

Chapter 15: Transition is a Process by Reid Vanderburgh, MA

That summer was a time of self-discovery. The hormones made me unbearably cocky and arrogant, as a teenage boy often is. I was not taking classes during the summer, though of course I was still working. In my new-found arrogance, I tried unilaterally to bring organization to my mixed chorus, Bridges, which had never had much formal structure in its seven years of existence. Though many members said they supported this move on my part, the director did not and she ultimately prevailed simply by refusing to leave or change. It was impossible to oppose this tactic on her part; the very lack of structure of the group meant there was no way to oust a director who did not want to leave. My voice began changing about two months after beginning hormones, and I used that as an excuse to go on leave from the very tense situation in my chorus.

Late in the summer of 1997, I attended the third FTM conference, in Boston. By this time, I was passing as male most of the time. The only people who still tended to see me as a woman were lesbians and gay men. The former still recognized me as one of their own, and the latter could sense that I was *not* one of their own. Most of the rest of the world operates on autopilot the majority of the time and had been seeing me as a man anyway. Now that my voice had begun to deepen, mainstream folks never saw me as female again.

I enjoyed the Boston conference, and made a new friend, Jon. He'd been on hormones nine years, isolated in a small town in Iowa the whole time. He'd gotten his original prescription from a doctor who had no idea what he was doing, or the

power of the drug he was prescribing. This doctor had Jon inject himself with a normal dose (1 cc.) *every three days*, rather than the usual every other week. It was three years before Jon discovered this was a massive dose of hormones and not the typical dosage for an FTM.

Jon's story reinforced for me yet again the importance of having trans people become service providers for each other, every step of the way. Jon and I had endless discussions about therapy with trans folks, as I was becoming a therapist and Jon was a social worker.

I also met a PFLAG member and conference volunteer, Mark, who was a student at Lesley College at the time. He tried hard to talk me into coming to Lesley, which was a pioneer in the field of expressive arts therapy. At the time, I had no idea what this form of therapy entailed, and I did not like Boston as a city, so I did not seriously consider Lesley. Now, having studied expressive arts as a graduate student, I understand its efficacy. It's a natural fit for working with trans clients, and in some ways I do wish I'd investigated Lesley College more thoroughly. However, we make choices for a reason, whether we see that reason immediately or not, and it just didn't feel right to apply to Lesley College.

I went back to PSU for my senior year sounding like a man. The hormones had also caused my breast tissue to kind of collapse downward even more than it already had due to age. I stopped wearing the custom binder I'd bought back in 1996, which was giving me shoulder problems, and wore tight-fitting t-shirts under very baggy fitting button-down shirts that I would leave unbuttoned and untucked. Sloppy, yes, but this allowed me to pass easily that fall, pre-

surgery.

Of course, as soon as I had my letters of referral from B.J. and Dr. Maletsky, I made an appointment with Dr. Toby Meltzer, surgeon extraordinaire and all-around nice guy. How different would my life have been had I chosen Hofstra University instead of Pacific University, back in 1976? I would not have been living in Portland, Oregon, a city with an experienced gender identity therapist, a sympathetic psychiatrist, and one of five or six surgeons in North America whose practice includes extensive experience doing trans surgeries. Toby's office was a five minute walk from PSU, in downtown Portland.

If it had fit my schedule, Toby could have fit me in during early September, shortly after my 42nd birthday, but I had to go back to school. The next available date that fit my schedule was December 9. As is the case with B.J. and Dr. Maletsky, Toby Meltzer considered the standards of care to be mere guidelines. He was not going to make me wait six months to a year on hormones prior to considering surgery. I'd done my real-life test, he trusted B.J.'s and Dr. Maletsky's assessment, and he trusted my own desire to have top surgery as soon as possible. He would have done it within a month or two of my beginning hormones, had it fit my schedule. My chest was very large, and he quite understood the urgency I felt in getting it dealt with.

Once my voice changed and I realized I passed well enough with loose-fitting shirts on, I lost some of that sense of urgency about having surgery immediately and was quite willing to wait until it fit my class schedule. However, I no longer felt comfortable working out at Gold's Gym. With my voice sounding male, I just could not wear workout clothes and know I was being seen

as female. My gender dissonance had increased in direct proportion to my ability to be seen as male.

