



Brought to you by Virginia's own  
Transgender Task Force

Volume 4, Issue 1

Winter 2008

# Transgender Health

## Sexuality, Sensuality, Intimacy, & Trans Identities

By Tarynn M. Witten, Ph.D.,  
MSW, FGSA

Sexuality, like gender identity is a result of complex interactions between the trans-identified individual, social expectations, cultural impositions, and numerous other factors. Intimacy becomes equally complex, particularly as it involves many more possibilities than just sexual behaviors. Within the transgender community, diversity of intimacy, sexuality, and sexual identification is the order of the day. In this article we discuss some aspects of intimacy and sexuality relevant to trans-identified individuals.

This involves allowing the individual to explore what concepts of intimacy and sexual desire ... mean within the context of the changing body and feelings...

### Body Image.

Gender transition may provide the individual with greater freedom of expression as her/his true self. This involves allowing the individual to explore what concepts of intimacy and sexual desire - as well as sexual relationships - mean within the context of the changing body and feelings associated with that change. These feelings are likely mediated by the individual's age, time of transition and history around the gendered identity. Hormones may alter both physical and emotional factors, allowing the trans-person to feel more in concert with the true self and

therefore able to express more congruent intimacy in relationships as well as more truthful sexual identity and desires. Furthermore, the normal bodily changes across the lifespan will be partially offset by hormonal and surgical therapies. Specifically, for male-to-female (MTF) persons, breasts that develop in mid-life or the elder years, due to cross-gender hormonal administration, will not begin the typical drooping process until very late in life. For female-to-male (FTM) persons, genital (scrotal) sagging will also be greatly postponed for those who have had genital reconstruction during the elder years. Convergence of body forms makes it easier for individuals who transition in later life to have a body that is socially consistent with what is expected and therefore to be more comfortable within their body. Similarly, individuals who have transitioned very early in life, particularly those who may transition while they are adolescents, are likely to have vocal and visual body forms that are socially expected and are therefore likely to be consistent with what society expects. For individuals who begin transition in mid-to-later life, though they may have to work harder at passing, this freedom

often leads to participation in a variety of sexual identity explorations.

### Second Adolescence.

Second adolescence is a very natural process. Individuals experience the new-found freedom of exploring their sexuality in a way that has been previously limited or not available at all. However, because many of these individuals have not been given health courses relevant to sexuality in today's society, sexual behaviors are often risky due to lack of protection. Many individuals will dress in ways that are not age-appropriate for the external body but are consistent with the internal desire to be the age that they feel or that they wish to relive. This can lead to sexual behaviors that may put the new trans-person in jeopardy in many ways. Increased information on safer sex methods for transgender-identified individuals must be made available across all age groups.

### Intimacy and Sensuality.

There are many forms of intimacy. Types of intimacy range from deep relationships with one's pets, one's chosen and biological families, long-term relationships with friends, spiritual and/or religious intimacy, to the more obvious traditional relationships such as dating and sexual relationships.

(Cont. on page 2, *Sexuality & Trans Identity*)

### Inside this issue:

Sexuality, Sensuality, Intimacy, & Trans Identities	1
Health Alert: Syphilis Is Here In Virginia	4
Group Spotlight: New Life Trans-gender Outreach	4
Editorial: Sorting Out Sexual Orientation and Gender Or, Where Does Gay End & Trans Begin?	5
Guest Editorial: Our Movement's Canary: Lessons Learned from ENDA	6
Announcements & Upcoming Events	7
Community Resources	8

### Inside: 4 Different ways YOU can get involved:

- Join the Transgender Task Force! See p. 10 for contact info.
- Join the Virginia HIV Community Planning Committee. Contact Elaine Martin at (804) 864-7962 or [Elaine.Martin@vdh.virginia.gov](mailto:Elaine.Martin@vdh.virginia.gov)
- Write a letter to the editor or an article for the newsletter! See **Announcements** on p. 9 for upcoming newsletter topics.
- Add your event to the to the Upcoming Events section on p. 9!

## Continued: Sexuality and Trans Identity

Intimacy can also be found in online chat groups or even in email, chat, or blog. The importance of intimacy along the life course is not to be denied. Patterns of sensual expression are usually present across the life-span, with sexual behavior serving also as a vehicle for the basic human need of the sense of touch. When touch is absent, severe psychobiological stress and related symptoms can result. The greater sensuality experienced by transsexual and transgender persons who are able to achieve a sense of bodily wholeness may serve to enhance physical and mental health by providing additional capability for healthy touch. Cross-dressing persons who are able to integrate temporary role change into healthy part-nered or social relationships may similarly benefit. It is important that healthcare givers validate the sensual expressions and potentials of their clients by offering sexual counseling and education when needed and assisting other family members in accepting the gender presentation and sexual expression of their relatives. The research literature for non-trans-identified individuals supports the state-ment that intimacy is a key factor in long-term successful aging, reduced mortality risk and greater long-term health. However, no research literature exists on the subject of intimacy or its construction and meaning within the transgender population.

