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GGA



VOL I, No. 3

Friendship is born at that moment when one person says to another,
"What! You, too? I thought I was the only one."-C.S. Lewis

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SPEAKING UP

By BILL (CA-8)

It is time for the gender dysphoric community to unite and **demand** the dignity and respect often denied us.

Although the different forms of gender dysphorics require distinctive therapeutic approaches due to differing needs, the fact is quite clear that transsexualism is an entity in itself. The true transsexual is simply a person with a low incident rate medical problem which can only be resolved through surgical intervention gender reassignment. Members of both the provider and general public communities must realize that transsexualism is **not** symptomatic of anything else as is so often implied.

Transsexuals are entitled to the same dignity in treatment granted any medical patient or psychotherapy client. Although it will apparently be many years before the general public accepts, much less understands transsexualism, it behooves the medical and psychotherapeutic communities to take a totally professional and serious approach to this. Alcoholics and drug addicts are readily accepted by society. The physically handicapped and mentally retarded have made great strides recently in social acceptance. Why, then, should the gender dysphoric continue to be socially denigrated and ostracized?

Since there is a great diversity of interests, abilities and sexuality among transsexuals, as there is in all segments of society, they should not **all** be placed in the same category. Gender clinics and gender therapists must realize that stereotyping gender behavior will only hinder the transsexual. Many **non-transsexuals** fail to conform to the preconceived stereotypical male/female patterns/roles, so why must the transsexual be stereotypical? All gender clinics should not only show more empathy and sensitivity to the transsexual's very real agony, but also use transsexuals, as peers, in the evaluation process. Non-transsexuals, however well meaning, neither fully understand nor realize the transsexual's psychological agony. Furthermore, no one person in the clinic's evaluation process should be so powerful so as to be able to deny the acceptance into the program of any individual. Acceptance or non-acceptance into a program should be the decision of a committee, **not** a single person or two persons acting in collusion as often seems to be the case. I often marvel that a perfectly acceptable transsexual can be declined by Clinic A, accepted by Clinic B and be successful post-operatively. Certainly the personnel of the various gender clinics must remember they are

WE'VE COME A LONG WAY

Donald R. Laub, M.D.

It's the 12th anniversary of the beginning of the gender program at Stanford/Palo Alto, and I'd like to recount some of the changes in the patients and the doctor over the last decade. First of all, the most noticeable change is that there is more joy in the patients: the gender patient in 1980 seems happier with his/her own program of change. Patients put more into the program, they give more, and in turn they are able to receive more benefits. Reciprocally, there is more joy or "gratification" coming to the doctor from his patient contact. Lately it's been more enjoyable (fun) for me to see patients at their initial interview in the "clinic" situation. Patients have their act together--they are able to convey their story to me more truthfully; it is one of the more meaningful and enjoyable parts of my life to be able to talk directly to patients, to have them be comfortable, to have them be able to tell the true story, and then be able to help them significantly in their particular situation. Patients should feel that they are friends of mine when coming to the "clinic."

Secondly, the techniques of the surgical aspects have slowly become more refined and defined over the last decade. But, these past changes are minor compared with the changes in gender surgery that will be made within the next two years at this Gender Dysphoria Program at the Palo Alto Medical Clinic. We're on the threshold of being able to apply many new reconstructive surgery concepts used for other situations directly to the gender patient's operative procedures. The next few years will be an exciting time in the development of our program. I've recently left a large administrative responsibility at Stanford University and I'm now able to focus on the gender situation, particularly the operative techniques: the extension of the urinary tube, the ability to fabricate a penile implant, and to fabricate a vagina with less skin grafting or no skin graft. The improvements in the mastectomy are already being made.

The resources that are now available in peer counseling and post-op care, via the We Are group and Ron in particular, are great. They are working exactly in the business that We Are is all about: self-improvement. I'm hoping to expand more on the concept of self-improvement for the gender patient, both before and after surgery, later.

Editor's Note: Dr. Laub's article originally appeared in the May 1980 issue of WE ARE and

was reprinted with the permission of both Dr. Laub and WE ARE which is no longer published because the organization is now included in the Gateway Gender Alliance.

(Bill, continued)

there primarily to serve the patient **not** the other way around. The Standards of Care devised by the Harry Benjamin International Gender Dysphoria Association are reasonable and help eliminate the majority of non-transsexuals from the various programs. The requirement of crossliving for a period of time is fully valid and a great determinant as to whether or not an individual can/will be successful in the desired gender role post-operatively. Those who cannot succeed or who are uncomfortable in the Real Life Test are not true transsexuals, and certainly cannot expect to be successful post-operatively.

Most of all, we must respect ourselves. We are, after all, human beings with an unusual but totally legitimate medical problem. We deserve dignity not humiliation. We have been through enough hell before we ever contact a therapist or clinic. We deserve to be told the truth, not led on with half- or partial truths. Nor do we deserve the promise "You'll hear from us soon," and be placed in a limbo status for months.

If clinics and therapists are unwilling or unable to provide the needed information and the educational programs so often needed by the transsexual, it is absolutely essential that they cooperate with, and refer clients to legitimate support organizations who **do** offer the understanding, peer association and education programs needed by the transsexual. Years of experience proves that the majority of help a pre-op receives is from the various support organizations, **not** the clinics.

