



Brought to you by Virginia's own
Transgender Task Force

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Transgender Health

Families of Trans People

Disclaimer: While this article seeks to be comprehensive, there is no way to cover all the issues around families of transgender people as thoroughly as this topic deserves. Please investigate the resources provided at the end of the article for more information or to find support services.

As for anyone, for transgender people, families can be either a source for the most difficult of problems or they can be the foundation of strength that gets one through when the rest of the world is hostile. Because of the societal stigma that trans people often face, the importance of the family and its impact on the individual can be significantly magnified. The issues faced by trans people with regard to family members is contingent, at least in part, on the type of relationship existing between them.

Parents

Usually the first relationship to influence a trans person around issues of gender is that with parents. Even before someone is ready to "come out", parents and other family members have been communicating their beliefs, values, and expecta-

tions around appropriate gender roles and expressions. Depending on what those beliefs, values, and expectations are, this can be highly stressful and upsetting, undermining one's sense of self worth, or it can be supportive and affirming. Even when parents do not have particularly rigid

attitudes around gender, they may still convey messages that pressure children to conform to traditional gender norms. Parental reac-

tions to deviations from traditional gender expression can have a considerable effect on that individual's decision to express him/herself honestly or suppress and conceal a cross-gender identity, often with a negative impact on that individual's mental health and quality of life.

Coming out or simply expressing cross-gender behavior in any setting carries with it the concern that the individual could face rejection, abandonment, or even violence. These are difficult possible outcomes to consider from anyone, but when this fear is centered around a close family member such as a parent, it can be quite formidable.

When parents are able to

accept and support a younger child (under 18 and still under their care) expressing a cross-gender identity, even if they might have initially struggled with this, the focus then becomes *how* to support the child. The difficult decisions for parents in this situation might include, a) what to tell service providers, teachers, friends, and family members, and b) what kind of care is appropriate for the child, and c) how to get it. Parents whose adult child tells them they are transitioning later have many more years of conditioning with the old name and pronouns to overcome. No matter the age of the child who is facing issues of gender variance, there is also a need for the parents to have safe sources of support and accurate information for themselves.

A person's decision to go through physical and/or social gender transition often causes parents to feel that they are losing their child, and even though they may be simultaneously gaining a child of a different gender, they have a certain amount of grief to go through. This can include any or all the feelings usually associated with grief, including sadness, hurt, anger, denial, and guilt. Guilt is especially common as parents wonder if they might have done something to cause their child's gender variance.

(Continued on page 4, *Families of Trans People*)

Inside this issue:

| | |
|--|----|
| Families of Trans People | 1 |
| Intersections of Aging, Trans Identities & the Family | 2 |
| Online Resources for Families of Trans Folks | 5 |
| Group Spotlight: Transition Your Life Clinic Opens in Norfolk! | 6 |
| New Blog Brings Richmond Out of the Closet | 7 |
| From the Editor: Some Thoughts About Families | 8 |
| Announcements & Upcoming Events | 9 |
| Community Resources | 10 |

Inside: 4 Different ways YOU can get involved:

- Join the Transgender Task Force! See p. 8 for contact info.
- Join the Virginia HIV Community Planning Group. Contact Jennifer Flannagan at (804) 864-7962 or Jennifer.Flannagan@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!

Graceful Exits: Intersections of Aging, Transgender Identities and the Family/Community

Tarynn M. Witten, PhD, MSW, FGSA

Why Bother with Elder Transpersons and their Families?

Hypothetical population estimates of elder transgender persons (those 65 years and older) place the number for the United States at one million. This is most likely an underestimate as it does not take multi-cultural identities into account. It is therefore likely that we will continue to see a growing number of elder transgender persons in the US population and worldwide. In addition, given the growing number of younger individuals who are choosing to identify in the continuum of trans-

gender or as queer, it is likely that we will see a growing number of trans elders who are far more diverse in their gender self-expression than the particularly binary expressions of gender that we see in the current trans-identified elder population. How do these facts impact the family containing an aging trans-identified person? Consider the following quotation from the author's field study work:

He was my grampa [grampa is a 69yr old MTF, pre-op, living full-time as F]. Now I don't know what he is. My mom says that he's a sinner and that he's gonna go to hell! I don't want him to go to hell. I wanna see him in heaven. It makes me cry when I say my prayers at night.

Structure of Families

Elder trans-identified individuals must interact with a complex social network that includes biological families, families of choice, friends, and allies, as well as community support in the form of elder-care agencies, support groups, and institutional organizations such as Medicare, Medicaid, the Military, and others. In addition to managing the

effects of having a trans elder in the family, families may be dealing with divorces, adoptions, separations etc. It therefore follows that many more individuals are involved in the lives of the trans-identified elders than the trans elders themselves.

