

***Psychological Perspectives and
Development of the Transsexual Woman:
A Phenomenological Case Study on Male to
Female Filipino Transsexuals***

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Major in Clinical Psychology

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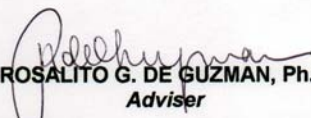
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**PSYCHOLOGICAL PERSPECTIVES AND DEVELOPMENT
OF THE TRANSEXUAL WOMAN: PHENOMENOLOGICAL
CASE STUDY ON MALE TO FEMALE FILIPINO
TRANSEXUALS**

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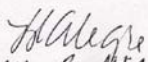
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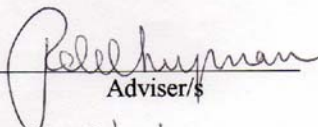
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I dedicate this study to all brave and beautiful transsexuals who lost their lives due to hate crimes and violence, because they live in a society that deprived them of one important basic right – to live!

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Title: *Psychological Perspectives and Development of the Transsexual Woman: A Phenomenological Case Study on Male to Female Filipino Transsexuals*

ABSTRACT

Gender is not always congruent to one's sex. Transsexualism (sometimes used interchangeably with transgenderism) proves this. A person born male will not necessarily grow up to be male. Transsexuals are people born of an assigned biological sex but identifies with the opposite sex in terms of gender. Transsexuals are erroneously identified as homosexuals in the Philippines. The purpose of this study was to investigate transsexualism, to establish the socio-demographic profile and quality of life of the respondents and to understand the manifestations and development of transsexualism utilizing the case study method. The study entailed using the in depth semi standardized interview method as well as testing and participant observation. For this study, 15 respondents were selected using purposive sampling procedures. 5 of the respondents are post operated transsexuals (had undergone sex reassignment surgery/ SRS) and 10 are non-operated and pre-operated (no SRS). The ages of the respondents ranged from 21 – 40 years old with a mean age of 27.53. Five tests were used in the study; (1.) The "Bem Sex Role Inventory (2.) S.A.G.E. (3) the DAPT (Machover) (4) Raven's SPM and the (5) Mini Mental State Exam.

All respondents exhibited healthy neurological state as well as superior intelligence in the MMSE and RSPM respectively. All 15 respondents scored high on the femininity scale and low on masculinity in the BSRI. They scored high in the transsexual scale in S.A.G.E.. All respondents drew female figures first and each drawing indicated female identification and femininity. The DAPT interpretation revealed conflicts among the respondents such as withdrawal, anxiety, aggression, fear and feelings of inadequacy among others. Descriptively, the respondents though all born male, exhibited high femininity and female identification and low or no male identification.

The mean age of earliest onset of female identification was 9.13 (thinking, dressing and naming as female). All are under hormonal replacement therapy although none (HRT) is medically supervised. All reported and showed marked feminization as after effects of HRT. All incorporated femaleness in their manner of speaking, thinking, movement and presentation. All accorded high importance to family and interpersonal relationships although all reported internalized discrimination. Two of the respondents are bisexuals while the rest are in heterosexual relationships.

To conclude, all 15 respondents identified themselves as women in manners of thinking, dressing and naming. They have taken various steps towards femaling such as HRT, FFS, voice pitch changes, behavior modification and even SRS. Conflicts projected among the respondents most likely are attributable to the experiences of discrimination or the uneasy processes of transitioning.

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Chapter 1. INTRODUCTION***1.1. BACKGROUND OF THE STUDY***

Gender is a complex social phenomenon. Gender is a multifaceted construct, a complex phenomenon viewed differently in different societies. In Western society, traditional views of gender enforce a female or male role, causing many to repress characteristics associated with the opposite gender. Some societies, however, allow individuals to discover and express opposite gender identity and behaviors. Stereotypes have also been warranted on men who behave like women as being “sissy” or effeminate and women who behave like men as being masculine or “tomboyish.” This study is about women, special and unique – the transsexual woman.

The term 'transsexual' was coined by Cauldwell in 1949. Transsexualism, transgenderism and transvestism are relatively new concepts here in the Philippines. Filipinos are commonly familiar with homosexuality and all its nuances, unfortunately nowhere in this familiarity is a clear understanding of transsexualism. There are cross-gender practices and sub-cultures prevalent only in certain countries/cultures like the Travesti of Brazil, the Berdache of North America, the Kathoey of Thailand and the Hijras of India. Even in the

Philippines, cross-gender practices are seen among the “Bantuts” (Johnson, 1988).

“What is transsexulaism? What is its difference from transvestism and from homosexuality?” This puzzlement brought an opportunity for the researcher the chance to recall a movie about a famous case of transsexualism-“Second Serve: The Renee Richards story.” Renee Richards was born Richard Raskind, an eye-specialist and tennis player by day and a cross-dresser by night. In the retelling of her story in the movie it was revealed that Raskind started out as a cross-dresser who maintains a relationship with a woman. The trials of her transitioning from a cross dresser to a transsexual became the central piece of the movie. Raskind claimed that she feels like a woman trapped in the physical anatomy of a man. She was diagnosed as a transsexual but many years after living as a woman, Raskind was all over the news explaining how troubled she felt with her eventual transition. Recalling this film inspired the author to one day search for answers about transsexualism.

There seem to be a natural attitude toward gender which assumes that all human beings will belong to one of two discrete gender categories permanently determined on the basis of biological (‘naturally’ given) characteristics (Garfinkel, 1967: Kessler and McKenna, 1978 : Kelly, 2000). Gender and sex are then different and not interchangeable concepts. The former is more of a social construct while the latter is more of a biological construct. In media, homosexuals

and transgenders are portrayed as though they are inverts to normalcy or deviancy to commonness. Homosexuals and transgenders are portrayed and described as being capable of reverting if there is a gender to revert to, or of inverting back. It has been perceived that homosexuals and transgenders have an illness that can be cured. Even the procedure of sexual reassignment surgery (SRS) was initially viewed as a treatment to an illness.

1.2. Statement of the Problem:

- The primary goal of this study is to answer this question:

What is transsexualism?

In the course of determining this, it is expected to understand the following problems:

1. What is the socio-demographic profile of the transsexual respondents of the study in terms of age, birth (place and ordinal position), height and weight, education, occupation and religion and ideological beliefs?

2. How is transsexualism manifested and experienced (medical and psychological views)?

2.1. How is transsexualism manifested through thinking?

2.2. How is transsexualism manifested through dressing?

2.3. How is transsexualism manifested through name assumption?

2.4. How is transsexualism medically monitored and managed?

2.5. What is HRT? How is HRT managed and what are the after effects?

2.6. What is FFS and SRS? Which among the respondents have undergone FFS and SRS?

3. The quality of life of transsexuals:

3.1. What is the quality of life of transsexuals?

3.2. What are the respondents' sexual orientation and relational demographics?

3.3. What is the difference of transsexualism from other culturally based cross gender expressions such as the Hijras of India, the Travestis of Brazil, the Berdaches of North America and the Bantuts of Southern Philippines?

4. What are the similarities and differences of the fifteen respondents as manifested in the tests conducted?

4.1. Raven's Standard Progressive Matrices and Mini Mental State Exam

4.2. Mini Mental State Exam

4.3. Draw a Person Test (Machover interpretation)

4.4. Bem Sex Role Inventory (BSRI)

4.5. Sex and Gender Explorer (S.A.G.E.)

The author will utilize the phenomenological approach in the case study method wherein life-history, testing and participant- observation become essential in gaining all the necessary information that constitutes in the identification of transsexualism in the person. It is also a goal to understand the development of transsexualism by understanding early life experiences and influences that may

have or not been instrumental in the current gender state of the person. It is also the objective of the researcher to gain understanding and provide explanation on the health concerns of transsexuals as well as explain in understandable terminologies the procedures designed for transitioning from male to female.

1.3. Significance of the study:

This study will ***primarily benefit society*** in understanding a segment which is not understood and commonly misrepresented. It is not just specific behaviors of transsexuals that illustrate the social construction of gender. The existence of transsexualism, itself, as a valid diagnostic category underscores the rules society has for constructing gender (Kessler & McKenna, 2000). It was once argued that transsexualism is not an individual condition, a personal problem for which changing sex is merely a neutral technical method of treatment, but instead it is a social and political phenomenon (Raymond, 1980; Kelly, 1998). The author has observed that Filipinos regard issues and concerns of homosexuals and transgenders as one and the same since they perceive both as one and the same. If the differences between the two are determined, society can better accord the necessary recognition of needs specific to transsexuals. The life histories of the respondents in this case study will illustrate the developmental pattern shared or unique to the group.

The *field of education*, by appropriately being able to provide educational placement according to the gender preference of the students, would be able to address specific needs of the transgender students. Most of the educational programs are designed to suit the specific needs of male or female students overlooking if the students are transgendered or homosexuals. Through this study, it is hoped for that when providing lectures on sexuality and health, transgenderism as a concept will be introduced and explained. It is also hoped for that counseling services can now genuinely provide equal services to all kinds of students including transgenders. A transgender student may not be fully aware of his or her options for college and embarking in a professional career, through this study, it is hoped that, these students will be made aware of their professional and educational options. It is also hoped that school organizations will accommodate transgender students and prepare activities for them.

In the *field of social work*, the benefit from this study is in providing for appropriate counseling and placement for transsexuals. Transsexuals can be victims of violence and hate crimes due to transphobia and homophobia. Health and counseling professionals need to genuinely and clearly understand the consequences that maligned transsexuals experience. If a transsexual is raped or is molested, how will they be cared for? Will their needs be any similar as with women? There are also transgenders who because of limited career opportunities

grow old jobless and unable to provide for themselves. It is hoped that through this study, the social work field would be able to create opportunities to create options and opportunities for them and provide counseling as needed. Transgenders can also be victims of traumatic events such as natural calamities or crimes, it is therefore hoped that through this study, a compassionate approach can be accorded to these transsexual victims.

The *health sciences* will greatly benefit as well in providing medical assistance and boosting medical research that will address specific needs of transsexuals. The study of transsexualism has its roots from the medical standpoint since it is described in the DSM and the ICD. Therefore, as a medical condition, it is hoped that through this study, appropriate management is created for transsexuals. Specifically, transsexuals can consult endocrinologists for proper HRT management, psychiatrists for diagnosis and surgeons for FFS and SRS. It is hoped that there will be clearer studies in the future that can address the health needs of transsexuals such as healthy HRT management procedures and prescribed SRS procedures. It is hoped that in the future, transsexuals can be cared for by the appropriate medical specialists whether is it more appropriately feminine or masculine. It is hoped that clear cut researches showing the beneficial and detrimental effects of medicines taken by transsexuals can be ascertained. Through this study it is also hoped that the health sciences can resolve the

ongoing issue whether to allow dispensing over the counter HRT or have it managed.

This study will also benefit the *field of Psychology* in this country as the concept of transsexualism is dissected and presented. Through this study, it is hoped that a Feminist Psychology can also address the needs and explain the development of transsexuals. If old and classic theories on gender and sexual developmental stages limited itself to studies on biologically designated males and females, through this study, transsexual males and females will now be included from all surrounding perspectives.

This study wishes to benefit the *government and the law making bodies* in the country to create gender fair and compassionate laws and provisions for all especially the transsexuals that their rights will be protected and their needs addressed.

Most importantly, it is hoped for that *Philippine society*, through this study, will gain an understanding of transsexualism and learn to accept and love people who are transsexuals

1.4. Theoretical framework

According to Freud (1933), males and females are born essentially undifferentiated and the structure of the human psyche and human personalities are not sex differentiated at birth. Freud went on to postulate that anatomy was the primary factor that determined the formation of very different mental processes and social behaviors for females and males which today is referred to as gender roles. Gender roles are organized patterns of behavior that we follow based on our interpretations of the significance of biological sex (Bartholomew, 2003). According to Freud masculine meant active and feminine meant passive. Freud further proposed that man has pansexual, bisexual and homosexual nature and that the movement towards heterosexuality is determined after overcoming the complexes of cathartic psychosexual stage of development.

Carl Jung on the other hand proposed the “anima” and the “animus”. The Anima is the personification of all feminine psychological tendencies within a man, the archetypal feminine symbolism within a man's unconscious. The Animus is the personification of all masculine psychological tendencies within a woman, the archetypal masculine symbolism within a woman's unconscious. The anima and animus draw their power especially from the collective unconscious, but they are also conditioned by a person's individual experiences. They therefore have three components:

- an innate, unconscious "predisposition for imaging contra sexually (Wehr, 1964)—the feminine/masculine archetypes
- images and symbols of femininity/masculinity culturally transmitted through mythology, art, fairy tales, religions, etc. (themselves heavily influenced by the archetypes)
- personal experiences of the opposite sex

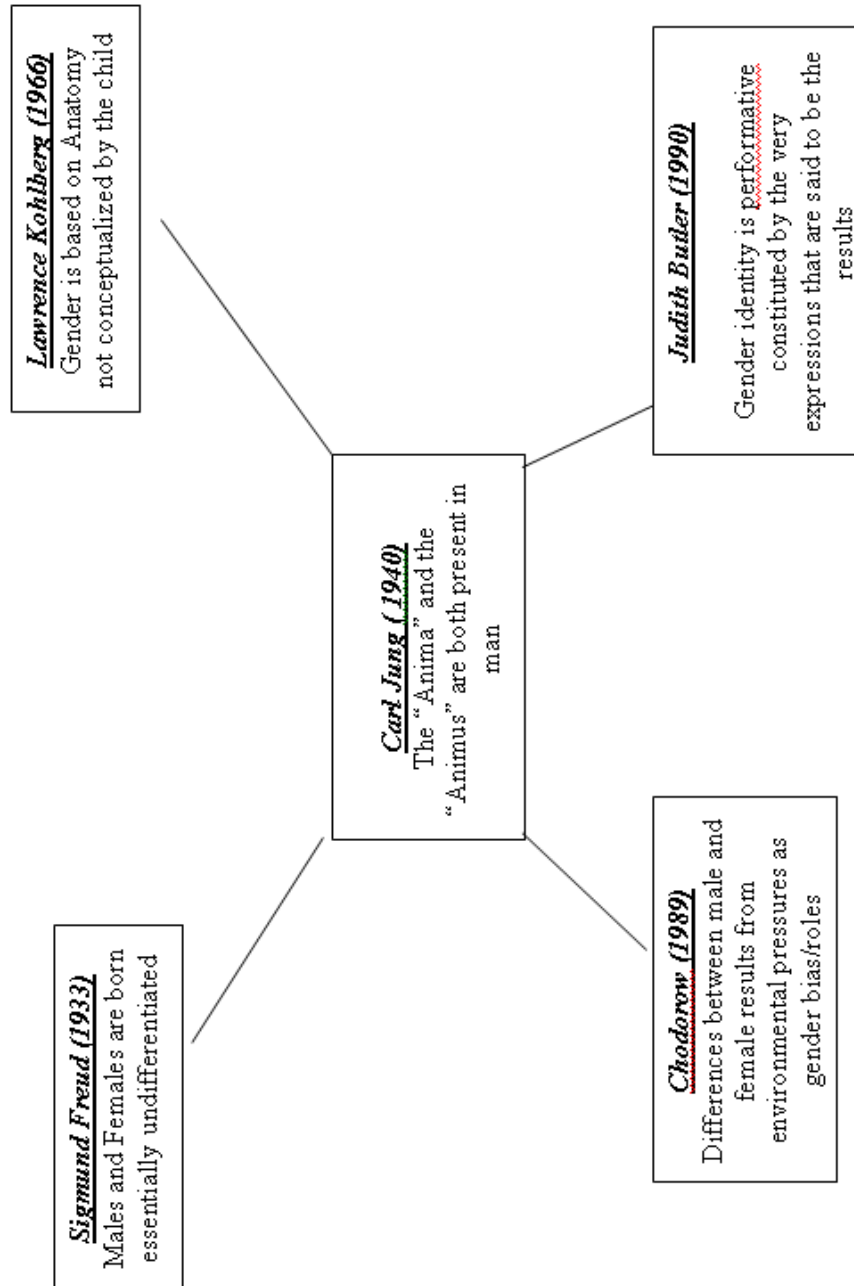
Social learning was developed as a separate perspective to explain gender roles and gender identification. Walter Mischel postulated that gender-typed behavior was learned just like any other type of learned behaviors and that this behavior is either discouraged reinforced. This begins as early as in the toddler years wherein children will distinguish between “girl” and “boy” behavior and attach gender to behavior and themselves (Batholomew, 2003). This is sometimes referred to as differential socialization. There is also Abraham Maslow’s self actualization. Man strives for actualization through stages and each stage has to be satisfied and completed in order to reach the final stage which is actualization. Does this mean that a transsexual’s transit stages also represent actualization? It is possible.

Another concept that can be considered would be Kohlberg’s Developmental stages. Kohlberg (1966) believed that a construction of gender was based on anatomy and was not conceptualized by a child until that child mastered the conservation principle. Later on when the concept of conservation is developed, a child knows what his/her gender is and moves towards the actualization of the chosen gender. This marks the beginning of gender identity (Kohlberg, 1966).

There exist scholarly feminist theories that proposed that personality differences between males and females result from environmental pressures such as gender bias and the very existence of gender roles (Chodorow, 1989).

Later studies proved to give a more positive outlook and explanation on the evolution of gender like that of Judith Butler who prefers to see gender as relation among socially constituted respondents in specifiable contexts. She went on to say that "...there is no gender identity behind the expressions of gender...identity is performative constituted by the very expressions that are said to be results" (1990; Bartholomew, 1989).

This study drew a lot as well from earlier researches made by Anne Bolin, Sam Winter and Milton Diamond as well as the personal accounts of post operated transsexuals Lynn Conway and Calpernia Adams. Please see figure 1 on p 12 for the Theoretical Framework diagram.

**Figure 1: Theoretical Framework**

1.5. Conceptual framework

How can transsexualism be demystified? The transsexual respondents in this study have the following socio- demographic factors identified to make up their personal profile: age, birthplace, height and weight, ordinal position in family, education, current occupation and religion and ideological beliefs.

To gain an understanding of the developmental processes involved, the case life history using the in depth semi standardized interview method was used. This will also show the origins of the manifestation of transsexualism in the individual and the nuances expressed in each manifestations. The experiences of each transsexual respondent will also be revealed through the life history in order to reveal similarities and differences in the development of the transsexual experience.

To further verify these expressions and manifestations, the participant observation method was used.

Finally, to gain deeper quantifiable insights of the group, 5 instruments were used: these would be the Raven's SPM and the Mini Mental State exam; The DAPT (using the scoring system of Karen Machover); The Bem Sex role Inventory (Sandra Bem); The Sex and Gender Explorer or SAGE (an online java scripted questionnaire primarily used on transgenders). Refer to figure 2 for Conceptual Framework diagram (page 14). With such a focus, the study hopes to demystify the concept of transsexualism.

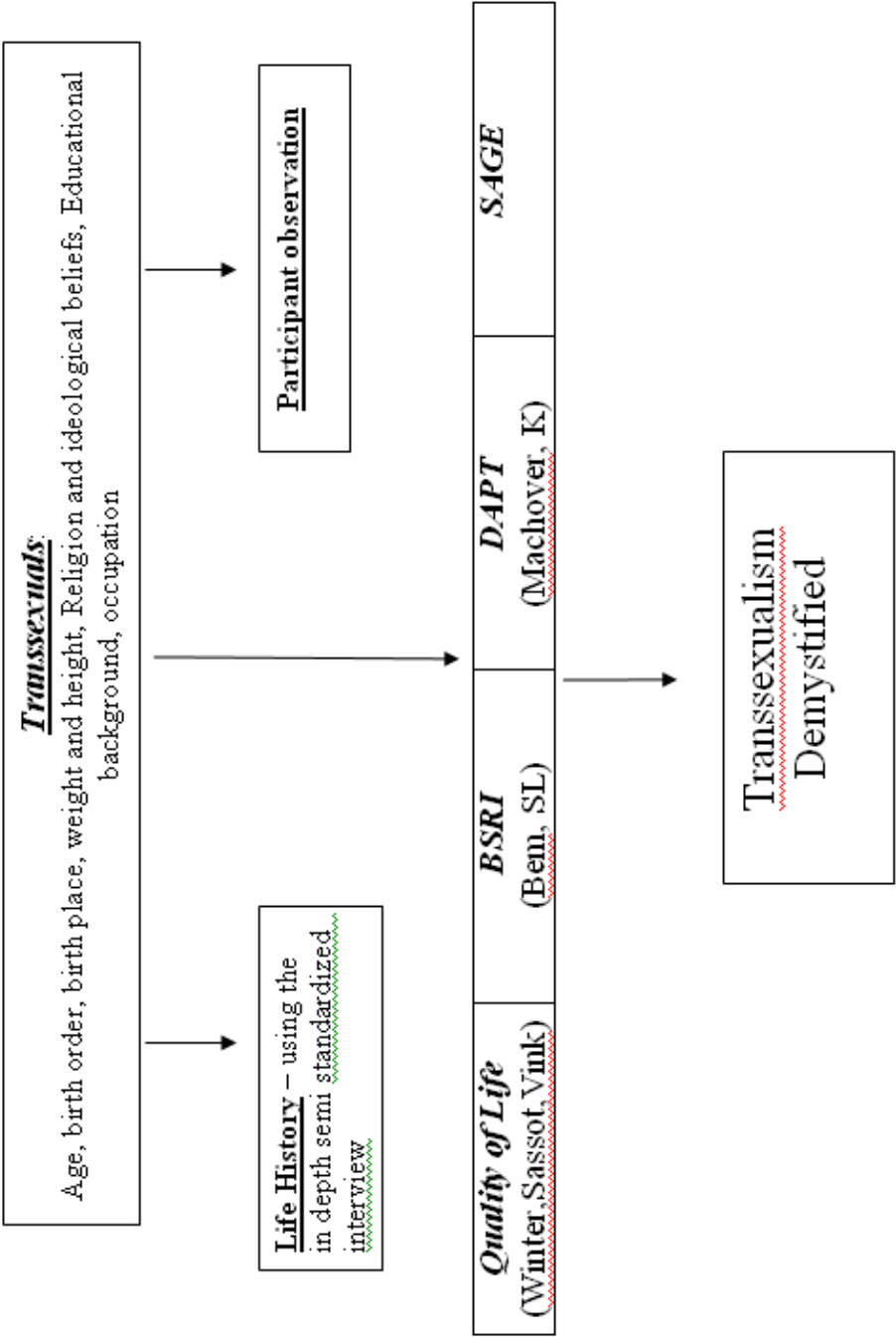


Figure 2: Conceptual Framework

1.5. SCOPE AND LIMITATIONS:

The research is primarily confined to the study of transsexualism and the expressions of transsexualism among the respondents of the study by the use of the case study method. In this study, 15 respondents who identify themselves as transsexuals provide their life histories and answer the questions posed for this research. They were purposely chosen to represent a sample population who are identified as true transsexuals by using the guidelines set in the DSM-IVTR and ICD- 10. The respondents selected were all college graduates of at least twenty one years of age. The case study method limits itself to life-histories, self-concepts, role- identification and projected future of the respondents. The tests used were those designed to measure gender identification and femininity. However there are few standardized tests that meet this criterion and they are not locally available. The available tests that are most appropriate for the purpose of this study are the DAPT and BEM Sex Role Inventory (BSRI). Since the BSRI was utilized to provide a descriptive protocol on the respondents' sex role identification, it will only be indicated if the respondents obtained scores which are objectively low and/ or high in femininity and/ or masculinity. There are tests designed to measure transsexualism as well but were only available on the internet (SAGE) however the psychometric properties and standardization procedures of this test is not available and therefore the results of this test alone

cannot be considered in itself reliable or valid to measure transsexualism. The intelligence and the mental status of the respondents were measured using the Raven's Standard Progressive Matrices and Mini Mental Status exam respectively. The researcher also visited a few establishments that accommodate freely and respectfully transgenders as their primary entertainers (The Amazing Philippine Theater, Club Mwah! among others). The researcher also attended support group meetings of STRAP, a newly establish advocacy group of transsexual women.

1.6. Definition of terms

Apart from the tradition of research to provide for the definition of terms that will be used operationally and conceptually in the research, it is important to define terminologies used in this research:

Terminologies:

'BINABAE': argued by some experts to be the closest translation to transsexual. Though it is interchangeably used along with "bakla".

'PA-GIRL': a vernacular expression for males who are very effeminate or feminine and may also be used to refer to cross-gendering gays.

'BEAUCON' (beauty contests): to refer to beauty competitions joined in by transsexuals, transgenders and homosexuals.

ANDROGYNE/ ANDROGYNOUS: person identifying as neither man nor woman, presenting a gender either mixed or neutral.

BISEXUAL: a sexual preference or orientation wherein the person experiences attraction, intimacy and desires for both genders.

HOMOPHOBIA: the alternate sense of an intense aversion to, or disapproval of, homosexuals and/or homosexuality, bordering on the irrational. It simply means being avoidant of gays for intimate relations, friendships, working relationships etc.

INTERSEX: persons who were born with mixed sexual physiology. Often ‘assigned’ at birth but may not necessarily be the actual sex of the person. Intersex is an umbrella terminology and includes under it all other medical and clinical conditions wherein anatomical characteristics of male and females are present.

LGBTQ / lesbians, gay, bisexual, transgender, queer: either an actual organization or a collective acronym for the community of homosexual, bisexual, transgendered and transsexual men and women.

NONOPERATED TRANSSEXUAL/ NONOP: transsexuals who at the point being has not decided to fully transition (HRT/FFS/SRS or may have gone through HRT and /or FFS but not SRS) but recognized themselves and identified themselves as women.

PILLS/ “PILAR”: Pilar is ‘gay lingo’ or ‘sward speak’ for HRT pills. “Tuscha” is sward speak or ‘gay lingo’ for intramuscularly administered HRT.

POSTOPERATIVE TRANSSEXUAL/ POSTOP: transsexuals who have already undergone SRS and almost completed transitioning.

PREOPERATIVE TRANSSEXUAL/ PREOP: transsexuals who desire to fully transition but has not undergone SRS and /or FFS.

SEXUAL ORIENTATION / Preference: is which sex a person finds erotically or romantically attracted to. This means that a person can be attracted to someone of the

same sex (homo): of the opposite sex (hetero) or of both (bi-).

SHE: the pronoun used to refer to all the respondents in the study and all other self identified transsexuals.

TRANNY/TRANNIES: a popular connotation or references to transsexuals and transgenders. It is more of a pop culture nickname for transgenders.

TRANSPHOBIA: (by analogy with homophobia) refers to various kinds of “phobic” attitudes towards transsexual and transgender people.

Chapter 2. REVIEW OF RELATED LITERATURE:

This section will provide discussion on the following:

2.1. *Gender identity Disorder (GID)***2.1.1. Transsexuality****2.1.1.1. Femininity****2.1.1.2. Transitioning or Femaling****2.1.1.3. Hormonal Management (HRT)****2.1.1.4. Facial Feminization Surgery****2.1.1.5. Transsexual Surgery (SRS – Sexual Reassignment Surgery)****2.1.1.6. Postoperative Concerns of the Transsexual woman****2.2. *Transvestism / Transvestic Fetishism / Cross Dressing*****2.2.1. Drag Queen / Female Impersonator****2.3. *Homosexuality.*****2.3.1. Homophobia and Transphobia****2.4. *Culturally Bound Cross Gender Expressions*****2.4.1. Bantuts of Southern Philippines****2.4.2. Hijras of India****2.4.3. Travestis of South America****2.4.4. Berdaches of Northern America**

The discussion and the researches provided herewith begin with Gender Identity Disorders since transsexualism is a condition described as such. Under Gender Identity Disorder, transsexuality will be discussed along with the experiences and development of expressions such as femininity, transitioning or femaling experiences etc. Thereafter, other cross-gendering

expressions will be discussed such as transvestism and cross dressing, drag queen and female impersonator. Thereafter, homosexuality is discussed since homosexuality and transsexualism are concepts commonly interchanged by most. Finally, other cross gendering behaviors which are culturally bound is discussed such as the Hijras, Travestis, Bantuts and the Berdaches.

2.1. *Gender identity Disorder (GID)*

The major literature source for transsexualism, transvestism and transgenderism is The Diagnostic and Statistical Manual of Mental Disorders Fourth edition Text Revised and The ICD – 10. The Diagnostic Statistical Manual – IV-TR provides for the clinical features of Transsexualism and Intersexism under the Gender Identity Disorders and Transvestistic Fetishism under the Paraphilias section. When homosexuality was removed from the American Psychiatric Association's (APA) Diagnostic and Statistical Manual of Mental Disorders (DSM) [voted upon 1973, DSM III published in 1980], a new classification was created: "Gender Identity Disorder" [GID] (APA).

The psychological sense of maleness and femaleness of a person is reflected in his gender identity (Kaplan and Saddock, 2004). The anatomical and physiological constitution of a person only dictates one part of his/her maleness or femaleness the rest is the resulting influence of society, culture, media, ideology and family upbringing. However, regardless of the combined

influences of all factors mentioned the end resultant of gender identity is still bound to change. There is continuity in gender; it is also takes a lifetime for it to express change and stability. Kaplan and Saddock continue to explain that while there is flexibility in masculinity and femininity culture dictates men and women to have the sense of maleness or femaleness that reflects their anatomical sex. There is still no absolute or exact proof on when cross-gender interests manifests itself, the closest is about ages 2- 4 years (Benjamin, 1966). In fact a 5 year old African- American boy confidently professed that he should be a girl in an episode of the very popular American daytime talk show The Oprah Winfrey Show (Harpo Productions). Only a very small number of children diagnosed with Gender Identity Disorder will continue to have symptoms that meet the criteria in later adolescence and even adulthood (Bruce, 1967). The emphasis on the diagnosis is placed upon the strong and persistent cross-gender identification, which is the desire to be, or insistence that one is of the other sex and that furthermore, there is evident discomfort about one's assigned sex or a sense of inappropriateness in the gender role of that sex. Just like the little boy who was a guest in The Oprah Winfrey Show, he identifies with what girls do like urinating in a seated posture, crossing the legs, playing with dolls and wanting to put on make-up. If the child or person is stopped or restrained from this expression, they feel stressed and discomfort. This affective component of Gender Identity Disorder is what is referred to as Gender Dysphoria. This affective

state is made clear by Dr. Harry Benjamin. The Harry Benjamin International Gender Dysphoria Association, Inc. (HBIGDA) is a professional organization devoted to the understanding and treatment of gender identity disorders.

The presence of dysphoria in the individual is what is overlooked by many general practitioners throughout the years. Practitioners should understand that there should be a felt stress and discomfort that leads to underperformance and poor functioning in social, educational and personal roles. The dictionary definition of dysphoria is actually very straightforward - a state of feeling unwell or unhappy (bipolar.about.com, 2005). A person with gender dysphoria experiences anxiety, uncertainty or persistently uncomfortable feelings about their birth gender. They feel that they have a gender identity that is different from their anatomical sex. This may lead to a fear of expressing their feelings and a fear of rejection, which may lead to deep anxiety, leading to chronic depression and possibly attempted suicide. Positive publicity has meant that many more people feel that they can now express their transsexual feelings (nhsdirect.com, 2005). The experience of Gender Dysphoria is increasingly understood in scientific and medical disciplines as having a biological origin. The current medical viewpoint, based on the most up-to-date scientific research, is that Gender Dysphoria, which in its extreme manifestation is known as transsexualism, is strongly associated with a neuro-developmental condition of the brain. Areas of the brain are known

to be distinctly different between 'males' and 'females' in the population generally (the cortical areas motor and parietal) (Diamond, 2003) (American Psychological Society, 1998). In those experiencing severe Gender Dysphoria, one of these areas has been shown to become sex-reversed in early development and is, therefore, incongruent with the other sex characteristics. Sex differentiation of the brain is imperfectly understood, but it is believed to be associated with hormones impacting on the developing brain in an atypical way. Gender Dysphoria, whilst it may be associated with a great deal of stress, is not caused by psychopathology or mental illness, rather, it may be understood to be a normal response to the incongruence, experienced by the individual between, on one hand, the gender identity, and on the other hand, the visible sex characteristics and the gender role effectively assigned in accordance with those sex characteristics. The condition cannot be overcome by psychological or psychiatric treatments alone although, where the predisposition for transsexualism exists; psycho-social factors may play a role in the outcome. For many, however, 'transition' to living in the gender role dictated by the brain may be the only way forward if they are to avoid a life of psychological torment. This will often be assisted by treatment to achieve physical re-alignment of the sex characteristics, involving hormone therapy and corrective surgery. Transition marks the change in social status from male to female or female to male but the process does not change the gender identity of the individuals concerned, rather, it confirms their core gender identity by bringing their sexual appearance and their gender role

more closely into line with it. Research indicates that this treatment is highly successful (gires.org, 2004). Gender dysphoria generally only happens to those on the extreme end of the transgender spectrum, in other words, the transsexuals. It is good to know that there are few that have to go through gender dysphoria, but unfortunately, almost all transsexuals go through it in some fashion. Each person is different and experiences it in her own way. It may not be as severe for one person as compared to another. Either way, it is very hard to deal with. It is the driving force to find a resolution to the gender identity and genetic sex conflict. It can be described as a strong emotional pain that sometimes extends to the physical. It is a sense that you aren't who you are supposed to be, and will never be who you are (Translife.net, 2004).

2.1.1. Transsexuality

Culture partly dictates the role expectation that later defines what is masculine and what is feminine. Transsexualism is placed under the Gender Identity Disorder IV-TR and ICD-10. It was used to describe severe gender identity disorder in adults. Looking at all possible perspectives available, transsexualism can be understood using medical models, clinical model, socio-political models and socio-cultural models.

Transsexuals raise a larger issue, in an era of wholesale efforts to relax rigid sex roles and give men and women more freedom to behave in ways that have

traditionally been labeled “masculine” and “feminine.” For by their insistence on surgery- which gives them the form if not always the function of the sexual apparatus they desire- transsexuals seem to reassert the primacy of genital forms in defining sex and gender (Restak, 1979- as taken from the author’s resource Case Studies in Abnormal Psychology).

Transsexualism is a condition in which a person experiences a discontinuity between their assigned sex and what they feel their core gender is. For example, a person who was identified as "female" at birth, raised as a girl, and has lived being perceived by others as a woman, may feel that their core sense of who they are is a closer fit with "male" or "man." If this sense is strong and persistent, this person may decide to take steps to ensure that others perceive them as a man. In other words, they may decide to transition to living as the sex that more closely matches their internal gender. The term transsexualism was introduced by Cauldwell in 1949 and became famous with the writings and researches of Dr. Harry Benjamin in the 1950s. The world paid attention when the media and press sensationalized the transsexual transition of Christine Jorgensen who later became a media icon herself. Other very famous and sensationalized cases were those of Renee Richards (formerly Richard Raskind) and Roberta Cowell (formerly Robert). There are variances like the preoperative or preoperated transsexual, who is a transsexual but has not gone through sexual reassignment surgery. ‘She’ may have undergone HRT (hormonal replacement therapy) and/or FFS (facial

feminization surgery). Many years ago Thai society considered transsexualism, which is commonly known as Kathoey (a word originally used to denote hermaphrodites), Sao Prapet Song or Tut (as in 'Tootsie') as low class citizens, dirty dressing and had to hide in a dark corner selling their services as prostitutes (Chokrungravanont & Tiewtranon, 2004). Sex reassignment surgery has been taught in Chulalongkorn University Hospital since 1983. (At present, it is the only medical school in Thailand that has sex reassignment surgery systematically taught and with good results). Today transsexual operations are performed in different countries like the USA, UK, Sweden, Denmark, Japan, Thailand and even here in the Philippines. Many Filipino transsexuals earn a living as entertainers (dancers, singers, hosts, actors) in Japan. The others are beauticians and fashion designers, professions popularly associated with gays. Nowadays, transsexuals need not go far when attempting to work as entertainers; they can now be seen in The Amazing Philippine Theater and Club Mwah.

The term transsexual first appeared in the DSM-III (APA, 1980) listed under Gender Identity Disorders. How common is transsexualism? The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), Fourth edition, says the following (© 1994, American Psychiatric Assoc.):

Prevalence:

There are no recent epidemiological studies to provide data on prevalence of Gender Identity Disorder. Data from smaller countries in Europe with access to total population statistics and referrals suggest that roughly 1 per 30,000 adult

males and 1 per 100,000 adult females seek sex-reassignment surgery. Because these numbers reflect only people who have sought traditional medical treatment, they do not reflect the total numbers of people who have some experience of gender discontinuity. It will be impossible to determine by doing any headcount an accurate or nearly accurate number of transsexuals in the Philippines or any country for that matter. Some reason why this is so are:

1. The Stealth transsexuals will be so unrecognizable and may be unwilling to reveal themselves as such to protect themselves and remain identified as women.
2. There are transvestites (cross-dressers/ drag queens) who might identify themselves as transsexuals at the moment but in fact they realize later that they are not. In some instances they are referred to as pseudo transsexuals.

There are also homosexuals who present themselves initially as transsexuals and feel that they are women or are like women but this is a subjective interpretation of their sexual orientation. Research show that transsexuals are not the only people who seek sexual reassignment surgery. A study conducted at and by the Johns Hopkins University Sexual Behaviors Consultation Unit showed that there are a number of subtypes among those individuals seeking sex change surgery that may not necessarily be true transsexuals (Meyer, 1974). Among those subtypes that came about in the study were delusional patients who happen to be

self-stigmatized homosexuals who wish to punish themselves through self-mutilation, confirmed schizoid and psychotic individuals and sadomasochists who derive sexual pleasure from inflicting physical pain. However, it should be made clear than even if there are these patients with reported psychotic features it does not automatically account for them being transsexual or transgender. A delusional patient may claim "I am a woman" but a transsexual patient on the other hand explains "Biologically or anatomically I may not look like a woman but in every other aspect I am a woman." A delusional person's claim is unique however it is hard to believe because it is too idiosyncratic whereas a transsexual person is capable of convincing others about her being a woman (Case Studies in Abnormal Psychology). Filipinos generally regard transsexuals as gays or bisexuals with feminine instincts. This is observed among parents who repetitively tell their transgender child to cut their hair, stop wearing make-up and women's clothes and to act more masculine. This researcher along with other known cases reported that in some recruitment processes, they were advised to cut their hair, wear men's clothes and act masculine if they wish to get the job that they are applying for. The school or the academe is not far behind in this imposition. They prescribe uniforms for grade school and high school as well as for college in some universities and colleges. Schools also implement the traditional crew hair cut among men meaning that in the case of transgenders, they can not be allowed to keep their hair long.

There were cases though of transsexuals who experienced sexual excitement when cross dressing (Blanchard & Clemensen, 1988) and transvestic fetishist who seek SRS (Wise & Meyer, 1980). The DSM-IV TR recommends that patients who meet the criteria for both Gender Identity Disorder and transvestic fetishism should be assigned both diagnoses. Though there have been reported SRS performed in 1882 (Bullough & Bullough, 1993) it is still not clear as to what causes transsexuality and transgenderism, what should be the treatment and what is the prevalence? This concern is argued by some and even by this researcher that it is the same as asking what causes heterosexuality, what is the treatment if ever it should be treated and what the prevalence is. There seem to be no accurate and precise theory as to the etiology of transsexualism. Stoller suggested that in MTF transsexualism, the absence of a father or a sturdy father figure and the strong presence of a dominant, close-binding mother may be contributory factors.

