



# TRIP JOURNAL

## Transgendered Residing In Prisons



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Spring 2002

*“Support, education, outreach and advocacy for the transgender community”*



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### Qualified Immunity Denied in Washington Guard’s Rape of Transsexual Prisoner

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The Ninth Circuit Court of Appeals has denied a Washington guard’s claim of qualified immunity in sexually assaulting a transsexual prisoner. The Court also held the protection afforded by the Gender Motivated Violence Act (GMVA) extends to transsexuals, but upheld qualified immunity for GMVA claims. The GMVA civil remedies were subsequently declared unconstitutional by the Supreme Court.

In June of 1993, Douglas (Crystal Marie) Schwenk, a pre-operative male-to-female transsexual who had assumed a female gender role, was incarcerated in the Washington State Penitentiary at Walla Walla. In September of 1994, Schwenk was transferred to the medium security Baker Unit, where Robert Mitchell, a guard, “subjected her to an escalating series of unwelcome sexual advances and harassment that culminated in sexual assault.” Mitchell began with winking, imitating oral sex and making obscene and threatening comments. He also watched Schwenk in the shower while rubbing his crotch. Mitchell repeatedly demanded sex from Schwenk, offering makeup and other “girl stuff” in exchange for sex. Schwenk refused, but Mitchell persisted, groping Schwenk’s buttocks. Mitchell told Schwenk that he had sex with a former prisoner and “planned to have sex with a neighbor’s young son.” Schwenk became terrified.

This abuse reached the point where Mitchell would enter Schwenk’s cell and demand oral sex. When Schwenk refused to comply, Mitchell unzipped himself and repeated his demands, grinding himself against Schwenk’s body. When his demands went unmet, Mitchell threatened to have Schwenk “crossed out,” sent to segre-

gation, then transferred to where she would be at high risk for sexual attack by other prisoners. After repeated threats and advances by Mitchell, an illegal tattoo gun was “discovered” in Schwenk’s cell, and she was sent to segregation for 28 days. From there, Schwenk was sent to maximum security where she lived in constant fear.

Schwenk filed an institutional grievance, which was denied as untimely, since it was filed five days beyond the five day time limit. A year later, Schwenk filed a *pro se* § 1983 complaint in federal court, claiming the sexual assault violated her Eighth Amendment rights. The Court appointed counsel amended the complaint, adding a claim under the GMVA. After dismissing the institutional defendants, the Court treated Mitchell’s motion to dismiss as a motion for summary judgment and allowed discovery. The Court denied Mitchell’s summary judgment on two grounds: qualified immunity with respect to Eighth Amendment claims and the GMVA and failure to state a claim under the GMVA.

The Court found that Mitchell was not entitled to qualified immunity with respect to the Eighth Amendment claim since it was well established prior to the assault that “a Sexual assault on an inmate by a guard...is deeply offensive to human dignity.” Arguing that it is permissible for guards to rape prisoners, the Washington Attorney General’s office claimed that the law was only clearly established in the context of a guard’s liability for someone else to rape a prisoner, not for the guard’s raping of prisoner’s. The Court blasted the Attorney General, finding this position absurd “both legally and as a matter of common sense.” The Court went on to state that “where

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(Continued from page 1) **Immunity Denied** guards themselves are responsible for the raped and sexual abuse of the inmates, qualified immunity offers no shield." The Eighth Amendment protects prisoners from sexual assault and this protection "was unquestionably clearly established prior to the time of this alleged assault, and no reasonable prison guard could possibly have believed otherwise." Simply put, there is "no societal interest in allowing prison guards to rape (or attempt to rape) with independence or without fear of consequences."

Regarding the issue of qualified immunity and the GMVA, the Court found that the GMVA was not well established prior to the alleged assault and Mitchell was, therefore, entitled to qualified immunity on this issue. The claim was subsequently rendered moot when the United States Supreme Court, in *US v. Morrison*, 529 U.S. 598, 120 S.Ct. 1740 (2000), found the GMVA's civil remedies unconstitutional. The case was remanded for further proceedings. See: *Schwenk v. Hartford*, 204 F.3d. 1187 (9th Cir. 2000). [Our thanks to Donna for sending us this article and to Prison Legal News for allowing us to reprint it. Ed.]

## Donna

I hope this letter finds you well. Thanks for the latest issue of the *GIC TIP Journal*.

Since I last wrote you, I have come across a couple of things that might interest our readers. **The ACLU's Prison Rape Project is seeking information from prisoners who have been sexually assaulted, both in the past and recently.** It is possible that they might provide some legal assistance. I would recommend that anyone who has been raped or sexually assaulted contact them.

The contact person is Craig Cowie, who is an attorney with the ACLU. Send your information to him, care of:

**ACLU National Prison Project  
733 15th Street NW, Suite 620  
Washington, DC 20005  
Attn: Craig Cowie**

Since Mr. Cowie is an attorney, you can send the information via sealed legal mail.

I know that anything that smacks of

snitching can be a very touchy subject in prison, but as long as people think they can get away with it, they will continue to use and abuse us. In my case, I made it very clear from the beginning that if I was raped or sexually assaulted, I would not only report it, but I would also press charges and generally scream bloody murder. It might be a coincidence, but it seems to have had the desired effect. I have had some close calls, but after I let someone know what was going on, it was prevented from going any further.

Don't be afraid to do whatever is necessary to protect yourself. Not only do you protect yourself, but you take another sexual predator out of circulation. These beasts need to be identified and put somewhere so they can't add to our misery. If that makes me a rat, pass the cheese, sister. No so-called macho code is going to keep me down or make me a victim. If we are ever going to get some peace and do our time without being victimized or placed in protective custody, we have to stand up and demand our rights.

As you can see from the preceding article, it is not always the inmates who are the guilty parties. I got the article from a magazine called "Prison Legal News (PLN)". It is a monthly journal edited by Washington State prisoner Paul Wright. The *PLN* has been regularly published since May of 1990. *PLN* covers prison-related news and analysis from across the country and around the world. Its focus is on prison struggle in all arenas. The subscription rate is \$18 a year for prisoners, \$25 for non-prisoners and \$60 for lawyers and institutions. Their contact information is:

Prison Legal News  
2400 N.W. 80th Street, PMB #148  
Seattle, WA 98117.  
Phone: (206) 246-1022  
Fax: (206) 505-9449  
<http://www.prisonlegalnews.org>

**C.J. Yelle #W-68826  
SBCC PO Box 8000  
Shirley, MA 01464**

Dear Jessie,

I am sorry I have not written sooner, but I have been busy working on my criminal appeal and researching the case law. There three new ones to add to the

list that I sent you: [*Doe v. Delie C.A.3. (Pa.) 2001 2001WL817680*] [*US v. Mendoza C.A.9. (Cal.) 2001 262 F.3d. 957*] [*Jeffers v. Gomez C.A.9 (Cal.) 2001 2000WL33535714*]

Thus far, my list contains 164 cases dating from 1975 through 2001. I have seen a lot of cases that did not meet either the 8th Amendment or Title VII requirements, but also many that were allowed to continue on the basis of "deliberate indifference to a serious medical need."

I will be completing my research within a couple of months, and I hope that it will be thorough enough to support my claim. Along with the relevant case law, it will include all my medical records and copies of all the letters I sent to the DOC physicians, the Director of Medical Treatment, the Commissioner, etc.

All of this is necessary to prove there was deliberate indifference to your requests for treatment. You must document that you sent the letters, and since they often fail to acknowledge your requests, it would be wise to send them by certified mail so that you have a signed receipt to prove that they were delivered.

