



*transfamily*

---

*a peer support group*

---

**TransFamily support booklet – information  
to assist family members of trans and  
gender diverse people**

---

CONNECTION WITH A LOVED ONE IS OXYGEN FOR US ALL.

#LOVESENSE

## Contents

1. Who are TransFamily? .....	3
Hello .....	3
2. Common terminology .....	3
What does trans and gender diverse mean? .....	3
Understanding common terminology.....	3
Gender dysphoria.....	5
What is the difference between sex, gender, and sexuality? .....	5
Have trans and gender diverse people always existed? .....	5
Summary .....	6
3. What happens when people transition? .....	6
Hormone therapy.....	6
Young People .....	7
Mental health and trans and gender diverse people .....	7
4. Why has this happened? .....	8
5. I want to support my trans loved one, but don't know how.....	9
6. I'm struggling to cope .....	10
7. Helpful tips .....	12
Things to consider about potential comments you or others might make.....	13
8. Useful articles .....	14
Journey to care.....	14
Good Therapy.....	17
Trans young people at alarmingly high risk of suicide and depression, report reveals .....	19
The secret I kept for 50 years: Trans and gender diverse Australian Army Colonel Cate McGregor on transitioning from male to female.	
.....	20

# 1. Who are TransFamily?

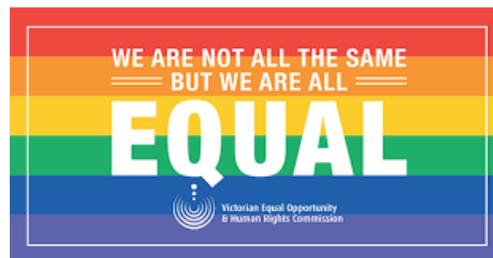
Hello

Thank you for listening to us.

We at TransFamily are a group of people with loved ones who identify as trans and gender diverse. We have come together to support one another and share information.

TransFamily is a peer support group for parents, siblings, extended family and/or friends of a trans person. The group offers a warm and supportive environment for the parents, siblings, friends and family of trans and gender diverse people. We are a Melbourne-based group who meet in Carlton on the 4th Saturday of each month, except December and January. We regularly run workshops and have guest speakers to address our group.

In this booklet we have pulled together some information for you to read and absorb. There is so much information out there and you will probably have many questions. You may feel overwhelmed by all the new information, and may be feeling like your world has been turned upside down. Take your time to learn to adjust. The information here is just a small sample, but we hope it answers some of your questions. We will do our best to answer your questions here in this booklet, or of course you can contact us or come to one of our monthly meetings.



## 2. Common terminology

What does trans and gender diverse mean?

Trans and gender diverse is an umbrella term for persons whose gender identity, gender expression or behaviour does not conform to that typically associated with the sex to which they were assigned at birth. Gender identity refers to a person's internal sense of being a man, women or something else; gender expression refers to the way a person communicates gender identity to others through behaviour, clothing, hairstyles, voice or body characteristics. The ways that trans and gender diverse people are talked about in popular culture, academia and science are constantly changing, particularly as individuals' awareness, knowledge and openness about trans and gender diverse people and their experiences grow.

Understanding common terminology

Your gender is whether you think of yourself as male, female or anything else. It may be the same as the sex assigned at birth, or it may be different to societal expectations. There are a number of different terms to describe people's gender identity, and this can be confusing for some people. YGender, a peer-led social

support and advocacy group for trans/gender diverse young people, have put together this useful glossary of terms:

**AFAB and AMAB** stand for Assigned Female at Birth and Assigned Male at Birth. When a baby is born someone (usually a doctor or nurse) looks at them and says "that's a girl" or "that's a boy". That's called assigning a gender. This gender assignment is then reinforced as they grow up by the rest of society, including family, school, etc.

**Gender** refers to an individual's internal sense of self and how they identify.

**Trans and gender diverse/gender diverse** refers to someone who does not exclusively identify with the gender they were assigned at birth. Trans is a Latin prefix that means 'on the other side of'.

**Cisgender** refers to someone who does exclusively identify with the gender they were assigned at birth. Cis is a Latin prefix that means 'on the same side as'.

**Non-binary** is an umbrella term for anyone who doesn't identify as exclusively male or exclusively female- their gender falls somewhere outside the typical binary of 'man' or 'woman'.

**Gender dysphoria** is the intense discomfort that a trans person may feel about physical attributes or the way they're gendered by others. Gender dysphoria can be on a social level, a physical level or even a purely emotional level

**Transphobia** is the discrimination and prejudice trans and gender diverse/gender diverse people face for being trans and gender diverse/gender diverse. It includes harassment, slurs, being denied access to jobs, housing, and appropriate medical care, lack of representation in media and positions of power and even physical and sexual violence.

**Pronouns** are words we use instead of people's names like she/her, they/them, ze/zir, or he/him. There are lots of different pronouns and those are only a few examples. It's best to ask someone what pronouns they prefer instead of making assumptions if unsure

**Transition/gender affirmation** is the process a person takes to affirm their gender and express their identity in the way that suits them best. This can involve using a different name or pronouns, dressing differently, telling people what gender they are, hormone replacement therapy, gender affirmation surgeries, and anything else that someone wants to use to express themselves.

**FtM/ F2M and MtF/ M2F** stand for 'female to male' and 'male to female'.

**Transsexual** is an older term that's become less common over the years. It should never be used to describe someone without their explicit permission.

It is worth noting that some terms are used more often across different age cohorts. All terms are valid for each individual

As YGender note, "There's a lot of different terms to describe our sexualities, genders, and bodies, and if you're new to these topics it can get a bit overwhelming. ... The important thing is to listen to the

people around you when they tell you what they want to be called, and that they do the same for you! Having words to describe ourselves can be really validating, and they make it easier to find other people with similar experiences. ... These are some commonly used definitions, but identity is a really

personal topic. We define labels, they don't define us, and everyone has their own associations and connotations with different words.” (<https://www.ygender.org.au/blog/2018/5/26/glossary>)

Remember, your gender identity is what feels natural to you. You may know early in your life that you would feel more comfortable being the opposite gender or gender diverse, or you may take a long time to explore your gender.

