

Bodies Lie



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Intro

“I want to live where soul meets body
And let the sun wrap its arms around me
And bathe my skin in water cool and cleansing
And feel, feel what its like to be new.”

-“Where Soul Meets Body” as performed by Death Cab For Cutie¹

“The personal is political and the political is personal.” – Feminist Credo

How human beings see the past has a lot to do with the lens through which each individual views it. I see mine through a prism; each face belongs to an identity that bends my perspective. I've worn many different labels in my lifetime: victim and survivor, daughter and son, a drop out and student, mental health patient and advocate. I am multifaceted. These identities color my memories, how I see and interpret the world and ultimately, myself.

I am a gendered, classed, and raced body. Each of these identities changes how I relate to others and my ability to move through the space I occupy in my corner of the world; however, for the vast majority of my life the body I inhabit has told a heinous lie about my gender. Over the last five years I have spent well over \$200,000 to correct the anatomical incongruence I was born with. I am a transsexual.

Dissecting the past thirty-four years of my life from the position I now inhabit -- the perspective of a successful, thirty-four year old graduate student who is white,

¹ Gibbard, Benjamin. “Soul Meets Body” as performed by Death Cab for Cutie. Plans. Atlantic Records, 30 August 2005.

heterosexual, male and also a post-operative female to male transsexual (transman or FTM) -- I'm able to appreciate the changes I have made in my life and the great sacrifices needed in order to make these changes bear fruit.

What I mean when I use the phrase “post-operative female to male transsexual” (or post-op FTM) is that when born, I was female-bodied. The doctor at Salinas Valley Memorial Hospital took a peek at my genitals and then indicated to my parents and the world that my physical, biological sex was female. He was incorrect; I was in fact a female-bodied male. This dissonance between body and soul has marked me. I viewed my anatomical incongruence – physical markings of femininity such as breasts and female genitalia – as a defect; I always knew I was wrong anatomically. Being a girl wasn't right for me. Though the genital anatomy would have been called “normal” in appearance and function it was incongruent with my psychological identification as male. If the biology-based theory accepted by professionals at the time was correct, the cause of this dissonance is attributable to my brain resembling more that of a biological male than that of a female.² Since technology at the time of my transition didn't allow the brain to be altered to fit the body, in the case of transsexuals, the body is altered to fit the brain.

I always identified as male. My gender identity was something I never questioned. My body told the world that I was female; it lied. Through masculinizing hormones and surgery, my body is becoming more congruent with my mind. Now the State of California and the United States government recognize me as male.

² This theory is difficult to be researched for it requires the subject to be dead in order for the brain to be fully studied and the difference located.

Validated on paper and in the flesh, the potential to be comfortable in my own skin is still such an abstract concept that my brain cannot quite fully grasp it. Inner peace is something I dreamed of but never quite dared believe I might actually achieve. It takes a very long time to overcome three decades of feeling wrong.

Gender variance is a difficult concept for people to wrap their minds around. Growing up I was taught that gender is a polarized male or female...either one or the other. An individual's gender assignment is based on bodies, the appearance of their external genitals at birth (birth sex). There are a distinct set of attire and behaviors (also known as gender roles) ascribed to male bodied or female bodied people based upon an individual's real or perceived gender that are socially deemed "gender appropriate". Luckily, education that espouses the idea of a gender binary is slowly beginning to change. Admittedly, the idea that gender is fluid with not just two genders but a wide spectrum of variation is a shock; It rocks people's respective worlds. Transsexual bodies challenge traditional notions of sex and gender. In order for transsexed bodies like mine to be accepted, such a shift in education is on gender is integral.

When speaking on my personal experience as a transman, I enjoy watching audience member's reactions. It allows me to see if I'm making them think. I like to watch their faces pitch and warp as they strain their brains trying to fit Intersexed people and transsexuals such as myself into the stereotypical gender boxes they have available to them. With people such as myself in mind, just how *does* one define male or female with just those two labels available? Like the old saying goes, if it walks like a duck, talks like a duck, and sounds like a duck, how can it be anything but a duck? Problem is, not everything is that simple when what you know and what you perceive clash.

The man who sits before them – me – looks, sounds, and talks like any stereotypical, red-blooded American male college student. His voice is deep. He has a goatee and long sideburns. His stride, posture and other mannerisms mark him as overwhelmingly male. He takes up a lot of space. Visual Searches for any female traits or behaviors come back negative. They wonder, "How could he have ever been female?" They're not alone; my Mom recently said she could not imagine what I would be like were I still female. Neither could I.

The vast majority of people have the luxury of never questioning gender, what it means, its potential fluidity, or how their own gender identity fits into the mix. As a result, normatively gendered people think gender is some concrete thing that cannot be altered; however, as with anything that is socially constructed, what it means to be a man, woman or the gender roles attributed to male-bodied or female-bodied people varies from culture to culture and generation to generation. A gendered role or presentation socially ascribed to a masculine or feminine body and considered appropriate in one space or time can easily be considered inappropriate in another. It wasn't so long ago that women wearing pants in public spaces was considered improper.

I recognize and value the malleability of gender. There was a conflict between my gender identity and birth sex that forced this awareness. For many cisgendered people, questioning that which they have always seen as unalterable – their own psychological identity as male or female – is uncomfortable. Understandably so. No one likes to feel uncomfortable. As a result, those who do dare to question their own maleness or femaleness (Intersexed and transpeople) are also perceived as a threat because we question the traditionally accepted gender binary and through the act of doing so,

question the gender of each person who has never had to consider that possibility. In that way, we are a threat.

For a person who feels threatened, their instinctive reaction is to get defensive, react in fear and sometimes hatred directed at what they don't understand. Prejudice or hatred directed at a particular individual or group of people united under an identity someone doesn't understand (such as ethnicity, sexual orientation, real or perceived gender, et cetera) is a product of ignorance or insecurity...guilt by association.

I personally wonder if those who react violently have not, at some point, noticed an abnormality in their own gender identification. They feel insecure in questioning some aspect of who they are. The introduction of another person who has had and addressed a similar issue puts them and their insecurity under the microscope. In order to hide their insecurity, they must overcompensate and overreact as a protective mechanism.

In this context fear is motivated not by misunderstanding, but rather because the perpetrator of violence understands all too well. To question who you are – especially a base or core identity as gender – is never a pleasant space to occupy.

There is also a tendency among normatively gendered people (asexual, heterosexual and homosexual) to confuse gender identity, sex, and sexual orientation. Although all three share points of commonality, they are three separate things. Considering how little dialogue actually occurs in contemporary, mainstream media and education regarding these topics, this confusion is not surprising. Many people use “gender” and “sex” interchangeably, erroneously thinking that gender is a more

politically correct or socially polite term than sex. In addition many believe that gender identity and sexual orientation are the same. They aren't.

In my opinion, figuring out where this practice began is akin to asking, "What came first, the chicken or the egg?" Frankly, what does it matter where it started? This practice should be stopped. In order to correct misinformation, there has to be a common, healthy discourse. In regards to sex, it must also be seen not as taboo, but a healthy form of human expression and life.

How can we as a society begin to talk about something when the basic definitions are unknown or diversely defined by the majority of people? How can we begin to question gender when many people don't understand what it is and share a common definition? Maybe it's in the best interest of those who have the most to lose in the United States today if gender isn't questioned to continue the practice of perpetuating misinformation. Here's the simple breakdown of sex, gender, and sexual orientation as I understand and will be using these terms.

Sex is one's biological, physical anatomy. It's how things look "down there." It's the possession of male or female genitalia (external and internal) or in the case of people who are Intersexed, a mix and match of the two. It can also be used to refer to intercourse or other intimate sexual acts, but I won't be using it in that context.

Gender identity is an individual's own psychological sense of being masculine, feminine, or androgynous regardless of their birth genitalia or sex. It is possible to be a masculine woman or feminine male. Gender identity influences what one wears and the gendered role someone takes. Secondary sexual characteristics like facial hair, voice, and other visual cues that others see are used to judge a person's sex when their external

genitalia aren't readily visible. These serve as social cues to convey this information to others. That decides what gender appropriate social practices and pronouns (such as he, she, his her, hir, ze, et cetera) are used socially.

Sexual orientation is decided by the gender, sex or sexes (in the case of bisexuals) of the people an individual is attracted to romantically. Romantic attraction causes those special tingles to happen deep in the pit of your stomach... whoever makes wonderful, warm, fuzzy fireworks happen when you kiss. Some examples of sexual orientation labels are gay (male attracted to male bodied people), lesbian (female attracted to female bodied people), bisexual (romantic attraction to both male and female bodied people), and asexual (the absence of romantic attraction). Among transpeople – as within any sub-group – the ratio of heterosexual (opposite-sex loving), homosexual (same-sex loving), and bisexual (both-sex loving) people varies.

The three terms defined above are all interdependent... they share some overlap. This commonality and the way they are or aren't taught and spoken of is the reason for the misconception that sex, sexual orientation, and gender identity are the same.

Now that we've set the terms straight and have established a common language, let's get down to business.³ Back to my story!

I've come so far in a very short amount of time! Although the physical aspect of transitioning from female to male is nearly complete, in reality my journey through life and living it is just beginning. I have no misconception of that fact. The act of writing my memoir has revived many memories: some good, some bad, and others so damned atrocious my mind had previously blotted them out in an effort at self-preservation. I

³ Consult Appendix 2, a glossary of additional terms and definitions.

guess it worked, for I'm essentially intact. I do admit that at times I still feel very broken inside.

I know how lucky I am and, therefore, think I should be grateful; however, I'm only human and consequently, a natural-born ingrate. I don't feel grateful! I'm pissed off that I was in pain for so long. Until recently no one noticed, understood, or acknowledged it or me. Despite all I have been through, many still deny it as a pathology, disorder or sickness. It was not "all in my mind".

Today I am living proof that dreams do come true. In the past week alone, I've heard people use words like "proud", "hero", "confident", and "positive" in describing me. It has taken years to correct the physical and emotional damage from a lifetime of stigma attached to being gender variant. Traversing the thin line between genders has been the catalyst for these changes in me. Transitioning literally saved my life.

I am living proof that bodies *do* lie. Correcting my anatomical incongruence by transitioning has allowed me to deal with the past and start my life at the age of thirty-two. Admittedly, it's been and continues to be the hardest and most rewarding thing I've ever done. I didn't invest all this time and money in myself because I was selfish; although still difficult, I can finally grudgingly admit I'm worth the investment. Without these personal and financial sacrifices, I'd not be here today.

Understand that I never claim to speak for anyone other than myself. I know that my experience – by virtue of the many faceted identities that create a unique intersection in me, the individual – makes my own personal lived experience different from that of any other transperson. I would never be so arrogant to assume otherwise. There are many transpeople who are female-identified, gender queer, older, younger, middle or

upper class, homosexual or bisexual, of varied cultural or ethnic backgrounds, and many various wonderful identities not mentioned here. I do not speak for them, only for me. I guess in that way the writing of this memoir is, in part, a selfish act. In truth, I could never know what it is truly like to wear anyone's shoes but my own size 10s.

The point is that I'm only one voice among many. The position I now inhabit economically, socially, culturally, and generationally affected the cards I was dealt in life and my ability to play them. The same is true of any individual past or present.

As I stare at the intimidating image of a flashing cursor on the blank, stark white screen of my laptop in a hotel room in Nashville, Tennessee, I wonder what I wish the world knew about me, my identity, my needs and my life as I work to become a physically complete and functional man for the first time? When I've spoken on my life as a transman, audience members of all ages and identities have asked so many questions! I realize that what is important isn't so much what I want others to know, but what others want to know about me.

I write the following memoir not because I'm brave; I know just how much it hurts to hate myself so profoundly I live each day to end it. On panels I constantly fight the intense fear of being in the public eye. It doesn't surprise me that public speaking is the worst fear most people have! I've survived this long by being invisible. Visibility is a risk for transpeople...but so is silence. Without some visibility, how is the stigma surrounding transsexualism to be ended? How can education take place if there are no faces to come forward and humanize the experience, make it and the pain historically associated with it a nasty blip in the past? No one should know the darkest depths of their own soul and others inhumanity as intimately as I do.

There's more to me than what is or isn't between my legs. Like any other human being, all I want to do is live my life. Beyond potential sexual encounters, genitals don't mean a thing. They don't effect who I am, something that has not been changed by transition but rather liberated from the oppressive weight of depression and self-hatred. In society's eyes, the revelation of my "true sex" or that I lack genitals appropriate to my otherwise male appearance can affect my access to medical care, employment, housing, access public bathrooms, civil rights, ability to find love, marry, or my personal safety. The fact that it does is wrong. That's why I made the conscious decision to give up the security that stealthy silence offers, to do what I can to change what I see as wrong. Stories like mine should be works of fiction, not fact.

My physical journey has taught me to value difference in whatever form I find it, be it gender, sexual orientation, a few extra pounds or sports team loyalty. Difference is a priceless gift; I cherish what I learn from people whose perspective differs from my own for in turn it makes me know myself and empathize with the plight of fellow human beings. I hope my words can be valued in this way, of use to those who question gender or have had the good fortune not to have to. I also write this to learn what peace means to me, to help me find it, and continue the emotional transition that I hope never ends.

At any rate, the pages that follow contain my story as told the only way I know...from my heart. In them I share with you my gift.



Youth

“I cannot guess what we'll discover.
We turn the dirt with our palms cupped like shovels
But I know our filthy hands can wash one another's
And not one speck will remain.”
-“Soul Meets Body” as performed by Death Cab for Cutie⁴

The memories I have prior to twenty-seven years of age are fragmented, splintered and scattered about like splintered bones stained with age. They're extremely sharp, vivid and leave huge gaps. I think this is attributable to trauma from abuse and coping with both being gender conflicted and the stigma surrounding that conflict...mental self-preservation I used to survive dealing with these issues.

During childhood I learned very early that life just hurt too damned much! The vast majority of my childhood was spent trying not to feel anymore.

I learned very quickly there are several different types of pain just as there are different types of scars: physical and emotional. Though well acquainted with both I enjoyed neither. If given a choice, I preferred physical pain. It's always been easier to wrap my head around: logical, visible, easier to explain and has an expiration date. The incident of physical violence had a clear start and a clear end. Once it was over, it was over. Life goes on. Emotional violence wasn't so clear cut. The root cause wasn't easy to put a finger on because I couldn't crawl into someone else's head. Often it had absolutely

⁴ Gibbard, Benjamin. “Soul Meets Body” as performed by Death Cab for Cutie. Plans. Atlantic Records, 30 August 2005.

nothing to do with me; as a child, I just made an easy target. Pain has always been a part of my life, as comforting as it was disturbing because it's what I've always known.

Welcome to my childhood; Let the pain begin.