Like the non-trans-identified population, the trans-identified population may evolve in very similar ways. However, the non-traditional combinations of body, sex, gender-identity and sexuality leave open a variety of social relationships that are not traditionally available among non-trans population members. In many circumstances, isolation from the family is possible and not uncommon.

Placement of the Trans-elder within the Family Structure

Placement of the transgender person within the family structure is also important. Is the transgender elder a parent? A grandparent? A step-parent? Are there non-trans-identified elders for whom the trans-elder has responsibility? Placement within the family structure may also have legal ramifications for inheritance in cultures that see inheritance as going to the oldest male who, in transition-ing, now alters the birth-by-sex order and thereby changes the inheritance order.

Substance Abuse, Aging and Trans-identification

Substance abuse in the elder transgender population is not well-documented, but anecdotal evidence suggests that smoking and drinking are significantly

elevated in this population. The interaction of these two behaviors can lead to significant problems for the trans-elder and subsequently for the family as well.

Living Arrangements

Addressing living arrangements for elder trans-identified individuals is not a trivial problem. Literature has shown that living environment is strongly associated with quality of life. With many younger trans persons homeless, aging on the streets will create a population of individuals who will likely be in need of significant medical, social, and living support.

Social Support Factors

Social support is a key concept in social gerontology; there is significant empirical evidence of its relationships with health, well-being, and quality of life in old age. At later stages of life, most social support typically comes from family, friends, and allies, along with healthcare and religious organizations. This means it is important to understand how others interact with and address the consequences of being associated with a trans-identified elder.

As an example, consider a married male-to-female

transsexual who, seeing his life shortening, decides to finally transition from male to female. The wife must navigate a large number of challenges in addition to her own feelings about the transition. If there

are children, dealing with their reactions to the transition along with their response to the transitioning parent must be navigated. Should grandchildren be involved, this could lead to denial of access for the grandmother if the children's response to their father's transition is negative.

(Continued on page 3, *Trans Elders & Families*)...

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Continued: Trans Elders & Families

(Continued from page 2)

Some spouses or long-term partners of trans-identified persons will choose to maintain the relationship as their partner changes gender presentation, genital sex, or both; however, many others will not. Families can become separated over gender changes resulting with children who no longer speak to the transgender parent.

Jacob is a 45 year old Caucasian male whose 42 year old spouse Mary has refused to see her father (a 75 year old male-to-female transsexual who transitioned approximately three years ago). Additionally, Mary has refused to let their children see their "grandfather." Jacob is open to having a relationship and feels that it is important for the children (ages 9yrs and 11yrs) to see their grandparent. The children wonder "where is grandpa?" Moreover, they have no idea of what has actually happened as Mary will not discuss the situation with them. However, he is forced to go along with his spouse's wishes. This has created multiple layers of stress for the family.

Older couples who do choose to maintain a marriage or partnership may need to "redefine" their relationship as both actual and perceived views of the relationship, from within the family and outside could alter their relationship dynamics as well as their use of family and community resources. Moreover, the relationship may not be public knowledge but it must now be explained in the end-of-life stage of the spouse.

Depending upon the partner's desire to stay in the relationship, economic factors will need to be navigated. How the partner deals with the public view of her/his relationship could obviously add to an already strained set of relationships. A wife's menopause, could further add to an already very complex scenario. While the state cannot force a divorce, should it happen, the partner stands to lose many marital and inheritance benefits. This could have a potential

impact on her/his financial status and thereby have significant impact on health status, and quality and length of life. The partner may also see a reduction in social support network as common friends no longer interact with him/her. Furthermore, embarrassment over this situation

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might cause withdrawal from commonly used institutional resources such as church groups, women's/men's organizations and other community resources.

Thus, reduction in such social support networks would also lead to a potential increase in health problems and a reduction in quality and length of life. There is little literature on the reverse situation, a husband losing a wife to FTM transition in later life.

HIV/AIDS, Aging, Transgender Identification and Family

HIV/AIDS status can also impact the family. Second adolescence is an oft experienced phenomenon among early stage trans-identified individuals. Elders of the trans community were not trained in today's modern-day safer sex methods and will often fail to use protective methods. Given the growing incidence/prevalence of HIV/AIDS in the transgender-identified population and given that the over 50 years old population is a rapidly growing population of HIV positive individuals, it is critical that elder trans-identified individuals learn safer sex methods as soon as possible. However, the implications for the family are obvious. The stigma of having an HIV positive family member and the stigma of having a trans-identified elder in the family, along with any other age-related problems, can elevate family stress levels and cause isolation from normally utilized resources. These effects are further magnified by racial and cultural factors. Family members may be forced into relationships with organizations and individuals for

which they are entirely unprepared and with whom they are significantly uncomfortable; for example, having to deal with a trans-HIV support group or having to take the elder to an HIV clinic.