### Sexuality.

Sexuality is traditionally defined based upon the reproductive capability of body types (male/female), those with male and female reproductive genitalia. Conventional Western sexuality choices include heterosexuality, homosexuality, asexuality and bisexuality. Other, more non-traditional sexuality choices are pan-sexuality, omnisexuality, polyamory as well as more complex mixes of body types and internal desires. For example, what type of sexuality is being expressed when two non-operative, male-to-female transsexuals have chosen to live in a committed relationship? In such a scenario, external anatomy and internal self-construction mix with that of the other individual in the

relationship to create a mutually acceptable joint sexual behavior pattern. Thus, sexuality can be more complex than the traditional constructions previously mentioned.

Moreover, the tacit assumption that there is a tie between sex, gender identity, and sexuality is simply not true. We can illustrate this fact with some recent unpublished data from the TranScience Longitudinal Aging Research (TLAR) Study (Witten and Eyler, 1999). These data show that for a sample of n = 43 self-identified female-to-male respondents the choice of sexual partners was quite varied. FTM individuals stated that they had sexual relationships with genetic females, genetic males, both, neither, other FTM and MTF persons, and even intersex-identified individuals.

Individuals in the trans community are fond of saying, "gender is between the ears and sex is between the thighs." However, based upon the TLAR Study results, it is clear that the *sexuality* of individuals can be as diverse as the shades of skin on the planet and that it resides in a complex set of biomedical and psychosocial factors.

Sexuality within the transgender population can also be very fluid. Individuals, who initially claim the label of heterosexual, may find that they change their orientation in unexpected ways. One later-life (51 year-old), early stage, preoperative male-to-female transsexual stated that she felt that she was sexually interested in women. Over the span of a year, she became involved with various men and finally ended up partnering with another pre-operative male-to-female transsexual with whom she has now has an enduring long-term relationship. Thus, sexual identity can evolve and change.

### Sexual Expression and Aging.

Sexual expression can also be problematic as one ages. The greatest

obstacle to sexual expression among older adults (particularly heterosexual women) is the lack of availability of suitable partners. Consequently, a MTF transsexual person who undertakes gender transition later in life, and who is sexually attracted to males, is more likely to experience sexual isolation or deprivation than would have been the case prior to this transformation (*i.e.*, when the individual had been perceived as male). In addition, women now over age 60 have been primarily socialized to believe that female sexual behavior is acceptable only within the context of marriage, and possibly for the exclusive purpose of procreation as well. However, persons who change gender presentation later in life may share in these perceptions to a lesser degree than do their non-transsexual peers. Non-transsexual men experience the social advantage of being outnumbered by their female peers. In the absence of other difficulties, this benefit would accrue to FTM individuals as well. However, many FTM persons who have not undertaken surgical transition face the problem of disclosure as a barrier to spontaneous intimacy at any age. Certainly, many older FTM men are partnered and successful in intimate relationships. The experience of single older transsexual men, as a group, requires further study.

Information specific to sexual concerns of single, elderly cross-dressers is currently unavailable. Middle-aged and older MTF cross-dressers who are currently in heterosexual marriages have usually reached an equilibrium during the course of the relationship, though this may have taken years to achieve. Women who are unaware of their husbands' cross-dressing behavior at the time of the marriage and who discover it at a later point may respond by leaving the marriage, by attempting to place limits on the context of the presentation *en femme* (*e.g.*, only at home, or only at cross-dressing parties) or by embracing the cross-dressing as a sign of empathy with the feminine aspects of the psyche.

...it is clear that the sexuality of individuals can be as diverse as the shades of skin on the planet...

Despite ... obstacles to sexual expression, most transsexual persons experience a positive development of personal sensuality when they are able to live in congruence with deepest self-perception.

(Continued on page 3, *Sexuality & Trans Identity*)...