The financial burden of reassignment surgery and the other attendant necessities, such as electrolysis, are staggering. Clinics cannot continue to simply allow the transsexual to blunder around on his/her own having to make the same mistakes made by previous travelers on the road to reassignment and return a year or two later expecting surgery only to find additional conditions must be complied with before surgery will even be considered. The provider community, like product manufacturers, have a responsibility to make information available to the consumer so the consumer can be an "informed consumer." The transsexual has the obligation to be informed. If the clinic/therapist is unwilling to provide the information needed for informed consumerism,

than it is the responsibility of the consumer to find a source of the information needed, and preferably another clinic/therapist.

Clinics will continue to treat the transsexual as a source of income, with very limited attendant clinic out go, so long as the transsexual community allows this practice to continue. Once the transsexual community visibly indicates that "we are mad as hell and won't take it anymore," the attitude of the provider community will change.

*****POSTAGE*****

Did you notice the funny preprinted "stamp" on the envelope in which both last and this month's Phoenix arrived? That little permit cost \$70.00 for the first year and \$30.00 each year thereafter, **but** it will save at least \$1,000.00 in postage and an unestimatable number of "person hours" in licking and sticking stamps per year. Now the only Phoenix envelopes requiring stamps are those going to members in Canada, Mexico, Australia or other countries.

Even though the Phoenix is a first class publication, the Post Office will only give it third class handling as Bulk Mail, so if it arrives a day or two later than usual, please bear with us.

*****ANNOUNCEMENT*****

Intensive Large-Group Therapy for Transsexuals

Beginning March 14th, in San Francisco, a 4-hour, twice a month (total 8 hours) Saturday group therapy (not a rap group) group will begin, limited to a maximum 12 persons, with 2 group leader/facilitators. This group is for transsexuals who have already begun their transition. Members are asked to make a 6-month commitment to the group. Cost will be \$60.00/month (equals \$7.50 per hour with two therapists). To apply, or for further information contact:

Paul A. Walker, Ph. D.
Licensed Psychologist (PI 6638)
(415) 567-0162 (9 a.m. - 5 p.m.)

OR

Alice Webb, M.S.W.
Licensed Clinical Social Worker (8530)
(415) 641-4887 (9 a.m. - noon)

A NEW FLORIDA CHAPTER

Susan [REDACTED] has volunteered to get a chapter going in the Sunshine State. The Chapter name is the Success Chapter. Those Floridians, and others from nearby states wishing to join the Chapter, should contact Susan [REDACTED] PO Box 1601, Pinellas Park, FL 33565. We look forward to an ever increasing membership in Florida, as well as other areas.

January 19, 1981

Ms. Georgia Saunders
P.O. Box 62283
Sunnyvale, Ca. 94088

Dear Ms. Saunders:

I want to briefly express my praise to you and your associates regarding The Phoenix. It looks good, and obviously serves an important public need. Until and unless society in general, including the medical and mental health professions, do more to make a place in life for trans-people, the burden of providing education and peer-support falls on you -- and you are doing a splendid job!

Sincerely,

Paul A. Walker, Ph.D., President
The Harry Benjamin International
Gender Dysphoria Association, Inc.
Director, The Janus Information Fac.

GAY INMATES and young prisoners threatened with sexual exploitation, in institutions throughout the country, benefit from the work of The Prometheus Foundation. You can help by joining the PenPal Group or any of several other vital programs. For information and a copy of FIRE, the Foundation newsletter, write to **The Prometheus Foundation, 495 Ellis St., #2352, San Francisco, CA 94102.**

BIORYTHM CHARTS

Want to know what your biorhythms hold for you for the next 12 months? When to plan activities and when not to? Send us your name, birthdate, and \$15.00 and we will mail your chart for each month for the next year. GGA, PO Box 62283, Sunnyvale, CA 94088.

MICHELLE SEE THE WIZARD

Michelle took the last few steps along the Yellow Brick Road and was granted her wish on February 4 by the Wizard of Oz (who is also known as Dr. Stanley Biber).

We congratulate Michelle for having survived the journey in excellent shape after having overcome the obstacles on the Road and, of course, overcoming the Wicked Witch of The North (*acutally in this case it was the Wicked Witch of the West she overcame).

We are sure our newest "Biber Girl," like Dorothy, will remember her Tinman, Strawman, Lion and all the Munchkins who helped her on the journey along the peril strewn Yellow Brick Road.

IS THE GIRL WITHIN US THE OTHER WOMAN? A SURVEY OF WIVES by Betty Ann Lind (VA-1)

How the Survey Started:

During Dream '78, I wondered about the wives and girlfriends who had agreed to attend the week-long retreat by the Pacific with their beloved, who were enjoying a vacation "en femme" attending a real fashion and modeling school. Were these the fabulous "A" GG's I had read about in Virginia's TV magazine? What was it that set them aside from other women?

As a local chapter president of Tri-Sigma and an officer in IAMF in Washington D.C., and a bachelor, I thought that I should interview these women to determine if there was anything I could do to build a stronger tie between the TV and his GG as well as strengthen our organization.

Before I report my findings, I wish to explain that Betty Ann is a matronly person in her forties; who has, since age six, been a bi-genderist in that, for at least ten years she has lived as a women from time to time. Her male counterpart is a very successful executive, and enjoys the best of both worlds. However, her lifestyle has given her a mature womanly outlook which, quite frankly, served to help in understanding the undercurrents of sensitivities existing during the interviews. The fact that Betty Ann shares an advanced degree in social psychology and counseling helped.