When I planned my class schedule for the fall of 1997, I realized I would have to take two of my final exams early in order to make my December 9 surgery date. I waited until after I'd taken several exams and gotten A's on them to let my teachers know about my surgery date, as it would mean I would be taking the exams on my own, unmonitored. Following my pattern of only dealing with what was on my plate for the immediate future, I studied for my finals and took three exams on December 8, 1997, which quite effectively distracted me from the idea of having major surgery the next morning!

I got up at 5:00 a.m. on December 9, 1997, went into Eastmoreland Hospital and had top surgery at 7:00 a.m. I'd seen Toby a couple of days before, and he had closely examined my chest and made markings on it to outline the cuts he would make. He chastised me for never having had a mammogram, and immediately called the mammography department and had them see me then and there. Even before I was aware of my gender dissonance, I'd always been too self-conscious to ever have any such "female exams" before. This one was bearable because Toby would not perform my top surgery without it, and because I knew it would be the last time I would ever experience having my breasts looked at or handled (at least, while I was conscious).

I had no idea how I might react to the anesthesia, as I'd never had surgery before, so I asked Erin and Liza to call me before coming to visit me in the hospital. They called the afternoon after my morning surgery, and I said I felt great (which was quite true, I was not putting a bold face on it

– I felt great as long as I didn't try to move). They came to my room, a couple of other people dropped in, I ate two hospital dinners and we watched some movie on TV. I felt lighter by much more than the 8-9 pounds that had been removed from my chest. Between the hormones and top surgery, I'd done everything I wanted, and all I had to do now was... live. Very scary thought, that. I no longer had any external circumstance to blame if I was unhappy with life.

I went home the following day. I'd arranged for Choir friends to come over at various times and do things for me, I had two weeks off work (my bosses were very supportive of my transition), and three weeks off school. I sat in my recliner all day, Bear Cub on my lap, and watched a lot of television, or read from the stack of murder mysteries I'd acquired with this time period in mind. I came home that first day and discovered one of my close friends, Marcy, had come over while I was gone and had set up and decorated a Christmas tree for me.

I sat and thought a lot about the nature of family and friendship. Marcy was a fairly recent addition to the alto section in Bridges, and I'd met her since my 1995 epiphany. She had never known me as Nancy. When Marcy found out through the grapevine what I was doing with my life, she came to me and proactively offered her friendship and support. She has since become as close a friend to me as Erin or Liza.

I have often found that to be the case, that my friendships have shifted somewhat because of my transition. While no one I'm close to actively rejected me, some of my friends are more flexible than others and were better able to transition with me. Of course I found myself seeking out the company of those who were more comfortable with me. If I made a list ranking

my friends by how close I feel to them, the names would be much the same, but the order of ranking would be somewhat different than prior to my transition.

Those first few weeks post-surgery, I was extremely limited in my range of upper body motion, though fortunately I had no complications from the surgery. My grafted nipples stuck on fine, and there was never any sign of infection. I wasn't in pain, as long as I didn't try to move much, and never used any of the painkillers prescribed for me. However, the stitches were more binding than I'd imagined anything could be. I felt as if there were staples in my chest. Stretching my arms more than a few inches in any particular direction was out of the question.

After a month or so, I attempted to go back to the gym. Though I was using the lightest weights possible, I still felt something pull in my pectoral region, and I gave it up. I had not been able to stretch at all, but thought using low level weights would perform the same function. Wrong! Gradually, I noticed a pain developing in my right shoulder area. I had some massage, but the pain did not go away. By the end of each day, my right shoulder was in a great deal of pain from the weight of my arm hanging down. Each morning, it was pain-free upon waking, from the alleviation of gravity, but by the end of the day, I'd be in pain no matter how I held my right arm. I bought a sling, but this did not help much.

This pain lasted for nearly a year, and only went away when I went back to a gym and hired a personal trainer. I told him I'd had some chest surgery, though not what for, and the nature of my problem. He gave me some exercises to do that began the healing process. I highly recommend anyone who has a large chest reconstructed, seek out some physical therapy or a good trainer at a

gym, after a few months.

Once I'd had those few weeks off to recover from surgery, it was back to school and work. I was nearing the end of my undergraduate education, and taking senior level classes that were somewhat more interesting than lower-level coursework tends to be. Just about every class I'd taken to this point had treated psychology as a science, and some had followed the medical model to an extreme. Psychopathology was one of the most depressing and dehumanizing courses I took at PSU. I also took two quarters of statistics, and a course in research methods, all requirements for a BA in Psychology at PSU.