Childhood

“Don't Call Me Daughter.” – “Daughter” as performed by Pearl Jam⁵

My boyhood was different than that of other boys. There was no time spent in the boy scouts, no sneaking out of the house to date girls, no underage drinking or late night carousing. You'll find no bittersweet stories of pubescent wet dreams, being a football hero, crushing hard on the cute girl next-door, prom night or finally losing my virginity to the girl of my dreams.

My tale of boyhood was very different from most for I was not seen nor treated like other boys. It's not like I didn't dream of doing all those things; I did. I was denied all of those memories and experiences because I was different. I was the boy who everyone thought was a girl.

I was born to parents who were both white, lower middle-class. Dad was born Joseph Lewis McDaniel in Hot Springs, Arkansas on March 30, 1934. Adopted at birth, his family came to Salinas, California in 1951. My Mom was born Barbara Marie Stevens in Santa Maria, California on October 26, 1946. They married in 1972 in Pacific Grove, California. Dad made a living as both a professional musician playing drums and trumpet in Cimmaron, a local country western band and supplemented that as a custodian

⁵ Vedder, Eddie. “Daughter.” Performed by Pearl Jam. Rearviewmirror (Greatest Hits 1991-2003) Disc 2, 2004, Sony.

at elementary schools for the Salinas City School District. He was diagnosed with Diabetes in March 1980, disabled by it and died of complications attributed to the disease in 1997.

Mom worked in Northridge Mall's JC Penny's in the office and later as manager of catalog and finally fine jewelry departments. Until I was twenty years old when Dad became unable to work, she also did various second jobs in order to make ends meet.

I was born on October 26, 1972 at 2:59 pm at Salinas Valley Memorial Hospital. I'd spend the first twenty-seven years of my life living with Mom, Dad, and my two elder half brothers, Mark and Shane, at 306 Noice Drive in Salinas, California. Mom and I would then move a block away to 217 Reata Street once my grandparents, Mammy and Pappy, passed away. Like my body, Salinas was always a place I lived because I had to. It never felt like home.

Though my hometown is only a two-hour drive away from San Francisco, the difference is palatable. Salinas is a highly conservative area whose major industry is agriculture and notoriety is as the birthplace of author John Steinbeck. Instead of Pride parades and various ethnic celebrations, Salinas has a world-famous rodeo (pronounced "row-day-oh"), International Airshow and Fourth of July Celebration. During my lifetime I have seen rich agricultural land transformed to suburban houses, the gap between haves and have-nots widen, the public libraries shut down, and gangs replace family as parents are forced to work multiple jobs in order to afford the rising cost of living. The majority of people who live there are Hispanic.

A lifelong resident, I describe Salinas simply as a cancer that eats it's own. That's how it has always felt to me. Besides gang problems, lack of activities for youth and funding for public programs continually being re-routed to beautification projects, homophobia and transphobia are the norm, not the exception. The worst insult one kid could pay another was to call him or her "faggot", "lesbo", "sissy", "dyke", or "queer". Being an effeminate male or masculine female was not acceptable and subject to merciless bullying on the street and in school.

My mental gender identification as male was something I always knew. To me, the grass was green, the sky was blue and I was a boy. It was something I didn't question; however, the physical reality was that I had a female body. I didn't have the terms to articulate how I felt, this dissonance between mind and body, no transpeople either in popular media or my life who I could point to and say, "I want to be like him." My feeling like a freak and outsider had more to it than my just being a troubled child. I was isolated and completely alone.

Sure, Dad watched The Jerry Springer Show on TV every weekday afternoon at 1 PM. Occasionally they featured male to female transsexuals (MTFs), usually with some sensational (and often derogatory) title like "I Was Deceived! My Date Was Really a Man!"

While the idea of a sex change appealed to me, I couldn't relate to the women featured. First, I didn't want to be a woman; I was already stuck in a female body and that obviously wasn't working for me. Also, these women were glamorous, beautiful, and larger than life. I was painfully shy, favored Converse, and intensely enjoyed the sensation of warm mud squirting up between my bare toes like oil gushing from the

wounded Earth. I wanted to play defensive end for the Oakland Raiders or be a fighter pilot. I favored my elder brother's video games and action figures...the one time I was given a doll I took intense pleasure in decapitating it. I was worlds away from the beautiful women people laughed at and ridiculed on TV. I thought a transsexual was just a man in a dress...very much NOT me.

Raised Southern Baptist, at almost three years old I was already praying. Too young to understand the concept behind it, I mimicked behaviors of adults around me. All I knew for sure was that if I prayed long and believed hard enough, I could ask God for something and it would come true.

Shrouded in a cloak of darkness in my cribby, I can hear my parents clumsily fumbling their respective ways through slumber. Alone in the confines of my crib, my fingers are tightly laced together just like Pappy had taught me. My face was all screwed up, eyes shut tighter than Fort Knox. Like last night and the night before that for what seems like forever, I was deep in concentration having a serious heart-to-heart conversation with God. I prayed for what seemed like hours. Even at the age of two I know what makes me different from the other boys. I cry as I pray for a penis. Fat tears meander down the wrinkles of my face. If I have a pee-pee no one can tell me I'm a girl! My hope is that once my parents see me as their son, they'll finally love me like they do my brothers.

As usual I woke up as wrong as I was before I falling asleep and twice as disillusioned. Eventually I gave up. As a toddler I lost faith in God, everything and everyone...even myself.

I loved the hand-me-down clothes and toys from my two older brothers! I lived for the moment they'd outgrow clothes or break their toys!! I rejected dresses for discarded baseball caps, stuffed animals, balls of every size and description, action figures, comic books, cap guns and model airplanes.

Mom enlisted me in the Brownies...basically Girl Scouts for very young girls. I adamantly refused to wear the typical uniform, which consisted of a white blouse, orange sash, brown beanie, and brown skirt or jumper. Mom and I compromised: I wore a button down white shirt and brown pants. At their Christmas gift exchange I threw a fit when given a little plastic make-up set. I hated going to the Girl Scout Brownie troop when I knew I belonged building pine racing cars with the Cub Scouts.

My four-year-old eyes peer out from under Dad's heavy, callused palm through the back screen door that led to the back porch and driveway. Mom is taking Shane to a Pack meeting held at El Gabilan Elementary School a few blocks away. Four years older, my tow-headed older brother is a member of the Cub Scouts.

Decked out in the traditional Cub Scout uniform shirt, scarf, cap and threadbare jeans, he walks out to the family car. Sun glints enticingly off the golden button at the peak of his navy blue Cub Scout hat. Crisp yellow piping arches proudly over the expansive contours of his bulbous head. The cap pitches with the roll of his gait. Jealousy as biting, hot and green as the hide of the family car bubbles acidically within me. I should be going, too. Most of all, I secretly covet Shane's uniform cap.

I stand obedient and contrite under the repressive weight of Dad's hand, calmly hiding the maelstrom tearing me apart. I don't have the words to articulate or maturity to

grasp my dissatisfaction with the psychosocial game whose complex rules rape me of my true identity. Once again I am left behind.

I'm good.

I behave.

I am NOT happy.

Late summer morning air filters through the rusty screen door. It's tang stings the sensitive skin of my nose, making it twitch in response to burning and itching. The fine hairs on my arms hump into goose bumps. I'm fighting tears of frustration and anger. My scalp burns underneath the oppressive pelt of mousy-brown hair that hangs lifeless past the waistband of Levi's either Shane outgrew or I'd swiped when no one was looking. While my hair was long only I felt wrong.

I want so badly for that cap to plunk down onto my head where it belongs! If I wore a cap there would be no more mistakes. People would see me for who I am: a boy.

I hold my tongue.

I am good.

I behave.

I hate every moment of it: my silence, myself.

Even with long hair, strangers always asked the parent whose hand I held, "Is that your son?" By the age of four I could feel Mom bristle each time someone asked her this question, the one she dreaded hearing but secretly made me proud. I already knew she hated being seen in public with me. As her Mom had told her, "You wanted a daughter. Now look what you got." It was difficult to be torn in two different directions: knowing I was physically one thing but wishing I could be another and make my Mom proud of me.

Until I became a teenager, Dad handled my “tomboy” tendencies (as my masculinity was referred to in those days) fairly well. He’d always wanted a son. Dad had the best of both worlds. He and I were best buddies. I was proud there was nothing he didn’t tell me, no problem too big or mature for him not to share with me. Until puberty, his response to strangers asking, “Is that your son?” was usually a good humored, “She wants to be a boy.” I always felt so proud and tall when he said that. While not the answer I desired, I knew it was the closest I could hope for.

If Dad was my best friend, father was my worst enemy; they were one in the same. When dealing with issues of abuse as an adult, it helped to use this distinction as a coping mechanism to separate the paternal figure I loved and the one that hurt me. Father abused me physically, emotionally, and sexually for twenty-seven years.

Dad and I related on a deep level. We talked cars, planes, Oakland Raider football and music. We’d go cruising in his custom cars on South Main Street when he was off on Friday or Saturday nights. On Sundays we’d watch Kenny Stabler quarterback the Raiders to victory. On weekends I’d go to gigs and help set up and tear down his drums. Dad told me all his secrets, even those about sex with past girlfriends or intimacy problems between he and Mom.

I remember Dad had a very heavy beard, so spent an hour every day shaving. Oh, how he hated it! I, on the other hand, would spend much of the time he shaved playing an old 45-inch record of “Funky Stuff” by Kool and the Gang over and over while watching and studying. I knew one day it’d need to shave, too. Little did I know – despite my deepest wish – that biology would do its best to fight my having any facial hair and other masculine secondary sex characteristics.

I'm wearing only footsie pajama bottoms, plunked down on my butt in the hallway on the washed-out, green carpet outside the bathroom door. Soft, white light falls through the open door of the blue bathroom to pool around me. I'm five years old.

Dad is wearing his saggy white briefs and a thick down of body hair. Over and over he methodically dips the fingertips of his right hand into the frothy foam cupped in his left, smears white shaving cream on his face, and then scrapes it off.

It's very important to pay attention. I know that someday I, too, would need to shave my own beard while my son watched. It's a big responsibility but I'm up for the challenge!

All of a sudden -- lickety-split -- Dad's left fingers flick out and leave a dollop of shaving cream jiggling on my cheek. I can feel it there, wagging slightly, light as cotton. It tickles. The sting of its musky smell makes my nose twitch like the wet pink nose of my pet rabbit, Tippy. Dad gazes down at me fondly, expectantly. I try not to giggle because this is serious business. I know just what to do!

In my small, balled up, right fist I grip the ratty, black plastic comb my eldest brother brought home yesterday from picture day at the big kid school. In my mind's eye, the side with no teeth will make the perfect razor! I drag it seriously over my soft, plump, downy cheek just like Dad does with his disposable razor. Slowly I scrape the shaving cream off just like Dad. Once every speck is removed, Dad smiles down at me proudly. I smile back.

My memories of Dad were not all fond ones. Father was also my abuser, the man who invaded my space, mentally groomed, beat and molested me. He was who Dad

became when depression got the best of him, left him feeling powerless, or when consumed by how badly he hated his job as a custodian.

Many people have postulated the theory that sexual abuse causes transsexualism. I am strongly convinced that at least in part, the abuse was in response to behavior considered gender inappropriate. It was the price I paid for being a boy in a girl's body.

It's important to also understand abuse of a child is perpetrated by someone who feels powerless to exert control elsewhere. Father felt powerless in his job, in his marriage. I, as a child, was the only person over which he could safely exert control. Children are seen as innocent and powerless. My masculine tendencies were beyond his or anyone's control, so what better way to manage it than through abuse?

I could always tell when Dad was gone. His brow would darken with thunderstorms. The corners of his mouth would sag. He would forget how proud he'd been of me. That always made me very sad. I wondered what I'd done wrong to make Dad want to hate me so much and leave me. In those days it was always my fault. That was the only logical excuse. I could never figure out what it was I'd done wrong. I felt I was too stupid to, but it had to be really bad.

Though it's intensity worsened over time, the physical, emotional and sexual abuse was always present. I thought it was just how fathers related to their kids until I began Elementary school at El Gabilan. Then I saw how other families interacted and began comparing what I saw to my family's dynamic at home. I began asking questions while a student in Mrs. McCauley's kindergarten class at El Gabilan. I remember the distinct moment when I knew for sure that the things I experienced behind closed door of my childhood home were atypical. I was six years old.

Father is sitting on the corner of the big bed he shares with Mom. The wet, acrid stench gun oil hangs heavy in the air. He's spinning the cylinder of his gun with his callused left forefinger. It's a Ruger six-shooter just like the one Johnny Mac Brown and other old black and white B Western cowboys carry in their holsters on late night TV.

Each click of the cylinder is an acrid "Snap!" It sounds like breaking teeth. When he looks at me, his expression is like an open furnace laced with regret, the familiar thunderclouds storming about on his brow.

Before I know it, the gun barrel is grinding into the tender skin of my forehead right above the hairline. The jagged lip of the barrel where a previous owner had filed it down snags and yanks tiny hairs loose. My nose itches while small flakes of metal whipsaw lightly across it, teasing me. I'm scared. I don't dare scratch it, much less move. I can how tight his finger is on the trigger. Where has my Daddy gone? This isn't him.

Tight-lipped, Father spits at me, "If you tell anyone I'll shoot your Mom and brothers in front of you, have you hold your cat while I gut her, then shoot you, then me. It will be all your fault. "I know he means it. Then he proceeds to sodomize me with the gun. This incident was the rule rather than the exception, not the first nor by any means the last time sexual violence such as this took place.

Now I wonder sometimes if the abuse was Dad's response to my gender transgressions. After the onset of female puberty, I think a certain degree of the emotional abuse did intensify. My body betrayed him just as it did me; maybe in his eyes puberty took away his son when in reality only my body and how he treated me changed. He began to shrink all my clothes, insisting girls actually liked that. I sure as hell didn't. I

was deeply ashamed of my body, which began to mutiny when I was nine. Didn't he get that I wasn't a girl?

Though we all lived in the same house, for two decades Mom was unaware of the abusive relationship between father and me. At the same time, my masculinity proved to be a huge barrier between her and I. It felt like constant emotional warfare over my hair and clothes, how I walked and talked, how I behaved. Father knew this and used it to his advantage. From earliest memory he groomed me as many abusers do, by being my best friend and using every chance to tell me how everyone else would hurt me every chance they got. This served to alienate me from everyone, even Mom. The distance between her and I only seemed to widen over time.

Mom struck a deal with me when I was very little: I could wear my brother's hand-me-downs *if* my hair was kept long. Mom believed this would be an undeniable external indicator to outsiders that I was a girl that she'd never again be asked, "Is that your son?" In this assumption she was incorrect; she still got asked. All this deal accomplished was to further alienate me from her and further cement my friendship with my Dad.