So, starting at Dream, and for two-and-a-half years afterward, Betty Ann has sat down and interviewed in private, forty-three women using a simple unstructured interview approach to encourage open observations. Once confidentiality was assured and the purpose of the interview was established, the wives were extremely frank and

open about their life with that 'other women' within their husband. Yes, they recognize 'her' as the other women, in fact none of the women viewed her partner as being androgynous.

Of the forty-three women, thirty-eight were married to heterosexual TV's, two to borderline TS's, two to bi-genderists, and one to a bisexual TV. By-in-large, they were middle-to-upper class, with a bias towards the established social role of the working homemaker rather than militancy concerning feminism. Of the group, three were considering divorce for reasons other than TVism. (They have since divorced.) Otherwise, the group ranged from new brides to mature matrons with at least thirty years of marriage. All of them has seen their husband dressed as a woman.

It was my impression at first that this survey would lead to a wide range of difference in opinion between these women. The surprising result was their general uniformity of opinion on the subject of their husband's 'hobby.' I thought that such variables as years of marriage, income, education, or social status might influence their answers, yet I must confess that I could detect no real polarization due to such influences. Where there was a spread of opinion, I have noted it.

I shall try to relate the results of my poll in the hope that it will serve to help others. However, I must observe that many of my findings may upset my dear readers, especially those who have allowed their fantasies to obscure the reality of their marriages. Also, I urge a great deal of careful thought on the part of both partners before they take to heart any of my findings. Remember that generalizations are just that. It is your marriage which counts.

And as one who sought to understand, Betty Ann wishes to thank the forty-three who have one wonderful gift in common, a delightful curiosity about the other woman that exists within the man that they love.

When Did You First Learn?

- | | | |
|----|----------------------|----|
| a) | After the marriage: | 30 |
| b) | Before the marriage: | 13 |

The clear majority did not know about their husband's crossdressing, and of these, twenty did not find out about it until several years after their marriage; usually during the male mid-life crisis period of the late forties.

Q. Would you have married him if you had known?

A. I don't know. (Almost to a woman, this was the honest reply.) "I was pretty young and pretty naive about such matters."

Q. Given what you now know about him, would you have married him?

A. Yes. (Even the three who intended to divorce their husband said, yes, and then added later that their plans for divorce had little or nothing to do with the crossdressing. IN FACT, IF THEIR HUSBANDS REALLY TRIED TO UNDERSTAND THEM AS A WOMAN MIGHT, THE DIVORCE WOULD NOT HAVE BEEN NECESSARY.

Q. Would you advise a transvestite to tell his bride about himself?

A. I'm not certain that it would be wise considering the social risks involved, but if he is sure of her general understanding, I think that it would be the most honest thing to do, even if she might say "no."

(Despite their words, my own feminine intuition told me that they were satisfied with having found out about his crossdressing after their marriage. A little over one-fourth learned about their husband's crossdressing before their marriage. The general viewpoint was that they were somewhat fascinated by this revelation from a rather macho male. They held an uneasy combination of curiosity and amusement. Since they loved their husband to be, they accepted him for better or for worse, and his secret could have been something worse.)

Q. Did you see him dressed before your marriage?

A. "No, and I had no real desire to." (Four noted that they had, with one taking some delight in describing a counter wedding with the husband dressed as a bride. One wife said that she almost didn't marry. The other three were candidly a bit concerned, but took it in stride admitting it was certainly an interesting experience.)

Q. Did you see pictures of him before the marriage dressed as a woman?

A. That was his desire. (But, only seven actually elected to see the pictures, with the remaining six accepting the story as 'proof' enough.)

Setting aside the first impressions for later discussion, I think that there was a rather serious undercurrent during this discussion with this particular grouping. Of the thirteen women involved, ten freely admitted that they thought this peculiar behavior would be set aside by marriage and six of them realized this state for three or more years. Three wives from this group totally accepted the husband's activity before and

after the marriage, with one of these admitting that she liked the 'other women' better as a companion than she did her husband.

How Far Will He Go?

Although this was not my question, it was, in fact, the question asked by every woman shortly after the discussion above. Usually they would look at Betty Ann as if to add, "I hope not as far as you." This backhanded compliment reflected their general opinion that Betty Ann, with her natural hair, matronly image, and general decorum was an extreme they did not desire as a model for their husband; and understandably, I might add. At this point they would confess that they understood for people like Betty Ann (who most took to be a TS), it was a natural expression of a desired sex role (i.e., have an operation to marry a man and settle down to be a housewife, etc.) But, TV's were something else. Although most of them would listen politely to my discourse on the basic differences between TV's, TS's and Bi-Genderists, and so forth, I soon realized intuitively that their direct assumption was that there was a clean line between the simple stereotype of the TS (or drag queen for that matter) seeking to be accepted in a 'normal' female role, and the TV as a man caught somewhere in between. I am not stating what they understood logically about the classifications used to define components of our paraculture, but rather what they projected emotionally woman to woman. This "rationalization" of sex role to gender role and vice-versa is clearly a dangerous basis for trying to relate to their husbands, since it reinforces the very image they desire not to accept in him. Thus, "their husband and the other women."

Their questions centering on "how far will it go" moved towards the basic definition of cross-dressing as compulsive behavior.