Elder trans-identified persons often become isolated from their "marital" family and perhaps from their former social support network. For those individuals who have chronic illnesses and who need some form of care-giving interaction, this can set up a conflict for the family or mainstream care-giving organizations who may believe that such things as sex/gender changes are a "sin" or who are simply uncomfortable with such changes. Additionally, the family members - despite their difficulties - may still wish to care for their trans-elder family member.

Multiply Stigmatized Groups

Discussion around aging typically focuses upon the typical male - female and white - black divisions. When dealing with trans-identified individuals, it is important that we bring multiply stigmatized, marginalized, or handicapped individuals to the foreground. We have already mentioned the intersection of HIV/AIDS status with aging and trans-identification. However, there are other possibilities. For example, transgender-identified individuals who grow old in prison represent a multiply stigmatized group. Developmental disabilities, mental retardation, and/or being a member of the GLBT population can also be a challenge.

CONCLUSION

Future generations of trans-identified individuals will bring further complexity to the construct of family, particularly as boundaries continue to

blur the current dominant social constructions of sex, gender, and sexuality.

Transsexuals, transgenders, cross-dressers and other persons whose gender expression or identification is other than the "traditional" Western binary model of

(Continued on page 7, *Trans Elders & Families*)

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Continued: Families of Trans People

(Continued from page 1)

Additionally, many parents will also have feelings of shock, shame, and understandably, significant fears for the safety and well being of their child. They may worry about the child's future with regard to such things as employment and ability to find fulfilling relationships.

Siblings and Extended Family Members

Siblings and extended family members can often be as central to an individual's life as a parent, and their love and acceptance, or lack thereof, can also have a strong impact. In some situations, a sibling or extended family member can act as an ally in dealing with parents, particularly if the transgender individual has a very positive and close relationship with them. A parent can also play the role of an ally to model support and acceptance to other family members.

One common issue that trans people encounter with family members is the fact that, while the trans person may have been consciously dealing with these gender issues for years, perhaps going through therapy and attending support groups, if they have just recently come out to family members, those folks are now way behind the curve. There can be a huge gap between the trans person and the newly informed family members in learning about and emotionally processing the issues. It is very common for a transgender person to experience frustration and impatience toward family members for not "getting it" right away.

Children

Transgender people who have children have a whole different set of concerns. In addition to the fears of rejection and estrangement, if a trans person's child is under the age of 18, there is the very real fear that custody of that child could be challenged. Custody challenges are most likely to come from an ex-spouse, but they are also

possible from a parent. Fortunately, there is less legal precedent for a parental custody challenge, unless there is evidence of harm to the child.

Another worry is that the child will face discrimination if people are aware of the parent's transgender status. Just as children who are themselves trans, the children of trans people are at risk for being stigmatized because of their parent. Even if a child's parent's

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status is not known to others, the child's awareness of it can be a source of anxiety with the same fear of being discovered that a closeted trans person might experience. This is true because children's identities are so tied up with those of their parents, since they are (or have been) dependent upon parents for survival. A child facing these difficult issues could easily see the parent as the source of the problem rather than societal stigma and other outside forces, thus placing a strain on the relationship with the parent.

For very young children, under about eight or nine years old, a parent's transition may be very easy to accept, since children's belief systems, along with their understanding of who their parent is, are generally not rigid. Unlike adults, young children are not yet invested in beliefs about gender, nor are they concerned with whether their parent identifies as male or female.

What matters is the quality of the relationship between the parent and child, including such things as stability, safety, love and affection, and consistency. If these qualities exist already, then it is unlikely that the transition, by itself, will have any negative effect on the relationship.

In addition to having formed more definitive beliefs about gender and related concepts, as a child grows older, s/he will form more concrete ideas and expectations about who his/her parents are or should be.

Older kids and adult children are likely to struggle more with transition and issues of their parent's gender non-conformance. In addition to having formed more definitive beliefs about gender and related concepts, as children grow older, they will form more concrete ideas and expectations about who their parents are or should be. If a parent has worked especially hard to hide their gender variance, then the announcement about needing to transition could come as quite a shock and make it more difficult for children and other family members to accept. Children may fear they are losing their parent and react with sadness, anger, guilt, and other feelings associated with serious loss. It is important to appreciate that while these negative feelings are an understandable response toward a transitioning parent, many trans people hide their true identities, not due to any intent to deceive, but rather as a result of intense pressures to stay in the closet.