In addition, I have been educating the mental health staff, giving them copies of the Harry Benjamin Standards of Care, an article from the New England Journal of Medicine on transgendered prisoners and a section of a publication from the William and Mary School of Law about transgender legal rights. The latter two references I got from Nzaddi, and I was able to obtain my own copies by writing to them. I have found that most of these places will send you the information if you request it, or direct you to another source for help. I have yet to pay one cent for these services. I have even received information from the University of Minnesota about available services for obtaining treatment, including SRS. They provide help for changing your name and Social Security number and sealing your records once you have completed your transition.

But it's an uphill battle where the law is concerned, particularly in my jurisdiction. There is not much positive case law to support my claim, and there are still laws in effect that do not recognize

(Continued on page 3)

(Continued from page 2) C.J. Yelle gender dysphoria and transsexualism as a disability, which also means that it is excluded from Medicaid coverage. Thus, if we win in this region, it will set a new precedent and change the law.

I recently wrote to a prison reform organization in Canada, after I read an article by Synthia Kavanaugh in the Fall 2001 TIP Journal. Do you by chance have an address to the Zenith Foundation? [See below. *The Zenith Foundation is a charitable non-profit foundation incorporated April 21st, 1993, under the Societies Act of British Columbia. Its objectives are to work toward improving the security and circumstances of people with gender dysphoria. This includes a broad range of people including, but not confined to, pre- and post-operative transsexuals (either male to female or female to male) and transgenderists. Ed.*]

Zenith Foundation  
PO Box 45005 4526 Dunbar St.  
Vancouver, British Columbia,  
Canada V6S 2G3  
Phone: (604) 685-4335\*  
Fax: (604) 266-4496  
\*Collect calls are not accepted

Regarding my attempts to write to other prisoners, I have written two lengthy letters to Ophelia De'lonta #120047 but have received no reply. I also sent her a copy of the four pages of case citations that I sent to Jessie. I would like to know if she is getting my letters. In the meantime, I will try writing to the other address % Ruby Jones.

To other prisoners who would like to write to me, I am able to correspond with any inmates outside of the Massachusetts prison system. For those within the Massachusetts system, they will have to send it to a third party and have them forward it to me. Concerning the latter, I would particularly like to find out how I can contact Nzaddi. I lost touch with her when she was transferred from the Souza-Baranowski facility, and I would appreciate it if someone could tell me her new address.

I also plan to write to Xena and Valjean, as soon as I can find the time and the money for postage. We must support each other, just as Valjean did for the prisoner who wrote about having "Nowhere to Turn". I encourage others to write to me.

I have not changed my name yet, so they should send their letters to the name and address listed in the heading of this article.

In closing, I wish you all a belated Merry Chrstimas and Happy New Year. Many blessings and love. Bunny

**Sarah J. Babcock #995087**  
**Monroe Correctional Complex WSR**  
**PO Box 777 Segregation—Cell 31**  
**Monroe, WA 98272**

Dear Ms. Shafer,

What you are doing with the *GIC TIP Journal* is very much needed and so important. I was given my first and only copy by a volunteer Catholic Chaplain. It's one of the very few times a DOC chaplain—volunteer or otherwise—has done anything for me, except to occasionally wave Deuteronomy 22:5 at me. This is the second time this particular lady has gone out of her way to help and be supportive, probably at her own expense too.

Unfortunately, I didn't get to read "Nowhere to Turn", but judging from the comments, I do identify. I am pretty much completely isolated from the outside world. The DOC has been shipping me from one segregation unit to another, all over the state of Washington. In the process, they have destroyed all my personal property, my color TV, my legal research and all of my addresses. They have also been battling with me over my true and legal feminine name and my insistence on proper psychiatric and medical treatment for my transsexualism.

I used to write Roni Soubrette, but I no longer have her address. It was tossed out with the rest of my stuff. If someone knows how to reach her, I would appreciate it if you would put me in touch with her. [I have sent her a copy of your letter and your contact information via e-mail. I don't have her mailing address. Ed.]

In fact, I would love to hear from anyone, especially the activists. Being in segregation, I really need the mental stimulation. I answer everyone, except the sexual letters from men and letters from people who won't use my true and legal name. However, the rule here is that I can't correspond with other inmates. Although I am indigent, I will never ask for money, but I will occasionally ask for information that I am unable to obtain otherwise.

I noticed your case law briefs. I once

had a very significant amount of case law pertaining to transsexual prison issues too. I see you listed two of Dee Farmer's cases: *Farmer v. Haas* and *Farmer v. Hawk*. She has several other cases, both published and unpublished. What little I know of the law came from reading her cases, though some of them are more an example of what not to do.

You might want to add *Farmer v. Carlson*, 685 F.Supp. 1335 (M.D.Pa. 1988) It pertains to a *Bivens* action. Most importantly, in *Farmer v. Brennan*, 511 US.825, 114 S.Ct. 1970, 128 L.Ed.2d 811 (1994), the United States Supreme Court re-evaluates and clarifies the "deliberate indifference" standard, as established in *Estelle v. Gamble*, which you listed.

I will send you more case law as I find it and, hopefully, with better explanations, but it is really hard to do legal research from segregation. Since all of my legal research was lost or destroyed, the case citations in the newsletter were a big help.

I was very touched by the article, "Was Pre-Op". It is so sad when an inmate feels she must self-emasculate herself to get her point across to an ignorant prison staff. I have come very close myself, but not in nearly so dramatic fashion. I used a needle and thread, but was not completely successful.

When I first arrived here, a social worker confided in me that a "homosexual" claiming to be a transsexual had self-castrated and amputated "her" penis, and I was asked if I had similar plans. I have also read about other instances in the case law and in medical journals, which leads me to believe that it happens all too often. I understand their motivation, but this way is not the answer.

The way to do it is by writing letters to prison authorities and making formal complaints, being sure to include relevant case law and any other authoritative materials that can lend credence to your claim. I am always looking for new ways to approach the issues and make my case, but personally, I never use the grievance system.

Thanks again for the help and the enjoyment I got from the last edition of your journal. Tell all the prison brothers to stay cool and all the prison sisters to keep their nighties down. And if you write to me, please send all my mail to my legal name, Ms. Sarah J. Babcock. It helps my cause.

## Pro & Con

### Guest Editorial Opinions

**Should transsexual prisoners be given sexual reassignment surgery at the state's expense? Two opposing views.**

#### Part I

**An Inmate's Very Own Sugar Daddy: How a killer's plea for having the state pay for sexual reassignment surgery makes a mockery of transsexuality**

By Juli Goins

There comes a time when having an open mind just isn't quite enough.

On February 4th, the Associated Press reported that Michelle Kosilek, an inmate serving a life sentence without parole for strangling his wife to death and leaving her in a trunk for several days, is petitioning for hormone replacement therapy and genital surgery so that he can live as a woman.

On the state's dole, that is.

I felt torn by the story. Here was a convicted felon who now expects the Commonwealth to pay for what bigoted folks like to call a "sex-change operation". In his petition arguing cruel and unusual punishment under the 8<sup>th</sup> Amendment, Kosilek infers that this procedure will magically convert him into a woman for the rest of his life behind bars.

To be frank, I don't have a problem with referring to Kosilek as Michelle, his preferred -- and now legal -- name. However, my tolerance for him as a first-degree murderer goes no further. In this severe an offense, deferring to feminine pronouns with Kosilek is pretty insulting to both natal and transsexual women, and by extension, any law-abiding crossdresser who prefers to be recognized in the feminine voice.