Among extended family, my gender conflict had always been like a "pink elephant." Everyone was aware of its existence but rarely, if ever, spoke about or referred to it...at least never in my presence. The general consensus was that I was a tomboy and would eventually "grow out of it." I never did. Instead, I grew into it. As I did, I also grew more despondent, hopeless and darkly depressed.

By the age of six my desperation reached a point where I began cutting myself. My reason? To peel back my skin, show the boy I was inside and dispel the lie

my body told. Then everyone would have to see me for the boy I knew was. At that time I also began using addictive substances like caffeine pills and speed to get through school and taking care of my ailing Father. Once building a model car in my room with the door shut, I figured out that if I sniffed model airplane glue (huffing) it would numb the emotional pain that was silently tearing me apart. I was desperate to do anything to not feel.

Food was always a problematic area. It offered me comfort in a very uncomfortable world. While I was in elementary school, Mom got heavily into dieting and Jazzercise, both popular in the 80s. I constantly fought with Mom over weight while Dad slipped me cupcakes and candy. When nine years old, I finally reached an uneasy and unspoken compromise. Eat then puke. Binge, then purge. I became bulimic.

It's always been popular for adults to ask kids, "What do you want to be when you grow up?" I always responded a football player or Naval fighter pilot. While I would've liked to have done either, these weren't the honest answer. I knew I could never do either profession. I knew I could never tell the honest truth, for even I knew it was unacceptable. What would've been my honest answer? I can sum it up in one word: Dead.

H.S./Adolescence

It isn't surprising I thought I was the only one in the world who felt gender conflicted. It wasn't like I could go to the Salinas public or school libraries and find role models or information on transsexualism for until recently there weren't any. Even if there had been resources, I didn't have any idea of what to look for. The terms

“transsexual” and “transgender” were unknown to me. I had no clue there was any possibility in regards to gender except either a concrete male or female. What little sex education I received at North Salinas High School and at Hartnell Community College was focused exclusively on genital anatomy and waiting for marriage, but never explained just what I was supposed to wait till marriage for, much less gender variance, what a transsexual was or how to change one’s sex.

As a teenager and young adult I was homophobic. It had nothing to do with people who were gay, lesbian or bisexual; what they did in the bedroom didn’t interest me either way. I already carried one identity – female – that was incorrect. I was afraid of being labeled something else I was not. I had no clue what the term “lesbian” meant until after it was used against me as an insult. My fear had nothing to do with people who were gay or lesbian, but with me.

It was clear from an early age I belonged nowhere, to no one, not even myself. As my body’s lie mounted from a whisper to a scream with the onset of puberty at age nine. It seemed I couldn’t walk anywhere without adults and children asking in a stage whisper, “What is it, a boy or a girl?”

In school the girly girls rejected me; we had nothing in common. The other tomboys hated me for “out-tomboying” them. The boys ignored me because I wasn’t popular with the girls and I was overweight, so not attractive. Time spent at North Salinas High School simply reinforced this.

A good day at North High was one where nobody saw me. These days were exceptionally rare. Seemed I couldn’t go an entire morning without someone wondering what “it” was. Puberty had downgraded me from male to a dehumanized object. I was

taunted, hit, beaten, de-pantsed, humiliated. Even the freaks, nerds and losers wanted nothing to do with me because I was the social kiss of death.

Once puberty started, my discomfort with my body grew to such a degree that I could not longer shower. At home I'd sit on the toilet and run the shower what I figured was an appropriate amount of time to fake out my parents. Seeing my chest and "down there" (my genitals) was more than I could bear. I knew nothing of binding to hide how huge my chest now had become. I'd wear multiple shirts and jackets no matter how hot the day. The skin underneath was soon riddled with deep, ulcerated wounds that infected and never healed. The sweat, blood and pus would soak through layers of material. As long as I didn't have to see the physical wrongness that my body had become, I could manage. My body – never a team player – had become utter anarchy. It was never a home to me, simply a nightmarish body bag I dreamed of escaping.

I had mixed feelings about physical education classes. Though I craved the physicality and competition of PE, I hated locker rooms and bathrooms! Aware of my physical attraction to girls, I felt like a pervert in these-women only spaces. Locker rooms in particular was my own private hell. Changing into gym clothes necessitated a visit to the locker room.

As soon as the period before gym ended, I ran to the locker room to change and go to line up before anyone else got there. If late for some reason, I used a bathroom stall to get into my gym clothes.

At North High, we got to choose periodically from different activities like volleyball, floor hockey, and badminton to sign up for. I remember being so excited when flag football was an option open to both males and females. I'd wanted to be play

football since earliest childhood. I was devastated when Mom had threatened me after I expressed interest in trying out for the junior varsity football team. I'd always been forced to watch my brother march onto the football field. Finally, here was my chance to blow them all away with my moves! I'd be so good they'd have to let me on the team, maybe even the varsity squad!

Sadly, the class was separated by sex. The coach (the same who coached my brother when he'd been at North High four years earlier) went off with the boys to supervise their play. The girls stood around and talked while I pestered them. I wanted to play, damnit! They were blowing my chance!

One day the girls finally gave in. We got flags, divvied up, and then lined up. I was at the quarterback spot, as I was the only one on my side who wanted to do it and could throw. The ball was snapped (or rather, handed to me). The girls in front of me, my offensive line, turned around as one and merged with the opposite team. They all tackled me and began beating me. I was on the bottom.

I remember making eye contact with the coach. He wore a small, disgusted smile as he watched the entire incident, shook his head slowly and then turned back to the boys. The point was clear. : Don't mess with the status quo.

I gave up my dream of ever playing for the Raiders. I didn't want to play football anymore.

Bathrooms were more problematic than locker rooms. Not only did I feel like a pervert, the women in the bathroom always treated me like one. As a child, they politely told me I had the wrong bathroom. This response grew colder as I grew older.

I admit my androgynous appearance as a teen didn't help matters. I adamantly refused to wear anything that might be mistaken as female attire. Though I wore male articles of clothing -- always jeans, t-shirt, jacket, cap and Converse -- puberty's effects on my body, no matter how many layers I wore in an effort to appear to the contrary, made me appear androgynous. My appearance combined with where I lived and the knowledge I didn't belong there made using women's restrooms dangerous.

Though I have yet to remember the full details, once late in my teens I got desperate enough to try to use the women's public bathroom. Inside, two women started trying to figure out what I was, and then molested me. I guess their goal was to teach me a lesson, make me accept the anatomical defect that made me hate my body and myself so much. In short, it didn't work. I just never tried to use a women's restroom ever again.

Home during those years was absolute hell. My self-injurious ways continued. . I felt like a walking wound. Up late on weekends to help tear down and set up my Dad's drum kit as his physical, emotional, and mental health continued to deteriorate, I used speed to make it through the day. I sniffed the Testor's model airplane that came in the orange containers. Huffing dulled the constant pain.

Mom and I constantly argued over my hair, weight and clothes. Dad's abuse continued, becoming more violent, less sexual. It also became apparent to me he was profoundly depressed....just like me.

When I was fourteen, Mom was on her yearly vacation to Oklahoma, off visiting relatives, so I was completely responsible for Dad's care. Just like usual, I made him

dinner, prepared his insulin syringe. It was my job to keep him happy. This night was no different.

I had made him dinner. He just sat and vacantly stared at it. I remember how his face looked melted, like those clocks in the famous Salvador Dali painting.

With a huge sigh only teenagers can do justice to, I asked, “What’s wrong now.” I expected there to be some failing in the food, for he was always finding fault with anything I did.

“I want to die,” he told me.

The rage I kept tightly lidded at all times bubbled. I wordlessly stomped into the kitchen, grabbed a pair of the cheap, pseudo-white bone handled steak knives we had, and then slammed one down on the dining room table by his left hand. I held the other to my left arm, dragging it across the fish-belly white flesh in the midst of gnarled knots of scar tissue. Beads of red blood began to slowly well up, grow, fat, and fall to pepper the oak tabletop.

“Okay.” I told him. “Let’s go.” I had had it.

In short, he wasn’t serious. I was. Very.

Later that week he quietly took me to see our family doctor. Doctor R started me on Zoloft, sent me to a local therapist. I visited her six times. When I received her bill in the mail, I showed mom and told her doctor S told me to see her. My hope was she would send this to the insurance company.

She thrust the papers at me and coldly replied, “I hope he’s paying for it.” At fourteen I was already \$600 in debt and utterly alone.

It was also increasingly becoming clear to me that my body wasn't a place I liked to be or loved, but a body bag that trapped me. My tolerance for it had become utter hatred. By the time I was sixteen, I'd not changed clothes for months...anything to avoid seeing my body and revealing my defect.

I avoided mirrors. I struggled with the desire to smash my fist through the glass, shatter my reflection to make it more closely resemble my inward feeling, then take a shard and cut out what was wrong with me. Sometimes I wasn't sure if that was my genitals or my heart.

Twenties/early adulthood

When I graduated from North Salinas High School in 1991, I entered Hartnell Community College. It was expected. I had nothing better to do. I knew I'd never graduate. Unless things improved, I had no intention of living past my thirtieth birthday.

By this time I was so depressed I would cut myself on an almost daily basis. Though I was going progressively deeper, the excuses of cat scratches or blackberry bushes were never questioned. Who wants to believe that someone intentionally goes out and hurts him or herself?

Antidepressants or not, I was also profoundly suicidal. I thought of it constantly. It was my only hope, felt like my only friend. It was then I made my plan. Unless things got better, on midnight of my thirtieth birthday, I was out of here. In the interim, everything would be a science experiment, practice. If I got lucky and died in the name of science, so be it.

I remember when I was nineteen; I was at my grandparent's house while they were at Wednesday night prayer meeting. This alone was normal. I always went there to hang out when they were gone. There Dad couldn't hurt me and I wouldn't argue with Mom; however, that particular night my toes were teetering right on the virtual line between life and death. There was no safety net. I didn't care on which side I landed. I was at the point where question was about to become action. Instinctively I knew this. I was sobbing, sitting Indian style and rocking back and forth, clutching my grandfather's large butcher knife.

My brain seized on something. It was from a student presentation on the suicide prevention line in Political Science class I'd attended earlier that day.

Through eyes drowning in tears, I somehow found the suicide prevention hotline, picked up the old rotary dial wall phone receiver from the cradle. The dial tone buzzed accusingly at me. I dialed the number. It rang twice.

A bored male voice said, "Suicide prevention hotline. Can I help you?" I hung up. I'd realized I had no clue of what to say. It had been clear whoever had answered didn't give a damn what I had to say any more than anyone else did. Desperation made me call again. I redialed the number.

As I waited, I remembered something else from class, the question had been postulated of whether calls to suicide prevention were tracked or not. I hung up again. I couldn't risk the chance of anyone realizing how crazy I felt. My deepest fear was if they started asking questions, they wouldn't quit. They might find out what I'd tried to hide since I was two, my deepest, darkest secret.

That thought was just too much. I cut myself.

Afterwards I sobbed. Something had changed. There'd been a distinct internal shift. I knew it. I could feel it; all bets were off. There was nothing standing between me embracing suicide. I didn't care anymore. Next time I would not hesitate.

The next day I had an appointment with doctor R. I went because I had to. It was to be a normal check up. I think he sensed this shift in me, too.

Immediately he began asking questions. It was like a long string machined gunned at me: "where's your grandparents? Can they drive you? Where's your Mom? When does she get off? Is anyone else home?" I was so apathetic; I didn't follow nor really care.

Finally he told me, "Either your Mom takes you to CHOMP or the ambulance does." That got my attention; it hit my panic button with all the force of a locomotive. I had no idea what "CHOMP" was, didn't want to be in no ambulance, but what really got my wind up was Mom having to leave work on my behalf. I was terrified of her anger.

I sat in that waiting room, positively scared of the prospect of being alone with my Mom in the car, forced to face her in narrow confines.

Once inside and her 1968 Mustang was nosing it's way south. I don't think we said more than two sentences to each other. We were on the way to CHOMP's Garden Pavilion, which I soon found out to be Community Hospital of Monterey Peninsula's psychiatric ward. She walked me to the nurse's station on Garden Pavilion, then left.

I went through intake, including a strip search, by myself. Then they forced me to shower. I cried as I did so in the dark. I'd never stayed overnight away from home. I was alone on a psych ward with crazy people.

It was the first of ten years of hospitalizations at Garden Pavilion, the unit at Natividad Medical Center in Salinas and one in San Jose. I always preferred Garden

Pavilion to the others. At least there they always gave me my own room. Elsewhere I was always stuck in with another patient...a woman. This was the case even during my last hospitalization in 2001, after I had started my transition, went by Nick and identified as male.

I stayed on unit at Garden Pavilion for two months that first time. It was a productive stay. I felt safe, a very new, wonderful feeling. Their food was great and I had my own room.

They strongly suspected my Father had abused me. At that time I still refused to say; I'd learned the lesson conducted at gunpoint when I was six quite well.

My psychiatrist refused to let me leave the unit until my father was removed from the home. He was placed in a residential care home on Northridge Drive, a mile or two away from home. No one dreamed he'd walk that, for he'd never voluntarily walked any distance.

Surprise! Father not only walked the distance between the residential care place on Northridge Drive and home, but he did it every day Mom worked. It gave him some measure of power, no matter how miniscule. He'd sit across the street on a log in the vacant lot, occasionally walking up to the windows when Mom left them open. He'd spend eight hours a day just watching the house until my grandfather came to take him back. This emotional abuse continued five days a week until his premature death due to complications with diabetes in 1997.

I was a prisoner in that house. More and more I stayed inside. The burden of going past him became too much. The only times I would leave was to be hospitalized. This was never while he was watching.

I have attempted suicide more times than I can count, been clinically dead several times by my own hand. I have had welfare checks, involuntary psychiatric holds (5150s), nearly had electro convulsive therapy (ECT), and by 1999 had tried every psychiatric, antipsychotic, and experimental psychotropic drug on the market at that time. None of them worked. There was good reason: I wasn't mentally ill.

Over the ensuing ten years after my first night spent in CHOMP, from the age of nineteen till twenty-nine, a series of mental health diagnoses were applied to me and rejected. Like many transpeople and male sexual abuse survivors, since my symptoms mimicked those recognized as being hallmark for bipolar disorder, it was finally decided I was bipolar, type two. This meant that my lows were profound, suicidal, and dark. My "highs" were what most people consider feeling okay. This was found to be a misdiagnosis and removed in 2005. There was one diagnosis that was correct: gender identity disorder (GID). That one remains to this day.

Epiphany

In 1999, my elder brother Shane came to take me to see a movie. At the time, this was no small feat. I hadn't bathed or change clothes since my last hospitalization several months before. Except for spending time on unit (on mental health wards) or going to appointments, I completely isolated except for my Mom and three cats. I weighed so

much I could no longer be weighed. The estimate is around five hundred and eighty pounds.