(Continued from page 2, *Sexuality & Trans Identity*)

### Sexual Functioning.

With regard to the mechanics of sexual functioning following sex reassignment surgery, few generalizations can be made. Orgasmic capability is preserved in most of genital reconstructive procedures. However, the sexual response cycle usually requires a greater length of time among elderly persons than among their young and mid-aged peers. The effect of sex reassignment (and in effect, post-operative genital retraining) is not yet known. For elderly female-to-male transsexuals, genital reconstruction (including the placement of an implantable penile prosthesis) may result in a more reliable erectile capability than that which is commonly experienced by elderly natal males. However, the strength and integrity of the genital dermis (skin) may be reduced relative to earlier in life, and may therefore compromise post-surgical recovery. Male-to-female transsexuals may also experience a lack of resilience of the neo-vaginal lining and labial skin. In addition, the vaginal vault is usually less flexible among transsexual women than among their non-transsexual peers. The effects of aging on this phenomenon (as well as the initiation and duration of estrogen therapy and the timing of surgery) are not currently known.

### Closing Thoughts.

Despite the aforementioned obstacles to sexual expression, most transsexual persons experience a positive development of personal sensuality when they are able to live in congruence with deepest self-perception. Education regarding gender diversity and sexual expression among the transgender community may also be needed in order for professionals in inpatient, chronic, and acute care settings to provide appropriate and compassionate care for their clients and patients. Dispelling myths regarding elder sexuality, especially as related to assisted living and nursing home facilities, providing information regarding the usual physical changes of aging and the human sexual response cycle across the lifespan, and offering interventions which address sexual expression in cases of physical disability may also be particularly useful for social workers and other professionals who provide care to older persons. ▲

### References

Witten, T.M. and Eyler, A.E. (2004). Healthcare Issues: Transsexuals, Transgenders, and Cross-Dressers. *Healthcare and Aging*, 11 (1): 4-5.

Research papers are available as free pdf downloads at the TranScience Research Institute website <http://www.transcience.org> in the Research Archives section. The author can be contacted at [tmwitten@vcu.edu](mailto:tmwitten@vcu.edu). If you are interested in participating in our ongoing research effort in support of transgender aging (as either a study participant or collaborator) or know of someone who might be, please contact the author for further details.

## Publishing Right Here in the Old Dominion:



**Aggressive Magazine** is an unapologetic photographic celebration of the masculine woman and FTM. Our beauty is raw; our love is deep and our worth to this planet immeasurable. And finally there is a publication dedicated to uplifting our spirits, enhancing our physical and mental health and showcasing our talents. Aggressive Magazine is for all of us who long for a medium that lends undeniable volume to the voices of our masses, without the negativity that usually accompanies our images. Please visit us on the web and check out our first issue at <http://www.aggressivemagazine.com/>! ▲

**Access**  
AIDS Care Center for Education & Support Services

**Transition your Life  
Clinic  
Opens  
April 11, 2008!**

**FREE! Specialized Clinic Devoted to Transgender Care:**  
► Confidential HIV Testing, ► Health Screenings,  
► Prescriptions for Hormone Therapy

**\*Photo ID and Social Security Card Required**

• • • • •  
Fridays, 1 – 4pm  
Park Place Medical Center  
3415 Granby Street, Norfolk, VA 23504

**Make Your Appointment TODAY!**

Call: 757.640.0929 or  
Email: [mmaster@accessaids.org](mailto:mmaster@accessaids.org),  
[wbackus@accessaids.org](mailto:wbackus@accessaids.org)

Appointments ONLY\* No Walk-Ins Allowed

## Syphilis Is Here in Virginia

Cases of syphilis increased 160% in Virginia between 2003 and 2007. This follows trends seen in other areas of the United States. Just a few years ago, syphilis was at an all time low and public health officials had hopes of eliminating the disease.

Cases are being seen among both heterosexuals and gay men; however, the increase in cases is being linked to people who find sex partners on the internet, and about 50% of Virginia's new syphilis cases have been seen among men who are living with HIV. So everyone, including trans people, who has sexual partners who are gay or who may have found sex partners on the internet is at a higher risk for contracting syphilis.

Syphilis has been called "the great

imitator" because its signs and symptoms can look like many other diseases. The symptoms may include ugly sores or rashes that appear somewhere on the face, mouth, or body and last for several weeks. By getting tested early and often, syphilis may be detected and treated before these symptoms become noticeable. Initial symptoms disappear, making people think the problem has gone away; however, the infection remains in the body. Although syphilis is easily cured, left untreated, it can cause life threatening consequences.

If you've had unprotected sex, ask your doctor about getting a syphilis test. Testing and treatment are free at your local health department. If you have recently been diagnosed with syphilis, make sure your partners are informed so that they can be

treated as well. Your partners can be notified anonymously through the health department.

**Everyone who has unprotected sex is at risk for syphilis. The good news is that it is easily cured!**

If you are a trans person who would like to be get tested for syphilis, HIV, or any other sexually transmitted disease, but you're not sure where to find a clinic that will be sensitive to your needs, go to this website for the most updated version of the Virginia Transgender Resource and Referral: <http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/Hotline/TransgenderRRLList.pdf> Healthcare providers and other trans-friendly resources are listed alphabetically by region.