Being gender-different is neither easy nor often kind. Coming out myself as transsexual at eighteen, I recognize the internal issues that Kosilek has probably faced for a lifetime.

But simply put, his plea for free surgery is bad public relations for an embattled and heavily marginalized gender community.

Unlike their gay and lesbian brethren, who have a voice in media outlets like the *Advocate*, *Planetout* and *Genre*,

gender-different folks cling to the precipice of negative public opinion -- in the rare event that they aren't altogether ignored. Despite the myriad transsexual people who effect good in their communities but aren't noted for it by the press, stories like Kosilek's only adds to that skewed bad image that helps Jerry Springer maintain such high ratings.

Even in 2002, transsexuals live in an alternate universe where being the victim of a violent crime without any hope of restitution or justice is practically expected, where abject employment discrimination by most HR departments (several of whom have sexual orientation non-discrimination policies in their manuals) is encouraged and where access to informed and dignified health care is about as rare as modern medicine was in the Soviet era.

After so many legal, policy and social setbacks placed against gender-different people, the gender community's grip on that meager dignity slips with every slug of tabloid journalistic tripe thrown their way. And now, a convicted murderer wants the state to pay for a groin job.

Tell me you're kidding.

Something that few people realize -- including transsexual and transgendered people just discovering their own gender autonomy -- is that genital surgery is not an end-all, be-all to gender identity and expression.

Surprise, surprise.

It's true. After all, people don't wear genitals on their sleeves. As Phyllis Frye, a respected transgendered attorney in Houston, notes, "The biggest sex organ you have is between your ears." Her aphorism comes to mind whenever I hear a transsexual or transgendered person claim that "the big surgery" is the only way to change them into another gender. This belief, of course, negates the premise that the mind has complete veto power in gender -- not the genitals.

Arguing this point with another tranny, though, is as dicey as discussing the future sovereignty of Jerusalem. Like the Middle East, a quick primer on the two most prominent factions is needed for lay folk to understand the tensions behind this ideological conflict. And forgive me for oversimplifying this a bit, but including every tranny's perspective

would totally get dropped by the editor's hack job.

See, in one camp, you'll meet relatively confident transsexual people who may or may not have had their genitals altered. And the only way that you're going to know whether a scalpel was ever drawn near their pink bits is if you're privileged enough to be their doctor or sex partner. They strongly believe that a faithful and consistent gender presentation is key to whether or not someone is really a man or a woman, and it's no one's business to probe them about their crotch.

Unless, that is, the rude, inquiring mind has a fetish for extreme humiliation.

Many of them also point out that calling transsexuality a medically-recognized "disorder" is doing more to stigmatize gender-different people and less to actually help them. They correctly note that the American Psychiatric Association removed the clinical diagnosis of homosexuality in 1973. And despite an overwhelming 90 percent consensus from APA members who believed in the seventies that being gay was grounds for barring psychotherapy practice, the removal of that diagnosis as a pathology has dramatically changed opinions within today's APA.

In a complete reversal, roughly 90 percent of its members now feel that one's sexual orientation should not preclude them from practicing. Moreover, the APA strictly forbids methods that encourage "curing" homosexuality.

But almost thirty years later, transsexual people find themselves fighting the same battle their gay and lesbian cousins once faced.

Meanwhile, you'll confront trannies on the other side of this "gender neutral zone" who passionately assert that genital surgery -- whether "to make a hole or a pole" -- is the sole criterion in affirming their place as women or men in our society.

These trannies put their stock into a medical diagnosis of transsexuality as a way to affirm their sense of gender. Any effort by others to de-medicalize the Diagnostic and Statistical Manual of Mental Disorders (or DSM-IV) diagno-

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## Valjean Royal #3943

PO Box 30 DI/201U  
Pendeleton, IN 46064

### The Cruel & Unusual Punishment of She-Males

#### Why Her Warden Calls Her Mister

[From a report in *Hustler* © May 2000  
by Robert Linnet. Reprinted with the  
permission of Ms. Valjean Royal]

“Segregation is not a pleasant ordeal,” says Valjean Royal, a transsexual serving 2-21 years for manslaughter and a concurrent life sentence for the murder of a guard. “You don’t have any real privileges. And if you are a PC case, you are kept alone all of the time. It is solitary confinement.”

Valjean, 45, is incarcerated at FCI Jessup, in Georgia. [Valjean is now nearly 2 years older and has apparently been moved to a facility in Pendleton, IN. Ed.] She ran away from home at the age of 14 and supported herself through prostitution and working as a female impersonator in nightclubs. She first entered the prison system at the age of 19. In 1978, she was convicted of the murder of a correctional officer.

Valjean’s murder trial took place in the small Indiana town of Valparaiso. Valjean’s mother, Jessie, attended. “Val showed up with makeup and tight, white pants,” says Jessie, “and the jury, they were all white. I could see it in their eyes—I knew the look—they just hated him because of the way he looked.” “I am black and transsexual,” says Valjean. “My innocence doesn’t mean jack \_\_\_.”

Valjean claims that she was raped by an inmate while being held in a disciplinary segregation unit at FCI Memphis, Tennessee in 1991. “The officer in charge of the special housing unit unlocked my door,” she says, “and let the inmate into my room for the purpose of sexually assaulting me.” Valjean complained that she was ignored by prison authorities after she reported the rape. “I was transferred to another institution,” she says, “and the whole thing was sorta swept under the rug.”

Valjean is 5-10 and has brown hair, with a deep-yellow complexion. She wears her long, relaxed hair in braids. Valjean refuses to be put into segregation because she prefers the company of

other men in the general population. She also refuses incarceration in a women’s prison.

“I would never request to be placed in an all-female facility,” Says Valjean. “I don’t want any man raping me, but I love having a man’s arms to fall into. I’m very much in love with the man I’ve lived with for the past three years. We pray that we will always hold on to our love for each other. I couldn’t have the comforts of this kind of love and relationship in a female facility.”

While Valjean requires the service of personal protectors Shannon Landry and Dale Washington, two heavily muscled fellow inmates, to keep her safe from attack, she seems relatively content with the accommodations at FCI Jessup. “There is a lot of privacy for a relationship,” she says. “Most couples live together. If you don’t live together, there are many places where you can find privacy.” FCI Butner, Royal remembers, was even more permissive. “There was a housing unit full of transsexuals at Butner,” Valjean recalls. “The yard was like a lover’s lane.”

## Formerly Kitty

Dear Jessie,

I and the other TS inmates at the FCF recently attended a meeting (read Inquisition) of the committee for transsexual treatment. We were interviewed separately, thereby denying us the opportunity to present a united front, and I was given no time to read the presentation I had prepared. The latter was a point by point criticism of their so-called treatment plan, which in my opinion is nothing more than a rationale for denying treatment and ignoring my needs. I, for one, refuse to sign such an agreement.

The committee did make copies of my critique. Whether they will bother to read it or not, let alone act upon it, I am very doubtful. I am even not sure it will make it into my permanent record, which is why I would not give them the originals. These things tend to disappear.

I felt the questions I was asked at the hearing were biased against me, and I was given little opportunity for rebuttal. In all, I was only given 15 minutes to

present my case and answer their questions. I left there stripped of my pride and my hopes dashed. My expectations having been previously raised by a sociologist who had been “counseling” me made it an even more bitter to swallow.

To call these people “health care professionals” is a contradiction in terms, at least where I am concerned. They seemed more intent on denying treatment than providing it.