It has also been proposed that modeling and behavior reinforcement could also be a cause of transsexualism particularly on the development of feminine behavior in boys and masculine behavior in girls (Green, 1987). The dominant and the constantly present parent becomes the role model for the child and thereafter all of the child's playmates, schoolmates, housemates, neighbors and all the media characters (TV and movie) become the source of imitation for the child. These external factors become extrinsic influences in one way or the other in developing the concept of femininity and masculinity. In 1974, a case study on transsexual

siblings that appeared on the American Journal of Psychiatry showed the possibility of transsexualism to occur in a biological family (Mosely, Sabalis etc., 1974). The siblings Murray (Mary), Paul (Peggy) and Junior (Julie) all shared the same experience though to a varying degree. Each went through a phase of seeming homosexuality but with marked femininity and the strong belief that 'she' is really a woman. This is interesting and though there are not too many literatures on transsexual siblings, much more on the reliable prevalence rate of transsexualism, this case study was nevertheless an eye-opener to introduce the possibility of hereditary transgenderism/transsexualism. Around this era another case that was reported was that of Chinese brothers and transsexual Spanish-American brothers. It is suggested that transsexuality is most likely to occur in the youngest sons since the mothers were able to stay with them longer as compared to the other siblings whose symbiosis was disrupted by the interval (Stoller, 1972; Mosely etc, 1974).

2.1.1.1. Femininity

"Majority of men are far behind the masculine ideal and that all human individuals as a result of their bisexual disposition and of cross-inheritance, combine in themselves both masculine and feminine characteristics, so that pure masculinity and femininity remain theoretical constructions of uncertain content (Freud, 1933; GW, 1935)." Throughout history, people have knocked their heads against the riddle of the nature of femininity (Freud, 1933). Based on the

psychological aspects of being “male” and “female,” masculinity and femininity refer to the degree to which individuals adopt various traits traditionally associated with men and women (San Filippo, 1994). Society has given its own interpretation to what is feminine and masculine; however, there are certain qualities that are often associated with masculinity (such as activity, mobility, physical strength, aggressiveness) and femininity (such as passivity, vanity, sophistication). Greater femininity has been associated with better interpersonal relatedness and satisfaction (Lubinski, Tellegen & Butcher, 1983; Orlofsky & O’Heron, 1987; San Filippo, 1994). These conventional gender-personalities are so assumed in some cultures that they seem natural to everyone. Girls naturally grow up with conventional 'feminine' personalities. Boys naturally grow up with conventional 'masculine' personalities. In adolescence, peer-group expectations are especially powerful in shaping gender-personalities, because peer-approval is more important than pleasing one's parents, teachers, or other adults. Each group of teenagers tends to dress, talk, behave, and think alike. Any deviation from the norm draws negative comments. And young teen-agers socialize mainly in same-sex groups: boys "hang out" with boys; and girls "hang out" with girls. Sports often reinforce the following regrettable 'masculine' traits: tough, combative, belligerent, violent, boastful, proud, hierarchical, aggressive, competitive, and concerned about muscles and body-image. The military life often creates similar traits: macho, tough, hard, stoical, hard-hearted, sadistic, cruel, coarse, crude, combative, belligerent, rash, foolhardy, violent, destructive,

unemotional, ruthless, punitive, powerful, forceful, willful, competitive, militaristic, hierarchical, demanding, rigid, coercive, aggressive, loyal, lost in abstractions, dogmatic, ideological, patriotic, & preoccupied with mechanical things—the toys of war (Park, 2003).

"For a woman to be healthy, from an adjustment viewpoint, she must adjust to and accept the behavioral norms for her sex, even though these behaviors are considered to be less healthy ...(This) places women in the conflictual position of having to decide whether to exhibit those positive characteristics considered desirable for men and adults, and thus have their "femininity" questioned, that is, be deviant in terms of being a woman; or to behave in the prescribed feminine manner, accept second-class adult status...." The problem is, in brief, that women who display those more masculine, "healthier" personality traits—competitiveness, ambitiousness, adventurousness, who are "not at all interested in own appearance," and who are aggressive and assertive—lay themselves open to the subtle but deeply punishing accusation that they aren't "feminine" (Patterson, 1963)."

Thus we speak of a person, whether male or female, as behaving in a masculine way in one connection and in a feminine way in another. The distinction is not a psychological one; when you say 'masculine', you usually mean 'active', and when you say "feminine", you usually mean "passive" (Freud, 1933).

"The concept of psychological androgyny implies that it is possible for an individual to be both compassionate and assertive, both expressive and instrumental, both feminine and masculine, depending upon the situational appropriateness of these various modalities. And it further implies that an individual may even blend these complementary modalities in a single act, such as the ability to fire an employee, if the circumstances warrant it, but with sensitivity for the human emotion that such an act inevitably produces (Bem, 1974)."

2.1.1.2. Transitioning or Femaling

Transsexuality consists in entering into a lengthy, formalized and normally substantive transition, a transition which involves stages (Prosser, 1998). Since gender does not only encompass what is immediately recognizable (physical) but all other aspects of human functioning so must the transition constitute several stages. The specific circumstances of this historical emergence underline the investment of transsexual identity (Prosser, 1998). This transition can also be labeled as *Male Femaling* and it takes place in three modes: *body femaling, erotic femaling and gender femaling* (Ekins, 1979). Body femaling includes the desire and movement to feminize the body and its primary and secondary sexual characteristics by means of hormonal management, hair lengthening or growing, facial and body hair removal, nose trim, breast augmentation and other surgical or non surgical procedures wherein the target of change is the physical body. Erotic

femaling refers to femaling intended to arouse erotic or sexual desires or excitement. Gender femaling refers to the ways in which the individual adopt the behavior, emotions and cognitions socio-culturally and socio-politically associated with being a female/woman. This includes wearing women's clothes and towards cross sartorial preferences; using accessories and cosmetics; adopting the mannerisms of women like shyness and finesse and undergoing speech therapy or at least speaking in a tone or pitch which is otherwise higher than the usual pitch. The transition mode becomes more specific with the phases. In the initial phase emphasis is upon first or early deviancy experienced by the individual like an incidental cross-dressing. This might take place in childhood, adolescence or adulthood. It may be remembered, recreated or relived a being an erotic or sexual experience, furthermore this experience is interpreted in sensorial ways (see, hear, smell, touch). In terms of interrelations between sex, sexuality and gender this phase represents a phase of undifferentiating since the individual still lacks a sense of purpose, direction and volition and the access to literature and interaction. Phase two is fantasizing femaling which usually goes with the next phase which is doing femaling. This phase includes the elaboration of fantasies in becoming a female and these fantasies may be created, imagined, scripted or adopted. Example fantasies would be imagining wearing a beautiful gown to a ball with long flowing hair instead of the usual crop or to fantasize as far as being convinced by the father that he is not a boy but a girl and that if not now he will become one later by the natural order of the universe. Since the phase

age interval is not clear because this will largely depend on the age of onset of the feeling of transsexualism, this phase may occur anytime as long as it has succeeded the initial phase. This phase may also include fantasizing about romantic interludes which are strikingly comparable with those of girls, like being liked by a boy that he actually likes but imagining that this boy will court him or send him flowers and tell him that he's the most beautiful girl in the whole world and that in fact he's a girl in more ways than one. The third phase is Doing Femaling which involves actual or serious cross dressing. This is regarded as such since cross dressing is initially encountered in the first two stages. Now he may start doing activities that otherwise may constitute to his feminization like hiding his genitalia and pulling up the underwear way up in order to give off the illusion that he does not have a penis but to feel what a vagina would feel on the surface. Another procedure may be to use depilatory products or those which make it easier to remove body and facial hair since men biologically produce more facial and body hair. They may prefer to talk at a higher pitch and begin to imitate role models who are famous women or any other person around them that embodies the female ideal. However, this stage also indicates a catharsis period of sort when the femaler oscillates between cross-dressing episodes, confusion about their meaning and the repeated to attempts to actually stop what he is doing because he still does not gain the full concept of what he really is. In other words they may label themselves as transsexuals or transgenders or as transvestites but they do not know the implications of these nominations. It is also possible that they may

actually not know what a transsexual is or a transvestite and they may erroneously consider themselves as gays instead yet they feel strongly that there is a woman trapped inside. The fourth phase: Constituting femaling. This time the femaler now assumes a greater sense of responsibility and at the same time experiences a transcendence of what she is. She now begins to answer the questions which confuses her before and identifies issues about the transition that she will eventually undergo and how to surmount possible obstacles. There may be two scenarios here, she either sees herself as a fraud or ill that needs to seek medical intervention or she conceives of herself an equal to everybody else but just experiencing a problem phase similar to a menstruation. They seek professional intervention for cure or guidance like a counselor, a psychiatrist or a psychologist. However in the Philippines this is not immediately possible since there is a culture of fear or stigmatization when we approach psychological or psychiatric intervention or even consultation. The society here labels this action as acquiring help for the mentally impaired. Filipinos tend to stick to “pamahiin” or hasty generalization. This is a phase wherein the femaler will find someone she can clearly identify with and that this would eventually make it easier for her to assume the responsibility for transition. It is in this phase that the meanings begin to crystallize around particular naming (Strauss, 1977) and assuming the exact labels be it a true transsexual or a transitioning tranny or a transvestite with transsexual tendencies among other possibilities.

The Final stage: Consolidating Femaling: This is the conclusion of all the phases and the assumption of the new gender role preferred. The ultimate end goal of this stage is to succeed in a Sex Reassignment Surgery (SRS) after undergoing prescribed hormonal replacement therapy (HRT). They consult endocrinologists for the hormonal management along with other specialist to track their pre-existing medical condition. Then they consult the psychiatrist to undergo evaluation that will confirm the diagnosis of transsexualism which will serve as their gateway to the acquisition of SRS. They now prefer to be called by their feminine names and referred to using female specific pronouns (She, her, and hers) although the acquisition of a female name can start a lot earlier as in five years old. A boy who sees himself as a girl would not want to be called a boy's name. Acquiring a female name is a natural but delayed process, something that was not done during their christening. Their chosen female name may come from a famous media icon that they emulate or any popular female names that can stick with them until adulthood (Bolin, 1988). The transsexual dresses as a woman not because she is cross-dressing but because she is dressing appropriately for she is now a woman.

2.1.1.3. HORMONAL MANAGEMENT (Hormonal Replacement Therapy /HRT)

One of the precursors to the end procedure of transitioning or consolidating phase of transsexual is hormonal replacement therapy or hormonal management. This

stage precedes the option of Sexual Reassignment Surgery sometimes referred to as Gender Reassignment Surgery. This procedure is more appropriate for those who qualify and who are intensely considering the surgery. However, there are pre operated (Preop) and non- operated who may undergo the HRT without the surgery. The succeeding subsection on HRT is taken from the internet resource "Transgendercare.com".

- Hormone replacement therapy (HRT) is a system of medical treatment for postmenopausal women, based on the assumption that it may prevent health problems caused by diminished circulating estrogen hormones. The treatment involves a series of drugs designed to artificially boost hormone levels. Estrogens and progestogens are the two main types of hormones involved. Fundamental to sex reassignment treatment is the acquisition to the fullest extent possible of the sex characteristics of the other sex. With the exception of the internal and external genitalia, these characteristics are contingent of the biological effects of the respective sex steroids. Therefore (semi)synthetic sex steroids are indispensable tools in sex reassignment treatment. The use of cross-gender hormone treatment is associated with a better outcome (Hamburger, 1969; Leavitt et al., 1980).

The "two year real-life test" (Money & Ambinder, 1978) is pivotal in diagnostic-therapeutic approach of gender dysphoria. It allows both the gender-dysphoric subject and the psychologist/physician to examine whether sex reassignment relieves the burden of gender dysphoria. The emerging physical changes

associated with cross-gender sex hormone treatment will facilitate the assumption of the role as a member of the other sex both in private life and in society.

The attempt to induce cross-gender sex characteristics in transsexuals- normally differentiated males and females in their adult years-can be subdivided into two aspects:

1. Annihilation of sex characteristics of the original sex.
2. Induction of sex characteristics of the sex one reckons oneself to belong to.

Unfortunately, the annihilation of sex characteristics of the original sex is incomplete. In male-to-female transsexuals, there is no mode of treatment to revert earlier effects of androgens on the skeleton. The greater height, the shape of the jaws, the size and shape of the hands and feet, and the narrow width of the pelvis can not be redressed once they have reached their final size at the end of puberty. Conversely, the relative lower height in female-to-male transsexuals (in the Netherlands an average of 12 cms) and the broader hip configuration will not change under the influence of hormonal treatment.

While in the majority of female-to-male transsexuals, a complete and inconspicuously masculine development can be induced with androgenic hormones, the effects of feminizing hormone treatment in male-to-female transsexuals can be objectively unsatisfactory with regard to reduction of male-type of facial/beard hair and induction of breast development.

Transsexuals often expect and sometimes demand rapid and complete changes immediately after the start of the hormonal therapy. The induced effects of cross-

sex hormones are, however, limited and appear only gradually. Before starting hormone treatment a clear discussion of the possible changes and the limits in an individual patient, is indispensable in order to prevent unrealistic expectations. It is also essential to undergo laboratory testing on the following battery:

- CBC with differential
- Comprehensive metabolic panel
- Lipid profile
- Testosterone : total+free
- PT/PTT
- Urinalysis
- Electrolytes
- BUN
- Creatinine and baseline
- Baseline: liver panel, renal panel, lipid profile, prolactin level, glucose
- Mammography or breast exam
- Prostate exam
- Extremity exam for varicose vein, edema and signs of DVT
- Cardiac and respiratory exams
- Neurological exam
- Estradiol level

In male-to-female transsexuals suppression of the original sex characteristics can be obtained by compounds that exert directly or indirectly an antiandrogenic effect. Androgens are for their production dependent on stimulation by the pituitary hormone Luteinizing hormone (LH) which, in turn, is stimulated by the hypothalamic hormone Luteinizing hormone-releasing hormone (LHRH). The biological action of androgens is contingent on their interaction with hormone receptors in the body's tissue cells. Interference with any of these mechanisms will lead to a decline of the biological action of androgenic hormone. See Table 1 (page 41) for Cross-Gender Hormone Treatment for Transsexualism.

TABLE 1. Hormones Used in Cross-Gender Hormone Treatment of Transsexualism

Antiandrogens			
LHRH analogues			
	leuporelin	Lucrin depotR	3.75 mg/months s.c.
	triptorelin	Decapeptyl-CRR	3.75 mg/months i.m.
Interference with testosterone or DHT production			
	spironolactone	AidactoneR	100-200 mg/day p.o.
	finasteride	not registered	
	flutamide	EulexinR	250 mg t.i.d., p.o.
Antigonadotropic			
	cypoterone acetate	AndrocurR	100-150 mg/day p.o.
	medroxyprogesterone	proveraR	5-10 mg/day p.o.
		Depo-ProveraR	150 mg/month i.m.
		FarlutaiR	5-10 mg/day p.o.
		Farlutal depotR	100 mg/month i.m.
Androgen receptor blockers			
	cypoterone acetate	AndrocurR	100-150 mg/day p.o.
	nilutamide	AnandronR	300 mg/day p.o.
	spironolactone	AldactoneR	100-200 mg/day p.o.
Estrogens			
	ethinyl estradiol	LynoraiR	100 µg/day p.o.
	conjugated estrogens	premarinR	5-10 mg/day p.o.
	17β estradiol	prognovaR	2-4 mg/day p.o.
		Progynon depotR	10 mg/2 weeks to 100 mg/month i.m.
		Estraderm TTSR	50-100 µg/day transdermally
	Estriol	SynapauseR	4-6 mg/day p.o.
Androgens			
	testosterone esters	TestoylronR	250 mg/2 weeks i.m.
		sustanonR	250 mg/2 weeks i.m.
	testosterone undecanoate	AndrinR	160-240 mg/day p.o.

Suppression of gonadotropins (the pituitary hormones) that stimulate testicular and ovarian hormone production can be achieved by LHRH analogues. Cyproterone acetate, progestagens and high dose estrogens suppress gonadotropins by their negative feedback action. Progestagens are available in the

form of medroxyprogesterone acetate (ProveraR) as a parenteral drug (150 mg/6 weeks) or oral drug (5-10 mg/day). Anyone starting the use of hormones must remember that what they are initiating is a second puberty. The first puberty did not occur over night and this one will not either. The full changes, regardless of age, will probably take four or five years.

During that period, changes will be occurring constantly. To the individual, it will seem as though there are no changes. Yet for others who see them at infrequent intervals, the reality of those changes will be much more apparent. Many transsexuals (male to female) who began taking estrogen claimed an immediate relaxing affect (Moss-Fritch, 2004). In the Philippines, transsexuals undergo hormonal management in an unsupervised regimen which they learn along with the subculture. They mostly learn about HRT from transsexuals and gays who join beauty pageants.

The beauty pageant is a favorite ritual among transgenders and homosexual men. Though many Filipinos find something funny about this, the transgenders and gays find this event fulfilling and grand. Most beauty pageants are held in municipal or city level (Johnson, 1990). The prerequisite for the pageant is that the contestant should present himself/ herself as a woman. They mostly emulate the presentation procedures of the Miss Universe wherein there are country assignments but an added twist is that the contestant uses a female celebrity name as her alter ego (like Ruffa Gutierrez, Melanie Marquez, Dawn Zulueta). This is why beauty pageants are festive rituals for transsexuals; they finally found a

venue of expression where they can be themselves in spite of having an alter ego for the night.

HRT drug dispensing is an over-the-counter procedure. Filipino transsexuals would refer to these drugs in the vernacular speak as Pilar (or sometimes as Pilar Pilapil). The IM procedure is referred to as “tuscha” to mean “tusok ‘sya.” The more popular HRT brands in the Philippines include Diane-35, Micropill, Femenal and Depo-Provera. Filipino transsexuals also recommend to fellow transsexuals the usage of glutathione which they believe is a whitening agent but is in fact an anti-oxidant.

An estrogen treatment results generally in more fat around the hips but this is not the rule and can vary largely. Skeletal structures like jaws, size of hands and form of the pelvis do not change with the estrogen and/or antiandrogen treatment. Not infrequently male-to-female transsexuals complain of a dry skin and fragile nails. This is a consequence of the reduction in sebaceous gland activity following antiandrogen treatment. Avoidance of detergents and application of ointment is mostly helpful (Lawrence, 2000). Following Orchiectomy there is reduction in antiandrogen therapy. Sexual hair growth is clearly dependent on androgens for its initiation and it would be logical to believe that antiandrogens are redundant following Orchiectomy. Though not verified by research data, patients claim that also after Orchiectomy their sexual hair growth is still reduced by antiandrogens

(Lawrence, 2000). Sexual hair growth is clearly dependent on androgens for its initiation. Though not verified by research data, patients claim that also after Orchiectomy their sexual hair growth is still reduced by antiandrogens (Lawrence, 2000). The principal feminizing hormones are estrogens. Estrogens alone can induce most typical female characteristics as has been shown in cases of Turner syndrome in which the ovaries fail to produce hormones. A second sex steroid produced by the ovaries is progesterone. Its prime function is to prepare the uterine mucosa for nidation. Its feminizing effect is probably limited, but effects of breast tissue have been described. It is found that there is a difference in breast hemicircumference between male-to-female transsexuals who had used estrogens only and those who had used both estrogens and progestagens, but this study was not a randomized double-blind clinical investigation (Meyer et al., 1986). Male-to-female transsexuals should be informed about this risk factor as most of the presented risk affects women it does affect the transitioning woman too. In terms of estrogenic effects there is no superior estrogen. Ethinyl estradiol is the most potent estrogenic drug. It is a chemical modification of 17β -estradiol, the main estrogen of the body, and it is slowly metabolized by the liver, but has a large effect on other metabolic pathways in the liver. It is very cheap, easily available worldwide and often used by male-to-female transsexuals because it can be obtained from women friends or without prescription in many countries as the oral contraceptive pill (always combined with progestagens) (Asscheman, & J.G. Gooren, 1992).

Natural estrogens, which are not natural but metabolized estrogens from other species (pregnant mare urine), are more appropriately called conjugated estrogens (PremarinR and other brands). 17 β -Estradiol (or in short estradiol) is the most potent of the three forms of native estrogens in the human body. It is produced synthetically and can be administered orally metabolized in great part at first liver passage, intramuscularly (Progynon-DepotR: 20-200 mg per month) or transdermally (Estraderm TISR 100 μ g, patches are replaced twice weekly). In particular, this latter form is very promising because of its low number of estrogen-induced side effects (Lawrence, 2000).

2.1.1.4. FACIAL FEMINIZATION SURGERY (FFS)

It is not enough to look like a woman by undergoing HRT and then acting like a woman. It is important to look like a woman since being born male anatomically will readily reflect all masculine features from the size and shape of the face/head, the base and ridge of the nose, the flatter forehead and cheeks and the prominent jaw line. Add to these characteristics the productive growth of facial and body hair. The aim of FFS surgery is to eliminate or reduce many of the cross-gender-related deformities of the facial bones caused by late-pubertal testosterone masculinization in MtF transsexuals. In the case of transsexual women, the transformational focus is on how to adjust the dimensional parameters of each face towards the normal female range, based on certain physical anthropological

measurements (Conway, 2000). Surgical feminization of masculinized faces can be done by recontouring the forehead, reducing or eliminating the brow ridge, smoothly recontouring the nose-ridge down from the forehead, narrowing and reducing in size the jawbone and chin (with the chin repositioned at a new angle, which can also be done locally through a non-surgical procedure by injecting “Helicon”) and shaving the trachea to eliminate the "Adam's apple". There are basic differences between a male and a female skull as females have a more pointed chin and less nasal prominence than males. The forehead is quite different, especially the areas of the brows and the mid forehead. The shape of the skull affects the drape and contour of the skin. Changing the shape of the skull will assist in changing one from distinctly male to female. Modifying the angle of the lower jaw and the prominence of the cheeks can also help improve femininity (Ousterhout, 1995). Cheek augmentations are generally completed utilizing an implant, but certain bone cuts and bone segment repositioning are useful in selected individuals. Various sizes and thickness of implants are available to fit individual differences and desires. The implants are most often placed with the patient under sedation and utilizing local anesthesia. The approach is usually through the mouth so no skin incisions are necessary. Rarely are implants placed through a lower eyelid incision. Though rhinoplasty is a common surgical procedure sought by Filipinos since Filipinos have ‘flat noses’, this is also sought by transsexuals so that the masculine nose will look feminine and softer. This enhances the contours of the nose and the angle between the nose and upper lip,

creating a softer, a more pleasing appearance. This procedure may also involve reshaping by shaving or fractioning and narrowing the excess bone from the bridge; shortening by partial removal of cartilage from the tip; correcting a deviated nasal septum, narrowing the nostrils; and/or reducing wrinkles with dermabrasion. If there is a deformity due to action or injury, more specialized procedures may be needed (Reardon, 2000). Collagen and artificial fat is also used and injected onto the cheeks and lips in order to look more feminine. This may be taken from one's own body collagen and fat or artificially. There is a new procedure sought by many local entertainers and transsexuals which is called "helicon" which is like oil injected onto the face to give it a fuller appearance. The chin varies markedly between the male and female. The male chin is generally wide and vertically high, while the female chin tends to be more pointed, narrow, and vertically shorter. The degree of masculinity/femininity can vary tremendously. The chin, therefore, is an extremely important area in gender recognition (Conway, 2000). The chin can be trimmed if it is too elongated or an implant or collagen/fat injection can be administered in order to give rise to a more feminine angle to it. The lower jaw contouring procedure is completed through incisions in the mouth, while under general anesthesia. There are no incisions made onto the skin. The masseter muscle is reduced on its internal surface, (i.e. the portion adjacent to the bone). The bone is then further reduced laterally, as well as softening the bony angle (Conway, 2000). One of the more important procedures that must be performed for feminization is the shaving or

reduction of the Adam's apple since this is an obvious give away. The cartilage is reduced through a small transverse incision in the neck immediately overlying the cartilage prominence. After the cartilage is reduced, a small amount of steroid is placed in the wound to help keep the scarring to a minimum (Conway, 2000). There is a false expectation that having a shaven Adam's apple will eventually make the voice higher or more feminine. Speech therapy is another story. There may be other procedures that can be employed in order to look more feminine like hair implants for balding and receding hairlines, eyebrow and brow bone lift, facial hair and body hair removal.

2.1.1.5. Transsexual Surgery (SRS)

This section is partly taken from the internet resource:

http://jenellerose.com/htmlpostings/transsexual_surgery_its_pros_and_cons.htm

<http://ai.eecs.umich.edu/~mirror/FFS/LynnsFFS.html>

Lynn Conway is also a transsexual woman who has provided a very extensive and detailed account of the procedures she has undertaken.

The ultimate end goal for many transsexuals is to acquire SRS that will match them to their 'correct' gender. A request for sex reassignment by a non-transsexual frequently leads to a serious confrontation between the patient and therapist. Therapists should explore and resolve the specific issues that have lead to such requests. As those issues are resolved, the non-transsexual usually drops his/her demands for sex reassignment (Abel, 1979). This is even practiced in the Philippines but in the strictest confidentiality because of the membership of many doctors to fraternities which partly enhances their macho persona. The primary reason that SRS is undertaken is to relieve gender dysphoria, and that its positive

results greatly outweighed any negative consequences (Pfafflin and Jung 1992; 1998). Pfafflin and Junge looked at the specific beneficial effects of SR in four broad areas: subjective satisfaction; mental stability; socioeconomic functioning; and partnership and sexual experience. Of the four, they considered subjective satisfaction to be the most important. They noted that a general improvement in subjective satisfaction was shown in essentially all the studies they reviewed, even those by authors who were most critical of SR. Considering the issue of mental stability, they concluded that the majority of follow-up studies that had examined this dimension also found more positive than negative results, although not as uniformly as in the case of subjective satisfaction.

Back in the 1940s onward into the mid seventies, there was a journal and research that came out about the management of SRS among patients of GRS (gender dysphoric patient). The procedures to reconcile the female genitalia, the primary regimen of surgical treatment, include bilateral Orchiectomy, relocation of the urethral meatus and reconstruction of the labial structures then the creation of a neovaginal vault is made possible by dissecting the rectovesical septum therefore separating the anterior rectum from the urethra and the posterior wall of the urinary bladder (Huang, 1994). In this back tracked study of Dr. Ted Huang, he noted that between the years 1972 and 1992 there have been 121 MTF transsexuals who underwent surgery. Patients are placed on a liquid diet for 3 days before the date of the surgery. Neomycin with sulfadiazine or erythromycin is administered for the bowel preparation. Cleansing enemas are started a day

before surgery (Huang, 1994). After the operation the patient is placed on bed rest for 4 to 5 days. The vaginal packing is removed at least 5 days after surgery while the urinary bladder catheter is left in place for at least 4 to 5 weeks. Vaginal dilatation is started 4 weeks after surgery. There can be complications following surgery just like how it is in many other situations other than SRS and so it is important to gauge risk factors prior to surgery. This is why blood tests along with other laboratory tests are performed as well as X-Ray, CT scan, mammography and other procedures. "One of the most feared complications of all is the formation of a vaginal-rectal fistula. This can occur during the dissection of the vaginal cavity by accidentally cutting through the rectal wall, or it can occur due to vaginal-rectal tissue death from pressure of the packing during the immediate postop period. A fistula enables excrement to bypass the anal stricture and exude from the vagina. The excrement prevents proper healing of the fistula and an ongoing danger of infection. The only way to correct the damage is to perform a colostomy, and then wear a bag for many months while the fistula heals. Proper dilation of the neovagina may not be possible during this period, often leading to closure of the neovagina. The patient may thus later need a complete redo of the SRS using skin grafts" (Conway, 20000). It is now the concern of the 'new woman' to keep the state of the newly constructed vagina healthy and sanitized. The size of the vagina is maintained through the usage of vaginal stent which will be inserted in the vagina in a procedure called "dilatation." Vaginal stents typically range in size from about 1-1/8 to 1-1/2 inches or more in diameter (28 to

38 mm), and must be inserted to full depth (4 to 6 inches or more) into the woman's vagina for 30-40 minutes several times per day for many months after the surgery. Increasing sizes are used to gradually widen and maintain the vaginal opening during the postop recovery period. One of the concerns faced by many postoperative women is the effect on sexual arousal, excitement, libido and interest in sex. As one of the respondents in this case study expressed during a pre-study interview, there is evident sexual excitation.

2.1.1.6. POST OPERATIVE CONCERNS OF THE TRANSSEXUAL WOMAN

One of the major concerns is the acquisition of a female name, officially as well as the documentation that the person is now a woman. It is just that this past is to be suppressed and edited (consciously) (Bolin, 1988). Since the person has been a male all throughout 'his' life, becoming a female instantly is never going to be easy. There are so many records to be corrected from birth certificates, baptism certificate, confirmation certificate, school registration and grading forms, hospital records, enlistment records (if applicable), Social Security identification and other mandatory documents since it is assumed that the surgery was performed past twenty one years of age. In Sweden a national survey was conducted to ascertain the prevailing attitudes toward transsexualism. Sweden recognizes transsexuals and would even pay for their SRS. The majority of these respondents approve of the transsexual to obtain a SRS but a greater majority

believes that they (transsexuals) should bear the expenses (Landen and Innala, 2000). Their right to adopt and raise a child was also supported by a big number, however these results only reflect a growing understanding of this situation and for a country like the Philippines, results can be devastating.

The greatest issue they will be concerned with is the rampant presence of discrimination and prejudice. This is sometimes referred to as homophobia but more recently as transphobia.

2.2. TRANSVESTISM/ TRANSVESTIC FETISHISM/ CROSS-DRESSING

It should be pointed out that transsexualism and transgenderism is not to be confused with the concept and clinical features of transvestic fetishism. Cross-dressing for erotic purposes and sexual pleasure is different from dressing to feel comfortable with one's sexuality and identity. It should be pointed out that in the DSM IV- TR, cross-dressing is described as a condition that severely causes stress on the individual (Kaplan and Saddock based on the DSM IV-TR). This stress interferes with the person's occupational, social and personal functioning and so the experience becomes dysphoric. Cross-dressing persons are not preoccupied with the desire to have their gender reassigned or their genitals restructured. Cross-dressing is exclusively featured under DSM as Gender Identity Disorder on the other hand Transvestic Fetishism is classified under the Paraphilias (DSM IV-TR). There are similarities like the need to dress the way the

opposite sex does, however what makes this transvestic fetishism different is that there is felt excitement or eroticism when wearing a woman's undergarment or other articles of clothing. It is however possible for some persons diagnosed as transvestic fetishists to become cross-dressers or vice versa. Cross-dressing may co-exist with some forms of paraphilias like sexual sadism, sexual masochism and/or pedophilia. Simplifying the differentiation, a cross-dresser needs to dress like a woman (or a man in the case of a biologically female cross-dresser) either because he feels helpless not to or because he experiences stress when he does not dress up like one; on the other hand, the transvestic fetishist cross-dresses or at least wears a single article of clothing of a woman to experience sexual excitation. In both cases, they do not move towards having their penis removed, they do not identify themselves as women, they do not attempt hormonal replacement therapy and their sexual preference is usually heterosexual, bisexual or homosexual. Since cross-dressers and transvestic fetishist differ from transsexuals, it is obvious why transsexuals are more feminine, womanly and to many people's immediate standards - "beautiful." Their sartorial instincts (fashion instincts) also dictate that they dress like women because they feel like one and because they know they are women. Transvestites (including the fetishist) would not be as meticulous with style and appropriateness of clothing all they need to do is to wear women's clothes. The sexual preference of transsexuals though usually heterosexual can vary. Another distinct characteristic of transvestites is that when they cross-dress, they usually conceal their identity or they keep this activity to the strictest

privacy. Many people around them, and this may include their immediate families may not even know anything about their cross-dressing behavior because they manage to keep their hair and nails short and their physique bulky.

2.2.1. DRAG QUEENS AND FEMALE IMPERSONATORS

In common parlance, transvestism is also referred to as cross-dressers or drag queens and impersonators. Since transgenderism involves gender performance and gender construction, it is inevitable to copy and imitate and in this case imitating 'other women.' It should also be noted that transgenders can be seen as symbolic representatives of the cultural ideas associated with the feminine and women and how they have changed over time (Underwood, 2004). The drag queen is a man or a woman who dresses like the opposite sex and imitates famous figures and personalities. The male drag queen or impersonator may copy or imitate famous Hollywood actresses (like Greta Garbo, Marlene Dietrich, Joan Crawford, Dorothy Daindridge, Judy Garland among so many others) or singers (conceived as 'Divas') such as Cher, Tina Turner, Barbra Streisand, Liza Minelli, Diana Ross, Madonna among so many others. Drag queens and impersonators in our society are seen as representing an array of disparate often contradictory cultural values, limitations and possibilities (Underwood, 2004). The history of drag queens can be traced as far as the Ancient Greek times wherein men would

often dress like women during festivities. There have been plenty of movies in American and European cinemas that highlight the different faces of impersonation to name a few : Torch Song Trilogy, La Cage aux Folles , Too Wong Foo Thanks for everything Julie Newmar, Wigstock, Mrs. Doubtfire, Midnight in the Garden of Good and Evil, Priscilla Queen of the Desert and Paris is Burning. In the Philippines, the actor Dolphy has portrayed and immortalized many characters wherein he cross dressed like “Markova” , “Pacifica Falayfay”, “Ang Tatay kong Nanay” and “Jack and Jill” among so many others. Later generation actors followed suit like Herbert Baustista (Jack and Jill 1&2), Joey deLeon (She-Man, Barbie) and Roderick Paulate (Enkatadang Kangkarot, Petrang Kabayo 1 & 2, Jack en Poy and Charot). American Pop music also saw the emergence of media icon. RuPaul released pop records, appeared on film (Too Wong Foo), hosted her own radio and TV programs and endorsed cosmetics (MAC). There are clubs and venues in America (and in Europe) where there are cross-dressing performers (drag queens and impersonators). This is seen in the movies Connie and Carla and Miss Congeniality 2 (released 2004 and 2005 respectively). Drag queens/ impersonators are not necessarily transvestic fetishists or do they meet the exclusive criteria for Cross-Dressers under the DSMIV-TR or the TF under the Paraphilias. Drag queens can be homosexuals or bisexuals but not transsexuals. They perform in drag as a preference to earn a living or to express their talents in public performance. A few drag queens are transitioning transsexuals or transsexuals who failed to identify that they are not

cross dressers or transvestites. Still a fewer drag queens are heterosexuals who see performing cross dressed as a good way or earning money or the immediate means to do so.

In the Philippines, drag queens can be found performing in different venues that specialize in featuring drag performances and impersonation like *The Library*, *Amazing Philippine Theater and Club Mwah*. *Exaggerated femininity* is what sets the transvestite and the transsexual apart. The transsexual in more ways than one is more feminine and soft compared to the transvestite. It was during the middle years of the nineteenth century that the word drag was coined to describe the petticoats worn by men playing female parts (Senelick, 2000; Rupp and Taylor, 2003; Underwood, 2004). Earlier researches on drag queens paint them as failed men and represent the stigma of homophobia which views homosexuals as effeminate (Newton, 1979 ; Perkins, 1996; Tewksbury, 1994 ; Underwood, 2004). However, the concept of masculinity has also evolved and now there are men who undertake professions usually associated and popular with women (like nursing, elementary school teaching, social work, even interior designing, floral arrangement and fashion designing). There is even a new term and concept that evolved – Metrosexual, to refer to men who are extra vain, beauty conscious, fashionable and clean. Sexuality and gender is continually evolving and the drag queens and impersonators are but part of this evolution. Society if not explicitly implicitly dictates men to assume certain types of masculinity, gay men especially

those who are really effeminate are seen as being blocked from pursuing this masculinity because they are seen as unqualified to represent the masculine ideals (Connell, 2000 ; Kimmel and Messner, 2000).

2.3. HOMOSEXUALITY

Filipinos categorize and identify homosexuals (gays), bisexuals, transgenders and transsexuals as one and the same. This is also the reason why there are only two umbrella vernacular translation to this – “Bakla” and “Binabae”, the latter being most apt for female acting, overly effeminate and cross-dressing ‘gays.’

One of the purposes of this study is to provide for a differentiation on the Filipino “bakla” and the transsexual. Most issues concerning the transsexual do not concern the “bakla” and even vice versa. Many Filipino transsexuals don’t even know that they are transsexuals let alone label them as such. In spite of the numbers of transsexuals in Asia, studies and publications relating to or pertaining to Asian transsexuals are stale if compared to studies conducted on American and European samples (Winter, 2002). Asians face greater amount of challenges and prejudices as compared to their Western counterparts (Winter, 2002).

2.3.1. HOMOPHOBIA AND TRANSPHOBIA

Discrimination comes in many packages. Heterosexism is the umbrella term used to describe all forms of discrimination against people who are (or are assumed to be) lesbian, gay or bisexual. . Heterosexist beliefs include the assumption that everyone should be heterosexual; that everyone is heterosexual (unless known to be otherwise); and that non-heterosexuals are somehow unnatural and abnormal. Like other forms of discrimination, it is often invisible to those who are not its targets. The term homophobia is often used to describe personal forms of heterosexism, such as verbal and physical abuse. However, many prefer to use the more inclusive term, heterosexism to describe all forms of discrimination against lesbians, gay men and bisexuals. Discrimination against transgendered people is pervasive in society. Transphobia is the term used to describe the prejudice and discrimination directed at people who stray from the rigid gender expectations of our society. Homophobia is widespread in the Philippines and anywhere else, far more widespread than most heterosexuals realize, and it can be far more subtle, too. Transphobia (by analogy with homophobia) can entail any of an irrational fear, hatred of, discrimination against, or disapproval of transsexual and transgender people. It often takes the form of refusal to accept a person's new gender identity and is often caused by lack of education about gender identity matters. Whether intentional or not, transphobia can have severe consequences for the targeted person; also, many transgenders experience homophobia as well,

from people who erroneously associate gender identity disorder with homosexuality. The discriminatory or intolerant behavior can be direct and can take on the form of harassment, assault, or murder, or can be indirect such as avoiding contact and interaction.

2.4. Culturally Bound Cross Gender Expressions

2.4.1. BANTUTs of Southern Philippines

The Philippines itself has a thriving transgendered community in the South – this group is called the Bantuts. British researcher Mark Johnson conducted a study in Mindanao on the Bantuts. This study is an ethnographic research which establishes the life and pattern of socialization of this group. Bantuts are believed to have an innate sense of style, and are highly sought after in their communities as clothing designers, makeup artists and hairdressers. Yet at the same time, Muslim discourses concerning sex and gender have worked to increasingly stigmatize Bantuts. In particular, the desire of Bantuts to play the "passive" role with gender-normative, "real" men is harshly condemned. Viewed both as "women" unable to conceive, and as "men" who are sexually impotent, Bantuts, regardless of their talents, fall outside of Muslim family structure, and are thus devalued (Maztner, 2002/ Johnson, 1997).

