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The wrong gender

Men and women who are unhappy with their sex role in life are being helped by therapy and treatment in a London hospital. Ann Hills reports

THE ANONYMOUS Anglican cleric who plunged the church and public opinion into controversy last month by undergoing a sex-change operation is not the first clergyman to do so. And he is only one of a growing number of people, both men and women, who find themselves so unhappy in the gender which their physiognomy dictates that they resort to surgery to alter it.

About 100 patients are going through sex changes at Charing Cross Hospital, London. They do not include the very rare pseudo hermaphrodites (people with the physical attributes of both sexes), and 75 per cent are males wanting to be female.

At the hospital's gender identity clinic, patients are treated for two years or more before any operation is undertaken. There is a screening procedure

and patients have to prove that they can already live convincingly in the guise of the opposite sex. A degree of mental stability is required, and although 50 per cent of the men coming to the clinic are married (few of the women are), the unit insists that marriages are terminated and that provision is made for dependents before the operation can be done.

The question of access to children after a sex change is still a highly controversial one. One father, denied access by the courts, is planning to appeal against the decision.

The aim is to offer skilled medical help for people who are suffering from a condition which has brought them to the point of despair. One male now in treatment at the clinic is taking on a female role at the age of 65. All concerned recognise that a

sex-change operation is a disfigurement and a minimising of the original sexuality. The patient remains biologically whatever sex he or she started out as even after surgery. Many will never achieve a full heterosexual relationship after the operation, but for most this is less important than social acceptance in their new role.

Robby is a tall, 19-year old West Indian girl with an Afro hair style. To the outside world she seems a confident young man. She arrived at the Charing Cross Hospital with a very feminine girlfriend who accepts Robby as a boyfriend who will need constant support in the next couple of years until she is 21 and can have the operation.

Robby works on an electronics assembly line where she is considered more female than male, but her

voice after a cold was deep and convincing. "I've always played football with the boys. I buy clothes from men's shops. I'm definitely not lesbian but I would go to bed with a woman if she considered me male."

A sympathetic GP referred her to the clinic, and she feels less suicidal now that treatment is starting. "I know I will not be able to have a penis, just an artificial one, but I'd like it to be as near the real thing as possible," she says.

Nicki telephoned the Samaritans last June. "I did not feel I could carry on as a male. I wanted to die." He is 28, tall, blond, pretty, tired of going with men as a male body. Prepared to wait for a sexual relationship (as a woman) for at least two years, he started hormone treatment four months ago. The hair has almost left his chin, and

the remaining strands are light and soft. "I've got an aim in life now, but when I see myself in the bath, I still hate it.

"I've known since I was eight that I was mentally female. My mother had lots of boyfriends and used to take them tea in bed. I wanted to be in bed with them. I've not got a rather fixation. She's been good. She cried when I first told her but she's accepted me now."

Nicki faces a long transition. He's doing part-time work which enables him to assume either sex role.

It was only just over 20 years ago that a distinction was drawn between transvestism and trans-sexuality — between simple cross-dressing and the desire to take the biological role of the opposite sex. The Charing Cross clinic has seen 1,200 males and over 300 females. It is now carry-

ing out about 50 operations a year — 30 on males, 20 on females (who are more easily treated by the removal of womb, ovaries and breasts).

A new technique means perfected, operation up to 20 women to male organs through a procedure known as phalloplasty. This allows them to stand up (essentially for full acceptance in the new gender role). So far, the course is not believed to be successful. Males can have artificial vaginas, but this is not an easy matter. The evidence of 20 male organs must be approved while leaving enough penile tissue. Some patients say they can achieve orgasm after the operation.

Charing Cross is bearing new ground in its gender training courses in speech, makeup, and deportment as well as regular group coun-

selling by a senior social worker.

Once hormones, surgery and training have contributed to a patient's new identity, the next procedure involves the return to friends and family.