Trans persons' tendencies to be self-absorbed during transition could easily exacerbate those negative feelings. Children, because their identities are so wrapped up with their parents', are likely to be more strongly affected by this tendency to self-absorption than other family members, thereby placing further strain on these relationships, since it can feel like abandonment to the child who is experiencing less time and attention as a result.

Partners

The ways that spouses and other life partners of trans people are affected by an

individual's transition is complex enough for a book (or several books) in itself, but there are a few brief observations that can be made. In addition to the issues already covered above that can have a big impact on this relationship, such as fear of loss, societal stigma, and the partner needing time to catch up in

(Continued on page 5, *Families of Trans People*)...

(Continued from page 4, *Families of Trans People*)

learning about and understanding transgender issues, there is one particularly relevant matter.

For most partners, the significant other's gender expression will have an impact on his or her own self concept around sexual orientation, especially if it is changing extensively through physical transition. Unless the partner already has a bisexual identity, and is comfortable with that identity, he or she may be in the position of having to negotiate the meaning of this relationship with a new orientation, going either from a same sex relationship to a heterosexual one or vice versa. For many, this may be a deal-breaker; they may not be capable of romantic feelings toward someone in a different gender than what they are used to, no matter how much they may want to continue the relationship as it was previous to transition. On top of this difficult hurdle, many individuals will feel a sense of betrayal or resentment for being put through this test of their own identity.

Also, as with children, if the transitioning individual has worked particularly hard to keep his or her true identity hidden, the spouse or partner is bound to feel hurt by not having had this vital information shared previously. They may not be able to identify if their loved one has held back this information out of general distrust or a lack of trust in the partner specifically. With challenges like this, it is not surprising that many romantic relationships do not survive gender transition. Fortunately, the outcome does not have to be a story of loss, and there are a number of things that can be done to make happy endings more likely.

Proactive Steps

There are some things people can do for themselves in advance of disclosing to family members about their transgender status and/or intention to transition. Perhaps most important is to find some sources of support. A trans

person who has multiple sources of support outside their family is going to be better positioned to respond to family members' responses in a healthy way. A support group for gender variant people, whether it is a local meeting or an email list-serve online, is one of the best places to look. Having other people to talk to who are going through the same thing can be extremely validating and reassuring. A counselor or therapist can be another source of support, as long as this person has some experience and familiarity with gender non-conforming people. A good friend might be another essential support source, if they can be trusted to keep one's confidence.

Doing some research ahead of time to find out what resources might be available for family members is also a good idea. Look for local

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resources like support groups and counselors as well as books, websites, and list-serves that could be good sources. Just remember that family members may not be interested in accessing those resources, or it might take them a while before they are ready to take advantage of them. As the old saying goes, you can lead a horse to water...

Finally, remember that coming out experiences with family can vary dramatically, depending on many different factors including religious beliefs, cultural values, family dynamics, and history. Even when things don't go well at first, it is important to keep in mind that people are often capable of growth, and family members who might be negative and rejecting at first may eventually come around. However long it takes to get there, a family that is able to support its transgender member is bound to be enriched and strengthened by the experience. ♠

Online Resources for Trans People and Their Families

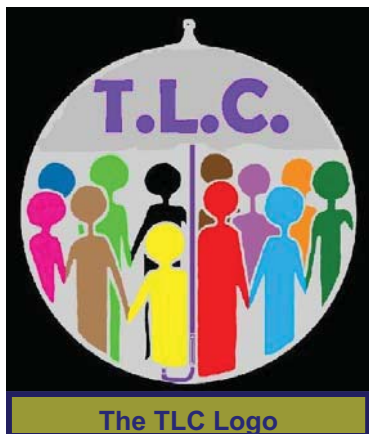
TransYouth Family Allies - TYFA empowers children and families by partnering with educators, service providers, and communities to develop supportive environments in which gender may be expressed and respected. <http://imatyfa.org/>

TransParentcy's - mission is to support the Transgender Parent, and their advocates (lawyers, mental health professionals, friends, family) by providing information and resources to diffuse and/or dispel the myths about any adverse impact being transgender/transsexual might have on one's children. <http://www.transparentcy.org/>

PFLAG Transgender Network (TNET) - focuses on support for transgender people and their parents, families, and friends; education on transgender facts and issues; and advocacy for equal rights for the transgender community at local and national levels. <http://community.pflag.org/NETCOMMUNITY/Page.aspx?pid=380&srcid=194>

TransFamily - provides support, education, advocacy, and outreach for the transgender community, families, friends, partners, and allies of all ages, through meetings, presentations, seminars, media outreach, and an emergency resource hotline. <http://www.transfamily.org/>





The TLC Logo

Group Spotlight: Transgender Care Clinic Opens in Norfolk!