As many Filipino ‘gays’ and transgenders have attested, the Philippines has a predominantly Matriarchal society and is very conservative which may have been an indirect or direct influence on the gender expressions of people. The Bantut is a representative sample of the transgendered Filipino and what makes it more unique is the fact that they are a community/ tribe localized in a specific region- the Tausug and Sama communities of Muslim Mindanao. However, it was determined that apart from the cross-gendering behavior, the Bantuts identify themselves as gays/ homosexuals in that they prefer men as sexual and intimate partners (Johnson, 1997). Johnson also hanged out in ‘beauty parlors’ or ‘salon’ where most Bantuts as well as other Filipino ‘gays’ and transgenders earn a living. There can be a question that can be raised here, why is it anyway that most Filipino ‘gays’ and transgenders work in the beauty industry- apart from their obvious talents in beauty makeover? One probable reason is that there is discrimination in the Philippines and elsewhere against transgenders and even homosexuals that this industry becomes an instant shelter. Since many Filipino ‘gays’ and transgenders experience prejudice as early as their grade school days, most of them who anticipate of living a more ‘feminine’ lifestyle prefer to work where they are not required to emasculate. This fascinated Johnson and so even if he considered the Bantuts and ‘gays’ in generals as producers of beauty, he also recognized other assumptions that this maybe an indicator of stigmatization. Some ‘gays’ and transgenders even emphatically state that they are ‘forced’ to become beauticians because society is not ready for a “pa-girl” doctor, lawyer,

politician, teacher and priest. The Bantuts just like the Travestis of Brazil have primarily homosexual orientation. Though the Travestis are predominantly prostitutes, Bantuts can resort to occasional prostitution.

Although it is suggested that along with other forms of gender crossing behavior, transvestism/ transgenderism is a way of creating a socially acceptable niche for sexually ‘inverted’ and ‘deviant’ individuals in traditional societies (Deveraux, 1937; Johnson, 1997). Though transvestism and transgenderism is experienced as a realistic experience, however it was posited that the transvestite (and probably including all other transgenders) inhabits a cultural world where identity including sex and gender, is premised on dualism and the consequent reception becomes relative and conclusive (Garber, 1993). The studies of Johnson further led to mentioning historical accounts of cross-gendering: that of Juan de Plasencia’s “Customs of the Tagalogs” and that of Fray Juan Francisco de San Antonio’s report, both of which include the presence of “bayoquin” who were “babaylan.” The “Babaylan” were effeminate/ transvestite men who are ritual heads or priests to a ‘hermaphrodite god’ (Ferlas, 1991). The University of the Philippines recognizes a student organization, The Babaylan, which provides active support for its GLBTQ (Gays, Lesbians, Bisexuals, Transgenders, and Queers) members.

2.4.2. *HIJRAs of India*

It is estimated that there are probably 50,000 up to 1.2 million Hijras in India and Pakistan (Bobb and Patel, 1982/ BBC News Online 2001). Though Hijras are described to be neither man nor woman (Nanda, 1999), they are more popularly categorized as “third sex” (Hall, 1997). Hijras also stress the notion of importance of impotence as a prerequisite for joining the community and attainment of divine power (Bakshi, 2004). Moreover, Hijras regard castration as a sacred ritual and a sacrificial offering central to the thirdness of their being (Cohen, 1995). Hijras are sometimes castrated males (eunuchs) and acknowledged both in Hindu and Muslim cultures. Dual-gender figures in Hinduism provide other sources of identification in a religious context.

All distinctions of transgenderism: transexuals, transvestites, hermaphrodites, and intersexuals are drawn to a special role in India called Hijras (Nanda, 1990). Hijras are unique because they have an active social organization that is both traditional and ritualistic (Freilich, 1991). Besides tradition, tolerance of transgenderism in India is also due to the country’s population and diversity - ideal ingredients for an organized form of transgenderism. Transvestism has its roots in Hindu mythology. The deity Shiva is known as a goddess venerated by Hijras. This fact along with the religious and mystical duties assumed by Hijras gave them dignity and upliftment which somehow curtailed them from generalized prejudices. Comparing the Hijras with the transgenders of the

Western world emphasizes that gender is a philosophical category and “is not what one is but what one does” (Zimmerman, 1987). Unfortunately, when Britain annexed India, transgenderism was banned and thereafter laws were passed on constricting the rights and expressions of Hijras (Jaffey, 1996). Apart from the religious and mystical rituals, they also earn a living by prostitution and pimping. They live in red light districts where other Hijras live and provides sexual services to men who seek transgenders (Freilich, 1991). Hijras refer to themselves using feminine pronouns however unlike true transsexuals; they don’t present themselves as women for the purpose of passing.

2.4.3. TRAVESTIs of Southern Americas (Brazil)

Travestis are predominantly from Salvador, Brazil. The word ‘travesti’ derives from the Latin verb “transvestir” which means cross-dress. However, Travestis do not only cross-dress, they adopt female names, clothing styles, hairstyles, linguistic pronouns and cosmetic practices (Kulick, 1998). Their cosmetic practices include ingesting large amounts of female hormones and then inject large amounts of industrial silicone into their bodies which explain why they have ‘fatty women-like’ breasts and shapely hips and buttocks. Travestis are not as femininely or as soft-featured as the transsexuals of Asia since Asian transgenders have very small and fine bone structures, Travestis nevertheless look androgynously feminine to be referred to plainly as gays. A similarity that they

share with the Bantuts apart from the cross-gendering practices would be their identification as homosexuals. Travestis pursue and maintain sexual and intimate relations with men apart from men being their sex patrons as prostitutes. Travestis mostly work as prostitutes in some outskirts and red light districts of Salvador. Kulick reiterates in his book that as the Travestis themselves attest to, they are not transsexuals but they are homosexuals who fashion and perfect themselves as an object of desire for men, whether patrons, lovers or admirers. They will keep a boyfriend who they know usually as having a heterosexual orientation at least intermittently, to a relationship with a Travesti.

2.4.4. BERDACHES of Northern Americas

Alternative gender roles were among the most widely shared features of North American societies. Third gender generally refers to male berdaches. Each tribe, of course, had its own terms for these roles, such as boté in Crow, nádleehí in Navajo, winkte in Lakota, and alyha: and hwame: in Mohave. Because so many North American cultures were disrupted (or had disappeared) before they were studied by anthropologists, it is not possible to state the absolute frequency of these roles. Those alternative gender roles that have been documented, however, occur in every region of the continent, in every kind of society, and among speakers of every major language group. Far greater are those instances in which

information regarding the presence of gender diversity has simply not been recorded (Roscoe, 2000).

According to the studies on Berdaches as contained in “Changing faces” by William Roscoe, there are varying roles among them:

- Specialized work roles: Male and female berdaches are typically described in terms of their preference and achievements in the work of the “opposite” sex and/or unique activities specific to their identities
- Gender difference: In addition to work preferences, berdaches are distinguished from men and women in terms of temperament, dress, lifestyle, and social roles
- Spiritual sanction: Berdache identity is widely believed to be the result of supernatural intervention in the form of visions or dreams, and/or it is sanctioned by tribal mythology
- Same-sex relations: Berdaches most often form sexual and emotional relationships with non-berdache members of their own sex (Roscoe, 2000).

Chapter 3. RESEARCH METHODOLOGY***3.1. RESEARCH DESIGN AND PROCEDURES:***

The research utilized the case study method - phenomenological approach. In general, case studies are the preferred method when “what”, “how” and “why” questions are being posed, when the investigator has little control over events, and when the focus is on a contemporary phenomenon with some real life context. The distinctive need for the case study arises out of the desire to understand complex social phenomenon. Case study research excels at bringing an understanding of a complex issue or object and can extend experience or add strength to what is already known through previous research. Case studies emphasize detailed contextual analysis of a limited number of events or conditions and their relationships. Researchers have used the case study research method for many years across a variety of disciplines. Social scientists, in particular, have made wide use of this qualitative research method to examine contemporary real-life situations and provide the basis for the application of ideas and extension of methods. A case study is a report, usually written, that presents an event involving a dilemma or problem for consideration. It is a slice of life, a recounting of an actual human situation. It is one person’s recollection of what happened told as accurately and honestly as possible, but which cannot therefore

be taken as "the truth of the matter." Other persons involved may give different accounts. But it is that one person's recollection, and as such it may be a source of learning, especially for the person involved. The **case study** is a particular method of **qualitative research**. Rather than using large samples and following a rigid protocol to examine a limited number of variables, case study methods involve an in-depth, longitudinal examination of a single instance or event. The case study in this research involved the utilization of the life-history method (in depth semi-standardized interview) as well as testing (using the Raven's Standard Progressive Matrices / RSPM; Mini Mental State exam / MMSE; Bem Sex Role Inventory / BSRI; Draw a person Test by Machover / DAPT; and Sex and Gender Explorer / SAGE) and participant observation. The researcher used a set of questions normally asked in case histories but is made more specific to draw out specific qualities and concerns surrounding the transsexual person. Some of the questions are similar to the checklists and survey questionnaires of Anne Bolin, Milton Diamond and Sam Winter. The consideration apart from the historical facts included identifying the quality of life of transsexuals and mapping out their immediate goals and hopes. The researcher also made use of the Quality of Life Questionnaire (by Winter, Sassot and Vink). The author set for amenable one-on-one interview schedules with the respondents (15).

During the one-on-one interview, respondents were asked about their earliest life experiences and influences and moves on towards adulthood until the most

current time. The results or responses are then tallied to identify common denominators, trends and uniqueness among the respondents. The respondents were then subjected to a mental status examination using the MMSE. Then they were given the RSPM to measure intelligence. The respondents were then asked to draw human figures. The purpose of the DAPT is to determine which gender figure the subject would draw first and how the subject identifies with this figure. The researcher was assisted by two psychometricians in the interpretation of the MMSE and the DAPT, Ma. Rita Ivogun, M.A. and Caitlin Rodriguez of Neurological Services. The BSRI was used to determine if the respondents have high feminine identification or high masculine identification; nearly equal or androgynous or undifferentiated. SAGE is an internet based test designed for transsexuals. The results of the tests were then tabulated to reflect if the respondents have consistently high identification with femininity.

The process of HRT, FFS and SRS is determined in order to understand the rigorous process designed to be accomplished.

Then the results are summarized to include the following factors:

- Age of onset and recognition of transsexualism
- Presence of defense mechanism (not measured by a scale or test but through the questions and interaction) to repress and/or project the expression
- Positive identification to role models of the opposite sex vs. negative identification to role models of the opposite sex
- Onset of cross-gendering behavior

- Earliest recognizable gender preference/sexual orientation
- Consistent gender preference/ sexual orientation
- Initiative to avail of medical intervention/ refusal to avail of medical intervention
- Earliest onset and onset of HRT
- Stigmatized outcomes: experiences of prejudice and discrimination
- Initiative to avail of FFS and eventually SRS
- Usage of female pronouns when referring to oneself
- Projected expenses on the gender expression activities
- Post HRT/ FFS / SRS results : success or failure

The respondents were also followed in certain activities to determine how they present themselves in public as women. This participant observation activity entailed watching them join beauty pageants and other ceremonial activities for transsexuals and transgenders. The observations were incorporated in the life history section of the study.

3.2. SAMPLING PROCEDURES AND RESPONDENTS:

This research made use of the purposive criterion sampling technique. PURPOSIVE SAMPLING allows for respondents to be selected because of some characteristic (in this case all who identify themselves as women though assigned as males at birth) (Patton,1990). Specifically this is a criterion or criteria based purposive sampling.

For this study purposive sampling works in this way:

15 case respondents: The 15 respondents are comprised of anatomically born males (or birth assigned) who **identify and present themselves as females**. They are true transsexuals based on the immediate cross-checking using the DSM-IVTR and ICD-10. They are all Filipinos aged at least 21. The reason why the author chose to have a subject as young as 21 and not any younger is because, expressions of transsexualism genuinely manifest itself until the person has graduated from collegiate education or at least chose to pursue a career with or without a college degree. In the United States (excluding insular areas), 21 is the minimum legal age at which one can purchase and drink alcoholic beverages. It is also the age at which it is legal to gamble and work as a prostitute in Nevada (except in Storey County and Lyon County, where the legal age is 18) or in the Netherlands. In most states (and even in the Philippines), a person who is 21 or over may also rent a car. Twenty-one was the minimum age of suffrage in the majority of states until the introduction of the Twenty-sixth Amendment. Twenty-one was the age of majority in England and Wales before that age was lowered to 18 with the enactment of the Family Law Reform Act on 1 January 1970 (wikipedia.com).

The researcher conducted in-depth life-histories interview to 5 post operative transsexuals; then the next 10 are comprised of transsexuals who are yet to transition fully but has started the regimen of HRT (preoperative) and those that do not have the immediate plans of transitioning completely (nonoperative). They were interviewed for at least one full day (or more depending on the willingness

of the subject to share more life experiences and thoughts and her elaborate ways of discussing) in their chosen venue. The testing schedules were determined after each interview.

3.3. RESEARCH INSTRUMENTS

The following instruments were used to gather information on gender identification and understand projections from the respondents:

3.3.1. QUESTIONS FOR LIFE HISTORY

Life experiences are always unique and if there are shared or universal experiences, these are best determined using the in-depth semi-standardized interview method. **Some** of the questions were taken from The Quality of Life Questionnaire constructed by Dr. Sam Winter (with Sass Sasot and Licelot Vink) and survey questionnaires of Dr. Milton Diamond as well as Anne Bolin's questionnaire used on transvestite and transsexual Berdache respondents. Below are sample entries:

- How do you see/regard yourself (as a woman/female ; as a male/man ; something else)
- How do others see you (as a woman/female ; as male/man ; something else)
- Tell me your earliest recollection of life experiences
- When did you realize you felt different and acted different as compared to most boys?
- Would you rather dress like a woman all of the time?

- Is the approval of your family and friends important to you? How will you gain their approval?
- Do you know what transsexual means? Are you one?
- How do you differentiate transsexual from homosexual?
- Have you consulted a doctor regarding your need to become a woman?
- Have you started hormonal replacement therapy? Was it medically supervised?
- Do you intend to undergo sex reassignment surgery? Why?
- Do you experience discrimination primarily because you look feminine but others would later or soon find out that you are actually anatomically born as male?
- Do you identify more with you mother or with your father?
- Which media and entertainment personalities do you admire and identify with?
- What is you ambition in life?

3.3.2. Raven's Standard Progressive Matrices

The SPM consists of 60 items arranged in five sets (A, B, C, D, & E) of 12 items each. Each item contains a figure with a missing piece. Below the figure are either six (sets A & B) or eight (sets C through E) alternative pieces to complete the figure, only one of which is correct. Each set involves a different principle or "theme" for obtaining the missing piece, and within a set the items are roughly arranged in increasing order of difficulty. The raw score is typically converted to a percentile rank by using the appropriate norms. Internal consistency studies using either the split-half method corrected for length or KR20 estimates result in values ranging from .60 to .98, with a median of .90. Test-retest correlations range from a low of .46 for an eleven-year interval to a high of .97 for a two-day interval. The median test-retest value is approximately .82. Coefficients close to this median value have been obtained with time intervals of a week to several weeks, with longer intervals associated with smaller values. Raven provided test-

retest coefficients for several age groups: .88 (13 yrs. plus), .93 (under 30 yrs.), .88 (30-39 yrs.), .87 (40-49 yrs.), .83 (50 yrs. and over).

3.3.3. *BSRI*

The BSRI or "Bem Sex Role Inventory" is the product of Sandra Lipsitz Bem, who began researching sex roles since the early 1970's. The BSRI indicates the degrees of absorption of cultural definitions of gender, as reflected in the user's personality. This test provides independent assessments of masculinity and femininity in terms of the respondent's self-reported possession of socially desirable, stereotypically masculine and feminine personality characteristics. This can also be seen as a measurement of the extent to which respondents spontaneously sort self-relevant information into distinct masculine and feminine categories. The Bem Sex Role Inventory (BSRI) provides independent assessments of masculinity and femininity in terms of the respondent's self-reported possession of socially desirable, stereotypically masculine and feminine personality characteristics. This can also be seen as a measurement of the extent to which respondents spontaneously sort self-relevant information into distinct masculine and feminine categories. The self administering 60-item questionnaire measures masculinity, femininity, androgyny, and undifferentiated, using the Masculinity and Femininity scales.

- A total of sixty questions--twenty regarding masculine characteristics, twenty feminine, and twenty neutral

- Includes the short form of thirty questions
- Requires only about ten minutes to complete

The BSRI contains sixty personality characteristics. Twenty of the characteristics are stereotypically feminine (e.g., affectionate, gentle, understanding, sensitive to the needs of others) and twenty are stereotypically masculine (e.g., ambitious, self-reliant, independent, assertive). The BSRI also contains twenty filler items (e.g., truthful, happy, conceited).

Students, mostly between the ages of 16 and 21 were used; 444 male and 279 female students from Stanford University, and 117 male and 77 female students from Foothill Junior college. Bem found that although there was a high correlation between masculinity or femininity and social desirability, there was no correlation between androgyny and social desirability. This shows that the inventory is measuring something other than social desirability. Twenty-Eight males and 28 females are retested after an interval of four weeks. High correlations are found for Femininity, Masculinity, Androgyny and Social Desirability. For both samples (Stanford and Foothill), half of the Femininity items correlated with the remaining half. The same goes for Masculinity, Androgyny and Social Desirability (Bem, 1974).

Because the trait items were thought to be desirable for either men or women by 100 judges, one could say that face validity was built into the BSRI. Traits that fell half-way between masculine and feminine were used for the social

desirability scale. It was the initial selectors (Bem and Students) who decided upon whether the items were desirable or not. The BSRI results were compared against results obtained from the California psychological inventory and the Guilford-Zimmerman temperament survey. There was no correlation between the BSRI and the Guilford-Zimmerman scale and only a moderate correlation between the BSRI and the California psychological inventory. This suggests that Bem is measuring something different from the other personality tests.

The BSRI is distinguished from most masculinity-femininity scales by the following characteristics:

- Provides independent assessments of masculinity and femininity through self-reported possession of socially desirable, stereotypically masculine and feminine personality traits
- Measures the extent to which respondents spontaneously sort self-relevant information into distinct masculine and feminine categories (under Sandra Bem's gender schema theory)

The items are scored on independent dimensions of masculinity and femininity as well as androgyny and undifferentiated classifications:

- High on masculinity and femininity? Androgynous
- Low on masculinity and femininity? Undifferentiated
- High on masculinity and low on femininity? "Masculine"

- High on femininity and low on masculinity? "Feminine"

3.3.4. S.A.G.E.

The Sex And Gender Explorer (SAGE) test is an online, java scripted questionnaire. It also draws from other tests, like the BSRI and Moir-Jessel, as well as incorporates test materials used in neurological studies. The scope of the SAGE test is broad, with questions worded in a more "neutral" way to allow men, women, and intersexed people to take it, and it makes no assumptions that the test taker has any gender identity conflicts at all. Although SAGE has poor psychometric and standardization qualities and it is not readily available locally. It should also be able to accommodate female-to-male gender dysphorics. Nonetheless, many people have complained about the test being "sexist" or the questions being too limiting. Scoring is based on the DSM-IV diagnostic criteria for Gender Identity Disorders. There are 1000 items in the test and if the examinee yields a score of at least 650, the examinee is considered a transsexual. A copy of SAGE is not included in this thesis because it is only available online and could not be reprinted.

3.3.5. Mini Mental State Exam

The Mini Mental State Examination (MMSE) is a widely used method for assessing cognitive mental status. The evaluation of cognitive functioning is

important in clinical settings because of the recognized high prevalence of cognitive impairment in medical patients. As a clinical instrument, the MMSE has been used to detect impairment, follow the course of an illness, and monitor response to treatment.

While the MMSE has limited specificity with respect to individual clinical syndromes, it represents a brief, standardized method by which to grade cognitive mental status. It assesses orientation, attention, immediate and short-term recall, language, and the ability to follow simple verbal and written commands. Furthermore, it provides a total score that places the individual on a scale of cognitive function. Cognitive performance as measured by the MMSE varies within the population by age and educational level. There is an inverse relationship between MMSE scores and age, ranging from a median of 29 for those 18 to 24 years of age, to 25 for individuals 80 years of age and older. The median MMSE score is 29 for individuals with at least 9 years of schooling, 26 for those with 5 to 8 years of schooling, and 22 for those with 0 to 4 years of schooling.

Areas Tested by the Mini Mental State Examination MMSE

Orientation:

10 points can be scored for answering questions about date and location.

Examples;

'What is the day of the week?'

'What year was last year?'

'What building are we in?'

Memory:

This tests recall. Immediate memory scores 3 points (one point for each of 3 objects). People are asked to remember three words e.g. 'pen, ball, ring'. The three object names will be asked for later in the test.

Attention and Calculation:

The next part of the MMSE tests the ability to concentrate. One test, scoring a maximum of 5 points, requires the person to subtract 7 from 100 and continue.

The answers are 93,86,79,72, 65. Some clinicians ask for 5 to be serially subtracted from 100.

The person may also be asked to spell a 5 letter word backwards. The better of the two scores is included in the final score.

Language, Writing and Drawing:

The final 9 points of the Mini Mental State Examination (MMSE) tests spoken and written language, the ability to write, copy and remember named objects.

This includes naming objects, e.g. a brush and a pen. This scores 1 point for each correct answer.

Carry out a 3 step process- 3 points.

Repeat a sentence- 1 point.

Copy a figure or shape- 1 point.

Write a sentence on a piece of paper- 1 point.

The scores are then added up to give a result of the Mini Mental State Examination (MMSE).

3.3.6. A note on the interpretation for DAPT

According to the interpretation guidelines of the Draw-a- person test (Machover, 1949), the drawn figure represents the artist. The individual, directed to "draw a person", is believed to reflect his or her impulses, anxieties, conflicts and compensations in the product (Machover, 1949; Sidun & Rosenthal, 1987). Additionally, the gender of the person drawn first is presumed to reflect the person's sexual identity (Machover, 1949) (McIntyre, 2001). A summary of the occurrences for each respondents' figures were included in the Findings section. The most frequent occurrences among the figures such as anxieties and depression among others were tabulated afterwards and averaged. The DAPT figures and verbal responses were co interpreted by Ma. Rita Ivogun, M.A. and Caitlin Rodriguez, both psychometricians and experienced in the usage and interpretation of various projective tests.

Chapter 4: Results and Discussion

This chapter will present the Results and Discussion of the study (using tables and descriptive summaries) along with the fifteen life history cases.

4.1. Respondents' Socio Demographic Profile

4.1.1. Physical Profile

4.1.2. Work and Educational Background

4.1.3. Religion and Philosophical Beliefs

4.2. Transsexualism and its manifestations

4.2.1. Thinking as a female

4.2.2. Dressing as a female

4.2.3. Having a female name

4.2.4. Femaling or transitioning experience and developmental expressions

4.2.5. HRT

4.2.6. SRS and FFS

4.3. Quality of Life of Transsexuals

4.3.1. Respondents' Sexual orientation and relationships

4.3.2. Difference from Homosexuality, Transvestism, Drag Queens, and culturally dictated Cross gendering (Hijras, Bantuts, Berdaches and Travestis)

4.4. Results of the Test

4.4.1. Raven's SPM and Mini Mental State Exam

4.4.2. DAPT

4.4.3. BSRI

4.4.4. SAGE

4.5 Cases Life History

A summation (table 2 p. 82) on respondents' socio-demographic general information and profile are tabulated including the following information: age, birthplace and order, height and weight in centimeters (cms) and kilograms (kgs)

respectively, religion, educational attainment and degree and current occupation.

A summary table was also provided to show the development of the transsexual experience among the respondents (table 3 p. 83) also including the respondents' sexual orientation.

A summary table was also provided to show the transsexual quality of life among the respondents (table 4 p.84)

A summary table was also provided to show the DAP conflicts indicators (table 5 p. 85) as well as the overall test results (table 6 p. 86).

Table 2: Respondents' Socio-Demographic Profile

This table indicates the respondents' socio-demographic profile such as age, height and weight, birthplace and birth order, Religion (ideological beliefs), educational status whether completed or not

#	Respondents	Sexual Orientation	Height in cms.		Age	Birthplace	Birth Ordinal Position	Current Religion	Current Work	Educational Background/ Degree
			Weight in kgs.							
1	Diana Prince	heterosexual	175 cm/63 lbs		32	QC	2nd of 2	Atheist	owns business	Management (Finance and Banking)
2	Wanda	heterosexual	171 cm/63 lbs		40	Manila	3rd of 4	Buddhist	owns business	Fine Arts major in Interior Design
3	Cassandra	heterosexual	171 cm/57 lbs		24	Baguio	eldest of 3	Catholic	entertainer	Nursing graduate
4	Elvira	heterosexual	180 cm/64 lbs		26	Pampanga	only child	Christian	call center/entertainer	Sociology graduate
5	Armida	heterosexual	187 cm/72 lbs		28	Baguio	2nd of 2	Anglican	nurse	Psychology and Nursing graduate
6	Priscilla	heterosexual	168 cm/57 lbs		26	Davao	eldest of 3	Catholic	entertainer/tutor	AB English graduate
7	Mariah	heterosexual	179 cm/63 lbs		27	Palawan	2nd of 5	Catholic	dance instructor	Education major in English
8	Kurdapia	heterosexual	173 cm/64 lbs		23	Agusan	only child	Born Agam	call center	ECE Eng. Graduate
9	Tricie	heterosexual	179 cm/60 lbs		22	Australia	only child	Born Agam	call center	Psychology graduate
10	Luella	bisexual	169 cm/58 lbs		21	Cebu	eldest of 4	Advent	tv network	Advertising graduate
11	Kring	heterosexual	178 cm/61 lbs		22	Mindoro	3rd of 3	Buddhist	marketing	Computer Science graduate
12	Dorina	heterosexual	172 cm/63 lbs		32	Pampanga	2nd of 2	Catholic	owns business	Food Technology graduate
13	Apples	bisexual	165 cm/58 lbs		36	Pampanga	1st of 6	Christian	nurse	Nursing graduate
14	Trina	heterosexual	171 cm/61 lbs		23	Manila	only child	Muslim	medicine student	Medicine Student
15	Freda	heterosexual	175 cm/62 lbs		29	Leyte	2nd of 3	Christian	writer/marketing	Mass Communication graduate
15			174.2cm/61.73 lbs		27.53				14 are employed	all are college grad.

Table 3 : Respondents' Transsexual Profile

Respondents*	Age	Transsexual state*	FFS	SRS	Age start of female name	Age start of female dressing	Age start of thinking as female	Age start of HRT	Sexual Orientation	under HRT	with legal name change	experienced transphobia/homophobia
Diana Prince	32	post	y	y	8	9	5	19	heterosexual	yes	pending	yes
Wanda	40	post	y	y	11	11	4	15	heterosexual	yes	pending	yes
Cassandra	24	pre	y	n	5	8	5	16	heterosexual	yes	not yet	yes
Elvira	26	non	n	n	10	9	3	14	heterosexual	yes	not yet	yes
Arnida	28	non	y	n	9	15	6	18	heterosexual	yes	not yet	yes
Priscilla	26	pre	y	n	8	9	3	15	heterosexual	yes	not yet	yes
Mariah	27	post	y	y	7	9	7	14	heterosexual	yes	not yet	yes
Kurdapia	23	non	n	n	9	6	6	14	heterosexual	yes	not yet	yes
Trixie	22	non	n	n	10	20	10	15	heterosexual	yes	not yet	yes
Luella	21	pre	n	n	7	17	7	17	bisexual	yes	not yet	yes
Kring	22	non	n	n	11	14	11	17	heterosexual	yes	not yet	yes
Dorina	32	post	y	y	6	6	5	15	heterosexual	yes	not yet	yes
Apples	38	post	y	y	17	17	16	20	bisexual	yes	not yet	yes
Trina	23	non	n	n	10	10	6	22	heterosexual	yes	not yet	yes
Freda	29	pre	y	n	12	12	5	17	heterosexual	yes	not yet	yes
Total**=15	27.53	various	9	5	9.33	11.46	6.6	16.63	hetero=13	ALL	2 pending	ALL

Table 4: Respondents' Quality of Life Summary

Findings determined or studied and overall summary		Frequency
1	Trials of self as female / woman	13
2	Early onset of manifestation (naming, naming, dressing, acting out) mean age of 9.13	13
3	Preference for female roles in games and role plays	13
4	Preference for feminine styles (live color (pink), designs (lace and ruffles)	10.5
5	Fondness for beauty pageants, fashion and cosmetics upon early onset	14
6	Influence from female media icons (livesingers, models, actresses)	12
7	Influence from fashion models and beauty queens	13
8	Childhood group affiliation mostly girls and gays	14
9	Adolescent group affiliation mostly girls and gays	13
10	Adult group affiliation mostly women, gays and other transgenders	13
11	Under HRT	13
12	Common source of influence and information regarding HRT - Beauty Pageants and other Transgenders	12
13	Popular choice of HRT upon onset; Diane 35	8
14	Popular choice of HRT current Imave; Androcur	7
15	Popular choice of HRT current Imave; Silenolactone / Diane 35	3
16	If HRT is medically monitored and prescribed	10
17	Has intimate, romantic affections for boys upon early onset	12
18	Has intimate, romantic affections for men currently (homosexual preference)	13
19	Prefers to use the women's washroom as often as possible	13
20	Identified mother, aunts and cousins and other women (neighborhood, teachers etc.) as sources of influence on femininity	13
21	Showed marked changes - feminization as after and actual effects of HRT	13
22	Felt marked changes - feminization and emasculation as internalized effects of HRT	13
23	Believes that strangers immediately regard her as a female	12
24	Would like to present self as female in her old age	13
25	Identified change in religious affiliation and ideological beliefs	4
26	Undergone FFS and reported marked feminization afterwards	9
27	Undergone FFS and SRS and reported marked feminization and reduced male sex characteristics afterwards	3
28	First FFS procedure as Rhinoplasty	9 out of 9
29	Changed the pitch of their voices so it becomes high and feminine	13
30	Incorporates feminine accents (like hair curling and flapping, covering mouth when laughing etc.	13
31	Identified self as different from homosexuals, transvestites and drag queens	13
32	Prefers to be identified as females legally (in all documents)	13
33	Identified as females and projected selves as females in all cases	13
34	Indicated other possible mental disorders based on tests	0
35	Is generally medically supervised in all her feminization rituals	0
36	Family as direct cause of transgenderism	0
37	Showed marked normalcy and overall health in functioning (i.e. educational, work, social, relational etc.)	13
38	Overall sees her condition as normal but not clearly understood by others	13
39	Presents self consistently as feminine in public for at least one past two years	14

Frequency represents the respondents who responded in favor of the item under the consideration

Table 5: Drawa Person Test Machover interpretation: Recurrent themes among the respondents' figures as conflict indicators

Respondent's	First figure drawn	Effeminacy/Femininity	exhibitionistic, narcissism and vanity	Fear (general)	withdrawal	dependence	compensation	sexual ambivalence	feelings of inadequacy	aggression	anxiety	depression	emotional fixation	guilty	suspiciousness
Diana Prince	female	X	X	X											
Wanda	female	X	X	X											
Cassandra	female	X	X			X		X	X		X				
Elvira	female	X	X	X	X		X		X		X		X	X	X
Armida	female	X	X		X			X	X						
Priscilla	female	X	X			X							X	X	X
Mariah	female	X	X			X	X	X	X						
Kurdapia	female	X	X		X				X		X	X			X
Trixie	female	X	X	X	X			X	X	X	X	X	X	X	
Luella	female	X	X	X				X	X	X	X				X
King	female	X	X			X	X			X	X		X		
Dorina	female	X	X			X	X		X	X			X		
Apples	female	X	X	X		X			X				X		
Trina	female	X	X					X	X	X	X				
Freda	female	X	X	X	X		X			X			X		
Total = 15 females		15	15	7	5	6	5	6	10	7	7	2	7	3	4

the X mark represents the occurrences of the theme in the respondents' drawings.

Table 6: Respondents' Test Results Summary

Respondent	MiniMental State	Raven's SPM	BSRI	DAPT	SAGE	overall category
Diana Prince	27=Normal	Intelligence: 51 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Wanda	27=Normal	Intelligence: 52 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Cassandra	27=Normal	Intelligence: 54 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Elvira	27=Normal	Intelligence: 56 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Amida	27=Normal	Intelligence: 56 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Priscila	27=Normal	Intelligence: 56 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Mariah	27=Normal	Intelligence: 57 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Kurdapia	27=Normal	Intelligence: 53 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Tride	27=Normal	Intelligence: 60 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Luella	27=Normal	Intelligence: 52 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
King	27=Normal	Intelligence: 53 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Dorina	27=Normal	Intelligence: 51 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Apples	27=Normal	Intelligence: 52 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Trina	27=Normal	Intelligence: 55 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
Freda	27=Normal	Intelligence: 56 Superior	high femininity/low masculinity	female identification	transsexual	feminine/transsexual
total/ mean	27= normal	54.67= Superior	mean 48.5= high femininity/low masculinity	female identification with conflict indicators	mean score 860= transsexual	feminine/transsexual

4.1. Respondents' Socio Demographic Profile

4.1.1. Physical Profile

What effect does the child's ordinal position in the possibility of developing transsexualism? Based on this study, there is none. The respondents have different ordinal position in their family. Four respondents are solo (only child), four are the eldest, two are the second child, four are the youngest and one is the second to the youngest. There were no transsexual siblings among the respondents as well. Among the respondents, only one was born in another country (Australia), three came from Manila and eleven came from different provinces. All respondents however studied in Manila for university education and they attested that they have encountered many transsexuals in Manila.

The respondents' heights range from 160 to 183 cms (with an average mean height of 174.2 cms.); since many of the transsexuals (even those not part of this study) are taller and larger than the average genetic woman, height and body built alone can discredit their social identities as women (Bolin, 1988). The weight of the respondents ranged from 57 to 64 kgs. with a mean weight of 61.73 kgs. They all tend to be small to medium in body built, most of them attested to undergoing dietary measures and workout regimens in order to maintain a more feminine figure. They all have long hair, at least touching the shoulders. They all have pierced ears as they are all wearing earrings. They all have plucked or shaven

eyebrows. They all have the tendency to wear makeup, some would wear thicker others would wear lighter makeup depending on the occasion. They all dress like women from head to toe. They all showed mannerisms of women like tucking their hairs behind their ears frequently or pressing their shirts to their chest whenever they need to pick up something that fell on the ground. They all cover their mouths when they yawn, sneeze, laugh or cough. Transsexuals consciously alter the way they talk walk that is, taking small strides and keeping the arms close to the body (Bolin, 1988). When the researcher asked each of them why they have such mannerisms and how they learned of it, they all reported that it is natural for women to behave as such and they only learned those mannerisms from other women around them including those that they have seen in the television or the movies. They all look like women too and in fact, if any stranger would not know, they would all be mistaken for females. The respondents have also practiced talking using a higher pitch in their voices. They all explained that even if you look like a woman but if you sound like a man you are a man.

The voice can be a prominent and an obvious telltale sign (Beth Marion, see url). Based on their experiences, whenever they maintained a higher and softer voice, they are usually referred to as she or “mam”; but whenever they accidentally spoke in a lower voice, there is a shift on the use of the accorded pronouns to he or sir. They felt offended and uncomfortable whenever they experience this shift. Because of this, they all recommended the importance of tuning one’s voice in order to sound like a woman. Transsexuals are aware of the paralinguistic and

sociolinguistic gender disparities in speech and that women generally raise pitch at the end of a sentence and use a tag question like “isn’t it?” (Bolin, 1988).

4.1.2. Work and Educational Background

All the respondents have completed university education; three have even started post graduate or second degree education. They have taken up different courses such as nursing, psychology, communications arts among others. Many of them have excelled in grade school and high school. They usually cite English, Music, Home Economics and Science to be among their favorite subjects. Most of them studied in private schools in elementary and high school. They all reported having joined school activities as a dancer, singer, actor or all. Most of them (eighty percent) cited inclination towards music particularly singing and dancing. This maybe linked to their common choices of media influences like Regine Velasquez, Mariah Carey and Barbra Streisand.

Since all of the respondents reported discrimination (transphobia), they have different work profiles. Three owns and runs their own businesses, three are working in the call center industry, two are working as marketing professionals, one is a fulltime entertainer, two are full time nurses, one is a fulltime medicine student and four work part time as entertainers. They all reported that because Filipinos have prejudice against gays and transgenders, most transgenders have

developed the fear of working in the corporate, clinical or educational settings. They mostly opted to work as entertainers particularly in Japan. They reported to have heard stories from other transgenders and gays who were discriminated upon application or were asked to change their appearances in order to look more masculine. Currently, except for the student, all respondents are gainfully employed.

4.1.3. Religion and Philosophical Beliefs

Most of the respondents were born and christened as Christians (14) and one is born Muslim. They all reported that being in a predominantly Christian and to be specific, Catholic country, it is expected that they are too. They maintained that growing up; they saw their parents to be very religious and ritualistic of their beliefs like praying the rosary, novena or going to church. However, they felt that as they were growing up and that their lives were becoming more complicated, they were veering away from the traditional beliefs and teachings of the church. Twenty percent of the respondents (three) have turned away from Catholicism, one is an atheist. Their reason for this action they cited commonly that the Catholic Church has addressed indifference towards homosexuality and transsexualism. They have all recounted times in the past wherein they have heard of preaching from the priests or other lay ministers that it is a sin to be gay or to emulate women. They all believe that years of searching for acceptance and meaning may have driven them away from the Catholic or Christian beliefs and

so it is why they have started to experiment on their religious affiliation and ideological beliefs. They all however reported that their religious beliefs or faith has never influenced their gender choice.

4.2. Transsexualism and its manifestations

4.2.1. Thinking as a female

All fifteen respondents recounted their life experiences to their earliest memories to recall when they first experienced the feeling of having identified themselves as a girl instead of a boy. The youngest age of female identification is of three years of age (Elvira) and the oldest is sixteen (Apples). Even in an Oprah Winfrey TV show episode about transgenders, there was a five year old African American boy who identified himself as a girl. Research on different case studies about transsexualism in the young has already provided that the age of onset can be early (de Visser, 2003). Many of the earliest onsets would be around the age of five (Metsker, 1999) as in some of the subjects of this study. They mostly felt that they are like any other girls around them, only that they are in boys' bodies. The respondents somehow were more keenly observant of the other females around them partly because they feel that they are like them and partly because they wanted to be more like them. They all remembered how often they get teased by their neighbors, playmates and classmates because they insisted on doing things

and activities that are known only for women. The respondents all felt that their bodies were wrong for them and they all saw adult women to be what they will become when they grow old. Benjamin and Bolin both noted in their studies that their transsexual subjects also observed the women and girls around them as they felt more likened to them than they are to men. The manner in which the respondents observed others is the just the beginning in the stages of observational learning (Bandura, 1965). They observed others, retained the information they acquired, reproduce the actions they learned and then motivated by the environment to either reproduce or emit the actions. When the respondents started to think as women, it has been consistent, they think and feel like this up until now. They even reported that they always ask themselves the following questions:

1. What will a girl most likely say?
2. What will a girl most likely do?
3. What could my mother/ sister/ cousin/ aunt etc. have done in this situation?

Three respondents also explained that it starts with thinking; a person has to think of herself first as a girl in order to truly be like a girl. They all went through stages wherein people ask them why they think they way they do and they simply explained that they just do and think what comes naturally. The summary table (table 3) indicates when the respondents started to think as a female.