- Q. Why must he go out dressed?
- Q. Why must he tell others? (Doesn't he know the risks he takes?)
- Q. Why does he try to force the issue after so many years without a word?
- Q. Why is he so extreme between the word?
- Q. Is he becoming a TS?
- Q. What must I do?

This myriad of questions which I tried to answer objectively, reflected a consuming interest, a desire to express concern to another kindred soul, a need to probe for an answer from an experienced person, or simply served to state her own position relevant to her acceptance of the terms of her condition in marriage.

At this point another insight emerged, these women were accommodating to make their marriage successful, often at extreme emotional cost, and often as not it was a one-way street. Would they admit this to their husband? I doubt it. By and large, they were not oriented by their own role model standards to openly seek to confront their husband's compulsive behavior. Much as I hate to say it, I caught fleeting glimpses of a mother baby-sitting a cranky child with patient understanding that it was just a phase he was going through. This was a very difficult phase in the interview.

Do You Know About The System Used To Rate Wives?

Almost every wife had heard of the system devised to Suysanna to rate wives. They described as being degrading (sorry about the pun). When I pressed this issue further, most wives would thoughtfully counter by saying, "perhaps an 'F' wife who absolutely frustrated all efforts of her husband to dress as the 'other woman' was really an 'A' wife for that particular man. She knows in her heart that if she encourages his behavior, he will go off the deep end and will ruin their marriage and lives."

They would then shift from this position by suggesting that there might well need to be a rating scale for husbands (and the "other women"). Not one oriented towards how well he "passed," but on how well he understood the consequences of this actions with the reality of this life as a husband and father with real responsibility (or, for that matter, on how well the "other women" accepted her responsibilities as a mature women.)

At this point the interview opened out into open hostility focusing upon the unfairness of their situation. But, when I suggested that they assist in making up a counter rating system, none responded. So I have merely stated what happened at this point of the interview and hope that my readers will understand their desires for a balance.

The Nest Concept

From the rating question sprung a series of comments by the wives which caused me to realize that these women were focusing upon what might be called a "nest" oriented lifestyle. Except for four wives who skirted this topic altogether by simply stating that they preferred a "sister/lesbian" relationship with their husband and therefore totally accepted their husband's behavior, the other woman delineated their relationship with their husband's "other women" in terms of the bedroom, the house, the

neighborhood, and elsewhere. Thus, the wives described their lifestyle in terms of distance from the "nest" or bedroom.

The "nest" focused upon the bedroom to start and the bottom line repeated again and again was, "I married a man, not a woman." Suddenly, in context, the girl within their husband became the "other women in her bedroom." (Whoever called it the master bedroom?)

Tones of ultimatum came into their voices insisting upon the fairness that "she" belonged elsewhere in the house, "her" clothes should not be kept there, but in some other secure storage place, and the majority were clearly opposed to body shaving and the husband wearing "her" clothes to bed. (Again "I married a man, not a woman.")

Further probing revealed that this was an emotional response, but did not, in fact, represent how over half of them co-existed with the other woman in their "nest." (With children, where else can we put her clothes?) Whatever can be said about this, Betty Ann must confess that time and time again I have observed an amazing insensitivity on the part of the husbands involved. (Look up the word "compulsive" please!) This does not mean that the wives who accepted the invasion of the bedroom by the other woman did not occasionally enjoy the "game," it is just a straight forward statement that the husband is playing a very dangerous game indeed by imposing upon their wife a steady diet of the "other" woman in this particular setting. A desire to please does not mean that one is, in fact, pleased. This is very true, my dears, between women:

Interestingly enough, the husband's cross-dressing in his own house, out of sight of neighbors and family was not considered by most of the women to be too bad. There was an almost amusing byplay here, "At least it keeps him off the streets." However, most wives expressed a certain amount of resentment concerning the "other" woman not doing her fair share of the housework.

The house as a giant closet, excluding the next, was a standard dynamic. Yet, there was an undertone of acceptance of the other woman as a companion or sister, which I found most interesting in terms of the affection often spoken with deep understanding on the wife's part. The change between the "nest" focus and the house focus upon the husband as the other woman versus the husband as a sisterly companion was quite

Woman?

"She is a pre-teen playing dressup. Somewhat spoiled and self-centered, immature, narcissist, with a compulsive desire to be the center of attention even when they may be involved in risk of exposure. ("If I sought compliments like he does, my husband would think I was nuts. Yet, he doesn't make an effort to compliment me.") She

tends to overdress, or dress up rather than down ("To suit the occasion.") like a woman. Her image of a woman is female, not womanly, a mirror image of a satin doll, not a real person. Her image is generally not feminist, in fact 'she' sees herself as a sex-object. Often this is expressed by his dressing and using make-up in the fashion of women when he was in puberty, not now."

This was the underlying theme repeated again and again as if they all knew the same other woman.

Q. What did you think when you first saw her?

A. "I was absolutely stunned, she was actually prettier than I was. In fact, I felt compelled to return to make-up and get myself back into shape," responded about one-third of the wives in a somewhat bemused plaintive complaint mixed with a sincerity and personal uncertainty which caused Betty Ann to consider the real impact of such TV's upon their wives. "It is not really that bad, it's just that I was born a woman and 'she' is so damned pretty. How can I compete with her?"