Transition Your Life Clinic (TLC) opened its doors to its first patients on April 11, 2008. As a partnership between the AIDS Care Center for Education & Support Services (ACCESS AIDS Care) and Park Place Medical Center, the clinic brings a much needed service to the trans-

gender community in Hampton Roads. Modeled after the Fan Free Clinic in Richmond, TLC operates one day per week, every Friday from 1 to 5 pm. The clinic offers specialized care which allows transgender individuals to access hormone replacement therapy under medical supervision. More specifically, individuals are provided mental health screenings and medical services designed to support the choice to undergo HRT. Additionally, free and confidential HIV testing is available.

Efforts to bring a clinic to Hampton Roads began in early 2007 after the Programs Director at ACCESS AIDS Care, Irma Hinkle, had the opportunity to learn about the successes of the Fan Free Clinic. "After watching a presentation by Shawn McNulty (from Fan Free) and learning about the variety of untreated medical conditions found among the patients of the Richmond clinic, I knew at that moment that I wanted to create a local clinic."

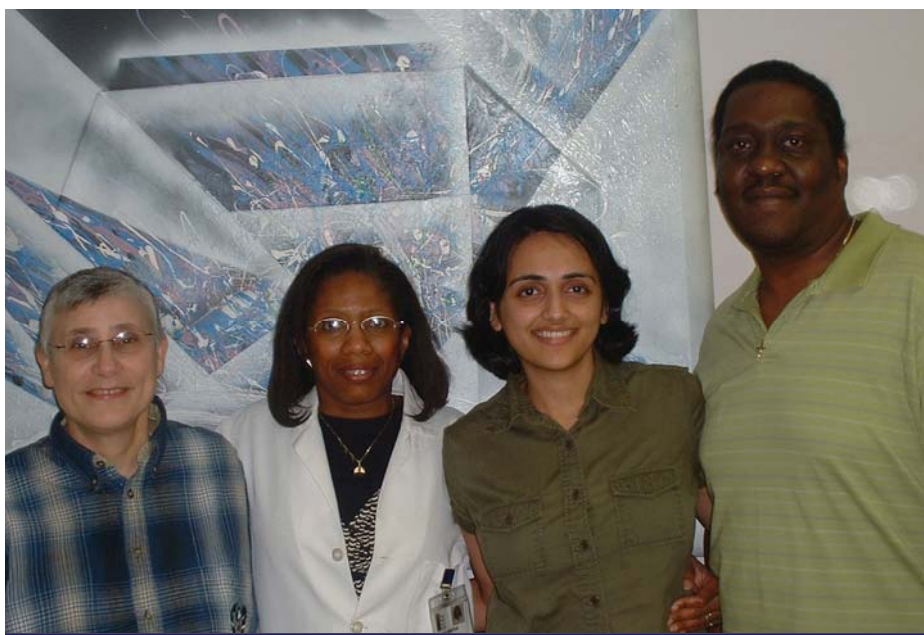
During 2007, ACCESS AIDS Care conducted focus groups with transgender women to assess their needs and the interest in opening a clinic locally. Overwhelmingly, trans women wanted culturally sensitive care in a place in which they felt comfortable and confident that their "business" would stay confidential, according to Hinkle. She stated that many participants were frustrated by what they perceived as obstacles to receiving hormone replacement therapy through a doctor, so a significant number of them had turned to buying "street" hormones.

Despite the obvious need, securing funding for the clinic was a challenge. Hinkle related finding that local foundations were not moved by the needs of the transgender community. "It was truly disheartening to speak to individuals from foundations who literally would say to us that they did not care." Funding was finally secured through grants with the Virginia Department of Health and the MAC AIDS Fund, both of whom understood and supported the goal of the clinic which is to ultimately improve feelings of self-esteem and self-worth among a population that often is marginalized and stigmatized by society. Research suggests that by having access to appropriate care that allows transgender people to live in the gender

in which they identify, they are more likely to take care of themselves. They get treatment for health conditions, and they take action to prevent HIV infection. In other words, it allows them to live longer and more fulfilling lives.