If you want more information about syphilis or where you can be tested, please call the Virginia HIV, STD and Viral Hepatitis Hotline at (800) 533-4148. ♠



## Group Spotlight: *New Life Transgender Outreach*

*New Life Transgender Outreach* is dedicated to assisting all Transgender people, friends, and family to wholeness. The Golden Rule is our guide. We believe in direct dealing. All people are treated with courtesy, and all people are called to accountability.

We are sensitive to an individual's need for anonymity, as well as any other issues that pertain to job, families, as well as the government.

We offer:

- Education on Transgender issues; both male-to-female and female-to-male viewpoints are considered.
- [Contact lists](#) for professional help in Hampton Roads such as physicians and attorneys
- [Contact lists](#) for cosmeticians, shops, and other services that are Transgender friendly
- Feature Films, discussion, and community
- A safe environment for Transgender people, friends, and

family

- Confidentiality
- Networking with Transgender related agencies & professionals to reach, teach, and empower our brothers and sisters.

We meet the first Saturday of each month at 7 PM at New Life MCC, for an evening of open and honest discussion, and to plan future events. All are welcome to attend. ♠

New Life MCC  
5701 Thurston Avenue  
Virginia Beach, Virginia 23455  
(757) 460-5805 Phone

[www.newlifemcc.net/newformat/transgender](http://www.newlifemcc.net/newformat/transgender)



# From the Editor: Sorting Out Sexual Orientation and Gender Or, Where Does Gay End and Trans Begin?

Sexual orientation and gender (including gender identity and expression) are completely separate things right? Decades of political action in the gay rights movement have been predicated on this framework, the belief that gay men and lesbian women are just like their heterosexual counterparts except for whom they are sexually attracted to and/or intimately involved.

## A Little History...

The Gay and Lesbian Rights Movement has a long history of stigmatizing and covering up gender variation. Members of the Mattachine Society and the Daughters of Bilitis, the main gay and lesbian rights organizations of the 1950s and 60s, were

required to dress in a traditionally conservative manner - coats and ties for men and skirts and blouses for women - whenever they picketed or lobbied in Washington D.C. This was intended to counteract negative stereotypes and demonstrate to heterosexual America how "normal"

they were. Later, after the Stonewall Riots set off the first Pride march in New York, it was not uncommon for some Pride Parade participants to insist that certain groups be excluded because they were too extreme in "flaunting their homosexuality" by dressing in provocative or flamboyant clothing, including such contingents as drag queens and dykes on bikes. Mainstream participants were afraid that the more free spirited components of the community would give straight people the "wrong idea" about gays and lesbians, substantiating beliefs that they really were all degenerates and threats to "normal" society, because of those unusual and stigmatized gender expressions.

In the 1970s and 80s, the ideology of the lesbian feminist movement demanded that butch and femme identities, previously common among working class lesbian communities, be abandoned as "participation in patriarchal oppression". The appropriate gender expression for lesbian women was supposed to be a kind of androgyny - not too butch, but typically feminine expression was frowned on as well, as it suggested you were trying to pass as straight.

Most recently, at the 2006 and 2007 New York City Dyke Pride March, there was

controversy over a policy that "only women" could march, and "allies should cheer us from the sidelines". Many, of course, questioned what that meant. Aside from the question of how this could possibly be enforced, whose definition of woman is being used? If a female-bodied individual defines herself as a genderqueer butch, are they welcomed or not? What about female-to-male transpersons who are pre-transition; at what magic point do they become too manly to be a dyke? In any case, it seems that there are clearly some bastions of gender police still firmly lodged in some parts of the lesbian community.

It does appear to be regional, however.

**It is possible that the amount of "gender policing" varies greatly between different cities and regions, and depending upon such factors as how urban or rural they are...**

The Myspace page for last year's Washington D.C. Dyke Pride March reads, "I like dykes, people who like dykes, people who support dykes, people who might be dykes, and people who used to be dykes. The 2007 Dyke March is taking place on Saturday, June 9th at 1pm. Please come march with us! We're meeting at Dupont Circle. We'll be looking for you." It is possible that the amount of "gender policing" varies greatly between different cities and regions, and depending upon such factors as how urban or rural they are or the presence or absence of a large academic population.

So back to some more history...