After graduating with his Undergraduate degree from Fresno State University, Shane had moved to Santa Cruz. To the North of Salinas, Santa Cruz is a college town, home to the University of California, Santa Cruz. It is a much more liberal area.

He'd heard about a movie called Boys Don't Cry. It's the dramatized, real-life story of Brandon Teena, a pre-operative, pre-hormones FTM who was raped then killed for living his life as male. Though the film would go on to win several awards, at that time it was not widely released. To my knowledge, it never played in my hometown.

A pretty heavy and dark movie, its effect on me was profound...I imagine very different than your average moviegoer in attendance that day.

Sitting next to my brother in this little, dark theatre (ironically called The Dream Theatre) I found hope. For the first time I saw someone who I could actually relate to. It was possible to do all the things I'd watched my brother do and secretly dreamed of, like dating girls, steaming up car windows with the passion of making out, finding peace, getting to be seen as who I was. There was a chance the lie my body told could be corrected, made true. There were others out there like me.

At the Dream Theatre in Monterey, I learned terms that would enable me to tell others about who I was, how I felt. Words like "transsexual" and "sex change" had never been presented to me in a way that I felt could apply to me.

Now I knew it was possible not just to go from male to female. I could correct my body to fit my mind, my heart, my soul, and my instincts. I wasn't wrong; there was a chance for me to find peace and what it meant to me.

Shane and seeing Boys Don't Cry literally saved my life. Seeing it marked the beginning of the transitional point where I stopped just existing and began to live, where I stopped being a victim and began to learn how to be a survivor. Most of all, it was the first time I didn't feel utterly alone.



Transition

“Where soul meets body.”

– “Soul Meets Body” as performed by Death Cab for Cutie

Some things change while others stay the same. While sitting by my brother in the Dream theatre, I realized that something had to change or I wasn't going to make it.

I want to be clear before I continue any further: transitioning was not a choice. It was something I did in the name of self-preservation. I was drowning. There was a life preserver. I could use it or die. I took it. I survived.

Likewise, being transsexual wasn't a choice. If I had had one, I would've been like any other little kid.

After seeing Boys Don't Cry, I knew what I had to do. It was just a matter of figuring out how to go about it.

Finding a route

Shortly after I left the movie house with dreams of something better, my case manager at Monterey County Behavioral Health saw an advertisement listed in *the Central Coast Weekly*, a free, local newspaper. On the back page was an advertisement. "Stephen Braveman, Board Certified Sex Therapist and gender specialist" in Monterey, California.

On his own time and dime, my case manager drove me to Stephen's office, on the second floor of a historic building on Alvarado Street. Once there, Stephen provided me with a map on which to plan my journey.

Seeing Stephen was the first step in no longer having "what is it – a boy or a girl" hurled like a rock at my back. I admit that going up those stairs to his office was both the longest and shortest walk I have ever taken before or since.

In his office, I began attending one-on-one therapy sessions and the Monterey Transsexual Support group Stephen facilitates once a month. I learned about the different paths transition could take. Under his guidance I began to take my first tottering steps on my journey to correct the heinous lie my body had told for three decades.

The Sixth Edition of the Standards of Care (SOC6) served as the map that I used to plot the route my transition would take. These are guidelines set up by the Harry Benjamin International Gender Dysphoria Association (HBIGDA) for medical professionals who deal with gender dysphoric clients. They outline what many transsexuals regard as the “hoops one must jump through” in order to obtain Hormone Replacement Therapy (HRT) or SRS.

Hormones

The first step in my physical transition was to begin the masculinizing hormone called testosterone (also known as T). In order to start Hormone Replacement (HR), I needed a letter from a gender specialist. Stephen had to feel confident in my physical and mental readiness to start T. I had to prove that I was aware of both benefits and risks of introducing testosterone to a biologically female body. I also had to demonstrate that I was mentally able to make an informed decision, understood that hormones produce life-altering and often irreversible changes in such things as fertility.

Before he would consent to write a letter recommending me as a candidate for masculinizing HR, he had several requirements that would demonstrate my knowledge. The first was to be able to tell him the potential side effects (risks and benefits) of introducing testosterone into the system of a biological female. In addition, I could not be

actively suicidal, cutting, or using addictive substances to escape rather than deal with issues. I also needed to get down to two hundred pounds.

An online search told me what I needed to know about effects of administering testosterone to a female-bodied person. The benefits were thickening and darkening of body hair, facial hair, thickening and roughening of my skin, drop in voice pitch, increase in libido, fluctuations in emotions, increase in pimples due to the changes in oil secretions, increased body hair growth, a shift in muscle and fat distribution in the third or fourth year, and the clitoral tissue (known as a microphallus under influence of T) begins to respond as a male penis would. In addition I would retain health risks for female-bodied people (such as for osteoporosis) while also gaining health risks for male-bodied people (like increased likelihood of heart attack, stroke and reduced life span).

Introducing testosterone into my system would be like starting the maturation clock back up again. It had effectively stopped when puberty began the first time (for me, age eight or nine). I would begin undergoing male puberty, going through growing pains and teenage angst at thirty-one years of age.

Once I saw hope for change, stopping suicidal thoughts, bulimia, self-mutilation and addiction to substances took about a year or two. It was easy in comparison to stopping my addiction to overeating; Food not only offered relief from the emotional pain I experienced in the form of oblivion. With no friends, no hope of a girlfriend, and a family that never exchanged healthy touch, eating was the only form of comfort I had at that time.

I drank copious amounts of water, began clearing the over grown backyard, changed how I ate, began walking and lifting weights. It quickly became evident that

weight loss would be a lengthy process requiring years. Even though I began to take steps that were successfully reducing my weight, it wasn't quick enough for me. The hopeless feelings returned. I began to regularly cut myself again.

Though I'd lost a lot of weight, In September of 2002 the scale still read three hundred pounds. When I received a call out of the blue from Stephen, I couldn't believe it. It was one I'd dreamed of often, but had begun to believe I'd never receive.

"I consulted with my colleagues. They advised me that the risk of starting you on testosterone at your current weight is now less than the risk of not doing so. Which endocrinologist do you want me to send the letter to?"

I sat down hard on the futon when the phone clicked back into its cradle. This had to be some kind of joke. It was too good to be true. This kind of thing didn't happen to people like me. I was in shock. When things had seemed at their worst, I was given a way out.

Luckily for me, it was no joke. At a later Date I found out I was one month away from being hospitalized in a state mental institution for the rest of my life in an effort to keep me alive. My thirtieth birthday – always the date I had set where I was to commit suicide if things didn't get better – was one month away. Mental health professionals knew from my history I knew how ...I'd been brought back from the dead several times. It was no secret that previous attempts had been practice for my thirtieth birthday.

I made an appointment with an endocrinologist in Los Gatos, California. He started me on Androgel on August 2, 2002. I would purchase a thirty-day (one month) supply from Costco's pharmacy for \$200. It was not covered by my medical insurance, Medi-Cal.

Androgel is a clear, topical form of testosterone that comes in what looks like a mustard packet. I called it my “man gel.” I was so proud the first time I ceremoniously applied it. Once a day I was to first take a shower, dry off, and then apply it to my right or left bicep. I would wait for it to dry, and then put a shirt on. Even now I can remember the old familiar stinging sensation in the sensitive mucus membranes of my nose each time I tore open a corner of the foil.

I remember each night after my application ritual, how I would gaze intently into the mirror, eagerly studying my face for the first burgeoning patches of wiry facial hair. I always left the inspection of the contours of my smooth and stubble-barren face disappointed, angry, and frustrated. The entire time I was on Androgel, no apparent physical or mental changes beyond the appearance of five very long, very pale hairs of the type one sees on his grandma.

“Where’s the raging libido?” my mind ranted. “When am I going to want to hump anything that moves? When is my voice going to crack and deepen? When could I begin to grow a long goatee?”

None of this was going to happen during the eight months I was on Androgel. What I’d heard from other transmen was correct: Androgel is better for maintaining changes, not making them happen.

In March 2003 I gave up on the Androgel. As much as I feared needles, I needed the changes that only injectable testosterone could bring. I approached my endocrinologist and requested the switch. March 28, 2003 I left his office with a prescription for a vial of Depo-Testosterone Cypionate in a Cottonseed oil Suspension, 1 mL to be administered by intramuscular injection once every two weeks. Over time it

was altered to my current dose, .5 ccs delivered by injection once a week. This form of T was covered by Medi-Cal. My general practitioner worked it so the visits to get my shot were also covered.

I remember the first T shot. My general practitioner's nurse came at me with a very sharp, very long needle. A single drop of golden liquid danced a jig trying to escape its tip. I remember my skepticism as she told me, "Just relax."

Yeah, right. Sure, she could say that. *She* wasn't the one getting poked by one-and-a-half inches of steel! I could feel the beads of sweat squirt from each individual pore as I gripped the table with white knuckles, bared my derriere and waited. Then a white-hot poke that has become familiar as the one-and-a-half inch needle sank deep into the muscle of my behind.

The best thing I can say about the shot is at least I can't see it coming. The injection site is in my right or left butt cheek, up and out towards the outside of my hip. Unless there is a new innovation, I will have to get a shot for the rest of my life in order to maintain the wonderful masculine secondary sex characteristics it has brought about. I regard this emotional discomfort as was a small price to pay for inner peace.

Within months my voice began to drop. It never cracked. It just began tanking.

Once I returned to school in fall 2003, classmates in the singing courses at Hartnell Community College in Salinas heard the progression as my prepubescent, high-pitched tenor quickly dropped. The parts I sang in final concerts held at the end of each semester mark show the dropping of my voice's pitch.

During Hartnell's fall 2003 Final Concert I could barely hit the notes in the first tenor part; my voice had dropped so much I was forced to lip sync through many songs.

Hartnell's spring 2004 Final Concert found me singing baritone. Fall 2004's Final concert I was a bass.

Spring 2004 I was so proud! I could hit notes below the bass staff with increasing confidence. My voice seemed to have darkened and grown more colorful as it deepened. My confidence as a singer directly correlated to the rise in my comfort level with both my voice and myself.

Other secondary sex characteristics began to appear. At first my facial hair was just patchy, light, downy peach fuzz that spread, then eventually thicken and darken until – finally! -- I wasn't the only one who noticed. Body hair began to slowly creep from body crevices to cover my entire parts. Before I knew it I had hair everywhere: back, toes, fingers, arms, legs...I was sprouting pores to grow more hair. It felt at times like I was starting T to become a freaking chia pet!

Other, less noteworthy (at least to me) changes occurred, too. My skin thickened and became rough. The pores on my face, hands and arms noticeably became larger and more prominent. The quality of bodily secretions like sweat and oil changed, becoming more viscous. My sweat reeked like that of a teenage boy, permeating everything if I didn't immediately wash my workout clothes. I got zits and boils all over my body. When multiple showers a day did not help I consulted my medical doctor and began Tetracycline to decrease their frequency and severity.

I still felt disgusted with my body, both its appearance and the lie my genitals still told. Though I bathed frequently and regularly, I could not do so with the light on. Often I cried because feeling "down there" when cleaning was confirmation of how wrong I still was. Though on the street my masculinity was no longer questioned, in private the fact

was still undeniable: I was a penisless male. My body was defective. While it continued to lie, I continued to hurt inside.

I always knew SRS was something I needed. As a disabled student with no real income who was struggling to afford food and money for gas to get to school, I saw no way to afford the cost of what that type of surgery would cost.

Top Surgery

The year prior to starting Androgel, I'd also been in a legal battle with Medi-Cal, the California State medical insurance for low income and disabled people (both of which I am). . I had seen a top surgeon, Dr. Edward Falces of San Francisco, who was willing to accept Medi-Cal's payment for removing the breast tissue and masculinizing my chest. He'd submitted a Treatment Authorization Request form (TAR) to Medi-Cal for a radical bilateral mastectomy on the grounds that the procedure was medically necessary. The TAR was denied by Medi-Cal on the basis that it was cosmetic surgery, not medically necessary because "transsexual" was listed in my medical files.

I began to undergo tests that provided a direct correlation between chronic, physical health problems such as chronic back pain, loss of sensation in my arms, skin problems on the undersides of my chest and the breasts Dr. Falces described as "pendulous." It was evidence to refute the denial.

Medi-Cal continued to state that the surgery was not medically necessary. I contacted a pro-bono law firm in San Francisco called the Transgender Law Center. A lawyer (who was, himself, FTM) began assisting me through email and phone correspondence with the legal battle against Medi-Cal.

On November 13, 2002, a few weeks prior to the court date I had with Medi-Cal, I received a letter from their associate medical director that stated:

We have recently reviewed and updated [our] policies regarding reduction mammoplasty based on most current standards of practice. In light of the new policy revisions, we will be approving the Treatment Authorization submitted by Dr. Edward Falces MD for right and left breast reduction surgery.

Apparently, earlier that year a MTF had petitioned for SRS from Medi-Cal. She also received a concession letter similar to mine, approving her TAR after a lengthy battle.

The same week I received the concession letter from Medi-Cal, I contacted Dr. Falces and scheduled a surgery date: January 21, 2003 at St. Francis Hospital on Hyde Street in San Francisco.

I distinctly remember how afraid I was! It wasn't of the surgery, even though it was to be my first surgical procedure of any kind. My fear was that someone from Medi-cal would be blocking the operating room doors, claiming there was a mistake.

I could almost see the nerdy little guy in my mind's eye: bald head gleaming, horn-rimmed glasses, barring the way to the swinging doors of the operating room. He'd be waving a paper about and saying the thought I held deep inside: I was not worth the effort or monetary expenditure.

My gurney rolled quietly through those beige doors, swinging doors into the mint-green, tiled operating theatre without a whisper or hesitation. No nerdy little guy in sight!

The procedure went on without a hitch. I woke up in a hospital room to the clean, crisp tang of rain wafting through an open window, my Mom conked out in the chair beside me, and best of all, a flat chest. I was kept two days in the hospital, one more than anticipated due to a lot of drainage. I was back to full physical activity within two weeks. It wouldn't be until April 2006 that I felt confident enough to go out in my front yard with no shirt on.

Identification

While my body was changing due to the influence of T, in 2004 I'd begun work on correcting the name and gender listed on identification like my driver's license, school records, and other official documents. TI learned there were two ways to do this: common usage and court ordered name and gender change.

Common usage method establishes a name through everyday use over time on bills or other official documents. This avoids the cost of getting a court order or the public matter of placing an ad announcing my intent in the local newspaper, but would require good timing and luck. At the time I did so, transsexuals were able to change their name and/or gender on all documents that did not require presenting a birth certificate. A court order was required for changing one's name and sex on their birth certificate.