From April to December 2008, the clinic served 55 people, mostly transgender women. Twenty-four people consented to HIV testing. Seventy-eight percent of those served were prescribed hormone replacement therapy after being deemed eligible following completion of the mental health and medical assessments. As noted by one of the first patients to be seen, "...it feels good to go someplace and not feel out of place." "The staff make me feel so comfortable that I can joke around with them and be normal." Data collected on self-esteem demonstrated an increase in self-esteem among patients at the 3 month follow-up.

The staff members of ACCESS AIDS Care are pleased by the overwhelming success of the clinic during its first year of operation. Satisfaction surveys completed by clinic patients demonstrated a high degree of satisfaction with services. On a scale of one (unsatisfactory) to five (outstanding), the overall average satisfaction score was 4.84. Moreover, 33 previously undiagnosed medical conditions were identified within the patient population. Since the opening of the clinic, its medical provider has been interviewed by several local media outlets and ACCESS AIDS Care has spoken about the clinic to local GLBTQ groups and on college campuses. As an AIDS service organization that has provided holistic services for 20 years, the clinic is a perfect example of the agency's mission at work-- "to promote dignity and wellness for adults, families, youth, and children impacted by HIV/AIDS through quality support and prevention services so they may live healthy lives." ♠



Clinic staff when the clinic opened in April, 2008: Reg Richburg, Dr. Sandra Winstead, Mansi Masters, and Walter Backus

New Blog Brings Richmond Out of the Closet

Say hello to Richmond, VA's newest community blog. GayRVA.com covers social issues, news, happenings, and entertainment for the city's gay, lesbian, bisexual, and transgender (GLBT) population and its allies. Traditionally, with limited GLBT alternative media available in the region, GayRVA will provide an outlet to keep the community connected and interacting.

With help from local leaders, business owners, and citizen contributors, GayRVA.com will be an independent voice representing all sectors of a diverse community.

The Richmond blogosphere is on fire – last year, a study released by the Project for Excellence in Journalism ranked Richmond number one in the cities observed for quality news blog activity. Following cities with a larger GLBT population like Washington, D.C. that already have an active GLBT blogging community, the time is right to give Richmond a step forward.

Keep the conversation going. Visit www.gayrva.com for more info. Send tips, news, comments, and even pictures to gayrva@gmail.com. ♠

Continued: Trans Elders & Families

(Continued from page 3)

male or female represent a substantial, growing, but still invisible minority within the worldwide elderly population. Quality of life issues for the global transgender-identified community have only been marginally addressed within the medical and sociological literature. Attention to the needs of the transgender-identified community can be best served through an all-inclusive holistic approach. This approach must recognize the importance of, and be inclusive of, family in all of its traditional and non-traditional forms.

In most Western and many non-Western nations, transgender-identified persons must go through a great deal to survive. Those transgender-identified individuals who do manage to live long lives must have developed coping and survival strategies that were highly effective in the face of all that is against them. Understanding these coping and survival strategies can potentially benefit the normative population, particularly if these strategies can be extended to any individual in the mid-to-later stages of the life cycle. Understanding how transgender members of the community manage to live fulfilling lives can also help us to better understand the abilities of all human beings to deal with complex difficult situations and to resolve them in a fashion that can allow the individual to not just simply survive, but to also have a satisfactory quality of life. May we all grow older transcendently, gracefully, and tranquilly. ♠

For the full, unabridged article and complete references, please contact the authors at twitten@vcu.edu. Further information and articles are available at the TranScience Research Institute website <http://www.transcience.org> in the Research Archives section. If you are interested in participating in the 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.



TACT presents

A NIGHT ON THE HOLLYWOOD RED CARPET

Mr. and Miss TACT Pageant

A Celebration of Hollywood Legends

honoring the reign of Keera St. James Houston and Delmonte Ova King

May 24, 2009

Old Dominion University Theater

Buffet is from 5:30-6:30 and the Pageant begins at 7pm.
Applications may be picked up at TACT 9229 Granby Street, Norfolk, VA 23503
or for more information call 757-583-1317 and ask for Tim Welborn

Tidewater AIDS Community Taskforce

From the Editor: Some Thoughts About Families

Families come in many different forms. I remember when I was a kid, and I thought that my family was unusual because my parents were divorced, especially once each of them remarried other people, giving me two different sets of parents – four total! Well, it *was* fairly unusual in my middle class 1970s Richmond experience at the time. Maybe not so much so, nowadays.

However unconventional or traditional our families might be, they play an important role in all our lives. The people we grow up around become our models for how the world works. If we're lucky, they are our safety net for testing out life.