To protest this robbing me of my identity and to protect myself from continual sexual harassment, I cut my hair short and reclaimed my masculinity. Ironically, I am now treated with greater courtesy and consideration by the guards and inmates alike. Coincidentally, a course instructor who had been putting off my application to join his class suddenly decided to accept me, telling me now that he thinks I will be an asset to the course. Go figure!

So here we are, one “happy” family—all in denial together.

The reality is that I am thoroughly depressed and miserable, and with no relief in sight, planning ways to cut short this oppressive existence. As if this were not enough, the only member of my family who still acknowledges my existence doesn’t even care enough to send me a Christmas card. I am beginning to understand why people commit suicide.

It is growing increasingly difficult to maintain a cheerful façade. I have a minimum of another five years left—more likely eight—before I can move forward with my transition. Hopeless doesn’t begin to describe how I feel.

It seems that everyone that I care about has abandoned me, my siblings, my ex-wife, and my kids. And the people in here who are supposed to care about my mental and physical health have betrayed that trust.

I am really tired of fighting a losing battle. If I try to be myself, I am hated or shunned by others. If I try to fit in, I hate myself. It seems that my whole world is full of nothing but hate, and I don’t see any way out but one. I only hope I have the courage to make it.

[Dear Kitty—You are not alone, and there are people who care what happens to you. Our thoughts and prayers are with you. Love—Jessie]

## Stephanie

Kudos to Gianna E. Israel for her write up in *Tapestry*, sharing our plight with others in the gender community. Not since her column in the Summer 1998 issue have I seen such a frank description of our suffering.

I had no idea that Dallas was going to highlight the problem of incarcerated transfolk when she agreed to publish my submission. If I had known, I would have highlighted Janet's many failed attempts over the last eight years to have her needs addressed. In addition to being a transsexual, Janet was my biological "brother".

After reading Gianna's account of the debilitating consequences from denial of care, I wondered how much of my late sister's many illnesses, culminating with brain cancer, resulted from the stress associated with her gender dysphoria and the lack of proper treatment.

Janet was diagnosed as a transsexual prior to incarceration by the Pathways Counseling Program in Milwaukee. But because she could not afford to continue her transition out in the free world, she was denied the treatment she needed and repeatedly requested from prison officials. The courts ignored her pleas for help too. The only concession she ever received was a transfer to a single-cell facility, but it was also one that had a notoriously bad reputation.

It makes me wonder how much their "deliberate indifference" contributed to her early demise. From my limited perspective, if Janet's gender issues had been addressed, she would likely have been more attentive to her overall health and well-being, and being relieved of the stress of her gender dysphoria, her immune system would have been more resistant to disease.

The bitterness and the grief that I still feel over Janet's suffering and her loss have only increased my resolve to continue the struggle that she and others like her have begun. And a few opportunities are beginning to open up for me.

The same day I received my copy of *Tapestry*, I was summoned by our facility's psychologist requesting any information I had on transgenderism. She led a group therapy program I was in last year, where I had the opportunity to do some educating on our gender issues with her

and others in the group. In this instance, the psychologist wanted to focus on the subject of crossdressing, which is mainly where my interests lie. There was someone in one of her groups who was troubled about his history of crossdressing.

Unfortunately, I was all out of the transgender education kits that I usually hand out in these kinds of situation, so I sent her an extra copy of *Tapestry* I had instead. I also encouraged her to have him contact me and gave her the contact information for the IFGE and the GIC.

In the likelihood that he doesn't find the courage to write to you, could you send me some information kits that I could pass along to him, even if its just a one page brochure? [*I am sending Stephanie some booklets put out by PFLAG entitled "Our Transgender Children". It is free for the asking, and it is a very good synopsis of the issues, even for adults. Ed.*]

I believe there are more among the general population who harbor a secret struggle with crossdressing, along with the other emotional baggage that comes with it. Nine years ago, I had this vision that if only someone—perhaps myself—would reach out with a little love and understanding, we might be able to help these people avoid the suffering and the despair that my sister was going through. It was her that inspired my vision and still does.

In Gender Loving Care—Steph

## Katheena Hunt W-39104

I have read so many different stories of such suffering by our sisters in our newsletter that I felt compelled to tell mine. I share their pain, and by telling our stories, perhaps we can begin the healing process.

I was born in the Bermuda Islands. I was sexually molested as a child, beginning at age three by my mother's boyfriend. When my mother found out, she kicked him out and then turned her anger on me, beating me over the head with a high heeled shoe. I still bear the scars of that beating.

I was taken from her and placed with the nuns for a while, after which my father took me in. Unfortunately, my father's live-in girlfriend had a teenage son who also liked to abuse children, forcing

me to perform oral sex, as did a janitor at school. It always made me sick, and I remember throwing up a lot. I didn't feel like I could go to my family for help, so I ended up getting into a lot of trouble. When I went to the local priest, even he turned out to be a child molester, which kind of destroyed my faith in religion.

In the early 70's, to escape all the madness I left Bermuda for Boston, where I again found myself being victimized, this time by patrons of a gay bar, who beat me up and raped me. I started using drugs too, and eventually I ended up in Massachusetts General Hospital for attempted suicide. They transferred me to a more secure facility, when they found me cutting myself up with a razor blade. When I was well enough, they deported me back to Bermuda. By then, I didn't care who had sex with me.

A few years after I came back to the US, I got into trouble and ended up in the Walpole State Penitentiary. It was like being thrown to the wolves. I was immediately gang raped and generally used and abused thereafter. After being transferred to another state prison, I had three of my front teeth kicked out, when I finally stood up for myself and said no.

I was again transferred to a different facility, where an inmate boiled up a mixture of oil and water and threw it on me when I refused his sexual advances. I suffered third degree burns over part of my body. He tried to throw it in my face, but I was able to avoid that at least. His attitude was if he couldn't have me, he would fix it so no one else will or want to. I have been seeing a mental health counselor ever since.

As I think back, it still hurts a lot, but I still have hope that I can understand and accept who I am. It took me a long time to do that, and now that I understand who I am, it has given me new hope and something to live for.

Out of all this craziness and hell that I have been through, I have at last found a friend that I can talk to. He doesn't totally understand what this is all about, but he tries, and I am grateful to him for just being there for me.

I hope that by sharing my story, it will help someone else who feels like I did—that there is no way out. There is, but I had to learn that lesson the hard way. ♥♥ Sister Katheena

**"Sister to Sister"**  
**Ophelia De'lonta #120047**  
 PO Box 1027  
 Marion, VA 24354

Happy New Year!

I believe that 2002 will be a good year for us and the *GIC TIP Journal*. In reading the Winter 2001 issue, I see that a lot of girls are beginning to see it as a kind of shelter, a place where they are comforted by others who share the plight of being "trans" in prison. Questions are being asked, and the shameful silences are finally being broken. We are finding our voice, and people are beginning to listen.

There is another reason for my optimism. As a result of my suit in federal court against the Virginia DOC, it looks like I will be getting out before too long and might get a substantial settlement. Gianna E. Israel, the contributing editor of the *GIC TIP Journal*, was a major factor in my success. Like Jessie, much of what she does is *pro bono*. If it was not for her and people like Jessie, just think where we would be.

To show my appreciation, I plan to donate a large portion of whatever settlement I get to Gianna and Jessie. I also hope to use some of it to enlist the aid of any attorneys who are interested in helping us get proper medical treatment. And I will continue to speak out for our rights and encourage others in our community to do so.