Then there is a court ordered name and gender change. This is a more costly and public method, but oft times proved to be an easier, less time-consuming route. After the terrorist attacks on the World Trade Center and Pentagon on September 11, 2001 and the subsequent paranoia over terrorism and identity, presenting a court order was less likely to be challenged. There were also concerns about common usage name changes being

overturned as The Patriot Act, implemented for national security in the aftermath of 9/11, was given more and more power under the Bush administration.

Unlike MTFs, I wasn't required to have had bottom surgery prior to getting a court ordered gender change. I just needed a letter from a medical doctor stating I'd had "all medically necessary trans-related medical treatments." HBIQDA recognized that in regards to SRS, FTMs are at a distinct financial and technological disadvantage.

Labiaplasty and vaginoplasty – MTF SRS -- can run around \$10,000 to \$30,000. FTM SRS procedures such as phalloplasty costs an estimated \$60,000 - \$100,000. In comparison to the aesthetic appearance and functionality of the surgical result of MTF bottom surgery, the medical technology for FTM surgery is very poor. I have often been told a gynecologist cannot tell if a woman is a post-operative MTF. FTMs with the very best results cannot go in to an urologist's office without the doctor's knowledge that the genitals in question were not man made.

No matter what method used, changing one's identification through either court or common usage method had become quite problematic following 9/11. As one could imagine, the heightened concern would make correcting identification for transpeople difficult. Our motives for doing so were questioned. In addition, this paranoia over terrorism made not matching one's picture identification justification for persecution and discrimination whenever it needed to be presented, like at airports and when stopped by police. Either way, post 9/11 oft times felt like open hunting season for transpeople in the United States.

Because of my lack of income, I first used common usage method to change my name and gender on my driver's license, social security card, and medical and school

records. I obtained letters from my medical doctor, got a Department of Motor Vehicle medical form intended for this purpose filled out, and compiled a file of bills and such that used my old and my new name.

I'd been told the DMV takes two weeks to run a check with Social Security and verify the name and gender on both Social Security card and drivers' license match. In addition, I'd also been told Social Security requires showing one's driver's license before correcting their records and issuing a social security new card even when just changing the name, not the number.

Timing was of the essence! Armed with this knowledge and a file folder bulging with documents that established my identity, I visited the DMV right before going to the Social Security office.

I experienced similar reactions at both places. Neither clerk who assisted me had ever changed one's name and gender before. Even though I could feel sweat chased out of my pores by nerves picking its way carefully down my spine while I waited in each office, I maintained an air of polite confidence on the outside. I wanted to seem helpful, confident, knowledgably, friendly and calm...like I did this every day and had every right to. It was my right.

The DMV clerk at the Salinas Department of Motor Vehicles consulted first one, then two and three colleagues. When they reappeared out of the back lugging a huge book that took two people to carry, I panicked inside. Outside I was cool as I could be.

I motioned the original clerk over, and then assured her I knew how to do this. She followed my instructions. She changed my name and put an M on my driver's license.

Even now, looking at my huge grin in the picture on my license, my thought is loud and clear: I pulled it off!!

Bolstered by the confidence of victory at the DMV, I walked several blocks to the social security building. Seems lady luck was still on my side! A drunken man harassed the clerk right before it was my turn.

Since I was polite, she was happy to listen to and help me. I showed her the forms in my file and those from the DMV. She changed both my name and sex on my social security records and requested a new social security card be reissued reflecting my new name.

Two weeks later, Armed with my new social security card and driver's license, changing medical and school records was easy. All I had to do was show one or the other.

Though over the age of being drafted, For the purpose of financial aid I had to show that I'd attempted to register with the selective service. I found a form online, filled it out, sent it in, and received a letter that stated I was exempt from registering.

When I went to show this to the financial aid office at Hartnell Community College in Salinas, California, I encountered a problem. The problem was not with identification or the letter, but with the person whom was helping me. In the middle of an office full of students, she demanded, "Were you a boy or a girl when you were born?!?"

I quickly realized I wanted to eradicate all remnants of my old name and gender. It hurt too much to hear the old name. I'd called it my "slave name" since learning about slavery at Washington Junior High School. Like African Americans brought against their will to the United States to be dehumanized, reduced to property and breeding stock, the

name I'd carried for three decades was not one I wanted nor asked for. It raped me of my identity, in the eyes of others irrevocable proof of my "true" gender being female. In no way, shape or form was that slave name mine. I never asked for it.

I got the necessary forms online and requested the date of June 24, 2005 in the Monterey County Superior Courthouse for a name and gender change. Before my court date, I needed a letter from a medical doctor and confirmation from a newspaper that I'd to run an ad once a week for four weeks in the legal section of a local newspaper chosen from a list the county clerk gave me.

My general practitioner supplied the letter. I paid \$277.70 to run the ad in the Salinas Californian for four weeks during April and May of 2005; the form confirming this arrived in the mail two weeks after the last ad ran.

I arrived at the specified courtroom in Monterey, California. Five hours later I left with a court order signed by the judge. It declared me to officially be Nickolas Jakob McDaniel. I sent in a certified copy of the court order, a copy of my old birth certificate (to help locate it), and \$20 to Sacramento. As is the current practice in the state of California, my old birth certificate was sealed and placed behind the new one reflecting my corrected name and male gender. The only way it can be opened is if I obtain a court order to do so. On April 6, 2006 I received my corrected birth certificate in the mail. I was finally official.

Bottom Surgery

During spring 2005 I began experiencing pain from my nether regions. It was associated with the effects of testosterone.

I was having incredible abdominal pain at night, so intense that when it began to lessen in the morning I'd be physically nauseated. I spoke of this agony to no one. I was terrified of having to undergo painful diagnostic treatments, of having risked everything and worked so hard to get here to UCSC, then having it all taken away, to fail through no fault of my own. I was scared that I'd come so far and worked so hard only to be taken out by my own body when I was so close to having it fit me. Unbeknownst to me at the time, I was having "FTM pain." What this means is that the female bits had become atrophied because of the testosterone. Blood supply had diminished. Those parts were experiencing a phenomenon similar to a heart attack. It wouldn't kill me; it just felt like it would.

There was another problem. The clitoral tissue (known as a microphallus when under the influence of T) had begun growing just as it would've in the womb had necessary levels of testosterone been present that were required to turn that tissue into a penis at that point in development (and made my life a lot easier!). The microphallus had begun to behave like a male penis. I'd begun having Frequent erections, both spontaneous and in response to sexual arousal. My burgeoning libido and the lowering of women's cleavage in response to warmer weather was causing me to be in a status of almost constant arousal.

Unlike the male penis, room available for my microphallus to expand is limited by the presence of female bits, the labia and clitoral hood. This biological limitation coupled with the fact that clitoral tissue has more nerves than the male penis resulted in excruciating pain for me. The sensation was like having a big guy with a very big metal bat waiting for me to have an erection. Each time I did, the fat end of that virtual bat

connected full force into my groin. The pain was sickening, crippling. It became so painful that the instinctive reaction -- to cup my wounded groin with my hands -- was uncomfortable.

In the summer of 2005, I finally approached my Mom. We had no history of having had deep conversations, yet she was able to tell just how much pain I was in because I tried to talk to her about it. With tears in my eyes I struggled to find the words to explain to Mom how the physical pain had become more than I could bear.

I explained that some type of surgery was needed. In addition to the physical pain, the emotional pain of being a penisless male had mounted from a constant whisper to a scream. Prior to this time, I'd never allowed myself to wonder which of the three methods available to FTMs for bottom surgery – clitoral release, metoideoplasty, or phalloplasty – was right for me. Having been working class poor my entire life, the price tag for any type of SRS (which can range from \$2,000 to over \$100,000) was preventative.

Clitoral release simply “frees up” the microphallus from constriction of the clitoral hood. It is then allowed to respond like a biological male’s penis and respond without constriction. I would not be able to urinate through it, walk in a locker room without being questioned, nor have penetrative sexual intercourse with a male or female-bodied people, but full sensation is retained and unassisted erections are possible. The estimated cost is around \$2,000.

Metoideoplasty enhances the existing microphallus. Once completed, this procedure would allow for urination through the resulting penis, but it would be very small and not aesthetically pleasing. It’s too small (in general) for penetrative sex with

either male or female-bodied people. I also wouldn't have been able to walk naked in a locker room without getting noticed. Sexual sensation is retained and unassisted erections are possible. Cost estimates are around \$20,000.

Phalloplasty was described to me by my surgeon as the process of "creating something out of nothing." It is the creation of male genitalia. Full phalloplasty (creation of phallus, removal of female innards, testicular implants, urethral extension) would be completed in several stages – requiring around six separate surgical procedures -- with three or four months in between each to allow healing. The end result is long enough for penetrative sex with either male or female-bodied people. I would be able to achieve erection through implantation of an erectile device, have the urethra moved and extended so I could urinate standing up. I could also walk nude in a locker room without a second glance. Sensation is what I would sacrifice in electing this method of SRS.

Besides clitoral release, metoideoplasty, or phalloplasty, I knew I also wanted testicular implants, hystorectomy, colpocleisis (sealing the vaginal opening), and vaginectomy. My ultimate goal in SRS was to completely eradicate as much evidence as possible of the lie my body told and achieve physical completion.

In early 2005 I knew without a doubt which type of SRS I needed. When I hugged my first girlfriend, Sara, goodbye for the first time, I knew. It took just that long; no thought, all feeling.

I'd never before felt a sense of home anywhere in this world...yet standing in the street with Sara's arms locked around me, her breasts pressing firmly against my chest, it felt like I was at the front door of home...but no way to get in. Phalloplasty was the key to be able to express my love to her as any heterosexual man does to the girl he loves. It

wasn't a want or need so much as a bone-deep, age-old instinctual drive. I desired a sense of home. I needed phalloplasty.

Talking to Mom, I struggled with my innate embarrassment and shyness as I expressed the complex feelings and emotions to justify my need for phalloplasty. She told me to go get the two letters required from psychiatric professionals referring me for surgery, to make an appointment with a surgeon, and make the decision that was right for me. When she retired in three years, we'd sell my house that she now lived in and I could reimburse her for all costs related to it.

I consulted my transitional map. The SOC6 requires two letters from gender specialists to be presented to the surgeon for anyone – MTF or FTM -- considering bottom surgery. I got one from Stephen Braveman and a world-renown gender specialist.

The woman who wrote my second letter mentioned a surgeon in Tennessee whose name she couldn't remember just then who did "beautiful work." By the time she called with his name and contact information, I'd already done an internet search and found enough information regarding "Dr. S" in Nashville that I wanted to make an appointment with him for a surgical consult.

My first girlfriend, Sara, and I found ourselves in Nashville, Tennessee in August 2006 for a surgical consult with Dr. S regarding his potentially performing a phalloplasty on me. It was the first time I'd ever been more than three hundred miles from my hometown, much less outside of California.

Socially, Nashville was like another country. It is very much in the South. Let me tell you, Southern hospitality and chivalry are alive and well in Nashville! While I'm perceived as "overly polite" in California, I fit right in! Unlike Salinas, African

Americans -- not Latinos -- made up the bulk of the minority population. I was greatly disturbed upon hearing “the N word” used in a derogatory manner. The weather there was so warm and humid it was like walking in a sweaty armpit. It was very clear we were no longer in California!

Interestingly, it was there that I learned lack of awareness (of transsexuals) could be a double-edged sword. While both Sara and I were transsexuals in the process of transitioning (albeit in different directions), we knew knowledge of our transness in the hands of others would most likely come to a bad end for us in the hands of many of these people. At the same time, people have to have some awareness to first identify one as transsexual before they can then react.

It became obvious very quickly that they knew we were Californians and a couple...and that was it. Men treated Sara with respect as they would any other woman, opening doors and treating her in a chivalrous manner. No man left an elevator or walked through a doorway before her.

At one point we entered a parking garage elevator. Two young, white males got in, too. Their appearance caused us both to sweat even more than the weather warranted. Both had the classic “Southern cracker” look to them, would have looked right at home waving Confederate flags. Sara and I exchanged a wide eyed-glance. We were both well aware of the danger we were in.

I remember how my heart threatened to burst out of my throat and spatter against the elevator doors when one of them first began to speak. He just remarked about the weather, asked us if we were tourists, and then suggested some sights to see. Though

both young men were polite to us, Sara and I breathed a collective sigh of relief when they got off the elevator.

Dr. S appeared to be in his late forties, early fifties. It's obvious he loves his work; his eyes light up when he talks about the surgery. He'd studied at Stanford in California under Dr. Laub senior, the surgeon who innovated the use of phalloplasty for FTMs. He had a confident, easy, relaxed way about him. Because of my past, I'd always had trouble trusting people. Though capable and talented, the surgeons who had worked on me before Dr. S had had my respect, but never my full trust. Yet I found myself helpless not to trust Dr. S.

At the consult, Dr. S and his staff quickly put Sara and I at ease. They treated us not as science experiments, pity cases, or freaks of nature (as is usually the case at home), but as human beings. To them, I was just another man there to get a defect corrected.

I admit when I entered the office of Dr. S. the first time I was terrified. I feared I'd have to have my nether regions examined during the consult before I'd be allowed to schedule a date for stage one. I'd never looked "down there." At that time I still showered in the dark and avoided my image in the mirror. While dating, both Sara and I had an unstated rule: no contact below the belt. That was what made the prospect of an exam so emotionally charged for me.

Sara knew. She understood my emotional discomfort, so held my hand while the surgeon told me about techniques, options, and innovations he had made, what to expect, and then answered our questions. I could never thank her enough for being there for me like that.

Sara left the room while Dr. S showed me pictures of other phalloplasties he'd done, costs, risks, benefits, innovations he'd done. Seeing all those pictures of men whose lives he'd improved, it was impressed on me just how much he was truly an artist of the flesh.

In the middle of the pictorial slideshow on his Sony PC, Dr. S paused and asked, "Are you okay? You seem really nervous." I was.

I admitted my worst fear: concern about the impending gynecological exam. Turns out he'd recently spoken to Dr. Z, the OB/GYN surgeon who performed that exam for the purpose of doing the hysterectomy and vaginectomy. In interviewing previous patients to improve services to other guys, the general consensus regarding the worst aspect of the entire process of phalloplasty was the exam. Dr. S had found that many guys, like me, had never had anyone "down there".

Dr. S had spoken to Dr. Z, told him it was not necessary we be examined while we were awake. He told Dr. Z to do it once we were anesthetized. If something was found during the exam and surgery could not be performed, we were at least spared the emotional duress of being awake during the exam. Something would be figured out once we awoke. I was so relieved I could have hugged the man.

My history of abuse had always made trusting anyone a difficult and time-consuming process. Yet here I was meeting Dr. S for the first time yet I found myself already trusting him completely. It was apparent he and his staff were aware of and empathized with his patients. They did everything they could to reduce cost, physical and emotional discomfort while maximizing the surgical result.