The more I studied within this paradigm, the more convinced I became that this was no way to work with people. I came to see the fundamental flaws in the scientific method as applied to human beings, and I despaired of being able to help clients at all. I saw quite clearly why it was that so many people joked about therapy and saw psychology as "pseudoscience." They are right, clinical psychology is *not* a science. However, I came to see that those who assumed therapy to be non-effective because its results are not scientifically measurable, were illogically assuming that everything worthwhile and effective can be assessed via science.

I came to a different conclusion, that people cannot be reduced to variables that can be scientifically manipulated as one can manipulate drug dosages to determine their efficacy. If people can't be reduced to variables in laboratory settings, then it follows that they cannot be studied using the scientific method, as manipulation of variables under controlled conditions is the very basis of that methodology.

Taking this line of reasoning further, it

occurred to me that assigning people to DSM categories is also a flawed methodology, as there is no objective testing method that can back up the categorical assignment. Assessment itself is subjective, one human being assessing another. I became disillusioned with science as applied to the therapeutic or the diagnostic process. It became clear to me that therapy and assessment is an art, rather than a science.

This might have made me question my future in the field of clinical psychology, since it was still being taught using the scientific medical model that I now saw as the wrong approach. Fortunately, I took one class during my tenure at PSU that provided me with a different avenue. The class was called Loss and Grief. In discussing how various psychological perspectives view the grieving process, I heard of transpersonal psychology for the first (and only) time in my undergraduate career. This perspective holds that people are a psychospiritual whole, and that spirituality is a basic human need.

Further, transpersonal psychology is holistic, believing one can't separate mind from body. In this, it combines western psychology with the eastern philosophy of healing. I had begun to wonder if I was ever going to find a perspective that would speak to me, and now I finally had!

I had come to see that my transition could be viewed as spiritual, psychological, emotional, and physical, depending on which level I cared to examine. The view that fit the transition process *worst* was the one that is most commonly used, the medical model and definition as outlined in the DSM. Finding out that there was a form of therapy that was non-pathologizing and that combined the spiritual, psychological and emotional, felt very much like coming home.

I decided this was going to be my path as a therapist, helping others deal with the ramifications of their own transitions. Transition affects all aspects of one's life; nothing is untouched, nothing is unchanged. A holistic approach to therapy seemed essential to me in helping people going through *any* major life transition, whether due to gender dissonance, dealing with loss of a spouse or child, sudden career changes, etc. I knew I'd finally found my path, in addition to my "brand" of therapy.

Ironically, the Loss and Grief class was an elective course, not offered very often, and only eight people signed up as it was taught as a weekend intensive. With this kind of exposure at the undergraduate level, it's no wonder transpersonal psychology is still largely unknown. I did an internet search on "transpersonal psychology" and the name John F. Kennedy University kept turning up.

I sent an e-mail asking for more information, though from what I'd read on the website, I knew I'd found my graduate school. I did not apply to any other schools. I sent in my application in early summer, to begin that fall. The only qualm I felt is that JFKU is located in the Bay Area – I would have to leave Portland, and move back to the Bay Area. I had not lived close to my biological family since I was 20, and I had serious reservations about how enjoyable that might be.

That spring, my beloved Bear Cub died. She was 16½, and had been my companion since 1981. She saw me through transition, and then began a slow decline. I called Alan during the last week of Bear's life, as he had lived with her for seven years and loved her also. The two of us buried her in Forest Park on March 6, 1998, and I felt a chapter in my life close. One of the few things that had been constant in my life since my mid-

twenties had been this wonderful tabby girl, and now she was gone.

I have noticed about my life that momentous events are often paired with each other. My Australian friends visited the same week I began hormones, in June of 1997. A year later, in June of 1998, the entire Australian chorus visited Portland for a week, and performed with all three Portland queer choruses on the evening of June 13. I quit my job at Equity Foundation a week before the concert. I knew I would be doing this eventually, to move away for graduate school, but timed my leaving the job to allow me to devote the entire week to the Australian visitors. I was the overall concert coordinator, and partially responsible for finding housing for the 50+ visitors. On the morning of concert day, I graduated from Portland State University. Commencement seating was limited for the first time in PSU's history because President Bill Clinton delivered the keynote address. I was not happy with the coincidence of these occasions, as it meant I could not devote my full emotional energy to either.