You can help too. As you know, Jessie is doing all this out of her own pocket. I'm sure you all have a stamp or two that you could donate.

So I encourage all the girls to believe in your dreams and don't let anything or anyone deter you from your goal. We have only one life to live - only one! Stop worrying about what others may think or say. The pain, the misfortune and the disappointments that we all must endure will only make achieving your goal that much sweeter.

Now, I would like to address a few issues raised by some of the girls in the last edition. I have asked Jessie to

make this "Sister to Sister" advice column a regular feature of the newsletter, and I encourage you to send me your questions. Together I believe we can find the answers to those questions.

Regarding Cynthia Lee Ann's comments about how and by what name she wants to be called, in my opinion, it should not depend so much on the circumstances and how others see her as how she sees herself. It is important for her and her friends to acknowledge and respect that person. If we continue to hide and be ashamed of who we are, how can we ever expect to earn the respect and understanding of others or get the treatment we need? True, it will be difficult, but the struggle is worth it.

To Donna, you don't have to keep your feelings to yourself. You can write to me, and I will help you cope. Always know that you are not alone.

To Minnesota Anonymous, girlfriend you did the most important thing by sharing your story in the *Journal*. If you want my help and advice, please feel free to contact me.

**What Good**

*What good is a flower, if it can't bloom?  
 What good is growing, if there is no room?  
 What good is a twig, if it can't sprout?  
 What good is a voice, if it can't shout?  
 What good is life, if you can't be free?  
 What good am I, if I can't be me?"*

*I can only become what I am...  
 I can't change, I only become more transparent.  
 —Ophelia De'lonta*

**Cynthia LeAnn LaRochelle**

Greetings Ms. Jessie,

I trust my letter finds you in good health and joyful spirits. If not, smile anyway. It makes people wonder what kind of bloomers you are wearing.

I have some potentially good news. The chief psychiatrist has said that if I were a baseball player, I would be signing a mega-million dollar contract, because I am batting 500—meaning it looks like one of my requests for treatment might go through. One was on the clothing issue and the other was to be placed on female hormones.

The federal facility where I am at includes a women's camp, and I was hoping to get a few articles of women's clothing to wear from there, particularly undergarments. That request was denied because they apparently considered it a security risk, which I kind of understand. I don't think they understand though, its importance as it relates to relieving some of the dysphoria resulting from my gender identity issues.

However, according to the chief psychiatrist, it looks promising that they will allow me back on hormones, specifically oral Provera as a testosterone blocker and 7.5 mg. of Premarin, which is a conjugated estrogen.

I used one of the cases that was cited in the last issue of *GIC TIP* in my appeal, the one that states that institutions must provide some degree of care for a prisoner's gender dysphoria, and I think it helped. It also helped that I had been receiving them before my transfer to the federal Bureau of Prisons. All I can say, it is about time.

Unfortunately, the chief psychiatrist does not have the final say. It still has to get by the legal department, but the good doctor did say they were giving my request serious consideration.

I am bursting with anticipation, but I don't want to get my hopes up too high. I know how the system has a way of deflating your hopes. Nonetheless, right now, I am as happy as a pig in mud.

Compared to other places I have been, this place is like heaven to me. I can't believe how well accepted I am here—at least in my housing unit. When some snot-nosed youngster comes along and chooses to get a little stupid, the "old timers" here tell them to back off and shut up.

I think the reason I have gained their respect is because I am honest with people, and I don't "kiss and tell." I have played the field a little and have had a few dates, but now I am ready to settle down and get "married," if I can. It is wonderful to be out and open about who I am and what I want to be.

*(Continued on page 8)*

(Continued from page 7) **Cynthia LeAnn**

I am looking forward to another exciting issue of the *GIC TIP Journal*. If I know you, you will find a way to outdo yourself on the next one.

I wish you and yours much love and joy, and give yourself a hug for me. And before I go to sleep, I will smile and hug myself, knowing you are there with me in my dreams. With love and gratitude—  
Cynthia LeAnn LaRochelle.

## Texas “T”

Dear Friends,

I am a 42 year old transsexual currently being held at a facility in the Texas DOC. I have been bisexual all of my life, but, given a choice, I have always been more attracted to females. I had one marriage that lasted a year and another for ten years.

After acquiring my GED, I studied communications and journalism for three years at the University of Texas. Later I attended nursing school from which I graduated as an LVN.

I served my first four years in prison as a man, hiding my female gender identity. I was nearly beaten to death on several occasions. My injuries include fractured vertebrae L-1, T-11 and T-12, a convoluted fracture to my right hand, broken ribs, broken knee, two cracked teeth and multiple contusions and lacerations requiring stitches.

I am have been in protective custody now for about eighteen months. Most of the others here are either gay, weak or otherwise at risk. I don't feel nearly as threatened here, and for the first time in my life I feel at liberty to express my femininity.

I take hormones when I can get them, but they're hard to find. I guess you could say that I am obsessed with the female species, even where my sexuality is concerned. I am still not very attracted to stereotypical men.

On the other hand, I like the sex, because it makes me feel more like a woman. Am I strange, or do others feel the way that I do? [No and yes. Ed.]

## Mark Summers Massachusetts DOC

Dear TIP Journal,

Thank you for including me on your mailing list. I have read the articles, and I have personally felt the pain and frustration many of the sisters/friends express.

As a gay, extremely effeminate person, I know that I generate volumes of attention. Some I enjoy, and others can be upsetting, if not frightening.

For years, I have traveled throughout the Massachusetts Department of Corrections in full “regalia” - full face makeup, nails, hair and clothing. It was fun, exciting and also dangerous.

I firmly believe that in this world all people should be treated fairly and with kindness, but I also know that there are many sick, twisted individuals who prey upon those of us who appear different. In our quest for positive attention and affection, we sometimes also attract the attention of these individuals—prisoners and officers—and the harm that they are capable of inflicting can leave many emotional and physical scars that stay with us for years.

For that reason, I have shed my “drag” image. I am still gay, still effeminate and, more importantly, still me. But I must admit that once I “toned it down” there was a corresponding decrease in the harassment.

I am not justifying the cruelty that I experienced before the change. It was wrong and should be dealt with. I simply feel that I must do what I can to keep a low profile while I remain in this kind of environment.

To those of you out there still struggling with these choices, choose your battles carefully. To those of you who know me personally, don't ever believe I have given up—only grown up.

## Herbal Hormones

Transgender Care Health Information Archive  
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Inc. All rights reserved.

Phytoestrogens, sometimes referred as natural or herbal hormones, are naturally occurring substances extracted from plants. Their molecules look a lot like estrogens that normally are produced in a woman's body. But they also resemble some anti-estrogens, like the breast-cancer drug tamoxifen.

With an interest developed through advertising and word of mouth, many transgender individuals have experimented with a variety of extracts from black cohosh, caraway, dates, dill, motherwort, red clover, and soya among others as a means of

physically feminizing.

Soybean and red clover isoflavones are two varieties of these weak estrogen-like substances that are popular items in health food stores and through Internet sales. Advertised claims for isoflavones have also created great interest in genetic women who wish an alternative to estrogen or progesterone preparations in the treatment of hot flashes — the episodes of flushing, sweating and sensation of heat sometimes suffered by menopausal women.

While transgendered and genetic women may want natural hormones for differing reasons, they share the same desire for a suitable estrogenic effect. Genetic females have only recently used natural estrogen alternatives in large enough numbers to prompt formal study. Transgendered women using phytoestrogens, on the other hand, while comparatively small in number, have been frequently examined at TGIP and by other transgender providers relative to their self-administration of these natural hormone-like substances.