### Gender dysphoria

Many people don't feel they fit the role and stereotypes for their gender. But some people also feel the sex of their body doesn't feel right. When this mismatch causes severe distress, it is called gender dysphoria.

Gender dysphoria is a situation that may have symptoms (such as depression and anxiety) that need treatment, but it is not a mental illness.

It is not known how many people in Australia have gender dysphoria, due to hesitancy to disclose. But it is known that people who identify as trans or gender diverse have higher rates of discrimination, and therefore higher rates of depression, suicide and attempted suicide, compared with the general population.

The feeling of living with a different gender identity to that assumed for you can occur at any point in life, although many trans and gender diverse people are aware of difference early in life.

### What is the difference between sex, gender, and sexuality?

Sex is assigned at birth, refers to one's biological status as either male, female, or intersex, and is associated primarily with physical attributes such as chromosomes, hormone prevalence, and external and internal anatomy.

Gender refers to the socially constructed roles, behaviours, activities, and attributes that a given society considers appropriate for boys and men or girls and women. These influence the ways that people act, interact, and feel about themselves. While aspects of biological sex are similar across different cultures, aspects of gender may differ.

Sexuality refers to a person's sexual attraction, desires, or lack thereof. Just as with cisgender people, sexuality is its own characteristic, and varies for every individual. For example, a trans and gender diverse woman may only be attracted to men, and identify as straight, or may be only attracted to women and identify as a lesbian. Some people also experience no sexual desire and may identify as asexual. Commonly used terms can include gay, lesbian, bisexual, pansexual and heterosexual.

### Have trans and gender diverse people always existed?

Trans and gender diverse people have been documented in many cultures around the globe for centuries. However, the meaning of gender nonconformity may vary from culture to culture. It is difficult to accurately estimate the number of trans and gender diverse people, mostly because there are no population studies that accurately and completely account for the range of gender identity and gender expression. For as long as the concept of gender has existed, it's safe to say that as a complex and creative species, people have always had a wide array of gender identities and expressions.

## Summary

- Gender, sex and sexuality are different concepts. Gender refers to an internal sense of identity, while sex refers to the identity assigned to a person at birth based on physical characteristics. Sexuality refers to who you are attracted to sexually, and has no direct link to how you identify in terms of gender.
- Your gender is what feels natural to you, even if it differs from the gender that was assigned to you at birth based on your presumed sex.
- Some people may not feel comfortable with the gender assigned to them at birth. They may choose to live according to their true gender identity. This is called gender affirmation.
- A person may affirm their gender by taking steps to be socially or physically more aligned with their gender identity, including changing their name, taking hormones, or having surgery.

*"[My son] openly transitioned in high school which was the bravest act I'd ever seen. The struggles and challenges we overcame as a family became his armor. The closer he gets to achieving his authentic self, the more powerful and self-assured he becomes. I'm so very proud that I am part of this amazing person's life. He is a kind, loving, empathic teenager who can't wait for his future because now ANYTHING is possible."*

## 3. What happens when people transition?

### Hormone therapy

Some – but not all - trans people choose hormone therapy in order to have their outward appearance better reflect the way they feel.

As an adult, you can undergo hormone therapy (for as long as you want) to change your physical appearance to better match your gender identity:

- a trans man (a trans and gender diverse person who identifies as male) or non-binary person (someone whose gender identity is not exclusively male or female) may take testosterone (masculinising hormones)
- a trans woman (trans and gender diverse person who identifies as female) or non-binary person may take oestrogen (feminising hormones)
- a gender diverse or non-binary person might take testosterone or oestrogen.
- The aim of hormone therapy is to be more comfortable with your physical appearance and how you feel about yourself.

If you're a trans woman, hormone therapy may lead to:

- less muscle

- more fat on your hips
- your breasts starting to form and increasing in size
- less facial and body hair
- oestrogen will not change your voice (but voice therapy can)

If you're a trans man, hormone therapy may lead to:

- beard and body hair growth
- an increase in muscle bulk
- a deeper voice
- the cessation of periods, although breakthrough bleeding may occur

While hormones prescribed by registered health professionals are safe, each TGD person needs to consider the benefits and possible downsides of hormones. This is simply a process of informed consent. A knowledgeable health professional can provide this process

Many trans and gender diverse people will choose not to medically transition, but will still socially transition. It's important to remember that a person's gender identity is valid no matter how they appear physically.

### Young People

For pre-pubescent children, transitioning is purely social and not medical, and centred around affirming their gender and supporting them emotionally.

During puberty, trans and gender diverse young people may express the desire to transition medically. The first stage is usually puberty blockers, which delay puberty and are completely reversible. In later adolescence, trans youth may want to hormonally transition, and services like the Royal Melbourne Children's Hospital Gender Clinic are specially set up to support them and their families.

### Mental health and trans and gender diverse people

Many trans or gender diverse people have happy, fulfilled lives and loving, safe relationships. However, there is also a high risk of anxiety, depression, self-harm, eating disorders, sexual risk taking, substance abuse, abusive relationships and suicide among trans and gender diverse people.

Australia's first Trans Mental Health Study found that trans and gender diverse people experience very high levels of depression and anxiety. The reasons are twofold:

- First, you may experience emotional turmoil and physical discomfort when you identify as trans or gender diverse.
- Second, in affirming your gender identity you may confront harassment, discrimination, abuse, violence, rejection and exclusion.

In other words, the environments in which you live, work or study may create psychological stresses that leave you vulnerable to mental health conditions. Studies have shown that without parent support, 57% of trans and gender diverse young people attempt suicide – with supportive parents, this figure drops to just 4%.

[https://www.researchgate.net/publication/284988129\\_Impacts\\_of\\_strong\\_parental\\_support\\_for\\_trans\\_youth\\_A\\_report\\_prep](https://www.researchgate.net/publication/284988129_Impacts_of_strong_parental_support_for_trans_youth_A_report_prep)

Where trans and gender diverse people face stigma in multiple areas (for example through their culture, their faith, or through cognitive and neurological differences) the pressures they face may be exaggerated. Young trans and gender people, for example, may experience bullying at school. Trans and

gender diverse adults may find it hard to achieve promotion or feel comfortable with colleagues if they are not supported at their workplace, and may have difficulty finding employment (or be under-employed) due to discrimination.

