Transgender: is it Me? (PLZ HELP)

Midori Trojanowski

**Writer’s Comment:** I wrote this paper for Dr. Wrye Sententia’s UWP 104F: Writing in the Health Professions class fall quarter of my senior year. I was very excited when we were given an opportunity to choose our own healthcare-related topic. Discrimination of any sort has always caught my attention, but I ended up writing about discrimination and the hardships of being a transgender-identifying person, especially the extent to which it can affect a person’s health. For transgender individuals, discrimination can be damaging both emotionally and physically and some doctors even refuse to treat them because of their identity. I thought it would be both fun and culturally relevant to write in the format of a semi-anonymous online blog or chat room. In a society that still finds ways to discriminate against people for who they are, I believe that this online format would be the first place someone today would seek information about what it is to be transgender. I would especially like to thank my long-time acquaintance Levi Maxwell, a gender variant person who has worked on behalf of transgender communities and who enlightened me about what it can mean to be transgender in today’s world.

**Instructor’s Comment:** Midori’s approach in this piece of writing is courageous. In the course for which it was written (UWP 104F: Writing in the Health Professions), students typically write in styles that are more comfortably “academic.” One might wonder, how then, could Midori’s approach possibly ‘fit? And yet, it does fit, beautifully. Not only does Midori’s unique piece fit as an apt response to the
writer’s challenge for the assignment: to provide useful information and research on a medical topic to a specific audience in a particular context, but additionally, Midori’s piece displays strong writing precisely because the writer dared to imagine reaching real readers. Drafting from a place of authenticity, Midori explored how her purpose—and her audience—would best be served through her writing on this topic. How might she convey the issues in transgender health to teens struggling with lived vulnerabilities? To parents facing their fears? In reworking her drafts, Midori courageously improved the focus to deliver key health information through empathetic characters who give voice to perspectives that urgently need to be heard.

– Wrye Sententia, University Writing Program

Worriedkid: Recently, the issue of gender has been tripping me up. I’m a 13 y/o girl biologically, and ever since I was little I’ve always liked playing with toys considered more “boyish.” Now as a teenager I act more masculine than my female friends my age and I still prefer activities and clothes that are considered to be for boys. For a while I thought I must be gay, but I keep wondering what it would be like to always wear button-ups and men’s jeans (which fit a lot differently than female jeans), or even what it would be like to have a penis. I guess I’ve just always felt like a boy. One of the kids at school told me that I must be transgender, but I’m not really sure what that means. Can anyone help me understand?

loudn’proud: “Being transgender” is merely a condition in which you perceive your gender to be in disagreement with your *ahem* anatomy. It’s a blanket term for a wide array of gender identities that differ from the simple “male” or “female.” It doesn’t mean you’re gay, or that you’re confused, and it certainly isn’t any cause for dismay :)

Dr_NoItAll: Just as it is for homosexuals, transgenderism is not a choice or a lifestyle; it’s what a person is born.

worriedkid: One time I heard my uncle talking about transgender people as being “cross-dressers who are sick in the head.” If I’m transgender does that mean that I have some sort of mental disorder? :(

bigot: Yes you do have a mental disorder if you’re a tranny; it’s even in
the DSM-IV\(^1\). The DSM, or the *Diagnostic and Statistical Manual of Mental Disorders*, is a diagnostic tool used by mental health professionals in the US. SMH kids these days.

**loudn’proud:** Actually, that info is outdated ya old hater. The *politically correct* term is Gender Dysphoria, and the only reason it’s in the DSM-V is so that us “trannies” can get the proper healthcare we need covered by insurance\(^2\); and the only medical standing for that term being in the DSM in the first place is because some transgender people can feel significantly anxious/depressed towards their condition, but being transgender or gender non-conforming in general is NOT a mental disorder\(^3\).

**bigot:** Well then these weirdos are just choosing to change their sex because their personalities don’t fit with their natural body!