The effects of phytoestrogens seen at TGIP have been derived from numerous patients seen in clinical practice. While many individuals have reported large dosing of a variety of herbals for durations of months or years, we have not seen any significant feminization.

While whatever estrogenic properties exist only in a very weak form, very large and potentially toxic quantities are often consumed. Toxic results have shown in some individuals in the form of illness, and possibly, permanent organ damage.

Prompted by numerous advertisements that included claims about the benefits of soy for ending or lessening hot flashes, the North Central Cancer Treatment Group Clinic based at Mayo Clinic studied 177 breast cancer survivors. The results of this study were released February 28, 2000.

The flashes, which also affect women undergoing chemotherapy or tamoxifen treatment for breast cancer, can be accompanied by palpitations and feelings of anxiety, and can be very disruptive to life, the study said. “Despite optimistic hopes that this soy phytoestrogen product would alleviate hot flashes, the scientific data from this study demonstrated that it did not help,” said Charles Loprinzi, one of the authors of the study.

(Continued on page 10)

(Continued from page 4) **Pro & Con: Goins** sis, officially known as "gender identity disorder", is considered a threat to their very existence. Many of them have benefited from a benevolent dictatorship that permeates the so-called "gender clinics" -- a holdover from the 1960s, when transsexuality was still unfamiliar enough to be considered a brave, new research topic.

First, these clinics grace the patient with a diagnosis. Then, through a series of restrictive criteria (pejoratively known as "the gatekeeper's hoops"), these transnannies spend a lot of time waiting to learn whether these paternalistic institutions will grace them with a green light to hormone prescriptions and eventually, surgery. It's a lot like teasing your pets with treats.

Unsurprisingly, these opposing factions of tranny ideology don't mix. In several ways, trannies are a fickle bunch when it comes to community harmony: like a bevy of kids stuck in an orphanage, they're all forced to get along due to shared circumstances and oppression. And with the advent of discussion boards, mailing lists and chat rooms, these divergent groups have launched into flame wars worthy of jihad.

As with jihad, there are those who don't win. And there are losers.

With regard to the gender community's position on the fate of this convicted murderer, I suspect that many will support Kosilek's free surgery petition, arguing a case of human rights violations if it were ultimately denied.

But as openly gay and perennially transphobic U.S. Representative Barney Frank of Massachusetts, likes to say, "That would be a mistake." With some reservation, biting my lip at the prospect of concurring with someone who has disdain for people like me, I'd have to agree with him.

By the time Kosilek was arrested, he hadn't begun reconciling his gender issues, either by consistently presenting as a woman or with therapy. He also voluntarily gave up his freedom and privacy on the day he killed his wife.

Had Kosilek been on hormone therapy in 1990 or any time thereafter, then it would have been prudent for the state to ensure his continued access to that medication, even if he still presented as

masculine at the time of arrest. Yanking someone off long-term hormone therapy has potentially detrimental effects -- some life-threatening -- and is medically no wiser than denying an HIV-positive inmate access to her or his protease-inhibiting cocktail.

But giving Kosilek clearance to state-funded surgery flies in the face of transsexual people who have no criminal record, face a seventy percent unemployment rate and struggle to do everything they can to make a living. By giving the nod to Kosilek's petition, the state would infer that transsexual and transgendered people are really no better than lecherous criminals, leaving the rest of us to face those intolerant naysayers who announce with alacrity, "Who wants to hire or live next door to a freak like that?"

It's a politically-correct Pandora's box that nobody wants to discuss.

Should the state completely deny Kosilek's access to surgery? Not entirely. Kosilek should have the right to save a stipend from working in the prison laundry room to pay for ongoing hormone medication, which he took briefly in 1967 and 1971. Furthermore, if Kosilek is lucky enough to have sympathetic benefactors willing to help out, then he is more than welcome to getting all cut up.

After all, Kosilek still has to live with the legacy of wrapping a wire around his wife's neck and choking her to death. If having an extra orifice between his legs eases the misery of his life sentence, then by all means, let him have it.

But the amount the state would save on an inmate's surgery could be better spent on helping its transsexual residents become self-sufficient, successful and -- heaven forbid! -- respected.

*[About the author: Juli Goins is no stranger to queer politics, having slogged through Goins v. West Group, one of the more critical human rights legal battles in recent U.S. memory. She is eyeing an Ivy League-quality law school for her second career in employment law. When not keeping the queer community on its toes, she manages her own small branding and advertising agency in Minneapolis.]*

## Part II

### Fear & punishment: No room for compassion? By Nancy Nangeroni

After reading Juli Goins' scathing indictment of Michelle Kosilek's plea for sex-change surgery, I feel compelled to write a rebuttal. I am informed by a series of communications with Kosilek some years ago, when she wrote to me (as a nationally visible trans activist) seeking help in bringing her lawsuit. While I was unable to provide her with any substantive assistance, I did learn some of the particulars of her situation. Goins' opinion of Kosilek's case, on the other hand, seems based primarily on her fear over the consequences of the publicity it has spawned. While I share some similar fears, I also know from experience that the kind of publicity that this case has generated, while admittedly challenging, is not insurmountable. As if it were the first time we faced public ridicule of our claims to respectability!

One particularly offensive portion of Goins' piece -- besides the consistently glib tone -- was her denying Kosilek the simple respect of appropriate pronouns. Whatever Kosilek's crime, she deserves to be treated as a human being. Such is the essence of our principle of law. Just because Goins is a transsexual does not make her immune to anti-trans prejudice. Quite the contrary, in fact. It is common in any stigmatized group to internalize self-loathing, and to turn it on one another at the slightest instigation. Sadly, Goins' article comprises the very kind of trans-on-trans bickering that she criticizes ("trannies are a fickle bunch...").

We all probably want to distance ourselves from this embarrassing situation. While we are right to be repulsed by consideration of her crime, that does not make us right to reject all consideration of her humanity. The treatment of prisoners, whatever their crime, should be of concern to all of us, and is perhaps the best indicator of the depth of compassion and conscience of any society.

Let me remind you that William Palmer, also in Massachusetts, strangled a transwoman to death, and served only two years in prison for his crime.

(Continued on page 10)

(Continued from page 9) **Pro & Con: Nangeroni** Kosilek will probably spend her life there. Where is the justice in that? And how about Dee Farmer, a transsexual incarcerate who has served over 13 years for credit card fraud? Are we to consider ourselves of such lowly status in this culture that our punishment for any crime should be many times worse than that of others?

Goins also asserts that Kosilek "hadn't begun reconciling his gender issues, either by consistently presenting as a woman or with therapy" That is simply not true, at least not by Kosilek's own account. In a letter to me requesting help (in 1996), Kosilek told of abandonment at age 4, followed by six years in an orphanage with many beatings by nuns for her insisting that "I was a little girl," followed by being locked in a closet at length for wanting to dress like a girl. She was reclaimed by her alcoholic mother and a stepfather who, when she found herself developing breasts naturally and asked, "Am I a girl?," responded by grabbing a knife and stabbing her with it. She describes "a sloppy six-inch scar". She told of being repeatedly raped by her Maternal Grandfather, and of eventually becoming alcoholic, falling into a lifestyle of prostitution, booze and drugs during early adulthood. At some point, she came to the realization that the central cause of her problem was her gender issues. She got herself into a half-way house, where she was assigned a therapist who reportedly seduced her, telling her that "I just needed the right woman, and that she was that woman." This masters-degreed therapist violated the most basic code of ethics of her profession by developing a romantic relationship with her client that ultimately ended in marriage. By Kosilek's account, the murder resulted from an incident arising from an argument, where the therapist threw boiling water on her, then, after Kosilek knocked her down, attacked her with a knife. Given that Kosilek had been stabbed earlier, as a youth, by her adopted father earlier, it seems reasonable to at least make some allowance for the likelihood of some kind of traumatic re-enactment. But for some reason, Kosilek wasn't allowed to introduce evidence of the scalding at the trial. In contrast, affluent white pro-

grammer William Palmer's only excuse for killing recently jobless (fired for being TS) Afro-American Chanelle Pickett was that he "thought she was a woman," and the jury didn't get to see photos of her face, which had been beaten to a bloody pulp.