My mother and sister Susan made the journey from California for my graduation, and of course attended the concert that evening. I knew Alan was going to be there, 3½ years after beginning hormones, and I wanted very much for at least a few members of my family to have this object lesson. Alan was quite feminine as Judy, and had changed so much I did not think they would recognize him. They had not seen him since my 40th birthday party, in September of 1995, when he was still some months away from beginning hormones.

When he arrived at the concert, I brought him over to where my mother and Susan were sitting, and watched the stunned amazement on their faces as they finally

realized who he was, and who he had been. They would not have known him had I not brought him over to where they were sitting.

I don't remember much about the concert. I'd become very disillusioned about Bridges, and felt the group would never amount to anything as long as the current director remained. They would sound wonderful, but would not grow as an organization, and would continue to sound the same and perform the same kind of music forever. As a founding member, this saddened me. But if I learned anything from my transition, it was to remain true to what I believed and allow life to take me where it will without trying to direct the path. I reconciled myself to losing Bridges not because of my transition (I had shifted from alto to bass, with the full support of the group), but because I could not work with the current director.

In July, I received a postcard from my former therapist, Lois. She had left Phoenix Rising to start her own private practice and was advertising to former clients. My gut instinct that she'd never really understood me, or believed in my transition, was validated by the fact that she hand-addressed the card to "Ms. Reid Vanderburgh."

I spent some time carefully writing a response to this card, calling her on the fact that I'd done my real-life test right under her nose for a year and a half and yet here she was addressing a card to me as "Ms." This was not a mistake B.J. would ever have made. I suggested to Lois that she obtain some further education about transsexuals before attempting to work with another trans client. I never heard from her again.

That summer of 1998, I worked full time at an HMO, a temp agency job I despised, though they were impressed enough with

my work to offer me a permanent position. This job provided me with the wonderful reminder of how the corporate half lives, and how much I wanted to avoid working in that sector ever again. My resolve to attend graduate school was strengthened every 5:30 a.m. when my alarm clock went off.

What made the job bearable was the reason I was earning this money. My Australian friends were so grateful for the work I put into hosting them in Portland, two of them had offered to pay my airfare if I would visit Australia. I worked like a demon that summer to have sufficient spending money to be able to enjoy myself Down Under.

Though I was excited to go abroad for the first time (Canada and Mexico have never quite seemed "abroad" to me), I had a few misgivings about travelling with testosterone. I brought along my prescription in case I needed to justify having a controlled substance in my possession. My luggage was not searched, going either direction, so the question never came up. I was only gone long enough to need one injection, and was able to purchase a syringe at a pharmacy in Melbourne, without having to prove I needed it for a prescription medication.

Because I still did not have a driver's license, I had never bothered to change my official Oregon ID card from "F" to "M," though BJ had given me a letter for just this purpose. (In Oregon, a therapist's letter is sufficient for changing a driver's license, providing the therapist is on the DMV's list of "approved" therapists.) I never used the ID card, so did not see the point of spending \$15 to change the pronoun.

However, because I had no official ID that identified me as male, I had an adventure getting a passport that said "M"

instead of "F." I filled out all the forms, had my picture taken, and followed the appropriate procedure, which included sending the federal government my original birth certificate. I checked "Male" on the application form, and sent the whole packet off Express Mail. I did include a copy of my legal name change through the state of Oregon, so my passport would not say Nancy Vanderburgh.

As I left the post office, however, it occurred to me the passport officials were going to assign gender based on my birth certificate, regardless of how I filled out the passport application form. I went back to the post office, explained the situation to the clerk at the passport window, and asked her advice. She said they would most certainly go by what my birth certificate said, regardless of what box I checked on the application form.

I had a copy of my letter from Toby Meltzer with me, and after reading it, the clerk said I should enclose that with the other documentation. She also said she had no idea what would happen, or what my passport would say, as she had never had this situation come up before.

I apologized for her having to hunt through the outgoing Express Mail packages, and she laughed supportively and said, "That's okay. It's not like you've done this before! After all, you only change sexes once, right?" She found and opened the Express Mail envelope I'd prepared and gave me a new one, free. A few weeks later, I received a packet from the federal government, with all my original documentation in it, and a passport that said "M." No comment, no fuss, no bother.