By the time Dr. S asked me if I had any questions, I had only one: how soon can I return for surgery?

Dr. S and Dr. Z performed stage one surgery in Centennial Medical Center in Nashville, Tennessee on Friday, November 11, 2006. I was wheeled in at 7:30 AM CST and back in recovery by noon.

It was so great to have Sara there with me again. Though we weren't dating, she was so supportive. A theatre and technical Arts student at CSU Monterey Bay (CSUMB), she continued the filming she'd begun during the consult. I remember how she fought tears at two points, and don't doubt once Dr. S arrived and she left me in the pre-op area, she had herself a cigarette or two and a good cry. She was happy for me. She knew how much I hurt before, as she harbored the same hurt over the lie her own body told.

Due to a previous surgery in the same area, Dr. S was unsure what I'd be waking up to. He knew that a vaginectomy, hystorectomy, and urethral extension would be done; however, he was concerned that the nerves and blood supply in the tissue would be insufficient to do the type of phalloplasty he usually does, abdominal flap phalloplasty.

"We won't know until we get in there and dig around. There are three possibilities: we find no damage and you wake up with the initial cuts for an abdominal flap phalloplasty done or there's too much damage and we have to figure out some other way to create one. Then there is a third option if there is just some damage to that tissue, and if that option works, all guys are going to wish they were just like you."

Option number three is what I woke up with. Though he'd never done one, I woke up with a pedicle flap phalloplasty. This is the "old school" style phallo, more commonly

known as “suitcase handle.” It is so called for from the side once first stage is done; the phallus resembles the handle on a suitcase.

The reason the suitcase handle phalloplasty worked well in my case is that when someone loses a large amount of weight, skin loses elasticity. I had lost an estimated 380 pounds. There were accumulations of excess skin in rolls around my middle. Dr. S used it in creating my penis. He performed half a tummy tuck. Leaving the flap of skin attached at my abdomen, he rolled it into a tube, then dropped the other end down and attached it to my groin.

I was relieved when I woke up to see something had changed. Post-op, my body still didn't tell the whole truth about my sex, but it didn't blatantly lie anymore, either.

Before I left Centennial Medical Center on Saturday, Dr. S came in to inspect his work. He was jovial, happy, and very proud of what he'd done. He took pictures, talked with Sara and I. It creeped me out a little when he possessively remarked, “You're one of mine, now.” I'd heard of MTF surgeons making similar statements, but never thought I'd hear it applied to me.

He wiggled my new penis, then said, “Now we wait and see.” Just because the surgery was done, we weren't out of the woods yet. We had to wait and see if my penis would have good enough blood supply to “take” or be rejected by my body AND “die”. It took (thank god!).

I had clearance to shower on Sunday. Though I nearly passed out from the effort it took, Sunday night was the first shower I ever took with the lights on. Not one tear was shed. The only pain I felt was physical. While recovering during the two-week post-operative stay in the Nashville hotel, I was in the shower so much and so long my support

person had to locate and use the hotel bathroom. The act of showering without shame was liberating. I wasn't totally free of the shame of being gender dysphoric; if anything, surgery makes things worse before they get better. It removes the physical barriers so more emotional work can be done. At the same time, it allowed me to see the possibility of finding peace and what that meant for me. That was the liberating aspect of it.

Three weeks after returning to California, I was to begin to "strangle" my penis for three minutes twice a day. This means I was to tie a rubber band tightly across the point where I was still attached at abdomen. The goal in doing this was to teach my penis to grow a blood supply from the base so when released or freed from my abdomen, my penis would be able to survive.

I handed over three checks. Surgical costs for stage one (not counting hotel, flight, or other travel costs) were \$15,045.

Stage two was done on February 10, 2006. It was done on an outpatient basis. Testicular expanders were placed in the left and right labia majora. I was also delayed. What this means is that an incision was made at the point where my penis was attached to my abdomen to sever some of the blood supply in order to force the phallus to grow veins from the base. The surgical costs for stage two was around \$6,000.

The purpose of the expanders is to create room for the silicone testicular implants. Every ten to fifteen days, five ccs of saline is injected through ports located high up on my left and right thigh until the expanders reach between eighty-five and one hundred ccs on each side. The statement that my surgeon likes to "go big" applies to more than just penises!

Again, my drastic weight loss paid off. While still unconscious, my surgeon was able to fill the expanders to thirty-five ccs on each side, fifteen more than most guys. The first time I walked up a hill after stage two, I was blown away by the sensation of my balls rolling against each other between my legs. Surprisingly, it was not foreign or weird; it simply felt natural and comforting.

I boarded the silver bullet bound for Nashville and stage three surgery on April 5, 2006. That afternoon I found myself in Dr. S's office, occupying what other guys have referred to as "The Chair." I was halfway released to make strangling easier and re-delayed, a precaution. Neither Dr. S nor I wanted any chance of my penis dying once released. There was no surgical cost for this visit.

I will return on July 26, 2006 for stage 4. I will once again be done in The Chair. When I walk out of his office that afternoon, I will be completely free hanging. Stage four is going to be the release. I honestly cannot wait.

I find that being in anatomical limbo is in and of itself, hell. I can think of only one analogy to describe this torture. Imagine a child who has desperately wanted a toy for the longest time, and worked very hard. Finally he has it! He can see it but not touch or play with it. Being neither completely anatomically male nor female allows me to see the potential of being done with the physical transition...so close, but yet so far. I have my toy but cannot use it (so to speak). As things are right now, I do not have the ability to urinate through my penis nor have sex with my girlfriend.

One thing I was told prior to contacting my surgeon was correct; the man does beautiful work. He is proud of it, as am I.



New Life

“I do believe it’s true
That there are roads left in both of our shoes
If the silence takes you
Then I hope it takes me too.”
-“Soul Meets Body” as performed by Death Cab For Cutie

“Be the change you wish to see in the world.” – M. Gandhi⁶

Dating

So, how is life now that I transitioned? In real life, a fairy-tale ending is not a realistic expectation. My Dad gave me advice long ago that I can now appreciate and value. He told me, “You only get once chance to live each moment. Then it’s gone...forever.” Today I live every moment as if it is my last. If the worst happens I have no regrets. As I see it, at thirty-three years old I’m living on borrowed time. I wasn’t supposed to live past thirty. It was only in the past year that I really began to live.

In April 2005 I got an email from a woman I’d met in the Monterey Transsexual support group. Her name was Sara. We’d been hanging out a lot since she first entered the group in January 2005.

A twenty-four year-old student at CSU Monterey Bay, she slowly but surely got me to come out of my room. This was impressive. Even though I was a full-time third-year

⁶ Gandhi, Mahatma. “Mahatma Gandhi quotes.” 6 May 2006. 2006.
<<http://en.thinkexist.com/>

Quotation/you_must_be_the_change_you_wish_to_see_in_the/1409.html>.

Undergraduate student living at Oakes College on the UC Santa Cruz campus, I still isolated in my room. My spare time was spent hiding in my room behind my personal computer, finishing assignments early so I could edit other people's papers.

Others had tried to get me out before. Sara succeeded where they'd failed. We had a deep connection on several levels that neither of us understood. I allowed her to hug me hello and goodbye where with other people I still freaked out and ran away. Sara was slowly teaching me to crave healthy human touch even though I still feared it.

I thought we were just good friends. She thought we were dating. After we went to see The Aviator at the Northridge Cinema and spent an afternoon on the UCSC campus, she realized just how clueless I really was.

Before that time, I'd always gone to the movies with my brother. He'd sit down. I'd sit one seat over. We'd put our jackets in the empty seat in the middle, sprawl, and watch the movie. I had no reason to believe going to the movies with Sara would be any different.

I expressed interest in seeing The Aviator. She said she hadn't (though she'd seen it several months prior to its release). We went. She sat down. I sat one seat over and put my jacket in the unoccupied middle one, sprawled, and then watched the movie. Sara was livid. I had no idea. I just didn't like the movie much.

In response, Sara sent me the following email on Friday, March 25, 2005:

You've confused me! In a good way though. Part of me thinks it's a crush another part thinks its because we relate in a way that I haven't been able too with anyone else. I wanted to bring this up because it's been occupying my mind an awful lot lately. Regardless I am very glad that we are friends and I hope that no matter what that we will always be friends.

My reaction? Shock. I scanned the email, sure I'd misread it. There had to have been a "not" in front of "have a crush", but I was unable to find it.

For over three decades I'd always been morbidly obese, then abused and told how wrong I was. Even though I'd lost almost two-hundred pounds, my self esteem was still poor, at best. Someone having a crush on me -- especially someone as cute and intelligent as Sara -- was something I'd never prepared myself for.

I ended up getting a bad bout of bronchitis that night, so that bought me time to think. I sent her an email telling her I'd get back to her on that, then literally turned off my computer and didn't touch it much for the two weeks I was sick. I used every excuse I could to buy time. I was torn between my fear of trusting or maybe even loving someone and the profound loneliness I'd not previously realized. The thought of letting Sara in terrified me, but in the end, the thought of not letting her in terrified me more.

Finally, I agreed to go to Emo Tendencies. It was Sara's Friday night radio slot on the CSUMB student radio station from 10 pm till midnight. She played emo music there to fulfill a class requirement after she got off work. It was the first time I willingly drove anywhere at night.

I was totally scared! I had a speech all planned out. The plan was to sound suave and cool. Throughout her show and afterwards while hanging out in her apartment, I was painfully aware of the ticking clock. I was waiting for just the right moment to happen.

Around 1 am, I could stand it no longer. I croaked out the first line of my speech. Oh, it sounded beautiful! Then she looked at me. She was beautiful.

Dear god! I couldn't remember what planet I was on, much less my speech!
What the hell was I going to say? It was supposed to be so cool!

My tongue was like a stick of dead beef jerky. It just lay there, thick and stupid like me. My brain frantically screamed, "Say something stupid...anything...she's looking at me!!!"

I picked up the book sitting by me on her bed. I think it was the DSM-IV. To this day, I honestly have no clue if it was right side up or upside down. I began to sweat profusely.

I finally managed to say, "So I thought, uhm...what the hell."

My brain screamed, "Stupid! Stupid! Stupid!" That was NOT anywhere in my speech!

It actually took me all weekend to figure out if she did get my message. She Had.

I had my very first girlfriend...my very first love. With that email, male puberty began. My range of emotions broadened. Previously I knew only various depths of depression; now there was a huge spectrum. As a writer, it is frustrating to have a feeling and be at a loss for words to describe it beyond good, hurt or bad. My libido overnight went from nothing to that of a twelve-year old boy. I began to grow as a human being and a man, growing socially and mentally. This was hard, confusing, AND wonderful all and at the same time.

Sara and I dated until September 2005. It was intense, passionate, loving, confusing, stressful and, at times, psychotic feeling.

I'd not exchange those months for anything in this world. It used to make me feel like the king of the world when she'd call me "sweetie" or "Prince of Princes." In the end, we were just too close, the issues we struggled with too similar. To this day I feel like Sara closer to me than anyone in this world in many ways. I imagine she would say the same. My love for her has deepened and grown over time, as have I.

During the fall 2005 quarter I was interning for academic credit at a non-profit organization in Santa Cruz called Triangle Speakers. They wanted me to go to the local Santa Cruz Trans Support meeting on October fourth. It was being held on the first and third Tuesday night of the month at the brand new Santa Cruz Diversity Center on Soquel Drive. My objective? Do outreach, speak from my heart and try to encourage people to volunteer and be trained Trans speakers.

Three-fourths of my way through my recruitment speech, three women walked in late. I had to start my spiel over again. Honestly, I didn't mind so much. Two of these girls caught my eye. They were cute!

Though I needed to be up early the next day, I ended up staying late to get their email addresses. I felt like king of the world that night. I had no idea if either was actually interested in me as just a friend or something more.

Sara ended up being the one who later told me one of those girls, Jenny, was interested in me. They knew each other through a Trans community on an online blog called live Journal. So after a few nights of exchanging long instant message conversations on the computer, I asked her out.

Jenny became my second girlfriend. She also became good friends with Sara. Yes, they bonded over me. We have now been together for seven months. Jenny has

accompanied me to Nashville for stages two and three of my phalloplasty. In June 2006, I will be there for her in Thailand helping her recover from SRS.

Through knowing and loving these two wonderful women, I've grown as a man and a human being. Through the struggles they have, I've become aware of issues facing MTFs. They have also made me aware of the institutionalized discrimination women live with each and every day. Because I never identified nor tried to live as female, I was previously unaware of it. As I come to discover and define what being a man means to me, these women help me find myself and my heart. They've become my role models, my heroes and I love them both for that.

I've overcome many personal obstacles. I've lost over three-hundred pounds. I'm preparing to graduate from UCSC this spring, potentially with honors in both my major and the university. I'm getting ready to move in with Jenny and start graduate school. I face the old abuse issues rather than escaping them.

Advocacy

Becoming a better man also means that I leave my own, unique, indelible stamp on the world. As advised by Gandhi, I have become the change I wish to see in the world. Now I want to make the world a better place. Shrouded in silence for three decades, today I'm no longer invisible. I reclaim my voice by speaking about my transition. Speaking has allowed me to be a survivor, not a victim.

The reason I speak is not because I'm brave. Painfully shy, standing up in front of a room full of strangers – be there ten or five hundred – isn't my idea of fun. I admit it: I'm uncomfortable when all eyes are focused on me. People tell me that the

longer you do public speaking, the easier it gets. Four years and I'm still waiting for it to get easier. I can literally feel sweat forced into mass evacuation by fear, welling into beads and jiggling from every pore each time I launch into my spiel. If anything, my fear gets worse; I only learn to hide it better.

I don't speak about my experience of being FTM out of bravery. No I'm not an adrenaline junkie who gets off on being scared out of his wits, either. I remember how utterly alone I felt, how I started every day and wished on every star that day would end with my death. No one, no matter what their difference, deserves to hate themselves that much.

Today I regard difference as a gift. When someone shares their gift with me, I grow as a direct result of having been given that gift. When I speak, I choose to share my gift – my difference – with the audience.

Another reason I speak is because a lot of people I care for are Trans. I think of Sara, Jenny, and so many others who have touched my life through knowing them, loving them. I also wonder how their lives could've been changed if they or someone who loved them had seen me speak when they were kids. My own discomfort over public speaking is a relatively small price to pay if it spares one person an hour of pain considered inherent to being transsexual in the United States today. No one deserves to be made to feel subhuman, to hate themselves or be hated because they're Trans.

The goal of sharing my gift, speaking to people about the intimate details of my life and my anatomy, is to dispel transphobia through education. It is hard to hate someone and the various identities that result in who they are if there is some point of commonality. Maybe if a high school student in a class who hears me can empathize

with how hard it is to ask a girl out, feelings of isolation, or my affinity for video games, he or she might also be able to empathize with what I have gone through as a transsexual. If they encounter another transperson, their reaction might not be one of disgust, fear, or hatred but of support.

