIECUS Report subscribers can contact PPTC for a complimentary copy.—Editor

**What is transgender?**

Transgender describes a person whose internal sense of gender doesn’t match the gender identity that society expects of them based on their genitals. The transgender community is in the process of defining itself, so transgender is also used as a general term to describe the many different gender identities that exist, like transsexuals and people who feel conflict or fluidity between internal gender identity and physical sex. Other words like drag king, drag queen, cross-dresser, shapeshifter, bigendered, and androgynous are also used by some people to define themselves.

**Isn’t transgender just like being gay?**

No. Transgender describes a person’s internal sense of their own gender identity and sexual orientation describes a person’s attraction to other people. Transgender people have many issues in common with lesbian, gay, and bisexual communities like coming out, access to nonjudgmental health care, self-esteem, and violence, to name a few. But gender identity is not the same as sexual orientation.

**Where can I find out more about transgender?**

You can learn more about transgender by reading related books or contacting related organizations. Some lesbian, gay, and bisexual resource centers or support groups may have contact information for people dealing with transgender issues.

**How will I know when I meet a transgendered person?**

You won’t know until someone decides to tell you! There isn’t a formula or test to determine gender identity. A person’s sexual experiences don’t define their gender identity. Neither does a child’s personality—just because a boy likes to play with dolls or a girl likes to climb trees doesn’t make them transgender! Remember, transgender is about a person’s inside feelings about their gender identity, not what they wear or what they liked to play with when they were kids.

**What can I do if someone comes out to me as transgender?**

When someone shares personal information about themselves with you, it helps to listen first, to hear the person out and see what they may want or need from you before you offer advice or help. If someone does come out to you as transgender and is looking for information, you should suggest the organizations and books listed on page 25. It’s also important for you to educate yourself! Take advantage of the opportunity to build your understanding of gender diversity and look for opportunities to be an advocate or an ally to transpeople.

**What’s transphobia?**

Transphobia is the fear of and discrimination against transgender people (and people thought to be transgender—regardless of their actual gender identity). Transphobia leads to violence and bias that can make coming out as transgender even harder. Current studies say that more than 80 percent of transgender people have been physically assaulted based on their actual or perceived gender identity. Some transgender people report losing their jobs, being ignored by their families, and losing friends when they share their gender identity. Transphobia hurts everyone—the transpeople who do not feel they can share an important part of themselves and anyone who feels restricted by traditional sex role stereotypes.

**Transpeople are people too....**

Transpeople are people with hopes, dreams, careers, goals, partners, families, and children. As society builds an awareness and acceptance of the diversity of gender identities, transgender will become far less confusing and feared. Many societies throughout history have recognized and celebrated gender diversity. With increased understanding and education, this society can be a more inviting and comfortable place to express all the parts of an individual’s sense of self.
Readers of this SIECUS Report on “The Construction of Gender” will find that both the academic articles and the personal perspectives in this issue only touch the surface of a complex subject most people are just beginning to discuss and understand. SIECUS has, therefore, decided to include some sources where readers can find more information. This list is not inclusive and does not indicate an endorsement by SIECUS.

MAGAZINES, JOURNALS, NEWSLETTERS

Anything That Moves
This quarterly international magazine is for bisexuals, gays, lesbians, intersexed, transgenders, and transsexuals. $18 annually. 
Anything That Moves, 2261 Market Street, No. 496, San Francisco, CA 94114-1600. Phone: 415/626-5069. E-mail: <info@anythingthatmoves.com>. Web site: <http://www.anythingthatmoves.com/contact.html>.

Transgender Tapestry
This is a magazine by, for, and about transgenders. It includes information on crossdressing, transsexualism, intersexuality, and other related subjects. $40 annually; International Foundation for Gender Education, P. O. Box 540229, Waltham, MA 02454-0229. Phone: 781/899-2212. Fax: 781/899-5703. Web site: <http://www.ifge.org/tgmag>.

Your SOFFA Voice
A bimonthly support newsletter for SOFFAs (Significant Others, Friends, Families or Allies) of people who are born female and are transgendered on the masculine end of the gender continuum. Your SOFFA Voice, c/o American Boyz, 212A S. Bridge Street, PMB 131, Elkton, MD 21921. Web site: <http://netgsi.com/~amboyz/news.html>.

WEB SITES

American Educational Gender Information Service (AEGIS)
<http://www.ren.org/rafil/AEGIS.html>. This organization is a clearinghouse for information on transgender and transsexual issues. It maintains the National Transgender Library and Archive.

Gender Advocacy Internet News (GAIN)
<http://www.gender.org/gain>. This is an Internet news service serving the transgender and gender-variant community.

Gender Public Advocacy Coalition
<http://www.gpc.org>. This organization is composed of individuals and groups dedicated to a broad-based, inclusive national movement for gender, affectional, and racial equality.

GenderTalk
<http://www.gendertalk.com>. This is the site of the only worldwide weekly radio program that discusses transgenderism in the first person. It is broadcast live on Mondays from 6:30 to 8 p.m. (Eastern Time). Listeners can find it on WMBR (88.1 FM) in Boston, MA; GAYBC Radio Network at <http://www.gaybc.com>; Transgender Forum at <http://www.tgforum.com>; GenderTalk at <http://www.gendertalk.com>.

Harry Benjamin International Gender Dysphoria Association, Inc.
<http://www.tc.umn.edu/~ihome/m201/colem001>. This is the site of a professional organization devoted to the understanding and treatment of gender identity disorders.

Ingersoll Gender Center
<http://www.ingersollcenter.org>. This is the site of a nonprofit organization for transsexuals, transvestites, and the transgender community.

International Conference on Transgender Law and Employment Policy
<http://www.abmall.com/ictlep>. This site provides information on activities worldwide on laws and employment policies relating to transsexuals.

International Foundation for Gender Education
<http://www.ifge.org>. This is the site of an advocacy and educational organization that promotes the self-definition and free expression of individual gender identity.

Intersex Society of North America
<http://www.isna.org>. This is a support, education, and advocacy group founded and operated by and for intersexuals.

The Renaissance Transgender Association
<http://www.ren.org>. This site provides support and information for crossdressers, transvestites, and transsexuals.

The Society for the Second Self, Inc. (Tri-Ess)
<http://www.tri-ess.com>. This is the site of an educational, social support, and outreach corporation for crossdressers. It has local chapters.

Transgender Forum
<http://www.tgforum.com>. This site is for crossdressers, transvestites, transsexuals, and transgenderists as well as their families and friends.

Transgender Surgical and Medical Care Center
<http://www.stmccenter.com>. This is the site of a full-service surgical and medical center specializing in transgender surgery and care.

Transsexual Menace
<http://www.apocalypse.org/pub/tsmenace>. This is the site of an international nonviolent direct-action group that focuses on the issues facing the transgender community.
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