**Dr_NoItAll:** @loudn’proud is absolutely correct. In fact, one neurological study\(^4\) showed that a certain part of the brain of transsexuals had neurons numbering in the range of the sex that they identified with. This means that female-to-male transsexuals had neurons in the male range, while male-to-female transsexuals had neurons numbering in the female range. Given the actual difference in the brains of the subjects for this study, it’s highly unlikely that there is much “choice” in the matter. If you want to read the study for yourself, here’s a link: [http://press.endocrine.org/doi/10.1210/jcem.85.5.6564?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%3dpubmed](http://press.endocrine.org/doi/10.1210/jcem.85.5.6564?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%3dpubmed)

**worried_kid:** Wow, thanks for clarifying everyone! I think this describes me really well. But if I am transgender, what can I do so that I can finally feel happy in my own skin?

**loudn’proud:** When it comes to your body that’s a very personal decision that you have to arrive at on your own! But I can tell you about my own experience with hormones. My doc prescribed doses of estradiol for me to embrace the woman in me, but the doses he gave

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me were way too high. You see, not a lot of healthcare professionals know how to work with transgender people; they all assume we want the opposite of what we have. My doctor originally gave me enough estrogen to turn me into Laverne Cox. But what a lot of people fail to understand about transgenderism is that it’s a spectrum. For me, I just wanted enough hormones to make me feel right in my own skin, so I had to argue with my doctor and be my own advocate. It’ll be that way for a lot of things in your life, if you come to the conclusion that you are transgender.

ConCernedPareNt: My daughter recently came to me asking for hormone treatments so that she could “be who she was meant to be.” While hormone therapy may have worked out fine for @ loudn’proud, aren’t there health risks posed by hormone therapy? Also, does anyone know exactly what sex reassignment surgeries involve? My daughter brought that up too, but IDK what that process is even like! :

Dr_NoItAll: @ConCernedPareNt the dangers involved in hormone therapy are next to none. In the past studies have suggested that hormone replacement therapy caused certain types of cancers and vascular disease, but after an extensive literature review in 2010 concerning hormone therapy in female-to-male transsexuals, it was discovered that only minimal negative side effects occur, and that’s only if the patients were given an abnormal amount of testosterone.

As for surgery, in some cases it can be considered an important and appropriate treatment for a transgender person, but that is something decided on a case by case basis.

For a female-to-male transition, there are several stages that occur once they have been evaluated by their mental health professional and have experienced hormone therapy. First, the

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5 Maxwell.


7 Bob Egelko. Transgender Inmate’s Sex-change Surgery Must Proceed, Judge Rules. *SF Gate.*

breasts are removed and reconstructed so that they look like a normal male chest. This is usually followed by or accompanied with removal of the uterus and ovaries. For the construction of a functioning penis, there are two options for you:

1. A Metoidoplasty – here the enlarged clitoris (a result of testosterone therapy) can be manipulated to function as a micropenis. While you may find the size disappointing (5.7 cm), a metoidoplasty involves less obvious scarring, is less expensive, and allows you to have an erection without prosthetics, unlike a Phalloplasty.

2. A Phalloplasty will require a skin graft, or a sizeable piece of skin from the patient’s body, in order to construct a penis that can be used for urination as well as penetration during intercourse. Because you would be donating your skin to your new ‘member’, your surgeon will be able to construct an average-sized penis. After about a year you could opt for penile prosthetics which would allow you to achieve an erection. Penile prosthetics are essentially a pump placed inside the penis; in order to get an erection you would squeeze your testicle and your penis would become erect.

Sounds super strange, I know; but for clarity you can visit www.femaletomale.org to view videos featuring these prosthetics, as well as to read more about the various options available to you.