## 4. Why has this happened?

There is no single explanation for why some people are trans and gender diverse. The diversity of trans and gender diverse expression and experiences argues against any simple or unitary explanation.

Trans and gender diverse people experience their trans and gender diverse identity in a variety of ways and may become aware of their trans and gender diverse identity at any age. Some can trace their trans and gender diverse identities and feelings back to their earliest memories. They may have vague feelings of “not fitting in” with people of their assigned sex or specific wishes to be something other than their assigned sex. Others become aware of their trans and gender diverse identities or begin to explore and experience gender-nonconforming attitudes and behaviours during adolescence or much later in life. Some embrace their trans and gender diverse feelings, while others struggle with feelings of shame or confusion. Those who transition later in life may have struggled to fit in adequately as their assigned sex, only to later face dissatisfaction with their lives. Some trans and gender diverse people experience intense dissatisfaction with their sex assigned at birth, physical sex characteristics, or the gender role associated with that sex.

Your child or loved one has probably been thinking this through for months, even years. This does not mean a lack of trust, lack of love or a reflection on your relationship. If you are a parent, it can be painful to realise that you don't know your child as well as you thought you did and that you have been excluded from a part of their life. To some extent, this is true in all parenting relationships, regardless of gender or sexuality.

It is important to accept and understand your child's or family member's coming out. Some families believe can have the perception that they were happier not knowing, particularly soon after disclosure.. They start to recall the time before they knew as "problem free", remembering an ideal rather than the reality. Sometimes we can try to deny what is happening by rejecting what we're hearing ("It's just a phase, you'll get over it"), or by not registering the impact of what we're being told ("That's nice, dear, and what do you want for dinner?").

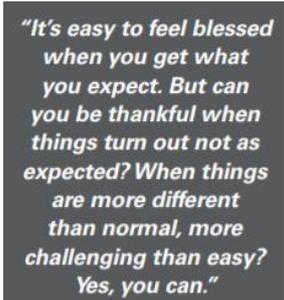
Parents and families may feel resentment towards their child's or loved one's trans and gender diverse status. This resentment may stem from a number of sources, and there may be an accompanying sense of guilt about having this feeling.

It is important to know that the main decision most trans and gender diverse people have to make is "Will I be honest about who I am, or will I hide it?" Hiding it imposes a constant and tremendous mental and physical burden. A large part of their life would be kept secret from you, and you would never really know the whole person. Someone who has reached the point of telling a parent or someone close to them that they are trans and gender diverse is not usually a person who is going through a phase. Generally they have thought long and hard to understand and acknowledge their gender. For someone to tell their family or friend that they are trans and gender diverse often means taking a great risk - the biggest risk is that of rejection. Few people would take that risk lightly or prematurely, and for them to take that risk and let you in is a courageous, loving act.

Trans and gender diverse people often recognise at an early age that they feel "different", but it may take years before they can put a name to it. It is often not until this stage that they consider telling someone. Even though

you may have some sadness for not having been able to help your child or loved one through that period, or you feel that the outcome may have been different if you'd known earlier, it is important to understand that your child or loved one probably could not have told you any sooner. Even more importantly, discussing the situation now is an invitation to a more open and honest relationship.

Because transphobia exists in our society, it takes time for trans and gender diverse people to acknowledge their own gender status. It is not uncommon for trans and gender diverse people to internalise self-hate or insecurity about their gender identity, and often gender dysphoria is a major issue. For many reasons it may take time for someone to think through and work up the courage to tell a parent or loved one. Even if you feel your child should have known they could tell you anything, remember that our culture's treatment of gender diversity says, "don't ask, don't tell."



*"It's easy to feel blessed when you get what you expect. But can you be thankful when things turn out not as expected? When things are more different than normal, more challenging than easy? Yes, you can."*

## 5. I want to support my trans loved one, but don't know how

The fact that you have reached out to TransFamily means that you want to support your trans loved one. There are a number of ways that will help you to do this.

Most importantly, tell your loved one that they have your support and love. Many trans people are rejected by their family and friends, and this is a very real fear for trans people who are considering coming out. Reassure them that you will love them no matter what, and that you are there for them.

Use the name and pronoun that your trans loved one chooses, without judgement or question. Many people find this difficult, arguing that they have known that person as one particular name or pronoun for so many years that it is too difficult to change. Remember that this is an important way of showing your love and support for them, and with a little practice it really isn't that difficult. Of course you will slip up at times. If you accidentally use the wrong pronoun, apologise quickly and sincerely, then move on. The bigger deal you make out of the situation, the more uncomfortable it is for everyone. If you're unsure which pronoun a person uses, listen first to the pronoun other people use when referring to them. Someone who knows the person well will probably use the correct pronoun. If you must ask which pronoun the person uses, start with your own.

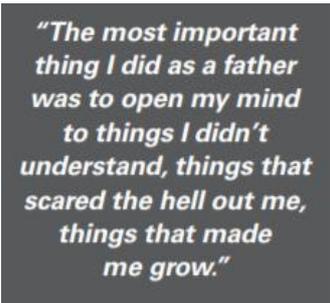
Your friend or family member might also choose a new name. They might even change it two or three times as they attempt to find a name that feels like a good fit. Using a trans person's chosen name shows love and respect and is important, even when change feels hard.

Don't make assumptions about trans and gender diverse people's sexual orientation, desire for hormonal or medical treatment, or other aspects of their identity or transition plans.

Keep the lines of communication open with the trans and gender diverse person in your life.

Advocate for trans and gender diverse rights, including social, legal and economic justice and appropriate psychological care. Familiarise yourself with the local and state laws that protect trans and gender diverse people from discrimination.

Educate yourself about trans and gender diverse issues by reading books, attending conferences, and consulting with trans and gender diverse experts. Be aware of your attitudes concerning people with gender-nonconforming appearance or behaviour. Know that trans and gender diverse people have membership in various sociocultural identity groups (e.g., race, class, religion, age, disability, etc.) and there is not one universal way to look or be trans and gender diverse.