In lesbian, gay, bisexual, and transgender (LGBT) communities, families are particularly important. When you face prejudice and discrimination, you need all the support you can get. Sometimes though, for LGBT people, our families of origin (those into which we are born or adopted at an early age) fail us. Sometimes they are not prepared for who we are. They have been a part of this society which continues to have so much embedded stigma around sexual and gender diversity, and it is still not always easy to get past that. Sometimes our families of origin are even actively participating in the negativity and discrimination leveled against our communities. What a terrible burden to be rejected or even abused by one's own family for a characteristic that can't be changed, and yet it is not that uncommon a situation.

We do find solutions though. People create their own chosen families with members they might even refer to with familial titles or descriptions like sister, dad, cousin, etc. This is especially true for the drag houses, but it extends to other parts of LGBT communities as well. For example, trans men quite often refer to each other as brothers. Whether it's based in gay bar culture or lesbian softball leagues, many people's lives revolve around the activities of their particular posse because they know those folks are going to be there for them. Formally organized support and social groups can also help to fill this need. Groups in Virginia like TS Ladies Talk in Norfolk, Prime-timers of Central Virginia in Richmond, and PFLAG Roanoke serve many of the functions of families, providing support, validation, companionship, and guidance, among other things. It's no accident that calling someone "family" is code for saying they are non-heterosexual and/or transgender.

Families of all kinds are even more important during difficult economic times. There have been lots of news stories lately about people moving back into their parents' houses because they've lost a job, their house, or both. Family members can provide all kinds of other support as well, including such things as rides to a doctor, informal loans, childcare, or just a shoulder to cry on. When family members are not available to provide those kinds of support and assistance, the door can be opened to any number of perilous situations as people turn to public assistance that may not understand their needs, to substance use to dull their pain and loneliness or, worse, to the streets for survival.

With that in mind, I say this. Whoever your family is, whether they are your family of origin or a family you've chosen, find ways to appreciate and support those family members who have been there for you. Mother's Day and Father's Day are coming up and they're both great opportunities for that. Or look around for someone who might be struggling and find a way to reach out. What goes around comes around. ♡

To learn more about drag houses and ball culture, check this link:

http://en.wikipedia.org/wiki/Ball_culture



WE TOLD YOU!

THE WAIT WAS OVER!

MMI

"MMI FEVER"

SATURDAY, JUNE 13TH 2009
THE HISTORIC ATTUCKS THEATER
1010 CHURCH ST
NORFOLK VIRGINIA
IT'S STILL THE BEST \$25.00 BUCKS YOU WILL EVER SPEND!

Announcements:

- ACCESS AIDS operates the *Transition Your Life Clinic* with free specialized transgender care, including confidential HIV testing, health screenings, and prescriptions for hormone therapy 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. Appointments ONLY; no walk-ins allowed. Photo ID and Social Security Card Required.
- **Aggressive Magazine** is an unapologetic photographic celebration of the masculine woman and FTMs. 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. Available at <http://www.aggressivemagazine.com/>!
- **Upcoming Topics for the Transgender Health Newsletter:**
Fall — **Building Trans Communities**, deadline for submissions is August 21.

Upcoming Events:

- May 16, Mocha Café Raphael and Café Productions presents the 4th Annual **Mr./Miss Virginia Black Universe 2009**, honoring Delmonté Ova & Alvion Arnell, "The Essence of Supremacy", with special guests, Mr./Miss MBU 2008/2009, "Quintin & Tyra". Appearances also by the VBU former court! Location: ODU Theatre, 46th & Hampton Blvd. in Norfolk. Doors open 6 pm, \$20 cover, pageant begins 7 pm. Interested contestants should contact 757-822-4415 or cafeproductions05@yahoo.com.
- June 6, **Capital Trans Pride**, a one-day event on the Capital Pride calendar each year, dedicated to the Washington DC metro area transgender community. Past events have included workshops, seminars, addresses from notable community leaders, and presentation of the Engendered Spirit Awards. To find out more about this year's events, go to <http://www.capitaltranspride.org/>.
- June 11 - 13, **Philadelphia Transgender Health Conference** This year's theme: Different Paths, One Journey. The focus of this conference, the only one of its kind in the world, is on promoting transgender health and wellness in mind, body, spirit, and community. All concerned are welcome, including: members of the trans and gender variant communities, partners, allies, family members, healthcare and social service providers. Free/very low cost, with some scholarships available. For more info or to register, go to <http://www.trans-health.org/>.
- August 15, **National Nubian Stud+Femme Pageant '09**, honoring Romance R. St. James & Javia Divine at ODU University Theatre, at 46th & Hampton Blvd. in Norfolk. Doors open at 7 pm, pageant starts at 7:30. Categories: femme doll, male action figure, African wear, evening gown/formal wear, talent. For more info, call Jeanette at 757-646-1770.
- September 5 - 7, **Gender Odyssey**, an international conference focused on the thoughtful exploration of gender. **Open to all**, including families, partners, & allies. For more info, go to: www.transconference.org/.
- September 22 - 27, 19th annual **Southern Comfort Conference**, celebrating the Heroes in our lives! Vendors, authors,

Winter — **Trans Youth**, deadline for submissions is December 18.