My disabled guidance counselor at Hartnell Community College was truly a diamond in the rough! Besides pushing me to excel in school and fight to get into my dream school, UC Santa Cruz, she also invited me to speak about being Trans in one of her psychology courses. I accepted.

It was summer 2003. I was scared, so honestly don't remember much about the forty-five minutes I spent in front of that class. I do remember I got a girl's phone number at the end (of which I never dialed all seven digits), that time went fast, that the students were supportive. Most of all I remember about fifteen minutes into it that I had found my space, the groove into which I belonged. Even though I was scared, I also knew I did well. By the class's end, I knew I'd made an impact, changed how some of these people thought about gender, about transsexualism, about me.

While a third year Undergraduate at UCSC, I became involved with a local non-profit organization called Triangle Speakers. They needed speakers to talk about their own personal experiences as gay, lesbian, bisexual, Trans, or being the family member of a GLBT person. I needed a full time internship for academic credit. Their goals of eradicating homophobia and transphobia through positive exposure to GLBT people aligned closely with my own values. It was a good fit.

I became trained as a speaker in February 2005. During my first year as a speaker, I did over forty panels for them. I was trained as a panel moderator in March 2006. I'm still active with the organization as both a speaker and panel moderator.

On June 27, 2006 my speaking efforts as a Trans advocate will align with my professional goal to be a board certified sex therapist and gender specialist. I've been invited to co-present in St. Louis at an American Association of Sex Educators, Counselors, and Therapists convention with Stephen Braveman entitled "Transsexualism 101 and Female to Male Transition." This workshop won't only be an introduction to my future colleagues. As Stephen pointed out, this will also make me one of the few experts on transsexualism in the world.

My efforts at Trans advocacy don't end there. Besides being included in Transgendering Faith: Identity, Sexuality, and Spirituality, I have a written piece included in a book just accepted by publishers for publication. I have also been included in a student documentary on transpeople and public bathrooms entitled Binary Bathrooms.

I'm proud of who I am today: transman, transsexual, man, advocate, boyfriend, son, brother, friend, human being. I always strive to learn and grow in an effort to become the best man I can be.



Reflections

“Cause in my head there’s a greyhound station
Where I send my thoughts to far off destinations
So they may have a chance of finding a place
where they’re far more suited than here.”

-“Soul Meets Body” as performed by Death Cab For Cutie

I have always known that bodies lie. My own did for so long!

As of this writing in April 2006, my phalloplasty is not yet complete. My genitals have about them a certain anatomical untruthfulness in their own ambiguity. Genitally speaking, they have neither standard male configuration nor any resemblance to female genitalia. They tell their own truth: I am mainly male, but not yet complete, not fully transitioned.

The pain associated with my gender dysphoria now, in my current state, feels more painful than before transitioning. While I can see the potential for physical completion, it is still evident I am in anatomical limbo. Both physically and mentally I have yet to fully realize the man I was always meant to be. I have more stages of SRS to go, more physical barriers to remove so I can begin to deal with the mental ones.

In a way I hope my mental transition will never be complete. What I mean by “mental transition” is my ability to look with fresh eyes, see things for the first time, and

be open to growth and new ideas. This is an overwhelming and terrifying, painful and wonderful aspect to transition. It is a learning process where I am blind, finding my way through life without aid of a map, just a wonky compass that sometimes reads a false direction. I make mistakes. I learn. I push on.

Another face on the prism that bends the light and colors my perspective just a bit more is there not just because I am FTM (versus MTF) or because of my unique social location due to the intersecting identities that culminate in and shape who I am. My experience is different because instead of conforming to societal expectations prior to physical transition and resisting myself because of my gender conflict, I resisted societal expectations. The pressure was not from within me but from outside of me.

As was pointed out to me by Professor Aptheker in feedback on a section of my memoir, although society made assumptions based upon the anatomical configuration of my body I never identified as female. My body lied. I always knew this; Society did not. Until seeing Boys Don't Cry I had no terms available to me to explain what I knew, no idea there was a way to correct the heinous lie my body told. I paid dearly for what society incorrectly deemed my gender transgression. As such my experience and understanding of what it means to be trans differs from someone who resisted their own heart to conform to society, who tried to pretend that their body told the truth and their heart lied (at least for a while). In short, my personal pain results from societal stigma, not denying who I was.

The writing of this memoir, in forcing me to think retrospectively, has served as my wonky compass for one and a half years. In the process of writing it, I have traversed a few wrong paths, taken a couple of tumbles (both figuratively and literally), come out

the end a little worse for wear but otherwise unscathed. It is impossible to write something so profoundly political, personal, and intense and not to be changed by it. The man who plunks away on this keyboard is not the same who started twelve months ago. I like to believe I am a better man, a stronger one, but in truth, only time will tell. I imagine only others could tell. In this way, my prism is fogged by bias. Confidentially, if you haven't noticed, I'm a little close to the subject matter. I encountered some problems in the year and a half I spent writing of Bodies Lie.

For example, while writing this during January of 2006, I had a flashback. It was regarding the abuse I mentioned by two women in a public bathroom. It was disturbing, totally unexpected, and disruptive. I spoke of it to Professor Aptheker and my fellow students in Feminist Memoirs. They urged me to step away from writing for a while, to take care of myself. As someone who is extremely responsible and painfully aware of deadlines, this proved difficult, but also necessary.

In addition, the course required by my Undergraduate major at UC Santa Cruz (Community Studies) was more hindrance than help. Designed to help me decide upon and start my senior capstone (in my case, this memoir), Analysis of Field Studies Materials was highly detrimental to my writing this memoir. By the time I was eligible to take this class, I had already been meeting with my academic advisor (Professor Stoller) and working on this memoir for a over year. In order to complete the assignments required for this course, I had to get out of the writing of this memoir. As a direct result I had to postpone my date of graduation from winter to spring 2006. I wanted the work I turned in to make an impact beyond just a grade. I wanted it to be the best work I could do.

This writing intensive course left no time in which to accomplish that goal. When the class ended at the close of the winter 2006 quarter and I once again was able to focus on writing, my “voice” was different. I came to the conclusion in April that I would have to start writing again from scratch. I scrapped over one hundred pages and started again. This was extremely difficult as both a writer and a student, a frustrating setback.

I did receive an overwhelming amount of support and help from the feminist studies class taught by Professor Aptheker. Originally called Women’s Memoirs but renamed Feminist Memoirs when Professor Aptheker found out I -- a male Community Studies major -- had erroneously gotten into a course designed specifically for Feminist Studies majors to accommodate both my senior project and me. Their guidance got me through some of the darkest periods of writing this.

I elected to let music be the framework for each chapter. As a musician and the son of a musician, music has always been a powerful medium in my life. As such, I recognize its ability to stir both memories and emotions, to move people to action in times of crisis, to comfort when nothing else can. I can listen to a song, remember where I first heard it, the sights, sounds, smells, feelings it aroused, and what that song meant to me and how that changed (if at all). Music is the culmination of language and sound to create the most powerful social medium I know. I wanted to incorporate that power and let it flow through my words. If language is powerful, music harnesses that power and links it to our emotions. As a musician, I can testify to how a particular song or genre can affect me viscerally, grab and transport me. It can make even the most stoic man cry or move a group of people to create social change.

With that in mind, I elected to use music lyrics from a song released while I worked on this memoir whose words seemed to speak to me, to drive me whether it played on my lap top or in my mind as I wrote. It is “Soul Meets Body” by Death Cab for Cutie. One line in particular seemed to speak to me, to sum up transsexualism beautifully: “where soul meets body.” That is the space I feel I occupy now as I move in my corner of the world. I have come through hell in my lifetime in order to become the man who sits here today summing up his thoughts about a life lived, a journey near its end. I am where soul and body are in balance, the yin and yang. In my space, it is all good. I chose to use creative license and metaphorical analogy in several instances where it proved too painful to simply state things plainly. In the chapter entitled “youth”, I mainly used snippets of descriptive memory, for this is exactly how I remember my youth.

In choosing what photos to use, I had to make the decision of what pictures to use, how graphic I would be comfortable with. I chose to balance my desire to educate with not wanting this to be used by someone as a stroke magazine. In the end I used the bloody pictures taken by the surgeon that did not reveal clear shots of genitalia.

Interestingly, the pictures were originally shown to me in Nashville, I said, “I’m sorry, but I think you have some other guy’s pictures here.” In the end, they were of me, just before first stage when I was unconscious and prepped. I had never before seen myself before surgery.

I also had to decide whether I would be able to tolerate using my old name. The fact is I cannot. As a measure of self-preservation, I had to attach my pain to something other than me. Since learning about slavery at Washington Junior High School, I had always referred to my old name as my slave name. Like former slaves who were raped of their

identity and their family name by slave owners, my name something I neither asked for nor wanted. My first name both perpetuated the lie my body told and raped me of my identity. I also had seen how audiences reacted when a transperson revealed their old name. Listener's faces would light up. In their minds it would all become suddenly clear. Here was irrevocable proof that the transwoman talking was actually male or the transman talking was really female. I don't want that or the pain. I chose to have readers know and see me while questioning their preconceived notions of gender, not pigeon-holing me into the traditional gender boxes of male and female.

With transsexuals, there is always also the question of truth, as in what is his or her real sex? Normatively gender people often feel deceived upon learning that another person's birth sex differs from the anatomy or gender presentation of the person standing before them. My truth is who you seem before you, the man who has just given you the gift of sharing his struggle to correct his birth defect. I am not now nor was I ever female. Bodies lie but my heart does not.

I do like to push audiences, make them re-examine the traditional male/female dichotomy they have been raised with. The question regarding same sex marriage makes this relatively easy. I know answering a question with a question is something professors really don't like, but in making my point, my answer in the form of a question lets the audience make up their own minds, begin to scrutinize what they know.

I appear very male. I have a goatee, deep voice, rough skin, lots and lots of body hair. I also act very male. I have very stereotypical male habits like taking up a lot of space, a lumbering gait, being shy, tongue tied and totally graceless around a pretty girl.

Neither masculine appearance nor mannerisms are things I have learned to do. They're just who I am.

Knowing this and the legal definition of marriage as being between a man and a woman, let's break it down a little further. Considering me, how does one define "man" and how does one define "woman"? My girlfriend and I walk down the street holding hands, kissing, hugging. How would you identify us if you didn't know we were both Trans? How would that change once you knew?

My thoughts on same sex marriage are as follows. I don't like the term "gay marriage" for it makes invisible transpeople who identify as straight. We incur just as much discrimination from the United States government in regards to marriage as gay, lesbian and bi couples who are currently in relationships with same-sex partners. We are denied the right to marry in the United States regardless of the status of our genitals, legal sex or physical presentation. If in a marriage prior to transitioning, it can be nullified if we change our sex on our birth certificate or if a divorce is sought, can lose parental rights or property rights because the marriage was obtained under false pretenses (the belief that he was "really" a woman or she was "really" a man).

In the end, I believe that we should celebrate any union between two consenting adults (or more, in the case of polyamory where there are multiple relationships). In this day and age with a war in Iraq, so much hatred, so much violence, love should be rewarded, not used as a measure for meting out judgment. One couple's love is no more or less valid than another.

Something I have noticed during the past year while doing advocacy is that a lot of homophobia is, in reality, transphobia. It has nothing to do with what a person prefers in

the privacy of neither their bedroom nor their own sexual attraction; it has more to do with transgressing traditionally accepted gender presentations and roles, being a “mannish woman” or a “sissy boy.” Transphobia can be experienced by anyone no matter what their sexual orientation or sexual orientation is.

I have also come to learn that in GLBTI organizations, there is a lot of reverse discrimination to be found against transpeople and Intersexed (as well as bisexuals, but I shall not stand atop that particular soap box here). I have found that, even though lumped into one category, since being Trans and Intersexed concerns one’s gender identity and not sexual orientation, it is easy for our concerns not to be considered a priority. Our voices are not as numerous nor as loud, for many risk losing their family, their livelihood, their life in being vocal. As a result, the GLBTI community very often feels fractured to me, as evidenced my many “victories” that cover only one’s sexual orientation. When gender minorities such as me push to get “gender identity or expression, real or perceived” added it is not unusual to encounter strong objections from the GLB communities. People such as myself who are Trans but identify as straight are not protected under laws that don’t expressly mention gender identity or expression. Many normatively gendered people, homosexual and heterosexual, still erroneously believe that sexual orientation is the same as gender identity and don’t realize how unprotected transpeople and Intersexed are.

While things are getting better, people becoming more aware, there is still a lot of improvement needed for all factions in the GLBTI Community. Power is in numbers, but only if they speak with one loud, strong, proud voice rather than creating a power

hierarchy and fracturing along those lines. Like the Reverend Martin Luther King Junior said, why can't we all just get along?

In the writing of this, I have learned one thing. No growth is without some measure of pain, of hardship and sacrifice. As much as I shrug it off in the context of everyday conversation, the truth is that yes, my past was hard. I did the best I could with what avenues were open to me. After I refused societal norms concerning gender, society pushed back. How I coped with that – eating disorders, self-injurious behavior, suicidality, substance abuse -- nearly killed me.

The cost of being a survivor has been a high one. There is not a day that goes by without my having to deal with some measure of personal pain regarding gender conflicts and norms, sexual abuse, my past and what I had to do to survive it.

When speaking on transsexualism, I always have to defend my masculinity. I have to defend who I am. When amongst peers and discussing feminist issues, I have to defend my right to be there, to validate my perspective and what I say. Even though I have nearly completed the physical transition from female to male, who I am is constantly being scrutinized and challenged. My right to advocate is being questioned because I have transitioned. I didn't write this memoir with any of that in mind.

There are several reasons that I wrote this piece. None of them have anything to do with getting a grade. Okay, I am a geek and responsible, so I do admit a grade and honors in my major are motivating factors! They just aren't the main reason behind my opening myself as I have, working as hard as I have, hurting as much as I have to write this.

I knew what audience I wanted to target. I wanted Bodies Lie to be accessible to a large audience, not just academics. Though I liked Jamison Green's book Becoming a

Visible Man, I often felt bogged down and turned off by the academic wordiness of it. I cared more and identified closer with personal narratives I had read like She's Not There: a Life in Two Genders by Jennifer Boylan. Though she was MTF, not hiding behind big words had a certain vulnerability that appealed to me. This was further confirmed when I read the newly released memoir by Dhillon Khosla entitled Both Sides: One Man's Journey through Womanhood. My ability to relate to the honesty and emotions as well as finally reading a narrative on being FTM I could relate to at times moved me to tears.