"Homophobia" was first coined in 1969 to refer to straight men's fear that others might think they are gay. It came into more popular usage in 1972 when gay and lesbian activists adopted it as a tool to help conceptualize the problems faced by people as a result of their sexual orientation. 1969 was also, as mentioned previously, the year of the Stonewall Riots, riots that were fought in the street primarily by transgender people. This event was immediately framed as a "gay rights" revolution by the already established organizations such as the Mattachine Society, and the role of the drag queens and bull dykes who originally started the riots and fought in the front lines of that revolution became minimized and obscured. Colloquially however, the event was also known as "the hairpin drop heard 'round the world", so a certain segment of the community apparently did recognize the relevance to gender expression on some level.

**These are all gendered behaviors, the same stepping-out-of-bounds activities that get trans people into trouble.**

Unfortunately, the more mainstream and better established, and especially perhaps, better funded and better connected to the media, political organizations made up of mostly middle and upper class white gay men (and some lesbians) had much more of an opportunity to frame the struggle for equality as one that centered on sexual orientation only.

This is a problem however, because gay and lesbian people are treated badly, along with trans people, for much broader reasons than just the people with whom they share a bed. The stigma about being gay is about more than just sexual behavior. It's also about a myriad of other behaviors, like swishing, and taking up professions that are unusual for one's gender (male hairdressers and female gym teachers), lisping, women wearing flannel, and men who use glitter in their hair. These are all gendered behaviors, the same stepping-out-of-bounds activities that get trans people into trouble. Crossing the boundaries of our society's gender roles is only a problem if it is seen as threatening. So then the question becomes, who is threatened by upsetting gender roles?

## What Kind of Phobia?

This brings us back to that word, homophobia. In defining sexual orientation as the only basis for negative reactions and behavior towards gay and lesbian people, an opportunity was lost to frame the problem as one of sexism. So instead of seeing transgender people as facing the same kinds of discrimination and harassment as gay and lesbian people (as well as

the same kinds of discrimination and harassment that women face for demanding equality), and therefore part of the struggle, they are seen as part of the problem. Not only are trans people framed as a group that is trying to ride on the coattails of success in the struggle for gay and lesbian rights, they end up being blamed for the failures in that struggle. The Focus-On-the-Family-types who want to maintain the "traditional family" have been able to successfully pit mainstream gay and lesbian advocacy organizations, such as the Human Rights Campaign,

*(Continued on page 6, Sorting Out Sex & Gender...)*

# Guest Editorial: Our Movement's Canary: Lessons Learned from Employment Non-Discrimination

By Richael Faithful

Enter 21st century America, engulfed in one of the most socially-conservative eras in recent history. Envision a contentious political climate where two similar parties cannot even pass routine legislation without friction. Witness a legal climate producing one interpretation after another which reduces, narrows, and distorts civil rights gains from a mere forty years ago. We see legal rights roll-backs, and against a current, finally emerges the Employment Non-Discrimination Act (ENDA).

Many of us are familiar with the fall fight over ENDA. As courtroom battles persist and legal strategies mature, our leading legal organizations have decisively shared that the absence of "gender identity and expression" leaves us all vulnerable in the eyes of the law. Barney Frank and sympathizers not only abandoned a class of people, instead, our leaders failed to secure all protections. To the degree which any person is gender-conforming, he or she is implicitly more or less protected, but since we all have gender for others to directly assume and judge, each one of us would remain partially protected and at risk of discrimination, were the non-inclusive ENDA to be signed into law.

The National Center for Transgender Equality, Lambda Legal, National Center for Lesbian Rights, and other groups also point out that distinctions lawmakers made between sexuality and gender are fundamentally political, not legal. ENDA sponsors cited political expediency as their excuse for limiting protections. After all, Lambda Legal even admits that discrimination based on sex, sexual orientation and gender identity stereotypes are almost indistinguishable in their manifestation. Is a lesbian who is unfairly passed over for a promotion because she is seen as "too aggressive" experiencing sexual or gender discrimination? Such a case reminds us that our decision-makers simply used their own discretion. Their discretion, however, was misguided at best.

Sponsors re-introduced an intentionally weakened bill without popular internal support. In other words, the Democratic leadership made significant "trade-offs" for legislation that would have been begged through a reactive Congress only to be dead-upon-arrival at the President's desk. The widely-accepted rationale underlying the "Human Rights Campaign approach" essentially negotiated the substance of the law—this may have been convenient or arguably popular, but it does not make good policy. Are we so impatient (or desperate) for a legislative victory that we are willing to neglect our own welfare?

I believe that the LGBT movement is gaining strength in a way in which it is difficult to see why politicians would forfeit potential victories without allowing us to at least exert our political power. Our national conversation deserves accountability toward two groups. First, our so-called Democratic and Republican allies need a firmer conviction about the value of our rights. More important though, gays and lesbians need to be more accountable to our transgender friends and companions. Driven by fear, partisans calculated to concede entire communities in the heat of unwise opportunism. This is an ultimately losing strategy in the game of identity-politics. To be sure, past gay and lesbian leadership does not "cash-in" for an ENDA exemption today. We deserve consistent, courageous and fair leadership so that we may realize and enjoy similar victories together in the future.