Spring — **Fitness**, deadline for submissions is April 23, 2010.

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 or phone at (804) 864-8012 if you'd like to contribute in any way.

- 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 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/) to download the form: www.vdh.virginia.gov/epidemiology/DiseasePrevention/documents/

entertainers, and leaders from the entire spectrum of the trans community will be in Atlanta. The 5-day symposium is packed with seminars, activities, and excursions. If transgender is an issue in your life, you are welcome! For more information or to register, go to: <http://www.sccatl.org/>

- September 27, **Miss Black National 2010** — 8 pm sharp at Club Aqua, 1818 New York Ave., NE, Washington, D.C., 20002, honoring Sandra Onasis Lopez, Miss Black National Plus 2009. Categories: Presentation in any shade of blue gown, high fashion sportswear, evening gown, Q&A, and talent. Over \$1,500 in cash & prizes! Application fee \$175. For more info, call Theresa at 202-281-4394, Yarde at 202-251-0264 or Tony at 202-549-3631.
- November 20 - **Transgender Day of Remembrance** is set aside to memorialize those killed due to anti-trans hatred or prejudice. Held in November to honor Rita Hester, whose murder in 1998 kicked off the "Remembering Our Dead" web project and a San Francisco candlelight vigil in 1999. Since then, the event has grown to encompass memorials in dozens of cities across the world. Go to <http://www.gender.org/remember/day/> to learn more or to find a TDOR event location near you, and Save the date!

Ongoing Events

- 1st Friday of every month: **TGIFF** 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 for more information. Past TGIFF 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. The deadline for the next newsletter is April 28, 2008!

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

To be added to the newsletter email distribution list, or to get more info or get involved, contact Ted Heck:

109 Governor Street, Rm. 326
Richmond, Virginia 23219

Phone: 804.864.8012 - OR -
▶ Ted.Heck@vdh.virginia.gov

The Virginia HIV Community Planning Group (CPG) 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 CPG 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.



**Building healthy
transgender communities!**

The Virginia HIV Prevention Community Planning Group (CPG) 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 CPG. Have your voices heard! If you or anyone you know is interested in applying to the Virginia CPG or have any questions, please call Jennifer Flannagan at (804) 864-7962 or email at Jennifer.Flannagan@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/>. 2nd 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 3rd Friday at 8 p.m. at the Falls Church Presbyterian Church, Broad Street & Fairfax Street, Falls Church. Email 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. Call (757) 409-2568 for more info or go to: 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. 2nd 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 or go to: <http://www.myspace.com/transguysnightout>

Roanoke TRANSformation is a social support group for persons who no longer identify as the sex they were assigned at birth and have transitioned, are transitioning, or are considering transitioning. We meet on the

2nd and 4th Tuesdays of every month from 6pm-7:30pm at The Drop-In Center 369 Church Ave SW, Roanoke VA 24016. Meetings held on the 4th Tuesday of the month are open to Significant/Supportive Others. For more information call (540) 982-2437 or email dropcenter@aol.com.

Roanoke TRANSformation SOs is a social support group for Significant/Supportive Others of persons who no longer identify as the sex they were assigned at birth and have transitioned, are transitioning or are considering transitioning. We meet on the second Tuesday of every month from 6pm-7:30pm and with Roanoke TRANSformation on the 4th Tuesday of every month from 6pm-7:30pm, at The Drop-In Center 369 Church Ave SW Roanoke VA 24016. For more information on either group, call (540) 982-2437 or email dropcenter@aol.com.

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 elbrke01@yahoo.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, by appointment only. Call (804) 358-6343 and ask to speak to Linda Kendall or Zakia McKensey 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 1st Saturday of each month. Email TGEA4U@yahoo.com for more info or visit <http://www.tgea.net> on the web.

Transition Your Life Clinic — Free specialized transgender care, including health screenings, hormone therapy, and HIV testing, Fridays, 1 - 4pm, Park Place Medical Center, 3415 Granby Street, Norfolk, VA 23504. Appointments ONLY. Call (757) 640-0929 or email mmaster@accessaids.org.