*"The most important thing I did as a father was to open my mind to things I didn't understand, things that scared the hell out me, things that made me grow."*

## 6. I'm struggling to cope

Get support in processing your own reactions. It can take some time to adjust to seeing someone you know well transitioning. Having someone close to you transition will be an adjustment and can be challenging, especially for partners, parents, and children.

Some of us react with shock, denial and anger to the news that our loved one is trans and gender diverse. One response is to wonder, "How could she do this to me?" This is not a rational reaction - but it is a human response to pain. We liken this reaction to a grieving process: for example, a parent may grieve over losing an image of their child. But it is important to remember that that image was yours, and not theirs – you are not losing them, but gaining a more authentic understanding of them which can ultimately bring you closer.

Some parents feel that they must have done something 'wrong'. Parents and family members can sometimes experience feelings of guilt when they first learn of their child's or loved one's coming out as trans and gender diverse. However, there is no evidence that different parenting styles or family situations have a bearing on the development of trans and gender diverse people. Identifying as trans and gender diverse has nothing to do with the way a person is brought up. What families can provide is an environment of unconditional acceptance.

Some people feel uncomfortable acknowledging their loved one's gender identity. Our culture and society provide us with messages about a number of issues, including gender diversity and sexuality. The negative messages and myths we have learned from our society about trans and gender diverse people are very strong and not easy to dismiss. However, developing a better understanding of your child or loved one, and becoming more familiar with the issues, will help reduce these uncomfortable feelings.

Many parents may confront another source of guilt. Parents who see themselves as open-minded, believing that they have put prejudice behind them (even those who have gay friends), are sometimes stunned to realise that they are uncomfortable when they learn that it is their child who is trans and gender diverse. These parents not only have to grapple with suppressed, deep-rooted personal fears of gender diversity, but also have the added burden of dealing with their conscious self-image of being open-minded. It helps to concentrate on real concerns - what your child needs most from you now. Try not to focus on the guilt

- it accomplishes nothing for you or your child. Neither you nor your child had or will have any control over the arrival and determination of your child's gender.

Many people become very anxious about their trans loved one's safety. Our society often discriminates and is even violent towards people who are seen to be different in any way.. Transphobia is still sadly often a strong part of our culture. As long as transphobia exists, any gender diverse person and their loved ones will likely have some very real and legitimate fears and concerns. This means it's even more important for trans people to feel like their family and friends have their back.

Thankfully, attitudes toward different sexualities, gender identities and ways of expressing gender have been slowly changing for the better and are more positive in many places. There are a growing number of groups who are working for such a change and who are ready to help those who have difficulties.

It is important to remember that many trans and gender diverse people have grown to fulfil their dreams and have become very successful and respected people in the community. As a society we may have a long way to go, but giving your child or loved one support and love, will go far to making their life journey easier.

As you work through your feelings, you can take courage in the fact that the one thing your child has 'done' to you is to trust that your relationship will grow as a result of you knowing the truth about them. What families can provide is an environment in which a young person can understand themselves and strive to reach their full potential.

Seek support in dealing with your feelings. You are not alone. Knowledgeable, mental health professionals and support groups for family, friends, and significant others of trans and gender diverse people can be useful resources.

Support can be gained from a counsellor or therapist who is experienced with family issues and has an awareness of trans and gender diverse people. You may want to talk to someone about your own feelings and how to work through them. You can feel that you and your child need help communicating clearly through this period. Or, you may recognise that your child is unhappy and needs help with self-acceptance.

Try to find someone that you and/or your child can feel safe with and can talk openly with. Respect and trust are fundamentals in any relationship with a helping professional. Like finding a good doctor - sometimes finding a good therapist or counsellor can take time. So don't give up if the first one you find is not to your liking.

Consulting a counsellor or therapist in the hope of changing your child's or loved one's gender has little value. Being trans and gender diverse is not a disease or illness and so is not something to be 'cured'.

We encourage you to explore your options and to use those best suited to you and your family. Transfamily and Trans and gender diverse Victoria are great places to start. They are supportive and caring environments.

## 7. Helpful tips

The following are tips that can be used as you move toward becoming a better ally to trans and gender diverse people. Of course, this list is not exhaustive and cannot include all the "right" things to do or say because often there is no one "right" answer to every situation you might encounter.

When you become an ally of trans and gender diverse people, your actions will help change the culture, making society a better, safer place for trans and gender diverse people - and for all people (trans or not) who do not conform to conventional gender expectations.

### **You can't tell if someone is trans and gender diverse just by looking.**

Trans and gender diverse people don't look any certain way or come from any one background. Many trans and gender diverse people do not appear "visibly trans," meaning they are not perceived to be trans and gender diverse by others. It is not possible to look around a room and "see" if there are any trans and gender diverse people. (It would be like a person looking around the room to "see" if there are any gay people.)

### **Don't make assumptions about a trans and gender diverse person's sexual orientation.**

Gender identity is different than sexual orientation. Sexual orientation is about who we're attracted to. Gender identity is about our own personal sense of being a man, a woman another gender or no gender. Trans and gender diverse people can be gay, lesbian, bisexual, or heterosexual.

### **If you don't know what pronouns to use, listen first, then ask if still unsure.**

You may find this awkward or uncomfortable, but the trans person will likely be very pleased that you have asked, rather than simply guessing and possibly getting it wrong.

### **Don't ask a trans and gender diverse person what their 'real' name is.**

For some trans and gender diverse people, being associated with their birth name is a tremendous source of anxiety. Respect the name a trans and gender diverse person is currently using. If you happen to know the name someone was given at birth but no longer uses, don't share it without the person's explicit permission.

### **Understand the differences between coming out as lesbian, gay, or bisexual and coming out as trans and gender diverse.**

Coming out to other people as lesbian, gay, bisexual etc is typically seen as revealing a truth that allows other people to know your authentic self. The LGBTIQ community places great importance and value on the idea of being 'out' in order to be happy and whole. When a trans and gender diverse person has affirmed their gender and is living their

life as their authentic self--that is their truth. The world now sees them as who they truly are. Unfortunately, it can often feel disempowering for a trans and gender diverse person to disclose to other people that they are trans and gender diverse. Sometimes when other people learn a person is trans, they no longer see the person as 'real'. Some people may choose to publicly discuss their gender in an effort to raise awareness and make cultural change, but please don't assume that it's necessary for a trans and gender diverse person to disclose that they are trans and gender diverse in order to feel happy and whole.