Kosilek's story would be too fantastic to believe, had I not read Daphne Scholinski's book and heard other, equally shocking stories.

Whatever the truth, the fact remains that Kosilek's wife violated the most basic ethic of psychotherapy by becoming romantically involved with her patient. While this does not in any way excuse murder, it does create at least some mitigating concern, and also establishes that Kosilek was someone who recognized the depth of her gender issues, and who was seeking to correct her admitted problems. I also believe that there is more than ample cause for doubting whether this case was fairly judged, and whether Kosilek was fairly sentenced. As we stand informed by our witnessing of what has passed for "justice" when transsexuals have been victimized, we can hardly doubt the injustice routinely accorded to those who stood accused of crime, especially 12 years ago.

Goins would do well to show a little more compassion for someone whose life will have been wasted inside a concrete and steel cage. Yes, it's an embarrassing case. Kosilek blew it big time. But it's just one more case of differential punishment for disposable trans offenders.

As for whether the state should provide free "sex change" surgery, I don't know what to think. Incarcerates get free room and board; there are certainly plenty of trans people who could really use that kind of help. Should we deny Kosilek those, too? The answer, if we apply Goins' reasoning, would be yes. Is our newfound acceptance and respect as trans people so fragile that we must abandon any compassion for those less privileged, less fortunate, less well positioned to earn that respect for us? I don't think so. Let us be judged by how we judge others, including our own. Especially those less fortunate than ourselves.

[About the author: Nancy Nangeroni is an outspoken transgender activist,

author, lecturer, musician, and media producer. Since 1995 she has produced and hosted an award-winning radio talk show about gender, transgender issues and progressive politics called "GenderTalk" which airs weekly on WMBR-FM in Cambridge, MA, and worldwide via the Web at [www.gendertalk.com](http://www.gendertalk.com). It is the only weekly program of its kind, and is respected worldwide as a leading spoken forum for trans and gender issues. In April, 2000 it received the GLAAD award for "Outstanding LGBT Radio".

(Continued from page 8) **Herbal Hormones**

The conclusion of the study based at Mayo Clinic found that the 177 breast cancer survivors who took soy pills did not experience any noticeable changes: the estrogen-like substance found in soybeans is not effective in stopping or decreasing hot flashes — disputing advertised claims for such products.

But whether natural or pharmaceutical, hormone therapy is not without risks. Those who maintain a self-administered herbal (or pharmaceutical) program should be regularly monitored by a physician.

Additionally, herbal hormone regimens when used in concert with traditional pharmaceutical programs will likely obstruct, instead of heighten feminization. *These weak estrogen-like molecules do not augment, but compete with the pharmaceutical regimen.*

And then there's the issue of dose. One has no idea what has been extracted from the plant, or its purity. And, like most everything in life, a little bit of herbal estrogen may be good for you, but a lot can hurt you. Ultimately, the transgendered woman who takes herbal hormones instead of medical hormone therapy is basically conducting an experiment of one. She may be slightly feminizing or not. She may or may not be endangering her health. But she is doing it "naturally."

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**Deanna Fortune 1119411 3-A**  
**Mt. Pleasant Correctional**  
**1200 E. Washington**  
**My. Pleasant, Iowa 56241**

Dear Jessie,

I really enjoyed the last newsletter, and thanks for including my letter. I also appreciate your recommended reading list. It should help the sisters who want to transition educate themselves on the subject, and it helps us do time.

I have some suggested additions, which are included below. [\*Indicates editor recommendation]

**Transvestites: The Erotic Drive to Cross-Dress (New Concepts in Human Sexuality)** by Magnus Hirschfeld \$53.00

**Sex Changes: The Politics of Transgenderism** by Pat Califia (ISBN 1-57344-072-8) \$16.95

**Identity Management in Transsexualism** by Dallas Denny (ISBN 1-880715-07-4) \$15.00

**Sexuality and Law, Vol. III**, an encyclopedia of major legal cases edited by Arthur S. Leonard (ISBN 0-8240-3421-x) \$105.00

**Gender Disorders and Paraphilias** by William B. Arndt, Jr. (ISBN 0-8236-2150-2) \$62.50 [Paraphilia means a type of mental disorder characterized by a preference for or obsession with unusual sexual practices. Ed.]

**\*In Search of Eve: Transsexual Rites of Passage** by Anne Bolin (ISBN 0-89789-115-5) \$19.00 [The case studies in Dr. Bolin's book were all people she met while she was associated with the GIC. Ed.]

**Transvestites and Transsexuals; Toward a Theory of Cross-Gender Behavior (Perspectives in Sexuality)** by R.F. Docter (ISBN 0-306-4278) \$65.50

**Transsexualism and Sex Reassignment** by Richard Green (ISBN 0-608-302643) (out of print-limited availability) \$242.50

**Transsexualism Medicine and Law: Proceedings: XXIIrd Colloquy on European Law, Vrije University of Amsterdam, Netherlands 14-16 April 1993** (out of print-limited availability)

**A Case Study of Public Categories and Private Identities** by Dave King (ISBN-185628-134-5)

**\*Transgender Nation** by Gordene MacKenzie (ISBN 0-87972-596-6)

**Miss Vera's Finishing School for Boys Who Want to Be Girls** by Vera Veronica (ISBN 0-385-48456-9)

**Physician's Guide to Transgender Medicine** by Sheila Kirk (ISBN 1-887796-03-7) (out of print-limited availability) \$42.50 [Instead, I would suggest **\*Feminizing Hormonal Therapy for the Transgendered** by Sheila Kirk \$19.95 Ed.]

**\*Medical, Legal and Workplace Issues for the Transsexual** by Sheila Kirk and Martine Rothblatt (ISBN 1-887796-00-2) \$20.95

**Gender Dyshoria: Development, Management and Research** by Betty W. Steiner (ISBN 0-306-41694-8) \$59.00

**Human Sex Change and Reversal: Transvestism and Transsexualism, Vol. 45** by David B. Carlisle (ISBN 0-7734-8495-5) \$109.95

That is about it for the moment, and I have only scratched the surface of the reading list that you sent us. When the psychiatrist here who screens all the books for pornography saw it, he laughed and said that there can't possibly be that many books on that particular subject. I replied, "Bet me."

I wish you and your and your loved ones a happy Valentine's Day. Hugs and blessings in sisterhood. Deanna

[By the next issue, I will try to have a more concise reading list of some of the more key works. Ed.]

## Jennifer Ann Bennet

Dear Sisters of GIC TIP,

I received your Winter 2001 edition of the *GIC TIP Journal*, and I really enjoyed the articles that were in it. I especially liked the article "Real Name vs Chosen Name" by Ed/Cynthia Lee Ann.