The ENDA debate also served as a personal wake-up call. Most gays and lesbians need to become better transgender allies. Inspired by people close to me, I had committed myself to understanding, but little action. I can and will do better. We begin by listening closer to transgender voices on employment non-

discrimination, and issues unique to the multi-gender community. Listening does not come in the form of breaking promises or placating rhetoric intended to hide dirty laundry.

In a twist of irony, a bill about non-discrimination exposed and incriminated our very own. ENDA is the lesbian, gay, bisexual and transgender movement's canary; a warning that we should positively shape our future together or prepare for it apart. Simply put, gay and lesbian leaders need to make a real commitment to transgender and non-gender conforming people or welcome a new political force. Our common values are rooted in our commons struggles, yet we must remember these values when tested or resolve to forge forward separately. ♠

...this may have been convenient or arguably popular, but it does not make good policy. Are we so impatient (or desperate) for a legislative victory that we are willing to neglect our own welfare?

Is a lesbian who is unfairly passed over for a promotion because she is seen as "too aggressive" experiencing sexual or gender discrimination?

## Sorting Out Sex & Gender...

(Continued from page 5)

against trans rights activists, in order to prevent passage of key legislation, like the Employment Non-Discrimination Act and the Local Law Enforcement Hate Crimes Prevention Act. They are successful in this because the people running those mainstream organizations, and many of their members, have bought into the belief system, based in sexism, that there is something morally wrong with stepping outside of prescribed gender roles.

Many mainstream gay and lesbian folks will agree that people should be allowed to identify or express their gender in whatever way they want to. But taken to another level, where legislative politics come into play, the risk seems too great. They believe they have finally convinced society that "gay people are the same as everyone else; they just have relationships with people of the

(Continued on page 7)

## Sorting Out Sex & Gender...

(Continued from page 6)

same sex". The same old fear is that by including transgender people, in legislative efforts now rather than Pride marches, that the stigma of gender variance will prevent passage of that legislation, and thereby leave them open to continued discrimination with no legal recourse. The harsh irony is that when this legislation leaves out gender expression and identity, harassment and discrimination against gay and lesbian people will still be legal, as long as it is framed in terms of other behaviors, like not following office dress codes or claiming that someone's "flamboyant" behavior was causing a distraction for coworkers.

Trans rights activists and gay and lesbian rights activists must both work to understand how neither is better off on their own, because the weapons used against either group can, and will, be used against the other, just as they are used against women. As the old adage goes, no one will be free while others are oppressed, and perhaps it is even more true when looking at issues of gender and sex. ♠

If you'd like to know more about the intersections of sexual orientation and gender check out these websites:

This is a very extensive history of transgender people in the 20th Century: [www.jenellerose.com/htmlpostings/20th\\_century\\_transgender.htm](http://www.jenellerose.com/htmlpostings/20th_century_transgender.htm)

AngryBrownButch is an excellent blog where I learned about the NY Dyke March politics:

[www.angrybrownbutch.com/2006/06/22/aint-i-a-woman/](http://www.angrybrownbutch.com/2006/06/22/aint-i-a-woman/)

This is an amazing transcript of a lecture given in 2003 by Michelle O'Brian: [www.deadletters.biz/feminism.html](http://www.deadletters.biz/feminism.html)

## Upcoming Events:

- March 31, 2008 - **TS Ladies Talk** in Norfolk is hosting a panel featuring 2 recognized & titled veterans of the MMI, National Icon, and Renaissance pageants and 5 contenders for the upcoming MBA titles, to discuss their experiences and answer questions from the audience. Panelists will take up to 2 questions per attendee. Starting at 6 pm; dinner is provided! Come to TACT at 9229 Granby St., Norfolk, VA 23503.
- April 1 - 5 2008 - **IFGE 2008** in Tucson, AZ at the Doubletree Hotel. This year's theme is "**Toward a Greater Diversity**". It will be co-hosted by the Southern Arizona Gender Alliance. There will be numerous seminars and workshops on various trans subjects, free time for networking, fun events, and a gala banquet on Saturday night. Check [www.transeventsusa.org/ifge](http://www.transeventsusa.org/ifge) for more details.
- May 29 - 31 2008 - **The Seventh Annual Mazzone Center Trans-Health Conference** in Philadelphia, PA. This year's theme is: "**Honoring Our Past, Envisioning Our Future**". Focusing on issues, needs, and experiences of trans and gender-variant people with regard to the health of our bodies, lives, and communities. Everyone concerned is welcome to attend, including: members of the trans and gender variant communities, partners, allies, family members, healthcare and social service providers. Go to: [www.trans-health.org](http://www.trans-health.org) for more info.
- June 14, 2008 - **The 10th Annual Miss Models Inc. National 2008**, at the ODU Theater in Norfolk, VA. Honoring "The MMI