My intent was also to target transpeople who are either in the process of or considering transition. I wrote this to give the loved ones of transpeople (also known as SOFFAs) the perspective of someone who has made the journey, even though the route their loved one will take or is taking might very well be different from my own (as might the destination). I wrote this to give normatively-gendered people another voice from a transperson in order to create an awareness that might give way to change.

Finally, as selfish as this might sound, I wrote this for myself. The process of writing has been one of self-discovery, catharsis, personal growth, and yes, pain. In truth, my story is in progress, not finished until I'm silenced by my own death. Never again will I still my tongue when I should let it wag, hear my voice ring out against something I recognize is inherently wrong. Transphobia is wrong.

As for the title? I know that sometimes the most powerful statement can be made by the simplest of words. As such, I employed the K.I.S.S. method as taught to me by my internship supervisor at Triangle Speakers. The acronym itself says it all: keep it simple, stupid! So I did. In two words I summarized my entire memoir: Bodies Lie. For nine years, my genitalia told the world I was a girl. Then puberty hit. The lie was

then backlit in neon. I knew the truth: I was a boy, then a man. Writing this has allowed me to begin to own that truth for the first time. Seeing those words in print – bodies lie – was validating. It made who I am real in a way that even hormones, surgery, and more speaking engagements than I can count have.

What I did not set out to do with this memoir was to validate my choices, declare I am more or less Trans than anyone else, or to apologize for my choices. The choices I made in my life were the best I could under the circumstances. I played the cards I was dealt in life the best I could with what I knew. Transitioning was not something I did for anyone else. It might sound selfish, but transitioning was an investment in me. As difficult as it still is to say, much less see in print, *I am worth it*. My scars, be they from someone else's hand or my own, do not cause me shame or pride; they just are. They stand as reminders to myself and others of just how much pain I went through in order to sit here at this keyboard and type.

Were I to have a “Matrix moment”, be given the choice of taking the blue pill and have my life remain lived as it is or the red one, and have grown up with the “correct” gender/sex (whatever that means to you), which would I take? Though my answer might have been different at various points in my life, now I would say the blue pill. Why? I like who I am, love who I love, know who I know. I would not be the man I am today without having all the experiences I did.

I know being visible as I am, I run the very real risk of being yet another name on the trans day of remembrance site. I could be killed by someone who knows I am Trans through speaking, literature I've been in, documentaries I participated in, or through someone else who knows. If so, so be it. I got the opportunity to be alive for two years,

to live my life with know regrets. There are many people who live an entire lifetime who cannot say that.

I also know were that the case, I were to be murdered for being Trans or for dating a transwoman, it would have nothing to do with either of our identification as Trans. The motivation would reside within the murderer's own psyche. I refuse to waste my time worrying about such a possibility. My dad did give me one bit of advice I can now appreciate. We get only one chance to live each moment, and then it is gone. I live each moment to the fullest, good or bad. I feel the feelings and do the best I can. What more can anyone ask?

I hope for the physical transition to end soon. Being in limbo is literally tearing me apart inside.

What drove me to get it was not "male privilege". I still have to find that, if it exists. I think there is a different sort of oppression for men, just not as recognized as is institutionalized discrimination for women. Try being a male sexual abuse survivor searching for resources. They just aren't there or are inadequate. As sad as it is, it is more acceptable to be a woman talking about sexual abuse than a man. Be the strong, silent type or be subjected to challenges to your masculinity when you are questioning that yourself.

I also did not transition because I am actually a lesbian so scared of identifying as gay that I am bowing over for the patriarchy. I have heard this exact statement several times, most notably while at UC Santa Cruz. I do admit that I used to be homophobic; I am deeply ashamed of this. It had nothing to do with people who were in same sex relationships but with my own fear. Now many of my friends are GLB and I am very

proud they love who they do. I am also greatly saddened that many privileges I enjoy – public displays of affection with my girlfriend – is something they don't feel safe doing. My own fear over being labeled lesbian played no part in my decision.

I transitioned because my body was a house, not a home. Being seen as male, being able to have sexual intercourse with a woman...these both feel like home. It is a deep-seated, instinctive drive, something I had to do to become complete. It was damned hard, extremely painful, and expensive and life altering. It was also the best thing I have ever done.

Now I look forward to every day. I'm thrilled by the small things, sunrises, sunsets, my girlfriend's touch, my laughter mingling with a friend's, the newest video game or computer system release. I want to live, grow, love, be. I am still just figuring out what peace means for me. It is the best time of my life, for it is now my life.

My body no longer lies. I no longer am silent. Bodies Lie was my gift to you, how I chose to share my difference and how you chose to receive it. It was also how I set myself free.



Glossary

5150: a three-day psychiatric hold. The basis is that someone is a danger to others or themselves.

AASECT: abbreviation for the American Association of Sex Educators, Counselors, and Therapists.

Andro: short for androgynous.

Androgynous: also andro; refers to an individual who appears or identifies neither male nor female.

Anti-androgens: taken to suppress testosterone. Stops sporadic erections. In teens, stops the development of masculine secondary sex characteristics such as deepening of voice, excess body hair, development of facial hair.

Anti-estrogens: taken to suppress estrogen. Stops menses. In teens stops the development of feminine secondary sex characteristics such as breasts.

APA: abbreviation for American Psychiatric Association.

Asexual: term for someone who claims no interest in sexual attraction or relationships of any type or orientation.

Bi: short for bisexual.

Bisexual: also bi. Someone who is sexually attracted to and has romantic relationships with both male and female-bodied people.

Bottom surgery: also SRS; surgery performed to align a transsexual's genitals with their mental gender identification. Applicable to both MTFs and FTMs.

CD: short for cross dresser.

Cisgender: also known as normatively gendered; a term used in gender studies rather than using the term "normal" to refer to people who are not gender conflicted whose physical appearance is considered appropriate for the gender role attributed to their sex

Colpocesis: surgical procedure that seals the opening to the vaginal canal. Usually done in conjunction with vaginectomy and hysterectomy.

Cross dresser: also CD; individuals who are happy with their birth sex and pronouns, but are more comfortable wearing clothing associated with the opposite gender. They do not derive sexual pleasure from wearing garments considered appropriate for the opposite sex.

DSM-IV-TR: abbreviation for the Diagnostic and Statistical Manual of Mental Disorders, Fourth Text Edition. Put out by the American Psychiatric Association (or APA). Lists codes and hallmark symptoms of various mental illnesses for the purpose of diagnosing and providing codes to insurance companies. Also known affectionately by mental health professionals as “the psychiatrist’s bible.”

E: short for Estrogen.

Estrogens: 1. Female sex hormone produced by the ovaries; 2. Trans slang for feminizing hormones and/or anti-androgens taken by pill, patch, gel, cream, or injectable form by transwomen in order to produce feminine secondary sex characteristics such as breast growth, softening of skin and hair, et cetera.

FTM: also F2M, transman, or trannyboi., Female to male transsexual. Someone born biologically female whose mental gender identification is male. They desire hormones and SRS in order to align their body with their identity as a man.

Gay: a male who is attracted sexually to and has relationships with other males. Also see homosexual.

Gender Identity: one's mental identification as male or female; independent of their physical sex

Gender Identity Disorder: also GID, Gender Identity Dysphoria; Diagnosis listed in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Text Edition

Gender queer: also genderqueer, gender fuck; People who identify "outside the box", not as male nor female but a mix and match of the two.

Gender Reassignment Surgery: also GRS; surgery to alter secondary sex characteristics such as trachea shave (to reduce the Adam's apple). Considered by many to be a less appropriate phrase than sex reassignment surgery in reference to bottom surgery because sex is reassigned by surgery, not gender.

Gender Role: distinct set of attire and behaviors considered socially appropriate for male or female-bodied people based upon real or perceived gender/

Genetic Girl: also GG; refers to someone who was born biologically female at birth and is content with their female birth genitalia.

GG: short for genetic girl.

GID: short for Gender Identity Disorder. A mental health diagnosis in the DSM-IV for anyone who transgresses traditional notions of gender. A more acceptable term is “gender dysphoria” because less stigma is attached than the word “disorder”.

GLBT: acronym for the Gay, Lesbian, Bisexual, Tran’s community. Some transpeople suggest this arrangement is hierarchical reflection of the arrangement of priority in the GLBT Community, where T is on the bottom rung. Also see LGBT.

GRS: short for Gender Reassignment Surgery.

Harry Benjamin International Gender Dysphoria Association: also HBGDA; this is a board of medical professionals who create guidelines for the care of transpeople (see SOC6).

HBGDA: short for Harry Benjamin International Gender Dysphoria Association.

Heterosexual: someone who is sexually attracted to and has relationships with people of the opposite sex. Also see straight.

Homophobia: fear or hatred of a person or group because of same-sex attraction.

Homosexual: People who are attracted to people of the same sex. See gay. See lesbian.

Hystorectomy: also hysto; surgical procedure to remove the ovaries, fallopian tubes, and uterus. Can be performed in full or part.

Intersexed: used to be known as hermaphrodite, though that term is not quite always politically correct currently (depending on context). Refers to someone who possesses internal or external genitalia of varying degrees of male and female.

Lesbian: A female who is sexually attracted to females. Also see homosexual.

LGBT: acronym for the Lesbian, Gay, Bisexual, and Trans community. Acronym arrangement prioritizes lesbian women. Also see GLBT.

Microphallus: clitoral tissue under the influence of testosterone. It responds as a penis does, achieving erections. Over the course of several months or years, it can become the size of an adult human thumb. Size varies amongst pre-op transmen just as penis size does amongst biological males.

Mones: short for hormones. For FTMs, these are masculinizing hormones -- specifically Testosterone -- and are available in injectable, pill, gel, or gum form. For MTFs, these are feminizing hormones, estrogens and anti-androgens. These are available in patch, injectable, pill, or gel form.

MTF: also M2F or transwoman, male to female transsexual. Someone born biologically male whose mental gender identification is female. They desire hormones and SRS in order to align their body with their identity as a woman.

Pass: the ability to present in public as the chosen gender identification.

Post-op: short for post-operative. In transsexuals, someone who has had SRS. In female to male transsexuals, can mean he has only had top, not bottom surgery.

Pre-op: short for pre-operative. In transsexuals, someone who has not had but indicates desire for SRS.

Pronouns: in English is a gendered word that can substitute for a noun. In the context of transpeople, using the correct pronoun (in other words appropriate for their gender identity) is a measure of “passing.” Examples: he, she, his, her. There are also gender-neutral pronouns that are currently gaining popularity in some areas/subcultures in the United States for people who prefer to identify outside the traditional male-female binary such as ze, hir, et cetera.

Real Life Test: also RLT. Requirement by the SOC6 that a transsexual must live full-time for at least one year (24 hours a day, seven days a week) as their chosen gender identification prior to requesting their second letter required for SRS. The reason is to take their desired gender for a “test drive” to learn what to expect (as in other people’s reactions). Allows the therapist to see if the person is truly transsexual and able to handle the reactions of others to their physical presentation.

Sex Reassignment Surgery: also known as SRS; surgical method to provide aesthetically pleasing and sensate male or female external genitalia. Utilizes preexisting genitals in order to construct (in the case of MTFs) functional female genitals or (in the case of FTMs) functional male genitals. Some examples of these procedures are (in the case of MTFs) vaginectomy and labiaplasty or (in the case of FTMs) phalloplasty, metoidioplasty, clitoral release, hysterectomy. Also known as bottom surgery.

SOC6: also known as the sixth edition of the Standards of Care. Guidelines provided to medical professionals by HIGBA that govern the care of gender dysphoric or questioning clients.

Sex: 1. One’s physical, biological sex; genitalia. 2. Intercourse.

Sexual orientation: decided by the sex/gender identity who one is attracted to. Some orientations are (but not limited to) straight/heterosexual, asexual, bisexual, homosexual, gay, lesbian, polymorphous, same-sex, opposite-sex, et cetera.

Standards of Care: also SOC6. Guidelines provided to medical professionals by HIGBA that govern the care of gender dysphoric or questioning clients. Often referred to by transpeople as “the hoops one has to jump through.

Stealth: tendency once a transperson passes all the time as their desired gender identity to be visible as not TS/TG, but solely as a man or a woman.

Straight: someone who is sexually attracted to and has relationships with someone of the opposite gender. Also see heterosexual.

T: slang for testosterone.

Testosterone: also known as T; 1. Male sex hormone produced in the testes; 2. Trans slang for masculinizing hormone taken by FTMs in pill, gel, patch, gum or injectable form in order to produce physical changes that biological males undergo during puberty to produce secondary sex characteristics such as (but not limited to) facial hair, body hair, deepening voice, coarsening of skin and hair, et cetera.

TG: short for transgender.

Top Surgery: surgery specific to FTMs; removal of breast tissue and resculpting the chest with the goal of creating a masculine-appearing; Involves repositioning and shaping of the areolas & nipples. Some methods are mastectomy, keyhole. Can also involve revisions and pectoral implants.

Tranny: also “trannie”; slang term referring to people who are trans. Considered offensive to some transpeople in some contexts, especially when used by cisgenderers.

Trannychaser: someone who is erotically attracted to transpeople.

Trans: a more inclusive, generic term of anyone who transgresses gender. I personally prefer it over using “transgender” as an umbrella term because it also refers to a specific population of transpeople. As such, using it to also refer to all people who challenge traditional notions of gender tends to confuse things.

Transgender: also known as TG; 1. In academic circles, an umbrella term that refers to anyone who transgresses traditional concepts of gender. 2. Someone who, through hormones and SRS, wants to alter their physical characteristics in order to be seen as their desired gender identification.

Transman: also known as FTM, F2M, female to male transsexual. Female-bodied person whose body does not reflect their male gender identity. They desire hormones and SRS in order to align their body with their identity as a man.

Transphobia: fear or hatred towards people based solely on the fact that they transgress stereotypical notions of gender.

Transsexual: also TS; someone who wishes, through hormones, GRS and SRS, to alter their physical characteristics in order to physically present as their desired gender identity.

Transvestite: also TV; someone who obtains sexual gratification from wearing articles of clothing stereotypically worn by the opposite gender. TVs are happy with their birth gender, but only engage in cross-gender dress for fetishistic reasons.

True transsexual: term used to describe someone whose tendency is to fit the role stereotypical for the gender which they identify with, are sexually attracted to the gender opposite their gender identity, and who desires SRS. I dislike this term for it sets up a hierarchy that is heteronormative. I believe no one is more trans than anyone else, regardless of who they desire, what role they conform to (or don't), if they desire GRS or not. These individuals fit certain, classic criteria and transition to fit the stereotypical, heteronormative gender role considered socially and culturally appropriate.

TS: short for transsexual.

TV: short for transvestite.

Transwoman: also MTF, M2F, male to female transsexual. Male-bodied person whose body does not reflect their female gender identity. They desire hormones and SRS in order to align their body with their identity as a woman.

Vaginectomy: surgical procedure to remove the vaginal canal



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