Be very careful about confidentiality, disclosure, and 'outing', and respect peoples' privacy.

### Things to consider about potential comments you or others might make

Common Mistake	Why this may be hurtful	A possible improvement
"I would have never known you were trans and gender diverse. You look so pretty."	This implies that trans people can't be pretty, or usually aren't.	Just a normal compliment will do! "You look lovely today, I love how you've done your hair"
"You look just like a real woman."	This suggests that a trans woman isn't a 'real' woman.	There's really never any need to comment on whether someone fits in with gender standards. Try a different compliment instead!
"You'd pass so much better if you wore less/more make-up, had a better wig, etc."	Unsolicited 'advice' can often be hurtful, and seen as pointing out 'flaws'. If a trans person wants your advice, they'll ask for it. And mostly, giving people advice when it's not asked for is not good practice in any scenario.	If you have the kind of relationship where you offer each other advice, try positive suggestions. "I love your new hair! I bet you'd look great as a blonde too"
"You decided to be trans and gender diverse, that is great. I'm so happy for you"	This makes it sound as if the trans person's identity was a flippant decision.	"Thank you for coming out to me, it means a lot. I'm proud of you"
"You look great, but you'll always be (old name/gender) to me"	It can be hard to change your perception of someone, particularly if you've known them a long time. It can take a little while to process, but your trans loved one doesn't need to hear that.	Affirm their chosen name and current gender identity. Each time you accidentally think of them the way you used to, gently correct yourself.

## 8. Useful articles

### Journey to care

Author: Amanda Lyons

[https://www.racgp.org.au/publications/goodpractice/201704/trans\\_and\\_gender\\_diverse-health/](https://www.racgp.org.au/publications/goodpractice/201704/trans_and_gender_diverse-health/)

GPs can be a key part of a trans and gender diverse patient's pathway to whole-of-person healthcare.

Clare Headland is a 70-year-old parent of seven who used to work as a chiropractor and remains in the healthcare profession as a patient services assistant at Austin Hospital in Melbourne. She loves her work in the palliative ward at the hospital's Olivia Newton-John Cancer Wellness and Research Centre, and is soon to start further training as a pastoral care worker.

For most of her 70 years, however, Headland lived with what she described as overwhelming feelings of depression and shame.

'I had been clinically depressed all my life, with constant suicidal wishes,' she told Good Practice. 'I prayed for heart attacks, for cancer, to be run over by a bus. 'It was confusion and deep, constant pain and fear, from waking up in the morning to going to sleep at night.'

From 'six years of age until 65', Headland lived in the shadow of these feelings until she came across something online that made everything fall into place.

'I was searching information about struggling with depression, anxiety and suicidal tendencies, and I found sites that were about trans and gender diverse people,' Headland said. 'There were clubs, associations, groups and Facebook pages.

'I thought, "These people are expressing the same things I've been feeling. I am not alone."

Headland was born male, but had never felt comfortable as a man. Discovering she might be a trans and gender diverse person started her on a journey that resulted in a state of self-acceptance she had previously found unimaginable.

'Generally speaking, my [post-gender-transition] life has been so blissful, so joyful, so deeply, deeply happy,' she said. 'When people ask, "How are you feeling?" I say, "I feel like a dog with two tails", because I love myself for the first time in my life.'

The idea that she was a trans and gender diverse person had never previously occurred to Headland; she had no real concept or even language for such a situation.

'I saw so many GPs, psychiatrists, psychologists, primal therapists, rebirth people. I went everywhere because I was so unhappy,' she said. 'But, because of the time when I was looking, nobody ever said, "Have you considered that you might have a personality that is more feminine than masculine?"'

Improving understanding. Dr Vincent Cornelisse, GP and sexual health physician at a clinic with a focus on lesbian, gay, bisexual, trans and gender diverse, queer and/or intersex (LGBTIQ) health, understands that awareness of trans and gender diverse and gender-diverse identities has traditionally been somewhat limited, but he believes this is changing.

'I think young people are more aware and, importantly, parents and teachers are also more aware and hence more likely to seek or suggest assistance from a health professional,' he told Good Practice.

But, according to Assoc Prof Ruth McNair, GP and academic with an interest in LGBTIQ health, trans and gender diverse and gender-diverse people often remain disproportionately burdened relative to others in the LGBTIQ community.

'[Trans and gender diverse people] are disadvantaged socially, often even more so than lesbian, gay and bi people,' she told Good Practice. 'There's more stigma around trans and gender diverse identities. It's particularly hard for trans and gender diverse people to come out and be accepted by their families, so there's a lot of family disruption and rejection.'

This social disadvantage and discrimination is manifested in stark statistics, such as trans and gender diverse people aged 18 and older being nearly 11 times more likely to have attempted suicide than the general population. Stigma can also affect a trans and gender diverse patient's willingness to seek healthcare.

'A lot of gender-diverse people are worried that the GP might be surprised or uncomfortable, or have negative attitudes towards gender diversity,' Dr Cornelisse said.

'Many of them have had negative experiences in the past. Not necessarily from medical professionals but in general, from people in the community or even family members and friends. So they are vulnerable in that respect.'

Dr Cornelisse believes the therapeutic connection that is fundamental to general practice makes GPs well placed to deliver care to this patient population. 'The beauty of general practice is that you've got the space to have long-term relationships with your patients,' he said. 'Treating gender-diverse patients is about looking after their whole health and, as we know, that's often best done by a GP.'

Assoc Prof McNair observed that, while many GPs may simply be unfamiliar with trans and gender diverse issues and thus feel uncertain about how to advise patients or where to refer them, most already have skills that are relevant to patients in transition.

'[GPs offer] accessibility and understanding of the family,' she said. 'And we're already doing hormone therapies with patients such as pre-menopausal women. We're quite conversant with that, so it's a small step to understanding trans and gender diverse hormone therapies.'