4.2.2. Dressing as a female

All respondents have gone through the beginning stages of female dressing, the earliest onset of which is three (Dorina and Kur) and the latest (Trixie) is twenty. Their idea of female dressing came from their surroundings and the people around them like their mothers, sisters, aunts, cousins, teachers and neighbors. They were not very comfortable with how they were compulsorily dressed as boys and so when they started to dress as a girl they felt more comfortable. They mostly borrowed dresses and other articles of clothing from their sisters or other women/ girls around them. Sometimes they would even steal their clothes and wear them when nobody is watching. After the pattern of borrowing or stealing, they all afforded to buy their own clothes and when this began, they started to buy women's instead of men's. They normally would go to the girls' or women's sections in a department store and all felt uncomfortable being in the boys' or men's sections. Aside from the preferences for shirts, shorts, skirts and shoes, they also developed the fondness for female associated designs and ornamentation like laces, ruffles, tassels and the color pink. Majority of the respondents have expressed that pink is a favorite color because of its frequent association with femininity and beauty. Aside from clothes, the respondents have also developed liking for accessories like headbands/ hair bands, hairclips, scungee, bracelets and earrings. They all reported that as they grew older, the female dressing was becoming more appropriate and was not just any form of escape. Unlike transvestites who would cross dress for erotic gratification, transsexuals dress as

women as a natural expression just like all the respondents. The only difficulty here is that dressing is also environmentally and culturally sanctioned. Since most of them studied in private schools, they have to wear prescribed uniforms for boys and girls. They felt compelled to wear boys' uniforms and clothes because they all felt that they had no choice. Generally, though there was joy and satisfaction experienced with dressing as female, this was mostly due to the opportunity to accord themselves with what they believe is appropriate. The summary table (table 3) indicates the age of onset of female dressing.

4.2.3. Having a female name

Part of the transitioning process is biographical editing; the transsexual would have to change details of her life to fit the history of a female and not a male person. They were all given male names (if not a neutral sounding one) and none of them enjoyed or liked their male names on a long term basis. They all adopted female names the earliest onset of which is five (Cassandra). In Bolin's work, respondents have also showed early ages of onset in the acquisition of female names, this is probably because a female name will match a female person and since they think of themselves as females, then they should have female names. They kept these female names up until now but they cannot use it in official documentation like passports, identification cards, credit cards among others because they would need to present the names which would also appear in their birth certificates. The process of changing one's name legally is not easy and

affordable. Apart from changing one's name, one's legally recognized gender should also be change, and this process is more tedious. Two respondents in this study have pending name and gender change filed legally (Diana and Wanda) and they have attested to the difficulty of these cases.

4.2.4. Femaling or transitioning experiences and developmental expressions

Passing is the single most important facet of transsexuals' rite of transition as it is also multifaceted (Bolin, 1988). The respondents reported having begun their femaling as early as they thought of themselves as girls trapped in the bodies of boys. Femaling or transitioning is a continuous and a lifelong process. The respondents reported that femaling required them to do a lot of observation and trial and error methods. They experimented on clothing styles that would fit them and that would make them look more feminine. They would look for their voice pitch with which they will feel most comfortable with. They practiced their walks, posture, profile poses etc. They usually practiced along with their female, transgender and gay friends and sought feedback. They would all keenly observe actresses, fashion models and beauty queens. This is what they all commonly found to be the most rewarding of the observational activities. They found pleasure with watching beauty pageants and fashion shows and in between, emulating the way the women walked, posed, talked and moved. They all preferred using the women's washroom instead of the men's. Since most of them

are passable as women, they did not have much problem with this however they cited a common challenge wherein if the cubicles are small, the non and preoperated respondents hesitated to urinate because of the danger of being found. Because of this challenge, they started to get used to urinating like women at all times, that is sitting instead of standing. All of them also bought and used feminine pads even if they knew that it would serve no use for them. They all reported that using a feminine pad would enhance the experience of feeling like a woman. They all cited, especially the post operated group that they would always have feminine pads in their clothes.

The respondents also reported that in public they do many modifications in their behavior like talking less and doing lesser bodily movements in order to avoid being perceived as nonfemales. They all developed mannerisms that are most associated with women like covering one's mouth (when sneezing, coughing etc.), crossing legs when sitting, pressing one's top to her breast/chest when picking up items on the floor, tucking hair behind the ears, wearing earrings at all times, shaving body hair and plucking the eyebrows among others. They are all used to using verbal expressions usually associated with females such as "great", "fabulous", "darling" (Lackoff, 1980).

Sartorial modifications followed suit. The respondents all acquired the natural taste for fashion and style. They made sure that their style is not outrageous

because they cited that the bigger and the more ornate one's style is the less feminine and the more it will be associated with cross dressers and homosexuals (Schacht, 2004). Please refer to table 3 for summary of female dressing onset.

4.2.5. HRT

Twenty percent of the respondents (three) had the earliest start in HRT, fourteen years old. The last one to begin HRT was Trina at twenty two. None of the respondents' HRT is doctor regulated, they have all self medicated and bought the medicines over the counter. Their most famous chosen brands were Diane 35 (8), Micropil (3) and Depo Provera (3). Eighty percent (twelve) of the respondents learned about HRT from other transgenders and the beauty pageants. They have also learned or at least heard about it from their gay friends and from beauticians. Armida's case is quite novel as she heard about HRT from a TV documentary and this has inspired her to one day start her own regimen. Currently, all are under HRT and their monthly expense on HRT alone would range from P200 to P2, 500. The most commonly selected brands are Androcur (7); Diane 35 and Spiranolactone (5). Trust contraceptives can be dispensed for free from time to time in health centers and at certain instances, a few of them had the common practice of asking any female friend to ask for a full cycle of Trust. According to all the respondents, they all went through a stage wherein they felt the urgency to consult a doctor to guarantee the safety of their regimen; however they also felt stunted because they know specialists who are known for prescribing and

designing regimens for local transsexuals. They all reported that they heard from friends that doctors locally are not sure themselves on the prevalence of males who would undergo HRT let alone the short term or the long term effects of the therapy.

They all reported (100%) the first set of symptoms experience upon the initial stage of the cycle, breast tenderness and pain. They all cited that their areolas are always erect and would hurt a lot if they bumped onto someone or vice versa. Then they also reported about how their skin became more supple, soft and smooth after several months of usage. They also cited that their hips where enlarging and the protruding veins running along their arms and hands are not anymore prominent. They all reported about weight gain and the increase in girth of their abdominal area. They all felt prompted to tighten their eating habits as to avoid gaining further weight and fullness in that region of their bodies. They noticed also that hairs in their legs would not grow fast or as dense and that facial hairs were unaffected. They all wanted electrolysis or laser hair removal to make facial hairs less prominent and troublesome. They all reported mood swings in the initial stages of their cycle. They described mood swings as being exaggeratedly happy in happy situations and then feeling lethargic and extra sad in appropriate situations. They felt extra irritable as well. They all reported erratic libido and when asked to explain about this, they simply described it as sex drive swings, sometimes they don't feel any excitement and sometimes they feel heightened

excitation. Overall, all the respondents cited an overall sense of feminization and actual feminization based on aftereffects of HRT. For the majority of the respondents, those who are nonoperated or preoperated transsexuals, HRT is their best option for feminization.

Refer to Appendices tables 5 and 6 for summary of HRT information on the respondents. Table 1 (p.41) shows generic information on popular hormonal formulations.

4.2.6. SRS and FFS

Sixty percent (nine) of the respondents have undergone FFS and thirty three percent (five) have undergone FFS and SRS. These five respondents are the post operated respondents, meaning they have undergone what could be considered the final stage in the transitioning process. Not all respondents considered SRS because of several reasons like the costliness of the procedure, lack of information on excellent surgeons, fear of irreversible repercussions, lack of preparedness, fear of pain during and after the procedure and their actual contentment with their current state. A person is not always expected to undergo SRS to be considered a transsexual. SRS is normally the last stage in the physical transition. For the five postops, their procedures all began with FFS then orchiectomy and the completion of the actual “vagina.” Prior to the beginning of the SRS, the respondents were required to undergo at least two years of continuous HRT, along with

Then it was followed by fattening of the foreheads and the cheeks. All the respondents who underwent FFS reported contentment and joy with the results of their FFS. All postops have also reported extreme joy with the completion of their SRS.

4.3. Quality of Life of Transsexuals

The Quality of Life Questionnaire revealed how the respondents value their family, relationships, experiences and friendships. It also indicated how much they value recognition, affirmation, equality and achievement. It also served as an amplifier to the life history section wherein the respondents clearly indicated similar revelations as those found in their life history.

All the respondents clearly value the way they consistently regard themselves as women. They all hoped that if there is a fictional afterlife, they would want to be born as women. They present themselves only as women and prefer to be referred to as “she”, “mam” and to go to the women’s washroom. It matters to them that others around them also treat them and regard them as women. They revealed that being a transsexual, their family has treated them the same as when they were still young. They value how much their family treats them because they regard their families as the most important people in the world. It revealed that it matters to them how their fathers and mothers understand their condition.

All respondents have also cited that they value their parents and family regardless of painful experiences that a few of them may have experienced growing up as a transsexual. They have not cited resentments harbored against family members but have mentioned that they have also experienced difficulties with dealing with them because of lack of knowledge about transsexualism.

It is however important to note that they all experienced transphobia or discrimination. They all felt that other people do not fully understand and accept their condition and has led to avoidance and rejection from others. They all reported as well that even though it was easier for them to find intimate romantic partners among foreigners (i.e. American, Japanese etc.), they still believe that a genuine and long lasting relationship will still be very difficult.

With regard to how they see themselves, they indicated that they all see themselves only as women and they do not consider their condition as a psychological disorder. They see themselves as normal and different. None reported sexual excitation when dressing as women (which differentiates them from transvestites). They all believed that they were born as such and not influenced by their environment. They also indicated that most of the time, strangers think of them as women. They all see intimate relationships as important and they value their relationships.

There were conflicts determined in the course of the study particularly in the life history and the DAPT. Emotions such as fear, withdrawal, aggression, confusion or ambivalence, guilt and suspiciousness were found among the respondents. This maybe due to the stresses brought about by their transitioning experience which is not easy. They cited discrimination and rejection experienced in some points of their lives, and these rejections maybe the reasons why they showed such conflicts.

Generally, they feel happy about themselves and they all see themselves growing as females. All of them generally feel happy about themselves and their condition. They all believe that others should see their condition with understanding and genuine acceptance.

4.3.1. Respondents' Sexual orientation and relationships

13 of the respondents are heterosexuals and two are bisexuals (13/15; 2/15). This means that most (13) of the respondents identify men as their object of affection and two identify affections for both men and women. This is what they clearly explained about the difference between homosexuals and transsexuals. They all explained that transsexuals are simply just like any other woman who loves a man, whereas homosexuals are men who love men. They all reported that their sexual preference has never been the primary reason or a reason for cross

gendering. They dress, think and behave like women because they know and they believe it is what is appropriate and that whoever they want or love or lust for is not directly related to that choice. They all started having crushes at a very early age, five. Most had crushes on boys and only one respondent reported having a female for her first crush. Most 14 are currently in relationships. It will be noticed however that 12 of the 14 currently in a relationship have foreigner boyfriends, the other two are in lesbian relationships with fellow Filipinas. When the respondents were asked why is it that they mostly have foreigner boyfriends that all explained that Filipinos are not yet prepared ready for intimate relations with transgenders. They further reported that although they have assumed and heard from other transgenders that European and American men are open to intimate relationships with transsexuals, they still cannot explain that further. They all reported that their relationships are appropriate for their gender, including the two bisexual respondents. Furthermore, they explained that it is very difficult for Filipino transsexuals to find genuine relationships. Appendices Table 3 summarizes the sexual orientation of the respondents as well as information on their current relationships, first crushes and the appropriateness of her orientation.

4.3.2. Difference from Homosexuality, Transvestism, Drag Queens, and culturally dictated Cross gendering (Hijras, Bantuts, Berdaches and Travestis)

All respondents believed and argued that they are not homosexuals. All respondents have friends who are transgenders and homosexuals and they are able

to distinguish the differences between the two groups. They all described their transgender friends to be more consistently feminine and have identified themselves as women whereas their homosexual friends are not as feminine but can be effeminate and do not identify themselves as women. They reported that homosexual men are men who love men, who dress as men, who move like men (but effeminately sometimes) and who loves their male bodies especially their penises. Their transgender friends, just like them do not like their male bodies and penises and would dress as women because they feel rightfully so.

They however cited similarities like having similar favorite media icons such as Regine Velasquez, Barbra Streisand, Mariah Carey, Nora Aunor, Madonna, Tina Turner and Cher; Maricel Soriano, Greta Garbo, Audrey Hepburn among others. They also cited fondness for beauty pageants and fashion shows and talking about beauty and fashion endlessly. They realized that just like gay men, they have always anticipated and followed the Miss Universe and Miss World Pageants as well as Binibining Pilipinas among others. They also noticed that when having fun, gay men are fond of imitating beauty queens and fashion models but would not identify themselves as women unlike transsexuals who would.

An important note in this section is that two respondents have identified themselves as bisexuals. Apples and Trixie cited that although they felt attraction and lust towards men and women, they identify themselves as women. They both

said that they are bisexuals but would also accept being labeled as lesbians since lesbians are women too, women who love women. All the respondents described their intimate feelings, affections, lust and attraction towards men as being similar to how women feel or experience it. They also hope to get married and have a family. They see themselves in these relationships as being women that men would care for. They all reported that they would not make themselves women just to have boyfriends or sex with men.

4.4. Results of the Test

Please also refer to the table 6 for the test results summary

4.4.1. Raven's SPM and Mini Mental State Exam

All the respondents scored high in the intelligence scale. They all scored within the range of 51-60 with a mean average of 54.67 which means that their intelligence is within the superior range however for this test alone. Average response time was 8.2 seconds. The respondents did not skip any portion of the test as they proceeded to complete the test without apparent difficulty. This can be related with their actual intellectual performance as all respondents are college graduates and has above average communication skills and proficiency in both Filipino and English.

All the respondents were able to respond appropriately to the MMSE. They all scored perfectly on the checklist indicating that they are in healthy mental state. There were no delayed in the responses, average RT (response time) is 2.33seconds. They all scored an average of 10/10 in the Orientation scale (10 pts. Maximum); 3/3 in the Memory scale (3 pts. Maximum); 5/5 in the Attention and calculation scale (5 pts. Maximum); 9/9 in the Language, Writing and Drawing scale (9 pts. Maximum). This means that each respondent scored 27/27, a perfect score for the MMSE. All the responses given were correct. No significant neurological conditions were found.

4.4.2. DAPT (Draw a Person Test: Machover interpretation)

The DAPT allowed for the respondents to project their feelings and thoughts even if these ran in contrary to what can be observed of them readily. Although they all unanimously projected feminine identification, conflicts such as anxiety, depression, passivity, withdrawal and fear among others were projected.

All the respondents drew complete body figures. There were no omitted body parts or grossly disproportioned figures. No respondents raised questions in the illustration process. There were erasures which ranged from mild to obvious and therefore indicative of less or high anxiety. There were a few drawings which illustrated hands in the pockets or arms behind the back which could be indicative

of withdrawal. However this withdrawal is closely linked to their need to conceal themselves publicly as transsexuals since they want to present themselves as real women. Their need for stealth (and concealment) may have projected itself in the figures with hidden hands or arms.

The more interesting aspect of the figures lie in the similarities seen in all figures, in particular the expression of femininity and sexual ambivalence (6 occurrences). Using the standpoint that the respondents are males, there is projected ambivalence in the figures, indicating their need to be females or possible homosexuality and effeminateness. Using the standpoint that the respondents are females or transsexuals, it confirms their femininity since their figures all indicated femininity such as oval faces, trimmed eyebrows, large and accentuated eyes and larger heads for the female figures. In the verbal part of the Machover interpretation, all the respondents cited that they see themselves or their ideal selves in the female figures and their ideal male mates in the male figures. The bisexual respondents saw the male figures as their fathers or possible ideal male mate if they would prefer men. All respondent figures also indicated that the female is seen as the dominant and more intellectually superior gender. These occurrences confirm the findings of an earlier case study on a Spanish adolescent boy Alberto (McIntyre, 2001). Other occurrences in the figures were general fear (7); exhibitionistic, vanity and narcissism (15); withdrawal (5); dependence (6); compensation (5); dealings of inadequacy (10); aggression (7); anxiety (7);

depression (2); emotional fixation (7); guilt (3) and suspiciousness (4). These conditions maybe attributable to any possibilities, such as the challenges and pains of being a transsexual in a society which they view to be unaccepting.

Below are the cases per case summary notations of the DAPT.

Case 1

aFemale:

Head: slightly larger indicative of vanity and is larger than that of the male figure which may mean that the female gender is accorded greater intellectual authority

Face shape: oval, indicative of femininity, sensitivity and aesthetic abilities

Mouth: slightly upturned; forced congeniality to win approval or inappropriate affect

Lips: slightly cupid's bone; vain, feminine, exhibitionistic

Eyes: slightly large and accentuated; glamour, exhibitionistic and egotistical

Hand: long fingers (shallow, flat, simple type of personality)

Small breast: stinginess in offering love and affection

Trunk: slight slenderness; fear of becoming stout, resistance to grow to adulthood

bMale:

Overall, figure is slightly smaller than female, regarding the male sex as the weaker sex

Lips: appear full; effeminacy (vanity, narcissism)

Trunk: slender figure (fear of becoming stout)

Size and placement: toward the right; environmentally oriented

Case 2

aFemale:

Head: slightly smaller than the body, indicative of possible feelings of intellectual inadequacy

Face shape: oval, indicative of femininity, sensitivity and aesthetic abilities

Lips: full; sensual, dependent, vain, possible over idealization

Eyes: slightly large and accentuated; glamour, exhibitionistic and egotistical

Hair: big hair; sexually passionate

Nose: long and thin; suffers from the body weakness expressed as a compensating drive for physical power and aggression

Arms: reaching into environment; reaching for affection and social interaction
Low pendant line: mother dependence
Powerful shoulder: sexual ambivalence, some degree of masculine protest
Trunk: slight slenderness; fear of becoming stout, resistance to grow to adulthood

bMale:

Head: slightly smaller than the body, indicative of possible feelings of intellectual inadequacy
Face shape: oval, indicative of femininity, sensitivity and aesthetic abilities
Eyes: slightly large and accentuated; glamour, exhibitionistic and egotistical
Eyebrows: trimmed; indicative of refinement and grooming, vanity
Neck: broad and thick; stubborn attitude, possible rigidity, good assimilation of impulses
Arms: long; ambition in compensation for feelings of inadequacy
Clothing: shows muscles; sexually restricted or erotic stimulation
Clothing: pockets emphasized; oral dependence or restricted stimulation
Lips: appear full; effeminacy (vanity, narcissism)
Legs: apart; figure is planted firmly on the ground
Direction of strokes: horizontal; associated with weakness and femininity

Case 3**aFemale:**

Face: oval shape; feminine, aesthetic
Lips: slightly full; effeminacy
Eyes: Large; glamorized and exhibitionistic
Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling
Hair: vigorous shading; brimming over some sexually deviant behavior
Nose: button; childish manifestations
Neck: long thin; lack of coordination or control of impulses
Breasts: large; immaturity, overprotected by mothers, strong identification with dominant mother image
Waistline: excessively tightened; precarious control which may find outlet in temperamental outbursts
Clothing: overclothed; narcissist
Size and placement: large figures; responsible to environmental pressure with feelings of expansion and aggression
Direction of strokes: horizontal; femininity

bMale:

Lips: Cupid's bow; exhibitionistic, vain, sexually precocious
Eyes: large and accentuated; glamorized, exhibitionistic, egotistical

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Hair: messy; sexual disorderliness

Nose: long; sexual virility

Neck: long; lack of coordination or control of impulses

Arms: broad; striving for strength, stresses physical power

Shoulders: powerful; masculine protest, sexual ambivalence

Trunk: emphasis on pelvis; strong identification to dominant mother image, vanity

Joint: faulty joints; uncertain sense of body integrity; mother dependence, psychosexual immaturity

Clothing: underclothed; body narcissist, erotic stimulation, preference for fantasy rumination

Structural and formal aspects:

Stance: legs apart; drifting in space

Graphology: dim lines; timid, self effacing, uncertain

Direction of strokes: horizontal; associated with weakness and femininity

Overall: figure is drawn to be slightly smaller than female figure, regarding the female as the predominant sex

Case 4

aFemale:

Face: oval shape; feminine, aesthetic

Chin: change of lines; compensation for weakness, fear of responsibility

Lips: slightly full; effeminacy

Eyes: accentuated; glamorized and exhibitionistic

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Ears: hidden; denial of concern over opinion of others

Hair: vigorous shading; brimming over some sexually deviant behavior

Nose: long and thin; body weakness, expression of compensation for physical power and aggression

Arms/ Hands: one hand behind back; guilt feelings and need to control expression and aggression

Structural and formal aspects: Self sex drawn young: emotional fixation or wish to be young

Legs pressed together: self conscious, awkward and apprehensive

Direction of strokes: horizontal; femininity

bMale:

Face: shape square; powerful masculine strivings

Nose: long; sexual virility

Arms/ Hands: one hand behind back; guilt feelings and need to control expression and aggression

Structural and formal aspects:

Stance: Legs pressed together; self conscious, awkward and apprehensive

Perspective: hands behind; evasion

Direction of strokes: determined; secure person with perseverance and persistence to work toward goal

Overall: figure is drawn to be slightly smaller than female figure, regarding the female as the predominant sex

Case 5

aFemale:

Eyes: accentuated; glamorized and exhibitionistic

Nose: long; sexual virility

Neck: long thin; lack of coordination or control of impulses

Breasts: large; immaturity, overprotected by mothers, strong identification with dominant mother image

Arms/ Hands: very long fingers; shallow, flat, simple type of personality developments

Hips and Buttocks: exaggerated hipline; awareness of power

Feet: with phallic likeness; sexual inadequacy and preoccupation

Clothing: overclothed; narcissist

Structural and formal aspects:

Direction of strokes: determined; secure person with perseverance and persistence to work towards goal

bMale:

Chin: weak; feelings of weakness especially in social situations

Eyes: large and accentuated; glamorized, exhibitionistic, egotistical

Ears: omitted; low intelligence

Arms: broad; striving for strength, stresses physical power: long fingers; shallow, flat, simple type of personality development

Hair: messy; sexual disorderliness

Shoulders: powerful; masculine protest, sexual ambivalence

Nose: long; sexual virility

Feet: with phallic likeness; sexual inadequacy and preoccupation

Structural and formal aspects:

Direction of strokes: determined; secure person with perseverance and persistence to work towards goal

Overall: feminine male figure indicative of femininity or effeminacy

Case 6

aFemale:

Mouth: Wide upturned line; forced congeniality, an effort to win approval or even inappropriate affect

Lips: slightly full; effeminacy

Eyes: Large orbit with small eyes; strong visual curiosity with guilt, possible voyeuristic conflicts

Nose: Hooked; expression of rejection and contempt

Arms/ Hands: one hand with excess finger; ambitious and aggressive individuals

Trunk: slender figure; fear of becoming stout

Joints: uncertain sense of body integrity; mother dependence

/Structural and formal aspects:

Self sex drawn young: emotional fixation or wish to be young

Conflict indicators: weak hands and arms (imbalanced)

Bmale:

Face: oval shape; feminine, aesthetic

Lips: Cupid's bow; exhibitionistic, vain, sexually precocious

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Nose: Hooked; expression of rejection and contempt

Neck: long; lack of coordination or control of impulses

Arms: broader at hand than shoulder; lack of self-control or tend to be impulsive

Shoulders: powerful; masculine protest, sexual ambivalence

Structural and formal aspects:

Self sex drawn young: emotional fixation or wish to be young

Direction of strokes: horizontal; associated with weakness and femininity

Overall: male figure is smaller than female indicative that the female sex is regarded as the dominant gender

Case 7**aFemale:**

Face: oval shape; feminine, aesthetic

Eyes: Large; glamorized and exhibitionistic

Arms/ Hands: Reaching into environment; reaching for affection, social interaction

Waistline: excessively tightened; precarious control which may find outlet in temperamental outbursts

Trunk: With thin body; possible discontent with body type, compensation for unwelcome roundness

Joint: faulty joints; uncertain sense of body integrity; mother dependence, psychosexual immaturity

Structural and formal aspects:

Action or movement: strong impulse toward motor act

Size and Placement: toward up on the page; strong impulse toward motor act

Conflict indicators: petal fingers;

Direction of strokes: horizontal; femininity

bMale:

Eyes: large and accentuated; glamorized, exhibitionistic, egotistical

Ears: omitted; low intelligence

Neck: long; lack of coordination or control of impulses

Arms/ Hands: Reaching into environment; reaching for affection, social interaction

Shoulders: powerful; masculine protest, sexual ambivalence

Structural and formal aspects:

Stance: legs apart; drifting in space

Conflict indicators: weak hands and arms

Case 8**aFemale:**

Head: Looking away; possible withdrawal, rejection of environmental problems

Face: oval shape; feminine, aesthetic

Eyes: closed; reluctance to view the world, tendency to avoid unpleasant situation

Ears: omitted; low intelligence

Neck: broad thick; stubborn attitude, possible rigidity, good assimilation of impulses

Structural and formal aspects:

Stance: legs pressed together; tense, self conscious, awkward

Graphology: Lines traced and redrawn; comprehensiveness, orderliness

Shading: determined; secure person with perseverance

Conflict indicators: Feelings of inadequacy; introspective turning away, no ears

Bmale:

Face: oval shape; feminine, aesthetic

Eyes: large and accentuated; glamorized, exhibitionistic, egotistical

Neck: broad thick; stubborn attitude, possible rigidity, good assimilation of impulses

Hair: messy; sexual disorderliness

Shoulders: powerful; masculine protest, sexual ambivalence

Structural and formal aspects:

Graphology: Lines traced and redrawn; comprehensiveness, orderliness

Shading: determined; secure person with perseverance

Direction of strokes: determined; secure person with perseverance and persistence to work towards goal

Case 9**aFemale:**

Head: small; desire to deny site of painful thoughts and guilty feelings

Mouth: single line; expression of tension as if shutting against something

Eyes: Large; glamorized and exhibitionistic

Ears: omitted; low intelligence

Nose: button; childish manifestations

Clothing: overclothed; narcissist

Structural and formal aspects:

Conflict treatment: Feelings of inadequacy; grandiose figure / no ears

Bmale:

Mouth: single line; expression of tension

Eyebrows: bushy; punitive, gruff, possibly uninhibited

Hair: messy; sexual disorderliness

Nose: smaller; sexual difficulty, feelings of inferiority, homosexuality (in this case, femininity or effeminacy)

Neck: broad thick; stubborn attitude, good assimilation of impulses

Arms/ Hands: one hand behind back; guilt feelings and need to control expression and aggression

Legs/ Feet: shortening, cut; sexual ambivalence

Clothing: overclothed; narcissist

Structural and formal aspects:

Conflict indicators: feelings of inadequacy; no feet

Case 10

aFemale:

Face: extra lines (cheek area); concern over maturity or appearing to be mature

Hair: vigorous shading; brimming over some sexually deviant behavior

Neck: long thin; lack of coordination or control of impulses

Structural and formal aspects:

Direction of strokes: horizontal; femininity

Graphology: firm lines; having great deal of drive and ambition

Shading (as a conflict indicator): boundaries of clothing; conflict with regards to body

Conflict indicators: silliness of figure treatment

bMale:

Lips: Cupid's bow; exhibitionistic, vain, sexually precocious

Neck: long; lack of coordination or control of impulses

Hair: messy; sexual disorderliness

Arms: imbalanced; lack of coordination

Feet: with phallic likeness; sexual inadequacy or preoccupation

Structural and formal aspects:

Conflict indicators: Feelings of inadequacy; weak feet

Case 11

aFemale:

Eyes: piercing; overalertness, suspiciousness of motives and of others

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Hair: vigorous shading; brimming over some sexually deviant behavior

Arms/ Hands: behind back; guilt feelings and need to control expression and aggression

Waistline: excessively tightened; precarious control which may find outlet in temperamental outbursts

Clothing: overclothed (covering the entire legs); narcissist, indicative of maintaining distance from sources of harm or pain

Structural and formal aspects:

Conflict indicators: Feelings of inadequacy; slanted figure

Bmale:

Shoulders: powerful; masculine protest, sexual ambivalence

Structural and formal aspects:

Symmetry: Extreme rigid effects; defense against the release of repressed emotional stresses or protection vs. a menacing environment

Direction of strokes: horizontal; associated with weakness and femininity

Case 12

aFemale:

Mouth: single line; expression of tension

Eyes: Large; glamorized and exhibitionistic

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Hair: vigorous shading; brimming over some sexually deviant behavior

Nose: button; childish manifestations

Neck: long thin; lack of coordination or control of impulses

Breasts: large; immaturity, overprotected by mothers, strong identification with dominant mother image

Arms/ Hands: Reaching into environment; reaching for affection and social interaction

Legs: Longs; sexual symbolism

Structural and formal aspects:

Self sex drawn young: emotional fixation or wish to be young

Direction of strokes: horizontal; femininity

Bmale:

Eyes: Large; glamorized and exhibitionistic

Arms/ Hands: talon like right arm; tendencies toward aggression

Legs: Longs; sexual symbolism

Structural and formal aspects:

Direction of strokes: horizontal; femininity

Case 13

aFemale:

Head: Large; strong intellectual strivings, feelings of intellectual inadequacy, grandiosity / Female figure drawn with the larger head; accorded to be the intellectual authority

Mouth: Teeth showing; infantile or oral aggression

Eyes: Large and accentuated; glamorized and exhibitionistic

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Nose: button; childish manifestations

Arms/ Hands: Hands drawn with mitten like and grape like appearance; tendency toward infantilism

Structural and formal aspects:

Size and placement: Very large figures placed aggressively in the middle of the page; grandiosity, high self esteem and egocentricity

Direction of strokes: horizontal; femininity

Conflict indicators: feelings of inadequacy; petal fingers, very large figure

bMale:

Head: Large; strong intellectual strivings, feelings of intellectual inadequacy, grandiosity

Mouth: orally receptive; infantile dependence

Eyes: Large orbit and small eye; strong visual curiosity, possible voyeuristic conflicts

Nose: hooked; rejection or contempt

Arms/ Hands: Hands drawn with mitten like and grape like appearance; tendency toward infantilism / Reaching into environment; reaching for affection and social interaction

Button: midline; indicative of dependency, body consciousness, with concern over submission and dependence upon authority

Structural and formal aspects:

Size and placement: Very large figures placed aggressively in the middle of the page; grandiosity, high self esteem and egocentricity

Direction of strokes: horizontal; femininity

Conflict indicators: feelings of inadequacy; petal fingers, very large figure

Case 14

aFemale:

Chin: strong and projecting; need for dominance or ascendance, social aggression and leadership

Eyebrows: trim; refinement and grooming, with glamour aspirations and critical of feeling

Nose: hooked; rejection or contempt

Shoulders: powerful; masculine protest, sexual ambivalence

bMale:

Head: slightly smaller than the body, indicative of possible feelings of intellectual inadequacy

Lips: Single line; expression of tension

Chin: strong and projecting; need for dominance or ascendance, social aggression and leadership

Nose: hooked; rejection or contempt

Shoulders: powerful; masculine protest, sexual ambivalence

Arms: long; ambition in compensation for feelings of inadequacy

Direction of strokes: horizontal; associated with weakness and femininity

Overall: figure is drawn to be slightly smaller than female figure, regarding the female as the predominant sex

Case 15

aFemale:

Eyes: Large; glamorized and exhibitionistic

Nose: button; childish manifestations

Arms/ Hands: one hand behind back; guilt feelings and need to control expression and aggression

Waistline: excessively tightened; precarious control which may find outlet in temperamental outbursts

Structural and formal aspects: Self sex drawn young; emotional fixation or wish to be young

bMale:

Head: very large and expansive; indicative of intellectual accordance to the male sex or feelings of intellectual inadequacy or grandiosity and egocentrism

Looking away; possible withdrawal, rejection of environmental problems

Eyes: large and accentuated; glamorized, exhibitionistic, egotistical

Hands: in pockets; evasiveness

Legs and feet: smaller compared to trunk and head; feeling of deficit decline

Nose: hooked; rejection or contempt

Shoulders: powerful; masculine protest, sexual ambivalence

Arms: long; ambition in compensation for feelings of inadequacy

Direction of strokes: horizontal; associated with weakness and femininity

Overall: figure is drawn to be slightly smaller than female figure, regarding the female as the predominant sex

Structural and formal aspects: size and placement; very large placed in the middle of the page; grandiose and egocentric

Feelings of inadequacy: very large figures; weak hands and in pockets; thin and short legs; turning away from the world; looking away

Please refer to table 5 p. 85 for summary.

4.4.3. BSRI (Bem Sex Role Inventory)

All respondents scored low on masculinity and high on femininity in the scale indicating strong identification with the female gender and regarding the self as women and not men. All respondents scored a mean of 18.5 in the femininity scales and a mean of 2.3 on the masculinity scales.

4.4.4. SAGE

Though these tests are weak since these tests are not concretely standardized, these tests are popular among American and other English speaking transgenders because of the fit of the items to the categorization of a person as transsexuals. All respondents scored as transsexuals in these tests (mean of 860), confirming their transsexual state or female identification. The interpretation notes indicate the following for all the respondents (your appearance is Androgynous, you brain processes are mostly that of a female person, you appear to socialize in a very feminine manner, you believe you have serious conflicts about your gender identity, you indicated you were born male).

Overall, all respondents indicated and projected female identification and low or no masculinity. All respondents are transsexuals based on the tests.

4.5 Cases Life History

As the cases are presented, the real names of the subjects were changed as well as other pertinent information (like their official residency, employer's name and school name) that the subjects themselves wanted to conceal in order to retain their stealth mode and protect their privacy. This section includes the life history of the fifteen respondents (refer to the Appendices section for the questions used). Some of the questions used

were lifted from the Quality of Life Questionnaire (Winter, Vink and Sassot).

For the purpose of staying consistent with the usage of gender pronouns, the pronoun “she” was used all throughout to maintain the way they identify themselves as women.

The respondents also requested that they would want to be referred to as “she”. The subjects may have presented an approximated age when asked about these occurrences.

Case 1: “Diana Prince”

Age: 32 (post operated)

Height: 175cm. Weight: 63kgs.

Birthplace: Quezon City

Ordinal position: youngest of two

Education: College graduate, Bachelors in Management major in Finance and Banking with 24 units earned in MBA

Work: Owns and manages her own Bar and Restaurant and a Beauty Salon

Sexual Orientation: Heterosexual

Religion: Atheist

Diana Prince fondly remembers those days in her grade school years wherein she would always imitate the twirl of Lynda Carter in the famed TV show Wonder Woman. Diana always loved Wonder Woman and hoped that when she grows up, she could also have a body like that of the famous TV actress. At age 5, she already identified herself as a woman. She would always watch her mom put on make up although her mom would tell her not to. Diana did not like her given name, it is too masculine and it is only for boys. She never paid attention to her toys (toy cars, robots, guns etc.). Instead, she would borrow her sister’s dolls and bags. She was also fond of the colors pink, violet and yellow and hated black, brown and blue because she would associate them with masculinity. Diana’s mother was closer to her since she would usually be at home unlike her father who was working abroad in between (Saudi). She was fond of watching TV and identified more with the female characters like Maria and Ms. Piggy of Sesame street, Wonder Woman, Cheetara of Thundercats and Charlie’s Angels’ Farrah Fawcett. Her playmates were girls but sometimes she would play with boys; only if these were role play games like Superfriends or “bahay bahayan”, wherein she will always assume the female characters. In school, she would be more comfortable seated with the girls rather than the boys and would be more comfortable working with them.

She had her first crush at the age of 9 with a boy named William, two years her senior. Diana felt different and excited but shy; she waited for William to court her (manligaw). Around this time she would always wear her female classmates’ uniforms after classes since she dislike the boys’ uniform and felt uncomfortable wearing briefs and sandos. Studying in a Catholic University with top medical training, she once asked doctors in

their clinic about the possibility of converting her penis into a vagina. This was when the term transsexual was first introduced to her, she was amazed! She then added a new goal and ambition- to become a “new woman!” Diana recalled that this may have been the reason why she became an exemplary performer in school and active in the household. She would wash the dishes, assist in cooking, clean up after meals and watch their maid do the laundry. “No one stopped me in witnessing female household chores so I felt that I can do things confined to women.” Diana had a mind set of what is feminine, “women are different from men, being feminine means being soft, mild, finesse and sophisticated.” She added that “I guess I had to exert an extra effort to be like a woman.” She recalled that sometimes people would ask her why she thinks she is like a girl, she always tells them and she believed that she may have been born in the “wrong body.” She did not like though being called “bakla” and instead she accepts being considered “pa-girl” or “binabae” which she jokingly explain as being “binangungot na babae” (a woman who had a nightmare). She remembers the image of homosexuals growing up, they were “big”, strong, loud, and touchy of men and unlady like.

In high school, Diana joined the drama club, the glee club, the Home Economics club and the exhibition team of volleyball (mostly girls). She started wearing make up and putting on cologne and powder in high school. She was fond of watching fashion shows aired on television and would copy the walk and poses of models. Her role models were Melanie Marquez, Margie Moran, Sushmita Sen and Miriam Quiambao. She eventually learned about beauty pageants staged in barangays for gays and transgenders. She was fascinated because she never thought that there are “gays” who could be so beautiful and be truly ladylike. “I wanted to be like them too,” Diana remembered. “I approached some of them and started asking for tips on how to become like a woman and how to be beautiful.”

Diana was a devout Catholic. She sang in church every Sunday and would pray the rosary and St. Jude’s novena. She remembers praying for people to stop calling her “bakla”, for her to be liked by Harry and for her to be more womanly and ladylike. In college, she started feeling more sensitive about how people would tease her and call her “bakla”. She would frequently hear her relatives and family tell her to dress and act like a man.

Diana’s first boyfriend was a Canadian (23 year old then) who sees her as a woman. She felt truly like a woman in this relationship because he treated her with dignity and genuine love. Their relationship lasted for close to three years and it ended because Diana cannot yet move to Canada. In college and after graduating, Diana concentrated on looking for information about transsexualism and differentiating this from homosexuality since she has always been certain she is different from homosexuals.

It was at this point that she felt that she could turn away from the Catholic Church since she felt constricted by the church’s view of homosexuals and transgenders. She knew that she could maintain her existence without always asking for intervention from a powerful being and that we are in control of our own lives. She also encountered the realization that we determine our own fate and we can do good to others without relying on all the teachings of the church.

After graduation, Diana hurdled the challenges of looking for a good job in spite of her presentation as a woman yet she was rejected by at least twelve companies. She vowed to

put up her own business. She went to Japan as an entertainer after having started to take hormones/HRT (at 19 while still studying, she got a tip from other transgenders that the best pills then were Diane-35 and Micropil as well as an IM administration of Depo Provera) and started to keep her hair long. She began to pluck her eyebrows and started wearing brassiere. She also began using a female name on all unofficial documents and transactions (she started using a female name Diana in grade school at the age of 8). In Japan she learned a lot of feminization and beautification procedures like whitening (Metathione) and hip expansion (helicon and synthetic fats). She decided to undergo FFS beginning with rhinoplasty followed by chin and cheeks augmentation and finally breast augmentation by means of silicon implants. She underwent orchiectomy (scrotum restructuring) when she was 24 in Thailand. All of her surgical operation was funded by her rich Japanese businessman boyfriend who also financed the establishment of her entertainment bar and restaurant as well as beauty parlor in Nagoya in 1999.