"Well, I really felt sorry for 'her.' She is so big! I mean, it is so hard for her to find clothes and such. And she is so very hurt by the unfairness of it all. God knows what would happen if she were to try and pass. Yet, she is so sweet and considerate and tries so hard. It is sad in a way." About one-third of the wives followed this theme reflecting their concern. "But, perhaps she will stay out of trouble because she really couldn't pass, you know?"

"It was kind of a mixed bag, really. She really wasn't together. I suppose she could pass if she put some effort into it. It was a bit funny, but she couldn't smile and I wouldn't laugh. Very difficult, but we managed."

(The interesting point is that the viewpoints expressed were more often as not a viewpoint held only by the wife herself about her husband when he dressed. In many cases I found that there was very dramatic. (This was very strongly expressed by the wives of the transsexual and bi-genderist oriented husbands, and only to a lesser degree extent by the other wives. Interestingly enough, the 'lesbian' relationships did not stress this in the context of the house.) Consider my earlier observation of the wife's sexual/gender equation.

Outside the house, the wife panics. Here she sees the crossdresser through the worst eyes, those of her intolerant neighbor. She envisions a telephone call, the police, social and economic ruin all in one brief totally destructive moment. No man who does not totally depend upon another

can understand the emotional depth of a wife projecting this disaster to her children and all she holds dear. This projects out into the neighborhood shopping center, and wherever she is known. "Why does he want to destroy us?"

When I shifted to group meetings and weeks like Dream and Fantasia Fair, I received the same fears as they related to his going and coming dressed to such activities. But, there was general approval of the activities themselves. Then the opinions spread out like a great fan ranging from the wife enjoying the chance to go to such activities (to meet other wives) and learning about her husband through others -- through an attitude that she goes to "babysit" (note comment before on the "cranky child"). Most wives were anxious to be involved in a group as long as there were other wives. None were interested in joining a male-feminist group.

It becomes emotionally clear that the average wife interviewed did not want her husband to associate with either transsexuals or gays while he was at such meetings. Nor, did she particularly desire to associate with such people when her husband was dressed as a woman. It was far too easy to draw comparisons. Also, "How can they go on so about hormones and such. It is all so disinteresting." Or, "Perhaps I am afraid that he will be attracted to them. Who knows?" A curious point was that although many of them appreciated a female impersonator show, their husband was best dressed as a man when they attended.

Which brings us to the interesting curiosity of distance. The farther away the wife is from home with her husband dressed as a woman, the more relaxed she is. The vacationing "sisters" approach came out as a recurring theme. The motel room was not a "nest." Only a few omitted going out in public on such "vacations."

Tell me More About Your View Of The Other

little correlation between what the wife saw and that seen by others.)

Q. What have you done to help her since then?

A. This question did not fall on deaf ears. In fact, the wives all suddenly took a rather dramatic turn from their earlier evaluation of the "A" wife as a possible negative to casting themselves in that role, i.e., serving to help their husbands by buying them dresses and so forth.

Q. Do you help your husband so that he can "pass?"

A. The problem that their husband's complusion might drive him to try to "pass" was recognized by all the wives. However, they were almost equally divided on the question as to if they

should help him to do so. The basic argument against helping beyond token efforts started from the basic issue that as women they had been trained to present themselves as women in public and it was natural for them. Furthermore, such efforts to help their husbands might encourage him to take risks. The other side recognized the issues but also took the position that if they helped their husband it might reduce the risks involved.

Q. In our conversations, you draw a distinction between female and woman, what does that have to do with the image of the "other woman?"

A. Most of the wives tackled this question by stating that the "other woman" had in her mind's eye an image of themselves as a female, or a kind of a satin doll reflection. Few of the wives saw in the other woman's self-image the completeness of a mature woman willing to accept womanly responsibilities.

Q. Have you made any efforts towards conscious raising?

A. This crossover to the feminist dialectic caused some amusement and only a few had considered the effort with the candle. "If she were a woman, she would prefer Total Woman to Sisterhood as reading material." They would then add, "Although there is plenty for her to read around the house concerning women, she really isn't all that interested." There would be a pause, "And perhaps that is for the best."

Q. Have you ever required her to be womanly, to accept household duties and so forth?

A. The response was evenly distributed between "she helps about the house" to "neither one of them lifts a finger." The idea of using permission to dress as leverage to get "her" help wasn't really of much direct interest, but most of the wives recognized that their husbands did cooperate a bit more if the other woman was asked to help. (It is clear that the male half of most TV is fairly chauvinist.)

Conclusions.

I suppose that before I offer any conclusions concerning my survey of wives who accepted their husband's girl within, I should pause and observe what seems to be the basic difference between these women and the dozen or so wives that I have met who absolutely have no desire to accept their husband's "hobby."

I found a common thread of reasoning in these women, not unlike the positions expressed by the wives who accepted their husband's fantasy, but with a single difference. The wives who rejected the other woman did so in the solid belief that by doing so they solved the problem, and the problem

was "how can I preserve what is mine?" This self-centered focus exists in all of us, but only mature people know that by giving of ourselves to those we love are we complete. The desire to preserve status quo in the face of family crises is natural, but these women tend to think in absolutes. By refusing to recognize their husband's needs, these women accomplish the very thing which they do not want, destruction of the status quo. Their approach is that of the small child, "If I close my eyes, it will all go away."

I found that the accepting wives recognized that life is a changing stream and that if they wished to preserve anything that they would have to adapt, even if their husband was not capable of doing so.