Raising the issue. The delicate and deeply personal nature of gender dysphoria – the condition of feeling emotional and psychological identity is gendered opposite to biological sex – means it is often difficult for trans and gender diverse patients to broach the issue with a GP for the first time.

'I see that anxiety in a lot of gender-diverse people when they first come to see me, even though they probably know I do a lot of work in this area,' Dr Cornelisse said. A practice space that feels safe and

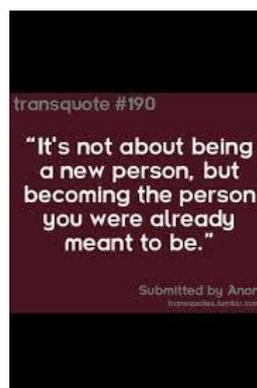
accepting can be very helpful for these patients. Dr Cornelisse has some relevant advice about how to create this type of environment, starting with the waiting room.

'It doesn't have to be a massive change. For example, placing a rainbow sticker at reception and in the waiting room is a good start,' he said. 'Those sorts of signals are picked up quite quickly by same-sex-attracted and gender-diverse patients, and they probably won't offend any other patients.'

GPs can also take a number of practical steps, from a patient's first consultation experience through to a practice's record-keeping processes.

'It comes down to things like, how do you ask people about gender on their intake form when they join as new patients?' Dr Cornelisse said. 'How do you make sure your reception staff address people by their affirmed gender, rather than their Medicare-listed gender? And how do you make sure your software reflects that, so your staff use the correct gender when, for example, someone phones up and their voice might not reflect their gender?'

These types of details can make a significant difference to trans and gender diverse and gender-diverse patients. 'It's such a simple step, to use the name or pronoun the person prefers, even if it's not yet listed at Medicare,' Assoc Prof McNair said.



When a friend or family member tells you they are trans and gender diverse, or trans, it can be hard to figure out the best way to show support. Trans issues have recently become part of the mainstream conversation in the United States, from Caitlyn Jenner's widely publicised transition to Laverne Cox's appearance on the cover of Time. As more trans people feel comfortable sharing their stories, their friends and families are growing and changing with them.

The word "trans and gender diverse" describes a gender identity that is different than the one someone is born into. Gender identity is the internal experience that we all have of our maleness or femaleness (or both, or neither). For most people, this experience is aligned with their biological sex. People who identify as trans have a different experience.

Many allies feel confused about how they can best support a friend or family member who tells them they are trans. Such conflict can come about for any number of reasons, including feelings of embarrassment talking about trans issues, not knowing what language or terminology to use, or not wanting to offend. With that in mind, here are five ways to support someone you love who identifies as trans:

### **1. Listen closely and trust their experience**

Every trans person has a different experience of gender and their transition. When a trans person shares their story with you, it's a gift. It means they trust you enough to share something so fundamentally important to them. And their experience might not be what you expect.

**There is no "right way" to be trans and no "right way" to transition. Each story is unique.**

### **2. Use their language**

Language is personal, and the only way to know how someone identifies is to listen to how they talk about themselves. You don't necessarily need to know all the terms related to trans and gender diverse to be supportive; you just need to respect and try to use the ones your friend or loved one prefers. Some people have a word they closely identify with. For example, they might feel like the umbrella term trans describes them best. Other terms they might use include trans and gender diverse, transsexual, trans man, trans woman, female-to-male (FTM), male-to-female (MTF), or genderqueer, among others.

There is no "right way" to be trans and no "right way" to transition. Each story is unique.

Trans people may also have a preferred pronoun. Possible pronoun choices may include he/him, she/her, ze/hir, and they/them. Ze/hir and they/them (used to refer to an individual, not a group) are gender-neutral pronouns and are being used by more and more people who don't feel like he/him or she/her adequately describe them.

Your friend or family member might also choose a new name. They might even change it two or three times as they attempt to find a name that feels like a good fit. Using a trans person's chosen name shows love and respect and is important, even when change feels hard.

### 3. Do some research

If you want to know more about trans identities in general, the best way to learn is to do some simple research. Just like it's not your job to tell others what it's like to be \_\_\_\_\_ (fill in your own gender identity, sexual orientation, religious affiliation, race, etc.), your friend might not want to educate others about their experience.

Unless specifically invited to do so, it's never appropriate to ask anyone (including a trans person) personal questions about their body or sexuality. This doesn't mean it's wrong to be curious or want to know more. Fortunately, we have a lot of great resources available at our fingertips. Many trans activists post video blogs on YouTube both about their personal experiences and to answer questions for people who just want to know more.

### 4. Get the support you need

Learning that someone you know is trans and gender diverse can bring up a lot of feelings, especially if it's a close family member such as a child or parent. It's OK to have all of those feelings, and it's important that you find the supports you need to sort through them and understand your own experience. Your family member or friend may not be able to be this support person for you.

Many family members have found support through working with their own therapist or connecting with groups such as Transfamily, Trans Victoria, Seahorse. Connecting with a therapist is a great place to start.

### 5. Practice active allyship

Trans family members and friends are counting on you to help them make this a safe and friendly world for people of all gender identities. Trans people can face oppression and discrimination from their medical providers, schools, employers, housing, places of worship, and families.

Being an ally means consistently noticing and challenging transphobia and ignorance both in yourself and the world around you. This can mean telling someone that a joke isn't funny, asking a trans friend what they need when someone uses the wrong name or pronoun, or participating in events and rallies in support of the rights of trans people.

What it looks like to support a trans family member or friend can vary greatly from person to person. In many ways, it looks exactly the same as being a good friend or support to anyone who is going through a significant life change. Think about how you can support trans and gender diverse people in your own life and community through day to day activities.



## Trans young people at alarmingly high risk of suicide and depression, report reveals

By Rebecca Carmody

<https://www.abc.net.au/news/2017-09-01/young-trans-people-at-higher-risk-of-suicide-report-finds/8861156>

Updated 1 Sep 2017, 2:07pm

High school student Leon had already chosen his new name by the time he summoned the courage to tell his parents he was trans and gender diverse or tans – a moment he describes as “really scary”.