## Announcements:

- The Virginia Anti-Violence Project (VAVP) **NEEDS YOU** to participate in a **community survey** about issues of violence in the lives of lesbian, gay, bisexual, transgender, and queer Virginians. The survey can be found at: [www.equalityvirginia.org](http://www.equalityvirginia.org) VAVP is a project of the Equality Virginia Education Fund and works to address and end violence in the lives of LGBTQ Virginians. For more information, contact Quillin Drew at 804.643.4816 or [avp@equalityvirginia.org](mailto:avp@equalityvirginia.org)
- The Virginia Department of Health maintains a **Transgender Resource & Referral (R&R)**, listing resources for transgender people all over the state. Click [here](http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/Hotline/TransgenderRRList.pdf): [www.vdh.virginia.gov/epidemiology/DiseasePrevention/Hotline/TransgenderRRList.pdf](http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/Hotline/TransgenderRRList.pdf) to access the PDF. If you are a provider and you'd like to be added to the R&R listing, click [here](http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/documents/pdf/TrangenderRRForm.pdf) to download the form: [www.vdh.virginia.gov/epidemiology/DiseasePrevention/documents/pdf/TrangenderRRForm.pdf](http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/documents/pdf/TrangenderRRForm.pdf).
- **Upcoming Topics for the Transgender Health Newsletter:**
  - Spring** — **Our Families**, deadline for submissions is **April 28**.
  - Summer** — **Building Trans Communities**, deadline for submissions is **June 23**.
  - Fall** — **Trans Youth**, deadline for submissions is **September 22**.Is there a topic related to transgender health that you'd like to see covered in an upcoming issue? Suggestions for topics, along with readers' input via letters to the editor & articles is wanted and needed! Please note, articles should be limited to 2 pages, single spaced, 12 pt font. Contact the editor, Ted Heck, via email at [Ted.Heck@vdh.virginia.gov](mailto:Ted.Heck@vdh.virginia.gov) or phone at (804) 864-8012 if you'd like to contribute in any way.

Change", Miss Tarena De'Shay McCray. Competition categories include Presentation in Any Shade of Yellow, Runway, Talent, Creative Evening Gown. Doors open 6 pm, Pageant begins 7 pm. \$25 cover, refreshments provided!

- August 30 - September 1, 2008, **Gender Odyssey**, a national conference focused on the needs and interests of transmen, genderqueers, FTMs, and other gender-variant people; the only long-standing national conference with a trans-masculine emphasis. **Open to all**, including families, partners, & allies. For more info, go to: [www.transconference.org/](http://www.transconference.org/).

## Ongoing Events

- 1<sup>st</sup> Friday of every month: **TGIIF** stands for **TransGendered Interested In Fielden's Friday** — Doors open at Fielden's (2033 West Broad St. in Richmond) at 11 pm. Email [fieldensva@aol.com](mailto:fieldensva@aol.com) for more information. Past TGIIF nights have featured: TG theme movies, special guest speakers, personal stories, makeup workshops, feminization workshops, and a professional photographer.

Would you like to see an announcement or an upcoming event listed here? Contact Ted Heck at 804-864-8012 or [Ted.Heck@vdh.virginia.gov](mailto:Ted.Heck@vdh.virginia.gov). The deadline for the next newsletter is April 28, 2008!

**Brought to you by  
Virginia's own  
Transgender Task  
Force**

For more info or to get  
involved, contact Ted Heck:

109 Governor Street, Rm. 326  
Richmond, Virginia 23219

Phone: 804.864.8012

OR

[Ted.Heck@vdh.virginia.gov](mailto:Ted.Heck@vdh.virginia.gov)

**Building healthy  
transgender communities!**

The Virginia HIV Community Planning Committee identified transgender persons in Virginia as a priority population. To identify the health related needs of transgender persons, focus was turned to conducting research, increasing understanding and knowledge of transgender communities in Virginia and developing transgender sensitive and specific HIV interventions and health care. From this, the Transgender Health Initiative was born with leadership from the Transgender Task Force (comprised of HCPC members, transgender individuals, community members and researchers). The goals of the Task Force are to:

- 1) Inform effective training to promote culturally competent health care to the transgender communities;
- 2) Develop and maintain a statewide resource guide to be distributed across the state to facilitate increased access to care for Transgender individuals;
- 3) Develop and implement HIV prevention programs for the transgender community.