She underwent complete restructuring of her genitals when she was 26 also in Thailand and financed by her boyfriend as well. She is planning to file for legal name change in the Philippines so she can use her female name in all official documents and so she can truly live as a woman. She plans to marry her Japanese boyfriend who wants to marry her and adopt children for them to nurture. Her boyfriend is heterosexual and only sees her as a woman with different genitals. She plans to grow old with him and adopt children. Her biggest goal at this stage is to legalize her female name and remain as a woman. She is close to her family especially her father. Her business is very successful and she is planning to have a franchise or a branch here in the Philippines.

Case #2: Wanda (post operated)

Age: 40 y.o.

Height: 171 cms / Weight: 63kgs.

Family ordinal position: 3rd of 4

Education: Graduate; Fine Arts major in Interior Design

Work: Business woman

Sexual orientation: Heterosexual

Religion: Buddhist

Wanda recalled that her earliest memories date back to when she was four years old. She is the third of four children and the others are boys. Her earliest recollection was of those with her brothers playing in Luneta Park and Manila Zoo. Wanda also noticed that she seemed to be closer to her father ever since and that this persisted until now. She comes from a devout Catholic family who would go to Sunday mass and other church days like "Baclaran Wednesday" and "Quiapo Friday". She strongly remembers that at this early, she must have already felt that she was more of a girl than a boy and this is reflected in all her daily routines. She played with any kinds of toys but she only took care of the "girl toys" like dolls and cookware set. She was fond of assuming female characters as well like Wonder Woman, Marvel Girl, Storm, Emma Frost, Darna and Dyesebel when playing make believe games.

Wanda recalled that she does not like wearing sandos and caps because she found them to be inappropriate. She felt that these were masculine. Her early concepts of masculinity came from her grandfather, uncles and father as well as her godfathers and neighbors. Masculine for her was being physically strong and brave, being fond of undressing in public, having a deep and strong voice and body hairs. She learned early on that policemen, firemen, construction workers and drivers were among the most masculine or “macho” men and she does not want to be like them. She likes to be like her mother and aunt Perllina, soft, feminine and curvy (her early concept of being sexy). Among her playmates, she distinguishes a masculine boy by the strong leadership that they assume when they play games. When they lead and dictate or when they assume the part of Superman, Batman or Captain America in heroes’ games, they are masculine or macho.

Wanda recalled that her first ambition was to become a nurse just like her aunt Perllina and work in the U.S. in order to earn dollars. She said she also dreamt of wearing a nurse’s cap, this was when she was about age 8. At around this age (8-10 years old), she was fascinated with actors like Brooke Shields, Phoebe Cates, Lynda Carter, Kate Jackson, Loni Anderson, Farrah Fawcett and Jane Fonda. She hoped to be as feminine and beautiful as those actors and that she usually copied the mannerisms of those actors. She also started to love singing and lip synching at this age, mimicking female singers like Barbra Streisand, Angela Bofill, Dionne Warwick, Olivia Newton John and Madonna. She forced her mother to buy her various cookware sets and dolls. Looking back, she now wonders why her mother even had the interest to comply with her request. In school, her favorite subjects were English, Home Economics and Science. Her favorite saint was Saint Agnes, because she was a martyr yet her hair was so long.

At age 11, Wanda wished that her hair is very long and beautiful. Wanda recounted that she did not have any difficulty expressing herself naturally as feminine even to her father. “He is very understanding and genuinely loving,” says Wanda. She also realized that unlike the fathers of most of her “gay” friends, hers must be among the nicest. She also had her first crush at this age; his name is Arthur- a classmate. She found Arthur handsome and easy to get along with. She developed a fantasy of Arthur as liking her in return and wanting to kiss her.

Wanda’s friends are usually girls and effeminate boys. She earned her female name at age 11 after her female friends started bestowing upon them female names. She felt that hers was feminine and sexy sounding. In high school, Wanda had more female friends and this time she identified her effeminate friends as gay boys who see themselves as females too, just like her. She dictated to her uniform maker that she want extra pleats in her pants and that she wanted them to look more fitted. Her bags are usually colored pink, violet, lemon yellow or apple green. Some of her bags are laced and her white towel sacks too were laced. She had a new role model around this time, Melanie Marquez, who won the Miss International beauty pageant. She started gaining interest in beauty pageants and modeling. She was led to watch beauty pageants staged in malls and barangay halls until she accidentally chanced upon a beauty pageant wherein the contestants were all biologically males. She asked some of them what they have been doing why they turned out to be feminine and beautiful, and she learned that there is a medicine that allows a man to soften his masculine features and become womanly. The

contestants (who we now know as transgenders or transsexuals) simply call these medicines as pills and injectibles and that the popular brands that Wanda can choose from would depend on her budget. The cheapest were Micropil and Trust as well as Depo-Provera while the most expensive is Diane-35. At age 15, Wanda started taking female hormones (HRT) to be specific her first brand was Micropil which she bought after saving up her “baon” or lunch money. Just 4 years earlier,

Wanda also started dressing like a female after her classes or on weekends. She would wear women’s swimsuits and gowns with her friends (in her friends’ house or in hers when her parents are away). She started buying T-shirts which are padded and stretched fitted jeans. She also would put on baby powder, lipstick and eyeliner almost everyday usually at the end of her classes. After completing her first cycle of female hormones, Wanda started to take Diane-35 which was more expensive yet is reputedly more effective in emasculating. She also started wearing panties and though she would not wear brassieres everyday, she would make sure she keeps her first two pairs which she bought as she would wear them when given the chance. Wanda once more had a big crush on a male schoolmate and this time she knew that she fell in love. Eventually, this crush became her first boyfriend and this lasted for nearly seven months. Wanda said that in this relationship, Wanda was treated like a real female.

At 16, Wanda placed third in a beauty contest for transgenders and won P1,000 and trophies. While waiting for her turn, Wanda asked the other contestants and the “Japayuki” transsexuals how to become a woman aside from taking hormones. She learned about the surgery called SRS. Wanda failed to accomplish her initial ambition to become a nurse because instead she took Fine Arts majored in interior design. She learned that in the university she wished to study, only fine arts students are allowed to grow their hair long (for the males) and that most of the students here are females and gays.

In college, Wanda joined the university dance troupe and cheerleading squad and stayed active in extra curricular activities particularly volleyball. She started to research about homosexuality because she felt that she might be a specific variant of a homosexual, one who is more “girly” or feminine. At 18, Wanda discovered through a TV movie entitled “Second Serve” that she might be a transsexual, a transgender or a transvestite. Though she was confused at first, she was happy for even if these new concepts are still vague at least she confirmed that she is not a homosexual. The first few things she learned about these concepts is that a person’s body is not exactly one’s sex and so one maybe exhibiting the gender of the opposite sex. She felt affirmed; she always knew at this point that she is a woman in a man’s body.

She learned that in the other colleges, male students should have a short hair and that the “gay” students should never wear make-up or women’s clothes. She estimated that she must have joined at least 120 beauty pageants. In the pageants, she learned more about the routines and the procedures that most transsexuals undergo in order to feminize. She continued HRT, and started taking “glamour pills” like glutathione (which has whitening properties) and supplements. Her hair is very long and she would wear only women’s clothes and accessories.

By the age of 25, Wanda started working in Japan as an entertainer (singer, dancer, and impersonator). She started to survey and gather information about SRS. She also started to undergo the psychiatric evaluations which will be her passport to surgery. She went to the Philippines for further evaluations and went to Thailand for the series of FFS (facial feminization surgery). She loved her new nose, chin and cheek. She also had implants and orchiectomy. Wanda was 28 when she completed her SRS and FFS. Now, she is hardly recognizable. She truly looks like a woman and very beautiful. She realized that after the surgery, she has had more customers and admirers in her line of work. She even won one of the biggest beauty pageants for post operated transsexuals in Japan. Wanda also met her long term boyfriend whom she now refers to as her husband. She met him in 1995, shortly after her SRS. He is a Japanese businessman. They have been living together and are still together for more than ten years now. They have had several attempts to get married but it has been quite impossible because of non-existence of marriage laws for transsexuals. Wanda filed for legal name change in 1997 and it is still pending. She wanted to make all her legal documents reflect her female name. Since 1998, Wanda has been managing a small business in Japan and owns a beauty parlor in the Philippines managed by her sister-in-law and mother. In between, she would still perform as an entertainer. She maintains her new body by following all of the regimens set for post-operated transwomen and according to her, this includes "healthy sex." In 1998 also, Wanda rediscovered her faith. She felt that Catholicism does not answer all of her faith related questions and issues and that the church has been materialistic and inconsistent. Wanda pointed out that, all her life, her family has been accepting and loving and understanding.

Wanda accidentally discovered Buddhism in her search and felt interested with the new and progressive concepts. Wanda became a full time Buddhist in 2000. She says though that she still believes in God, a God who is just, forgiving and loving. She also looks back and is grateful to her recently deceased father who has accepted her for what she is from the very beginning. "Growing up female in a boy's body was never difficult at home," according to Wanda. She continued, "However it was quite difficult outside the house as others do not understand what a simple situation this is." But she looked back and found herself consistent. She never doubted her gender from the very beginning. "I was destined to be a woman; I don't know what went wrong but what is important is that I am now truly a woman." Wanda is very happy with how she turned out to be. She hopes that her legal petition will be granted and that society will learn more about transsexualism. She is happy that at 40 years old, she is wiser and stronger and most of all beautiful. She looks forward to be successful in her business endeavors and that this relationship will last forever (with or without a wedding). She is now more focused on maintaining a healthy body by taking supplements and doing exercises and having a healthy lifestyle. She goes to women's comfort rooms without reservation and falls in line to where women would. She would also collect undergarments and make-up even though she has already minimized her usage of make up. "Natural is better," Wanda laughingly expressed. She also hopes that the field of Psychology and medicine would be more positive in order to effectively help all other transsexuals in this world.

Case# 3 "Cassandra" (preoperated)**Age: 24****Height: 171cms Weight: 57kgs****Family ordinal position: eldest of three****Education: Graduate; Nursing****Work: Call center agent/ part time entertainer****Sexual orientation: Heterosexual****Religion: Catholic**

Cassie is petite and femininely in all ways. Her hair is long and she hardly wears pants as she always prefers wearing skirts and dresses. Her favorite color is pink and violet, because according to her, these are the most feminine of colors. She has been under HRT for almost 8 years now, starting at the age of 16. She learned about HRT from her Japayuki transsexual friends and post operated transsexual beauty queens. She plans to continue FFS (after rhinoplasty) even if she is hardly masculine and her top priority is her forehead and chin (she finds it too short). Cassie is currently working as a part time entertainer and make up artist. She also looks for other means of making money like conducting dance choreography and designing wedding and pageant gowns. She has been in a heterosexual relationship for about three years now. Cassie plans to undergo SRS before she turns 30. After a successful SRS, she wants to migrate to France and live happily with her boyfriend. Her earliest recollection would be those at the age of 5. At this age, she loved playing only with dolls and doll like figurines and action figures. She also finds herself more similar to all girl playmates than any boy playmates. Cassie remembers copying the mannerisms or movements of her female classmates especially those in her grade school days. She fondly remembers her first best friend Anne, Trixie and Lala. Cassie explained that these girls were the most instrumental in her understanding of how girls should behave.

She studied in a coed school though the students were still mostly boys. She has a younger brother whom she quarreled quite frequently and a younger sister who she had a "love/ hate" relationship with. Cassie identifies her younger sister as someone she would rather confide with since she understands her. Cassie is closer to her mother just because she was mostly around. Her mother is a plain housewife whereas her father came to a point when he was working in Oman then Qatar that he would only be in the country for at least 15 days. Cassie found her father to be very accepting and loving of her in spite of her obvious flamboyance. She would play with both boys and girls but would find convenience in being with boys when playing role play games since she gets to be any female character. Her male playmates though could not stand playing "bahay bahayan" for prolonged periods of time. Cassie most fondly remembers and loved Barbie dolls. She has stolen two of her younger sister's dolls; and asked her dad, to buy her one each year. Her dad initially reacted with awe but was not distraught by this request. He bought at least six Barbie dolls for Cassie for the nearly 14 years that he worked in the Middle East. Cassie's shirts were mostly designed with the characters of her liking like those mentioned above with a few more in addition like Wonder Woman, Supergirl, Catwoman and Hello Kitty. She was always in the top 10 of her class and was most active in music and Arts. Cassie was a class singer and she loved to dance. "I was hardly shy," quipped Cassie, "but I was also 'mahinhin' at the same time." Cassie found herself constantly hearing from others that she tends to be very feminine and yet very pretty. "They always wished 'na sana naging babae na lang ako'(how they wished I was a female instead)."

Cassie felt that if indeed she was 'gay' she must be the most "girly" and feminine 'gay.'

In high school, Cassie, started refuting other people whenever they would call her 'gay.' She would explain that she is a girl but is trapped in the body of a man. This means that if Cassie has her way, she would rather not talk about being a "girly" boy. Cassie felt a little helpless and sometimes impatient whenever people insist that she should have been a boy instead. Cassie would take every opportunity when no one watches, to use the women's washroom and feels so awkward when using the men's. She loved to watch her aunt Bea put on make up whenever she goes to work. Cassie is not fully discounting the possible influence of her aunt; she does feel that her Aunt Bea was instrumental in her understanding of feminine ways. She learned about make up, dresses, places and women's health through her aunt. She finally felt the excitement of falling in love or at least infatuation when she had a big crush on her Physics and Trigonometry instructor. He was her first crush and she had many fantasies developed. Most of these fantasies where of her hoping to be his girlfriend and eventually, his wife. Shortly before graduating in high school, Cassie gave a gift to her crush and told him of her infatuation. Even if her teacher explained that a romantic relationship is not plausible, Cassie somehow expected that her fantasies will not come true. High school was filled with some explorations for Cassie. She started dressing like a girl when given a chance even when she was just 8 years old, but high school gave her the ample opportunity to expand her choices. She would wear skirt during art and music classes since her teachers in these subjects were very accepting of her. She secretly asked their school tailor to make for her a girl school uniform fit for her. She would wear this during lunch breaks or after classes or on whenever she is at home. She started putting on make up in high school, at around the age of 14. Her favorite make up is the lipstick. She always wished her hair to be long and she admires Melanie Marquez's long beautiful black hair. She loved watching beauty pageants and modeling programs too. Cassie was quite fond of collecting stationeries and cologne too.

She saw her first "Miss Gay" pageant in Sampaloc. Cassie now started asking about how she can look as feminine and beautiful as those "gay" beauty queens whom she later came to know as transsexuals. Cassie now learned about HRT and without any amount of reservations, she started to buy pills too, beginning with Premarin. She started at the age of 16 and has not stopped since. Cassie has been taking hormones for almost 9 years now. Now she is taking the more expensive ones – Estrofem, Androcur and Spiranolactone. Cassie took up Nursing in college upon the request of her father. He expected Cassie to find a job abroad so that she will not be discriminated at work. In college, Cassie became more of an average student academically since she was more preoccupied with ways on how to become a female and in extra curricular activities. Cassie continued researching about transsexualism this time in the library and towards late college, in the internet. She is relieved because she learned that her condition is not an abnormality, that indeed she is a woman trapped in a man's body. She continued to observe all other transsexuals and asked genetic females about how to take care of a female body. She even asked her sister to allow her to study her vagina and breast so she would understand these anatomical structures very well.

At the age of 19, Cassie had her very first boyfriend, an Australian who was thrice her age. She met him in Malate during a street party and she fell in love with him. This

relationship lasted for nearly two years. She even had the chance to go to Melbourne and Perth courtesy of this boyfriend. Eventually this boyfriend would be the sponsor to the first step of her FFS – her rhinoplasty. Though her nose ridge was high enough, she wanted to trim the base of her nose. She felt bad to end her relationship with him when he insisted on making her stay in Australia and immediately undergo SRS. She then met a French businessman in one of her last visits in Australia and he contacted her when she reached the Philippines. College was a stage of solidifying her knowledge about homosexuality then transsexuality. She was able to graduate but did not anymore pursue the licensure examinations for nurses. Instead she went to Japan for almost two years to be an entertainer (singer and dancer). In Japan, she learned more about how to emasculate herself and how to be more beautiful. She has now felt the conviction to undergo SRS and complete FFS.

She went back to the Philippines, and decided to work in a call center since she knew that call centers would not discriminate against a transgender. She has been working in this call center for almost a year and plans to leave next year to go to France.

Cassie is still a Catholic though she does not go to church consistently, she does pray everyday to give thanks and seek blessings. Cassie further explained that the church was never an influence in any of her lifelong decisions but has kept her grounded by reminding her of morality and social responsibility. She still maintains a close relationship with her mother and father and other family members and relatives. She is very grateful that she led a life full of love and friendships and without making enemies. She is also now working as a part time entertainer in a big theatrical company that features only transgendered and gay performers. She earns good money through her regular jobs and sidelines. Her boyfriend also sends her a monthly allowance. She is now undergoing initial psychiatric evaluations that will determine her eligibility to undergo SRS. She also plans to file a legal name change so her documents can also reflect her chosen female name. She is healthy now despite the occasional asthma attacks and allergies. She believes her future is bright and challenging and she is a very optimistic and determined person. She is very happy and contented and looking back, she knew she has always been right – she is a woman!

Case # 4: Elvira / Elvie (Non operated)

Age: 26

Height: 180 cms. Weight: 64

Family Ordinal Position: Only Child

Education: Graduate; Sociology

Work: Part time entertainer / works for family business / free lance make up artist and designer

Sexual Orientation: Heterosexual

Religion: exploring various Christian groups (Born Again/ Jehovah's Witness/ Baptist)

Elvie is a very beautiful and commanding person, commanding primarily because of her statuesque frame. Elvie has always wanted to be a female fashion model. She always knew that deep inside is a woman and not a man. She went through a phase wherein she would explain to people that it must have been a mistake for her to be in a boy's body but in time, 'everything will be right as it should be.' Elvie is very happy now as a

transsexual woman. She does not feel the urge to stop in every waking moment to explain herself to people. She now understands that as a transsexual, one's sex is not always one's gender. Elvie has no immediate plans to undergo FFS and SRS but she is open to the possibility. She considers herself to be a non operated transwoman if not preoperated and what this simply means to her is that she may or may not undergo SRS but regardless, she believes that she is still a woman. Elvie first learned that she is a woman at the age of 3. Elvie remembers that at this age, she has been closer to her father who was also a church pastor and construction supervisor and architect. She fondly remembers going to Rizal and Pampanga to see vast plain lands which are planned to be converted into residential and commercial communities.

Elvie also has regular playmates even if she is an only child. Her neighbors, all of whom happens to be boys are her constant playmates. She would rarely have a female playmate until the age of 9. She remembers though that in spite of the virtual absence of female playmates, she felt that she is in no way different from all the other girls she see around her. She also dreams to one day look like her mother who was working then as a part time fashion model and movie extra. But since her mother has always been busy with out of town commitments, she became closer to her father, who would tag her along in all of his assignments. She also identified to having developed her first crush at age 5. Her crush was a 12 year old boy who was always playing basketball opposite their house. Elvie did not wonder why she liked a boy; she felt it was natural for her to be with a boy and not a girl. In role playing, she always assumed the female characters among her favorites were, Wonder Woman, Darna, Dyesebel and Storm. She also loved watching cartoons and educational programs, especially if they were about animals. At this stage (age 8-9) she thought of becoming an animal specialist (Zoologist). In school (an exclusive for boys), Elvie was an extrovert and was very active in school games and extra curriculums. Among Elvie's favorite clubs were the Home Economics club, English club and Glee club. She was very fond of singing and learned that she could also dance well. She confined her dancing to classroom events only or major school programs. The most memorable school program she participated in is the Foundation day wherein she was costumed as Dorothy of the Wizard of Oz. She used the red high heels of her mother and she wore a blonde colored wig. She had another crush this time, a classmate whom she wished to be her boyfriend. At age 12, Elvie, loved wearing hairclips and head bands as well as rubber shoes for girls. She was fond of collecting stationeries too and loves seeing and buying Hello Kitty and My Melody things. She also admired the actress Maricel Soriano and the singer Regine Velasquez and bought all of her records and started copying her voice. She also would allot a time each day to learn how to dance better whereas in between, she would mimic female fashion models. All throughout grade school, Elvie would always counteract people who would say that she should have been a boy and then she would explain that she never was a boy, but a girl who may have been temporarily trapped in a boy's body.

In high school, Elvie met her first boyfriend, a classmate. He loved her and thought of her indeed as a female. Her first relationship lasted almost two years. She received different gifts from him including a teddy bear and a bracelet. Her best friends now are girls and gays, who happen to be her friends up to now. She began to make herself more femininely and acquired finesse. She was fond of watching beauty pageants and fashion shows. She also learned to focus more on her studies and she even landed in the honor

roll. Elvie would also see her friends almost every Sunday to go to church and sing and then go to malls and look at women's dresses. Though Elvie started wearing women's clothing articles at the age of 9, Elvie would regularly schedule wearing these, whenever possible, especially whenever she is with her friends. She sometimes wears bra and girls' panties underneath her uniform. The school uniform pants in fact, were tailored in a way that the cut is more feminine. Her rubber shoes were also bought from the girls' section. She continued to use female name that she gave herself at the age of 10. Now more than ever she enjoyed this name as it befits her. Elvie thought that even if she knows that she is really a female, she temporarily assumed the possibility that she is gay. She started asking people about homosexuality and if there is a chance that she will transition from homosexual to being a full woman. She mostly asked gays who worked in beauty parlors and her friends. She sometimes would look up the encyclopedia and was surprised to learn that Shakespeare, Richard the Lionhearted and Alexander the Great were all gays. She wondered if they also thought of themselves as females. Elvie graduated from high school with honors.

In college, Elvie felt that it was more challenging to be "pa girl" (femininely gay). Elvie however went on to be as feminine as she wanted. She started taking hormones at 17; she briefly researched about the components of Estradiol and Cyproterone acetate in college. She first took Diane -35 which is expensive. She also had a once a month intramuscularly administered Depo- Provera. Elvie would still secretly use the women's restroom, a habit she started in grade school. "We should use the women's restroom," said Elvie with conviction. Elvie would still wear bra and panties as her undergarments and she had all her school pants tailored in a way that it will look very feminine. She would also wear thicker make-up; she began this in high school. Her favorite pieces of make up are lipstick, foundation, powder and eyebrow liner. She also had the chance to let her hair grow long since she studied in a school that is not very strict about physical appearances. Elvie also showed greater refinery in her actions, she would now be mistaken for a genetic female that several times, she would use the women's restroom without being asked to step out. Her only tell tale sign was her height, but she loves the fact that she is very tall. She also joined beauty pageants, a total of 40 between the ages of 16 to 21. Her most unforgettable was when she won an amount of P15,000 and took all the special awards especially the most coveted, "the most feminine award". She now felt the confidence to exude herself as femininely as possible.

Elvie though an average student in college, was very active in extra curricular activities. She was a literary staffer in their college journal. At age 18, she learned about the term transsexualism and researched extensively about it. Though for a long time, her understanding of it is that they are homosexuals too who undergone surgery to be like a woman, she knew they were really born female. She always believed in "Nature versus nurture" and that as a Sociology major, society was not prepared for a more advance concept. Now, she has fully understood the nuances of transsexualism. She fully identifies herself as a transsexual but she does not yet preoccupy herself with the thought of undergoing SRS. Before graduating, Elvie met her long term boyfriend who is African-American. He is heterosexual and rich and as she described it, in love with her. She met him in a party of her cousin who married an African-American. They have been together for almost seven years now and every now and then they consider the possibility of marrying. They also considered adopting children as they grow older. Elvie, never felt

confused about her identity, she only assumed homosexuality in her high school stage to have an identity since transsexuality is not a known concept in the country. After graduating, Elvie had fears if she would find a very good job since she has always been aware of stories of discrimination spreading around. Some of these stories came from her gay and transsexual friends who also applied for various jobs. She learned that although no one would tell them about their being “gay”, their mere rejection from the application is enough reason to attribute possible prejudice. This somehow discouraged Elvie from looking for a job and instead she was supported by her parents for her to have her own job. She is a part time fashion designer and make up artist and she is also the Secretary and Manager of her father’s construction and architectural firm. She also manages their hardware and in between she would be an entertainer. Just like Cassie, Elvie works in a premiere theater group that features only transgender and homosexual performing artists. She is happy and aside from the minimal and yet expected statements of confusion and refutation of stranger and colleagues about transsexuals, she is determined to become a successful female. She is currently trying different Christian groups since she felt that she does not feel at home anymore with Catholicism. She has been studying Baptist Christianity after learning about Jehovah and Born Again. “I only believe in one God, a God who accepts and loves unconditionally!”

Case # 5:

Armida : (non operated)

Age: 28

Height: 187 cms. Weight: 72 kgs.

Family ordinal position: Youngest of two

Education: Graduate; Psychology then Nursing

Work: Nurse and Nurse Instructor in Birmingham, England

Sexual Orientation: Heterosexual

Religion: Anglican / Catholic

Midz is a very big person, literally. She is the tallest subject of this study. She said that in spite of being a distraction once in a while since this is her most pronounced telltale sign, she loved being powerfully built. She has finally found peace and identity in another country. She described the U.K. as a truly advance and free society. She did find it challenging to live in the Philippines, but England is just about everything a transsexual can ever dream about. Her earliest memories were of when she was 6. “Everything that happened prior to that was a blur.” Midz studied in an all school for boys all throughout (although her college included a few female students). It is a Catholic school for boys and has very strict standards and is also known for being extra strict against gay male students. She calls herself to be an introvert back in grade school because she did not really mingle so much with the other students. She was fond of going to the church and loved singing all church mass songs. She believes in all the teachings of the Bible. She was not very active in sports and games and did not really join all the games that other kids play. She however played some games like “patintero” and “hide and seek.” Midz, however did love playing with dolls and cookware set. She also dreamt of becoming a nurse someday. Midz originally conceived a nurse as being a feminine profession. At the age of 6 to 8, Midz already felt that she is more of a girl than a boy but she does not know how to describe it. She remembers having a crush at a boy at the age of 8 and she already started using a girl’s name at the age of 9. Midz, did not really enjoy role play games and

she did not relate to other female characters like Wonder Woman or Supergirl. Midz's father works part time in a construction firm and is also a part-time engineer. Her mother is a public school teacher. Midz is not as close to her elder brother who is almost ten years older than her. She however appreciated the fact that in spite of their quite distant relationship, her brother did not bully her growing up. She could not really recall fond memories with her brother since they were not that close. Midz was also reluctant of fighting, feeling that this was a very masculine reaction. Though Midz assumed a female name at age 9, she did not use this name often, feeling that it may not bode well with people surrounding her.

In high school, Midz had an even less dynamic experience because it was a time of conformity. She calls this conformity because since her school was very strict, she felt it was proper for her to conform in order to fit in and not be reprimanded by people in authority. Midz tried to suppress her flamboyance in order to avoid being reprimanded, but deep inside she felt that there is so much need for her to express her wiles. She hated the way people around her would think of gays as people with an illness and that they can change in time. Though she still love going to church or reading the bible, Midz hated the way that the church repeatedly emphasized that homosexuality is a sin. This was when she felt that she has started to become defensive whenever the topic of discussion was about homosexuality. Though Midz felt that for the longest time she is a girl, she embraced the possibility of being a homosexual since there is no way for her to explain that though her body is that of a man's her mind and heart is that of a woman's.

She observed all gays around her at this stage and tried to absorb as much information as she can. She knew that one day she will learn a lot from everything that she observed. She also was fond of observing all girls and copying them when no one is watching. A few of her school things were bought from Sanrio which is known for its 'feminine designs and labels' like Hello Kitty and My Melody. Midz started to wear women's clothes at age 15. She would borrow her female friends' clothes, shoes and even under garments. She would do this discretely. She also felt that she would rather not cut her hair as she would look better with long hair but she was only compelled to cut her hair because of school rules. Her next big crush came at this stage when she felt a very deep infatuation with a college student who is also a basketball player. She even tried to give him love letters and gifts but she soon felt the disappointment when he overheard him say "hindi ako pumapatol sa mga bading (I would never have intimate relationships with gays)." She felt that this condescending remark was expected of any man.

In college she started having female classmates, but even if this would have presented some level of comfort for her, Midz felt that the females would only overshadow her. She was quieter in college and started out as introverted. She also tried to dress more masculine in order to avoid the feeling of ostracism. She avoided hanging out with the boys in order to avoid any explanations. Because of this, she started a duality. A life in school and a secret life that allowed her to be more expressive of her femininity. In school she was a conformist and discrete. After school, she would hang out with her friends (mostly girls and gays) and she would wear girls' clothes and make up. She would also join beauty pageants. In her spare time, she would go to beauty parlors to interview gay beauticians about how to maintain one's figure and hair and also about how will one become happy and successful being gay. In a TV documentary she accidentally watched,

her life would take a different turn. She just learned that she is not really a homosexual but a transsexual. She is indeed a woman trapped in a man's body. She was inspired by this encounter. After that, she started researching in the libraries about transsexualism. She encountered a book about Robert/Roberta Cowell, the very famous British air pilot who would become sensational because of her transition from male to female. She read the book wholeheartedly and after reading, she had a new conviction: she will renew her 'femaleness.' Suddenly, the once constricted and reserved and avoidant Midz became more extroverted and flamboyant. She started HRT (at 18) and started to trim her eyebrows. She started to buy female casual clothes and shoes as well as accessories. She was practicing to put on makeup and started collecting them too. Midz is happier and more directed; finally she found her sense of meaning. She continued to be as religious but she was shunning all forms of refutation hurled at her or indirectly pertaining to homosexuality. She just realized how unfamiliar Filipinos are with transsexuality.

Though her professors and guidance counselors would notice and apprehend her about her feminine ways, Midz was resilient and apathetic. She felt that they are afraid and themselves apathetic of what they do not know. After graduation, Midz continued to study, this time as a nurse. She reverted to her original ambition. Her course in Psychology helped her to understand behavior but she needed to get out of the country to truly experience her freedom. As she studied in another school, she continued to free herself so to speak. She continued HRT and female dressing as well as joining beauty pageants. While studying nursing, she was also studying anatomical structures and beauty. She started to do many internet researches about homosexuality, transsexuality and femininity. She did a lot of experimentations in order to achieve the look she wanted. She chose not to work while studying because she was afraid of experiencing discrimination. But after finishing her post graduate in nursing, she was able to land a very good job in a top hospital in Birmingham, UK. In England, Midz found her true freedom; she joined a society of transgenders and even underwent rhinoplasty. She is still in HRT and she has decided that she may or may not undergo SRS. She has also found a long term and genuine romantic relationship in a British doctor who only thinks of her as a woman. Midz is whole and happy and is currently using her female name in all non official transaction. She dresses as a woman all of the time and she does not need to hide or conform anymore. She is also closer to her family who lives with her in England. Midz is with her British boyfriend and she is currently a senior nurse. She is still a Catholic though she has partly joined Anglicanism. She still reads the Bible and loves learning about religious matter. Midz is now free from any constriction and now looks forward to all positive changes.

Case # 6***Priscilla (pre operated)******26 y.o.******Height: 168cms. Weight: 57kgs.******Family ordinal position: eldest of three******Education: Graduate; AB English******Work: Part time entertainer/ English tutor (in Japan)******Sexual Orientation: Heterosexual******Religion: Catholic***

Prissy recalls her growing up days to be least stressful and one of the most desirable for any transgenders. She has not undergone any form of stress and has never been confused once. She is living under partly stealth mode, partly because all her official documents still reflects her sex as male. She fondly remembers events that happened way back when she was only three years old. She remembers how all people around her would not mind if she would wear a girl's dress. Many of her dresses were bought by her mother who would buy her generic dresses, for boys and girls. Her family was not very restrictive of her especially since she is the eldest of three boys. Her father worked in the AFP and also hailed from a prominent family of soldiers and police officers. In spite of a very masculine background, her father may have partly hoped to have a daughter instead of a son as he would not be uneasy with Prissy's very feminine ways. Prissy was close to both her parents and is also very close to her two younger brothers. Prissy remembers how she thought of herself as a girl with a different looking urinary tool. She knew that she is a girl and a different kind of girl, at least until she was 8 years old. At the age of 9, Prissy would only nudge all counteractions of her peers and relatives every time they would tell her that she is indeed a boy and a very cute boy. Prissy was a very physically active child who loved to play brute games like tug of war, "timbang preso", "patintero" and all other games. However, just like all other girls what she likes to play the most are role play games and dolls. She loves playing "bahay bahayan" as the family's mother, or role playing as a doctor or a nurse or a female teacher or principal. Prissy only admired and observed all female characters around her and including media icons like Wonder Woman, Barbie, Supergirl, Darna etc. She even used to emulate all female superheroes most especially the princesses in Japanese animation. Growing up, Prissy's favorite color is still the color pink because of its innate femininity. She loves Sanrio items and characters most especially Hello Kitty and My Melody. She also love bags especially shoulder bags.

She studied in a coed school for preschool and grade school. Here she became closer to her female classmates and also found herself to be closely observing and copying a lot of their behaviors. She would also flip her hair even if it was very short. She loved her shorts to be worn higher than her actual waistline and for it to be wide in circumference, as if it were a skirt. She also had her first crush at this age, a male classmate who would be her only crush until high school. Other than her "prince charming" (her only codename for her crush), her only other male crushes were the "cutest" male characters in Japanese animes (cartoons), Superman and Lion-o then actors Richard Gomez, Aga Muhlach, Tom Cruise, Doogie Howser, Patrick Lewis (TV character), Charlie Sheen, Michael J. Fox and RR Herrera. She did not quite grasp the concept of homosexuality until after grade school. If she would hear playmates and strangers call her "bakla", she would fight back thinking that this tease would actually mean that she was "ugly." She hardly gets teased though because she really looks like a girl ever since, people has in fact always mistook her for a girl. She always was the smallest person in her class, and she had quite a frail frame. Her voice was also quite shrill, and her features are indeed feminine. This has always been the case, and so unlike other gays and transgenders, she has always been thought of initially as female.

Prissy loves to think only of the positive things and not worry about anything at all. She was also quite a good student; she must even be a gifted child. She can dance well and play different musical instruments. She was also an excellent swimmer and volleyball

player. She used to play tennis and badminton too, stopping only because of the muscle strains over her arms and her tendency to develop strong and prominent looking muscles by her arms. Prissy, assumed a female name at the age of 8, this was bestowed upon her by her friends and playmates and it stuck until now. She started to wear female clothes at the age of nine. She borrowed her cousins' and playmates' skirts and other articles of clothing. Prissy, though a very hyperactive child, learned refinement and finesse as she transitioned to high school. She studied hard in high school and would also join many school clubs like the HE club, Glee club and the high school dance group. All her school pants were tailored in ways that the cut is actually more feminine than it is masculine.

She also discovered the female Supermodels particularly Linda Evangelista and Christy Turlington. She would buy Vogue among many other fashion magazines only to copy the poses and the make up of the models. She would frequently hang out in the beauty parlor of her friend so she can try different make up as well as observe how to cut hair and do make up. She eventually started watching beauty pageants of women and transgenders whenever she would learn of some. She was fascinated with all the "gays" and transgenders that she saw in the pageants as they were very beautiful. She learned that many of them have been working in Japan as entertainers, and that many are pre operated and post operated transsexuals. She was quite stunned and excited. She learned about medicines (pills) that can make one look more feminine and develop breasts. She confirmed this further from her other friends who have also learned of the same procedures. She learned about Dian 35, Micropil, Trust and Depo Provera. She did not hesitate and although not medically supervised, she began her HRT, at the age of 15. She would sometimes even overdose hoping that this will prompt the feminization process. Prissy continued to watch beauty pageants and modeling events on TV and copy all the female models.

In high school, shortly before graduating, she fell in love and had her first sexual experience. This romantic relationship lasted for almost two years as he would be her boyfriend until college. Prissy graduated from high school with honors and the determination to be a full time woman. In college, she was exempted from the ROTC because she was a university dancer and cheerleader. She would also sing as part of the university chorale. She was also a gazette writer. She kept herself very busy in college as she was undergoing her female transitioning. She continued her HRT, female dressing and using her female name. She maintained good grades in college and started to do a lot of research using the internet. She finally understood that she is a transsexual. She learned about the condition of transsexuality and studied HRT further. She started seeking medical assistance but was however disappointed by the lack of training and sensitiveness of medical practitioners about transsexual transition. She continued to obtain information instead from the other transnians whom she encountered in beauty pageants. That time, she is considered to be the most revered and admired transgender in beauty pageants. She also had a brief romantic relationship with a varsity basketball player who originally thought she was a genetic female. She graduated from college with contentment and excitement that finally she can pursue her dreams. Prissy earned a degree in AB English, allowing her to express herself fluently in the English language. She also wanted to go to Japan to work as an entertainer because she learned that this will bring about good income. She started to begin her journey to becoming an entertainer in Japan.

In Japan, she had her breast implants, and learned about whitening medicines. She allowed her hair to grow long (she kept in short in college because of school regulations). She would only wear women's clothes and make up. She also went to Thailand for her rhinoplasty and helicon implants. She met her current boyfriend who is a Canadian diving instructor in the popular amusement center in Japan. They have been living together and plan to settle down in Canada eventually. She also started to conduct English tutorials for Japanese students as well as her fellow Filipino entertainers. She plans to file for a legal name change after her SRS which she intends to undergo before she turns thirty. Prissy has always been close to her family. She is fortunate that she came from an affluent family and they are still in the Philippines. She would visit her family almost every year and send them emails. They visited her twice since living in Japan for almost six years now. Prissy is extremely grateful that she is very close to her family especially her father. She has also been a devout Catholic, having consistently gone to church every Sundays and other special days. She still goes to church in Japan and attends bible reading. Her fellow attendees however know of her as a female.

Case # 7

Mariah (post operated) w/ FFS

Age 27 born in Palawan

Height: 179 cms weight: 63kgs

Family Ordinal Position: 2nd of five (all other siblings are males)

Education: Graduate; Education major in English

Work: Dance choreographer/ English Trainer in Japan

Sexual Orientation: Heterosexual

Religion: Catholic

Mariah is currently in Taiwan as an English teacher. She is not in a relationship but she had a boyfriend for almost six years. She is the second of five children, the rest of which are all boys. She is closest to her youngest brother and least close to her eldest brother who abhors her being "gay." Mariah is very close to her father since her mother died when she was only six. She studied in a public school except for college. Her earliest memories were those of when she was five. She may have always thought of herself as a girl, but she enjoyed activities and toys meant for boys. She found toy guns and matchboxes to be more fun than dolls; she did however play with dolls. She likes brute games like "habulan," "tulakan," and other physical games. She partly loved playing ballgames like basketball and football. She loved wearing shirts and shorts that are plainly colored or designed, she did not like prints. She does not like the color pink too instead she liked the color black and brown and red. She however remembered that at the age of seven, she felt that in spite of having a boy's body she is really a girl. She even thought that the only things masculine about her are her penis and haircut. However, as a girl, she did not like all stereotyped activities and things associated with females.