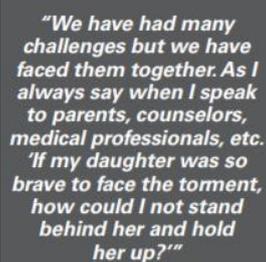
That was two years ago when he was 14 and the Perth teenager is acutely aware he is one of the lucky ones. He is alive to tell his story.

Sadly, this has not always been the case for other trans youth – young people who identify with a gender that does not match the sex assigned to them at birth – are at an alarmingly high risk for suicide and serious depression.

The Trans Pathways survey, which examined the mental health of trans young people, found almost 80% (aged 14-25 years) had self-harmed, compared to almost 11% of adolescents in the general Australian population.

A staggering 48% had attempted suicide, compared with 2.4% of adolescents in the general population.

Trans young people are also 10 times more likely to suffer from serious depression and anxiety than other young Australians.



*“We have had many challenges but we have faced them together. As I always say when I speak to parents, counselors, medical professionals, etc. ‘If my daughter was so brave to face the torment, how could I not stand behind her and hold her up?’”*

Delete this article – Cate McGregor largely not respected by TGD people

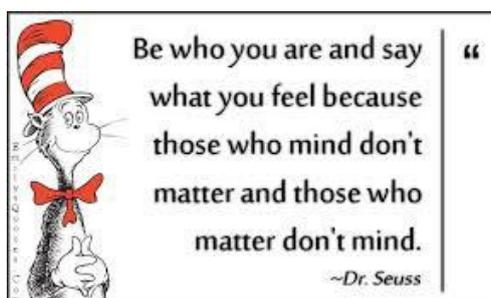
The secret I kept for 50 years: Trans and gender diverse Australian Army Colonel Cate McGregor on transitioning from male to female.

<https://www.carolineoverington.com/cate-mcgregor---a-50-year-secret>

2015 Queensland Australian of the Year, Cate McGregor, tells her remarkable story.

Cate McGregor was Queensland Australian of the Year in 2015. Here is her remarkable story.

There is an old saying, sometimes attributed to Dr Seuss, about how you should give up pretending and just be who you are because:



Easier said than done, of course, especially when you're keeping a secret as significant as the one that Lieutenant Colonel Cate McGregor – formerly Lieutenant Colonel Malcolm McGregor – kept for nigh on 50 years.

Cate was born a boy but she always felt like a girl. She tried to hide it, at first by getting drunk, and later by flexing what she saw as the masculine side of her personality, as a soldier in our armed forces but, she says, 'it got to the point, in my mid-50s, where I could not stand it anymore.

"The sense that I should be living as a woman was overwhelming. I could not get a moment's peace from that idea. I started having panic attacks. It was either face up to it, or suicide. And so, a little over two years ago, Cate began having what she describes as the toughest conversations of her life. Her parents had already died, but Cate – or Malcolm, as she was then - was married, so her wife had to be told, as did her boss, who is the hyper-masculine, khaki-clad Chief of Army, David Morrison AO.

Then there was the fact that one of Cate's closest friends – a man she'd played rugby with - was the Prime Minister, Tony Abbott. "I knew I'd have to tell him," she says, "because our friendship is one of the oldest, most continuous friendships of my life."

And what did Abbott say?

"I got the most loving response," says Cate, delighted. "He said, 'look, it changes nothing.' Then he said, 'what's your preferred name now?' And ever since, he's called me Cate."

It must be wonderful to go through life, always being sure and never being fearful, but it's not really human, is it?

It's much more human to fret and worry, and these Cate has done.

As hard as it now is to believe, Cate was born Malcolm McGregor in Toowoomba, Queensland in 1956, and she had misgivings about her gender from the earliest age, but could not find a way to express the idea.

"I was fascinated with women's clothes, but I'd tried on Mum's dresses and I'd gotten into awful trouble, so I never did it again," she says. Cate's father died when she was eight, and a fear of abandonment as well as confusion about her gender settled into her bones.

"There's no way I can explain it. I simply felt uncomfortable – terribly, horribly uncomfortable - being me," says Cate.

Cate's sister, Mary Saunders, who is 16 years older, says her memory of Cate as a little boy are that "she was very shy and quite timid. But I never suspected her troubles with gender. And I have been thinking, maybe Cate being so brilliant and successful at everything masked her inner turmoil."

Cate was smart-as-a-whip at school, and probably could have done anything, but because her father had fought at Kokoka, and her grandfather at Fromelles, she joined the Army at the earliest possible opportunity, in 1974.

"It was a way of connecting with my father," she says, "and I had an idea about the military being the ultimate expression of masculinity. But I wasn't thinking, this will make me a man. It wasn't as conscious as that."

The then [2015] Chief of Army, David Morrison AO, remembers meeting the young Malcolm McGregor in 1980, when they served together in an Infantry Battalion in Brisbane.

"I was the new boy, recently graduated from the Officer Cadet School, Portsea, and Mal was a Duntroon graduate of two years before," he says. "The relationship was strong but brief. Mal was promoted to Captain and, in that contrarian way that has surfaced from time to time in his life, promptly left the Army."

Looking back now, Cate says she did so "in a fit of pique, and as an alcoholic." She was quite certain that she could make her mark in the Army – perhaps become a General - but she had "a restless disposition. I was very ambitious, but there was no war on, and promotion was slow. I was drinking a lot, and I was arrogant, and I thought, I can do better than this, and I'm out of here."

Cate's appetite for self-destruction- especially her heavy drinking – led her to a counsellor and, in 1985, she was diagnosed as 'trans and gender diverse' (somebody who feels they've been assigned the wrong gender at birth.)

"The idea of living as a woman was enthralling, but the fear of losing relationships – and my career - was too great," she says. "I had no experience of trans and gender diverse women.

The only option, she thought, was to white knuckle through the diagnosis. Cate quit drinking in 1990, joined a law firm, and from there went into politics, working for (and falling out with) both the Labor Party,

and the Liberal Party (as Malcolm McGregor, Cate worked for the former NSW premier, Bob Carr, and as a consultant to the former Liberal leader, John Hewson.)

When politics finally spat her out, the then-editor of the Australian Financial Review, Greg Hywood, picked Malcolm up, as a political correspondent.

