

GLBT Wellness Transgender Focus Group

Co-facilitators: Anne, Ben; Cathy Collett taking notes

4 participants: 3 female to male in transition; 1 male cross-dresser –

What is wellness to you?

- Not having to worry about those who know about my transition – and what they're thinking – people aren't really overt, but it's there and you feel it
- Being physically active – has added a whole sense of self and helped me feel good and strong and manage stress; also hormone changes have made me more sensitive to my body
- Having a good support network in place in case I go into crisis –
- Having a group of people who are in the same place as me and who I can talk with about good services, about being a woman on the outside, about being a woman on the inside
- Finding the right service providers who I don't have to educate because they know about transgender issues; or who are open to taking the time to learn what they need to know to work with me. Particularly:
 - Health services – primary care
 - Affordable counselling
 - Good endocrinologist

What hasn't worked well – what needs to change?

- **Finding Service Providers Who are Educated about Trans Issues:**
 - I wait way too long before going to the doctor
 - I have to educate all new service providers I see – there's not much information out there that's good, solid and truthful; I've run across a couple of doctors that are willing to be consulted by other docs, but few doctors take the time to call for consult. They need to know:
 - Difference between gender and sex, what is transgender and what is transsexual
 - Hormones, hormone regimens, blood tests – what to look for, various ways to transition, updates on legislation
 - Docs seem afraid to specialize – fear their practice will be overwhelmed; most docs with good track records in town have closed practices
 - We could use a GLBT wellness centre with a training bureau for service providers; it might have one or two nights where practitioners serve transgendered community; one place to go for info. "A GLBT Wellness Centre would be a dream come true, where people could be informed enough to help".
 - This is an issue for both F2M and M2F including those who are pre-, mid and post-transition
 - In Ontario, there's the Clarke to support transitions, but their criteria are so rigid that most people don't go there, and so try to piece together their own support system. You're never sure you're getting quality care or sound advice. Some people seem to

move too quickly through the process of physical change – if they have the money they move – it takes a while for them to catch up mentally. They probably can't stand the discomfort of feeling awkward with the bodies they're in. On the other hand, some people get delayed in transition for longer than they would like – the example was given of someone who waited 7 years for a psychiatric certificate from the Clarke Institute.

- Those of us who choose to transition become very dependent on the medical world, in a way that's different from others who are GLBT
- **Making Transition in Timely Way**
 - I would have transitioned as a teenager if the environment was there – I thought I had to go to Sweden – it took a really long time to get the information
 - We need role models;
 - I sat on it for two years – I was afraid to lose my community (of lesbians), I had been very involved; I lost friends who couldn't cope with me being a man.

How do you explain the high rates of depression reported in survey?

- The depression numbers are real as far as I can see
 - I know people who've committed suicide; been stuck in transition for years; regretted their treatment and surgery after the fact; been very lonely and isolated; cut themselves off completely from support
- Loss is part of transition –
 - My partner and I were previously lesbians, no longer able to attend lesbian-only events – loss for both me and my partner; my partner still is very attached to her identity as a lesbian and to participating in lesbian events
 - I lost friends, community “Loss is a huge thing – that's why we need the emotional support”
 - We don't really fit anywhere now – we're seen as a heterosexual couple so we're perceived as threatening to the queer world
 - There's cost: financial, emotional, loss of friends, family.
 - The financial cost is significant – OHIP doesn't pay for most surgeries
 - In some ways it's easier to limit contact with people who knew me as the other gender – less baggage
- Fear of exposure leads to isolation, guarding privacy and secrecy, and, for some, leading a double life:
 - Cross-dresser – “I'm not prepared to lose my family or job, so I only dress as a woman part-time. My wife knows and I go shopping with my daughter dressed as a woman sometimes, but my son doesn't want to know me dressed as a woman. I play hockey with the guys and they don't know. They don't know at work. On the street when I see someone I know and I'm dressed as a woman, I pretend I don't know them and hope they don't recognize me – I try to disguise my voice”

- I felt secretive in the lesbian community – I wasn't able to be myself
- The stress of “coming out” again and again
 - Getting through each day takes all my energy – I don't have it to give back to community to organize a group (we're lucky to have Joanne in Gender Mosaic – she does a lot of organizing and advocacy)
 - Many of us come out first as queer and then as trans
 - As I was transitioning, I had to tell my dentist, my chiropractor
 - My health card has an “F” on it – it's a horrifying medical experience having to show ID
 - Every day can be a terrifying experience – “what if I have to show my identification where it's not safe or desirable to come out”
 - The police did a training session with Gender Mosaic, and they told us not to try to hide anything when stopped by police
 - If I go to emergency room, I always take my partner to back me up
 - When I meet new people, I usually don't tell them the whole story “I'm not going to say who I really am, because there's a cost”
 - It would help for me as a cross-dresser, to have two I.D.'s
 - Going to the bathroom is uncomfortable – at work, where they know my history, I hold it all day; if I know someone else is in there, I don't go in
 - I know I'm going to be passed over for a job because they want to give it to someone more “normal”
- Living in a world in which transgendered people aren't understood and are the brunt of jokes
- People self-harm (cut, bind themselves too tightly) as a way to have control over their bodies

What's needed – practical support?

- A group that is led by a skilled facilitator and a transgendered person; organized for anyone who identifies as trans, but with opportunity to cluster around what's needed
 - Some want info
 - Some want to talk about how to be outwardly
 - Some what to talk about internal
- A space to meet that isn't in someone's home
- Funding for the surgery – it's seen as a medical condition, why isn't medical treatment paid for

The survey found that while most people see the GLBT community as strong, few people felt part of it. How do you explain that?

- Trans people perpetuate stereotypes “lesbians just want to be men”
- “I see lots of racism in the community, and no access for people who are in wheelchairs – to me, the community doesn't care about everyone who is queer”
- I wish we could go anywhere we want, without people judging us
- Montreal is easier than Ottawa for acceptance

If you had a magic wand, what would you change?

- I'd make it so that everyone sees choice about gender as a normal part of developing identity – have books in school, public role models, so that when you hit puberty, you're aware of options and changing gender is seen as a legitimate way to choose your life. This way it would be easier to determine if medical intervention is necessary.
- Funding for treatment
- Get rid of bad publicity, bad images, desire to “isolate these people”