She was quite an ill tempered child easily resorting to fist fights when provoked. She was mostly provoked with things like being called "faggot" or "bakla" or when other kids tell her that she is really a boy. The worst physical fight she has been involved in is that she

punched a playmate who insisted that she should act like a boy. She could not forget this incident for this was the only time she bled and got really hurt physically. She was brought to the clinic and had a cut stitched. After this, Mariah never wanted to be part of any physical fights or brawl anymore. The subjects she enjoyed the most were P.E. and H.E. At age 9 Mariah started loving dance. She copied dance choreographies she observed in TV programs and movies. She also started to idolize female media icons like Vilma Santos, Madonna, Paula Abdul, Janet Jackson, Marilyn Monroe, Elizabeth Taylor, Cindy Crawford and Bette Davis. She would copy their accents and poses and bodily movements as she saw them. She has now started borrowing female dresses particularly those of her cousins, playmates and classmates. She even fondly remembers a female classmate who was very boyish and detested being a female. Since this female classmate disliked wearing female clothes, Mariah would borrow her school uniform.

In spite of her burgeoning feminization, Mariah still was an active child, enjoying physically taxing games. She also loved playing volleyball and badminton and surprisingly, basketball and football. Mariah is also fond of comic book characters, but unlike the other subjects for this study, she also found the male and the asexual characters highly appealing. Among her favorite comic characters are Spiderman, Wolverine, Professor X, Superman and Flash. She even maintained this fondness for these characters up to now. Mariah explained this now that one does not need to always love the color pink or enjoy playing with Barbies or emulate Wonder Woman to be a real woman.

In high school, Mariah continued to borrow girls' dresses and wear them whenever there is an opportunity. An opportunity is like when her family is away or whenever she is in a friend's or a classmate's house. She secretly wore a brassiere and panty underneath her school uniform. At age 14, Mariah, found some interest in impersonation as she continues to enjoy dancing. She participates in school programs and she has even joined dance contests. Mariah started HRT at the age of 14. She learned about HRT from her aunt who told her that HRT is disadvantageous because it makes one's breasts big. She thought that if she would take hormones too, her breasts would grow and she would become more womanly. She further validated this testimonial from a Japayuki beautician who told her "gay" friends that HRT is good for the "woman at heart." She asked a pharmacist to explain to her if taking HRT would have any side effects; the pharmacists told her that her breast would grow and she might stop developing masculine features. "These look like the best side effects in the world," thought Mariah. She started HRT for about two years, stopping only because of money and because of rumors spreading that HRT might cause cancer. Mariah however rediscovered HRT in college and has been consistently taking it up until now. She has tried almost every brand and preparation there is. Along with HRT, Mariah has also discovered other beauty regimen from their family maid and her cousins. This includes face creams like Lyna and Chin Chun Su. She also tried using Etta's whitening powder. Mariah also started learning how to put on make up. High school was a stage when Mariah first fell in love. She was in and out of her head because of her teacher. She even laughed at her own fantasy that she would be impregnated by her crushes. Mariah performed really well academically. She graduated with honors even if she studied in a public school.

In college, Mariah obtained and maintained a scholarship. She also studied Nippon because she thought that she may consider going to Japan to work and study further. She

majoring in Education and English in college because teaching is one of her ambition. Furthermore, college gave Mariah the opportunity to discover and understand transsexualism. She learned about this from a documentary about different gender expressions presented by a group of Sociology students. She believed now that she is woman all along but her physiological constitution is rather the opposite. This set Mariah to be more finesse and feminine. Mariah would even obviously place her female name in almost any documents that she accomplishes in place of her official or christened name. Mariah at this point felt that she may one day file for a legal change of her name. Mariah resumed HRT and plans to undergo FFS to augment her chin and cheeks. Mariah also continued to watch beauty pageant and support her friends who join but she would still not join herself. Mariah also envisions herself to undergo SRS but was initially reluctant because of the irreversibility of the procedure. Her first relationship happened after college. Her boyfriend was a dancer from Australia. They maintained their relationship for close to three years.

Mariah is close to her father all throughout. This is partly because their father also stood as their mother after she died when Mariah was still young. Her father however was not yet accustomed to all the nuances of feminization, she would have to convince and explain to him everything. Her eldest brother was not as receptive. Growing up, they used to bully each other and fight incessantly because her brother cannot understand her femininity. Her next two brothers were quite passive in a sense that they are simply receptive to how she is but they did not really confide in her. Mariah's youngest brother is closest to her. He would confide in her constantly and was quite protective of her. She fondly remembers their younger days wherein her brother would also fight her enemies whenever she is bullied. They always talk about relationships, preferences and anything under the sun. Mariah is also close to some of her cousins especially her female cousins. They were her shelter in times of her activities of feminization. Mariah however did not like her neighborhood because of the many brute fights she encountered growing up and many of the taunting or insults that she still hears.

Mariah graduated in college and tried to look for a job here in the Philippines. Unfortunately, Mariah was rejected in as many as 40 companies. She knew that it must have been due to her being a transsexual. Mariah was even told twice that she should cut her hair and wear men's clothes if she wishes to work in some of those companies. Mariah was even told by a friend who is also a transsexual that indeed she would encounter discrimination. She has now confirmed this theory. Because of this experience, Mariah has now fully decided to go to Japan. In Japan, she first worked as a dancer and shortly started conducting ESL training for some companies in Nagoya. She later started to conduct English tutorials. Mariah enjoyed being in Japan, she felt free and enthused by all the possibilities that she can now explore. She continued HRT, and has undergone FFS in Japan. She plans to undergo SRS in Thailand two years later. Mariah is a devout Catholic and although she was numb to all the prejudicial comments of the church, she continues to believe firmly in God and the general teachings. Mariah is now more introspective and resilient. She has moved to Taiwan to teach English and she met a German physical therapist who was on tour.

Kurdapia (Kur) (non operated)
Age 23 y.o. born in Agusan del Sur
Height : 173 cms. Weight. 64 kgs
Family Ordinal Position: Only child
Education: Graduate ; Engineering major in ECE
Work: Call Center Team Manager
Sexual Orientation: Heterosexual
Religion: Born Again Christian

Kur is a team manager in a big call center in Makati. It is not anymore rare to see gays and transgenders in call centers. Call centers have been hubs and homes for gays and transgenders in the Philippines. Kur recalls the days when she was always wearing dresses their family owned company made. Her family owns and runs a dressmaking company and factory. Since Kur was always brought by her family to their factory or to the stores which sells these, she would eventually try on all the dresses and would even keep some for herself secretly. Kur recalls her earliest memories at about the age of six. At this age, she thought she was a girl. Her parents have always been so busy with work that she was always left to the care of her aunts and cousins. Kur's aunts however have always wanted her to act like a boy and dress like a boy. Kur always thought she should dress like her female cousins and act like they do. Kur was enrolled in a Catholic private coed school. In school, Kur became so engrossed with studying. Kur also discovered music and dance in one of her subjects and she felt that she would be right at home with singing and dancing. Kur remembered seeing the record collection of her parents and aunts and discovered singers like Barbra Streisand, Claire dela Fuente, Imelda Papin and Aretha Franklin. As these records were played, she discovered that she loved these sounds and started to imitate these singers. Kur's everyday preoccupation was to sing and dance and to imitate female stars. She would also play dress up and would stealthily watch her aunts put on make up. Kur's most frequent playmates were boys. She would play brute games with them like "habulan", "tumbang preso", "patintero" among others. Kur also loved playing with dolls and other generic toys, but dolls ate up most of her attention. She loved playing "bahay bahayan" too usually playing the role of the mother or any other female characters.

In school, Kur continued to be a consistent student who was very diligent and smart. She always participated in class and school programs as a singer and dancer. At the age of nine, Kur became more engrossed with everything feminine as she even chose to give herself a female name. She uses this name whenever possible even if her parents or aunts and teachers would get mad at her for doing so. She also continued to think of herself as a female. She thought then that she might have been born female but was mistakenly placed in a boy's body. She said that she wanted to get back to her female body. She had a crush in a male playmate and it was a very intense infatuation. She felt that she could also have a husband someday just like her mother to her father. In grade six, Kur had a uniform tailored for her liking. Kur was not very fond of the color pink or of Sanrio characters. She did not like Wonder Woman or Regine Velasquez, icons normally associated with and liked by women, gays and transgenders. She was also raised initially as a Catholic so she would go to church on Sundays and other church days. She loved to pray the Rosary and read the Bible. She was fond of watching Bible stories shown as movies or as a television special. However her family took a turn in their religious belief

when her parents felt that the church was very rote and rigid. Her father started attending Born Again church out of curiosity. Kur was initially repulsive of this idea since she was most at home with being a Catholic. Kur was close to both her parents but related with them differently. She talked to her mother to understand the role of women and to know how to be a woman without her mother noticing that it interests her. She talks to her father mostly about intellectual subject matters like religion, politics and science. Kur found herself to imitate her mother well.

In high school, Kur transferred to an all boys' Catholic private school. Here she made friends with other effeminate and femininely schoolmates who like her, also identifies themselves as being women at heart. She also had another crush, a high school senior. She joined the high school dance troupe and glee club. She also sang in church every Sunday and during their school masses. Kur also started to learn about the Japayuki transsexuals. She learned about the term transsexual from a post operated transsexual Japayuki who explained to her what would be an eye opener. She started watching beauty pageants for transgenders and gays and had fun along the way. She also thought of joining herself. At the age of 14, she took the courage to start HRT which she learned from the Japayukis. She began with taking Micropil and being injected with Depo Provera. She started reading and collecting fashion magazines where she would emulate the female fashion models and would try to copy the designs of the clothes. Her bags were usually girls' shoulder bags. She would eventually join her first beauty pageant at the age of 16 using the alias of Donita Rose since she felt that she looked a lot like this actress. Kur also had her first boyfriend at this age. She felt truly like a girl and she knew that it only compliments her perfectly. Kur also joined a singing contest in which she won the plum prize. She also participated in an interschool dance competition in which they placed as runners up. In college, she embraced being a Born Again Christian. She learned about this from the pamphlets and lecture notes that her father brought home. Kur now learned that if God truly loved her, He would love her for what she truly is. "God may have even permitted me to have this fate so I can discover the truth in a challenging way," explained Kur.

College offered her an opportunity to become a leader as she eventually became student council president. Kur studied in a popular university and this time she concentrated on singing and being a school leader. On her way to be a leader she started by being a class president and by joining different school organizations. She became a true extrovert. In college, she continued HRT and would only dress as a female after school. Though her school was not so strict with masculinizing males, she evaded any possibility that her attention would be caught by school authorities. She also cut her hair short so that others will not feel disrespectful of her. At this stage she realized how maligned homosexuals and transgenders are in society, especially in schools. Kur learned from other transsexuals and gays that she will eventually lead this kind of life. She was ready for duality. It is just a stage; she knows that once school is over, she can do whatever she wants. She was however known in the campus as a very "effeminate gay" and hid nothing in public but was able to maintain her feminine life outside of school. She would occasionally join beauty pageants and would dress like a woman whenever she goes on "gimmicks." She would still use her female name when she is with friends and other transgender acquaintances. "I learned to do things at the right place and the right time," explained Kur, "in a country like ours, our condition as transgenders will not merit anything to a

society that cannot understand.” She joined another big interschool singing contest and she won again. Kur felt that she wanted to pursue a singing career but she had fears that it may not be possible for a transgender like her. In her last year in college, she ran for student council and when she won, she felt that it was a victory to share to all other transsexuals. She included in her platform to make all transgender and gay students be recognized for their achievement in little ways. Kur considers this to be one of her biggest achievement.

After graduating, she decided that she will now explore her freedom as a woman. “It was time to stop conforming to foolishness,” said Kur with conviction. She let her hair grow long as she continued HRT. She would only dress and act as a woman, and after six years of HRT, Kur indeed looked very feminine. She also did a lot of internet chatting, and this was where she met her boyfriend of three years. Her boyfriend is a Biochemist, ten years her senior and an Italian working in the U.S. She was his first transsexual relationship; however he did regard Kur as a true woman. Having tried applying in different companies, Kur felt that the blossoming call center industry is where she might fight opportunities, and indeed this is true. She was hired by a major call center and after three years, she is now a team manager. Kur now assists her family in some finances and she attends Bible studies with them. She can now explain with openness her prevailing condition to her family without feeling alienated or impatient. She looks forward to be in this company for as long as possible and maintain her relationship. She is not bent on undergoing FFS or SRS soon, “that might happen anytime in the future,” said Kur. I am a woman even without FFS or SRS.

Case # 9

Trixie (non operated)

Age 22 y.o. born in Adelaide, Australia

Height : 179 cms. Weight. 60 kgs

Family Ordinal Position: Only child

Education: Graduate ; Psychology

Work: Call Center QA specialist

Sexual Orientation: Heterosexual

Religion: Born Again

She was born to an Australian mother and a Filipino father who used to work in Australia as an OFW. She is currently living in Australia with her Australian boyfriend whom she met over the internet. She worked here for almost two years as a QA specialist in a major call center. She studied in international schools almost all throughout. In college, she attended one of the biggest universities in the Philippines. She majored in Psychology, a course which allowed her to discover herself and conduct researches about her condition. She learned about transsexualism in an Australian documentary she has seen when she was only twelve years old. She would go to Australia almost every year to take a vacation because her mother is based there. She is an only child but she also grew up with her paternal cousins and relatives and a traditional Filipino neighborhood. She recalls early life experiences as far back as age five. Trixie grew up in a mostly male household. In

spite of a macho environment, Trixie would eventually discover her inner feminine. She did remember that she was a boy until she reached the age of ten when she started thinking otherwise. She used to play brute games and other generically male games and toys initially. She even sustained scars and bruises because of all those brute games. She could not trace back to thinking and feeling as a female except for the first time when she was ten years old. At this age, Trixie started to think that she must have been a female first. She started to like what women wear and use. She was interested in all of her mother's things and make up. She would find make up very interesting. She could relate more to the female characters in the shows that she would watch. She also found her female cousins and playmates to be more capable of relating to her. She then started using a female name. Trixie also began to idolize female media icons like Cindy Crawford and Tweetie de Leon, both of whom are models. She began to find beauty pageants interesting. She would watch beauty pageants on television as well as those staged near their barangay.

Trixie also liked female singers with high voices as well as the sopranos Maria Callas and Beverly Sills. These singers were part of her aunts' and cousins' collections. She discovered and liked Regine Velasquez, Mariah Carey and Whitney Houston. She began to imitate how these singers sang. In school, she would study hard and enjoy art related subjects and topics but she already stopped participating in brute games and active sports. She loved Home Economics and Arts. She also loved singing although she knew that she was not really a good singer. She loved singing only to the extent that she would imitate singers and listen to as many singers and songs as she can but she would not dare sing in public because she feels to embarrass. She does not like to dance also but she loves watching dancers and would imitate dance choreographies without others knowing. Trixie was so fascinated with her teachers in grade school that she dreams of becoming one herself. She developed interest in household chores and other activities that explores creativity. She even volunteers to assist her cousins and aunts in dish washing, doing the laundry and decorating the house. She felt that these activities were those that women would normally do. She also had a crush on a playmate who was a few years older than her. She even kissed him on the lips and that at her tender age of eleven.

Trixie could speak Spanish and Chinese other than English since she studied in an international school. Trixie's family was not very rich but her mother was eligible for enrolling a child in this type of educational institution. Trixie continued to study in this school in high school and at this point she started to feel what is now termed to be "homophobia". Many of the students in high school were not comfortable with gays and effeminate boys and so most of the boys would tease and taunt. Because of this situation, Trixie learned to be more prim and proper and discrete. This was only to ensure that she would not get into a fight. Shortly after coming back from Australia, Trixie embarked on a mission to understand transsexualism. She learned about this condition in Australia in a documentary about gender diversity. She discovered that indeed it was possible to be born to a male body with a female spirit, heart and mind. She was very young but her mother accepted that it was possible for Trixie to be a transsexual. She went back to the Philippines to begin high school. In high school she began to embark on a research in order to understand homosexuality and transsexuality. She could not understand it clearly though because the concepts and the explanations offered were still beyond her basic comprehension. She has not learned about transsexual beauty pageants yet but has been

fondly observing the beauticians that she encounters. She observes them and she felt that they were not as feminine as they should be if indeed they are also transsexuals. She concluded that beauticians might be homosexuals only since they maintain a very masculine appearance. She continued to watch beauty pageants of women like Miss USA, Miss Universe and Bb. Pilipinas and she would imitate the contestants' movements, walk and answers. She also participated in school plays but mostly as part of the supporting characters. She had many crushes who are foreign and local actors and models. She also had a crush on two classmates and a P.E. teacher. Trixie remembered that a boy used to court her ("ligawan") in high school because this boy felt that Trixie is a girl. Trixie employed an approach of duality this time because as she maintains her femininity and her interests, she needs to exude a less flamboyant façade in school in order to avoid bickering and refutation. At the age of fifteen, she did discover HRT from two neighbors who are transsexuals too. She started to take them without much thought and research. She even started to overdose herself (taking three to four tablets a day), thinking that this would accelerate her feminization. She also learned many other facets about transsexualism from these neighbors who told her about female dressing, SRS, FFS and beauty pageants of transgenders. Out of curiosity, Trixie started looking for beauty pageants of transgenders and she started to watch them with awe. She admired the contestants because indeed they looked like women. She also admired the way they talked. She thought that maybe, transgenders and gays are gifted speakers. She waited until she reached college before joining her first beauty pageants.

In college, Trixie studied in one of the best universities which at the same time do not have a "constricting environment." This means that this school is known for respecting diverse expressions as well as sexuality. She took Psychology because she dreams of becoming effective as a speaker and teacher. She also wanted to learn more about human behavior and the phenomenon of transsexualism. She was amazed with the phenomenon of behavior and when she joined a group of gay and transgendered students, she realized that the reason why people do not know much about transsexualism is because of lack of information. She started to join beauty pageants and enjoyed the experience. This was the first time that she got the chance to explore dressing as a female. She was twenty when she joined her first beauty pageant and when she started female dressing. College was a stage of discovering facts and phenomenon as Trixie has mostly involved herself in researching and studying. She was not very active in extra curricular activities except for the fraternity group of gays and transgendered students. She has not participated also in sports activities except for casual games. She continued HRT in college and she uses her female name all of the time except for official documentations. She also met her first boyfriend who happens to be a Filipino heterosexual who regards her as a woman. This relationship however was short lived. It lasted for only four months. She then felt that it must be difficult to have romantic a relationship with a fellow Filipino if one is a transsexual. After college, she decided that the only place in the Philippines where an educated transsexual could work is the call center. Now Trixie would dress only like a woman. Her hair is longer, she has been on HRT for almost five years and she truly looks like a female. Her bone structure is quite big though because of her Caucasian heritage. Trixie has worked in this big international call center first as a customer service representative and eventually she was promoted as a Quality Assurance Specialist. She has stopped joining beauty pageants because she was occupied with work.

She went to Australia for a short vacation and there she met her current boyfriend whom she met in an internet chat. Her boyfriend is Australian and heterosexual. He really thought Trixie was a real woman. He convinced her to move to Australia in order for them to live together and she thought that this would also be convenient since her father started to work in an Australian factory shortly before she started working. Her mother of course would have the greatest amount of convenience since she has always been based in Australia. She left work just recently and as of this writing, she is looking for a good school to pursue a Masters in Psychology. She said she would also want to dedicate herself to studying transsexualism and other variant gender expressions. Trixie is a Born Again Christian because she was weaned to this religion. She always believes that God is a just and merciful God who accepts and loves her for who and what she is. She looks back and realized that growing up as a transsexual, was not a very easy ride. It was quite difficult but she must have gone through the same route as all other transsexuals have. She was fortunate to have good education and good financial means to afford access to information. Trixie theorizes that the unfortunate part about being poor and transsexual is that information is not always readily accessible. Trixie does not plan SRS or FFS soon but she is thinking about the possibility in the farther future. She is happy now that she is so much in love and that she is at home with her real gender.

Case # 10

Luella (pre operated)

Age: 21 Mandaue, Cebu

Height: 169 cms Weight: 58 kgs.

Ordinal position in family: eldest of four (all girls)

Education: Graduate; Advertising

Work: TV network assistant / part time entertainer

Sexual Orientation: Bisexual

Religion: Adventist

Luella is the youngest subject of this study. At the time that the interviews were conducted, she just turned 21. Being the eldest of four children, Lu learned to be responsible and dependable. Her younger siblings and cousins as well as other friends got used to calling her "ate" which signifies her reliability, dependability and the respect that people accord her. She is closer to her father who raised all four of them by himself ever since he separated with his wife. Lu's parents separated when she was only nine years old because her mother was working abroad as a nurse and accidentally developed an intimate relationship with an English doctor. Lu was raised in a loving and peaceful household which at the same time was bustling and noisy since all her cousins live next door. They live in a compound along with her cousins and other relatives. Her father is an Engineer and a businessman. He always was a responsible father who would tutor them growing up and teach them bible lessons. They attended the Seventh Day Adventist Bible church which allowed them to observe abstinence from meat and parties on Saturdays and other days of obligation. Lu read the bible all throughout and enjoyed doing so. She is very prayerful although she usually attends their church on Saturdays and other days of

obligation only. Lu at the same time studied in a Catholic school all throughout which also allowed them to observe Catholic days of obligation and learn about the ceremonies and teachings of the Catholic Church. Lu and her siblings considered themselves to be part Catholics and part Adventists growing up. She was even fascinated by the lives of the Saints. Her favorite saints are St. Therese of the Cross, St. Agnes and St. Thomas Aquinas. She could remember things as far back as when she was five years old. She cannot recall if she regarded herself as a girl back then but what she remembers is that she is mild mannered and graceful. She loves her long neck and small face and in spite of being usually the shortest person in a group, she feels that this petiteness and femininity were qualities that she always loved about herself.

At the age of seven though, Lu began to think of herself as a girl. She even thought that she must have been switched at birth because she now realized that she feels female at heart. Back then, Lu remembered asking her sisters and cousins which female name would suit her, and after thinking of one, she started to go by this female name at least with people that she feels comfortable with. Lu even informed her father about her female name and although her father initially shrugged this off and explained to her why she should not have this name, he eventually agreed. Her father would talk her into thinking that she is really a male and that she would inherit her father's work someday; however her father would always listen to her whenever she contests this belief and would explain to her father that she is truly a girl. Her father would sometimes laugh or just nod but beyond this, Lu did not feel threatened or constricted because she felt deep inside, her father somehow agrees with her. At this age, Lu also started to pray to God to make her a woman when she grows up. Lu was also lucky to have playmates who would rather think of her as a girl or a mild boy. This led to her being treated with respect and kindness and she was not teased by her frequent playmates. Lu did not develop infatuation until late high school and so she thought of all her playmates as extended family members. Lu loved to play any games and with any toys. Her most preferred game though would be "lutu lutuan" (playing cook) and her favorite toy would be dolls and cookware. She always played with her sisters' dolls and cookware and she would lend her toy guns or boys' toys to her cousins and playmates. She does not like getting too sweaty and dirty when playing; most of all she detests obtaining bruises or scars.

Lu did not really dress as female in grade school and when asked why, she said that it just did not cross her mind then. She did not feel fascinated with her sisters' clothes too so she never tried them on. She felt that she should maintain being beautiful and clean. She was as an average student in grade school but became more active and studious in high school. Lu did not develop any idol fancy up until high school; she was however fascinated with the female singers and with the beautiful dresses and gowns that actresses wear. She most fondly remembers being fascinated with Debbie Gibson, Tiffany and Regine Velasquez among other female singers. She also admired Ruffa Gutierrez and female fashion models for their thin bodies and flamboyant movements. In high school, she maintained her soft spoken and mild mannered ways and she feels that she is a girl undergoing a maturity stage. She even anticipated that possibility that she too might have a menstrual period. She envied her younger sister and her classmates when they had their menstrual periods and whenever they would change sanitary napkins. Most of her playmates are girls and gays. She laughs her heart out whenever her gay friends would make incessant noises and expressions when playing volleyball. She did remember hating

to play under the sunlight because she does not want her skin to darken. Her favorite school clubs were the English and Drama club, the Home Economics cook group and the High School Journal. She also developed the liking for cooking as she was fond of watching cooking programs and assisting in cooking activities. She dreamed of having her own restaurant and becoming a mother who cooks really well.

In her fourth year she developed a feeling of deep infatuation, it was her first. She liked a male high school basketball coach and she only liked looking at him and watching him play basketball. Because of Lu's hard work and dedication, she graduated with honors in high school and she earned an academic scholarship in college. In college, Lu learned about transgenders who join beauty pageants and the concept of HRT. She was stunned with the feminine and beautiful transgenders in those beauty pageants and she was even more stunned to learn that HRT can make a male look like a female. She thought that this might just become the best way for her to fulfill her lifelong dream of becoming a woman. She took her first pills at the age of seventeen, it was Premarin and she took it gradually. She did not join any beauty pageants though because she does not want the public to know that she is a transgender if eventually she gets transformed. She would sometimes increase the dosage of intake of the hormones thinking that this would catalyze the feminization process. She also started to dress as a female. She had her uniform tailored in a feminine pattern and she would wear skirts on days that there are no classes. She would dress like a female at all times whenever there are no classes. She explained that she cannot really dress as a female in school because this might cause her to be reprimanded or be stripped of her academic scholarship. She would allow her hair to grow at shoulder's length only hoping that after school, she would allow it to grow even longer. She would read fashion magazines and watch beauty pageants and fashion shows. She assisted and supported her transgender and gay friends as they joined beauty pageants. At the back of her mind though, she has always wanted to join. She took Advertising as a course because she wants to work in the media industry. She still loves cooking and would take cooking classes every once and awhile. After graduation, Lu was fortunate to have been absorbed by a top media network where she is currently working as a female production researcher.

She is already very beautiful, although she worries about her hirsutism (hairiness). She currently has a relationship with a lesbian which she found quite odd at first. She did not expect this to happen but she fell in love with her. She feels that her partner is like a man in many ways. Although she still feels infatuation and desire for men. She explained that though she may have just experienced lesbianism lately, this does not mean that she is not a woman. She explained that only women are lesbians (whether you were born female or not). She still maintains a close relationship with her family especially her father. Her father is most respectful and accepting of her situation. He defends her proudly. She is also close to her sisters who would come up to her for advice and companionship. She still lives with them anyway. She plans her SRS and FFS to take place before she turns thirty. She is open to the possibility that if her relationship ends, she might be in a heterosexual relationship (with a male partner). She is happy that she has successfully blended with society without them knowing that she is a transsexual. People only think of her as a female. She uses only the women's washroom and she has already adjusted her manner of urination in that it resembles how women urinate. She still prays to God this time with gratitude that she has found herself completely and her childhood prayer which

is to become a real woman has now come true. She also works part time as a singer and dancer in an all female group and no customer ever thought of her as a transsexual.

Case#11

Kring Kring (non operated)

Age 22 y.o.; Mindoro

Height: 178 cms Weight: 61kgs.

Ordinal Family Position: youngest of three (with older brothers)

Education: Graduate; Computer Science

Work: Marketing executive in an IT firm

Sexual Orientation: Heterosexual

Religion: Atheist / relative Buddhism

She does look like a female and people have hardly suspected that she is a transsexual because she really looks like a woman. She is very intelligent and articulate and she is also very independent. She is currently working as a marketing executive in a top multinational information technology firm. Kring is currently in a romantic relationship; her current boyfriend is an Austrian architect whom she met when she was in Boracay. He thought for a year that Kring was born female, and when she told him that she is a tranny, he was so surprised. She is not yet bent on undergoing FFS and SRS but she is open to the possibility that it might happen in the future. She was Catholic growing up but she felt that in her need to find answers to questions and claims that the Catholic Church was evading, she decided to become an Atheist. She has been an atheist for almost three years but lately, she discovered Buddhism. She grew up in a very strict and constricting environment. Her father was a soldier and her brothers were all against her feminine ways, up until now. Her mother is a Catholic school teacher and she has always been less tolerant of her feminine ways. She was not close to her relatives too because most of them are in the province or if not, they are working in another country. She was enrolled in an all boys' Catholic school in Manila and her father was planning to enroll her eventually in a military school. Her parents tried to sway her and control her behavior. She has always been mild mannered and effeminate (or femininely). Her two brothers used to beat her up when she was growing up. Kring remembered experiences in life dating back to when she was six years old.

As a child, she thought all children were similar except for having different genitalia. She knows that she was a boy however; she did not feel any different from those who happen to be girls. She would play with any toys and any games. She used to enjoy playing with her older brothers and playmates. Her favorite toys were dolls and stuffed toys. But these dolls and stuffed toys weren't hers. These toys were her playmates' and neighbors'. All the toys that her parents gave her growing up were only for boys. She appreciated these toys only until she was eleven but beyond that, she regrets having played with boys' toys. When she was young, even for no apparent reason, her brothers would hit her or punch her until she cries. "I think they were very sadistic," claimed Kring. Every time she was caught acting effeminate, they would hit her and report this to their father who would eventually tell her not to act effeminate anymore or else he would hit her too. Her parents also aspired for her to be a musician and a Math genius. She only liked being with her all

male classmates when they are playing games, otherwise, she did not like spending time with them. Kring first thought that she is a girl when she was eleven years old. She partly realized that this might be the reason why she did not feel any different from any girls when she was younger. As an eleven year old, Kring developed keeping secrets in order to prevent her parents from spanking her or giving her other corporal punishments. She would also put on an act whereby she would act really masculine only to deceive her brothers that indeed she is not effeminate. She also adopted a female name for herself believing that she should never use her male name when she grows up. She also thought that she wants to mature fast so she can live away from her family. She wanted to be free. Kring successfully kept a dual life growing up without her parents finding out, although they would suspect this once in a while.

In high school, Kring had many gay and effeminate classmates in the all male Catholic school that she attended. She learned many things from them as well as the seniors. She was also introduced by their senior schoolmates to beauticians and transgenders from whom she learned many concepts and secrets. In spite of the excitement of discovery, Kring continued to keep this secret while pretending to have a very masculine front. She continued to play the piano and she has developed an interest in singing as well. She also developed interests in sports like badminton, volleyball and table tennis. Her parents were not suspicious of these interests thinking that other males would most likely have similar inclinations. They did encourage her to like basketball because this was a brute game and was more masculine. She tried to learn basketball and pretended to appear to like playing this game. She successfully deceived others about this interest but her brothers would somehow suspect that she is faking it. Kring had another thought, which is to study really hard in order to impress her family so that they will overlook whatever feminine interest she may have developed. She kept herself busy doing school work and whenever no one notices she would see her female and gay friends in order to share stories and do other feminine activities.

She started to try dressing as a girl when she was fourteen years old. She tried putting on make up and wig and would copy the movements and walk of her friends. She eventually mimicked female fashion models, actresses, singers and beauty queens. Having three televisions growing up worked in her favor. She did not have to share TV sets with anyone. Since she can lock her room while watching TV, her brothers could not walk in anytime they want to bully her. Her brothers were also busy watching TV, playing video games and courting girls. Her mother was always out of the house as she was a teacher and church lector. Her father would be given provincial assignments often. Kring used this situation as a big advantage to conceal her feminization activities. Kring keenly observed female media personalities with their bodies and movements. She would secretly buy Mod, Woman Today and Vogue fashion magazines. She would sing in the same key as female singers especially Regine Velasquez's. She accidentally chanced upon a beauty contest of females held in a mall and she felt that she would one day also become a beauty queen. Kring also experience having a crush in high school; at the age of fifteen, her first crush was a male Architecture student who lives a few blocks away from their house. She would look for ways to see him and observe him secretly. She even managed to slip a love letter to their mailbox without her affixing her name.

At this stage also, Kring continued to pray and read the bible as well as go to Sunday

masses and play the piano organ. However, whenever Kring would hear comments or reactions about homosexuality in the priest's sermon, she would silently dislike the priest and oppose his views. She would wait until she sees her friends so that she can share with them her points of view about the priest's sermons. She would also retaliate and fight back whenever strangers and children would bully or tease her and her friends. She is now more sensitive to comments about homosexuals. Kring thought of herself as gay because she has not yet encountered the concept of transsexualism. She heard many issues and tirades against gays mostly about the extreme effeminateness and inappropriateness of their gender nuances. She maintains however that this is part of the reality that she is a woman deep inside and people do not recognize it. She later realized that it was futile for her to feel the resentment constantly and to counteract because she will be misunderstood and hated. She sometimes would just keep quiet and wait for an ample time and venue where she can vacillate.

In college, Kring became a loner initially because she did not know where and with whom she will associate. She was also enrolled in an all male Catholic School where she took Computer Science. She originally wanted to take up Marketing or Advertising but she was forced to take ComSci instead because her parents claimed the convenience of finding a job immediately after completion. Kring learned about HRT from her gay friends, beauticians and transsexuals in beauty pageants. She was fascinated with the adverse effects of taking the drug which includes feminization and breasts development. She eventually started HRT at the age of seventeen. She started with Diane – 35. Kring would now dress more femininely because she started to stay in a dormitory away from her brothers and parents. Although she wears a male's uniform, the pattern of the uniform is undeniably feminine. She is able to make it appear otherwise because she wears a jacket and a cap on top of it. She has also been brushing up her hair so it would appear shorter and less voluminous. In college, she started to research about HRT, FFS and SRS. She admired many of the Japayuki transsexual entertainers who are extremely beautiful and womanly. She would sleep in women's lingerie and brassiere since no one will taunt her doing so since she was by herself. Kring felt liberation or freedom because finally she is away from constant scrutiny. Kring was still somehow disappointed that in an all boys' school, she cannot be flamboyant, mild mannered and effeminate. Ostracism usually results in this type of environment because the male students can become quite aggressive or alienating. Kring somehow mastered the art of "deadma" or numbness because she wants to prove to others that there is nothing wrong with someone like her. Halfway through college, Kring became less distant or isolated and she became more extroverted. She realized that her fate is not within any person's bidding. She would not put off the pretenses and answers back whenever she is confronted with discriminatory remarks even if these would come from her family.

Since she would see her family rarely, she preferred to show herself as she really is. Although they would react with disagreement, she remains undaunted. Kring knew that she would need to become independent soon in order for her to avoid her family from driving her life the way they want it. Kring met her first boyfriend in an internet based singles matching program where she submitted a profile of herself as a genetic female. Her boyfriend is Dutch and he is a businessman and musician. Kring knew that the relationship she has is similar to those of a heterosexual male and female and the only difference is her actual genital. Kring joined other friends who claim themselves to be

atheists because they do not rely on prayers or on believing in God in order to put order in their lives and become complete. Kring feels uncomfortable whenever she uses the men's washroom, especially when she needs to put on make up or freshen up. Kring also wishes for her official ID to bear her chosen female name and not her christened name. After graduation, Kring experienced extreme difficulty in finding a job; she must have applied in at least twenty companies before she was hired as a marketing executive in a multi national IT firm. Her bosses are foreigners (English and Americans) which made it easy for her to be hired. She is currently using the women's washroom in their company, dresses as a woman and acts like one too. She uses her female name at all times except for official documentation. Kring is still under HRT and has no immediate plans for FFS and SRS. She is open to the possibility that she might undergo this in the farther future.

Case# 12

Dorina (post operated)

Age 32 y.o.; Pampanga

Height: 172 cms Weight: 63kgs.

Ordinal Family Position: youngest of two (other is male)

Education: Graduate; Food Technology

Work: owns her own computer rental shop and beauty parlor/ entertainer

Sexual Orientation: Heterosexual

Religion: Catholic

Dorina is about to complete her transitioning process, after her recently completed SRS, she is now planning for legal name change. She is currently in England and meeting her other transsexual friends to learn more about their transitional phases. She is also studying the legal procedures of legal name change. She has somehow lived a stealth lifestyle since people will never suspect that she was assigned male at birth. She has undergone many FFS procedures like chin augmentation, cheek augmentation, eyelash implants and rhinoplasty. She also has a cup C breast size. Luckily, Dorina is not tall, making her appear more feminine. She is still working as an entertainer in Japan and Guam. In Guam, she joined a group of female dancers without any customer suspecting that she is a transsexual. She now uses only the women's washroom. She has partly assumed the role of a housewife to a Welsh businessman who met her when she performed in Guam. This relationship came as a surprise to her since she never had a serious heterosexual relationship prior to this and she used to observe how her gay friends would cry over spilled milk so to speak. When she was in high school, she vowed never to fall in love with a man because she might just get hurt in the process. She did have many crushes growing up. In fact she experienced having her first crush when she was only five years old. This boy was her playmate and she gushed whenever he tags her when they play hide and seek. Dorina knew from the beginning that she is really a girl. She even felt that people were brainwashing her whenever they tell her that she is really a boy and not a girl. She used to cry when she was a child whenever she defends herself explaining that she was just placed in the wrong body for when in fact, she is a girl. Dorina never liked her male name and so she borrowed her cousin's name. She has been using her cousin's female name since she was six years old and she enjoys doing so. She has also been wearing her cousins' dress notwithstanding their walking dolls' dress; and abhors wearing male clothes. Dorina never had color preference growing up but she likes

the color pink the most because she felt this color was most often associated with females. She liked laces and ruffles in dresses and house decorations as well as those found in bed sheets. Dorina enjoyed playing with her older brother since he did not tease her or bully her growing up. She was very close to both parents. Her mother would work in the office as a senior accountant while her father was a building construction contractor. It was her father who would send and fetch Dorina to school. Her parents were disciplinarians but "they were not cruel." She was tutored by her father in all subjects and this included frequent games and play like basketball and football. Dorina enjoyed playing any generic games but she played them as a girl. They are also devout Catholics, going to church every Sunday and other days of obligation. Dorina's fondness of reading the Bible led to her fascination in the lives of saints and the apostles. She loved hearing and reading about bible stories.

She was fond of watching programs that depict the lives of Jesus and the saints. Dorina recalls how excited she gets every Christmas and Easter Sunday. Her family also prayed the rosary whenever they can. Now, Dorina filters the sermons in homilies because she finds many themes in these sermons are usually biased or discriminatory. She also feels bad that the church does not have compassion and genuine understanding towards homosexuals and transsexuals and she feels that the church is indifferent to them. As a child, Dorina was partly finesse, soft spoken and mild mannered and at the same time she can be very noisy and hyperactive. She enjoyed playing any kinds of games and toys but was most fond of dolls and stuffed toys that she usually borrows from her cousins or female playmates and neighbors. Dorina did not have any role models growing up except for Mother Mary and female characters in Japanese animated series. She said she found Mother Mary to be very beautiful and close to Jesus and she wished to be like her. The Japanese female animated characters were also beautiful and powerful. Her fondness however was limited to imitating these and talking about them with her friends and classmates.