"I was doing everything I could to hold things together," says Cate, "but in reality, I was in a state of endless anxiety. From about 1989 onwards, I was trying so hard to answer the question: who am I?"

In 2000, she reversed her decision to quit the Army, re-joining in time to lend a hand in Timor.

"There was a tranche of officers who joined between the late 1970s and the early 1980s who never went to war," she says, "and some of us felt that we weren't proper soldiers, because we did not have ribbons on our shirts." Her service in Timor – still as Malcolm – "resolved something for me. But the deep disquiet – the questions I had about myself - did not go away."

In 1995, Cate met the woman who became her wife and says "from that day on, I was deeply in love. I had met my soul mate, the person I was meant to be with, and I adored her to bits.

"But by 2011, I was in very bad shape," Cate says. "I was boiling over with the idea that I was living the wrong gender. I can't convey – I don't have the language – to explain what it was like to live in that turmoil, but it was a nightmare, I could barely sleep. I was dramatically losing weight. The monomaniacal thought that I was meant to be a woman – that persistent conviction – never left me. I did not get a second of rest from that idea, and it feels like you're going to explode."

She went back to the psychiatrist who said: "It's a no-brainer. You are trans and gender diverse."

"I was waiting for somebody to say, here, take this pill, and it will all be fine," says Cate, "and he said, it won't be fine. Can't you see that? I said, but I'm an infantry officer, I'm married, it's too late, I'm 50-something years old, it's not an option. He said, I'm puzzled you've got this far.

"But I was still so scared. I thought, my fate is to be a tragic figure, socially ostracised. And that was frightening, but the greatest loss would be my marriage. I knew I would lose my wife, and I was completely in love with her, and it broke my heart."

Cate's wife was of course the first person she told, and details of that conversation remain private. Her sister, Mary, was "absolutely stunned, but decided that, no matter what, Cate is still my flesh and blood, the same beautiful human being, and I wanted to be there as a strong support."

Then came Cate's immediate boss - then Chief of Army, Lieutenant General Morrison who, in case you're wondering, is not very smiley, and wears combat fatigues. "I was really taken aback as I had no inkling that this was the over-riding issue in (Malcolm's) life," says Morrison. "I thought about it, but only briefly, before I concluded that this was the time to step forward and provide support.

"She is my mate. I don't care what the person I used to know as Mal looks like now. I do care, and deeply, about her wellbeing."

Next came selected friends. Besides being a soldier, Malcolm McGregor was a brilliant young cricketer, and more lately has written about cricket for newspapers and magazines.

The response from all was pretty much the same: surprise, followed by immediate acceptance, and even, from one colleague: "Well, thank God, because from the way you looked, I thought you were going to tell me it was something serious, like cancer."

The sex discrimination commissioner at the time, Elizabeth Broderick, had Cate over for dinner, and says: "She's one of the most courageous women I know. My family felt privileged to meet her. I am thankful to Cate for personalising her experience and explaining it in terms the kids could understand, broadening their horizons and reinforcing just how important it is to accept people for who they are."

Then Prime Minister, Tony Abbott was likewise filled with admiration.

"We first met when we were in our early 20s and we've known each other quite well for more than 30 years and very well over the last decade," Mr Abbott tells the Weekly, "of course, Cate's been through a very difficult transition in which a lot of friendships have been tested. For my part, I really admire her honesty, her strength and the fact that she's been prepared to embark on what must have been an utterly daunting journey. I regard myself as blessed to have such a friend."

And so, in June 2012, Malcolm took leave from the Army, and began taking a testosterone blocker, and an oestrogen supplement. She stopped cutting her hair, changed her name to Cate, and in September of the same year, she returned to work with a khaki skirt, and red manicure.

"My experience of what it's like to be a woman is obviously different to that of a born-woman," she says, "but I express my gender as female." She holds a female passport, and a female driver's licence.

Before starting on oestrogen, Cate feared she'd never become what she calls 'passable, as a woman' but the hormone worked its magic.

"I used to fear that nobody would take me seriously, and to go to the shop, to pick up the newspaper, and to have somebody say 'Ma'am', it's bliss. The first time, it's like a bolt of electricity goes through you. Now it happens routinely and to me, it means that people are taking my femaleness seriously."

I am not in any doubt that I am living the right gender now. I didn't go to a doctor and say, I think I'm a giraffe, or I want to be a whoopee cushion. I said, I think I'm a woman, and I've felt that since I was very young. And now that I live as a woman, I'm euphoric."

"Christmas shopping used to be a mad rush on Christmas eve, and now I can linger, and enjoy the process" she says, and it's the same with lipstick, and pretty clothes, and heeled shoes, all of which now appeal.

"Trans and gender diverse women are a challenge to feminists. They think we are all silly and ditzzy about make-up and hair, but when you've repressed your gender for so long, there is a tendency to adopt the very

stereotypical female behaviour," she says. "My sisters are glamorous and well-groomed, and I aspire to that. I would love to present as well as Quentin Bryce when I'm in my 70s."

To that end, Cate flagged her intention to quit the military in July 2015.

*"At the age of 64, with the help of Medicare, I finally came out as ME. And I am finally 'comfortable in my own skin.'"*

#### References:

1. Better Health Channel [https://www.betterhealth.vic.gov.au/health/HealthyLiving/Trans and gender diverse-and-transsexuality](https://www.betterhealth.vic.gov.au/health/HealthyLiving/Trans%20and%20gender%20diverse-and-transsexuality)
2. American Psychological Association [https://www.apa.org/topics/lgbt/trans and gender diverse](https://www.apa.org/topics/lgbt/trans%20and%20gender%20diverse)
3. Boston University [https://www.bu.edu/news/2015/03/03/study-finds-hormone-therapy-in-trans and gender diverse-adults-safe/](https://www.bu.edu/news/2015/03/03/study-finds-hormone-therapy-in-trans%20and%20gender%20diverse-adults-safe/)
4. Pflag Australia <http://pflagaustralia.org.au/faq>
5. GLAAD [https://www.glaad.org/trans and gender diverse/allies](https://www.glaad.org/trans%20and%20gender%20diverse/allies)

Special thanks to Kathleen Andrews.



***transfamily***

*a peer support group*