**VDH** VIRGINIA  
DEPARTMENT  
OF HEALTH  
*Protecting You and Your Environment*

The Virginia HIV Prevention Community Planning Committee (HCPC) includes people from various backgrounds, expertise, and life experiences coming together as one to aid in preventing the spread of HIV/AIDS in Virginia. Transgender persons are an essential part of the Virginia HCPC.

**Have your voices heard!** If you or anyone you know is interested in applying to the Virginia HCPC or have any questions, please call Elaine Martin at (804) 864-7962 or email at [Elaine.Martin@vdh.virginia.gov](mailto:Elaine.Martin@vdh.virginia.gov).

## Community Resources

To have your resource listed here, contact the Transgender Health Newsletter at the number or email address listed above on this page.

**The Birdcage** — Richmond MCC's transgender support group. Meetings on 4th Friday of each month 6:30pm - 8pm in the Parish House, 2503 Park Ave., Richmond. We are here to help with all aspects of crossdressing, transgender and transsexual issues. Contact us through the church at (804) 353-9477.

**DC Area Transmasculine Society (DCATS)** — A peer facilitated social and support group in the D.C. area for anyone on the FTM spectrum. For more info, go to <http://www.dcatsinfo.com/> 2<sup>nd</sup> Sunday of each month 5 pm — 7 pm at the Whitman-Walker Clinic, 1407 S Street, N.W., Washington, D.C. Call (202) 745-6171 for directions.

**James River Transgender Society** — A peer-facilitated support group in the Richmond, Virginia area for anyone on the MTF spectrum. 1st Friday of each month, 6 pm — 8 pm. Call (804) 358-6343 or go to <http://www.jrts.org/> for directions or other info.

**Metro Area Gender Identity Connection (MAGIC)** - a peer-facilitated support group for MTF and & FTM transsexual people. Every 3<sup>rd</sup> Friday at 8 p.m. at the Falls Church Presbyterian Church, Broad Street & Fairfax Street, Falls Church. Email [magic@janisweb.com](mailto:magic@janisweb.com) or visit <http://www.janisweb.com/magic> for more info.

**New Life Transgender Outreach** - A social, educational, and support group for all transgender people, friends, and family. We meet the first Saturday of each month at 7 PM at New Life MCC, 5701 Thurston Avenue in Virginia Beach. Call (757) 460-5805 for more info or go to: [www.newlifemcc.net/newformat/transgender](http://www.newlifemcc.net/newformat/transgender).

**Richmond Transformers** — A peer-facilitated social and support group in the Richmond, Virginia area for anyone on the FTM spectrum. 2<sup>nd</sup> Tuesday

of each month, 7 pm — 8:50 pm at the Fan Free Clinic, 1010 N. Thompson St., Richmond, VA. Call (804) 358-6343 for directions or other info.

**Roanoke Guys Night Out** — A social group for FTMs/Genderqueer/Masculine-ID'd persons assigned female at birth. For more information email [baselinerecordlabel@yahoo.com](mailto:baselinerecordlabel@yahoo.com) or go to: <http://www.myspace.com/transguysnightout>

**SW Virginia Transgender Support** — A peer-facilitated support group for MTF transsexual women in the Roanoke area. This group is specifically for those who have transitioned, those in transition, or for those wanting to start. Email [sweetbrandigirl2004@hotmail.com](mailto:sweetbrandigirl2004@hotmail.com) for more info.

**TG Clinic at the Fan Free Clinic** — Free transgender-specific healthcare for anyone in Virginia, including hormone therapy, HIV testing, and primary care services. Every Tuesday 6 pm to 9 pm, 1010 N. Thompson St., Richmond, VA. Call (804) 358-6343 and ask to speak to Linda Kendall or Zakia McKensy for more info.

**TS Ladies Talk**— A peer-facilitated support group for MTF transsexual women in the Tidewater area. For more info, call Vega at (757) 575-7690 or Mocha at (757) 235-4874. Every Monday, 6 pm — 8 pm at Tidewater AIDS Community Task Force, 9229 Granby St., Norfolk, VA. Call (757) 583-1317 for directions or other info.

**Transgender Education Association (TGEA)** — Celebrating over 25 years of support to the D.C. area TG/TS/TV/CD communities. Meetings are the 1<sup>st</sup> Saturday of each month. Email [TGEA4U@yahoo.com](mailto:TGEA4U@yahoo.com) for more info or visit <http://www.tgea.net> on the web.