In short, as one wife said;

"I have the best of both. A husband who is a man in every way and at the same time he is capable of being the sister I have always wanted as a dearest friend and companion. I love them both as one."

Perhaps hers is the best conclusion to my survey.

Editor's comments:

The preceding was originally published in the Journal of Male Feminism, 1980-2 and is reprinted with permission of the IAMF. The reason for republication should be obvious. We hope each reader will gain something from it and certainly consider how your crossdressing may affect your spouse.

JANUS INFORMATION FACILITY

under the direction of Paul A. Walker, Ph.D., provides referrals, pamphlets, reprint material and conducts research.

An advance contribution of \$5.00 or more is requested since the Facility is dependant on donations and private funding. The Facility welcomes the names of professionals who are willing to be on our referral list. Letters from postoperative gender reassignment individuals concerning their adjustment in their new life are also welcomed. Address all correspondence to:

Paul A. Walker, Ph.D.
1952 Union Street
San Francisco, CA 94123

HOPEFUL HINTS

Masters and Johnson are sponsoring a seminar in St. Louis in May; and Dr. Paul Walker, Director of the Janus Information Facility, has been invited to be one of the panel members doing an "in-depth discussion" of transsexualism. It is understood that Dr. Walker will present a paper on the subject as will Dr. Meyer of Johns Hopkins Hospital's Gender Committee. When additional information becomes available, we will pass it on.

*****NOTICE*****

Because Ratchel is now president of the Pittsburg Chapter and an Advisor to the Board we have changed her membership number from PA-21 to PA-1. Please make this change in your Directory.

CHAPTER CHATTER

San Jose--This issue of the Phoenix is brought to you, in part at least, through the physical efforts of the members of the San Jose Chapter. Much of the evening of the 20th was devoted to collating the magazine. The tedious manual labor (no, Manual Labor is *not* the president of Mexico) is the real bottleneck in getting the Phoenix out to you in a timely manner. (Some of the smudges you may see are from the "munchies" which were available at the meeting, and some of the moisture spots are probably from wine dribbled during the production line assembly effort).

Don't forget that the March 6th meeting will have a presentation by Doreen, the speech therapist.

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BLOWOUT THERAPY: A SELF-EXPLORATION PHILOSOPHY AND PROGRAM

Dr. Kenneth Pool, PH.D., M.P.H.

Introduction.

Blowout therapy is first an assumption of philosophy that by attaining a set of concentrated crossdressing experiences through a variety of techniques in an exhilarative, supportive, guided, and corrective social setting ideally with people of special skill (e.g., a peer and a woman), that positive effects will occur. Second, it is still a loose and experimental set of procedures, techniques, materials (clothing, accessories, jewelry, and cosmetics), and people. The focus here is to introduce the concepts of blowout, to show its extent features in a general way, to indicate why I think it works, some special effects or outcomes, and my hopes for its future. A later paper will cover methods in more detail and will give a more general self-evaluation therapy/education coverage and how blowout can, and probably should, be part of it.

Some doubt or even argue against such "encouragement." The term "feminization" is used for surgical modification and has also been used for skill training and education for womanhood. It implies permanent, irrevocable change. Blowout is **not** feminization, and the only permanent change is the gain in knowledge and memories. It allows and encourages informed choices and aids in the skilled execution of them. We take people where they want to go, to solve their curiosity, to teach, to help them choose if and how to get ready for crossdressing experiences. Needs and values around crossdressing, sex, and gender can be clarified by what I call Gender Exploration and Enrichment (GEE) activities.

Other questions center on methods. Is blowout the best way and are the methods now in use the optimal ones? I assume we don't yet know all the good techniques as we (probably) don't know just how it works (see "Effects"). Some ideas are in "the future" section. We simply do not know, and clinical and experimental research is in order. More will be said in the next paper, so for now, it can be said that specific "dress-on" experiences are very satisfying when done in a low threat way and are powerful experiences to all persons. What works best will probably differ with the person, his (other) therapy, and his situation in life.

Assumptions

A person "turned on" by crossdressing and/or thoughts of doing it has a life sentence. Expression can lead to joy, learning--sometimes to the full satisfaction and elimination of whatever motive(s) led to it; and, thus, the virtual elimination of obsessive-like thinking and compulsive-like crossdressing. Such a person should retain his positive values and knowledge and can employ them on occasions such as Halloween. Wardell Pomeroy has often indicated that most persons will stabilize their lives in that the obsessive and sometimes dreadful drive and curiosity is reduced. Others may find ways to incorporate dressing into their lives, and some may find it necessary to change lifestyle and/or self-concept in drastic, basic ways (e.g., transsexual, transgenderist).

I feel the outcome depends on the particular motives (most of which were brought to blowout from the distant past) and the rewards/costs of crossdressing. For the first example above, if the initial curiosity is satisfied and no new curiosities are aroused and the "excitement" of crossdressing dies out--the rewards greatly diminished, then the person may not crossdress for a very long time or may keep minimally involved (e.g., keeping a "security dress" around). This example in no way denies that many persons do not feel they have a mental choice; their motives are powerful and certain. Nor is the example an attempt to impose a non-crossdressing goal for persons. We provide opportunities to dress so that the person can replace fantasy with knowledge and experience (some of which she/he originally felt was not attainable). And if new curiosities develop and lead to crossdressing rewards, the person persists. But he continues to make choices.