In early August, I took off for Australia via the Bay Area. I had a free layover option, and chose to spend four days in the Bay

Area. I used that time to find an apartment, and on the second day, I rented a place. On the third day, I went to John F. Kennedy University for my admissions interview to the Graduate School for Holistic Studies. They accepted me. On the fourth day, I flew fourteen hours non-stop to Sydney. (This may not sound like a lot. Think of it as a three-movie flight.)

I fell in love with Australia, and felt as if I'd come home. I'd never realized before how depressing it is to live in a culture where "conservative" and "religious" seem inextricably linked. It was during this trip that the word "impeachment" was first mentioned in connection with Bill Clinton's affair with Monica Lewinsky. I was having breakfast in a café in Sydney one morning and saw a newspaper on the next table. The VERY large headline read "Impeach the President?"

My first thought was, "I wonder what Australians consider an impeachable offense," followed in a heartbeat by the thought, "They don't *have* presidents in Australia." With a sinking feeling of foreboding, I walked over to look at the article and was absolutely mortified to see a large picture of Bill Clinton on the front page. I thought, in a panic, "I've only been gone two weeks! What the hell is happening over there?!" When I read further and realized the impeachment talk was related to Monica Lewinsky, I wanted to slink back to my room at the YMCA and not come out again, not be seen abroad as an American.

I'd already realized that Australians regard the U.S. with an odd mixture of tolerant, amused contempt, and admiration for our audacious expansion, our constant pushing the envelope, and our talent for innovation. Regarding the Clinton-Lewinsky affair, the general opinion Down Under

seemed to be, "Thank God we got the convicts and you got the Puritans."

That sums up the difference between our cultures quite nicely. There is a streak of moralism in everything about which an American is passionate. Whether a person is far to the left or to the right, the tenor of the rhetoric retains the self-righteous moralism of the religious zealot. It was more than refreshing to be in a culture in which politics and religion are divorced, in which churches are progressive institutions which actually help people in need, rather than having political agendas of their own.

I enjoyed my time in Australia to such an extent, it still brings tears to my eyes to hear an Australian accent. While it did occur to me that I'd love living in Australian culture, I also know myself well enough to realize that I can't live anywhere but in the U.S. I don't want to leave the U.S. – I want to live to see it change. This may be a fool's hope, nevertheless I cling to it rather than despair that this country will always be as it currently is.

Having lived between genders, with all my identities up in the air for months on end, gives me hope that the country can change, too. I survived my own upheaval, and believe it takes a lot to completely destroy a person - or a community. To all who say, "You can't change the government unless you have a clear idea what to change it to," I say, "I think anarchy, shaking up the current system, is not such a bad idea." That, after all, is exactly what the American Revolution accomplished. We would still be a British Colony if we'd had to wait until we had a clear idea what system we were going to change to.

I rather wish Y2K *had* been more than a marketing hype. Most people live on autopilot, a luxury no longer an option for

me, and I'd love to turn off that autopilot for a time, to force people to really talk to each other about what they want their country to be.

I loved being in a country where even the most conservative politician would never dream of challenging the existence of their national health care system, the most popular government program in Australia. There was a sense of national pride and security that I've never felt in the U.S., and I think it is attributable in large part to their health care system. They have a safety net, and they know it. Conservative is a fiscal position, not a moral one, and the poor are not blamed for being born without wealth.

In fact, due to their convict heritage, Aussies tend to regard with suspicion people who are extremely wealthy. Anyone who tried to use their wealth as a basis for obtaining political power would quickly find this cuts no ice with Australians. While Aussies might admire a person who became wealthy through their own hard work, if that person tried to adopt an attitude of resultant superiority, they would quickly find their neighbors putting them in their place.

It is very difficult for me to envision any Australian community attempting to pass legislation restricting marriage as being between a man and a woman. As same-sex marriages are not legal in Australia in any event, an Aussie would see this type of legislation as unnecessary, and a waste of time and money. The moral imperative is just not there.

Upon my return from Australia, I had a little over a week to pack up and move. My close friend Marcy was going to drive a rental truck to California with me (I still had no driver's license at this point), and I bought her a plane ticket for the return

journey. I was excited and scared at the same time, much as I had been prior to my cross-country bicycle trip. I was going to be gone three years, which seemed an eternity at the time. Though I knew I would return to Portland, I also knew that after that length of time, nothing would be the same by the time I moved back. So, what else is new?

*Copyright © 2000
Reid Vanderburgh, MA
All rights reserved*