For male-to-female transitions, patients generally undergo what’s called a vaginoplasty and labioplasty. Some patients will even undergo facial feminization surgery if needed. A vaginoplasty is basically a procedure in which the penis and scrotal tissue are manipulated to form vagina, clitoris, and labia. The labioplasty is a surgery performed to make your new vagina look like the genuine article. And of course, you can get breast implants if you don’t develop breasts during your hormone therapy. Breast implants are increasingly common in the US today, with around 400,000 women receiving breast implants in 2014. For some detailed info and pictures of vaginoplasties, http://ai.eecs.umich.edu/people/
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conway/TS/SRS.html is an obscure yet informative website to visit.

Finally, if you have strong masculine facial features you can undergo cosmetic surgery to give you more feminine characteristics. This is referred to as facial feminization surgery. The cost of these operations varies depending on several factors, but they generally run several thousands of dollars each. So if you do discover that this is you, then you’ll be saving up for quite a while!

worried_kid: Wow, that’s a lot of information. Do the doctors let you do it all alone? Idk how supportive my family and friends would be if I decided to do that :(

loudn’proud: The only thing your doctor will require is that you’ve been evaluated by a mental health professional and that you’ve lived life as the gender you feel yourself to be\textsuperscript{12}. Before you make ANY surgical or medicinal decisions, it’s important for you to go and experience trans. Go talk to people in the trans community, get a feel for if this really is you. And if it is, that’s all the more reason to get to know as many trans people as you can! There’s a reason so many trans folks are prone to anxiety and depression\textsuperscript{13}, and if you do decide to transition there’s no better tool against these kinds of negative emotions than a strong network of friends who know exactly what you’re going through.

ConCernedPareNt: It can be quite lonely and even dangerous for an openly transgender individual! The one trans person that my husband and I know has told us of how they prefer to drive out of town to visit “trans-friendly” clinics instead of going to the local hospital\textsuperscript{14}:(

Dr_NoItAll: @loudn’proud and @ConCernedPareNt are right; unfortunately trans people struggle a lot. From just existing and trying to function in public places, to their intimate relationships with others, studies of the dynamics of trans peoples’ lives have shown that depressive symptoms are rampant\textsuperscript{15}. Many trans people

\textsuperscript{12} E. Coleman. Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People. International Journal of Transgenderism.
\textsuperscript{13} Jaime Grant. Injustice at Every Turn: A Report of the National Transgender Discrimination Survey. Endtransdiscrimination.org.
\textsuperscript{14} Maxwell.
\textsuperscript{15} Gamarel.
experience discrimination and rejection from both strangers and loved ones. According to the National Transgender Discrimination Survey\textsuperscript{16} 41% of the trans men and women who participated said they had attempted suicide. @worried_kid you’re in the early stages of figuring out who you are, but if you should ever feel hopeless or at a loss due to your gender identity there are people who can help you! If you don’t feel comfortable calling the National Suicide Prevention Lifeline (800-273-8255) then you can always contact the Trans Lifeline (877-565-8860).\textsuperscript{17}

**loudn’proud:** Also on www.glaad.org there’s a helpful list of advocacy, legal, and supportive services for transgender folk :) trans life can be scary, but you definitely wouldn’t be alone!

**ConcernedParent:** During my own research for my daughter, I came across a couple of websites that listed transgender therapists and services: www.lauras-playground.com lists transgender therapists by state, while www.susans.org lists resources from educational to supportive needs for transgender people and their loved ones, also organized by state.

**loudn’proud:** It’s a tough life for sure! But trust me, if you are transgender, nothing will keep you from becoming who you were meant to be. We trans people can’t live pretending to be something we’re not! I hope you have the fortitude to find out who you are, and the courage to be true to your identity regardless of what anyone else thinks or does to make life difficult for you <3

**worried_kid:** Thank you all so much for the information and support! This has really encouraged me to do more to find out who I am. I’ll keep you all posted on this thread with what I discover for myself :)

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**Works Cited**


\textsuperscript{16} Grant.

\textsuperscript{17} GLAAD.org


Maxwell, Levi. Facebook interview. 22 Oct 2015. E-mail.


“Transgender Resources.” GLAAD.org. 2015.