On the other hand, those who remain guilt ridden or in conflict over crossdressing and therefore suppress it will pay a high cost. He cannot probably allow himself just residual curiosity because dealing with the subject will be painful. He must wall-off many ideas which associate to his "interests." For example, his sex/gender fantasies may be carefully "managed." Perhaps in less repressive periods he may hear the little voice within say "I wonder what it could be like?" or perhaps "I wonder what I could have been?" "Holding in" can also lead to undesirable and highly visible alternatives; taking supermacho risks/suicidal behavior, alcohol or other drug abuse, a general feeling of disappointment with life's alternatives, etc. There is no guarantee that life pressures (plus the internal ones) will not

overwhelm him. A crisis may produce both the pressure and the opportunity for dealing with crossdressing, but some may not have the personal resources to cope effectively, and so become once again guilt ridden and conflict burdened.

In the final analysis, "healthy" individuals have sufficient control of their lives. If driven by crossdressing curiosity, they engage in creative acts. It is not a compulsion, not an escape. It is a result of the rewards of developing fantasies and living them out to some extent. C.A. Tripp (author of The Homosexual Matrix) has termed behavior like crossdressing wherein one searches out one's curiosities "platform behavior." This interplay of fantasy and experience is captured in the transvestite's term "hobby" which most people can readily accept and understand.

Kathy, who works as both a peer counselor and professional educator, attempted to outline the variety of possible relationships and the sometime feelings of role conflict and identity crisis. She emphasized the "coming out" process in initiating and in changing a relationship. The key in planning and managing a "coming out" is what is to be attained by the divulging. Much of the story of TVism can be framed in terms of the interplay of fantasy and reality. Kathy's wife, who was raised without gender bias commented that she has trouble understanding those who are concerned about gender variants.

Emmon, a female-to-male transvestite, noted that a great many experts deny the existence of the FTM. The denial tends to drive one in search of true identity and settle on the label "transsexual." While the MTF TVs are driven, or seem to be driven by a sexual motive, the FTM seems to settle on an ego trip and feels the power drive is the central motive--he feels treated better as a male and is more comfortable in the male role. He and other FTMs also share the surreptitious nature of crossdressing with the MTFs (e.g., the crumpled tie in the back of the kitchen drawer). He also described dressing as a male like taking off the veil of self-effacement to let the male in oneself come out. He conceives a spectrum from TS through TV to tomboy, not unlike the Beniman Scale, but one should note that males would never crossdress in this society unless their concern were stronger than slight effeminacy, the counterpart of tomboyism.

Bekka, a full time MTF, did not label herself. Until recently she had oscillated for four years between guilt and non-guilt while cross-living continuously. Her mate, Jean, described the relationship as most like two women living

together even though counselors had told her it would never work as Bekka could never attain her full femininity. The Bi-Sexual Center "saved" them as both identified as Bi and they got much support. Several courses on sexuality, especially with sex/gender variations content, reinforced their convictions. Bekka's shift from TV to permanent cross-living led to lots of practical problems (less interest in underwear, more concern on how to get a proper driver's license, etc.). Jean and others helped to slow the shift without prejudging the "ultimate," that is whether she was headed for TS. This allowed her to enjoy and consider each step and, at least for now, brought a point of stability. She had previously felt trapped into a way to do things and was hurried to a "conclusion" by textbook oriented helpers. They do not live within roles and, in particular, have escaped sex typed roles. They related quickly upon meeting because of a genderless meeting of the minds. This occasionally causes problems with others who do not ignore the "sex" of the individual.

Michele never doubted from the age of three that she was a woman, but was petrified the family would discover it. With an "incredible" masculine body it almost seemed that athletic feats were caused by someone else's body. She described the social (mis)perception and changed relationships caused when she changed while on the job (note article in Gateway on this topic by her).

She got support from some women (one said "only a woman would talk to me the way you do") but the men could not adapt to her. Often an initial negative reaction can soften, and even turn to positive, especially when the "problem" is narrow in scope. I doubt that anyone missed her eloquent point that pressure can be pervasive and persistent by those whose values and conceptions of gender people are negative.

Bill (FTM-TS) and wife spoke of the necessity for peer counseling and support even for those who have a professional therapist. The need for individual and group advocacy, and our responsibility to exert some significant control over available and potential services was stated forcefully. We in GGA have more power than we realize, and Bill sees our responsibility as greater than we have assumed. Establishing a family is paramount in their plans, and their first attempt produced a child that looks just like him. They emphasized the need for a good family history on the donor, especially regarding health problems. His behavior with other children convinced her that he was destined to be a father.

In this regular feature we list the meetings of various gender support groups and special functions known to be scheduled. If your group wishes to have a FREE announcement in The PM-I, send the details to: The GGA, P.O. Box 62283, Sunnyvale, CA 94088. Copy deadline: 15th of the month preceding the issue of The PM-I.

NORTHERN CALIFORNIA AREA

Meeting time at each location -- 8 PM.

SAN FRANCISCO: 2nd Wednesday.

OAKLAND: 4th Wednesday.

SAN JOSE: 1st & 3rd Friday.

BERKELEY: 2712 Telegraph. 1st & 3rd Wednesday, rap session. Last Friday, special topic or guest speaker.

SOUTHERN CALIFORNIA AREA

TS Rap Group: Thursdays, 6 PM. contact Carol Katz, (213) 257-0500.