Let me start by saying my chosen name is Jennifer Ann Bennett, a name that was given to me by my husband. Personally, even though it might draw unwanted attention to me and the prison staff refuses to recognize it, it is still the name I mostly use.

I would like to thank Ms. Jessie and Ms. Israel for the wonderful job they are doing in providing this very helpful journal to all the sisters who are incarcerated. Their contributions to the gay, lesbian, bisexual and transgendered prisoners is greatly appreciated and will always be remembered.

The recommended reading list that was included in the Winter 2001 issue contained some books that I would like to order. These include the 13 volume set of *Ranma*

1/2 by Ramiko Takahashi and *Adults in Wonderland* by Grace Lau. I would like to know if I can get them through the GIC and how much they cost.

Donna mentioned a publication called "Interweave World" that I would also like to obtain.

[The books can be ordered directly from:

*The Book Garden*  
 2625 E. 12th Ave.  
 Denver, CO 80206  
 Phone: 800-279-2426

The price for each volume of the "Ramna" series is \$15.95 and for "Adults in Wonderland", it is \$29.95, neither of which covers shipping and handling. In lieu of that, I would suggest that you try to obtain them through your prison's inter-library loan program, if they have one, or you might try writing to one of the free prison book programs listed at the end of this article.

"Interweave World" is a publication of Interweave Continental, Inc., which is a membership organization affiliated with the Unitarian Universalist Association, dedicated to the spiritual, political, and social well-being of Unitarian Universalists who are confronting oppression as lesbians, gay men, bisexuals, transgender persons, and their heterosexual allies; and facilitates the celebration of the culture and lives of its members. Their mailing address is:

*Interweave*  
 167 Milk St. #406  
 Boston, MA 02109-4339

The free prison book programs are listed below. Ed.]

### Free Prison Book Programs

Locked Out/ Bound Together Books  
 1369 Haight Street  
 San Francisco, CA 94117

Blue Stocking Book Store  
 172 Allen Street  
 New York, NY 10002

Books Through Bars  
 PO Box 181  
 Bloomington, IN 47402

Lucy Parsons Center & Book Store  
 110 Arlington Street  
 Boston, MA 02116

### ALPHABETIZED BY STATE RESOURCE GUIDE (READ DOWN AND TO THE RIGHT)

Madison County Gender Center  
c/o Metropolitan Community Church  
3015 Sparkman Drive NW, Huntsville, AL  
35810  
205-851-6914

Alaska T People  
c/o Bobbie Wendy Tucey  
PO Box 670349,  
Chugiak, AK 99567

Southern Arizona Gender Alliance  
300 E Sixth St  
Tucson, AZ 85705  
(520) 624-1779

Center for Gay, Lesbian, Bisexual & Transgen-  
dered Community  
3909 Centre Street  
San Diego, CA 92103  
619-692-2077

Gender Identity Center of Colorado, Inc.  
1455 Ammons St., Suite 100 Lakewood, CO  
80215-4993  
303-202-6646

Connecticut Outreach Society  
PO Box 163  
Farmington, CT 06034 USA

Renaissance, Delaware Chapter  
PO Box 5656  
Wilmington, DE 19808  
302-376-1990

TADD (TGs Against Discrimination in the Dis-  
trict)  
co/HCC, 813L. Street, SE  
Washington, DC 20003  
202-543-6777

Tampa Bay Gender Alliance  
3708 Swann Ave  
Tampa, FL 33629  
813-985-3371

AGE  
PO Box 160003  
Atlanta, GA 30316  
770-439-9769

Hawaii Transgendered Outreach  
PO Box 8233  
Honolulu, HI 96830  
808-923-4270

Tri-States Transgender Group  
PO Box 6691  
Boise, ID 83707  
208-368-8669

Central Illinois Gender Assoc (CIGA)  
P.O. Box 3082  
Champaign, IL 60826-3082

International Gender Support  
c/o Linda BB  
PO Box 425 PO  
Carmel, IN 46032  
317-299-5377

QCAD Group  
PO Box 1534  
Davenport, IA 52809  
319-323-5492

KCCAF (Kansas City Crossdressers & Friends)  
PO Box 4092  
Overland Park, KS 66204  
913-791-3847

BGB Transgender Support  
PO Box 20173  
Louisville, Ky 40250  
502-346-5298

Gulf Gender Alliance  
PO Box 56836  
New Orleans, LA 70156-6836  
(504) 943-1999

Outreach Institute of Gender Studies  
405 Western Ave., #345  
So. Portland, ME 04330  
207-775-0858

Free State Justice  
PO Box 13221  
Baltimore, MD 21203  
(301) 819-1111

International Foundation for Gender Education  
PO Box 540229  
Waltham, MA 02454-0229  
781-899-2212

Crossroads  
PO Box 1245  
Royal Oak, MI 48068-1245  
313-537-3267

Gender Education Center  
PO Box 1861  
Maple Grove, MN 55311  
612-424-5445

Southern Belle Society  
PO Box 3112  
Gulfport, MS 39505

St. Louis Gender Foundation  
PO Box 9433  
St. Louis, MO 63117  
314-367-4128

Western Montana GLBT Community Center  
615 Oak ST  
Missoula, MT 59801  
406-543-2224

River City Gender Alliance  
PO Box 8076  
Omaha, NE 68108  
402-991-8845

Transgender Supportand Advocacy, Nevada  
1120 Almond Tree Lane, Suite 207  
Las Vegas, NV 89108  
(702) 392-2132

Tri-Ess New England  
PO Box 7681  
Nashau, NH 03060-7681

Monmouth Ocean Transgender  
PO Box 394  
Red Bank, NJ 07701  
(732) 219-9094

Transgender Community Group  
Meets at the University of New Mexico  
Albuquerque, NM  
(505) 342-8077

Gender Identity Project at the Lesbian & Gay  
Community Services Center  
One Little West 12th Street  
New York, NY 10014  
212-620-7310

Phoenix Transgender Support  
PO Box 18332  
Asheville, NC 28814  
828-669-3889

It's Time Ohio!  
PO Box 21310  
Columbus, OH 43221  
614-470-4245

Gender Outreach of Oklahoma  
2114 S Memorial Dr  
Tulsa, OK

Northwest Gender Alliance  
PO Box 4928  
Portland, OR 97208  
503-646-2802

Transgender Health Action Coalition (THAC)  
Washington West, 1201 Locust St.  
Philadelphia, PA 19103  
215-732-1207

Charleston Area Transgender Support  
Coastal SC  
Charleston, SC  
cats@tgforum.com

Tennessee Vals  
PO Box 92335  
Nashville, TN 37209  
615-664-6883

Texas Assoc. for Transsexual Support  
(T.A.T.S.)  
PO Box 142  
Bellaire, TX 77401  
281-437-2975

An Engendered Species  
PO box 11897  
Salt Lake City, UT 84147  
801-364-0136

Transgender Education Association  
PO Box 16036  
Arlington, VA 22215  
301-949-3822

Emerald City  
PO Box 31318  
Seattle, WA 98103  
425-827-9494

The Valley Girls  
P.O.Box 181  
Dunbar, WV 25064-0181  
lucas5437@newwave.net

Gemini Gender Group  
P.O.Box 44211  
Milwaukee, WI 53214  
414-297-9328

#### National

GenderPAC  
1743 Connecticut Ave.  
4th Floor  
Washington, DC 20009  
(202) 462-6610

NTAC  
1452 Culver Dr.,  
#904  
Irvine, CA 92604  
info@ntac.org