In grade school, Dorina was a top performer. She studied in an exclusive Catholic grade school for boys. She did experience a few teasing and bullying from her schoolmates and neighbors but as a child it was normal for her to fight back and retaliate. She however avoided any physical fight because she perceives this to be very masculine. Dorina did not feel any amount of confusion when she felt that she is a girl in a boy's body. She explains that as a child, there is no need to intellectualize or know the difference. "What mattered most at that time was the feeling that I am a girl," explained Dorina. She was not always certain of the reason why people call her "bading", "faggot" and "sissy." She got mad in all of those instances but she thought it was natural so just shrugged it off. Dorina also began to like cooking and dressmaking especially after being exposed to these activities in Home Economics. Her ambition as a child is to become a good cook or a dressmaker. She also thought of becoming like her mother; a woman who is good at home as she is in the office. In high school, Dorina continued many of the femaling activities that she is used to. She continued to wear female dresses whenever there are opportunities like borrowing from her cousins, neighbors and classmates. In fact she would always wear her female classmates' uniform after classes for an hour while doing their assignment and then playing volleyball. She always wears an apron in Home Economics cooking classes because the apron made her feel more feminine. Dorina transferred to a coed Catholic high school. Although the school has very restricting

policies and has implicit prejudice against gays, she felt that to a certain extent there is tolerance. She enjoyed Home Economics, Arts and Music and English as school subjects. She now wanted to become a fashion designer too. Dorina discovered fashion models and all the beauty queens. She would watch fashion shows and beauty pageants in television or those staged in the malls. She copied the ways in which the women would pose, walk and talk. Dorina then added another dream to her list, which is to become a female fashion model or to be a beauty queen.

At the age of fourteen, Dorina made many discoveries especially relating to her gender. She found adults who are exactly like her. She had a female teacher who firmly believes that she is a man (the teacher) in a woman's body. When Dorina confirmed if she is a lesbian, her teacher told her that she is not but she is what you call a transsexual. Dorina did not yet understand what her teacher meant until she met another adult with a similar predicament. This time she encountered a Japayuki singer who was born male but believes she is a female. Although the entertainer had many telltale signs of masculinity, Dorina was surprised to have learned that she has undergone surgery to remove her penis and to have breasts. Dorina learned that this is quite possible, to alter your body to become what it should have been in the first place. Dorina did not know where else to go to learn about this exciting discovery, but it has transcended her level of interest and vindictiveness as to how she can now explain why she is what she is. Dorina chanced upon a beauty pageant for gays and transgenders and this led to her further rediscovery about transsexuals. To begin with, she was stunned with the beauty and femininity of the contestants. She really thought that it must have been a hoax because it was too good to be true. Then as she talked to different contestants, she heard another term which is transvestite. She also learned about HRT, FFS and SRS. She vowed that she will have all of these if she has the money. A few weeks after this pageant, she encountered a few more beauty pageants. This now became her favorite past time, to watch beauty pageants. She also went to health centers to pretend to have a sister who needs a contraceptive medicine. Though it was appalling to learn that medicines can be dispensed without the necessary procedures, Dorina was excited that finally she can embark on a journey to femaling or feminization. She began HRT shortly before turning fifteen. She also started to go to the women's washroom, though secretly.

At the age of sixteen, Dorina experience an intense infatuation with a male schoolmate. She felt that this was an experience that confirms her being a female. As she shared her stories of infatuation and fantasies with her female classmates, she learned that she is no different from them. Dorina also hoped that some day she will have a husband and a child. It has been a running joke amongst her friends to refer to her as a woman with no uterus and vagina. Dorina was an above average student in high school and she was active in extra curricular work as well as sports. Her favorite sport is volleyball and badminton because she found these to be quite feminine.

In college, Dorina studied in a more liberated school, known for its extremely diverse student populace. Dorina took Food Technology in order to allow her to fulfill her dream to be a cook. She joined many competitions for cooking and food preparation and even attended seminars and exhibits. She continued HRT and dresses as a female when going to school since they do not have school uniforms. She also managed to use the women's washroom when there are no strangers looking. She continued to experience deep

infatuations but she maintained her distance from her crushes, believing that a woman can take her time not to have a boyfriend. In college, Dorina felt a better direction as to what she is and where she wanted to be. Dorina continued to learn about homosexuality, transsexuality and transvestism. She then felt that she is more of a transsexual but somehow she still believes that she is just a woman. She continued to join beauty pageants for transgenders and gay. Dorina felt the gratification and the affirmation of the victories she obtain in these beauty pageants. "Those were the best times of my life," recounted Dorina. As she continued, "beauty pageants were among the rare opportunities that gays and transgenders have to be respected and appreciated and admired." She learned also that prejudice is rampant in the Philippines and gays and transgenders are not just maligned but deprived of opportunities. She then realized that if she wanted to have a good career, it might as well be in another country.

After college, Dorina relaxed at home first and weighed her options. She researched about ways to become more beautiful and feminine. Her hair was then waist length and her breasts were comparable to that of a pubescent girl. She continued to join and win beauty pageants. She started working in Japan at the age of twenty two. After three years, she had her first FFS which was rhinoplasty and cheeks augmentation. She then had breast implants two years after that. At the age of twenty seven, Dorina underwent orchiectomy and last year, she completed her SRS. She briefly went to Guam in between performing in Japan where she joined an all female dance group. Here she was presented as a genetic female and no one suspected otherwise. In Guam she met her first and current boyfriend who invited her to move to England. He is Welsh and he was partly responsible for financing her SRS. Her parents were very considerate and accepting of her growing up. Although she would get sermons often about what her gender expression should be, in the end they were accepting and respectful of her choices and beliefs. She gained the acceptance and blessings of her parents and brother for her FFS, HRT and even SRS. Now that she is about to embark on the completion of her femaling (her legal name change), her parents are still as supportive. As her brother explained, "Dorina is consistent, she has always been like this and we love her for that. But what is most consistent about Dorina is that she is and will always be a human being regardless of her gender. If other people cannot see anything normal there, we are not other people's family."

Case # 13

Apples (post operated)

Age 38 Mabalacat, Pampanga

Height: 165 cms Weight 58 kgs.

Ordinal Family Position: eldest of six (three male siblings and two female siblings)

Education: Graduate; Nursing

Work: Nurse (working as stealth) in Birmingham, England

Sexual Orientation: Bisexual

Religion: Christian / Catholic

Apples is currently in England working as a nurse in stealth. This means that only her recruitment directors know that she was assigned male at birth. She has not yet filed for legal name change because she was discouraged that her intentions might be futile in the

Philippines. Apples has been on HRT for more than twenty years. She was fond of playing with guns and matchboxes as well as racing with other boys. She liked wrestling and playing basketball and she had crush on girls. She however felt that there was something different about her growing up although she could not explain what it was and how to identify it. As a child, (recalling earliest memories to when she was four) Apples remembers playing with her siblings on mostly generic toys and games. She also disliked singing and dancing, she was usually interested in the paranormal, the supernatural and the fictional. Apples loved cartoons and animation as a child, her biggest favorite was Superman and Spiderman. She would hardly pass up the chance to imitate these characters whenever given the chance. She used to collect stickers and school items with these characters as the designs. She dreamt that she wanted to be invincible and powerful like these fictional characters. Apples was also fascinated by the topics of science and history. Her earliest and most consistent ambition was to become a scientist. She was also very fond of animals, often reading about animals in encyclopedia and books.

Apples' first crush was a girl; they were both nine years old. She remembered having kissed her on the cheeks and sharing food with her always. She also punched several male schoolmates and busmates whenever she gets teased or provoked. She was quite ill tempered as a child. In spite of bullying her younger siblings, she loved and cared for them at the same time. She was closest to her youngest brother who used to copy her every moves and expressions. She did study hard because of her fascination with the most difficult subjects. Apples graduated on top of her class in grade school and entered an exclusive Catholic high school with a scholarship. In high school, Apples' interests expanded to sports like volleyball and badminton, sports which are usually tagged as feminine. She did not feel hesitancy and apprehension as other schoolmates might tease her for being effeminate because her usual playmates are gays and females rarely boys. In high school, she still hated singing and dancing but this time she gets easily tired playing basketball. She became more reticent and mild mannered. She did have a girlfriend at the age of fourteen. This was a short lived relationship as it lasted for only four months. Apples was not a very religious child, she sometimes gets tired or feels lazy to pray or read the Bible. She believed in God and many of the other teachings but was not very fond of it.

She did not have any color preferences as well. Apples however discovered an interest in drawing human figures. She does not consider her skill to be highly developed but she found sketching to be very interesting. Apples was a debater, a journal editor, a Math quiz champion and an orator in high school. She was also among the best volleyball players in school and their neighborhood. She was fond of joining inter municipality volleyball leagues. She still dreamt of being a scientist but along with that, she also hoped to be a professional volleyball player. Apples strongly felt that there was really something odd that she felt but she just could not explain what it is and how to find answers. Sometimes she would even ask her friends and teachers and she even had several counseling sessions with her school guidance counselor. Up until the age of fifteen, Apples did not feel anything inferior about gays and effeminate boys. Because she was seen as a good looking boy, she had many sexual and flirtatious advances from gays young and old. She was only fascinated by their 'fascination' but unlike other boys who reacted repulsively against this, Apples somehow felt flattered. Apples was close to her parents. Her father was a priest shortly before meeting her mother. He then became a

businessman and part time professor. Her mother is a plain housewife who on occasion, would be a saleslady. Her parents spent quality time with them growing up, reminding them of values and responsibilities. They were taught to fend for themselves as young as they were. Apples' life was typically male until this stage.

Shortly before graduating from high school, Apples felt the unexpected; she was intrigued with the fancy of being a girl. She noticed that she did not have anymore crush on any girl as she felt more affectionate towards a few male classmates of hers. Apples also lost interest in playing basketball and matchboxes. Apples was surprised with this sudden change because it was unexpected and there was no known source as to why this change occurred. The only thing Apples knew is that she liked the feeling and she did not feel strange anymore. Apples confided this to her closest female classmates and her younger sister. They were startled at her revelation but she was not discouraged by them. Shortly before entering college, she stumbled upon a television movie about a transsexual ophthalmologist/ tennis player (the movie was "Second Serve: The Renee Richards Story") and was extremely amazed with her life experiences. Apples felt that she could relate with the experiences of Richards and that this maybe what she herself is experiencing. After watching the movie, she felt enlightened. She was also in search for many answers. She asked herself the following questions: "why did I become this way? Could I really be born a female? Am I gay? Was I influenced by anyone? Who? Am I going to revert back to how I was? How?" In spite of these questions, Apples did not feel and think of herself any less, she did not feel cathartic as well. She may have been feeling slightly confused and her attitude towards this revelation was more of a positive reaction because she did not feel that she is a different person.

Apples entered a top university to study nursing. The university has very strict policies and some students exhibit "homophobic" reactions. She would frequent beauty parlors and observe them as well as the way they cut hair and apply make up. She felt that being a beautician and a fashion designer might be fitting for her. At the age of seventeen, Apples discovered that she now has a deep infatuation with a male schoolmate. In fact she has had many other crushes aside from him. Apples also began to be more fascinated with females. She would observe her sisters, mother, aunts, cousins and friends. She would listen to their stories and she felt that she could also relate with their experiences. She would also observe and imitate female media icons but she was most fascinated with beauty pageant contestants and female fashion models. At the age of eighteen, Apples started to wear her sisters' and mother's clothes and shoes (at first without their knowledge). Her sisters though are aware of her situation and so they were very accepting and helpful. She would also practice on applying make up to herself and to her sisters. She would now talk a pitch or two higher and sometimes her father finds this really strange. Apples in fact remembered that her youngest brother and her father would frequently ask her, "nagiging bakla ka na ba ("are you becoming gay)?" Apples would only evade situations that would require her to answer but deep inside she was hoping that she could muster the courage to fully explain how she is feeling.

Apples also had sex with a male schoolmate upon her schoolmate's taunting and this encounter was followed with another, her first boyfriend. Her boyfriend was from another school and although it was Apples who "courted" him, he sometimes felt that Apples is like other girls. Apples felt at home in this relationship and she felt that finally she felt

free. Because of this, she mustered the courage to admit to her parents about her condition. She had a family conference along with her closest aunts and uncles but excluding her youngest siblings. She cried when she admitted but she hoped that they will not make her revert to being a boy. They were surprised and irritated at first but she remembered what her father said, “ano pa ba ang magagawa naming, andyan na yan, basta huwag ka lang mananakit ng ibang tao at wag ka lang sasaktan. Kung pwede ka pang magbago mas maganda, ero kung yan na nga nag nararamdaman mo, mahal ka pa rin namin (what else can we do now that it is there, for as long as you won’t hurt anyone and will not be hurt yourself, we are fine. If you can revert back we will be very happy, if not we still love you).” Apples felt truly free. She considered this to be the biggest turning point in her life. Now everything she does is done openly. Everyone knew about her relationship, her dreams of becoming a woman, her interests and hobbies and her need to wear women’s clothes. She would now wear women’s clothes at home without hesitancy and secrecy. She would now sit when urinating because she abhors seeing her penis. She also assumed another name, a female name but would still use her christened name because her christened name is considered unisex. She can now cook well, sketch well, apply make up well and walk well just like female fashion models.

Apples was an average student in college, although she did not graduate with honors nor did she join many extra curricular groups, she did a lot of researching and reading. After graduation, Apples learned about beauty pageants for gays and transgenders and she was amazed and fascinated. She learned about the concepts of HRT, FFS, SRS and transsexuality. She did not understand it but after watching several beauty pageants, she has learned to appreciate this new knowledge. She immediately started HRT (her first was Diane 35 and Depo Provera) and allowed her hair to grow long. She started to work as a nurse in their university hospital. She would always brush up and tie her hair so it would not appear long. She started to buy for herself women’s undergarments and would wear them everyday. She would secretly use the women’s washroom and continued to urinate in a sitting position. Apples had another relationship, this time her boyfriend is French and almost twenty years older. She met him in a fashion show that she watched and he was amazed with her beauty and he did not suspect that she is a transsexual. This relationship would last for almost ten years. She felt loved just like any other woman. He showered Apples not just with love but with gifts. He was very generous to her and her family. Apples’ family knew about her relationship and they were supportive and accepting to this. As her boyfriend went back to France, they maintained a long distance relationship. Apples continued her feminization process with HRT and whitening.

She would only wear women’s clothes except when working as she is required to wear their prescribed uniform. She also started joining beauty pageants for transgenders and gays but she went to join only seven contests in total because she did not feel comfortable with being on stage as a female but representing yourself as gay presenting as a female. Apples believed that she should be in a beauty contest of women and not of transgenders. Apples went to France as a tourist to stay with her boyfriend. They frolicked about Europe and her boyfriend financed her breast implants and rhinoplasty which was done in England. When her boyfriend decided to move to Japan for a business deal, Apples felt that this was also an opportunity for her to be with other Japayuki transsexuals and observe them. They went to the clubs in Japan where transsexuals performed and she was amazed to find them all in one place, the most beautiful and feminine transsexuals. She

worked as a dancer but it was challenging at first because Apples was not a very good dancer. This opportunity was extended for almost four years and she earned a lot of money in the process. Apples also learned more ways of femaling from the Japayukis. She went to Thailand for her orchiectomy which was followed by complete SRS two years after. Apples is now a woman at the age of twenty nine. Apples was contended with her transformation, any stranger will not be able to tell that Apples was assigned male at birth. Add to this is her very petite frame and she is able to live in stealth. In spite of not having female as her legal gender, Apples christened name did not do her harm because it is unisex and in other countries, her name is considered a woman's name.

Unfortunately, her relationship with her French boyfriend of more than ten years ended. She did not want to perform anymore in Japan as an entertainer. She went fully in stealth mode. She underwent refresher training for nursing and she took MA units in nursing. She was also allowed internship in a private hospital even if the owner learned that she is a transsexual. The patients and other clients never suspected that she is a transsexual. Two years ago, Apples flew to England to work as a nurse. The hospital which hired her knew of her as a woman but her recruitment and benefits team knew that she is a post op transsexual. She is very happy to have worked again as a nurse but this time as a female nurse. She also found a new relationship but this time she fell for a woman. It has been long since Apples last fell in love with a female, she was still in high school. It was awkward at first but she knew that it was natural since women can love either a man or a woman or both. She realized that she is a bisexual and that her sexual preference has nothing to do at all with her actual gender. Apples is very happy with both her work and her relationship. She found friends who accepted and loved her unconditionally and this includes her family. Her younger sister and brother are also working as nurses in Birmingham and lives with her.

Although she has been a Catholic for a long time, she has now been attending different Christian group affiliations like Born Again, Jehovah's Witness, Mormon, Adventist and Protestant churches. This was because she disliked some preaching of the Catholic Church especially with regard to homosexuality, transgenderism and gender expression. At the moment, while she is experimenting, she still maintains being Catholic because she believes that believing in God and doing good is not solely based on being a Catholic or not. She is also pondering on legal name change but she feels discouraged to go about it anytime soon since she knew that this might be futile for her. Besides, her christened name is feminine enough. Apples is currently living in stealth mode.

Case # 14

Trina (non operated)

Age 23 Manila

Height: 171 cms weight: 61 kgs.

Ordinal Family Position: only child (adopted)

Work: medicine student

Sexual Orientation: Heterosexual

Religion: Muslim

Trina is an intelligent and mild mannered girl. She is an only child although she learned that she was adopted when she was in high school. Trina has just started in her femaling, she started HRT just a year ago (she was twenty two). However Trina believed that she must have been born female and she knew this by heart. She recalled that as a child, she was devastated when her parents told her that she is actually male. When she was six years old, she observed other children and adults and she knew that she is like all other females. She never asked about why she has a penis and other girls have vagina, she thought that it was natural. She thought her name was also a girl's name. Trina liked playing only with dolls and nothing else. She gave her dolls names and would allow her playmates to play with them too. She occasionally played with cards and matchboxes but nothing compared to playing with dolls. She went to a Christian school although Trina and her family are Muslims. They were receptive and accepting to Christian teachings and traditions and considered themselves to be modern Muslims in that they sometimes break traditions.

Trina never had any gender talk with her parents and they did not repulse her preference for anything feminine or to her actuations. "I think my parents loved me regardless of my gender, they may have even wished for a daughter instead," explained her. As a child though, Trina did not find the interest and the need to dress like girls. Looking back, Trina felt that as a child, gender stereotypes did not matter to her. She was raised in a middle class family; her father is hard working hardware personnel while her mother used to be a cashier in a supermarket. Since she was an only child, they had the capacity to put her to a good school. She liked watching television and dancing to all kinds of music.

She was quite close to her parents growing up. But when she was in grade four, she had a fight with a school bully who taunted her and teased her about being gay. After the rumble, Trina was given counseling and was eventually told that she should stop thinking of herself as a girl because she is a boy. She cried hard upon hearing this and did not want anymore to go back to school the next day. Her parents talked to her and made her realize that in fact she is a boy. Her father even pointed this out by showing his penis to her and her mother by showing her vagina so that Trina would realize that her sex organ is similar to her father's instead of her mother's. This somehow devastated Trina and made her feel confused. Trina however recovered after this situation and she became calm again. Trina at the age of ten continued to play with dolls and enjoyed playing with girls and still thought of herself as female. She also adopted a female name and enjoyed this name. She now has a close circle of friends who are extremely tolerant and accepting and appreciative of her ways and concepts. She would also borrow her friends and cousins dresses and slippers or shoes and bags and wear them when they are the only ones around. Sometimes she also enjoys letting others see that she is wearing a girl's outfit and things and enjoyed their reactions when they laugh or smile. Sometimes she even gets complimented like she looks beautiful in a certain outfit among others. Trina also continues to use the women's comfort room even when there are many other girls in it. She sometimes sits when she urinates. When she learned about an older cousin's menstruation, she also wanted to have that.

Trina had her first crush when she was eleven years old, with a high school boy who lives a few blocks away. She liked him a lot and even fantasized of being married to him

someday. Trina did not have any specific idols or model figures growing up because she said she was fascinated with every female she encountered. She was extra fascinated with the likes of Powerpuff girls, Barbie, Hello Kitty, Madonna, Sharon Cuneta, Maricel Soriano and female fashion models. She was also fascinated with beauty pageants like Binibining Pilipinas and Miss Universe. She also fantasized about becoming a beauty queen and a fashion model someday. Trina stayed in the same school until high school where her academic and extra curricular performance was boosted. Her past time as a teenager includes talking about crushes and grown up fantasies like getting married; talking about media icons and beauty pageants among many others. Trina liked singing and dancing, she is also a good sketch artist and designer. She can copy dresses she sees in books and magazines. She would now buy panties and baby sandos and would wear them everyday. Her bags would always have either ruffles or lace.

Trina eventually fell in love with a schoolmate who may have also liked her because he would become her first boyfriend. She truly felt that she was like a girl because he would sometimes give her simple and cheap costing gifts and flowers. He would also kiss her on the cheeks and put his arms around her. This relationship surprisingly would last for almost two years. Her parents found out about this after a year in their relationship and they initially disapproved and contradicted this relationship. They explained to her many concepts whenever they would have serious talks. Some of the things her parents told her about were: gays would not be hired by companies and that they would have a hard time looking for a job; that men would not really love them and would only stay with them because of money and gifts and would eventually leave them for a 'real woman'; that it may or may not be a sin to have a homosexual relationship among a few others. Trina cried and felt disheartened whenever she would hear these sermons from her parents and she partly hated them in those moments wherein they would contradict her and discouraged her from continuing acting and feeling like a girl. Trina somehow noted that even if her parents would talk her out of her choices, they would eventually not mind when she goes back to her feminine ways. Trina became preoccupied with extra curricular activities particularly being the Drama Club lead writer and director as well as school journal editor. Trina graduated with honors and special leadership awards but her first relationship ended and temporarily broke her heart. She learned many things about girls and gays through her friends and she thought that maybe she is a girl and gay at the same time and she somehow enjoyed the feeling of this kind of existence. She also frequented beauty parlors to observe beauticians do what they do and sometimes she would talk to them and ask them if they also feel the same way she feels and she is happy to know that she found people she can relate to. She continued to watch beauty pageants and fashion shows on television and imitate models, beauty queens and actresses. She would also remember their famous lines or answers as well as the patterns of their gowns and costumes which she would end up sketching.

In college, Trina went to a university to take up preparatory medicine. She chose Biology because she felt that this course was the closest to a pre med. In college, Trina continued to feel as free as she used to. When she goes out on weekends or when there are no classes, Trina wears girl's clothes like skirts and pants as well as tops and shoes. She also uses accessories like bracelets, anklets and clipped earrings. She also plucked and shaved her eyebrows and drew an eyebrow line on it. She would also use make up especially whenever classes would dismiss. She frequently uses a fan and an umbrella and maintains

a very mild mannered way of walking and moving. Sometimes it irritates to encounter strangers teasing and taunting her or calling her names particularly “myla” (which means may lawit; with a male organ) or “papa” or “tita” but she would just shrug them off. She knew that behaviors like those would be expected from people who are not as educated. She does not retaliate now or answer or fight back. She keeps her head up and pretended that she did not hear or see anything. She acted as though she is now immune to these types of reactions. Trina described that in college she preferred to maintain a low profile because she wanted to be considered as a girl and she wanted to avoid unnecessary attention. She did not join any extra curricular activities and preferred to study hard so she will remain on top of her class.

Trina’s past time in college was continuing to observe and study females and gays. She would spend time watching and observing girls and gays pass by and analyze their clothes and behavior with her friends. She would also spend time in beauty parlors wherein after a simple nail cleaning or “hot oil”, she would ask them questions about relationships, beauty tips and growing old gay. Trina learned about beauty pageant for gays and transgenders from her gay friends and the beauticians. She watched her first beauty pageants but she was not amused. She felt that it was like a fanfare. She did find a few of the contestants to be beautiful and feminine but most were funny looking. She was also disappointed with the cheap presentations of the pageants because she was used to the concept of a grand beauty pageant which she frequently watches in television like Miss Universe. She ignored further invitations to watch and even join beauty pageants. She also felt that why would she join beauty pageants for gays whereas she is a female. Trina learned about HRT as well and heard about FFS and SRS but she felt that these step are too drastic and sinful. She was afraid that as these steps are irreversible, she might experience side effects. She started to read about HRT, SRS, FFS and homosexuality in books and even the internet.

At home, she can do anything she wants especially when her parents are not around because she can wear her mother’s old clothes and bras and shoes. She also wears women’s clothes which she would buy or borrow. Trina had another boyfriend in college; he is a working professional whom she met in one of her trips to the mall. He approached her and felt that she was beautiful and acted really like a girl. He wanted to have a relationship and so she allowed it. It was however short lived and it was then that she realized that it must have been difficult to maintain a long lasting relationship if one is gay (at this point she thinks of herself as female but considers herself as gay because it is what and how others regard her). Trina was always tempted to have a long hair and she envied her female friends’ long hair, she even bought for her a wig which she wears whenever there is an opportunity. But the school has regulations and policies against long hair for male students and so she could not grow her hair long. She was lucky enough though to use the girl’s washroom without the female students complaining about it and the guards avoiding to report her. She only uses the women’s washroom even in the movie theaters. She is somehow lucky to have a small body frame and to look feminine enough to get away with it.

After college, Trina moved to another school to study medicine. Now it is even more difficult to act like a girl and to look like one because she can sense and feel the prejudice and resistance that the male students have over homosexuals and effeminates. She

decided to share a dormitory with two other effeminate gay friends so they can continue to do what they love to do. In early college, Trina cried several times because she heard “homophobic” reactions and remarks from other students and doctors, mostly male and this has proven her theory that the field of medicine has strong prejudices against homosexuals and effeminates. She also avoids casual talks with her male schoolmates out of fear that they might have further homophobic reactions. Trina continued to research about HRT and in the process of researching, she discovered the medical studies about transsexualism. Trina felt that she might be a transsexual and at least she is grateful that indeed she is not gay. She decided to conduct a little experiment and so she started HRT with Diane 35 and Micropil.

She also accidentally stumbled upon another beauty pageant for transgenders and gays and this time, she is pleased with the presentation. This led to watching another beauty pageant and eventually joining in three consecutive pageants. Though she did not win, she felt that the experience was exhilarating and rewarding. Trina is at the point of learning more about beauty pageants, transsexuality, HRT, SRS and FFS. She is amazed with the discoveries that she is making and at the same time she struggles with the low profile that she needs to maintain. She is not in a relationship but she knows that the way she likes and desires men is in fact similar to how females experience it as well. Her hair is still short (near shoulder length) and she is only at the beginning of her HRT (age twenty two). Trina also noticed that even if she is a Muslim, she has somehow incorporated the teachings and lifestyles of Christian living. Although she still does not consider herself to be an active Christian or Muslim. She is not active in church and sometimes she misses going to church but she believes that God is kind and loving and she is not committing a sin if she continued to believe that she must have been trapped in a wrong body. She now considers the possibility of FFS and SRS later on but she wonders what will happen since the field of medicine is very strict and “homophobic.”

Case # 15

Freda (pre operated)

Age 29 Leyte

Height : 175 cms weight: 62 kgs.

Ordinal Family Position: middle child (elder female, younger is male)

Education: Graduate; Mass Communication

Work: writer and marketing assistant

Sexual Orientation: Heterosexual

Religion: Catholic/ Christian

Freda grew up in the province and is what one may call a “promdi” (from the province). She has initially struggled with speaking in Tagalog because she was used to speaking in Visaya and her Tagalog and English usually showed signs of the traditional accent. Freda studied in the province until high school and she moved to Manila to study for college. She was very active in extra curricular activities and has won several awards in quiz bee competitions, oratorical and declamation contests and essay writing contests. She is also a devout Catholic although at this point she has started experimenting with different Christian groups by means of attending and joining masses in Jehovah’s Witness, Adventist, Protestant and Born Again. Her mother died when she was in high school and

her father died when she was in college. She however was also raised along with her many cousins and distant relatives. She lived in a very big compound with almost all of her relatives that is why she is very close to them. Freda's elder sister has always been responsible and close to her. She has always been a role model for Freda and her younger brother. Her sister is almost ten years older than her and she has always been like her second mother. Her younger brother on the other hand has always been her playmate. She used to bully him around as a child but this has been reversed when they grew older because her brother is even taller and bigger than her. Both her sister and brother are in the U.S. working and they have their own families. Freda's cousins have always been close to her as well. They were her playmates, confidants and constant companions. She would imitate and follow her older cousins as she would set the trends and pattern for behavior for her younger cousins. She went to the same school with her cousins and siblings because there was only one very school in Leyte.

Freda described that they were in the lower class of society, but her family was able to afford a good education for her because of their hard work and the availability of scholarships as well. She was a full scholar until college and Freda is very proud of this achievement. Freda recalled that growing up she is like a girl and a boy at the same time. As early as when she was five years old, Freda would emulate her cousins and sister in their feminine behaviors. She would also emulate her mother and aunts as well as their neighbors. She loved playing with both dolls and toy guns. She loved being Wonder Woman and Superman. She however knew that in spite of her boy's body and her male interests, she has stronger feminine qualities and interests. She knew that a greater part of her is female. Freda did not grow up with the television but she learned about many television characters and actors every time she goes to Manila for vacation. Almost every year, Freda and her siblings would go to Manila for vacation along with a few cousins. They also have some relatives in Manila and her Mother works in Manila as a college professor. She spent all of her time watching television whenever she is in Manila and when she is in Leyte, she spent a lot of time reading comics and books as well as watching movies in the cinema. She loved playing active games and getting dirty as much as cleaning up after every game. When she was twelve years old, shortly before transitioning to high school, Freda realized that she is indeed a girl by heart and she decided to adopt a female name as well as do what all girls do.

Shortly, Freda would only go to the girls' washroom since their high school was not very strict. She would now avoid active and brute activities. She would become more refined and mild mannered in her actuations. She would always carry a fan and umbrella. She would ask her sister for suggestions on how to behave like a woman. She even uses and wears all of her things. She would even wear her classmates' uniform after classes. This time her friends are composed mostly of girls and gays. She loved to giggle whenever they talk about boys and crushes. She also giggles in an unusual way in that she makes her voice shrill and thin. She has been studying ways to sound like a girl. She would always talk and sing on top of her voice. Sometimes she feels tired and her voice breaks out easily because of her top note talking. She learned to play the piano and the guitar from her father who was a musician in his younger days but was working as a construction worker. Freda described her parents to be very tolerant of her and accepting although she would sometimes get sermons from them that she should be more masculine. She further noted that because of her mother's work in Manila and her

father's hectic and sometimes twenty hour work as a construction worker, they may have not anymore noticed how feminine she was. She was very conservative also in high school, she recalled that in spite of being in a boy's uniform, her male schoolmates mostly regard her as female. Several of her male classmates even courted her but she rejected them because she was afraid that it would make her appear as an easy girl. She has heard of stories of discrimination and rejection towards gays and effeminate men. Many of these stories scared her and sometimes she felt discouraged. She almost did not want to go to college. But because Freda is generally an optimist, she would dismiss these thoughts and would eventually regain her confidence. She also loved hanging in beauty parlors where the beauticians would teach her how to put on make up and how to walk.

Freda graduated with honors and a scholarship to go to Manila. Unfortunately before Freda embarked on her transfer to Manila, her mother passed away. This was one of the most challenging stage of her young life. Freda felt depressed and weakened by this event. Her mother though not always physically present was an inspiration because she worked hard. She was also one of her role models in life. This drew her closer to her father who also moved to Manila with her. Her elder sister was then working already and helping provide for them. In college, Freda was able to transition as she desired. She was allowed to grow her hair long and to wear feminine styled clothes. She plucked her eyebrows and wore make up almost everyday. Her top was always her sister's old tops if not, those that she bought from the women's section. She has a particular attention to details when it comes to her nails. She loved to put on nail polish and change her nail polish almost every month. This time, Freda would watch television everyday and was stunned with all the fashion trends for women. One of her other favorite past times aside from watching television is to walk on high heels just like the fashion models.

Freda stayed within a circle of girls and effeminate gays for friends. Freda would only wear women's underwear everyday and she would wear a duster as she goes to sleep. She also started beautification rituals like whitening and moisturizing. She learned to become vain in college. She also had many crushes but she fell in love with one of her classmates who is not good looking but was extra kind to her and was fond of talking to her. She secretly assumed that he was also in love with her. Freda learned about HRT from the gay friends she met in this university. Without hesitation, she started HRT because she learned that this was the fastest way for her to become a woman. She was very excited. She did not even spend time to understand the effects of these medicines; all she knew was that she can now become more feminine. She also had frequent trips to the nurse in order to have intramuscular administration of Depo Provera. Freda also started to use whitening capsules as well as vitamin A, C and E. She was determined to become beautiful.

She has maintained her interests in her studies and she even became part of the dean's list almost every semester. After college, she graduated with honors; Freda started to look for work but was disheartened to learn that after almost a year, no company has hired her yet. She was beginning to assume that this was because she is a transgender. She was even told by a recruitment officer that the only way for her to be hired is if she can cut her hair, dress like a man and act less feminine. She was almost tempted to do this in preference of the job opportunity until she realized that she should not stoop down to that level because

it is unfair. She is a woman deep inside and she will not compromise this for anything. This feeling was made worse when her father died because of heart attack. She had comforting words from him when he was still alive, telling her that: “if you don’t want to change because you know deep inside it is cheating yourself then don’t. It is better to be true to others and be disliked than be untrue to yourself for their acceptance. Someday good things will happen too.” This made his death even more painful because when most transgenders and gays complained about their distant relationship of their rejecting fathers, Freda’s father was among the most accepting.

Freda chose not to look for work for a year and she learned about the beauty pageants for transgenders and gays. Because she is very feminine and beautiful, Freda became among the most successful and popular winners in beauty pageants and she amassed close to two hundred trophies for winning in beauty pageants for almost four years. She met all her past boyfriends in these beauty pageants. All of these relationships were short lived and she heard explanation from other people that this was so because heterosexual men are never capable of falling in love with transgenders. Freda did not listen to what others have to say, she went in from one relationship to another often finding herself broken hearted and disappointed for the ended relationships. Freda was able to survive financial crises because of these beauty pageants and also because of the generosity of her sister who always made her strong.

Her sister eventually went to the U.S. to work as a nurse and she would support her financially. Freda’s knowledge about her gender was mostly taken from group talks and theories of other transsexuals, gays and women. She also managed to conduct studies about HRT, FFS and SRS. She had FFS (cheek and forehead augmentation) as well as breast augmentation two years ago. She plans to undergo complete SRS next year because her current boyfriend is willing to help her finance the surgery. Her boyfriend is an American businessman whom she met in one of her outings in Boracay. Freda knows that SRS is the ultimate solution to her desire to complete her female transition because she knew that from the beginning she was really meant to become a woman. When the researcher met with the subject last year for this study, Freda was surprised to learn more about transsexualism. Freda has always been prayerful, and although she has missed many Sunday masses growing up, she managed to pray to God everyday and ask for forgiveness if she is planning to alter her body. She even joked at God one time by blaming God for the inaccuracy of his creation. Although she was brought up to be a Catholic, she has also been enticed by other Christian groups a few years ago because she felt that the Catholic Church was not completely accepting of her situation. She believes that God created men and women of different kinds and this includes transgenders and homosexuals. Last year, Freda was fortunate to have found a job finally, as a marketing assistant and writer in an IT firm.

Chapter 5 Conclusions and Directions for Future Research***5.1. Conclusion***

This research was undertaken in order to bring enlightenment in the understanding of transsexualism. Earlier researches by Harry Benjamin and Ann Bolin as well as Milton Diamond and Sam Winter have strongly influenced the development of this study. In this case study, fifteen Filipino transsexuals showed similarities and differences of expressions and in their life experiences. The respondents were selected because apart from representing the prototype of the transsexual, they identified themselves as such. Their appearance, actions, words and mannerisms along with their way of thinking has proven this. The study has also revealed indications of conflicts such as anxiety, aggression, withdrawal among others, conflicts of which maybe partly attributable to the stresses of being a transsexual in a society. As we reach the end of this study, the following has been discovered:

5.1.1. On what is transsexualism:

The 15 respondents exhibited the qualifications of being a transsexual, in this case male to female. They were born male and assigned male at birth by their respective doctors. As the years unfold, the respondents in their very young ages of at least three years old, has started to think of themselves as women and not

men. They continued to feel and think like this as they were growing up. Their female identification only varied in the ages of onset and the specific nuances, but all have experienced femaling.

They are not contented and comfortable with their male appearances, bodies and states and they all want to cross gender.

5.1.2. On how transsexualism is manifested:

Among the respondents, transsexualism manifested itself in similar ways. The onset was early, three years old and up. The expression ranged from thinking of one's self not as a boy but as a girl or simply not thinking of one's self as a boy to starting to dress like girls to acquiring a girl's name and sticking with this name until adulthood. Most of the respondents had female media icons to pattern their actuations and expressions to like singers Regine Velasquez, Barbra Streisand and Mariah Carey, to models and beauty queens like Melanie Marquez, Cindy Crawford, Ruffa Gutierrez and actresses like Maricel Soriano, Nora Aunor and Lynda Carter. They also had fictional characters to emulate like Wonder Woman, Supergirl and Darna. These preferences and influences are only shared with women and some homosexual men. There are rare exceptions that do not follow this stereotyped affiliation proving that not all girls need to watch television to become and act and think like women when they grow up. The respondents also cited women around them and in their environment to be sources of influence, like their mothers, sisters, aunts, cousins, neighbors, teachers and playmates. The

respondents have also cited a common source of information for femaling- beauty pageants for transgenders and gays. Here, they revered on the contestants who they learned to have engaged themselves in rituals of feminization such as HRT and SRS. Then they also started their own transitioning and femaling rituals for which some has culminated with SRS and the others with the contemplation of the possibility. They wanted to use the women's washroom all of the time, be referred to as "she" and "mam" only, be addressed by their female names and be taken seriously as women. The study confirms the earlier conducted researches of Winter, Bolin, Conway, Diamond, Benjamin among many others that although the minute details of the expressions vary, the principle governing the identification process is universal: that in spite of one's assigned sex and supposed gender, gender identification will change in time proving that gender will not always conform to sex.

5.1.3. On Gender dysphoria:

No respondent reported suicide attempts or pain infliction to self. No respondent reported clinical depression or anxiety, although depression, anxiety, withdrawal, guilt among other conditions were manifested and projected in the DAPT. These feelings maybe partly attributable to the difficulties they encountered living as transsexuals. They all reported to be like any other persons but the only difference is that they find their male bodies and identities to be inappropriate and inconsonant with who they are.

5.1.4. On the difference between transsexuality and homosexuality:

Thirteen of the respondents in this study have sexual preference towards men while two have preference for both men and women. Homosexuality is merely a sexual orientation or a preference. Homosexual men, especially Filipinos, can be very effeminate. But not all effeminate homosexual men have persistent cross gender identification. Most homosexual men are content with using the men's washroom, with their male names, with their masculine appearance and with their male bodies. They do not ponder on the possibility of undergoing HRT and most especially SRS. Our fifteen respondents demonstrated that their sexual preferences were not the primary reasons why they identify as females. In fact two respondents feminized themselves only to be in romantic involvement with women. They all believed that being a woman is never always about who you love or have sex with. As explained in Chapter two, some male to female transsexuals and other transgenders, have homosexual or bisexual preferences. This study has shown that there is no exclusivity between gender identity and sexual orientation.

5.1.5. On the similarities and differences among transsexuals, transvestites, drag queens and culturally bound cross gendersists:

Apart from homosexuality, transvestism, cross dressing and drag performances has been likened if not erroneously interchanged, with the concept of transsexualism. Among the similarities they share are: they dress as women; their preferences for either men or women if not both; their tendency to be very feminine or emasculated; and their liking for female media and fictitious icons like Barbra Streisand, Cher, Madonna and Tina Turner among many others. Transsexuals dress as women because they believe that it is what is appropriate for their gender just like how it is for any man or woman; on the other hand, transvestites cross dress because of sexual excitation and gratification and drag queens do so only for aesthetic and performance purposes. Transsexuals' liking for media icons are partly due to natural preference or/ and because of the influence on feminization these women provide; transvestites may or may not like female icons since their only concern is sexual fulfillment. Drag queens are strongly driven with these female icons because they copy them for their performances but do not necessarily emulate them for femaling since drag queens do not necessarily undergo a femaling stage.