SALMACIS: Unstructured social get-together. Second Saturday each month, 7:30 PM. Contact Lynda or Ann [REDACTED]

SHANGRI-LA: (Scyros Chapter). First Saturday each month, 5-11 PM. Contact Nancy [REDACTED] for information.

OXNARD/VENTURA AREA: TS Rap Group. Contact Jean [REDACTED] P. O. Box 532, Port Hueneme, CA 93041, or [REDACTED] for information.

MISSION VIEJO AREA: Gender Program. Contact Joanna Clark, P.O. Box 2476 Mission Viejo, CA 92690. Meetings 2nd & 4th Monday. Open only to people in the program.

BOSTON AREA

TIFFANY CLUB: Tuesdays and Saturdays, 7-11 PM. Usually a \$5.00 attendance fee for non-members. Call (617) 891-8022 for information.

KAY MAYFLOWER SOCIETY: Every Wednesday, 7-11 PM. Call (617) 254-7389 for information.

CAPE CODE, MA

TS SUPPORT GROUP: Contact Rachia Heyelman, PO Box 25, S. Orleans, MA 02662 for information.

FANTASIA FAIR: Scheduled for Spring, 1981. Contact Fantasia Fair Ltd, Kenmore Station, Box 368, Boston, MA 02215 for details.

HARTFORD TVIC: Every second Saturday. Contact Patsie [REDACTED] P. O. Box 180, Hartford, CT, 06107 for information.

XX-CLUB: Primarily a TS Support Group. Contact Rev. Clinton Jones, 45 Church St., Hartford, CT 06103 for specific meeting information. Scheduled meetings: November 8, Workshop; December 13, Dr. David Wesser is the scheduled guest speaker; January 1981 meetings, 10th & 24th; February meetings, 14th & 28th.

NEW YORK AREA

TV Parties in NYC Area. Contact Joyce Dewhurst, [REDACTED] Jackson Heights, NY 11372 or call [REDACTED]

TV Parties in the Long Island Area. Contact Casey, P. O. Box 708, N. Bellmore, NY, 11710, or call [REDACTED]

ALBANY-TVIC: Meeting every third Saturday. Contact Wm. Thordsen, [REDACTED] Albany, NY 12200, for specific information.

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T.A.O.S. HAS GENDER WORKSHOP

The Northern California Section of The Association of Sexologists held its January meeting at the Institute for the Advanced Study of Human Sexuality in San Francisco.

Because the subject of the meeting was Gender Relationships, Dr. Mildred Brown, the Chairperson of the meeting, invited three couples and two individuals to speak of their relationships. All shared beautiful personal glimpses of their special relationships, some good, some bad, some unusual, and some, according to many "experts," impossible. While most relationships were stated as positive, all noted or implied either actual or possible threats from the outside (ranging from purposeful "coming out" to accidental discovery). The sub-culture/general public interface is difficult for each of us in both quality and scope; the topic of relationships was, therefore, a huge order of business. Compare Kathy, for example, who "comes out" as a transvestite to one person or a group at a time, to Michelle who, because of her job, has literally come out to hundreds because she changed on the job. (See CHANGING ON THE JOB, by Michelle (CA-29) in the January PM-I).

All attending or participating in the presentation acknowledged the importance of support organizations and networks. The GGA, The Institute, Bi-Sexual Center of S.F. and the San Francisco Sex Information Switchboard were all emphasized.

The impressions that even positive therapists have of us; i.e., "You don't exist," or "You two can't make it," further highlights the uniqueness and beauty of our relationships, actual and potential. Many different styles and outcomes of divulging or "coming out" were described.

OPEN HOUSE

The Gateway Gender Alliance will be holding an open house for all attendees of the 7TH International Gender Dysphoria Symposium Friday, March 6th from 5:50 pm until all hours.

There will be cheese, snacks and lots of good California wines. Many of the professionals associated with the GGA will be assisting in the Open House as will most of the Board of Directors and some members of the GGA.

Copies of the March issue of the Phoenix Monthly-International will be available to all attending the open house as will other literature concerning the GGA.

Invitations will be available at the Registration Desk; but even if you don't have one of the formal invitations, please plan to attend.

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ENCOURAGE COOPERATION AMONG THE LEADERS AND MEMBERSHIP OF THE VARIOUS EXISTING OR FUTURE GENDER DYSPHORIC GROUPS, ORGANIZATIONS OR ASSOCIATIONS.

DEVELOP EDUCATIONAL MATERIAL TO ASSIST IN THE EDUCATION OF THE GENDER DYSPHORIC IN DEALING WITH HIS/HER LIFESTYLE CHALLENGES AND ASSIST THE GENERAL PUBLIC IN ACCEPTING THE GENDER DYSPHORIC INDIVIDUAL AS A PERSON.

PROVIDE A PUBLICATION CONTAINING ITEMS OF INTEREST TO THE GENDER DYSPHORIC INDIVIDUAL AND COUNSELORS.

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PROVIDE A LISTING OR REGISTER OF ACTIVITIES OF INTEREST IN LOCAL OR ACCESSIBLE AREAS TO THE INDIVIDUALS AFFILIATED WITH THIS ORGANIZATION.

ADVERTISE TO ATTRACT UNDECLARED GENDER DYSPHORIC INDIVIDUALS WITHIN OUR SPHERE OF INFLUENCE.

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