The hallmark difference is that the transsexual respondents identify themselves only as females, not homosexuals or a third gender. The transsexual respondents do not present themselves as women for reasons of aesthetics or performance. They do not cross dress or they do not undergo culturally dictated rituals. The respondents present themselves as they are based on what they experience and believe in – that indeed they are women and all the abovementioned groups perform cross gendering not because of gender identity.

5.1.6. On the causation theories:

No respondent claimed that a strong mother or absent father caused her to become a transsexual. All respondents related that both parents were present in their lives and they have no feelings of resentments in general. There are a few who considered their parents to be inconsiderate of their condition but many considered that there was no direct influence from their parents as to how they have chosen their genders. They even related how their parents and relatives have strived to inculcate in them sturdy concepts of masculinization and yet they were all still driven to a road to feminization.

5.1.7. On the Quality of Life of transsexuals:

The respondents indicated and showed that they value life and happiness, their families and friends and their relationships. It is important for them to find

5.2. Directions for Future research and Recommendations:

There may have been no theories tested or variables manipulated in this study, but the beauty of a case study is that it gives rise to the possibility of some in future undertakings. The researcher challenges other researchers to formulate theories and concepts related to this study and look into other possible variables to study.

Among the recommendations and challenges the future can make way for:

- a. That in future researches, a clearer etiology and set of causation theories be presented with regard to the biological development of transsexualism.
- b. For Filipinos with no access to information, that educational materials and information regarding transsexualism and other gender related studies be made available.
- c. For Philippine medical practitioners to have expanded understanding of the various regimens undertaken by transsexuals and recommend medically monitored and supervised HRT, FFS and SRS and other feminization rituals.
- d. For future researches to determine clinical conditions (such as depression, anxiety, aggression, feelings of inadequacy, withdrawal and fear) that is experienced by transsexuals due to transsexualism.
- e. That standardized measures maybe developed in light with transsexualism, such as measures of gender identity, femininity vs. masculinity vs.

androgyny and clinical conditions such as anxiety, depression, aggression etc.

- f. To obtain a study on prevalence of transsexualism in the Philippines as well as accurate estimates of those who have undergone SRS, FFS and HRT.
- g. That the local pharmaceutical system will intelligently advocate medically supervised HRT.
- h. That studies on gender differences including transsexualism, be included in curricula for Health and Sex Education in grade school and high school.

As of this writing, there have been several changes and advances taking place all around with regard to the study and the condition of transsexuality in society. In May of 2006, the International Lesbian and Gay Association held a world conference in Geneva, Switzerland. One of the agenda was to discuss the plight of transsexuals around the world. Asia was represented by Dr. Sam Winter along with the Philippines' STRAP secretariat Sass Sasot. It was reported that in Australia, a movement has already started to the medicalisation of transsexualism as being similar to that of being intersexed. This means that transsexualism in Australia is now viewed as being a natural or inborn condition. In the United Kingdom, SRS is more appropriately known as Gender Affirmation Surgery, which means that the procedure only aligns the person to his/her actual gender and not that to which the doctor originally assigned. There is also the Gender

Recognition Act of 2004 which among its tenets is to preserve the rights and dignity of any person, including the transgendered. Specific to this would be laws on adoption, name change, union, health care and sponsorship, and anti-discrimination among others (see bibliography section for URL). In South Africa, Gender Dynamix was established and became the first transgender association and NGO established in Africa. In HongKong there is TEAM spearheaded by Dr. Winter and in the Philippines there is STRAP along with performance venues Club Mwah! and The Amazing Theater Philippines which showcases an all transgender roster of performers.

5.3. A final note: Is it a choice? Is there a road towards self actualization?

Otto Rank's study of freedom of choice or even that of Rollo May's existentialism is somehow manifested by the respondents of this study. The respondents' choice to make was not whether they should be male or female; they already discovered who they are. Their choice was to bask in their own existence and be accepted for it. "Neither the ego nor the body nor the unconscious can be 'autonomous', but can only exist as parts of a totality. And it is in this totality that will and freedom must have their base (Rollo May)." Abraham Maslow's theory on Self actualization applies to every individual. As our respondents (and other transsexuals for that matter) have gone through different stages to the fulfillment

of their transition, are they reaching self actualization since becoming a full time female is what they have wanted all this time?

This study allowed the respondents to open doors and discover truths through their own experiences. They willingly shared their experiences to show how they have evolved to become what they are today as well as how they started thinking of themselves as women. They all showed that they can be as productive, successful and functional as any other persons. They have also blended well with society and assumed their roles in citizenry. They have fallen in and out of love and basked in happy romantic affiliations. They stuck with their families through thick and thin in spite of occasional rejections and avoidance. They were able to pursue education and looked for ways to divert their learnedness in whatever endeavors or undertaking. They have survived and evolved away from stages of self doubt and anger, especially when they solidly realized how they feel and what they truly want to become. Most of all, they look forward to growing old with the sense of fulfillment and happiness and that their unique status and predicaments were never deterrents to this. They are also looking forward that not far away from this day that this research is undertaken, Philippine society will look at them in the same way as they see others. They hope for genuine acceptance, equality, happiness and love. Finally, that in the future, *one does not have to be born a woman to live like a woman, to be a woman and yet be - normal.*

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[: http://www.pe.net/~bidstrup/phobia.htm](http://www.pe.net/~bidstrup/phobia.htm)

GenderPac (Gender Public Advocacy Coalition) is an non-profit group composed of individuals and organizations dedicated to pursuing "gender, affectional, and racial equality" and contesting gender-based oppression (Wilchins, 1997).

Calpernia Addams

<http://www.calpernia.com/>

Lynn Conway

ai.eecs.umich.edu/people/conway/conway.html

www.lynnconway.com

Milton Diamond

<http://www.hawaii.edu/PCSS/>

Sam Winter:

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STRAP

www.m2fstrap.org

Magazines:

Icon Magazine Philippines

The Advocate (www.advocate.com)

OUT Magazine (www.out.com)

APPENDICES

A.TABLES

B.QUESTIONNAIRES

C.FIGURES

D.ABOUT THE AUTHOR

HRT information
Table 7: Respondents' HRT from start and current intake

#	if on HRT currently	NAME	Age in years of HRT	First HRT brand	Current HRT brand	Learned HRT from	Doctor regulated	Monthly HRT Expense
1	Yes	Diana Prince	19	Diane 35/Dego Provera	Androcur	Friends/Beauty Pageants	No	P2,000
2	Yes	Wanda	15	Microgyl	Diane 35	Beautician, Transgender	No	P800
3	Yes	Cassandra	16	Provera	Syrinodactone/ Androcur	Friends/Beauty Pageants	No	P600
4	Yes	Elvira	14	Diane 35/Dego Provera	Diane 35/ Kamen	Friends/Beauty Pageants	No	P900
5	Yes	Arnilla	18	Dego Provera	Syrinodactone	TV Documentary	No	P600
6	Yes	Briella	15	Trust/ Diane 35	Syrinodactone/ Androcur	Friends/Beauty Pageants	No	P1,000
7	Yes	Mariah	14	Diane 35	Syrinodactone	Aunt/ Beauty Pageants	No	P600
8	Yes	Kardiana	14	Provera/ Microgyl	Estrofen	Jayz/Beauty Pageants	No	P500
9	Yes	Timie	15	Kamen	Estrofen/ Androcur	Transsexual neighbors / BF	No	P2,000
10	Yes	Ludla	17	Provera	Diane 35	Friends/Beauty Pageants	No	P800
11	Yes	King	17	Diane 35	Androcur	Friends/Beauty Pageants	No	P1,000
12	Yes	Dorina	15	Trust	Syrinodactone/ Androcur	Beautician, Transgender	No	P200
13	Yes	Apples	20	Diane 35/Dego Provera	Diane 35	Friends/Beauty Pageants	No	P500
14	Yes	Ima	22	Diane 35/ Microgyl	Kamen/ Diane 35	Friends/Beauty Pageants	No	P900
15	Yes	Prada	17	Diane 35	Dego provera/ Androcur/ Estrofen	Friends/Beauty Pageants	No	P2,500
total= all			mean = 16.53	most common on Dose=6	most common= Androcur 7	Beauty Pageants = 12	total= all	mean = P 993.33

Table 8: Internalized After effects and immediate actual effects of HRT on the Respondents

Respondants	<u>Areola erection /breast enlargement</u>	<u>mood swings</u>	<u>lesser body hair</u>	<u>erratic libido</u>	<u>hip enlargement</u>	<u>overall sense of feminization</u>	<u>overall actual feminization</u>
Diana Prince	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Wanda	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Cassandra	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Elvira	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Armida	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Priscilla	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Mariah	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Kurdapia	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Trixie	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Luella	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Kring	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Dorina	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Apples	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Trina	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Freda	Yes	Yes	Yes	Yes	Yes	Yes	Yes
total=15	All	All	All	All	All	All	All

Table 9: Cases summation of sexual orientation and relationship of respondents along with indicators of development and feelings of appropriateness of these preferences

Respondent	Sexual orientation	If currently in a relationship	Gender of first crush	Nationality of currently romantic partner	If one feels appropriateness of her orientation	Felt that as a transsexual, it is more difficult to find a genuine relationship
1 Diana Prince	heterosexual	yes	male	Japanese	yes	yes
2 Wanda	heterosexual	yes	male	Japanese	yes	yes
3 Cassandra	heterosexual	yes	male	French	yes	yes
4 Elvira	heterosexual	yes	male	African American	yes	yes
5 Anna	heterosexual	yes	male	British	yes	yes
6 Priscilla	heterosexual	yes	male	Canadian	yes	yes
7 Mariach	heterosexual	yes	male	German	yes	yes
8 Kuradapia	heterosexual	yes	male	Italian	yes	yes
9 Trina	heterosexual	yes	male	Australian	yes	yes
10 Luella	Bisexual	yes	male	Filipina (lesbian)	yes	yes
11 Kring	heterosexual	yes	male	Austrian	yes	yes
12 Dorina	heterosexual	yes	male	Welsh	yes	yes
13 Apples	Bisexual	yes	female	Filipina (lesbian)	yes	yes
14 Trina	heterosexual	no	male	none	yes	yes
15 Freda	heterosexual	yes	male	American	yes	yes
total =15	13 hetero.	14 in a relationship	14 male crush	12 with foreign partners	all = yes	all = yes

B. QUESTIONNAIRES:

ANN BOLIN : This is an extracted portion of the Anne Bolin Questionnaire, which was included during the interview section

Please answer honestly the following questions with true or false.

1. Most transsexuals are homosexuals
2. In feminine clothes I am just myself dressed up
3. A sex change operation would only help by making my transvestism legal
4. Cross dressing sometimes makes me feel very unhappy
5. I take or have taken female hormones
6. My mind is completely that of a woman
7. I wish I was not transvestite or transsexual
8. It is the feeling of femininity which matters more than the dress
9. I used to feel I wanted an operation to be rid of my male sex organs
10. My feelings change, sometimes I would really prefer to be a man
11. Anyone has a right to choose his sex role
12. The feminine side of myself has to be expressed at times
13. I want to be cured and be like any other man
14. Transsexualism is an illness
15. When I am dressed I am a different personality
16. My feminine self is much nicer than my male self
17. I know that the idea of being a woman is only a fantasy

Some Questions asked during the interview. Other questions were taken from the QOLQ and Anne Bolin's questionnaire.

- name (optional)
- age (required)/ date of birth (required)
- height in cms. / weight in kgs.
- place of birth (required)
- place where you grew up / stayed for the most part of your life
- ordinal position (pangilan ka sa magkakapatid)
- age of mother/ father - where they physically present until...
- are they your biological parents
- who were other people who frequently surrounded you or took care of you growing up
- at what age did you start talking and walking
- do you recall having your parents tell you stories about you when you were a baby? what were those stories?
- Do they recall having been more female like or male like when you were a baby? toddler? child?
- were your playmates mostly girls or boys? why?
- what were the games that you played when you were young?
- describe the preschool you attended (the demographic, mostly girls or boys/ exclusive or not/ christian, catholic or non sectarian)
- describe your gradeschool
- what were the tv shows that you watched growing up- describe them
- how did you identify yourself as a transsexual?
- what is a transsexual?
- how different is a transsexual from a homosexual?
- how long have you thought of yourself as a woman?
- what is a woman? what is your idea or concept of a woman?
- what are the qualities of a woman?
- what qualities of a woman do you embody?
- what makes you different from "men."
- what are the qualities of a man?
- do you see and know of yourself as a woman ten years from now?
- will you ever seek sexual reassignment surgery? when?
- how will you obtain sexual reassignment surgery?
- do you like your given name? is it a femal/feminine name or not?

- what is your feminine/ female name? why?
 - when did you acquire your female/ feminine name?
 - what is your concept of abnormality? what is abnormal behavior?
 - what is normal/ normal behavior?
 - what is acceptable/ desirable behavior?
 - seeing yourself as a woman in a man's body (or born in a man's body), how do you defend that this is "normal"
 - what should a person undergoing the same ordeals do?
 - Are you happy with your current sex?
 - Are you happy with your physical appearance?
-
- What would make you happy with your physical appearance?
 - What would you change with your face? Why?
 - Body? Why?
 - Voice? Why?
 - What name fits you? Why?
 - How early have you adopted a female name?
 - Do you have a role model/s? who? Why?
 - Are you closer to your mother or your father?
 - Are you closer to your brother or your sister?
 - What items / paraphernalia from your mother or sister/s have you borrowed? Why? How frequent?
 - Are you happy as a transsexual? Why and explain.
 - When did you encounter the concept of transsexualism? How?
 - What is your definition and description of transsexualism based on preconceived knowledge?
 - When did the concept of transsexualism became clear to you? Why? How?
 - Describe your childhood. Was it a happy one?
 - Please describe yourself extensively and give me your life history in no less than 50 sentences.

Questionnaire on Femininity and transgendersim (IFAS) extracted from and reflecting the BSRI/ and SAGE

Please respond to each item by showing whether it is MORE TRUE or MORE FALSE.

Please mark in the TRUE (T) or FALSE (F) box.

Please respond to all items.

<input type="checkbox"/> T <input type="checkbox"/> F	
<input type="checkbox"/> T <input type="checkbox"/> F	1. When I wear womens' clothing I do not consider it "cross dressing" because my true gender is feminine (or mostly feminine).
<input type="checkbox"/> T <input type="checkbox"/> F	2. I have an alternative "fantasy cross dressing wardrobe" which is too sexy to wear in public.
<input type="checkbox"/> T <input type="checkbox"/> F	3. I have adopted a feminine name which is now my legal name.
<input type="checkbox"/> T <input type="checkbox"/> F	4. If I am wearing a sexy dress I sometimes feel more attracted to men.
<input type="checkbox"/> T <input type="checkbox"/> F	5. I believe I am a "woman in a man's body."
<input type="checkbox"/> T <input type="checkbox"/> F	6. Sometimes I have acquired more sets of fancy underwear or other sexy clothing than I need.
<input type="checkbox"/> T <input type="checkbox"/> F	7. I have a driver's license or other valid identification showing my female picture and name.
<input type="checkbox"/> T <input type="checkbox"/> F	8. I eat in restaurants in my feminine role several times a year.
<input type="checkbox"/> T <input type="checkbox"/> F	9. In my feminine role, I usually feel like I am a woman.
<input type="checkbox"/> T <input type="checkbox"/> F	10. Sometimes I get a sexual thrill when I see my feminine image in a mirror.
<input type="checkbox"/> T <input type="checkbox"/> F	11. While in the feminine role, men I did not know have bought me refreshments or drinks.
<input type="checkbox"/> T <input type="checkbox"/> F	12. I have lived entirely (or almost entirely) as a woman for more than six consecutive months.
<input type="checkbox"/> T <input type="checkbox"/> F	13. I prefer to think of my feminine name as my real name.
<input type="checkbox"/> T <input type="checkbox"/> F	14. While in the feminine role, I have been escorted to a restaurant by a man as his date.
<input type="checkbox"/> T <input type="checkbox"/> F	15. When I feel tense, wearing something feminine will usually make me feel a little more calm.
<input type="checkbox"/> T <input type="checkbox"/> F	16. I have lived entirely (or almost entirely) as a woman for one year or longer.
<input type="checkbox"/> T <input type="checkbox"/> F	17. I can experience feelings of being female at any time no matter how I am dressed.
<input type="checkbox"/> T <input type="checkbox"/> F	18. Buying and using beautiful makeup will often make me feel sexually excited.
<input type="checkbox"/> T <input type="checkbox"/> F	19. I have received 10 or more hours of electrolysis.
<input type="checkbox"/> T <input type="checkbox"/> F	20. I have received 50 or more hours of electrolysis.
<input type="checkbox"/> T <input type="checkbox"/> F	21. While in the feminine role, I have been escorted to some kind of entertainment event by a man on a date.
<input type="checkbox"/> T <input type="checkbox"/> F	22. Even when not in the feminine role I reveal some feminine mannerisms (or I used to).
<input type="checkbox"/> T <input type="checkbox"/> F	23. Putting on lipstick or perfume often makes me feel erotic or sexy.
<input type="checkbox"/> T <input type="checkbox"/> F	24. I can enjoy being a woman, but at other times I enjoy functioning like a man.
<input type="checkbox"/> T <input type="checkbox"/> F	25. I often prefer sexy hosiery and high heels to the more ordinary style many women wear.
<input type="checkbox"/> T <input type="checkbox"/> F	26. Being in the feminine role is almost always a sexually arousing experience for me.
<input type="checkbox"/> T <input type="checkbox"/> F	27. While in the feminine role, I have danced with a man.
<input type="checkbox"/> T <input type="checkbox"/> F	28. Wearing beautiful lingerie usually gives me some sexual excitement.
<input type="checkbox"/> T <input type="checkbox"/> F	29. When in my feminine role I feel I am expressing my "true self," not putting on an act.

<input type="checkbox"/> <input type="checkbox"/> [F]	30. I have talked to a physician about obtaining female hormones (whether you did obtain them or not).
<input type="checkbox"/> <input type="checkbox"/> [F]	31. While in the feminine role, I have been passionately kissed on the lips by a man.
<input type="checkbox"/> <input type="checkbox"/> [F]	32. If it were possible, I'd choose to live my life as a woman (or I now do so).
<input type="checkbox"/> <input type="checkbox"/> [F]	33. Some specific articles of clothing usually have an especially powerful effect on my sexual arousal.
<input type="checkbox"/> <input type="checkbox"/> [F]	34. I have taken female hormones regularly for three months or longer.
<input type="checkbox"/> <input type="checkbox"/> [F]	35. While in the feminine role, I have had a physical encounter with a man that went beyond kissing.
<input type="checkbox"/> <input type="checkbox"/> [F]	36. If I must put aside my feminine role for even a short time, it is very hard for me to do so.
<input type="checkbox"/> <input type="checkbox"/> [F]	37. Wearing beautiful clothes and makeup often brings me greater sexual pleasure than other sexual activities.
<input type="checkbox"/> <input type="checkbox"/> [F]	38. Often I become sexually excited just thinking about being a woman.
<input type="checkbox"/> <input type="checkbox"/> [F]	39. I have taken female hormones regularly for six months or longer.
<input type="checkbox"/> <input type="checkbox"/> [F]	40. As a man, I am exclusively attracted to women.
<input type="checkbox"/> <input type="checkbox"/> [F]	41. I almost always wear one or more items of feminine apparel under my male clothes.
<input type="checkbox"/> <input type="checkbox"/> [F]	42. I often become sexually excited when I shop for women's clothing, shoes, or makeup.
<input type="checkbox"/> <input type="checkbox"/> [F]	43. I have taken female hormones regularly for one year or longer.
<input type="checkbox"/> <input type="checkbox"/> [F]	44. As a man, I am attracted to both women and men (not necessarily equally).
<input type="checkbox"/> <input type="checkbox"/> [F]	45. I daydream or think about being a woman at least once a day.
<input type="checkbox"/> <input type="checkbox"/> [F]	46. Often I become sexually excited when I read about men who become women.
<input type="checkbox"/> <input type="checkbox"/> [F]	47. I have discussed with a physician possible (or actual) cosmetic surgery to improve my feminine appearance.
<input type="checkbox"/> <input type="checkbox"/> [F]	48. In the feminine role, I am exclusively attracted to women.
<input type="checkbox"/> <input type="checkbox"/> [F]	49. I daydream or think about being a woman at least 10 times each day.
<input type="checkbox"/> <input type="checkbox"/> [F]	50. Being in the feminine role is a super-pleasure for me.
<input type="checkbox"/> <input type="checkbox"/> [F]	51. I have received a small amount (or more) of cosmetic surgery to improve my feminine appearance.
<input type="checkbox"/> <input type="checkbox"/> [F]	52. When in the feminine role, I am attracted to both men and women (not necessarily equally).
<input type="checkbox"/> <input type="checkbox"/> [F]	53. After several hours (or days) in the feminine role I'm usually ready to change back into men's clothes.
<input type="checkbox"/> <input type="checkbox"/> [F]	54. Being in the feminine role often produces strong feelings of exhilaration.
<input type="checkbox"/> <input type="checkbox"/> [F]	55. On one (or more) occasions, while in the feminine role I have had a sexual encounter with a man.

Quality of Life for you in the Philippines

Cassandra

Section 1: Basic information about you

1. My age is: 24

4. My ethnic group is: (Please ring one answer)

1. Filipino

5. My religion is: (Please ring one answer)

4. Other - please specify (Catholic)

6. The highest education I received was:

(Please ring one answer)

4. College / university

7. Nowadays I am:

(Please ring one answer)

2. an employee in a private business

If you are working please answer:

I work as a call center employee / and a part time entertainer (singer/dancer/host)

I work several hours per week

8. I think of myself nowadays as:

(Please ring one answer)

*2. babae (female)**5. babaeng transgendered/transsexual (transgendered/transsexual woman)*

If an answer that is not "lalake" then

I began to think this way at 5 years

9. Right now, if I could, I would prefer to be:

(Please ring one answer)

*2. woman born as a woman)**3. as I am now*

10. In a next life, I would prefer to be:

(Please ring one answer)

2. woman born as a woman)

11. When I am 50 years old, I believe that I will be presenting to people as:

(Please ring one answer)

2. woman born as a woman)

12. I have the following number of brothers and sisters:

3)___0___ elder brothers

(___0___ of them want to live as a woman),

13. The following people know I am *bakla na kinikilalang ang sarili bilang isang babae* (*babaeng transgendered/transsexual*) (= *bakla identifying as a woman, transgendered/transsexual woman*):

(One answer for each item please)

1. Father *1. yes*

If "yes" please answer this item:

He first knew when I was not sure years old.

2. Mother *1. yes*

If "yes" please answer this item:

She first knew when I was not sure years old.

3. Brother(s) *3. not sure*

4. Sister(s) *3. not sure*

5. Other relatives *3. not sure*

6. Friends *2. most*

7. Partner(s) *2. most*

8. Current Employer *1. yes 2. no 4. don't have*

9. Strangers *2. most*

14. I dress as female most / all of the time:

(One answer please)

1. Yes, first of all at age 5 years

15. I dress as female in front of the following people:

(One answer for each item please)

1. Father *1. always*

2. Mother *1. always*

3. Brother(s) *1. always*

4. Sister(s) *1. always*

5. Other relatives

1.always

6. Friends *1.always*

7. Partner(s) *1.always*

8. Current Employer

1.always

9. Strangers *1.always*

16. People in my life generally react to me being *bakla na kinikilalang ang sarili bilang isang babae(babaeng transgendered/transsexual)* (= *bakla identifying as a woman, transgendered/transsexual woman*) in the following ways: (One answer for each item please)

- | | | | |
|---------------------|---------------------|---------------------|---------------------|
| 1. Father | <i>3.acceptance</i> | | |
| 2. Mother | <i>2.tolerance</i> | | |
| 3. Brother(s) | <i>2.tolerance</i> | | |
| 4. Sister(s) | <i>5.don't have</i> | | |
| 5. Other relatives | <i>1.rejection</i> | <i>2.tolerance</i> | <i>3.acceptance</i> |
| 6. Friends | <i>3.acceptance</i> | | |
| 7. Partner(s) | <i>3.acceptance</i> | | |
| 8. Current Employer | <i>5.don't have</i> | | |
| 9. Strangers | <i>2.tolerance</i> | <i>3.acceptance</i> | |

17. People in my life generally treat me as if I am: (One answer for each item please)

- | | | | |
|---------------------|---------------------|---------------------|--|
| 1. Father | <i>3.other</i> | | |
| 2. Mother | <i>3.other</i> | | |
| 3. Brothers | <i>3.other</i> | | |
| 4. Sisters | | <i>4.don't have</i> | |
| 5. Other relatives | <i>3.other</i> | | |
| 6. Friends | <i>2.female</i> | | |
| 7. Partner(s) | <i>2.female</i> | | |
| 8. Current Employer | <i>4.don't have</i> | | |
| 9. Strangers | <i>2.female</i> | | |

18. I have grown my hair long, female style: (One answer please)

1.Yes, first of all at age 20 years

19. I took hormones:

(One answer please)

1. Yes, first of all at age 16 years.

Still doing it? Yes (yes or no)

20. I have had surgery / injections / implants to change my appearance: (One answer please)

1. Yes, first of all at age 21-24 years

21. I have had sex reassignment surgery: (One answer please)

1. no, not yet

22. Strangers think I was born a woman: (One answer for each item please)

(1) when they see me at a distance

All the time

(2) when they see me close-up with make-up

Most of the time

(3) when they see me close-up without make-up

Most of the time

(4) when they hear me talk

Most of the time

Section 2. Being who you are; the effects upon your life

1. Various aspects of your life are listed in items below. Please indicate, for each item, whether, during your childhood (say, up to the age of 15), being who you are (*bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered/transsexual)*) made that part of your life better or worse. For each item ring one answer.

- | | |
|---|---------------|
| 1. the way my father treated me | 2. Same |
| 2. the way my mother treated me | 2. Same |
| 3. the way my brother(s) treated me | 2. Same |
| 4. the way my sister(s) treated me | 4. Don't have |
| 5. the way other close relatives treated me | 3. Worse |
| 6. how willing people were to be my friends | 2. Same |
| 7. the way my school teachers related to me | 3. Worse |
| 8. the way my schoolmates related to me | 2. Same |

2. For these same items please indicate how important that part of your life was for you in your childhood. For each item ring one answer.

1. the way my father treated me *1.Very*
 2. the way my mother treated me *1.Very*
 3. the way my brother(s) treated me *1.Very 2.Quite*
 4. the way my sister(s) treated me *5.dont have.*
 5. the way other close relatives treated *3.A little*
 6. how willing people were to be my friends *2.Quite*
 7. the way my school teachers related to me *3.A little*
 8. the way my schoolmates related to me *2.Quite*
-

3. Here are some more items, this time about your life nowadays. Please indicate whether, nowadays (say, over the last two years), being who you are (i.e. *bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered/transsexual)*) has made each part of your life better or worse. For each item ring one answer.

1. the way my father treats me *1.Better*
2. the way my mother treats me *1.Better*
3. the way my brother(s) treat(s) me *2.Same*
4. the way my sister(s) treats(s) me *4.Don't have*
5. the way other close relatives treat me *2.Same*
6. how willing people are to become friends with me *2.Same*
7. how willing people are to become my partner *1.Better*
8. the way partner(s) treat(s) me *1.Better*
9. a partner's willingness to enter a lasting relationship *1.Better*
10. my opportunity to marry a partner *2.Same*
11. my opportunity to adopt children *2.Same*
12. my educational qualifications *2.Same*
13. my chance of getting a job *2.Same*
14. how many different jobs I can choose from *3.Worse*
15. the way co-workers treat me *2.Same*
16. my chance of keeping a job *2.Same*
17. my chance to get a promotion *2.Same*
18. my chance to earn more money *2.Same*
19. the way strangers I meet treat me *1.Better*
20. people teasing me / calling me names *1.Better*
21. people sexually harassing me *1.Better*
22. people being violent towards me *1.Better*

23. extent to which my religion accepts me	3.Worse
24. ease with which I can get a passport	2.Same
25. ease with which I enter another country	2.Same
26. ease with which I can use a public toilet	1.Better
27. people treating me / greeting me as male	1.Better
28. people treating me as unusual	1.Better
29. people treating me as sinful / immoral	2.Same
30. people treating me as sexually perverted	2.Same
31. people treating me as sick	2.Same
32. ease with which I can consult a doctor when I am physically ill	2.Same
33. getting the right medical treatment	2.Same
34. the costs of drugs / surgery that I need	2.Same
35. my ID showing I am a male	3.Worse
36. my birth certificate showing I am male	2.Same
37. my legal status as a male	3.Worse
38. avoiding military service	4.No opinion
39. protection against discrimination	2.Same
40. legal rights	2.Same

4. For these same items, please indicate how important nowadays (say over the last two years), this part of your life is for you.

1. the way my father treats me	2.Quite
2. the way my mother treats me	2.Quite
3. the way my brother(s) treat(s) me	3.A little
4. the way my sister(s) treats(s) me	5.don't have
5. the way other close relatives treat me	3.A little
6. how willing people are to become friends with me	2.Quite
7. how willing people are to become my partner	1.Very
8. the way partner(s) treat(s) me	1.Very
9. a partner's willingness to enter a lasting relationship	1.Very
10. my opportunity to marry a partner	1.Very

- | | |
|---|---|
| 11. my opportunity to adopt children | 2. <i>Quite</i> |
| 12. my educational qualifications | 3. <i>A little</i> |
| 13. my chance of getting a job | 1. <i>Very</i> |
| 14. how many different jobs I can choose from | 1. <i>Very</i> |
| 15. the way co-workers treat me | 1. <i>Very</i> |
| 16. my chance of keeping a job | 1. <i>Very</i> |
| 17. my chance to get a promotion | 3. <i>A little</i> |
| 18. my chance to earn more money | 2. <i>Quite</i> |
| 19. the way strangers I meet treat me | 1. <i>Very</i> |
| 20. people teasing me / calling me names | 1. <i>Very</i> |
| 21. people sexually harassing me | 1. <i>Very</i> |
| 22. people being violent towards me | 1. <i>Very</i> |
| 23. extent to which my religion accepts me | 4. <i>Not at all</i> 5. <i>No opinion</i> |
| 24. ease with which I can get a passport | 1. <i>Very</i> |
| 25. ease with which I enter another country | 1. <i>Very</i> |
| 26. ease with which I can use a public toilet | 1. <i>Very</i> |
| 27. people treating me / greeting me as male | 1. <i>Very</i> |
| 28. people treating me as unusual | 1. <i>Very</i> |
| 29. people treating me as sinful / immoral | 1. <i>Very</i> |
| 30. people treating me as sexually perverted | 1. <i>Very</i> |
| 31. people treating me as sick | 1. <i>Very</i> |
| 32. ease with which I can consult a doctor when I am physically ill | 2. <i>Quite</i> |
| 33. getting the right medical treatment | 1. <i>Very</i> |
| 34. the costs of drugs / surgery that I need | 2. <i>Quite</i> |
| 35. my ID showing I am a male | 1. <i>Very</i> |
| 36. my birth certificate showing I am male | 1. <i>Very</i> |
| 37. my legal status as a male | 1. <i>Very</i> |
| 38. avoiding military service | 5. <i>No opinion</i> |
| 39. protection against discrimination | 1. <i>Very</i> |
| 40. legal rights | 1. <i>Very</i> |

Section 3. Your feelings about yourself and your life

1. Here are some statements about how you have felt about yourself and your life recently. For each statement, please put a ring around an answer to show how often you have felt that way over the last month.

General feelings about yourself

(One answer for each item please)

1. I feel I am a person of value, at least equal to others.

1.All the time

2. I feel I have a number of good qualities.

1.All the time

3. All in all, I feel I am a failure.

5.None of the time

4. I am able to do things as well as most other people.

2.Usually

5. I feel I do not have much to be proud of.

5.None of the time

6. I take a positive attitude toward myself.

1.All the time

7. On the whole, I am satisfied with myself.

2.Usually

8. I wish I could have more respect for myself.

*4.Seldom**5.None of the time*

9. I feel useless.

5.None of the time

10. I think I am no good at all.

5.None of the time

11. I am satisfied with my appearance .

*2.Usually**3.Sometimes*12. I am comfortable with people knowing I am *bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered/transsexual)**2.Usually**3.Sometimes**4.Seldom*

Feelings about your relationships with other people (One answer for each item please)

13. I feel people around me are like strangers

*3.Sometimes**4.Seldom*

14. I don't get much satisfaction from the groups I am in.

*4.Seldom**5.None of the time*

15. I feel there are good people around me who understand me.

*2.Usually**3.Sometimes*

16. I feel there is no one I feel close to.

*4.Seldom**5.None of the time*

17. I feel I have a romantic partner who gives me support and encouragement.

2.Usually 3.Sometimes

18. I feel I belong to a network of friends

2.Usually 3.Sometimes

19. I feel there are people I can count on for companionship.

2.Usually

20. I feel I don't have a special relationship with someone who understands me.

4.Seldom 5.None of the time

21. I feel I am an important part of someone's life.

2.Usually 3.Sometimes

22. I feel I don't have a special love relationship.

4.Seldom 5.None of the time

23. I am afraid of other people noticing my shortcomings.

3.Sometimes 4.Seldom

24. I worry about what kind of impression I am making on someone.

2.Usually 3.Sometimes

25. I am afraid that others will not approve of me.

2.Usually 3.Sometimes

26. I am afraid that people will find fault with me.

3.Sometimes 4.Seldom

27. Other people's opinions of me bother me.

3.Sometimes 4.Seldom

28. I usually worry about what kind of impression I make.

2.Usually 3.Sometimes

29. I worry that I will say or do the wrong things.

3.Sometimes 4.Seldom

Feelings of happiness and sadness (For all items below please ring one answer)

30. I am bothered by things that should not bother me.

3.Sometimes 4.Seldom

31. I cannot shake off sad thoughts even with help from my family or friends.

3.Sometimes 4.Seldom

32. I feel I am just as good as other people

1.All the time 2.Usually

33. I have trouble keeping my mind on what I am doing.

3.Sometimes 4.Seldom

34. I feel depressed.

4.Seldom

35. I feel that everything I do is an effort

3.Sometimes 4.Seldom

36. I feel hopeful about the future.

2. *Usually*

3. *Sometimes*

37. I feel my life has been a failure

5. *None of the time*

38. I feel fearful.

4. *Seldom*

39. I am happy.

2. *Usually*

40. I feel lonely

4. *Seldom*

41. People are unfriendly

3. *Sometimes*

4. *Seldom*

42. I enjoy life.

2. *Usually*

43. I feel sad.

4. *Seldom*

44. I feel people dislike me

3. *Sometimes*

4. *Seldom*

45. I can't get 'started'.

5. *None of the time*

46. My feeling about my life is that I am

1. *Very happy*

2. *Quite happy*

47. I think about killing myself

5. *None of the time*

48. I have tried to commit suicide in my life:

3. *Never*

Section 4. A few last questions

1. I have friends who are:

(One answer for each item please)

(1) 'real' women

1. *many*

(2) men

2. *some*

(3) *bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered / transsexual)*

1. *many*

2. When I have spare time I spend it with: (For this item you can ring more than one answer)

1. Family,

2. Friends who are female,

4. Friends who are bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered / transsexual)

5. Others - please specify (partner)

6. Alone

3. When I need help I turn to:

(For this item you can ring more than one answer)

1. Family,

2. Friends who are female,

4. Friends who are bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered / transsexual)

5. Others - Please specify (boyfriend),

4. In my opinion I became bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered / transsexual) because of:

(One answer for each item please)

1. Something biological

1. Strongly agree

2. God's will

2. Agree

3. Can't decide

3. Influence of my parents

4. Disagree

4. Influence of my brother(s)

5. Strongly disagree

5. Influence of my sister(s)

4. Disagree

6. Influence of other relatives

5. Strongly disagree

7. Influence of female friends

5. Strongly disagree

8. Influence of male friends

5. Strongly disagree

9. Influence of friends who are bakla na kinikilalang ang sarili bilang isang babae (babaeng transgendered / transsexual)

5. Strongly disagree

10. Other reasons (please specify) ___ i was not primarily influenced but seeing others and being with others allowed me to know my options

5. In my opinion, people born as one sex but living as the other sex: (One answer for each item please):

(1) have a psychological problem (their mind doesn't match their body)

5. *Strongly disagree*

(2) have a physical problem (their body doesn't match their mind)

2. *Agree*

(3) have a moral problem (people of one sex should not live as members of the other sex)

5. *Strongly disagree*

(4) have no problem at all (they are just different from other people).

1. *Strongly agree*

6. I am sexually attracted to:

(For this item you can ring more than one answer)

1. *Males*

7. During my life, wearing female clothes has made me sexually excited: (One answer please)

1. *Never*

8. During my life seeing or thinking of myself as a woman has made me sexually excited:

(One answer please)

1. *Never*

9. Is there anything else you want to tell us?

I am happy with and about myself. Some of my answers here required explanations that I have given in the actual interview part.

Thank you for your help.


Sam Winter, Liselot Vink and Sass Sasot.

Thanks also to the assistance of the Suporn Clinic.

Mini-Mental State Examination

Maximum Score	Score	
ORIENTATION		
5	()	What is the: (year) (season) (date) (day) (month)
5	()	Where are we: (state) (county) (town) (facility) (floor)
REGISTRATION		
3	()	Name three objects and have person repeat them back. Give one point for each correct answer on the first trial. 1. _____ 2. _____ 3. _____ Then repeat them (up to 6x) until all three are learned. [Number of trials _____]
ATTENTION AND CALCULATION		
5	()	Serial 7's. Count backwards from 100 by serial 7's. One point for each correct answer. Stop after 5 answers. [93 86 79 72 65] Alternatively spell "world" backwards. [D - L - R - O - W]
RECALL		
3	()	Ask for the names of the three objects learned above. Give one point for each correct answer.
LANGUAGE		
9	()	Name: a pen (1 point) and a watch (1 point) Repeat the following: "No ifs, ands, or buts" (1 point) Follow a three-stage command: "Take this paper in your [non-dominant] hand, fold it in half and put it on the floor". (3 points) [1 point for each part correctly performed] Read to self and then do: "Close your eyes" (1 point) Write a sentence [subject, verb and makes sense] (1 point) Copy design [5 sided geometric figure; 2 points must intersect] (1 point)
Score: ____/30 Alert Overly Anxious Concentration Difficulty		
Drowsy		

CLOSE YOUR EYES		

		
Sentence: _____		

additional information relating to the MMSE can be found [here](#)



About the Author

Bryan Rodriguez Alegre is currently a Trainer at TeleTech CMC, one of the leaders in Global Customer Service. She is also a part time Personality Development Consultant and has worked with special children. She obtained her BS degree in Psychology at the University of Santo Tomas as well as her MA in Clinical Psychology. She also earned a Certificate for Teaching from the Philippine Normal University and passed the LET in 1998. She is a preop transsexual and her research interests include sexuality, gender diversity and Asian psychology. She is a member of STRAP, the first advocacy and support group in the Philippines for M2F transsexuals. She lives in Quezon City.

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